# COUNTRY REPORT SITUATION ANALYSIS OF OCCUPATIONAL HEALTH

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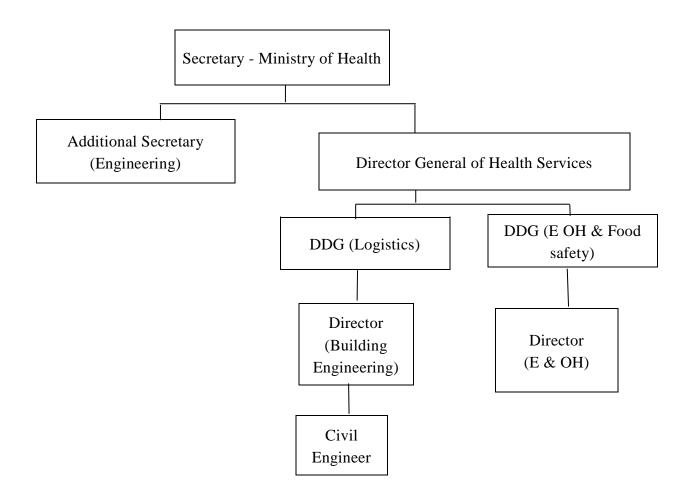
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## **Organization Chart (Only related sections)**



## Working experience

Organization	Country	No of Years	Job Description
Ministry of Health	Sri Lanka	12	Client representative in construction project management activities
State Engineering Corporation of Sri Lanka	Sri Lanka	1	Site Manager in a construction site
Samson group of companies	Sri Lanka	3	Client representative in construction project management activities P a g e 2   20

## Introduction

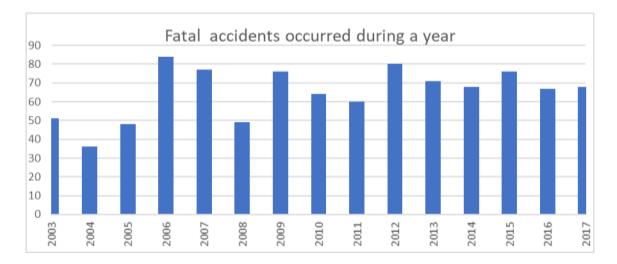
Sri Lanka is basically an agricultural based country and moving towards industrial sector since past two decades. There is also a considerable increase in construction industry which is observed within last two decades compared to the past. Sri Lankan labor force counts approximately 8 million out of total population which counts to 20 million. Large segment (28.7%) of the currently employed population is engaged in agriculture, forestry, and fisheries. 18 percent engages in the manufacturing industry.

Industrial promotion zones have been established in different parts of the country since 1983 to encourage foreign investments and produce goods for the export market. These industrial zones have enabled many Sri Lankans to find employment in which labor counts for 300,000. Board of Investment (BOI) is the governing authority of industrial zone.

It is estimated that about 60% of the country's labor force is employed in the informal sector, a sector which is more difficult to regulate and monitor. Hence large numbers of them function without any supervision from the health and safety authorities. With the introduction of OHSAS 18001 certification, some of the large-scale industries have resorted towards adopting good health and safety practices. The same situation prevails in majority of the industries setup under the BOI. However, a large proportion of the industries which are small and medium sized do not pay due attention to the practice of occupational health and safety.

The employment rate has been over 90 percent for both sexes within last ten years and higher for males than females. With higher rate of female who are engaging in employment will lead to social issues which are not counted in OH policies. Increasing aging population and increase in non-communicable diseases have also arisen as a new challenge in the 2020.

# Situation Analysis and challenges



#### **Occurrence of labor accidents**



The highest percentage of accidents is concentrated among skilled agricultural and fishery workers (34.2%) and plant and machine operators and assemblers (24.7%) both of whom are engaged in machinery use.

The responsibility of implementing and enforcement of legislations pertaining tooccupational health and safety practices in the country lies chiefly with the Department of Labour supported by the Ministry of Health. However, due to various constraints the enforcement of this legislation has not been satisfactory.

There is very little information available on occupational accidents and diseases, although provision is made for the notification of accidents and industrial diseases under the Factories Ordinance

Industrial sector	Lack of trained safety officers, no national standard, Lack of awareness of OHS management systems, less attention on waste management, indoor air quality working environment, less reporting, lapses in legal framework, no periodic
	health screening
Health sector	Inadequate PPE, lack of funding, lack of professionals, not trained and practiced to work in safe and healthy environment, high exposure to infections
Tourism sector	Exposure to communicable diseases, lack of awareness and education, inadequate medical screening
Agricultural sector	Poor living condition, exposure to agro chemical, No OHS services, less awareness on OHS, less education, less reporting, no proper legislation
Transport sector	Indiscipline activities, lack of awareness and education, inadequate medical screening, negligence of OH and diseases, irregular working hours with long run, less attention on communicable diseases
Construction sector	Lack of trained safety officers, no national standard, Lack of awareness of OHS management systems, less attention on waste management,

#### Challenges

indoor air quality and working environment, less reporting, lapses in legal framework, no periodic
health screening, exposed to high-risk environment, lack of training for machinery operators

# Legal framework

# Legislations

1896	Mines and Machinery Protection Ordinance	covered mines and allied industries
1926	Government Gazette No.755	made applicable to all
1934	Workmen's Compensation Ordinance, Act No.19	making provisions for the payment of compensation to victims of factory accidents
1942	The Factories Ordinance (Act No 45)	Chapter 128 of the Legislative safety, health, and welfare of workers in factories.
1961	Factories (Amendment) Act No.54	Defines the term 'Occupier'.
1976	Factories (Amendment) Law No.12	not enforced due non-gazetting of the notified date
1984	Factories (Amendment) Act No 32	employment of female workers after 10:00 p.m.
1998	Factories (Amendment) Act No.18	increasing the fines specified under the Ordinance
2000	Factories (Amendment) Act No.33	Include the construction industry.
2002	Factories (Amendment) Act No.19	limits 'overtime' for female workers to two hours a day

In addition to the above, following regulations are also effective.

Factories (No.1) Regulations 1960

Factories (Sanitary Conveniences) Regulations 1965

Factories (Dangerous Occurrences Notification) Regulations 1965

Factories (Washing facilities General) Regulations 1965

Factories (General Standards of Lighting) Regulations 1965

Factories (Meal Room) Regulations 1965

Factories (Steam Boiler Attendants Certificates of competency) Regulations 1965

Factories (Notifiable Industrial Diseases) Regulations 1972

Factories (Protection of Eyes) Regulations 1979

Factories (First Aid) Regulations 1995

Leaflet on first aid

The Factories Ordinance is an enactment which makes provisions for safety, health welfare of worker in factories. This Ordinance has 131 sections. Provisions are made under the Ordinance regarding the following aspects which affect the work environment:

Cleanliness	Hoists and lifts
Overcrowding	Places where dangerous fumes are liable to
Temperature	be emitted
Ventilation	Explosive or flammable gases, vapours
Lighting	Steam boilers and pressure vessels
Drainage of floors	Means of escape in case of fires
Sanitary conveniences	Safety provisions in case of fire
Prime movers	Supply of drinking water
Transmission machinery	Washing facilities
Other machinery	Accommodation for clothing
Vessels containing dangerous liquids	First aid
Self-acting machinery	Removal of dust and fumes
Chains, ropes and lifting tackle	Meal rooms
Cranes and lifting machinery	Protection of eyes
Safe means of access and safe place of	Lifting excess weight
employment	Noise
1 5	Electricity

responsible for notifying the following accidents and industrial diseases to the DFIE:

All fatal accidents

- Accidents that disable any person for more than three days from earning full at work.
- Accident that makes any person unconscious because of heat, exhaustion, electric shock, or inhalation of irrespirable or poisonous fumes or gases.
- Every case of dangerous occurrence such as explosions, fire, collapse of buildings, collapse of cranes, etc.
- Prescribed industrial diseases.

## **Enforcement of the Factories Ordinance** Industrial Safety Division

Enforcement of the Factories Ordinance including Occupational Health and Safety legislation is vested in the officers of **the Industrial Safety Division** of the Department of Labour. This division is headed by the Commissioner of Labour (Industrial Safety) and the Chief Factory Inspecting Engineer who are assisted by the Deputy Commissioner of Labour (Technical), the Deputy Chief Factory Inspecting Engineer and a team of Specialists Factory Inspecting Engineers. Services of the division are decentralized through District Factory Inspecting Engineers" officers. The Division of Occupational Hygiene assists the Factory Inspectorate by carrying out environmental and biological monitoring of workplaces. This Division is headed by the Commissioner of Labour (Occupational Hygiene).The National Institute for Occupational Safety and Health deals with policy matters and training in OSH.

Enforcement of the Factories Ordinance takes place through the following activities

Inspection of factories

- Registration of factories
- Approval of building plans
- Investigation of accidents
- Attend coroner's courts to give expert evidence
- Investigation of complaints
- Institute legal actions
- Conduct safety awareness programmers
- Analysis of accidents

Appointment of authorized officers
The other important activities being,
Advisory services for improvement of work environment in factories
Participation in national committees about Safety & Health of work personal
Safety auditing of factories
Preparation of curriculum on Safety, Health & Welfare for educational institutions such as

ICTAD, NAITA, NIBM and NIPM.

#### **Occupational Hygiene Division**

This organization was established to serve as a research and monitoring unit to support industrialists to maintain the work environment of factories as laid down under the Factories Ordinance. On request from the occupier of a factory, it undertakes monitoring of the working environment, conducts biological monitoring, conducts audits on occupational health and safety and awareness programmes, based on the findings, officers of this Division give free technical advice to industrial establishments to improve the work environment. The unit also conducts training programmes, especially on health-related work.

#### National Institute of Occupational Safety and Health (NIOSH)

National Institute of Occupational Safety and Health was established on 28th April 2005 as an affiliated body to the Ministry of Labour and Labour Relations by National Vocational Safety and Health Institution Act No. 38 of 2009. NIOSH is committed to provide better working conditions for the working population, through increasing P a g e 9 | 20

awareness of and adherence to appropriate health and safety legislation

Following are the activities conducted by the institute:

Short term training, and programmes

Laboratory services to the industry for environmental and biological monitoring of noise, dust, light, air quality, heat and humidity

Pre and periodic medical examinations

Company medical examinations which include physical examination, blood testing, lung function testing and audiometric examination.

Audits / risk assessments and hazard identification at the request of the industry.

Celebration of the national occupational safety and health week in collaboration with all stakeholders. This is an annual event.

#### Office of the Commissioner of Workmen's Compensation

The main function of this office is to inquire into the claims made by the workmen who meet with accidents in the course of their employment. This office functions entire, on a judicial capacity. The primary role of the Commissioner for Workmen's Compensation, is to implement the Workmen's Compensation Ordinance No. 19 of 1984 as amended finally in the year 2005. The objective of this Ordinance is to obtain compensation from employers to workmen injured from accidents while at work or to workmen suffering from diseases attributable to the nature of employment and to their dependents in case of death of workmen from such causes.

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The Commissioner for Workmen's Compensation carries out the following activities to realize the above objective.

Receipt of complaints claiming workmen's compensation.

Conducting inquiries into the accepted applications for compensation and settlement of the problem either by obtaining the claim or by rejecting it.

Collection of compensatory payments from employers.

Payment of compensation to disabled or diseased workmen or to the dependents of dead workmen.

# **Other related Institutes working on OHS**

#### **Ministry of Health and Indigenous Medicine**

The focal point for occupational health and safety in the healthcare sector lies with the Occupational Health Unit of the Directorate of Environmental and Occupational Health of the Ministry of Health and Indigenous Medicine. The primary objective of the Occupational Health Unit is to plan, implement, monitor and evaluate the National Occupational Health programme of the Ministry of Health

The Directorate of E&OH has embarked on a programme to develop occupational health of all workers in workplaces in Sri Lanka. The main objectives of the programme being,

- 1. To promote and maintain the highest degree of health among workers
- 2. To prevent adverse effects on health caused by the working conditions among

workers

3. To protect workers from occupational risks resulting from factors adverse to health

4 The implementation of the occupational health activities in the health sector are carried out mainly through the primary health care units of the Ministry of Health through the Medical Officers of Health (MOOH) and the Public Health Inspectors (PHII). The MOOH and PHII are expected to visit workplaces and identify hazards in the work environment, advice on preventive and protective measures, carry out health promotion activities, advice on basic health facilities, such as, safe drinking water, sanitary latrines, meal and changing rooms, adequate washing facilities, and facilities for first-aid at workplaces.

#### National Institute of Health Sciences (NIHS)

The primary health care staff of the Ministry of Health is trained at the NIHS at Kalutara. The NIHS provides basic training in occupational health to these officers.

#### Sri Lanka Standards Institution (SLSI)

SLSI is a certification body for OHSAS 18001:2007. It refers to Occupational Health and Safety Management Systems and sets requirements on occupational health and safety aspects of any organization. OHSAS 18001 has been developed to be compatible with the ISO 9001(Quality) and ISO 14001 (Environment) management systems standards, in order to facilitate the integration of quality, environment and occupational health and safety management systems by organizations that wish to do so.

#### **Board of Investment of Sri Lanka (BOI)**

There are twelve export processing zones (EPZs) that operate under the purview of the BOI. There are also other BOI enterprises that operate outside the EPZs in Sri Lanka. The labour laws of the country are also applicable to BOI enterprises, and the Ministry and the Department of Labour are responsible for enforcement of these regulations. There are Industrial Relations Officers employed under the BOI, who are responsible for providing advisory services and guidance to employers and employees in fostering closer labour-management cooperation at the enterprise level on all aspects in the area of industrial relations through routine inspections. They are also expected to conduct compliance audits which include audits on health and safety.

#### **Employers' Federation of Ceylon (EFC)**

The main function of the organization is to look after the interest of its member establishments on matters related to labour law and industrial relations. The EFC also makes representations on behalf of employers to the Government, Ministry of Labour, Department of Labour and other relevant agencies on matters pertaining to labour policy, labour legislation, wages, etc. and is recognized as the representative employer organization in Sri Lanka by the Ministry of Labour and the International Labour Organization. Direct services to members include advice on matters pertaining to labour law, industrial relations and human resource management, representation in labour courts, facilitation of dispute settlement and collective bargaining agreements and training.

## **Ceylon National Chamber of Industries (CNCI)**

The Ceylon National Chamber of Industries is the premier industries" chamber in the

country which is established by the act of parliament. The membership of the chamber comprises of small industries. The Chamber conducts training programmes for their membership on OSH.

#### **Construction Industry Development Authority (CIDA)**

CIDA was established as the successor to the Institute for Construction Training and Development (ICTAD) under the provisions of the Construction Industry Development Act No. 33 of 2014. Among the many training programmes conducted by CIDA, the following programmes are conducted related to health and safety in the construction industry.

- Construction safety & occupational health training programme
- Diploma course in construction occupational safety and health (DCOSH)
- Certificate course in construction occupational safety and health (CCOSH)

#### **International Labour Organization (ILO)**

ILO provides technical assistance to its member states through a Decent Work Country Programme (DWCP), which details the policies, strategies and results required to realize progress in each country, towards the goal of decent work for all.

#### World Health Organization (WHO)

WHO's work on occupational health is governed by the Global Plan of Action on Workers achieve full coverage of all workers, including, farmers, migrants, and workers in small enterprises and the informal sector to essential interventions and basic health services for the prevention and control of occupational and work-related diseases and injuries.

## **Training/ Education programs**

The employed women play a prominent role in the production process of Sri Lanka. the Department of Labour investigate the vocational rights, safety, and providing for the health and welfare facilities of women. Similarly, the elimination of child labour in order to safeguard children who are the lifeblood of nation is also look into. Accordingly, the Department of Labour has engaged in the activities for the safety of employed women and safeguards the rights of children.

Programs workshops, outbound trainings for school children, for all levels of staff categories in public/private organization are being continuously carried out.

Different kinds of labour surveys are carried out with a collaboration of public/ private organizations.

## Lapses and recommendations

#### Legislation and enforcement

1. There are limited numbers of Factory Inspecting Engineers to enforce the provisions of the Ordinance island wide. As a result, inspection of factories does not meet full coverage. It is recommended that categories such as medical officers of health, and public health inspectors, who are widely distributed throughout the island be utilized to conduct preliminary inspections after training.

2. There is a need to ensure registration of all factories to reveal the number of industries from household to large scale enterprises in this country.

Reporting of accidents and injuries to the factory inspectorate is poor. All industries should be informed of the importance of maintaining records on accidents and injuries and the importance of reporting accidents and injuries to the factory inspectorate.. Even though occupational accidents are reported to some extent, there is no notification of occupational diseases. A mechanism should be developed for the detection and reporting of occupational disease. Medical officers with necessary knowledge and skills should be produced to meet this requirement.

4. The Act also envisages the appointment of a multidisciplinary team of inspectors to perform inspections of workplaces. This would require the recruitment and training of a large cadre of officers from different fields. It is important to ensure the training of required categories of staff, utilizing the existing training facilities and establishing additional facilities.

# Occupational Health and safety programme of the Ministry of Health

6. Occupational health services should be integrated to the primary health care services of the country. Directorate of Environmental and Occupational Health (E&OH) should be strengthened by recruiting the required number of trained medical officers in occupational health facilitate the provision of occupational health services at the grass root level. Establishment of Environmental and Occupational Health Units at district level will enable better facilitation and implementation of the occupational health programme in the country.

# Development of human resources in occupational health and safety

7. Human resources trained in occupational health and safety needs to be strengthened.

Committee be appointed with the representation from the Department of Labour,

National Institute of Occupational Safety and Health, Ministry of Health, Faculty of P a g e 16 | 20 Medicine and industry to plan the curricula for such training and identify institutions that would undertake training.

9. The experience gained from professional organizations that have already taken the initiative to introduce OSH subjects in their courses should be utilized to introduce such programmes in courses conducted by other professional bodies.

10. It is recommended that all workplaces establish workers' councils or safety committees with representation from employees and management to promote OSH activities.

#### Laboratory facilities

11. At present laboratory facilities for the analysis of heavy metals and toxins are limited. The existing laboratories should be upgraded with enhance capacity to carry out investigations.

#### Industries

12. Garment industries now have a declared policy on OSH, a safety officer to coordinate

OSH activities and safety committees to implement safety activities

All factories should be encouraged to establish a system of communication for OSH, which system would, in turn, provide a mechanism for educating workers in safety practices and preventing occupational accidents and diseases.

#### **Proposed Occupational Safety, Health and Welfare at Work** Act

13. The proposed Occupational Safety, Health and Welfare at Work Act which is long pending should be finalized and speedily enforced to ensure coverage of all

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workplaces in respect of health and safety. Early action should be taken to train and appoint the proposed cadre of inspection personnel and careful consideration should be given when appointing members to the

# **Diseases (COVID-19) related measures**

We got through first wave of COVD successfully.

His Excellency president commands promptly

Health sector involvement is excellent; they are dedicated for patient care

Three military forces and police are in action for intelligence works, tracing tracking

sources and providing coronatine facilities, improving infrastructure,

Donors and volunteers are at work.

Welfare societies, priests are at work,

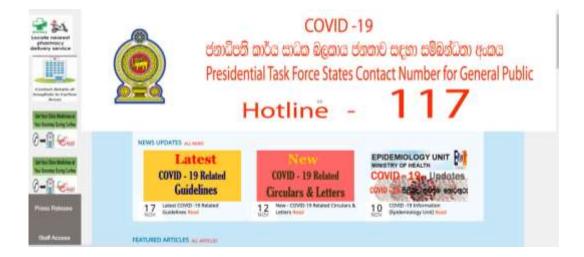
Majority of Citizens start their own planting/agricultural work, stay calm at home

Avoid social gatherings as much possible

Keep social distance at everywhere as much as possible.

Government provides basic needs for victims and concessions on all aspects to the citizens.

Any building having customer relations they keep records of each and every person enter in to the premises.







# References

Report on Situational Analysis on Occupational Health and Safety in Sri Lanka Department of Community Medicine, Faculty of Medicine, University of Colombo-2016 Annual reports – Department of Labour