

14.1.2013

Division of responsibility for
Occupational Safety and Health

SLIC 2012 Campaign on psychosocial risks – Country report II

FINLAND

| Sector | Total number of inspections (inspection visits) | Number of follow-up inspections (part of total number) | Number of inspected companies or institutions | Number of inspections (Size of worksite 1-9) | Number of inspections (Size of worksite 10-50) | Number of inspections (Size of worksite >50) |
|---------------|---|--|---|--|--|--|
| Health | 222 | 2 | 123 | 40 | 170 | 8 |
| Services | 32 | - | 32 | 23 | 9 | - |
| Transport | - | - | - | - | - | - |
| Other sectors | 46 | 2 | 32 | 3 | 31 | 8 |
| Total | 300 | 4 | 187 | 66 | 210 | 16 |

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|--|----------------------------|------------|
| 1. Had the employer made a psychosocial risk assessment? | yes | 76 % (228) |
| | no | 24 % (72) |
| 2. Psychosocial risks considered in the risk assessment? | frequent changes | 46% (104) |
| | workload | 91% (207) |
| | diffuse expectations | 45% (102) |
| | night/shift work | 59% (134) |
| | threats, violence | 97% (221) |
| | relations | 95% (216) |
| | stress/other risks | 30% (68) |
| 3. Participation in making the risk assessment? | employees | 99% |
| | experts | 48% |
| | employees' representatives | 57% |
| | others | 18% |
| 4. Actions needed concerning psychosocial risks? | yes | 57% |
| | no | 43% |
| 5. Actions taken by the employer after the risk assessment? | preventive | 71% (158) |
| | mitigating | 89% (200) |
| | remedial | 82% (183) |
| 6. Did the risk assessment comply with the legal requirements? | yes | 53% (159) |
| | partially | 33% (99) |
| | no | 13% (39) |
| 7. Actions of the labour inspection | advice (only) | 8% (23) |
| | inspection notice | 72% (211) |
| | injunctions | 13% (38) |
| | prohibition | - |
| | fines | - |
| | prosecution | - |
| | other actions | - |

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CENTRAL OBSERVATIONS

The results show that the employer had made an assessment of psychosocial risks in 76% of the inspected workplaces. Risk assessment was more common in larger workplaces and also in workplaces which were part of a larger unit, such as a municipality. It could also be seen that risk assessments were common at workplaces to which labour inspection actions had been directed already in previous years.

In the risk assessments employers had often used a systematic method that guides the employer to identify the typical workload factors in the sector concerned. The workload factors most often identified were violence or the risk of violence by customers (97%), strain from human relations (95%), volume of work and time pressure (91%) and night work/shift work (59%).

In inspections in the health and social sector it especially appeared that psychosocial strain is caused by deficient personnel resources, personnel turnover and difficulty to get substitutes. The employees were also strained by excessive responsibility and constant alertness. The inspections also revealed the psychosocial strain perceived by supervisors. The supervisors spent an extensive part of their working time on securing personnel resources, ensuring the normal functions, organising constant changes, substituting for their superiors and even substituting for personnel in the constant shortage of stand-ins. It was also perceived that shortcomings in the physical work conditions at the workplace caused harmful psychosocial strain.

External experts had been used in 48% of the workplaces where risk assessment had been made. The workplaces had usually used the expertise of occupational health care personnel and the workplace survey carried out by occupational health care. Using the assistance of occupational health care was more frequent in the public sector workplaces than in the private sector. Employees participated almost always in making risk assessments.

The risk assessment did not meet the statutory requirements in 13% of the cases and met them only partly in 33% of the cases. Frequently, the assessment of psychosocial risks was not update or it was not adequately comprehensive. Also typically, the risk assessment process was unfinished and no conclusions had been made on the basis of it. The employers often wanted more information and practical tools for carrying out the risk assessment and on the measures to be taken as the result of it.

The psychosocial risks required actions to be taken in 57% of the workplaces. It was typical of these workplaces that the employer had not systematically taken adequate measures to prevent harmful workload. The employers had taken temporary actions to solve emerging problems but they had no systematic approach to managing psychosocial risks. Lack of knowledge and skills or resources was generally experienced as the greatest obstacles to the management of psychosocial risks.

The employers had taken preventive measures in 71% of the workplaces, such as reorganising work, clarifying work processes, reconsidering work dimensioning or developing the supervisory work. Mitigating measures, such as increased training, work pauses or social support had been taken in 89% of the workplaces. Remedial measures had been taken in 82% of the workplaces, such as practices of early support, support of occupational health care, rehabilitation and support for returning to work.

To remedy the defects, the inspector gave in 72% of the inspections written advice on how to eliminate or correct the non-complying condition. In 13% of the inspections the inspector gave an improvement notice with deadline.