

OCCUPATIONAL HEALTH

Issue 134 • June 2008

職業健康

Ban Asbestos Campaign In Hong Kong



Hong Kong Workers' Health Centre



A Beneficiary of The Community Chest

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"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.

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Please observe a moment of silence for the injured workers and workers who have passed away due to occupational injury or disease.

In this springtime, we have seen many occupational accidents in newspapers involving injuries. The injured include a pig farmer in the New Territories, a sailor working on a ship, an employee of the Food and Environmental Hygiene Department, a machine driver, a construction worker, a worker on a barge, a landfill worker, a decoration worker, an airport technician, a printing factory worker and a worker in a laundry etc. There were also deaths during work, examples include a take-out delivery woman who died on her journey, a welder who was injured and killed by a steel board, two workers who fell off a high building, a steel worker who fell down the elevator shaft and died etc.

Firstly, let us all observe a moment of silence for the workers who passed away. As to the workers with work injury, they and their families will inevitably be concerned and worried, especially about their physiological and physical disabilities of various kinds. To workers whose lives have been dependent on their physical condition, they will feel confused and helpless about their future.

These reports serve as a reminder, to us promoters of the health of workers of the inadequacy of our work; to the government that colleagues in the Labour Department must probe into these accidents and casualties, increase patrols in the work place, and strictly monitor dangerous environments in order to improve the information feedback. The government should also let the Occupational Safety and Health Council conduct further discussions on the accidents and constitute a detailed and effective plan for occupational health promotion education.

Recently a newspaper article quoted results of a worldwide survey. Among private companies in Hong Kong, only 37% of the respondents carry out their social responsibilities and they were ranked as the last sixth in the world. Furthermore, amid the companies that took up

social responsibility, 71% mentioned that they would like to promote the balance of occupational health and life. The above percentage represents the negligence in the promotion of the social responsibility in Hong Kong's private companies, and in workers' occupational health as well.

In a city which has developed into the financial centre of the world, how much attention have we paid to workers' health? Do we have a long term strategy and objective for occupational health?

Comparably, the total number of occupational disease cases in 2007 was so surprisingly low that it even seemed to be against the global trend. Although the drop in certain occupational diseases was traceable, the numbers of the other diseases were seemingly far away from the reality.

There was finally encouraging news: the centre had requested the government to classify "mesothelioma" as a compensable occupational disease into the Pneumoconiosis (Compensation) Ordinance. The relevant regulations will be finalized and passed in the April 9th legislation conference. The success of this bill is attributed to the support from labour groups, representatives of the labour advisory committee, family members of the workers with mesothelioma who passed away; all of them made important contributions by actively contacting the centre, bravely making presentations and appealing to the legislators, government, members of the labour union. Without the first-hand feelings of the family members, the society's concern for the mesothelioma will not be aroused. We therefore also need to observe a moment of silence for the workers who had received no compensation and passed on due to this occupational disease. We thank the family members for their consideration for other workers with mesothelioma and willingness to face the media.

Ban Asbestos Campaign in Hong Kong

Hong Kong should prohibit the use, sale, intermediary trade and import of asbestos and asbestos products.

Asbestos has long been a concerned problem in the world. Previous studies have proved that after a long time of inhalation or by inhaling a large amount of asbestos particles, a person may have a chance of having asbestosis, lung cancer or mesothelioma. The international community is especially concerned about the more dangerous types of asbestos, including Crocidolite and Amosite.

In Hong Kong, therefore, in 1986 the Factories & Industrial Undertaking (Asbestos regulation) reinforced the control of the amount of asbestos particles in the work area, by prohibiting the spraying of asbestos in the work area, and prohibiting the use of any Crocidolite and Amosite, or anything that contains Crocidolite or Amosite. In 1996, Hong Kong also passed the Air Pollution Control Ordinance (Chapter 311), which prohibited the import or sale of Crocidolite, Amosite or related products in Hong Kong.

With more medical studies on other types of asbestos in the world, one finding proves that Chrysolite, previously deemed as safer than the other two kinds, is actually also carcinogenic. It is discovered in many countries that a considerable number of workers suffered from asbestosis, lung cancer and mesothelioma due to exposure to Chrysolite in their work place. Therefore, several countries began to ban the import, export or use of any type of asbestos for concerns of health of the public and workers. On top of that, occupational health promoters, environmental groups and professionals all request that the governments of all places should implement strict controls on how to dismantle buildings and vessels

containing asbestos, and how to dispose of the dismantled asbestos bulks, in order to reduce harm caused by asbestos to the public as well as to workers.

Relatively speaking, Hong Kong's discussion and concern about asbestos seemed to cease along with the establishment of the Air Pollution Control ordinance in 1996. Except for short discussions on the dismantlement of public housings which contained asbestos from time to time, there have been few people focusing on the amount of asbestos contained in old buildings or concerned about whether there is still import and use of Chrysolite in Hong Kong.

From 1950s to 1960s, asbestos use was at its peak in Hong Kong, but the relevant control regulations did not come into force until 1986. Houses, penthouses and constructions constructed before 1986 which require heat insulation most likely contained asbestos material. Even up till today, the government has not implemented the law to thoroughly prohibit import, sale and use of all types of asbestos or its products, thus at this moment, the health of workers in Hong Kong and the public are still threatened by asbestos.

Based on the above, we request the government to fully re-evaluate the use and import record of all asbestos and asbestos products in Hong Kong, to announce the relevant data to the general public and to ban the import, sale and use of asbestos and its products. In addition, the government should monitor the dismantlement and disposal of asbestos materials, implement more comprehensive laws and ordinances, and initiate more strict control in order to ensure that the health of workers and citizens are well protected.

Discussion of Couriers and Muscle Strain

Study on Occupational Health

Preface

Express delivery has been a booming industry for more than a decade in Hong Kong. As this service business grows rapidly, the number of employees in large international express companies or in the local delivery firms also mounts. Thus it is easy to find a courier on the streets or on other transportations. However, while the express delivery industry expands, we can easily discover many risks of occupational health. Had each and every one of the delivery companies duly taken up their social responsibilities, and taken their workers' occupational health into consideration? Along with the number of casualties of workers in lifting or moving materials progressing everyday, does the government have adequate law enforcement and promotion to help these workers reduce the chance of being injured due to manual handling?

Analysis

The result of this survey shows that a courier has a high risk of having muscle strain; the society should be concerned about the occupational health of couriers. Major outcomes of this survey consist of the following:

Objective of the study

The objective is to understand the working conditions and muscle strain of couriers, which includes working hours, walking time, tools used, types and weights of the postbag carried, and muscle strain of the couriers before and after taking this job.



Note: Many respondents carry more than one postbag while working; and the postbags are heavy.

Muscle strains of the couriers

- Nearly eight out of ten (79.2%) respondent couriers had problems in different parts of their bodies after taking this job, while only 6% of the respondents felt unwell before taking the job. 45.6% of the couriers reported as having physical problems to different extents in every part of the body.
- The courier have to walk for a long time on a daily basis (those who walk for 7-9 hours accounted for 43.6%, those who walk 4-6 hours accounted for 32.9%), the postbags were also very heavy (the maximum is 43 pounds; 14.9% of the postbags weigh more than 31 pounds, 18.8% of them weigh 21-30 pounds, 38.6% of the postbags weigh 11-20 pounds, 20.8% weigh 6-10 pounds), also, long walking times with heavy weights are required. With huge physical toil with no appropriate rest or training, along with a long time of improper posture at work, muscle strain happens to different body parts.
- Among all impaired body parts after taking the job, impairment to the shoulder and the upper arm are the most severe; 39.6% of the respondents reported impairment of various extents, this results from long time of carrying loads and the use of one-shoulder postbags (65.1%), causing the shoulder and the upper arm to be subjected to large pressure. 36.2% and 24.2% of respondents reported physical problems at foot and knee, this is caused by the long walking time, no sufficient rest and long time pressure on the feet and knees. Respondents who reported waist and back problems accounted for 29.5%, a percentage which arouses concern.
- 30.2% of the respondents reflected that the uncomfortable feeling of muscle or bones does not affect their working performance. 24.8% and 26.8% of the respondents answered that their daily life and sleep will be affected respectively. This reflected the possibility that the mounting muscle strain of these respondents will have more serious effect on the respondents if appropriate treatment is not given.

Conclusion

Currently there is not much data in the Occupational Safety and Health Council concerning the couriers in Hong Kong, nor is there lucid guidance. The only thing that is close is the weight limitation of a postbag required by the Hong Kong Post, which limits the weight of the postbag to be no more than 18 kilograms. Although certain express companies have established similar limits, the execution of these limits is questionable. On top of that, the job of a courier mainly involves manual handling. One may question whether different express companies conduct risk evaluations for the couriers, and provide training on working postures and usage of tools.

1. The companies have to fully ensure the occupational health of the workers

We think that even though express companies have done risk evaluation of manual handling for the couriers, it is still not enough to ensure the occupational health of the workers.

Therefore, we suggest that the delivery companies should carry out analysis on human engineering and collect statistics on occupational injuries and diseases to solve the current issues. In addition, the delivery companies should educate the couriers on proper working postures and usage of tools, especially on proper procedure for lifting heavy objects, shouldering and carrying objects on the back, pushing and pulling carts, and the handling of other tools etc.

In the course of the survey, quite a few couriers reported that there were no handcarts in the companies, thus if the couriers want to use handcarts to work, they have to buy it themselves. This mitigates their will to use handcarts. We suggest that the companies should provide their workers with adequate labour tools such as handcarts, protective equipment such as waist coverings and safety shoes etc, and to carry out body inspections on a regular basis, in order to protect and prevent the couriers from occupational injuries and muscle strain.

2. The government has to reinforce the laws

According to the statistics of the Labour Department,

physical impairments caused by lifting or moving materials accounts for a large percentage of all occupational casualties cases, and it has increased from 8,375 cases in 2005 to a considerable total number of 9,337 in 2006. The centre therefore urges the government to strengthen its supervision on risks of manual handling, to investigate the situation in the industries with high muscle strain risks, to enhance law reinforcement, and to actively improve the occupational health of the workers rather than allowing workers to seek help from occupational health clinics only after they have occupational diseases.

3. The government should increase the promotion of occupational health

In addition, the government should also increase the promotion of information about occupational health and safety of manual handling. The government should not only educate the delivery worker, but also teach the express delivery companies' management the importance of occupational health and safety. Taking the practices of some international delivery companies and OSH strategies of Hong Kong Post as examples, the post cabinets Hong Kong Post are using allow postmen to not carry all the load for one day with them at once; the international express delivery companies introduces to the new couriers their working requirements including proper postures for moving materials, instructions for using tools etc, on top of that, the companies will post the proper working postures in the work place, and explain the OSH related information to their employees before starting work in the morning regularly to strengthen their sense of occupational health and safety. All of these should be recommended by the government to delivery companies as reference.

Furthermore, only a few couriers who responded to the survey used to seek treatment from the occupational health clinic of the Labour Department when suffering from occupational diseases, this reflects that there is still room for improvement in promotion; some respondents stated that they hardly had free time that meets the opening hours of the Labour Department's occupational health clinic, thus we propose that the Labour Department may consider to reset the opening hours of the clinic, e.g. to accept reservation at night, for the purpose of meeting

requirements of all different workers in the society.

4. The sense of occupational safety of courier should be strengthened

With more than a quarter of respondents claiming to not knowing about or not having treated their physical problems, and with nearly one third of the respondents claiming that muscle or bone problems will not affect their working performance, we appeal to the courier that they should strengthen their knowledge about occupational safety, and be positive and initiative in communicating with their employers on OSH matters. When suspecting oneself of having a physical impairment, one should seek for medical help as soon as possible, in order to protect one courier's health and prevent one's impairment from deterioration.

Constraints of the survey

- The survey was carried out by convenience sampling but not random sampling, so the results of the survey can not represent the situation of all couriers.
- The survey was conducted by interviews, so there were no medical records or diagnoses to verify the muscle strain mentioned by the respondents.
- The weight of the postbags which respondents carried at the time of the survey might be the weight before or after delivery, so the weight cannot fully reflect the actual or usual situation.
- The survey does not exclude muscle strains caused by other factors such as doing housework or exercise.
- The survey could not dismiss the possibility of receiving muscle strains due to tight delivery time frame.
- The survey has not been able to use computers to analyze the causal relationship of each relevant factor and the muscle strains of couriers.

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Senior physiotherapist Mr. Li Ka Ming explains the common muscle strain problems in couriers.

Workers with Mesothelioma in Hong Kong

From the 1960s to 1970s in Hong Kong, asbestos is one of the most commonly used construction material in building/dismantling ships or constructions, many workers had the chance to be exposed to it. The result of a long time of hard work and exposure to asbestos fibres, was an occupational disease that cannot even be completely cured by modern medication - mesothelioma.

Looking into information of Hong Kong, Queen Mary Hospital's internal medical department has reported 4 mesothelioma related occupational disease cases as early as 1982, 3 of which involved workers with exposure to asbestos. The statistics of cancer in the Hospital Authority shows that in Hong Kong 168 people in total suffered from mesothelioma from 1993 to 2004. From 2001 to 2004, 44 people died from mesothelioma. Due to the lack of an efficient reporting system in Hong Kong, the professional medicals do not report when they identify a mesothelioma case. Meanwhile, mesothelioma is still not a compensable occupational disease. Therefore the above numbers cannot reflect the number of patients who suffer from mesothelioma because of their job. How many people receive mesothelioma each year because of their job remains unknown. Based on the experiences in western countries, the drastic soar in number of mesothelioma will occur 30-40 years after the period when asbestos has been largely used.

Analysis and discussion

Based on the historical data of western countries, asbestos was exploited most in Hong Kong between the 1960s and 1970s, thus the medical experts estimate the mesothelioma cases in total will begin to spiral up. Nevertheless, among the occupational injuries caused by exposure to asbestos, only the asbestosis patients have

been compensated, the mesothelioma patients on the other hand have been neglected.

1) Inadequacy of the current ordinance

In the "Protect the workers' health series - asbestos control" published by the Labour Department in 1981 (first edition), it clearly described the results of the inhalation of asbestos particles into the lungs: (1). Asbestosis; (2). Lung cancer; (3). Mesothelioma. Although asbestos was a popular construction material during the 1960s and the 1970s in Hong Kong, the government has never officially collected statistics of the total number of cases of mesothelioma. Also, mesothelioma has not yet been recognized as a compensable occupational disease. It should be known that as long as it is not a legitimate occupational disease, the attending doctor will not follow the procedure to introduce the mesothelioma patients to the Labour Department, the workers with mesothelioma and their family members would therefore be deprived of the deserved care and protection. We have a reason to believe that the current number of cases cannot reflect the full picture. At last, the Labour Department finally classed mesothelioma into the compensation ordinance for pneumoconiosis at 2008.

2) High medical expenses cause pressure

Concerning medical treatments, every mesothelioma patient does not only have to take anticarcinogens, but also has to pay for an expensive injection - ALIMTA. The whole medical process costs as much as 100,000 Hong Kong dollars. However, not every patient may be able to afford it. In some cases of the centre, some injured workers with mesothelioma had to borrow from relatives to pay for the medical cost. When the patients who have suffered much due to their illness

still have to take on this economic burden, they will be under a lot of pressure. At present, mesothelioma is listed in the compensation ordinance of pneumoconiosis, and the medical compensation will follow the current amount in the compensation items, which is maximum 200 HK dollars daily. For a mesothelioma patient who is facing over 100,000 HK dollars of medical expense, the amendment in the ordinance seems to be not enough.

Prohibit use of asbestos completely to protect the workers

Asbestos had been largely used in the 1960s and 1970s in Hong Kong. The Environmental Protection Department had published a report on asbestos use in Hong Kong in 1983; it showed that 4 years previous to the completion of the report, there have been 4 occupational diseases caused by asbestos. It was estimated at that time that there would be more such cases in the next 20 years. In 1986, the government finally passed chapter 59AD of the Factories and Industrial Undertakings (Asbestos) Regulation, in which it is required as such: to submit the working procedures of asbestos use, to prohibit the use of Crocidolite and Amosite, to prohibit use of asbestos products in spraying procedures; to reduce, separate and control asbestos content in the air, and provide personal protection and

cleaning workshops; to prohibit workers under the age of 18 to engage in work in which they are exposed to asbestos; to regularly organize body checks for the workers, and constituted the hygiene standard for asbestos use. In 1996, Environmental Protection Department passed the Air Pollution Control (Asbestos Administrated Regulation), which banned the import or trading of Crocidolite and Amosite as construction materials. In the same year, WHO's subsidiary organization IARC announced the carcinogenic nature of asbestos.

Hong Kong government passed relevant ordinances in 1986 and 1996 to control the use of Crocidolite and Amosite. Nevertheless, there is no legislation to prohibit the use of Chrysotile. To completely prohibit the use of any asbestos is the best option.

Currently, some western countries such as Sweden, Norway, Denmark, Holland, Finland, Germany, Italy, Belgium, France, Austria, Poland and Saudi Arabia have banned the use of all asbestos. Taiwan also announced the ban of use of products containing Chrysotile starting from January 2008. At the same time, the Environmental Protection Department in Taiwan is considering to ban the use of Chrysotile as a construction material. When will Hong Kong legislate to prohibit the use of all asbestos?



Press release of mesothelioma.

Introduction to Work Injury Rehabilitation Support Group in Guangzhou

The concept of support groups are not new in Hong Kong, there are all kinds of different support groups here, e.g. support groups of the physically disabled and of pneumoconiosis patients. These support groups serve as platforms for people who have different backgrounds, same situations and difficulties, to share, support each other, and work out better solutions together. The faculty of Social Sciences of The Chinese University of Hong Kong made some discoveries through researches: by 2000, there were 211 support groups of distinctive purposes in Hong Kong, and they were successful in helping the people in need to establish networks, understand and utilize the resources in a community. Members of the support groups extend emotional support to each other. Meanwhile, the service support groups are beneficial and significantly boost the development of a harmonious society.

Based on vast experiences in helping the work injured and pneumoconiosis patients to form support groups in the past 20 years, and considering the use of heavy labour due to the economic development in the Mainland China, work accidents occur easily. Thus, under the support of the Centre and Guangdong Provincial Work Injury Rehabilitation Centre, a group of people who would like to assist the injured to return to the community established the first work injury rehabilitation support group in Guangzhou in 2003.

Guangzhou Work Injury Rehabilitation Support Group has been established for 4 years. It has 20 key members & 400 members after the establishment, there have been many community visits, hospital visits, interest classes, lectures, tea gathering, welcome gathering, regular key member meetings, key member trainings, annual trips etc, the morale of the injured workers is strengthened, the moods of the workers with serious work injury are improved, people with similar experiences may offer each other assistance to go through their difficulties. All of these have brought about positive effects to the

workers with work injury on their way to returning to the community.

The key members in the support group are all workers with different levels of work injuries. By using their personal experiences and attending emotional support and volunteer working skills training, abilities of the key members have improved consistently. Through key member meetings, key members and members can arranged to participate in all kinds of voluntary work, such as monthly hospital visits to the severely disabled to talk to the patients. Through the establishment of the relationship with the workers with work injury, emotional support can be provided to encourage them to continually put effort in all rehabilitation treatments suggested by the doctors without giving up. The emotional support from people with similar experiences is essential to workers with burns and those with serious work injuries.

Guangzhou Work Injury Rehabilitation support group has developed well since its establishment, and the group visited Hunan Work Injury Rehabilitation Hospital by December this year to meet the local workers with work injury. The group members will carry out exchanges so that the experiences can be shared, and support can be given to the local community to help in rehabilitation work.

Rehabilitation to the workers with work injuries does not only mean the improvement of their physical conditions, but also includes the psychological rehabilitation and improvement of quality of life after hospitalization. In order to achieve this, with HP Ltd. Sponsored, Guangzhou work injury support group and Centre of Guangzhou-Hong Kong Work Injury Prevention and Rehabilitation of Center Injury conducted a basic computer skill training course, to help the workers with work injuries who were willing to return to work or apply computer skills on community network establishment. The course started on 20th November 07.

2008年7至9月訓練課程

職業安全健康局致力為各界人士及企業，提供高質素又多元化的職安健訓練課程，職安局因應當前社會的需求，舉辦合適的課程。本季新增課程包括叉式剎車導師重溫課程及環境衛生業技能提升計劃課程，以下為2008年度第三季職安局主要課程，歡迎大家踴躍報讀。

1 一般職業安全及健康課程

- 1.1 安全使用腳輪
- 1.2 安全使用腳輪(英文班)
- 1.3 職業意外調查
- 1.4 職業意外調查(英文班)
- 1.5 職業意外調查(醫護業)
- 1.6 室內工作場所的空氣質素
- 1.7 職業安全健康大使
- 1.8 整體範圍裝置、標準、安裝、使用及檢查
- 1.9 防護繫帶系統的範圍裝置安裝實踐
- 1.10 處理石礮基本安全
- 1.11 美容業的基本安全
- 1.12 工作場所傳染病的基本控制
- 1.13 預防工作場所的生物性危害
- 1.14 屋宇設備工程人員的基本安全
- 1.15 清潔人員的基本安全
- 1.16 密封空間工作的基本安全知識
- 1.17 密封空間工作的基本安全知識(英文班)
- 1.18 密封空間工作的基本安全知識重溫課程
- 1.19 醫療廢物的安全處理
- 1.20 拆卸工程工作安全
- 1.21 家庭傭工的基本安全(英文班)
- 1.22 裝修人員的基本安全
- 1.23 如何避免在工作中被鋼管咬傷
- 1.24 安全使用顯示屏裝置
- 1.25 基本急救
- 1.26 電氣設備工作安全
- 1.27 教育機構人員的基本安全
- 1.28 安老院護理人員的基本安全
- 1.29 電力安全
- 1.30 叉式剎車導師重溫課程
- 1.31 叉式剎車操作員課程(徒手班)
- 1.32 叉式剎車操作員課程
- 1.33 叉式剎車操作員課程(工餘班)
- 1.34 叉式剎車操作員課程(英文班)
- 1.35 叉式剎車操作員重溫課程
- 1.36 防火安全(商業)
- 1.37 防火安全(製造業)
- 1.38 防火安全(建造業)
- 1.49 防火安全(娛樂場所)
- 1.40 一日制氣體焊接安全訓練課程
- 1.41 氣體焊接安全訓練重溫課程
- 1.42 化學品安全處理
- 1.43 家務助理員的基本安全
- 1.44 家務助理員的基本安全(英文班)
- 1.45 危害識別活動
- 1.46 建造工地的危害識別訓練(尼泊爾文)
- 1.47 酒店業的基本安全
- 1.48 起重機械及起重裝置的安全使用
- 1.49 升降機及自動電梯安裝和維修的安全
- 1.50 通訊人座及預防方法課程
- 1.51 升降機及自動電梯安裝和維修的基本安全
- 1.52 人力搬運及搬運
- 1.53 人力搬運及搬運(英文班)
- 1.54 安全使用流動式鋸質通車
- 1.55 建造業強制性基本安全訓練課程
(建造業平安哨重溫課程)
- 1.56 建造業強制性基本安全訓練重溫課程
(建造業平安哨重溫課程)
- 1.57 裝修業強制性基本安全訓練課程
(裝修業平安哨重溫課程)
- 1.58 裝修業強制性基本安全訓練重溫課程
(裝修業平安哨重溫課程)
- 1.59 建造業強制性基本安全訓練重溫課程
(建造業平安哨重溫課程)(英文班)
- 1.60 人力搬運及搬運(管理階層)
- 1.61 安全網架
- 1.62 安全網架(英文班)
- 1.63 辦公室人體功效學
- 1.64 職業健康工作坊
- 1.65 辦公室安全

- 1.66 個人防護設備
- 1.67 復舊器材及自動外置式心臟去纖維器動靜的使用
- 1.68 起重裝置及吊鉤的安全操作
- 1.69 復舊器材的使用
- 1.70 道路工程工作安全
- 1.71 會議展覽行業工作安全
- 1.72 斜坡維修工作安全
- 1.73 斜坡維修工人的基本安全
- 1.74 「如何減少工作壓力」
- 1.75 安全梯工程序
- 1.76 懸空式腳架工作安全
- 1.77 高空工作安全
- 1.78 船上工程督導員安全訓練(貨物處理)課程
- 1.79 SS飲食業整理
- 1.80 SS辦公室整理
- 1.81 SS實務工作坊

2 職業安全健康督導員證書課程

- 2.1 單元式安全健康督導員課程
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 - 2.12 基本安全管理(英文班)
 - 2.13 基本防止意外
 - 2.14 基本防止意外(英文班)
 - 2.15 基本職業健康
 - 2.16 基本職業健康(英文班)
 - 2.17 建造業工作安全
 - 2.18 建造業工作安全(英文班)
 - 2.19 航空業工作安全
 - 2.20 飲食業工作安全
 - 2.21 汽車維修業工作安全
 - 2.22 貨棧業工作安全
 - 2.23 電子業工作安全
 - 2.24 環境衛生業工作安全
 - 2.25 碼頭業安全訓練
 - 2.26 物流業工作安全
 - 2.27 製造業工作安全
 - 2.28 工場環境衛生(製造業)
 - 2.29 零售業工作安全
 - 2.30 造船業工作安全
 - 2.31 土地衛生及環境
 - 2.32 社會服務業工作安全
- 2.2 安全健康督導員(建造業)課程
- 2.3 安全健康督導員(醫護業)
- 2.4 建造業安全督導員新增課程
- 2.5 製造業安全督導員新增課程

3 合格證書課程

- 3.1 「合資格急救人員」專業證書課程
- 3.2 「合資格急救人員」專業證書複修課程
- 3.3 安全處理醫療廢物合格證書課程
- 3.4 密封空間工作安全合格證書課程
- 3.5 密封空間工作安全合格證書重溫課程
- 3.6 安全運送危險品合格證書課程
- 3.7 危險化學品的安全管理
- 3.8 顯示屏高設備評估合格證書課程
- 3.9 顯示屏高設備評估合格證書課程(英文班)
- 3.10 電力裝置安裝及維修工作安全
- 3.11 實務助理員的職安健訓練員課程
- 3.12 化驗室安全
- 3.13 安全使用激光
- 3.14 體力處理操作合格證書課程
- 3.15 工務維修評估合格證書課程
- 3.16 輻射防護合格證書課程
- 3.17 安全網架訓練
- 3.18 《建造業工作安全文化指數調查》工作坊
- 3.19 流動式鋸時的選擇與裝置合格證書
- 3.20 職業安全及健康訓練員
- 3.21 安全使用X光攝影儀器(工業及醫療應用)

4 職業安全及健康管理課程

- 4.1 建造設計管理工作坊
- 4.2 持續進步安全管理培訓計劃(安全審核員)
- 4.3 危機管理
- 4.4 職業安全的早工作坊
- 4.5 教育機構的安全管理制度
- 4.6 工作檢查管理
- 4.7 工作檢查管理(建造業)
- 4.8 職業安全健康評估(醫護業)
- 4.9 資訊科技在職業安全的應用
- 4.10 職業安全管理
- 4.11 職業安全管理(英文班)
- 4.12 醫療界管理人員的職安健管理
- 4.13 醫療界高層管理人員的職安健管理
- 4.14 建築項目經理的職安健管理
- 4.15 心理學應用於安全管理
- 4.16 安全審核
- 4.17 風險評估
- 4.18 風險評估(英文班)
- 4.19 社會服務業工作場所風險管理工作坊
- 4.20 獨立安全審核員簡介課程
- 4.21 組織安全委員會的基本課程
- 4.22 中小型企業安全管理工作坊
- 4.23 職安健管理推廣工作坊
- 4.24 預防性壓力管理培訓課程
- 4.25 次承運商的職業安全管理
- 4.26 職務公幹安全管理
- 4.27 安全行為工作坊

5 鍋爐安全課程

- 5.1 水管式鍋爐安全課程
- 5.2 火管式鍋爐安全
- 5.3 電力加熱式鍋爐安全
- 5.4 蒸氣容器的安全操作

6 技能提升計劃課程

- 6.1 物業管理業
 - 6.1.1 緊急事故應變措施及處理方法
 - 6.1.2 職業安全知識
 - 6.1.3 防火訓練課程
- 6.2 園藝花藝業
 - 6.2.1 園藝業職業安全及健康知識課程
- 6.3 市集營銷業
 - 6.3.1 市集營銷業個人衛生與職業健康
- 6.4 環境衛生業
 - 6.4.1 環境衛生業緊急事故應變處理
 - 6.4.2 環境衛生業職業健康

報名及查詢：

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香港北角高賓道28號康樂中心18樓(北角港鐵站A4出口)
電話：2311 3322 傳真：2151 7428

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九龍觀塘滿貫道1號地下1室(中環角港鐵站B5出口)
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電子郵件：trg@oshc.org.hk
職安資訊傳真服務：2316 2576
網址：www.oshc.org.hk

有興趣人士可瀏覽本局網址www.oshc.org.hk下載有關課程資料及報名表格

索取訓練課程手冊表格

請傳真回：2151 7428

種類(請選其一)： 個人

機構

姓名： _____ (中文) _____ (英文)

機構名稱： _____ (中文) _____ (英文)

郵寄地址： _____

聯絡電話： _____ 傳真號碼： _____ 電郵： _____

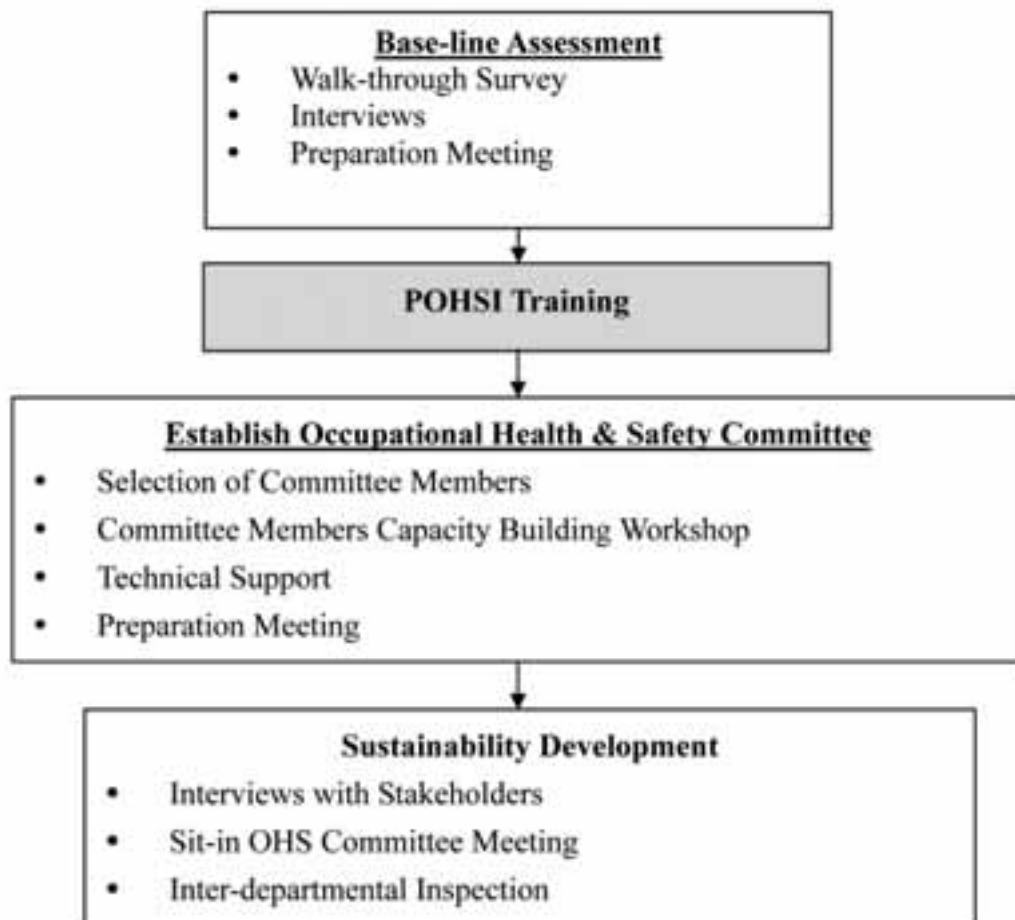


“Participatory Occupational Health & Safety Improvement” Service

POHSI is the abbreviation of “Participatory Occupational Health and Safety (OHS) Improvement”. This method uses good examples of OHS improvement collected from different workplaces to first broaden the views of participating workers. It also allows workers to inspect their workplaces and hold group discussions to voice out their opinions and suggest practical suggestions for improvement of OHS in enterprises. Through the communication and cooperation between the workers and management team, the OHS of enterprises can be improved, leading to a win-win and continuous development.

This popular method of thinking (active discussion) and action may bring about inexpensive continuous improvements to occupational health and safety through the use of suitable technology.

Flow chart of POHSI



Interested parties please contact Mr. Trevor Sun or Ms. Anna Li at (852) 2725-3396 for more details.