



EXECUTIVE SUMMARY



OCCUPATIONAL SAFETY AND HEALTH



SPANISH STRATEGY

2023-2027



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DE TRABAJO
Y ECONOMÍA SOCIAL

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The 2023-2027 Spanish Strategy on Occupational Safety and Health (EESST) has been designed as a reference framework for the development of occupational risk prevention policies in our country, in line with international and European guidelines in this area, in particular, with the European Union (EU) Strategic Framework on Health and Safety at Work 2021-2027.

In order to achieve the greatest possible impact on improving occupational health and safety conditions and reducing occupational accident rates, the strategy focuses on those issues that can contribute most favourably to this objective.

Action will be taken on the most hazardous activities and on the risks that cause the most damage to the health of workers. A higher level of protection for the most vulnerable groups will be promoted, avoiding any type of violence or discrimination, the gender perspective will be integrated into OSH management and support will be given to small companies in the application of the regulations.

The lines of action have been aligned with other national strategies and plans in key areas such as mental health, gender equality, occupational cancer, road safety and climate change, among others.

The EESST 2023-2027 will be complemented and developed by the strategic programmes of each autonomous community, agreed within the framework of the social dialogue in their territories. It aims to achieve safe and healthy work environments that contribute positively to the health of workers, and to the progress of companies and society. It organises priorities into strategic objectives, all of which are interrelated and require the collaboration of all stakeholders, each within the scope of their competencies and responsibilities.





Improve the prevention of occupational accidents and diseases.

Priority: reduce health damages of workers.



Manage the changes arising from new forms of work organisation, demographic and climate changes.

Priority: anticipate and manage new and emerging risks.



3 Improve health and safety management in SMEs. A commitment to integration and training in occupational risk prevention.

Priority: Integrate OSH in SME's promoting greater involving of own resources.



Strengthen the protection of the most at-risk and vulnerable workers.

Priority: increase the level of protection for the most vulnerable groups.



Introduce the gender perspective in the field of occupational health and safety.

Priority: incorporate the gender perspective both in public policies and OSH management.



Strengthen the national safety and health system to successfully face future crises.

Priority: Strengthen institutions and coordination mechanisms.

OBJECTIVE 01

Improve the prevention of occupational accidents and diseases.

01



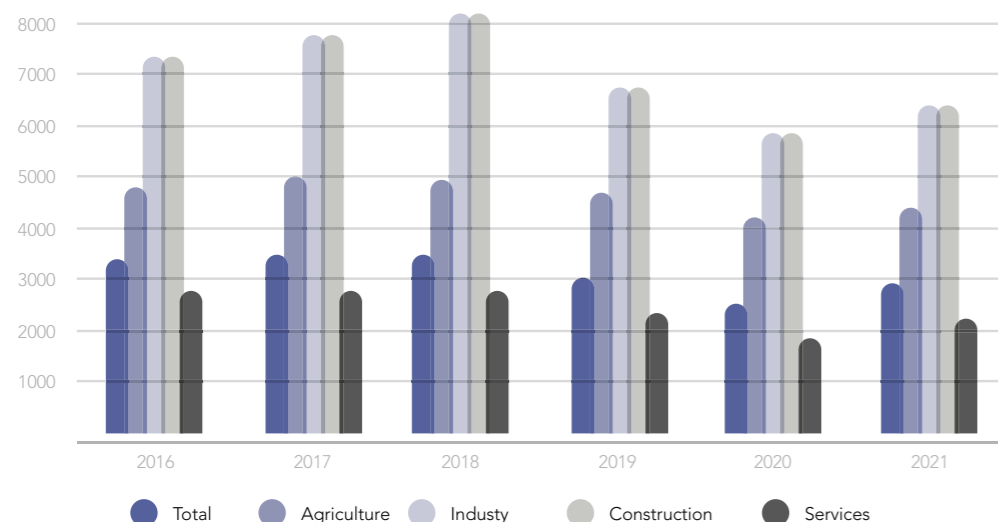
In 2015, there were 3300 occupational accidents per 100 000 employed persons. In the following five years, this figure has presented an increasing trend, a trend that began in 2012 with slight oscillations.

Physical overstrain continues to be the main mechanism for the occurrence of occupational accidents, accounting for 32% of them.

The incidence rate of fatal accidents during working hours in 2021 was 3.28 accidents per 100,000 working people. In recent years, the agricultural sector and the construction sector have alternated in terms of the highest number. Of the 611 workday deaths recorded in 2021, 40% were due to non-traumatic pathologies, the second leading cause of death was traffic accidents (16%), and the third leading cause was falls from heights (13%).

Regarding occupational diseases, the most representative are still those caused by physical agents.

The EU Strategic Framework on Health and Safety at Work 2021-2027 states that cancer is the leading cause of work-related deaths in the EU. According to the report on the burden of cancer attributable to work and its health cost in Spain in 2015 published by the Ministry of Health, it has been estimated that 8700 men and 850 women die annually from cancers due to exposures at work.



Incidence rate of accidents at work with sick leave during working hours by sector. Period 2016-2021.

Graphic 01

AREAS OF ACTION

- Promote the prevention of occupational accidents by focusing on the activities that account for the highest percentage of accidents, in all sectors of activity.
- Promote the prevention of occupational diseases through a better knowledge of their relationship with work, facilitating their identification, diagnosis and level of reporting.
- Promote and strengthen protocols for reporting suspected occupational diseases.
- Improve the prevention of cancer of occupational origin with the implementation of a National Agenda for the Prevention of Occupational Cancer, focusing on the reduction of exposure to carcinogenic substances. Lines of action aimed at early diagnosis and early intervention will be opened, as well as scientific and epidemiological expertise to reduce the incidence of cancer of occupational origin.
- Update the list of carcinogenic agents.
- Improve data availability and information quality.

ACTION LINES

1. Improved prevention of occupational accidents.
 - Investigation of occupational accidents and their causes.
 - Intensification of the actions of public administrations in terms of technical assistance, monitoring and control of compliance with regulations.
 - Support, information and awareness-raising actions to reduce occupational accidents.
2. Prevention of work-related diseases, with special emphasis on cancer of occupational origin.
 - Improved identification and diagnosis, notification and registration of occupational diseases.
 - Improvement of epidemiological knowledge of occupational diseases to promote a more informed society.
 - National Agenda for the Prevention of Occupational Cancer.
3. Implementation of actions to promote the prevention of workers being exposed to hazardous chemical substances and mixtures, including carcinogens: respirable crystalline silica dust, radon gas, reprotoxic substances and hazardous drugs.
4. Protection of workers from exposure to asbestos.

OBJECTIVE 02

Manage the changes arising from new forms of work organisation, demographic and climate changes.



The future of work is marked by the confluence of various factors and trends in the economic, environmental and social spheres, which are leading to changes in the business fabric, in labour relations and the organisation of work, as well as in the risks to which the working population is exposed. Public policies must be aligned to address them under a comprehensive approach.

Technological development and, particularly, digitalisation present opportunities from a preventive perspective, but can also give rise to new or emerging risks stemming from the use of the technology itself, from the organisation of work or from new forms of employment, with a greater prevalence of ergonomic and psychosocial risks.

The increasingly pronounced effects of climate change warn of the need to improve the protection of people from extreme weather conditions.

We are immersed in a process of environmental awareness, evolving towards a sustainable economy and a greater promotion of renewable energies and green jobs, which represent another challenge for preventive policies in the coming years.

Nor can the impact of the demographic component on the world of work be ignored. It will be imperative to design measures to ensure the health of a largely long-lived workforce and the extension of working life.



“
32% of the working population report being exposed to time pressures or work overload.

The effect of non-traumatic pathologies has a major impact on the incidence of fatal accidents, which is much higher in older worker.

Musculoskeletal disorders account for a high percentage of occupational morbidity: 31% of occupational accidents and 83% of occupational diseases.

”

AREAS OF ACTION

- Analyse regulations to identify possible shortcomings in terms of their applicability to new work models.
- Study emerging risks, identifying the most affected activities and groups, and promote actions to protect all workers equally.
- Support companies in the process of adapting to these changes through tools that facilitate the management of new risks, with special attention to those emerging from digitalisation.
- Insist on the objective of making companies aware of the importance of health care, promoting advanced health management models, with special emphasis on mental health.

ACTION LINES

1. Analysis of the regulatory framework to adapt it to new forms of work and to climate and demographic changes.
2. Promotion of research to understand the impact of technological, ecological, climate and demographic changes on the health of workers and to anticipate preventive actions.
 - Strengthening of research to understand and manage the challenges in the area of occupational risk prevention posed by the transformation of the world of work.
 - Improved information on psychosocial and ergonomic risk factors.
3. Surveillance and control of compliance with regulations.
4. Support to companies in the identification, assessment and control of risks arising from digitalisation and climate, ecological and demographic changes.
 - Development of criteria and tools to help companies, especially SMEs, to manage ergonomic and psychosocial risks arising from digitalisation and new forms of work.
 - Support, consultancy and awareness-raising actions to help companies manage the risks of climate, ecological and demographic transitions.
5. Actions to drive forward health promotion and health sustainability in companies.
6. Special action in mental health.
7. Labour, COVID-19 and post-COVID-19 conditions.



OBJECTIVE 03

Improve health and safety management in SMEs. A commitment to integration and training in occupational risk prevention.



A priority of this strategy is to help small and medium-sized enterprises (SMEs) improve occupational health and safety conditions through active leadership by all stakeholders. A firm commitment of employers to occupational risk prevention, which encourages the direct participation of workers in preventive activities, will favour the integration of prevention and the strengthening of the safety and health culture in the company.

Smaller companies often face the following challenges: economic limitation and smaller organisational structure; multiplicity of tasks performed by the same person; lack of functional link between the company and the external services contracted for the execution of preventive activities; difficulties in the application of regulations; insufficient adaptation of preventive actions to risks, and to the need for management and excessive administrative or documentary workloads.

The barriers must be removed that prevent the integration of OSH into company policy and to favour proportionate and efficient risk management.

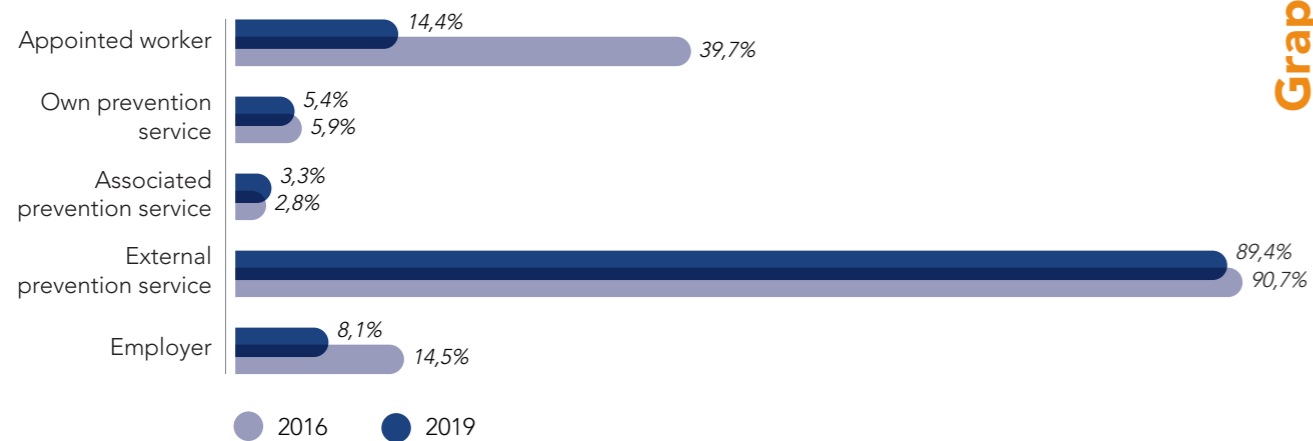
The education and training of management and employees, especially those who assume preventive functions, is critical to promote leaders who can identify and manage risks, as well as promoting the process of integrating OSH at all levels of the company.

AREAS OF ACTION

- Analyse and modify the regulations in order to facilitate their application, with the aim of improving and favouring the integration of OSH through a proper balance between own and external resources in the preventive organisation.
- Promote that the documentary obligations of small companies respond to their reality and have a preventive utility.
- Improve the tools to support companies in effectively managing risks according to the nature of their activity and risks, in compliance with the applicable regulatory framework.
- Improve the training and capacity building of employers and workers to effectively manage safety and health in their organisations.
- Promote, from the public administrations and with the participation of the social partners, the improvement of working conditions in small companies, promoting effective prevention, compliance with legislation and the transfer of knowledge and good practices in the sector.

Types of preventive activity management. Years 2019 and 2016.

Graphic 02

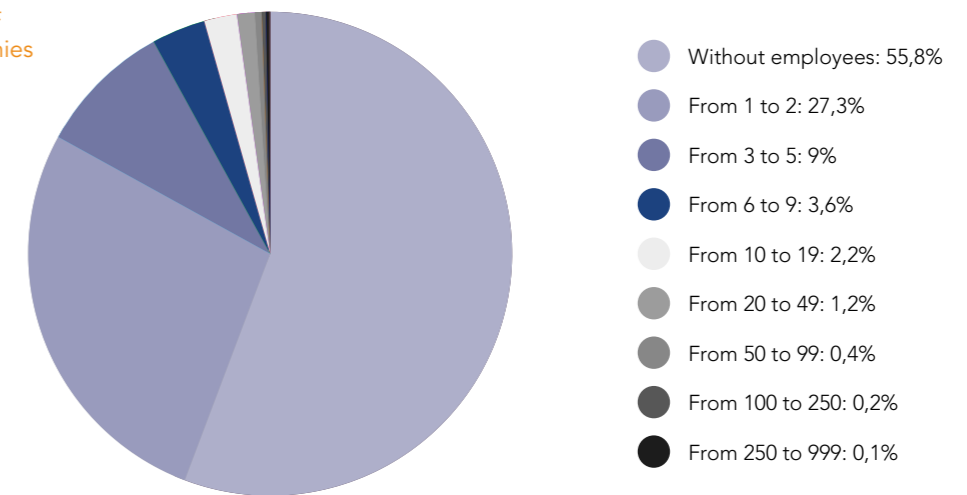


60% of serious and fatal accidents occur in companies with 25 or less employees.



Graphic 03

Distribution of active companies by size (2021).



ACTION LINES

1. Review of the regulatory framework with the aim of improving its application and favouring the integration of prevention.
2. Improvement of occupational risk prevention management in small and medium-sized companies.
3. Promotion of measures to strengthen training and own resources in SMEs.
4. Support to SMEs, with special attention to small companies, for the improvement of occupational health and safety conditions.

OBJECTIVE 04

Strengthen the protection of the most at-risk and vulnerable workers.

04



The characteristics of our population, which is increasingly aging and diverse, and the existence of groups of workers at greater risk that require special attention to guarantee their protection, are part of the challenges that preventive policies must face in the future of work. The aging of the population will accentuate the increase in activities related to the care and assistance of people who, moreover, have high accident rates.

The analysis of risks and the adoption of measures to improve health and safety conditions in the health, social and healthcare sectors must be continued and deepened, taking into account the gender perspective and other socio-demographic determinants. Among the latter, the strategy will consider those that could represent inequity scenarios.

Priority groups will be those formed by migrant workers and self-employed workers, the latter being the group to which preventive regulations apply only in certain cases, and which may require a greater scope of obligations to increase their level of protection, especially in the case of serious risks.

The strategy aims to value diversity in companies, contribute to the integration of all groups by fighting against all forms of discrimination, harassment and violence in the workplace, and promote inclusive workplaces that guarantee the health of workers.



1 out of every 10 working people performs professional activities related to caring for and assisting people.

*The incidence rate of "care at residential care facilities" is **triple** the rate observed in "health care".*

*Migrant workers represent **12%** of the employed population and **12%** of occupational accidents.*



AREAS OF ACTION

- Improve the protection of self-employed workers.
- Identify groups of workers with poorer health data and analyse the factors that make them vulnerable in order to incorporate occupational risk prevention in a cross-cutting manner in other public policies.
- Implement actions to raise the protection level of specific groups, especially in high-risk activities, such as workers in the health and social-health care sector and home care services, family home workers and migrants. In all cases, the focus is on both diversity and intergenerational cohabitation.
- Promote protocols for the return of workers who have suffered health damage to their jobs.

ACTION LINES

1. Improved protection for young workers and minors.
2. Improved protection for the self-employed.
3. Improved protection of workers in the health and social-health care sector and in the care sector.
4. Approval of guiding criteria for risk management in home care services and family home workers, especially regarding ergonomic and psychosocial aspects.
5. Adequacy of return to work after a prolonged period of sick leave.
6. Improved protection of disabled workers.
7. Improved protection for mobile and migrant workers, including seasonal workers.

OBJECTIVE 05

Introduce the gender perspective in the field of occupational health and safety.

05



We find ourselves in a society sensitised to the need to eliminate gender gaps. The field of occupational health and safety is no stranger to this reality. It is necessary to advance in the knowledge of health risks and damages from a gender perspective and to spotlight risks that may not be sufficiently valued or even considered, both in feminised and masculinised activities.

There is evidence that the incidence of occupational accidents and diseases is higher in women than in men in certain occupations or activities and that they are at greater risk of suffering certain health damages associated with specific working conditions.

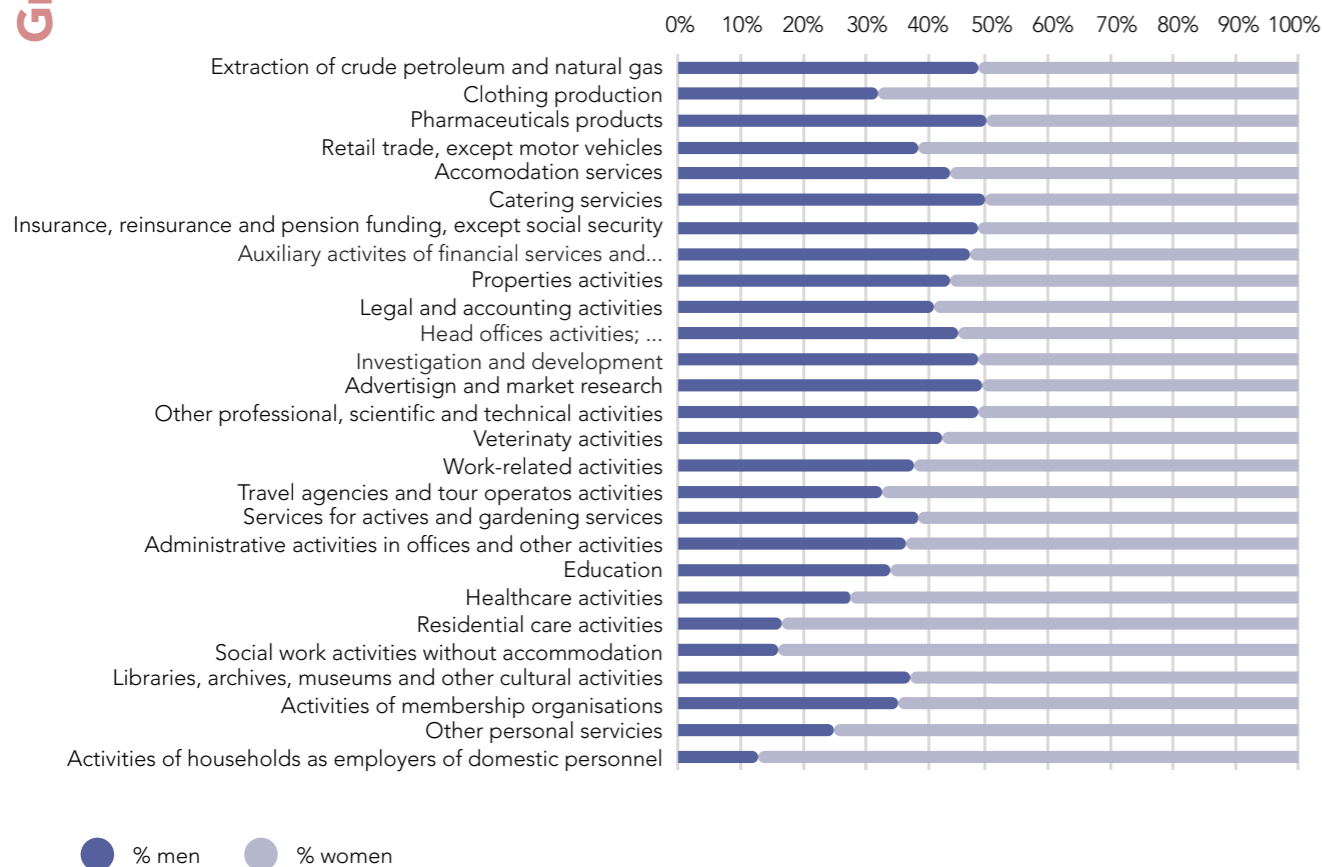
Little progress has been made in understanding the causes of the differences between men and women detected by breaking down the data by gender (role differences in terms of job assignments, greater or lesser awareness of risks, biological factors, imbalances in domestic work, etc.).

Changes in work organisation models, as well as demographic evolution, may lead to new biases in terms of the activities performed preferentially by men or women, as well as in the risks to which they are exposed, which may be exacerbated by the influence of other factors more closely linked to people's family or private spheres.



“
In 2000, women accounted for 38% of the employed population, rising to 46% in 2020.
In 2020, men presented an occupational accidents rate 2,2 times higher than women.
”

Graphic 04 Division of activities in which the percentage of employed women is higher than that of men. Total employed



AREAS OF ACTION

- Update the regulatory framework to incorporate the gender perspective in preventive actions, promoting the elimination of inequalities between men and women in all public policies.
- Foster the incorporation of the gender perspective in data collection and information analysis processes, as well as in studies of occupational health and safety conditions to improve knowledge of exposure to occupational hazards and damage to women’s health.
- Promote the integration of the gender perspective in all preventive disciplines when assessing risks and establishing priorities for action.
- Promote action on gender-specific risks, with special attention to feminised and precarious activities.
- Raise awareness of the need to integrate the gender perspective in a real and effective way.

ACTION LINES

1. Review the regulatory framework to integrate the gender perspective.
2. Gender differentiation in the processes of data collection and analysis of information on health conditions and health studies.
3. Cross-cutting incorporation of the gender perspective in the management of occupational risk prevention.
4. Awareness-raising actions on the need to integrate the gender perspective across the board in preventive policies.
5. Surveillance and control actions.

OBJECTIVE 06

Strengthen the national safety and health system to successfully face future crises.



Moving towards a society in which work does not pose a risk to health is a task for all of us. There must be a national occupational safety and health system with strong institutions and agile and efficient coordination and intervention

Both the public authorities and social partners can and must become aware of our role and act to:

- Value occupational risk prevention as a key feature for economic and social progress.
- Deepen coordination mechanisms between public health and occupational health and safety authorities.
- Integrate safety and health into public policies.
- Strengthen and optimise the human resources available for proper development of competencies and functions.
- Strengthen collaboration and participation, and establish alliances to achieve common objectives.
- Modernise the regulatory framework to adjust it to the reality of working environments and make it applicable to all companies, guaranteeing equal protection for all workers.
- Ensure effective compliance with regulations, providing support and technical assistance.
- Leverage technological development and innovation to improve prevention, promoting proactive and participatory risk management.



AREAS OF ACTION

- Strengthen and develop coordination mechanisms and joint strategies between public administrations with competence in occupational health and safety and health and labour authorities to improve preparedness for future health crises.
- Promote the consideration of the effects on the health of workers in all public policies.
- Promote leadership in the improvement of occupational health and safety conditions as the main lever to achieve a true culture of health.
- Improve the resilience of the national occupational health and safety system by focusing on the training and capacity building of experts and professionals, employers and preventive resources of the companies, prevention officers and workers for adequate risk management.
- Promote the increase of professionals with competence in prevention, paying special attention to specialists in occupational medicine.
- Strengthen the role of social partners and institutional participation bodies.

ACTION LINES

1. Establishment of institutional coordination mechanisms for future crises.
2. Development and strengthening of coordination mechanisms to approve uniform application criteria and optimise the use of public resources: Ministry of Health - Autonomous Regions (CC.AA, in its Spanish acronym); National Institute of Occupational Safety and Health (INSST), OA, MP – CCAA.
3. Strengthening of institutions dedicated to occupational risk prevention: INSST, technical bodies of the autonomous communities, State Labour and Social Security Inspectorate (ITSS), National Commission on Occupational Safety and Health (CNSST), mutual insurance companies collaborating with Social Security System and OSH services.
4. Improvement of training and education in occupational risk prevention, with special attention to preventive resources.
5. Strengthening the role of social partners.
6. Strengthening of collective bargaining.



SPANISH OCCUPATIONAL HEALTH AND SAFETY STRATEGY IMPLEMENTATION

The CNSST is responsible for the promotion, monitoring and evaluation of this strategy. To this end, a working group has been formed, which will be chaired by the Ministry of Labour and Social Economy, through the INSST.

The implementation will be carried out through two action plans, which will include the agreed measures to be carried out in the periods 2023-2024 and 2025-2027.

