

Occupational Safety and Health Support Project for Social Welfare Facilities

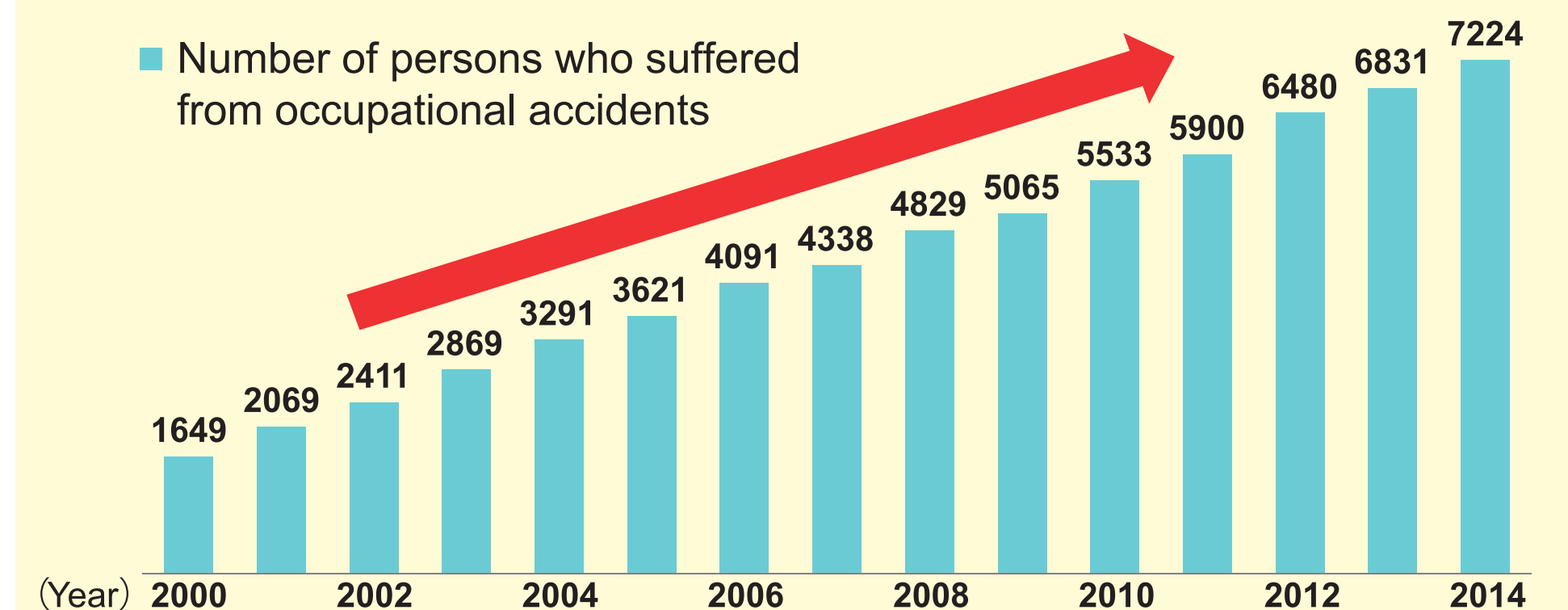
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Introduction

In Japan, the shift in labor force to the tertiary industries that is causing high ratio of occupational accidents at retailers, restaurants, health and hygiene facilities, and in other tertiary industries year by year. Among other things, more employees are expected to enter the field of medical and nursing care services, due to growing demand in our aging society. In these service industries, workers often fall due to

slipping or tripping, or suffer back pain caused by nursing care which accounts for the majority of accidents. Especially, social welfare facilities underwent a rapid increase in the number of employees, doubling in the past decade. The increase ratio of accidents much exceeded the increase in employees, by nearly 2.0 times in the past decade. **Figure 1** shows the shift of occupational accidents at social welfare facilities.

Fig. 1. Shift of the occupational accidents (four days or more absence of working day) in social welfare facilities.



Methods

Under such circumstances, the Ministry of Health, Labor and Welfare has recently started the Occupational Safety and Health (OSH) Support Project for the tertiary industries. As a part of this project, JISHA is holding free of charge seminar for social welfare facilities at each prefecture in Japan by the government subsidy. This seminar provides comprehensive safety and health education, risk assessment, OSHMS (Occupational Safety and

Health Management System) and the introduction of nursing care equipment to prevent back pain at work with participants.

This seminar started from September, 2014 and more than 3000 people participated in it by this end of March. We had implemented a questionnaire survey about prevention methods for occupational accidents and effectiveness of this seminar.

*OSH: occupational safety and health

Results

The questionnaire survey was implemented to all the seminar participants (3118) and 2997 replies were collected (collection rate 96.1%). According to the replies, 39.6% of answeres who took the seminar belong to the small-sized social welfare facilities (less than 50 employees).

In Japan, "Guidelines of measurement for preventing back pain at workplace" was revised in 2013 by the Ministry of Health, Labour and Welfare and it includes the sentence that holding up the patient by human power is prohibited. **Figure 2** shows the result of survey: Whether or not the answeres knew the guidelines. Approximately the 56% of answeres who work for the large-sized facilities (more than 300 employees) replied "yes". On the other hand, 76% who work for the small-sized facilities (less than 50 employees) did not know the guideline itself.

The survey was conducted as well to question how they effort to prevent back pain at their workplace. As an example, whether or not equipment such as lift (**Photo 1**), standing machine is used to reduce a load on the back is questioned and the results are shown in **Fig. 3**. The larger the



photo1

facilities become, the more equipment is used. Likewise, as the size of the facilities becomes large, the more effort to prevent back pain is done

Fig. 2. Rate of answeres who knew the Guidelines of measurement for preventing back pain at workplace (by size of facilities).

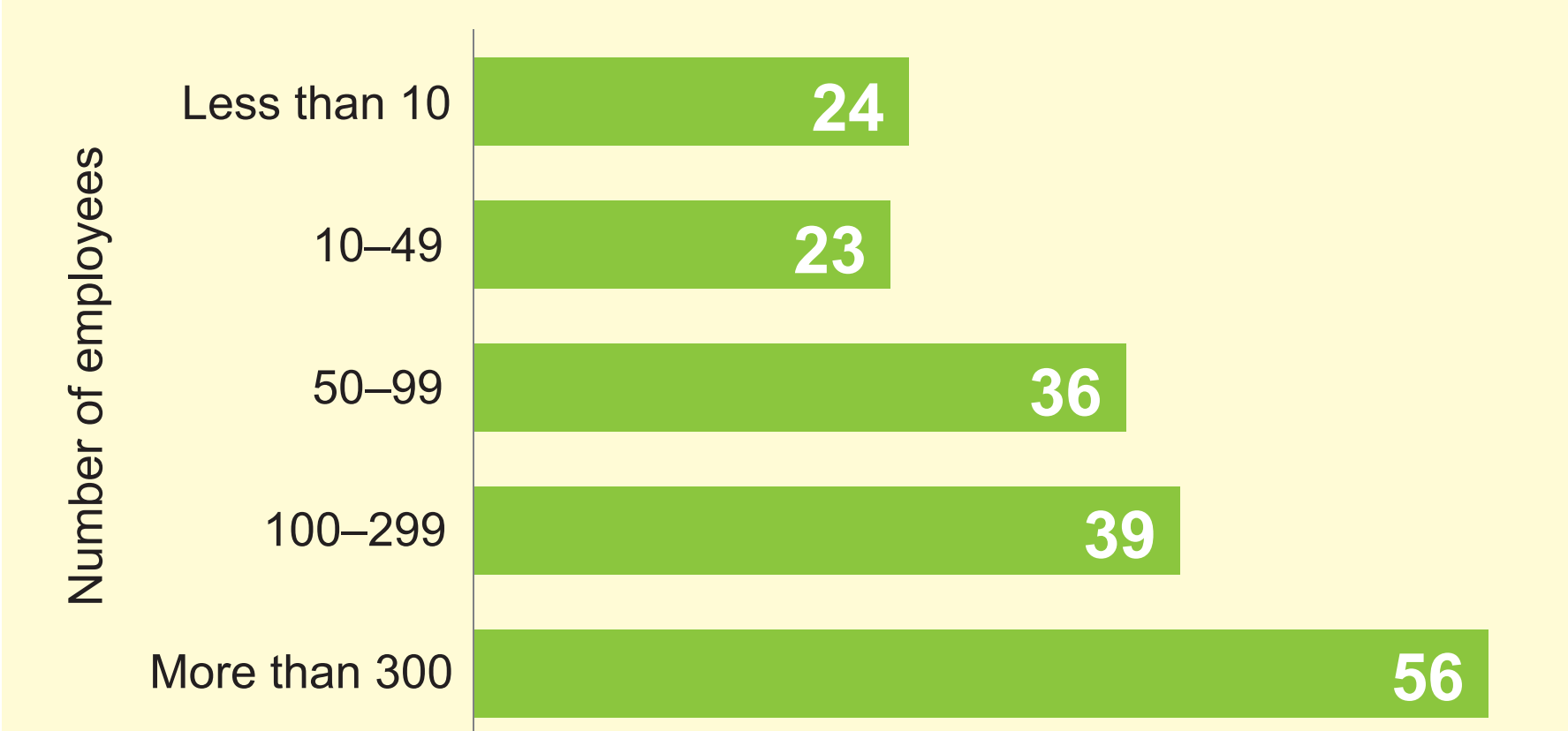
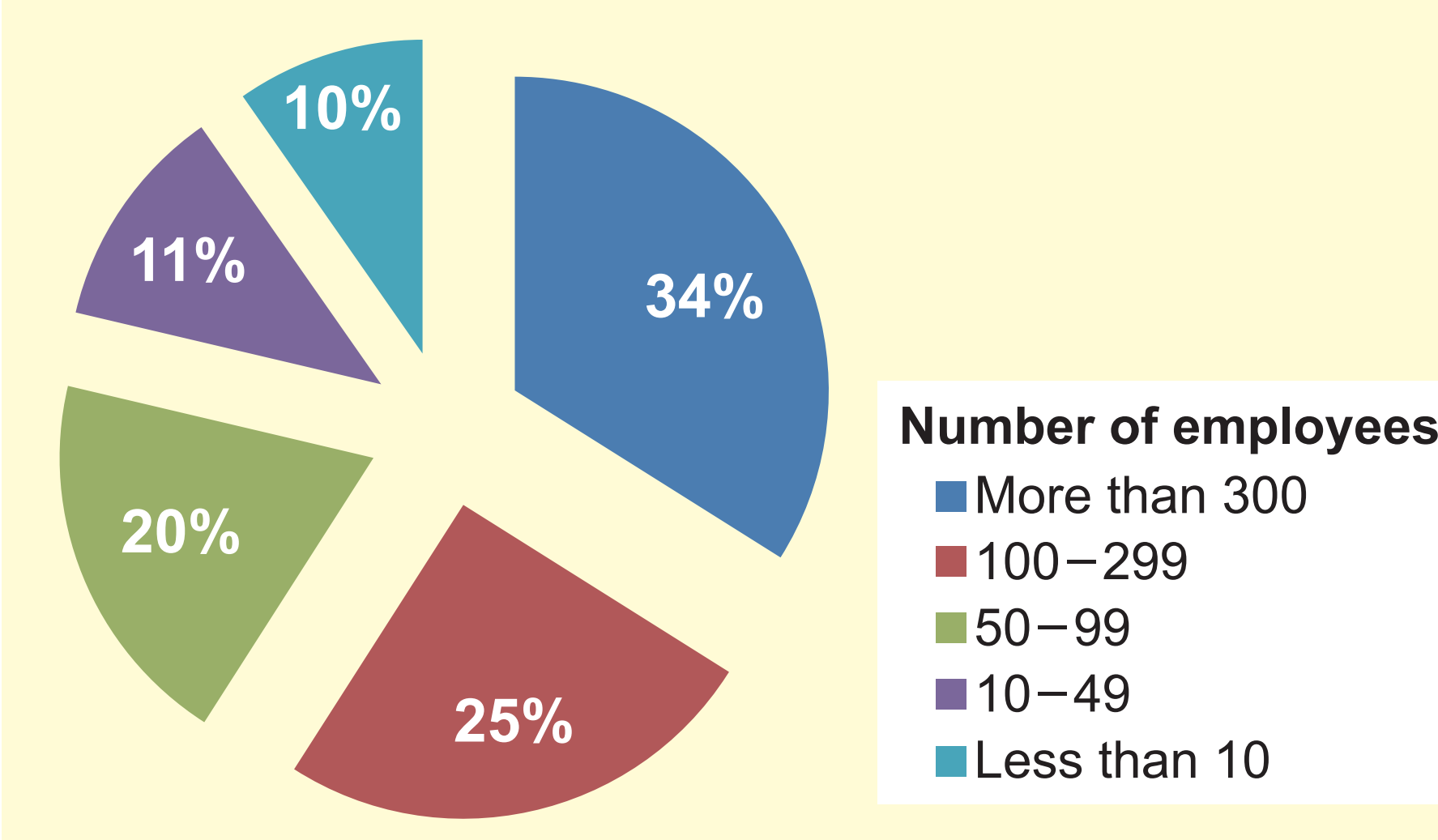


Fig. 3. The ratio of facilities using nursing equipment (by facility scale)



(**Table 1**) On the other hand, "no countermeasures are taken against back pain" was the reply from the answeres who work for small-sized facilities: 47% (less than 10 employees), 33% (10-49 employees), 20% (more than 100 employees), respectively. It shows that the smaller the size of facilities becomes, the later the countermeasures are taken.

96% of answeres replied that the seminar was meaningful.

Discussion

The results of survey show that the "Guidelines of measurement for preventing back pain at workplace" is not well known, in particular, among small-sized social welfare facilities although it is government measures. Accordingly, the countermeasures against back pain tend to delay. The followings are considered to be the reasons:

1. There are no OSH specialists for back pain because the Japanese act does not impose obligations to place health supervisors or industrial physicians.
2. The social welfare facilities in Japan have been suffering from chronic shortages of personnel. The small-sized facilities in particular have no choice but spare time for everyday nursing care and have little opportunities to get information on back pain.
3. Due to economic reasons, the small-sized facilities cannot afford to purchase nursing equipment. They do not know subsidy program in Japan.

To solve the problems, dissemination of information on practical countermeasures against back pain and subsidy program for purchasing nursing equipment to the small-sized facilities in particular is needed. JISHA is planning to develop effective promotion in accordance with domestic organizations for social welfare facilities.

Table 1. Countermeasures against back pain (by facility scale)

Countermeasures being taken	Number of employees (%)				
	Less than 10	10-49	50-99	100-299	More than 300
Nursing equipment	9.7	11.6	19.6	25.1	33.9
Sliding sheet/board	4.1	21.2	34.2	42.3	45.2
Keeping working posture well	15.2	23.2	27.5	34.5	37.1
Preparing manuals	9.0	10.2	15.7	20.5	16.1
Instruction for preventing back pain	10.3	16.1	27.3	34.3	38.7
Practice of health checkup to prevent back pain	2.8	14.2	24.8	28.2	22.6
Practice of exercise/stretching	7.6	13.9	21.9	27.8	30.6
Other countermeasures	9.0	7.2	6.2	8.2	11.3
No countermeasures	46.9	33.1	19.5	15.1	16.1