Spain: preventive services well below par

No bother

At a trade union meeting on workplace health in Barcelona, a trade unionist safety engineer showed me a letter sent by a big preventive service to a car industry subcontractor firm. The letter began by reminding it of its statutory duty to evaluate risks and the criminal penalties for failure. It then offered its own services to carry out an evaluation in conditions which would cause minimal disruption to the proper running of the firm, and said that its technicians could inspect the workplace on a Sunday when the plant was shut. All for a reasonable fee... In the discussions, one labour inspector remarked that most risk assessments gave little practical information about firms, but that the external preventive service that had drawn it up was easily recognized from the amount of stock phrases and particular page layout generated by the computer program used.

he poor coverage of workers by preventive services in Spain is revealed by different surveys.

The Navarre workplace health analysis¹ reveals that 21% of workers in this Autonomous Community are covered by company services and 6.7% by external services as at 31 December 1999. Furthermore, only three of Navarre's 8 accredited external preventive services (covering 273 firms employing just over 10,000 workers in all) had sufficient staff to do their job properly.

A more recent nationwide survey done in 2001 looks at the situation in workplaces with the highest reported work accident rates². The survey drew its sample for study (approximately 4,000 firms) mainly from firms employing between 10 and 250 workers, i.e., workplaces which under Spanish law must have preventive services. 30.8% of these firms had not set up a preventive service, and in 3.2% of them, the employer performed its functions. Most of the firms with no preventive service are found in the service and building industries, with a particularly high incidence among firms employing fewer than 10 workers. The most frequent solution is to sign up to an external preventive service (55.4% of firms surveyed), which in most cases has led to firms abdicating their responsibilities - only 2.4% of firms have both a staff health and safety officer and membership of an external preventive service. Looking at the duties performed, this survey bears out the trends identified by the national surveys of working conditions. Health surveillance (60.7% of firms surveyed)³ topped the list, while barely more than 50% cited risk assessment. What is more, only a good third of firms (34.6%) had a prevention plan, while worker training was provided by only 30.5%. Even among firms with more than 250 workers, less than half had a prevention plan. There is a close correlation between prevention activities being carried out and the presence of workers' health and safety reps - of firms with no preventive provision, 76.2% also had no prevention reps. These are highly concentrated in the service sector - especially the hospitality industry - and the construction industry. Of firms that had undertaken all the prevention activities covered by the survey, 76% had prevention reps. Most of these were firms with over 50 employees.

But even where prevention activities were organized, they were often of dubious quality and arguably most concerned with simply "going by the book". The Asturian Institute of Workplace Health found that 45% of risk assessments done were incomplete. Of

inspected workplaces in Navarre, only 17.5% had carried out a satisfactory assessment; nearly 40% had an inadequate one or none at all; in 13.5%, it had not been updated; and in 18% of cases, it did not cover all jobs. A statement by the Navarre parliament on the rising toll of workplace accidents stressed the failings of preventive services and said that in many cases, the prevention plans drawn up were designed only to achieve paper compliance and were neither followed-up nor updated⁴. A report by the government of Cantabria takes a similar tack, noting that one cause of the problem is that risk assessments are done by external preventive services with no proper information or coordination with the firms that they cover.

The situation is best summed-up by a recent trade union evaluation of the quality of external preventive services⁵:

"An underdeveloped culture of prevention, the failure of either the Mutuas or preventive services to set strategic priorities and the dependence of the other specialized agencies on employers, coupled to employers' failure to be proactive has produced a general consensus on the status of workplace risk prevention in Spain, characterized by the following:

- the outsourcing of prevention activity has led to prevention being seen as a product and an activity divorced from the company, requiring neither commitment nor involvement from the employer;
- poor quality, officialistic prevention activity. Little
 urge to find out in order to act properly and make
 the changes required to working conditions... That
 is reflected in particular by purely safety-focused
 risk assessments that disregard psychosocial, toxic
 or ergonomic risks; health surveillance that is
 unconnected with evaluation or prevention planning and limited to general health checks which
 do not cover occasional but regular activities connected to the main activity; prescriptive, routine
 training not relevant to the specific job; general
 preventive recommendations so as not to clash
 with the employer;
- little worker participation and involvement. Information supplied by workers is not used as an input to, or to evaluate the results of, prevention activities and prevention management. Workers are not recognized as able to come up with ideas, and they are not given training.

There are two issues of responsibility. For employers, it is about democracy and preserving their power in the firm. For technicians, the problem is a technocratic approach to prevention".

¹ Instituto Navarro de Salud Laboral, Diagnóstico de Salud Laboral en Navarra, Pamplona, 2000.

² INSHT, *Plan nacional de seguimiento de empresas con alta siniestralidad,* Madrid, 2001.

³ Many surveys found no real link between health surveillance and working conditions. See in particular, N. Moreno, P. Boix, *Vigilancia de la salud de los trabajadores/as*, Madrid, 2000.

⁴ Declaración política sobre siniestralidad laboral en Navarra, *Boletín Oficial del Parlamento de Navarra*, No. 36, 31 March 2001.

⁵ J. García Jiménez, report presented to a conference organized by the Greek General Confederation of Labour and the TUTB, Piraeus, April 2003 (slightly abridged translation).