

Reform of supervision by occupational physicians and OSH professionals ("DGUV Regulation 2")

Objectives and criteria

A concept for the supervision of companies with over ten employees by company physicians and OSH professionals (standard supervision) was to be developed which:

- Is implemented in equal measure by statutory accident insurance institutions in trade and industry and in the public sector
- Satisfies modern requirements concerning supervision
- Assures equivalent requirements for equivalent companies
- Gives consideration to the risk situation in each individual company
- Is cohesive
- Meets the requirements for approval

The reform of supervision by company physicians and OSH professionals has, for the first time in the history of the German statutory accident insurance system, merged all regulations for companies in trade and industry and public-sector bodies, and defines arrangements for supervision of companies and insured individuals which are uniform across all sectors.

Concept

The legal function of the "DGUV Regulation 2" accident prevention regulation is that of detailing the provisions of the German occupational safety act (ASiG) with regard to the skills required of OSH professionals and company physicians and to the personnel deployment necessary for completion of the tasks set out in the legislation. The functions of the occupational safety act (ASiG) are now carried over in DGUV Regulation 2 in line with contemporary thinking with reference to the occupational safety and health act (ArbschG).

In its concept, the model text of the accident prevention regulation, adopted at the end of November 2009 at the Members' Meeting of the DGUV for implementation in all accident insurance institutions, follows the modern approach of gearing the supervision services to the risk assessment conducted in the company. It thus also promotes a high standard of risk assessment for the benefit of all parties in the company. With the combination of basic supervision with fixed deployment times for certain types of company and a form of company-specific supervision geared to the particular company, the arrangement meets modern requirements for the promotion of workplace safety and health. This distinction enables specific hazards in the most diverse types of company to be addressed individually and more effectively than ever before.

To achieve this, the tasks of OSH professionals and company physicians build upon the functions listed in the occupational safety act (ASiG). In view of the age of this act (1974), however, these functions are re-interpreted in the context of modern occupational safety and health thinking, and described comprehensively in model catalogues of services. Forward-thinking issues such as the assurance of fitness for employment, consideration of mental stress at the workplace, and demographic change are included within the range of services delivered by company physicians and OSH professionals, as are aspects of workplace health promotion.

Basic supervision

Basic supervision is described in detail by a catalogue of basic services. The accident insurance institution specifies fixed deployment times for the company physician and OSH

professional for completion of their basic service tasks in consideration of selected types of company. Distinction is made between three different supervision groups. Individual companies are assigned to a company type with reference to a binding list of company types. This list is taken from the official NACE classification of economic activities, and applies in the same way to all statutory accident insurance institutions. This ensures that the same basic supervision time is actually selected for companies of the same type. A minimum deployment time ensures that the two professionals are active in the company on an appropriate scale.

Company-specific supervision component

The company-specific component of supervision, which is adjusted to the circumstances in the company concerned, is described in a catalogue of services containing tasks and hazards which occur regularly and temporarily in the company. The services delivered by the occupational physician and the OSH professional are defined in the company by the employer in addition to the basic services with reference to the binding catalogue of services, discussed with the professionals, and agreed in writing. The employees' representative bodies are involved intensively in accordance with Section 9 of the occupational safety act (ASiG).

The catalogue of services of the company-specific component is geared to the modern philosophy of the occupational safety and health act (ArbschG). It encompasses not only the traditional functions of accident prevention, but also areas such as human-oriented workplace design and personal occupational medical prophylaxis, together with the preservation of workforce health as a resource. This spectrum of tasks performed by the occupational physician and the OSH professional, the relevance of which must be reviewed, enables companies to implement the framework requirements in a way which is tailored to their needs.

Complete supervision

The company-specific supervision component extends the content of basic supervision, focuses complete supervision directly upon the conditions in the company, reinforces the need for risk assessment, and assures an optimum level of transparency and verifiability for all parties responsible. No longer is the deployment time simply defined; instead, services are agreed and documented – a clear step towards the promotion of workplace safety and health.

Conclusion

The 1974 occupational safety act (ASiG) is defined more closely in a number of respects; the areas of activity described in DGUV Regulation 2 define in greater detail the functions defined in Sections 3 and 6 of the ASiG. The companies are offered choices which meet their needs. Risk assessment is the yardstick for supervision. Equivalent requirements for equivalent operations, whether run by private companies or municipal authorities, are assured in the accident prevention regulation. Comprehensive involvement of the employees' representative body has been set out in the regulation.

DGUV Regulation 2 no longer contains a deggression arrangement. It promotes co-operation between company physicians and OSH professionals, and represents a first step towards demonstrating the delivery of services rather than the mere completion of deployment times.

Future prospects

In May 2008, the DGUV Governing Committee decided in Dresden to link the pending reform of standard supervision to the creation of the first common accident prevention regulation of the accident insurance institutions for trade and industry and those for the public sector. The representatives of the statutory accident insurance institutions both in trade and industry and

in the public sector were informed of this decision by the Governing Committee at the DGUV Members' Meeting. The technical work of the DGUV's prevention experts and of its members then began immediately.

Following consideration of the comments made by all DGUV members, the DGUV Members' Meeting held at the end of November 2009 addressed the model text of the new DGUV Regulation 2, and adopted it.

All draft accident prevention regulations of the statutory accident insurance institutions were presented on time to the licensing body by 30 April 2010.

2010 will now be devoted to implementation of the new regulation by all statutory accident insurance institutions. On 1 January 2011, the first joint accident prevention regulation of the accident insurance institutions is to be in place, regulating the full scope of the supervision by company physicians and OSH professionals of companies and public administrations of all types and sizes in a new and forward-thinking manner.