

# For sites : reporting of occupational diseases

Go to : [Challenges for OD reporting](#)  
[Recommendations to Sites for Solvay's internal reporting](#)  
[Group indicator for occupational diseases](#)

## What are we talking about ?

Reporting occupational diseases (ODs) to the local competent health bodies and to H&S OH corporate is one of the Group requirements in occupational health described in the procedure [IND-HSE-OH-08-PRO](#) (requirement 3.2.6).

### 1. Occupational diseases reporting to the local (country) competent authority

**Most countries have a legal system for occupational diseases (ODs) recognition with (or without) possible compensation.** This system is generally specific to ODs. However in certain countries it is included in a global system with work-related injuries ; or elsewhere ODs are assimilated to all other diseases (not work-related).

Where an OD recognition system exists, the following steps are commonly described :

▶ After a disease has been diagnosed and its possible link with occupational activities has been identified, a **declaration** (i.e. a notification or claim) has to be made **to the local health body** in charge of the decision for recognition as an occupational disease (OD). *Declaration* can be made by either the employee (or retiree) or their doctor, or the occupational physician or the employer.

▶ The assessment phase may last several months (sometimes more than one year) and leads to a *decision of recognition or rejection*.

blocked URL In most countries, recognized ODs are subject to *compensation*.

The compensation mode is country specific.

### 2. Solvay's internal reporting of ODs



*Procedures for declaration, assessment and compensation are country specific. Depending on the country, declarations are made to a public national or regional body, or to the employers' liability insurance company, or to a collective insurance fund, or to a private/ independent body. In some countries these bodies are also in charge of compensation, in others they are not. Some countries have no dedicated system for OD monitoring or no provision for compensation.*

*In many countries, the legal recognition of an occupational disease is made on basis of a mixed system founded on the one hand on **presumption**, if the disease meets criteria included in the **official/local list or tables** which describe the recognized (groups of) occupational diseases, agents or occupational activities. On the other hand, in absence of such list/tables or if the disease does not meet the criteria included in the list/tables, the recognition is founded on **medical evidence** of the occupational origin of the disease (proof is required). In some countries only one of these recognition systems is applied ; in some others no distinction is made between occupational diseases and other diseases.*

Local health teams are encouraged to give attention to any event concerning Occupational Disease cases, beyond those reported to local competent authorities, and to report them. This includes the early observation of health impairments possibly linked to working conditions, as well as the tracking of reported cases (ongoing procedures for recognition) or cases which might have been recognized without Solvay being informed.

(Solvay Integrated Annual Report 2016 – Extra-financial statements – GRI content Index pg 76)

**Besides declaration of possible occupational diseases to local competent bodies**, the Site physicians or medical staffs must support the Site HSE or HR managers in the collection of any information related to diseases linked to current or past activities/exposures at the site.

For the [reasons already described](#) on the introduction page, **Sites are expected to report to IND-H&E OH** any [recordable OD](#), i.e. new OD diagnosed, or declared to the local health body, as well as recent progress in ongoing OD cases (declared in previous years), i.e. new developments or decisions in ongoing procedures (e.g. recognition, rejection, appeal, lawsuit, etc.), but also diseases suspected to be work-related.

As described in the guideline on reporting OH indicators ([IND-HSE-OH-01.01-GUI](#)), if a Site has got new information on ODs, **two steps** have to be completed **for internal reporting to H&S**:

as soon as they are aware of, the Site provides the [Regional medical Coordinator or Country OH Referent](#) with detailed information as described in the below

recommendations,

during the yearly H&S reporting campaign (each year in December), the Site gives a positive answer to the item related to ODs in the H&S reporting Tool PURE (OH delegation form).

## Challenges for OD reporting

International institutions (e.g. International Labor Organization, ILO) or national/local bodies (e.g. Eurogip in France), generally admit that reporting on ODs remains a difficult exercise, resulting from unequal and incomplete retrieval of data. This is mainly due to differences in local legislations but also in perceptions linked to culture and local occupational health practices.

At Solvay level, these observations are similar.

The most recurrent causes of **underreporting** are listed in the document on the right ; some of them have also been identified in the framework of OD reporting within the Group.



**For Sites, it is key to know the OD system in force in the country and identify potential weaknesses in data retrieval in order to improve the quality and exhaustiveness of collected data. For this purpose, the actors in charge of reporting are encouraged to track information on ODs through all possible ways available locally.**



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## Recommendations to Sites for Solvay's internal reporting

### Who is in charge of data collection and reporting at site level ?

Depending on local organization and in accordance with the local regulations, the **site HR or HSE manager** is in charge of tracking recordable ODs (see definition below) and reports the related data to the [Regional medical Coordinator or Country OH Referent](#), if any) on a regular basis or at least at the end of each year. The person identified to carry out this task can always count on support from these medical contacts.



### OD cases from which (ex-)employees ?

Solvay employees, active or retired,

former employees that have left the company to another employer ;

former employees from sold or closed Sites, or dissolved subsidiaries

### What are recordable OD cases ?

- ✓ a new disease suspected to be work-related, which has not been declared/notified to an official body,
- ✓ a new disease identified as being of occupational origin, which has been declared/notified to the official body for recognition,
- ✓ a new event related to a case already declared, i.e. any new development in an ongoing procedure for recognition by the local official body:

- decision of recognition as OD (even if the financial consequences are not borne by Solvay),
- decision of case's rejection,
- appeal on a decision, or lawsuit etc.,
- a disease ultimately recognized (*after initial rejection* by local authorities) following a claim submitted to the courts or another local jurisdiction
- the death of the employee if caused the OD



✗ except events that occur later after recognition of an OD, like relapses or worsening, because they don't change the initial decision of recognition nor constitute elements of a new OD case.

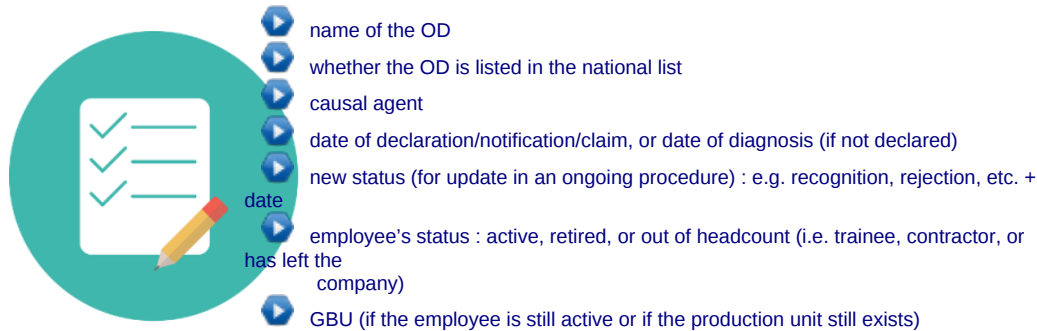
✓ a disease linked to former exposure(s) with a previous employer (thus prior to the employee's activities at Solvay), only if they are actually considered as being attributable to the Group,

✓ any "old" OD case brought to the knowledge of Solvay several years after its declaration to or recognition by the local body

### Information to be reported for each OD case

Communication of employees' names is never requested, in order to comply with confidentiality provisions in most countries' regulations.

For each OD case, ideally, the following data should be collected and communicated to the Comed :



 The Medical coordinator of your region

 Occ. diseases homepage

 OH homepage