



Issue 200

June 2019



# Occupational Health

## Occupational Health Education

- An Interview with Retired Expert – Dr. Yu Tak Sun, Ignatius
- Summary of "Survey on the Current Status of OHS in Laundry Service Industry in Hong Kong"

## Rehabilitation

- Suggestions on Hong Kong's Rehabilitation Policy

# Content

## Occupational Health Education

- 02 An Interview with Retired Expert – Dr. Yu Tak Sun, Ignatius
- 05 Summary of "Survey on the Current Status of OHS in Laundry Service Industry in Hong Kong"

## Rehabilitation

- 10 Suggestions on Hong Kong's Rehabilitation Policy

Publisher Hong Kong Workers' Health Centre Ltd.

Professional Consultant Prof. Ignatius Tak Sun Yu

Chief Editor Sabrina Wan

Editor Kay K. K. Lau

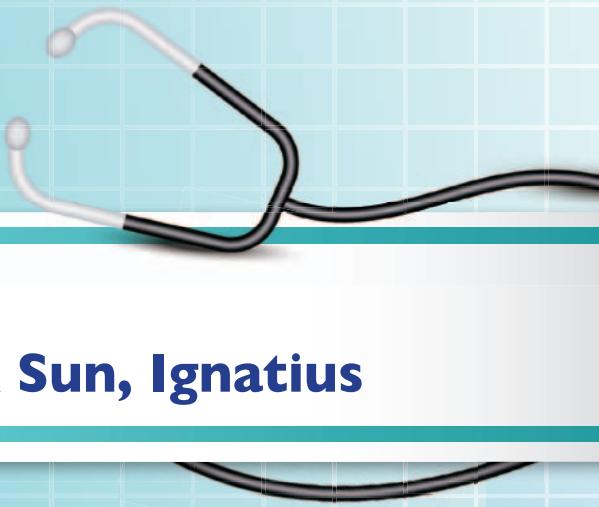
Contact Address Room 1429-1437, 14/F., 87-105 Chatham Road South, TST, Kowloon, Hong Kong, SAR China

Contact Method info@hkwhc.org.hk  
Tel: (852) 27253996 Fax: (852) 27286968

Web site www.hkwhc.org.hk

Acknowledgement English version of this magazine is provided by Mr. CHAN Ting Him, Issac

"Occupational Health" is the publication of Hong Kong Workers' Health Centre (WHC). The purpose of this newsletter is to share our concerns, issues and initiatives on occupational health with the general public in Hong Kong and Mainland China. The information and comments that appear in this newsletter do not necessarily represent the official position of WHC, and WHC will not assume any legal liability or be responsible for damages caused by use of the contents in this newsletter. For those who want to use the contents of this newsletter for their own writings, please quote references to this newsletter accordingly.



## An Interview with Retired Expert – Dr. Yu Tak Sun, Ignatius

Hong Kong Workers' Health Centre (WHC) has been gradually developed by a group of young medical and nursing students who are enthusiastic in the protection of frontline workers' health and safety since 1980s. Years fly by fast and this group of students have successively reached the stages of retirement. They have been sparing their efforts to promote occupational health and safety (OHS) for more than 30 years. In this interview series, our objective is to record their experience and what they have learnt from it so that readers can have more ideas and reflections of our duties and OSH in Hong Kong. We have invited Dr. Yu Tak Sun, Ignatius to become the first interviewee. He is the Chairman of the current Board of WHC, Occupational and Environmental Medicine Specialist, and former professor of the School of Public Health and Primary Care, the Chinese University of Hong Kong.

### Predecessor of Workers' Health Centre

After graduating from university, Dr. Yu worked at the Community Industrial Health Centre of United Christian Medical Service, which is under Kwun Tong Community Health Scheme. In 1980 he was transferred from Sau Mau Ping to Kwun Tong. At that time, Kwun Tong was a factory district with textiles, clothing, foods, hardware, electronics and other types of factories, therefore services of the centre concentrated on workers' injuries and illnesses. Dr. Yu explained that there was no notion of primary care in the community by the time. Their centre provided workers with affordable consultation and medical examination services mainly by the means of direct contacts with dozens of factories in the district. This was the beginning of Dr. Yu's devotion to occupational health.

Dr. Yu recalled that Mr. Lam Shu Kai, the then community development officer of the Kwun Tong Community Industrial Health Centre, had just graduated from Britain and had acquired basic knowledge of OHS. They went to factories for inspection and wrote reports for reference



of the factories in making OHS improvements. This helped Dr. Yu, a rookie medical officer, understand more about OSH. Later, several medical and nursing students joined their team as volunteers successively. In order to increase these students' basic understanding of OHS, Mr. Lam and he organized training courses to share relevant knowledge. This group of medical and nursing students were fairly passionate about occupational health services and they kept liaising with different labour groups. They promoted OHS information through publicizing a newsletter named "Industry and Health" (the predecessor of "Occupational Health", the current newsletter of WHC), holding seminars, conducting media interviews and so forth. Dr. Yu mentioned that the industry was booming in the then Hong Kong and the number of employed workers was as many as more than a million. Their team's work on OHS education and promotion was exactly responding to the needs of such a huge group of people in society.

## **Establishment of Workers' Health Centre**

Later Dr. Yu had to leave the team temporarily for further studies in the United States of America. After his graduation and returning to Hong Kong, these medical and nursing students also graduated. Since Dr. Yu was aspired to serve diligent frontline workers in the field of occupational health, he was involved in consulting different labour organizations and hoped to establish a group to continue the related work. On October 7, 1984, WHC was formally established. The then WHC was located at an upstairs unit site in Lai Chi Kok Road, Sham Shui Po. It operated as a clinic and applied a membership system. The workers at that time, however, did not have a deep understanding of occupational health. The then labour unions also failed to deliver sufficient cooperation because other rights of workers have occupied most of their schedule, though the unions supported the establishment of WHC in principle. As a result, WHC faced difficulties in operation and subsequently suspended her clinical service and changed to concentrate on the promotion of preventive education. The work of preventive education of WHC might be considered to be fairly in-depth and diversified at that time. Examples of the work were staging exhibitions in concourse of MTR stations, community centres and shopping malls, publishing publications and brochures, and outreaching to construction workers at sites during teatime with the support of labour unions, and holding face-to-face activities such as having interest groups to learn the situations of different industries. The government undertook less educational promotion of occupational health and there was no similar public and statutory body. Under the circumstances that the relevant legislation lagged behind the current one, the workers basically did not have any protection. WHC's services were therefore very important to them.

## **Situation of OHS in Hong Kong**

Dr. Yu has witnessed the development of OHS in Hong Kong for many years. He shared his experience of visiting Japan in 1990. He described the construction sites in Japan as very neat and hygiene as satisfactory. The sites would not make people feel scared. Hong Kong is on the contrary. When he was a professor, he applied to construction companies many times for students visit to construction sites, but they repeatedly rejected him for "unsafe" reason. The differences between these two places are worth considering. It is even shameful for frontline workers to continue to work at the "unsafe" sites operated by these construction companies every day. Dr. Yu spoke bluntly that the difficulty in OHS prevention and education in Hong Kong is that things workers can do are often limited and passive. The most direct way is to request them to wear personal protective equipment, but this would inevitably affect work progress and workers would face pressure from being rushed by employers and supervisors. The workers would rather choose to sacrifice personal health and safety. Furthermore, under the current business model the persons responsible for safety supervision are not externally independent of employers and therefore they do not have sufficient power to take safety protection measures; moreover, the attitude of Labour Department towards enforcement is inactive and perfunctory. The OHS situation has always been unsatisfactory as a result.

## **Importance of Labour Unions and Official institutions**

Dr. Yu believed that effective preventive work can definitely achieve a win-win situation because it enables workers to greatly reduce the risk of being injured and ill and, employers to decrease compensation expenses and productivity losses. He thought that the effort of labour unions is indispensable for promoting further development of OHS in Hong Kong. Dr. Yu stated that one of the rare characteristics of WHC is that it, as a non-governmental organization with limited manpower and resources, is one of the few institutions that are able to cooperate with labour unions with different political backgrounds. For instance, the survey report on postal workers' occupational health, which was published in the past years, urged the government and different groups to pay attention and handle the issue. Central Compensation Mechanism and Re-capacitation and Return-to-Work Fund, which WHC has long advocated in recent years, have also gradually obtained consensus from labour unions and various professional groups in society. He recalled with grateful pleasure that among his work these years, having witnessed the rising attention of labour unions on the issue of OHS has been one of the impressive sections. He believed different labour groups agree that they should put effort into

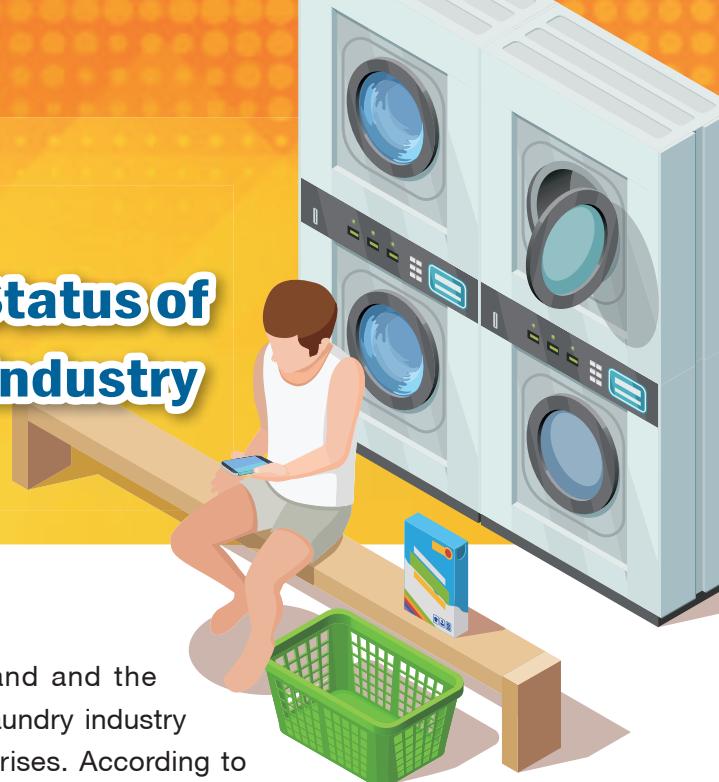
this scope. As long as there is a suitable issue and it is able to transcend political disputes, different stakeholders should join together to work towards the common goal.

Dr. Yu thought that, at the official level, the Occupational Health and Safety Council (OSHC) as a statutory body has the richest resources, but its work gets entangled in bureaucratic system, resulting in poor overall work efficiency and slow progress. For example, safety and health messages delivered from Occupational Health and Safety elections and award ceremonies are too brief. He hoped the OSHC can make use of its resources sensibly, demonstrate much commitment, and carry out much work. For example, it may consider following the Consumer Council's suit to test safety and protective equipment (such as respirators and helmets) and publish the results; it should also, at the international aspect, connect to other countries to establish a territory-wide OHS index. In this way, OSHC provides the public with objective data for reference and the data, on the one hand, could be used to raise public awareness and attract more attention. On the other hand, it helps to establish quantifiable and clear objectives for effective regular review and for pertinent improvements.

## Summary

Dr. Yu concluded that WHC has always been a pioneer in the field of occupational health and has a forward-thinking mindset. WHC is able to adjust according to changes in situation. From Dr. Yu's school life until now, his intention and direction have never changed; he always agrees that work of occupational health needs to be valued and promoted. He hoped that WHC can continue to exert innovative spirit and make more breakthroughs in her future work, contributing to the occupational health of the public.

# Summary of "Survey on the Current Status of OHS in Laundry Service Industry in Hong Kong"



Hong Kong is densely populated with less land and the living environment of the citizens is crowded. Laundry industry has brought convenience to citizens and enterprises. According to the Census and Statistics Department of Hong Kong, there were 690 companies operating washing and dry cleaning services in 2016, involving a total of 5,300 employees in the industry, accounting for about 0.14% of the total employed population in Hong Kong. Compared with other industries in Hong Kong, laundry industry involves few practitioners, but the machines, equipment or materials they use involve various occupational safety hazards, including high temperature, noise, machine safety, chemical hazards and heavy repetitive movements. These are no doubt serious threats to frontline employees.

The above problems, however, did not receive widespread attention from society, and there has had no relevant local industry research for public reference. In view of this, WHC has cooperated with Hong Kong Laundry Services Association ("HKLSA") to conduct a study to examine the situation of OHS of the laundry workplace and its impact on the laundry practitioners. The purpose is to obtain valuable information for making suggestions for the industry and the public. It is hoped that it can raise concerns of various sectors in the community over this industry.

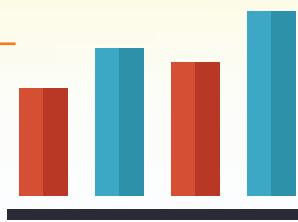


## Findings

"Questionnaire survey" has been applied for data collection for this study. HKLSA sent the questionnaires to its members. The completed questionnaires were collected by HKLSA and then returned to WHC for statistics and analysis. 60 questionnaires were successfully collected. A summary of the survey results is published as follows:

## **1. Occupational Injury is Related to Age and Job Nature**

The survey respondents were mostly middle-aged and above, with more than 35% of them aged 51 to 65, and nearly half of them aged between 36 and 50. One of the findings was that the older the workers are, the higher risk of injury or illness.



Moreover, the study found that nature of the work is strongly related to occupational injury. Work nature may cause damage to the workers' health and safety: employees whose work involves laundry and folding have significantly more injuries related to lifting or carrying goods; it is significant for those workers who use heating equipment such as irons, hot stamping machines, and ironing machines in ironing process to be more likely to have burns and so forth.



## **2. Importance of Job Risk Assessment is Neglected**

More than 30% of the respondents expressed that they are unclear whether their companies have conducted risk assessments or even affirm that the companies have not proceeded. This may in turn make employees not aware of and neglect their work environment and process-related hazards, and may make them ignore the need to take appropriate precautions. This increases the risks of injury or illness. The survey also found that the current installation of ventilation equipment by employers did not significantly decrease the incidence of heat or chemical-related diseases. A proper risk assessment should assist employers to identify loopholes in existing control measures, to further analyze whether the existing protective measures are adequate and appropriate, and then proceed to make improvements. Hence, we can estimate that there is much room for the industry's improvement in the current risk assessment of the work environment.

## **3. Training and Support for OHS are Insufficient**

Nearly 80% of the respondents indicated that their employers have provided their staff with training and information on occupational health and safety. The quality of the content was, however, unsatisfactory. Half of the respondents believed that the training and support for occupational health and safety provided by the employers only helps them a little. The main reasons include inappropriate content design, unrealistic operation and their irrelevance to the work. When the respondents were asked about how they received the information on occupational health and safety, more than half of them replied obtaining the



information through promotional publications provided by employers or verbal reminders from supervisors. However, the means of promotional publications is inevitably too passive and its impact depends excessively on readers' intention to read. In case employees have no interest in reading, it is difficult to convey information to them; verbal reminders may not fully explain the dangers of each working process or the actual preventive measure.



## Recommendations

### 1. The industry should regularly arrange effective hazard identification and risk assessment:

**and risk assessment:** A thorough regular review of workplace can identify all existing or potential hazards, and examine the effectiveness of the existing control measures to provide the most effective protection for those groups who are at risk. If employers have relevant professional knowledge and experience, they can conduct risk assessment on their own; if, on the contrary, employers think that it is difficult for them to conduct a quality risk assessment, they should appoint an occupational safety professional (such as an occupational hygienist) or an organization with relevant knowledge to assist in the risk assessment to ensure that the assessment results are reliable and attempt to eradicate the hazards or minimize the impact. After conducting a risk assessment, employers should also disclose the results of the assessment to the staff. This not only demonstrates the company's emphasis on employee safety and health issues, but also makes employees to be more aware of the hazards they face while working, raise their vigilance and further avoid injury or illness of employees.



### 2. Employers should also establish clear and standardized guidelines on workplace safety:

**Employers should provide employees with a unified practical working guidelines and steps, and enforce rules to avoid dangerous working methods that do not meet the requirements for reducing the risk of accidents. If there is already a guideline, employers should regularly check whether the content of the guideline still meets all the current work requirement of the employees. If any problems, loopholes, or outdated information are found, employers should modify, update and supplement the guideline as soon as possible. In fact, frontline employees are the ones who are most aware of the dangerous situation in their work environment and nature of job. Therefore, we encourage employers to consult their employees for practical and feasible advice while formulating safety guidelines and avoid emptiness of the content.**



### **3. The industry needs to review and improve training**

**content and supporting system of occupational health and safety:**

Compared with written publications which require frontline employees to study on their own, face-to-face training seminars enable employees to absorb the knowledge of occupational health and safety more quickly and systematically. When employees have doubts about the actual operation, they can immediately raise questions and receive answers in a timely manner to achieve an efficient learning. If employees aim to promote a further level of occupational health and safety in the workplace, they may adopt more active training methods, such as the “workers participatory training” which is recommended by the International Labour Organization. This mode of training focuses on the employees’ participation and active learning during the training process so that it is easier for employees to absorb relevant knowledge and put it into practice. Before proceeding to design the training content, employers should consider the actual needs of the training audience. For example, the training should integrate actual daily operation of employees and the idea of preventive occupational health and safety. Only by avoiding to become a mere theory, the training content is able to truly meet the needs of the audience and ensure the benefit of training. Undoubtedly, if employers are unable to arrange effective training seminars on their own, they may consider to employ external training institutions to arrange a walkthrough survey for the workplace first and then design training content in accordance with actual needs and deficiencies. In this way employers could provide employees with the best support for their OHS.



WHC hopes that the industry can give a detailed reference to the above proposals and that this study will draw the attention of the relevant government authorities, organizations and the public. This will impel various sectors to promote the development of occupational health and safety of the laundry industry and safeguard the health and safety of the workers of laundry industry in Hong Kong.

# Suggestions on Hong Kong's Rehabilitation Policy

In the early 1970s, the Hong Kong Government set up an interdepartmental working group that was responsible for the research on the development of rehabilitation services in the view of facilitating the full integration of persons with disabilities into the community. The Hong Kong Rehabilitation Programme Plan (RPP) was released in July 1976 after this had been developed in consultation with various relevant Government departments and the Hong Kong Council of Social Service. This plan formed the basis for the first White Paper on Rehabilitation: "Integrating the Disabled into the Community: A United Effort" published by the Government in 1977. Since then, the Government and the rehabilitation sector conducted regular reviews of the Hong Kong Rehabilitation Programme Plan to address the needs of persons with disabilities and the whole community in a timely manner.

## Coverage of the Current Rehabilitation Policy



The overall objective of the rehabilitation policy in Hong Kong is to prevent disabilities; to help persons with disabilities develop their physical and mental capabilities as well as their ability to integrate into the community; and to create a barrier-free physical environment through a comprehensive range of effective measures, with a view to ensuring that persons with disabilities can participate in full and enjoy equal opportunities both in terms of their social life and personal growth. The objective of rehabilitation services in Hong Kong is to help persons with disabilities to fully utilize their physical, mental and ability to integrate into the community within their limits of disability.

At present, there are eight categories of disability according to the rehabilitation policy in Hong Kong: (a) attention deficit/hyperactivity disorder; (b) autism; (c) hearing impairment; (d) intellectual disability; (e) physical disability; (f) mental illness; (g) specific learning difficulties; (h) speech impairment; (i) visceral disability; and (j) visual impairment. Regarding physical disabilities, having regard to the advice of the Hong Kong Medical Association in 1994, the following definition for a person with physical disabilities has been adopted: "A person with physical disabilities is defined as a person who has disabilities of orthopaedic, musculoskeletal, or neurological origin which mainly affect locomotor functions, and constitute a disadvantage or restriction in one or more aspects of daily living activities." The current major service required by persons with physically disabilities may include: medical and community rehabilitation care, pre-school training, education services, residential care, day care and community support,

employment services and vocational rehabilitation, barrier-free access and transport, barrier-free information and communication technological equipment, and/or use of assistive devices.

Regarding employment and vocational rehabilitation, the policy objective of the Government in assisting persons with disabilities in attaining employment is to ensure that they have equal access to participation in productive and gainful employment in the open market. The Government provides persons with disabilities with a wide range of employment and vocational rehabilitation services. These services including integrated vocational rehabilitation services centres, integrated vocational training centres, supported employment service, and On-the-job Training Programme for People with Disabilities aim to equip them with job skills that meet market requirements and assist them in securing suitable employment commensurate with their abilities.

The current rehabilitation policy covers most of the persons with disabilities who are in need. Regretfully, the work injury rehabilitation that the injured workers need the most is not included in the current rehabilitation policy. In 2017, the Government commissioned Rehabilitation Advisory Committee to plan the "Hong Kong Rehabilitation Scheme" and conduct public consultation to collect views from different stakeholders and people from various sectors. WHC hopes that by this opportunity the community can better understand the needs of injured worker for rehabilitation and support the inclusion of work-related injuries and work rehabilitation in the current rehabilitation policy.

### Case sharing

Yuk, 56 years old, had been working as a female packaging worker for more than five years and always have a great relationship with supervisors and colleagues. In October 2015, she accidentally sprained her back when she moved goods. She immediately went to the emergency room of a public hospital for treatment. The doctor diagnosed her with the injury of the fourth and fifth lumbar segments. Yuk was later referred to a physical therapy department for rehabilitation. The appointment period for the medical specialist was, however, 18 months later. When Yuk was waiting for the specialists, she did not only suffer from chronic pain, but also gradually separated from the supervisors and colleagues whom she had had a good relationship with. These caused her various emotional distresses. Occupational therapists assessed that Yuk was unable to return to the original job and needed to switch to other industries. Finally, Yuk completed the procedure on injury assessment and handling of the employment relationship with the employer in February 2018. After nearly 30 months of work rehabilitation, Yuk had completely lost her confidence in returning to work. She even did not know what she was capable of doing.



## Needs of Persons with Occupational Injuries



In Hong Kong, Yuk's case is just the tip of the iceberg! With more than 30 years of experience in frontline rehabilitation services, WHC is well aware of the needs of persons with occupational injuries:

### 1. Medical Diagnosis and Rehabilitation

After a work-related accident, proper medical diagnosis is crucial for workers who are injured at work because they could understand more about their injuries and rehabilitation process. If workers who are injured at work can receive appropriate rehabilitation treatment during the "golden period" for rehabilitation (i.e. within 3 months from the date of injury), the best recovery result can be achieved. This helps injured workers to return to work as soon as possible. Regrettably, the resources of public medical services are now very tight and there are many people receiving the services. Injured workers often have to wait for a long time for rehabilitation and specialist treatment. The long waiting time does not only affect the progress of the rehabilitation but also reduce the successful rate of injured workers to return to work.



### 2. Needs for Returning to Work

Injured workers often encounter doubts and obstacles during the rehabilitation process, such as the function of occupational and physical therapy for rehabilitation, the failure of employers to cooperate and make the corresponding work adjustments. These problems cause invisible pressure on the injured workers. Under the influence of negative emotions such as chronic pain, depression and anger, emotions and thoughts are deeply troubled. Injured worker's thinking tends to become extreme and slowly loses the motivation to return to work. If we are able to provide injured workers with support for returning to work at an appropriate time, the desire of returning to work for injured workers would gradually regain.

### 3. Psychosocial adjustment after occupational injury



After a work-related accident, injured workers need to face different sequelae: chronic pain, financial stress, low mood, poor interpersonal relationships and so forth. The lengthy litigation time leads the problems faced by the workers even more burdensome. Thus, the intervention of psychosocial adjustment can enhance the social participation and self-efficacy of workers with work injuries, and encourage them to face squarely the problems caused by work injuries and to return to work successfully.

### 4. Multidisciplinary Communication and Work Injury Rehabilitation

Under the current policy, there is no mention of whether workers with work injuries can successfully return to work, join work internships and receive on-the-job support after completing rehabilitation treatment. Nonetheless, it is very important to have a systematic coordination of rehabilitation for work injury. A case manager can help facilitate the communication between the workers and the medical professionals. The case meetings

and progress reports are regularly used to enable workers to obtain appropriate assessment and treatment. In addition, when the injured workers complete the rehabilitation treatment, the case manager can also provide individual employment counseling to the workers in response to the advice of medical professionals, and communicate and collaborate with their employers to formulate plans for returning to work, thereby enhancing their confidence in returning to work.



Regarding the current rehabilitation policy, although there are vocational rehabilitation, vocational training, and social rehabilitation services, it has no measure to deal specifically with the needs of injured workers.



## Center's Advice to the New Program

Hong Kong Workers' Health Centre, as a social service agency that specializes in providing services to persons with occupational injuries, attempts to make few suggestions for occupational injured workers on the new RPP:

### 1. Broaden the category on disability

For the whole rehabilitation policy, the disability category is only classified as physical disability, and it is considered as a person with physical disabilities only if his or her physical or mental disabilities are impeded or restricted by the daily activities of one or more aspects. We believe everyone agrees that work is an important part of our daily lives. Some of the injured workers suffered from chronic pain due to their injuries which lead to difficulties and restrictions on returning to work. Some workers also find daily activities difficult due to physical suffering from injuries. Hence, the Center recommends that workers with occupational injury should be included as one of the categories of persons with disabilities.



### 2. Include Work Injury Rehabilitation in the Policy

The concept of work Injury rehabilitation is to use the theory and technology of modern rehabilitation for providing medical rehabilitation, vocational rehabilitation, and social rehabilitation services for disabled persons with occupational injuries. This recovers and improves their physical functions and self-care ability as fully as possible, and regains and enhances their ability to return to work to the greatest extent. The ability of the disabled to return to work, thereby promoting the full return of the disabled to the society and return to work. By this definition, the content of work injury rehabilitation combines the elements of medical rehabilitation, vocational rehabilitation and social rehabilitation. These are exactly the services provided for persons with physical disabilities and we strongly recommend that work injury rehabilitation be included in the rehabilitation policy.



### 3. Establish One-Stop Service for Occupational Rehabilitation

At present, the occupational rehabilitation services for workers with occupational injuries are mainly provided by public hospitals. The service standards are very high. However, the lack of coordination and communication affects the time and results of workers return to work. In addition to incorporating work injury rehabilitation into the policy, the Center proposes to set up a dedicated department for occupational injuries which provides comprehensive rehabilitation services, including: medical rehabilitation, occupational rehabilitation and return-to-work support. The idea of one-stop service is effective for arranging case managers to handle each case of work injury, to coordinate the entire work rehabilitation process, and to speed up the progress of job seeking and returning to the job market.



#### Summary



In view of the growing problem of aging population, workers rehabilitated from occupational injuries are definitely valuable laborers! WHC hopes that the relevant departments can consider and take the above advices so that work injury rehabilitation can be incorporated into the policy. By these means workers with occupational injury can receive systematic rehabilitation services and protection, and the rehabilitation policy in Hong Kong can cater for the needs of patients with occupational injury.

香港工人健康中心  
Hong Kong Workers' Health Centre  
香港賽馬會社區資助計劃  
「同心共建  
職業健康文化工作間」  
The Hong Kong Jockey Club Charities Trust

HKWHC now invites organizations/NGOs to participate in our project "Working Together to Enhance Health and Safety Culture and Workplace Improvement". This project aims at improving the Occupational Health and Safety performance of organizations and to cultivate a positive health and safety culture. Please contact our Occupational Health Promotion and Education Team for project enquiry.

職業安全健康局  
Occupational Safety & Health Council  
 香港安健認證計劃  
Hong Kong Safety and Health Certification Scheme

### Accredited Occupational Rehabilitation Specialist (AORS)

#### Hong Kong Safety and Health Certification Scheme

The Hong Kong Safety and Health Certification Scheme (HKSCHS) provides accreditation services to relevant OSH practitioners and competent persons to ensure that they possess the necessary qualifications and capability to perform the specified duties. The accreditation services would enhance their competency and safety performances, and at the same time provides a recognition to the industry.

#### Accredited Occupational Rehabilitation Specialist (AORS)

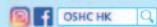
Occupational Safety and Health Council (OSHC) and insurance sector jointly launch the "Pilot Scheme on Return-to-Work of Injured Employees in Construction and Specified Industries" in 2017. This Pilot Scheme aims to provide timely treatment and rehabilitation services to employees who suffered from occupational injuries, so that they can recover as soon as possible and return-to-work (RTW) under safe circumstance. Hong Kong Safety and Health Certification Scheme now provides Accredited Occupational Rehabilitation Specialist accreditation services to the people who provides rehabilitation services to the employees. If you are interested for apply Accredited Occupational Rehabilitation Specialist, you can contact the Hong Kong Safety and Health Certification Scheme for details.

Accredited Occupational Rehabilitation Specialist Application Form (in Chinese Only)

#### Contact Us :

The Hong Kong Safety and Health Certification Scheme

Hotline: 2116 5050 Fax: 2151 7433 Email: certification@oshc.org.hk



Organizer:



香港建造業總工會  
H K C I E G U

Supporting Organization:



香港工人健康中心  
Hong Kong Workers' Health Centre

Sponsor:



肺塵埃沉着病補償基金委員會  
PNEUMOCONIOSIS COMPENSATION FUND BOARD

# Programme on Promoting Pneumoconiosis Prevention for Construction Workers

Construction Industry has long been an integral part of the Hong Kong economy and also one of the industries which most labour engaged in. With the recent economic recovery in Hong Kong, many infrastructure and urban renewal projects are currently in progress. In particular, the "Operation Building Bright" and the "Integrated Building Maintenance Assistance Scheme" projects have significantly increased the number of minor works in Hong Kong. However, if there are no appropriate precautions, or the occupational health and safety policies and laws are not strictly implemented and executed, frontline construction workers are put at risk, resulting in work injuries and occupational diseases.

To efficiently enhance workers' awareness on Pneumoconiosis (an occupational lung disease) and other occupational diseases, Hong Kong Workers' Health Centre, with the great support from the Pneumoconiosis Compensation Fund Board (PCFB), is going to initiate a series of education programs with the Hong Kong Construction Industry Employees General Union (HKCIEGU) in the districts where most constructions and building maintenances take place. This project aims at providing workers with knowledge of occupational risks to better protect their health and well-being.

## Duration:

1st Jan, 2019 – 31st Dec, 2019

## Target:

- Construction workers in small construction sites
- Construction workers and contractors from the Operation Building Bright project and other building maintenance and renewal related projects

## Details:

- "Pneumoconiosis Prevention Ambassador" Training
- Pneumoconiosis Prevention Talks
- Exhibitions at construction sites
- Medical referral for Pneumoconiosis and other related diseases

# Community Programme on Promoting Asbestosis Prevention

Hong Kong Workers' Health Centre, with the sponsorship from the Pneumoconiosis Compensation Fund Board (PCFB), will cooperate with the Hong Kong Construction Industry Employees General Union in the implementation of a two-year trans-regional health promotion activity, namely "Community Programme on Promoting Asbestosis Prevention". The aim of the campaign is to raise public awareness regarding the hazards brought about by asbestos and to increase concern for the health problems brought by asbestos.

In recent years, many demolition works were carried out on old buildings and these were accompanied by redevelopment projects, including building maintenance funded by the Operation Building Bright. These led to an increase in small to medium-sized engineering projects in Hong Kong. However, if these engineering projects were carried out using inappropriate methods which do not comply with the relevant legislation, asbestos-containing materials in the old buildings may be destroyed to release asbestos fibers, which may cause harm to workers and residents of the buildings.

Through activities such as organizing and training ambassadors in different regions, holding exhibitions, arranging training workshops and talks and distributing leaflets and posters, this promotional campaign allows front-line workers and residents of old buildings to learn more about asbestos and its harmful effects to human body, and also to locate such materials in old buildings. The campaign also teaches them the proper approach to treat materials that may contain asbestos so that they can take preventive measures to avoid inhalation of asbestos fibers released, which helps to lower the risk of these concerned persons suffering from asbestosis or other related diseases.

At the same time, the PCFB launched a project namely "Pneumoconiosis/Mesothelioma Medical Surveillance Programme" in November 2011. Not only is it a free programme for workers to participate, the PCFB will arrange voluntary participants who are working in the construction industry \* to do regular chest examinations, including chest X-rays and pulmonary function tests, in designate clinics. It is hoped that workers will learn about their own health situations as soon as possible, will be able to receive early treatments and make suitable arrangements in their living and working habits if they are unfortunately diagnosed with related diseases.

\* Workers involved in production of silica dust will be given priority to the examinations while other workers may have to wait for a longer period of time; workers who are required by law to have regular medical examinations (e.g. workers engaged in asbestos works and tunneling works or mine workers and quarry workers) will not be allowed to participate in this programme.

Sponsor:



肺塵埃沉着病補償基金委員會  
PNEUMOCONIOSIS COMPENSATION FUND BOARD



香港建造業總工會  
H K C I E G U



香港工人健康中心  
Hong Kong Workers' Health Centre