

## HEALTHY WORKING IN THE HORECA SECTOR — PREVENTION OF PSYCHOLOGICAL AND ERGONOMIC STRAIN: A TARGETED CAMPAIGN OF THE AUSTRIAN LABOUR INSPECTORATE (AUSTRIA)

**Type:** Labour inspection

**Time frame:** 2011-12

### 1 Description of the initiative

#### 1.1 Introduction

High rates of sick leave and early retirement are particularly common in the hospitality sector, with MSDs and psychological illnesses among the main causes. A study based on data from the Working Climate Index (Arbeitsklimaindex) and the Health Monitor (Gesundheitsmonitor) of the Upper Austrian Chamber of Labour identified the workplace hazards (mostly relating to physical strain) that are most commonly reported by workers in the hospitality sector. These include prolonged standing at work, forced postures or positions, asymmetrical (one-sided) physical strain, demanding sustained physical exertion, irregular and excessively long working hours, and constant client contact.

The research showed that 62 % of employees suffered from back problems, while 58 % experienced muscle tension in the neck and shoulder area. More than half (55 %) experienced headaches and migraines, while 40 % reported pains in their legs. Most of these employees attributed these health conditions to their work.

The initiative to address this problem was developed under the Austrian Health and Safety Strategy 2007-2012.

#### 1.2 Aim of the initiative

This was an initiative created by the Austrian Labour Inspectorate and included targeted labour inspections in the hotel and hospitality sector over a 2-year period.

The aim of the initiative was to promote the prevention of psychosocial and ergonomic risks and resulting health problems among workers in the hospitality industry and, in the long-term, to reduce the prevalence of these health problems in the sector. The initiative also sought to improve the implementation of workplace risk assessment, health and safety documentation, and the application of the principles of risk prevention, as provided for in the Workers Protection Act. In addition to reducing the physical risks associated with MSDs, the initiative was intended to support the implementation of the 2012 European Inspection Campaign, 'Prevention of psychosocial risks'.

The initiative targeted various groups of employees (mixed age/gender groups, migrant workers, part-time/full-time/temporary workers, etc.). The hospitality sector is mainly composed of small and medium-sized enterprises (SMEs), which pose particular challenges in terms of awareness and implementation of workplace risk assessments. This is due to a frequent lack of financial resources, time and knowledge to carry out such assessments.

### 1.3 Organisations involved

The Austrian Labour Inspectorate is part of the Federal Ministry for Labour, Social Affairs, Health and Consumer Protection. It is responsible for controlling the implementation of regulations on worker protection in businesses and construction sites. Its responsibilities are laid out under the Law on Labour Inspection 1993 (Arbeitsinspektionsgesetz 1993), and it also provides guidance in this context.

### 1.4 What was done and how

The initiative consisted of two phases. Firstly, labour inspectors carried out control and guidance visits to a sample of businesses. Between August 2011 and January 2012, 112 establishments with accommodation and 85 hospitality enterprises without accommodation were seen. The visits revealed a greater need for guidance among those hospitality enterprises without accommodation. During the second phase, between February and November 2012, 187 hospitality enterprises without accommodation were inspected. Of these 187, 81 had already been visited during the first phase, and this follow-up inspection checked whether or not the deficiencies identified in the first phase had been addressed. For the remaining 103 enterprises, which were visited for the first time, the inspection compared their occupational safety aspects with those of the businesses already inspected. Each visit lasted an average of 2.5 hours, with one third of the assessments carried out by two inspectors and the other two thirds by one inspector.

Different tools were used for each phase of the inspections. During the first phase, a standardised survey was carried out among employers, to gather information on the protection of workers in four areas (reception, housekeeping, kitchen, service), and to evaluate the quality of workplace risk assessments and the provision of information to workers. Survey questions addressed the risk assessment methods applied, workers' access to health and safety documents and measures adopted to prevent physical and psychological strain. For MSD risk factors, the inspection assessed issues such as the management of time pressure and heavy workloads, ergonomic workplace design and the availability of transport aids.

During the second inspection phase, standardised interviews were carried out with both employers and workers. The inspectors interviewed two employees in every workplace, one female and one male, from the kitchen staff and service staff. Employees were interviewed without their employer or manager present to encourage them to be more forthcoming.

The second phase concentrated on psychosocial risks, some of which are also considered relevant for MSDs (e.g. time pressure). It assessed whether measures were in place to manage work organisation, workload and time pressure, night/shift work, conflict situations and complaints, and a negative work atmosphere. Interviews with both employers and workers were generally standardised, and they addressed the practical implementation of measures and the perceptions of the measures, their functioning and their effectiveness. The use of the same interview questions allowed for an assessment of whether perceptions were similar between workers and employers.

During the visits, labour inspectors also distributed information on the assessment and prevention of physical and psychological risks, the prevention of accidents and the organisation of working time. Alongside the initiative, several events on the topic of health and safety at work in the HORECA sector were organised. The results of the inspection campaign were presented in March 2013 at the final conference of the EU Committee of Senior Labour Inspectors (SLIC) 2012 campaign on psychosocial risk assessments.

An innovative element of the inspections was the inclusion of workers' perceptions of the measures implemented. Comparing employers' and workers' views on risks and prevention measures provided an insight into the effectiveness of the measures (see section 2.5 below).

An important feature of this initiative was the holistic approach adopted, in which both physical and psychosocial risks were addressed, maximising the potential benefits from the inspections and the advice given.

## 1.5 What was achieved

The control visits during the first phase revealed a total of 1,008 infringements, of which 775 related to technical, hygienic and occupational health aspects, and 223 were in the areas of working time, maternity protection, and protection of children and young people.

The interviews carried out during the visits allowed the labour inspectors to gain insights into the drivers of positive safety and health measures:

1. More prevention measures were implemented in enterprises that were more effective in internal communications, worker recognition and responding to worker requests.
2. Employers who were well-informed about prevention measures and the legal background of occupational safety and health were more willing to discuss the situation openly with the inspectors. Their health and safety documents also reflected more adequately inspectors' findings on the ground.
3. Enterprises with more effective safety and health protection also showed a better understanding of gender and diversity management and organisational evaluation practices.
4. Enterprises that valued staff retention had a lower staff turnover, and enterprises whose workers had a higher average age were more likely to offer adequate safety and health protection measures.

In total, 40 % of the enterprises visited in the first phase had made considerable improvements by the second phase, in both general and specific measures, such as preventing frequent changes of work organisation/work procedures; addressing high workload and time pressure; managing night and shift work; changing working hours; managing atypical forms of employment; and managing difficult situations. These improvements were attributed to the targeted guidance and information on legal obligations provided by the labour inspectors during their visits. The table below shows a higher level of awareness among workers, as well as better health and safety management among those enterprises that were inspected twice.

Adequate information for workers — inspected 1 × (during control phase I OR II)	62 %
Adequate information for workers — inspected 2 × (during control phases I AND II)	80 %
Committed to protecting employees' health and safety — inspected 1 × (during control phase I OR II)	84 %
Committed to protecting employees' health and safety — inspected 2 × (during control phase I OR II)	91 %

## 1.6 Success factors and challenges

The main success factor was the application of follow-up inspections. This allowed for an assessment of the implementation of the guidance provided by the inspectors. Another important success factor was combining enforcement with awareness-raising and guidance. The specific focus on the hospitality sector allowed for the targeting of SMEs, in which the awareness and implementation of workplace risk assessment is often inadequate. Targeting these enterprises also permitted additional insights to be gained into the drivers of and barriers to good occupational safety and health management (see section 2.5 above). Such sector-specific insights are important for the development of further measures.

## 1.7 Transferability

The initiative is transferable depending on the competencies and resources of the labour inspectorate.

## 2 National background

Data from the Eurostat Labour Force Survey ad hoc module shows that, in the 5 years from 2007 to 2013, the percentage of workers in Austria reporting some form of musculoskeletal disorder (MSD) remained essentially unchanged, increasing slightly from 66.3 % to 66.6 %, compared with an overall EU increase from 54.2 % to 60.1 % in the same period.

National legislation implementing the provisions of the Manual Handling Directive includes additional measures to protect young workers, pregnant workers and women in the first 12 weeks after childbirth. There are no other substantial additional requirements under Austrian law in respect of either the Manual Handling Directive or the Display Screen Equipment Directive.

Psychosocial risks are increasingly recognised as a contributory factor in workplace MSDs. In 2013, an amendment to the Health and Safety at Work Act (ArbeitnehmerInnenschutzgesetz, referred to as ASchG) came into force in Austria. The Health and Safety at Work Act requires employers to systematically identify hazards, assess the risks to workers' health and document any risk assessment carried out in writing. Based on the results of risk assessment, adequate measures to prevent risks must be determined and implemented. The amendment of the ASchG from 2013 stipulates that enterprises have to evaluate psychological stress in the workplace, develop and implement measures for the permanent reduction of psychosocial risks and evaluate their effectiveness. Psychosocial hazards are now defined in the law as those aspects of work design and work organisation, task design and job content, social climate, work schedule and work environment that have the potential to cause psychological harm. Experts, such as occupational psychologists, should be involved in the risk assessment process and the development of appropriate measures.

## References and resources

- (1) Austrian Health and Safety Strategy 2007-2012: Healthy work in the hotel and hospitality sector — prevention of psychosocial and ergonomic workload. Report on the focus of the Labour Inspection 2011 and 2012. Available at:  
<https://www.arbeitsinspektion.gv.at/cms/inspektorat/dokument.html?channel=CH3946&doc=CMS1518423903374>
- (2) Eurostat, European Union Labour Force Survey, ad-hoc modules 2007 and 2013. Available at:  
<https://ec.europa.eu/eurostat/web/microdata/european-union-labour-force-survey>

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