

PH Work Part 2 : in-depth case description

Case Study Template for Good Practice

As was already mentioned in the introduction paper there are 3 ways of finding and describing good practices:

1. To get in touch directly with **employers or companies** which are known for their efforts to promote job retention and the return to work of workers with chronic illnesses with special attention to those initiatives consisting in workplace health promotion strategies/activities. It may well be the case that there are only a few companies that explicitly pay attention to this subject.
2. To approach prominent vocational **rehabilitation service providers** which in close cooperation with companies contribute to high-standard re-integration policies for people with a chronic illness. The good practice may be described from both perspectives: company and service provider.
3. To describe interesting **projects or collective initiatives** of collaborating stakeholders (like patient/consumer organisations, insurance agencies, information campaigns, demonstration projects, award schemes for company good practice etc.). Of course the focus in these good practice studies is more on the aspects of the added value and societal impact of these initiatives, than on individual company practice.

It would be helpful to our research when you will include at least two of these three types of good practice.

Background information

1. Country and National Contact Office (NCO)

Slovak Republic
 NCO: Fedor Jagla, MD, PhD, Institute of Normal and Pathological Physiology, Slovak Academy of Sciences, Sienkiewiczova 1,
 813 71 Bratislava

2. Name and address of company (incl. contact details of informant) **(when the company is the main focus of the good practice)**

Železiarne Podbrezová, a.s. Kolkáreň 35, 976 81 Podbrezová, Slovak Republic

3. Name and address of the organisation/agency /service provider (incl. contact details of informant) which is primarily responsible for organising the good practice within companies **(when a service provider is the angle of approach)**

Dipl.Engn. Mária Niklová, director, HR Director Unit, address as above

4. Name and address of the organisation/agency (incl. contact details of informant) which is primarily responsible for organising the activities **(when a collective action project is the angle of approach)**

Centre for ancillary works and activities, address as above

5. General information about the company of good practice

Website	www.steeltube.sk , www.zelpo.sk
Sector (NACE) ¹	C 24.2 Manufacture of tubes, pipes, hollow profiles and related fittings, of steel
Number of employees	3 120

Description of main activities and relevant statistics:

Železiarne Podbrezová belongs to the oldest metallurgical companies in Central Europe. Metallurgical production in our region goes back to 16th century when processing of iron ore and production of precious metal started up. The region on upper side of the river Hron was extremely rich in raw materials. The company history dates back to 1840, when after decision of Austrian - Hungarian monarchs, the company construction started up. The first products were rails, steel sheets and iron bars. The production of tubes started in year 1930 when Mannesmann rolling mill was put in operation. The company has steadily expanded and it increased level of technological equipment to meet current global requirements. Nowadays the company is ranked among the major European producers of seamless hot rolled steel tubes, seamless precision cold drawn tubes, tubular products (tube cuts and bends), large diameter welded tubes and butt – welding fittings. In year 1992, the company was transformed into a joint

¹ Nomenclature statistique des activités économiques dans la Communauté Européenne.

See: http://ec.europa.eu/environment/emas/pdf/general/nacecodes_en.pdf

stock company. The company's products are designed for the automotive industry, power industry, mechanical engineering, for construction and pipe lines.

General information on good practice

6. Title of the case: Centre for ancillary works and activities

7. Summary

a) Aims and objectives (100 words)

The company manufacturing process required healthy people that are engaged in manufacturing professions at production mills or specific company workshops or sections. The good practise is to create a suitable working environment for employees diagnosed with any chronic illness that prevents employees to work in their former professions. The Centre for ancillary works and activities was established in order to find out appropriate occupations for pregnant women or employees with specific health problems that can be defined as chronic illness (for example: unfit to perform night work, etc.). The Centre was set up in year 1995. During the period of financial crisis and economic instability (it is global problem) the centre stopped its activities temporarily.

b) Specification of core activities and interventions (100 words)

The employer seeks appropriate professions for employees with specific diseases and medical recommendation for specific working positions. The above mentioned Centre was established in order to provide specific working positions. The positions were created with respect to personnel disabilities. The character, load and type of work are designed to suit worker health status and are individually adjusted. The activities include simple works such as lawn care in the company area, planting of flower beds and ornamental shrubs. Cleaning from snow the company streets and paths in winters.

c) Why in your opinion is this a good practice? (100 words)

Creating the Centre for ancillary works and activities shows signs of "good practice". It is an exceptional strategy of Železiarne Podbrezová a.s. The company found the way how to employ workers with disabilities due to chronic illnesses. Without the Centre, the employees with chronic diseases, pregnant women, and others disable employees could not continue to carry on their professions and they would be forced to quit working. The company deliberate strategy created jobs and protected employment. Due to joining the centre the employees were not expose to the stress situations, while coping with disease and then to stress after returning to the labour market. The main cooperative partners were physicians of occupational health services as well as physicians specialists who have evaluated health

of worker. Other important partners were Central Office of Labour, Social Affair and Family and Social Insurance Agency in Slovakia especially in cases of assessment and award a limited ability to work and then invalidity.

8. History of this good practice and the factors prompting its establishment (why and how did the good practice evolve?) (200 words)

The Centre of ancillary works and activities was established in the year 1995. There were two important factors – motives at the beginning..

The first motive was the need for more demanding working positions and tasks related to the technology modernization and the new elements in production that were in connection with the company product portfolio extension.

The second and the equally important factor was the social aspect. The region of the company's operation belongs to the regions with the highest lack of the employment opportunity; the company's management was looking for ways not to worsen the situation. The company's management wanted to improve situation gradually. The result of this effort was the establishment of the Centre.

9. Is a target group of the practice specified? (yes/no) If yes, please provide a brief description of the target group.

The target group is the employees of Železiarne Podbrezová a.s. to whom chronic diseases were diagnosed, pregnant women, employees with specific health limitations (night work not allowed, etc.).

10. Describe the core activities and interventions paying special attention to the four main topics: 1) company culture, health promotion at the workplace 2) coordination between professionals/agencies, 3) early intervention and case management and 4) self-management of the worker with disability (200 words)

There is the working team called "Occupational health service" provided by the company own employees. The team monitors the work environment and workers' health.

Monitoring of the work environment and working conditions is carrying out by a public health worker and two officers. The monitoring includes:

- assessment of the work environment, working conditions status, development of operating rules for all physical, chemical and biological factors that occur in the work process,
- identification of the chemical, physical, and biological hazardous factors according to the level and nature of work, the work environment and job classification into categories,
- monitoring of exposure of employees and working conditions to health damaging factors in terms of intensity and duration,
- providing advices and design of measures in order to protect the employee health. It is focused on the state of the working environment: its layout, its space and ergonomic design of the workplace, its ventilation, its heating, its lighting in terms of suitability to carried out work activities and used technologies,
- monitoring the sufficient quantity and quality of drinking water in the workplace, the sufficient facility for personal hygiene and food catering for employees if these facilities are operated by the employer,
- development of method for workers health protection, for improvement of working conditions, for disability analysis, occupational diseases and work-related diseases.

Health supervision is performed by physicians and nurse. Their job is to monitor and evaluate health status and health capability of ŽP a.s. and ŽP Group personnel. The capability is provided by medical examinations:

- before entering into labour-legal relationship (before starting to work) that may endanger the health of the employee or the health of others. Pre-admission preventive medical examinations (PPME) are carried out on each new employee who joins ŽP a.s.
- in connection with the work performance that may endanger public health due to exposure harmful factors at work and the work environment (for all persons working in the 3rd or 4th work class). Medical examinations, so called "periodic preventive examinations (PPE)" are performed at regular intervals.
- before changing the working position – the medical examination is carried out on employees who used to work in the position classified in the 1st and 2nd class and start to work in position in the 3rd and 4th class or vice versa, or transferred to another organizational unit within ŽP Group. Medical examination is in range of periodic preventive examination.

- After the end of the employment relationship (output medical examination - OME) - the fact that the final medical examination is documenting worker health after work that could have endangered the health of the employee or raised the occupational disease. The output medical examination is carried out in the range of periodic preventive examinations, emphasis on the examination of target organs - according to the specific pollutants that affected the employee at work and that affected his / her working environment.
- In emergency situations (special PPME) - major changes in the employees' health status, or significantly change of health risks or long-term sickness absence of any employee.

Organisational aspects

11. Is there a stepwise approach in your case? Please describe the different steps.

1. Employee performs his / her work at different mills or workshops.
2. Regularly attending medical examinations by doctors of "Occupational health service".
3. If changes in the health status of employees are observed, the employees are subjected to medical examination by doctors – specialists.
4. After confirming any change in an employee health status, the employee is invited for a personal interview where he / she is informed about possibilities for further progress
5. With the agreement of the employee, he / she is transferred to a special work unit. If the employee does not agree with the reclassification, he / she is leaving our company with appropriate severance pay under the current Labour Code and Labour Union Agreement.
6. He / she performs work that corresponds to his / her work capability in light of the current health
7. The employee health status is continuously monitored by doctors of "Occupational health service" and specialists.
8. The employee is in contact with the appropriate department of the Social Insurance Agency in Slovakia due to regular assessment of his / her health status or in order to obtain / not obtain the disability pension.

12. Who is involved in the case (employees, line management, board of directors, service providers, health professionals, etc.)?

The personnel involved in "Good practice"

Direct employee supervisors - masters, chief of units etc.
 Doctors of Occupational health service
 Head of production mills or workshops
 HR Director
 Employees of HR department
 Head of special work unit

13. Who is primarily responsible for good practice within the company (role/function)?

The centre for ancillary works and activities is part of the company the personnel section. The top manager responsible for its operation is Human Resource director. Direct responsibility has the Head of HR Department. The board of directors decides about the centre operates of stops its activities.

14. In what way are external service providers (public or private, public health care, vocational rehabilitation, etc.) involved in the good practice? (100 words)

- External physicians are involved in the initial phase of "good practice" – an employee meets a medical specialist in order to set of diagnosis, medical assessment, treatment setting and recommendation for his / her further occupation.
- Authorized employees of Železiarne Podbrezová a.s. as well as the employees themselves are in contact with the Department of the Office of Labour, Social Affairs and Family in order to assess the employment of people in the labour market.
- Competent departments of Social Insurance Agency in Slovakia - medical examiners who assessed the results of medical examinations relating to employee.
- Authorized employees of the Social Insurance Agency in Slovakia who deal with admission, assessment of any withdrawal of disability pension or other compensation.
- If required by the employee health status, the employee has the right and the opportunity for professional medical rehabilitation treatment in Železiarne Podbrezova facility or in other professional facility upon his / her personal choice.
- If required by the employee health status, the employee is able to receive a spa treatment in any spa facility, either fully or partially covered by the public health insurance.

15. In what way are stakeholders outside the company/organisation (not service providers) involved in the good practice?

All above mentioned external service provider involved in good practice acts in accordance with the valid legislation of the Slovak republic.

16. Are the responsibilities and competences of the stakeholders adequate for promoting sustainable employability? (Yes/no). Please include an explanation of their jurisdiction, training or qualifications in your response.

By establishment of the Centre, the company ensures the employment of its people who have expressed interest and accepted offered work. It also helps to keep the employment rate in the region in which the company operates.
Competencies of the Department of the Office of Labour, Social Affairs and Family are set by the legislation of the Slovak republic - all present labour market measures are focused on unemployed or job seekers. These measures do not have any direct impact on the company workers requalification or retraining. The company itself provides education, courses and training for its employees by own lecturers or by ordering external training suppliers.

17. What is the role of social partners or business representatives, if any (employers, trade unions, employee councils)?

The rights and obligations of subjects related to the health and safety are regulated by the Act. 124/2006 collection of Laws about the health and

safety (BOZP), other generally binding regulations, internal regulations of Železiarne Podbrezová, as well as the relevant Labour agreement. It is the internal regulations of the employer as well as the labour agreement that both regulate the rights of employee BOZP representatives, employee representatives, in general, as well as the obligations of the employer.

For example:

There is a review of health and safety system conducted twice a year, in collaboration with the occupational health service and employee BOZP representatives.

The employer is committed to provide to Labour Union once a month a report on the development of occupational accidents, twice a year analysis of occupational accidents and twice a year fulfilment of improvement program of BOZP and curative measures.

The employer is also committed to negotiate with VZO KOVO (Labour Union) draft of hazardous works and workplaces for the appropriate year before sending it to the competent authority for health protection. The employer is obliged to invite BOZP representatives of employees on health and safety meeting organized by the employer. The meeting agenda includes: BOZP, investigation the causes of adverse events - accidents, illnesses, damage of technical equipment, dangerous occurrences – situation near to accidents, near to disaster or near to crash - health and safety incidents.

Employee health and safety representative is entitled to:

- a) carry out on-site inspections in order to verify measures to ensure health and safety,
- b) require information on matters affecting health and safety at work from the employer, to discuss the received information with the labour union, with the department of occupational safety and health, with the social and health service. The BOZP representative is obligated to maintain confidentiality about information that are subjects of a trade secret,
- c) cooperate with the employer and make proposals for measures that help to increase the level of safety,
- d) require the employer to correct the deficiencies; if the employer unremoves the defects, which has been warned, the employee is authorized to give impulse to the competent labour inspectorate and the competent supervisory authority
- e) to participate on meetings organized by the employer on health and safety, investigate the causes of occupational accidents, occupational diseases and other incidents, measurement and evaluation of working environment factors,
- f) participate in the checks carried out by the Labour Inspectorate, or the competent authority or supervision of the employer and ask for information on the results and conclusions of these controls and the implementation of the measures imposed, measurements and evaluations,
- g) to submit comments and proposals to the competent labor inspectorate or to the competent supervisory authority during process of labor inspection or supervision within the employer.

18. In what way workplace health promotion (which in general is aimed at the general and usually healthy working population) is linked to the employability promotion of workers with a chronic illness or Disability Management?

The main priority of our company is to protect workers' health. We do not distinguish between healthy or unhealthy employees (already affected by any lighter or more severe disease) we protect all employees. Of course, the health protection is an effective prevention to stop undesirable consequences resulting from damage to health arising due to risk factors at individual workplaces (noise, dust, etc.). It is also effective prevention in occupational health practice (diseases and accidents) at work that might badly affect both employees' health, but also the employers' production process.

Results

19. Has there been any evaluation of the good practice? (Yes/no) (reference and 50 words)

During the existence of the special working unit - the Centre for ancillary works and activities, there was not evaluation, which would answer this question. Below please see a statistics on the number of employees at the Centre for ancillary works and activities:

Number of employees :

Year 2006, 31.12: 45

Year 2007, 31.12: 48

Year 2008, 31.12: 49

Year 2009, 28.02: 46

Please illustrate in relation to the following issues (50–100 words):

How is the good practice monitored? What information is collected? (50 words)

How is the good practice evaluated?

Have the costs and benefits of the good practice been monitored?

What were the results of the evaluation?

During the existence of the Centre for ancillary works and activities, there was not evaluation, which would provide relevant data.

20. Are there any incentives within the company/organisation, e.g., training facilities, rewards, bonuses, decrease in working hours, etc., to promote sustainable employability for workers with disabilities and chronic illness? Please provide details (150 words)

The employee repositioning to the easier and the more suitable working position within the company can be consider as the biggest incentive,

instead of dismissal as carrying out by many other companies. The easier work is adapted also other working parameters such are special work area, reduction of working time etc.

21. Are there any incentives from outside the company/organisation, e.g., insurance premium reductions, employer wage subsidies, etc., to promote sustainable employability for workers with disabilities and chronic illnesses? Please provide details (150 words)

In our Centre for ancillary works and activities, there were employees who have been granted reduced working capacity upto 70%. With this in mind, the company was not entitled to reduce its tax payment. There were not in practice any tools for employment support provided by the Office of Labour, Social Affairs and Family.

22. Are there any barriers within the company/organisation, e.g., lack of appropriate services or support, lack of suitable jobs, etc., to the sustainable employability of workers with disabilities and chronic illnesses? Please provide details (150 words)

If there are any barriers, they have always objective reasons. The reasons are often beyond the possibilities and influence of our company. The biggest barrier is now the global economic uncertainty and in this connection the lack of jobs (not only) for sick people. In principle, any company employs only as many workers as it necessarily needs, and for processes that are required. The centre ancillary works and activities already in its title ("... ancillary ...") shows its social aspect. Additional works, it is less important work in the company and their distribution among the other employees without health restrictions could be a particularly cost-effective.

But money is not the think attract us the most, it is the fact that allowed us to realize the idea of the Centre ancillary works and activities and this way contribute to reinforcement employment in our region.

23. Are there any barriers from outside the company/organisation, e.g., economic disincentives, inflexible social security provisions, etc., to the sustainable employability of workers with disabilities and chronic illnesses? Please provide details (150 words)

In this topic you may also go into the consequences of the economic crisis with respect to the employability of workers with a chronic illness.

24. To promote sustainable employability for workers with a chronic disease or disability a transnational campaign is proposed. What sort of information, material or support do you need to make such a campaign successful in your country?.(150 words)

The promotion of sustainable employability for workers with a chronic disease or disability has no legal support. It will be very good when the insurance companies could help the organizations /companies support financially selected programs for workplace health promotion.