Ministry of Labour and Small and Micro Enterprise Development

Draft Policy on Employment Injury Benefits

Prepared by: Ideas to business
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Introduction

This draft policy is submitted to the Ministry of Labour and Small and Micro Enterprise Development for its consideration. Its objective is to modernise the legal and regulatory framework to treat with employment injury benefits for employees. The current legislation (The Workmen’s Compensation Act, Chap. 88:05 of the laws of the Republic of Trinidad and Tobago) (WCA) was enacted in 1960. At the time of its enactment, it brought substantial benefits to workers in the industrial sector. However, over the years the effect of changed economic circumstances has served to devalue the impact and relevance of the WCA. Today both trade unions and employers are agreed that the provisions of the WCA need to be revisited, repealed and replaced.

The most pressing deficiency of the WCA is its scope of application. The WCA only protects “workmen” defined as manual workers and other workers earning less than $5,000.00 per year. At the time of its enactment, the WCA would have protected a substantial number of employees in the industrial sector. However, with increases in the level of earnings from 1960 to today, the $5,000 dollars per year ceiling qualification for coverage under the WCA is far below the current minimum wage. This means that, except for manual workers, all other employees technically fall outside the scope of the WCA. This is not acceptable to stakeholders and the Government.

More recently, the Occupational Safety and Health Act (OSHA), Chap. 88:08 of the Laws of Trinidad and Tobago and the Occupational Safety and Health Authority was enacted. Its objective is to ensure as far as practicable a safe working environment for all employees, without exception. Employers now have a statutory duty to protect employees from unnecessary exposure to employment related injuries and diseases. This modern occupational safety and health legal framework makes it urgent to revisit the archaic law concerning employment injury benefits with a view to securing some level of harmonisation.
The Minister of Labour and Small and Micro Enterprise Development (MLSMED) and the Government of Trinidad and Tobago are committed to bring into law as early as possible, a new Act on employment injury benefits. The primary objective is to ensure that all employees who suffer an injury or illness arising out of and in the course of employment are entitled to adequate and prompt compensation for their medical care and loss of earnings capacity, without having to go to court or to prove that the employer was at fault.

**Process**

In keeping with principles of democracy and open government, the MLSMED adopted a highly consultative and participatory approach with its tripartite partners and other stakeholders to inform the policy for employment injury benefits.

The draft policy has benefited tremendously from the views, arguments and recommendations of the various stakeholders. While it is nigh impossible to secure full consensus on all issues involved in labour policy, the MLSMED is very pleased with the wide level of consensus among stakeholders in both Trinidad and Tobago on most of the issues that were discussed in the consultations. Where there are differences in positions and recommendations of stakeholders, the MLSMED has had to weigh very carefully the arguments submitted by the stakeholders. It has sought to determine which policy position is in the best interest of the national community.

In considering what is in the best interest of the national community, the MLSMED is guided by its decent work programme, job security of employees as well as the viability of employers’ businesses. It is mindful in particular of the need for protection of the most vulnerable sectors of employees and employers.

At the outset, the MLSMED is mindful of its obligation, as an active member of the International Labour Organization, (Trinidad and Tobago being host to the ILO’s Subregional Office for the Caribbean) to consider international labour standards in developing labour legislation. The MLSMED accordingly sought the assistance of the ILO in identifying a legal consultant within the Caribbean with specialised knowledge and experience in international labour standards and labour law to facilitate and guide the process of stakeholder consultations and development of the policy.

The review of the WCA formed the basis for the consultative process. The consultations started in February 2011 with an introductory stakeholders’ meeting of all stakeholders. This was followed by separate consultations with individual stakeholder groups in both Trinidad and Tobago.

Prior to the consultations with individual stakeholder groups, the MLSMED sent a list of issues to be considered in preparation for the consultations. This was intended to provide stakeholders with the opportunity prior to the consultations to develop group positions and to have structured and constructive consultations.
Fundamental Principles and International Labour Standards

The draft policy framework is guided by fundamental principles and international labour standards concerning employment injury benefits. These principles and standards were critically discussed during the consultations to assess their relevance to Trinidad and Tobago labour market and economic circumstances.

The principles considered at the consultations are as follows:

(i) an employer has a duty of care for the safety of his or her employees (now incorporated in the Occupational Safety and Health Act, Chap. 88:08);
(ii) this duty of care extends to all employees in all sectors of the economy, including the public sector and protective services;
(iii) an employer’s duty of care includes an obligation to ensure that the employee is not placed in a position, through overwork or otherwise, of undue exposure to mental stress;
(iv) an employer’s liability is strict and is not excused by reason of the fact that injury was caused by a fellow employee or defective machinery;
(v) an employer’s liability extends to both physical as well as negligent infliction of psychiatric harm to an employee;
(vi) where the duty of care is breached, the employer is liable for loss of earnings and medical expenses incurred by the affected employee that are reasonably foreseeable as a direct consequence of the breach.

The main (minimum) standards enshrined in the ILO Convention No. 121 (1964) on Employment Injury Benefits that were examined are as follows:

(i) legislation concerning employment injury benefits should, subject to possible limited exceptions, protect all employees, including apprentices, in the public and private sector, including co-operatives, and in respect of death of the breadwinner, his or her dependants;
(ii) the contingencies to be covered should include:
   (a) an injury or occupational disease arising out of and in the course of employment,
(b) incapacity of the employee for work involving suspension of earnings,
(c) total loss of earning capacity or partial loss likely to be permanent or loss of faculty (sight, hearing, a finger etc.), and
(d) loss of support suffered by dependants as a result of the death of the breadwinner;

(iii) occupational diseases to be covered under the unemployment injury benefit programme should be in a prescribed list of occupational diseases or there should be a general definition broad enough to cover all such diseases;

(iv) the benefits to persons protected should include:
(a) medical care and allied benefits, including dental care, nursing care, hospital accommodation and pharmaceutical and medical or surgical supplies and appliances;
(b) cash benefits; and
(c) in case of death from employment related injury or disease, normal cost of funeral;

(v) where a person suffers total disablement or substantial loss of earning capacity that is likely to be permanent, the cash benefit should take the form of periodical payments;

(vi) where a person dies from an employment related injury or occupational disease, the cash benefit to his or her dependants should take the form of periodical payments;

(vii) where the person suffers partial loss of earning capacity likely to be permanent but not substantial, the cash benefit may be a lump sum payment;

(viii) the rates of cash benefits should be reviewed periodically following substantial changes in the general level of earnings resulting from inflation;

(ix) benefits may be suspended where
(a) the person is absent from the territory;
(b) the person is maintained at public expense;
(c) the person made a fraudulent claim;
(d) the employment injury was caused by the person’s criminal act;
(e) the employment injury was caused by voluntary intoxication or by serious and wilful misconduct of the person concerned;
(f) the person concerned, without good cause, neglects or fails to make use of the medical care and allied benefits or the rehabilitation services placed at his or her disposal; and

(g) where the surviving spouse is living with another person as spouse;

(x) where a benefit is refused or is unsatisfactory, the claimant should have the right of appeal.

(xii) representatives of persons protected, employers and public authorities should participate in the management of the employment injury benefit scheme or be associated with it in an advisory and monitoring capacity.
Considerations guiding the Policy

It has to be emphasized that the draft policy, while guided by international labour standards, takes into consideration relevant circumstances concerning the labour market and other socio-economic factors prevailing in Trinidad and Tobago.

Particular attention was paid to:
(a) the decent work agenda of the Government of Trinidad and Tobago,
(b) the rights of workers,
(c) the need for the protection of job security,
(d) the need for employers to maintain viable businesses, and
(e) the need for a fair and equitable balance between the rights and obligations of workers and employers.

The draft policy is based, as far as practicable, on the following considerations:
(a) consensus among stakeholders on the practicability of the international labour standards and principles within the context of the prevailing conditions in Trinidad and Tobago;
(b) alignment with the objectives of the MLSMED’s decent work agenda/programme;
(c) consistency with public interest/policy;
(d) the imperatives of the labour market and general economic conditions;
(e) principles of administrative efficiency, effectiveness and non discrimination; and
(f) respect for the tripartite model of governance on labour issues.

Special Issues

Scope of Application

In keeping with international labour standard and the consensus of stakeholders, the policy and legal framework in relation to employment injury benefits protects all employees, including apprentices, in the public and private sectors, including co-
operatives, whether employed in the industrial sector, agricultural sector, services sector, or otherwise, whether employed as a casual employee or not, whether employed by a relative or not, and in the case of the death of a breadwinner, all dependants of that breadwinner. Consistent with the consensus among stakeholders, there is to be no exception to the scope of application. All persons in an employment relationship with an employer are protected.

Definitions

The following terms will be clarified in legislation to remove existing ambiguities and other difficulties.

- **Arising out of and in the course of employment**

The term “injuries arising out of and in the course of employment” includes all injuries sustained by an employee while on duty or engaged in activities for the benefit of his employer. It includes:

(a) accidents, regardless of their cause, sustained during working hours at or near the place of work or at any place where the worker would not have been except for his employment;

(b) accidents sustained within reasonable periods before and after working hours in connection with transporting, cleaning, preparing, conserving, storing and packing tools or clothes;

(c) commuting accidents;

(d) accidents sustained while working at home for the employers’ benefit with the authorisation of the employer;

(e) accidents sustained during unpaid participation by the employee in voluntary and social programmes of the employer;

(f) accidents sustained by persons serving in voluntary organizations dealing with suppression of crime, saving lives, protecting property, combating natural disasters or the protection of environment.

For example, the Environmental Management Authority has organised a clean up campaign at the Caura River over a weekend. It has invited its employees to participate in this campaign. An employee was not given adequate safety boots and slipped and damaged his back when stepping on a slippery rock in the river. The
accident for purposes of the new policy is considered as arising out of and in the course of his employment, even though the employee was not required as part of his formal duties to work on weekends in clean up campaigns organised by the EMA.

It is important to note that the employee is also protected against all employment related injuries, including both physical and psychological. For example, a police officer on duty at the Tunapuna Market, in an attempt to protect the public from an imminent attack by armed bandits, has shot and killed the bandits. The police officer is traumatised, unable to work for two weeks and requires psychological counseling. Under the new policy, the police officer is to be compensated for any loss of earnings while unable to work and provided with the psychological counseling needed.

Accidents, which occur while an employee is on a frolic of his own during working hours, would not be deemed an accident arising out of and in the course of employment. For example, an injury to an employee (who is based in an office in Port of Spain) while on his way to Maracas Bay for a bake and shark for lunch without any permission from his employer would not be considered as arising out of and in the course of his employment.

Diseases arising out of and in the course of employment include diseases contracted as a result of exposure to substances or dangerous processes, trade or occupations in the workplace. The disease is presumed to arise out of and in the course of employment, where the exposure occurred within a specified period. The period of exposure depends on the nature of the disease.

- **Commuting accident**

Commuting accident means an accident sustained while travelling on work related duty and includes accidents sustained while on the direct way between offices or branches of business of the employer. It is not necessary for an employee to have reported to work for an accident to be deemed a commuting accident.
For example, an accident sustained by an Immigration Officer while traveling to take up duty in Tobago at the request of his employer is considered a commuting accident, even though the Officer has not yet reported for duty.

However, an employee, who sustains an injury while using the employer’s vehicle on his way to a restaurant after work, is not considered to be in a commuting accident.

- **Employee**

The definition of employee is harmonised with that of OSHA. This includes public officers, members of the protective services, teachers, domestic workers and managers. The overarching principle is that no employee in any sector of the economy is to be excluded.

Sportspersons, entertainers and dependent contractors in an employment relationship are employees. Persons engaged in unpaid work in voluntary organisations concerned with the suppression of crime, protection of life and property, combating natural disasters and protecting the environment are also considered employees for purposes of employment injury benefits.

It is to be noted that there is an increasing trend for persons to engage in disguised forms of employment, which seek to exclude persons who are in fact in an employment relationship from being considered to have an employer-employee relationship. This reprehensible practice is intended to exclude the employee from protection of employment law. This policy protects all employees, regardless of the form of disguise used to characterise the relationship. Once there is an employment relationship, the person engaged would be protected under the policy.

Contract workers referred by employment agencies to other employers face difficulty in seeking compensation when they are injured on the job. The host or receiving company invariably takes the position that such workers are employees of the employment agency. Such employers are forced into taking this position because the standard employer’s liability insurance policy excludes such workers from the company’s coverage. This results in an injustice to the injured worker.
This policy removes this injustice. All persons in an employment relationship with an employer would be considered to be employees of that employer even though they may have been recruited by an employment agency. An employment relationship for purposes of employment injury benefits law is presumed where the employer is responsible for the payment of wages and the terms and conditions of employment, the safety of the working environment and the supervision of the employee.

The MLSMED does not anticipate any difficulties with the insurance companies. Representatives of the Association of Trinidad and Tobago Insurance Companies, with whom consultations were held, assured that insurance companies would operate in accordance with the law.

The definition of an employee does not include a self-employed person. Self-employed persons do not have an employer-employee relationship with anyone other than themselves. This does not mean that the self-employed person would be unprotected against risk of loss of earnings from employment related injuries. Where the self-employed person requires a licence to operate his or her business or occupation or trade, he or she would be required as a condition of the licence to have appropriate insurance coverage.

- **Employer**

The definition of employer is harmonised with that of OSHA. It includes persons who employ contract employees, dependent contractors and sportsmen and entertainers. The qualifying factor is that these persons must be in an employment relationship.

- **Employment relationship**

An employment relationship is presumed where one or more of the following indicators is present:

(a) the work is carried out according to the instructions and under control of another person;

(b) the work involves the integration of the worker in the organisation of the
enterprises;
(c) the work is performed solely for the benefit of another person;
(d) the work is carried out personally by the worker;
(e) the work is carried out within specific working hours or at a workplace determined by the party requesting the work;
(f) the work involves the provision of tools, materials and machinery by the party requesting the work;
(g) the relationship involves periodic payment of remuneration to the worker;
(h) the fact that such remuneration constitutes the worker's sole or principal source of income;
(i) there is recognition of entitlements such as weekly rest and annual holidays;
(j) or absence of financial risk for the worker.

- Dependant

The definition is clarified to ensure that no person, including non-relatives, living in the household of the employee and who is dependent upon the earnings of the employee at the time of his or her death, is excluded from benefits in respect of the employee’s death. It also includes dependent children and relatives of the deceased employee who do not belong to the household of the deceased employee.

Benefits

Where an employee is injured or sustains a disease arising out of or in the course of employment, his or her benefits include costs of medical care and allied benefits as well as cash benefits for incapacity for work, and loss of earnings. Where the injury results in death, his or her dependants shall receive compensation for the loss of support.

The eligibility for benefits is not subject to length of employment, duration of insurance or payment of contributions in the case of injuries. In the case of occupational diseases, there must be a minimum period of exposure to the contagion or agent to give rise to a claim. Thus, an employee is covered under any
employment injury employment programme from the first day of his or her
employment. Moreover, an employee’s coverage is not excluded during his or her
probationary period.

In addition, employment injury benefit is granted for the duration of the incapacity
for work or in the case of a death, throughout the state of dependency of the
employee’s dependants.

- **Medical care**

Where an employee suffers an employment related injury or disease, he or she is
entitled to medical care that restores his or her ability to work and to attend to his
or her personal needs. Where the employee cannot be restored to his or her job, the
employer should to the extent practicable provide alternative placement.

Medical care and allied benefits comprise:

(a) general practitioner and specialist in-patient care and out-patient care,
including domiciliary visiting;
(b) dental care;
(c) nursing care at home or in hospital or other medical institutions;
(d) maintenance in hospitals, convalescent homes, sanatoria or other medical
institutions;
(e) dental, pharmaceutical and other medical and surgical supplies, including
prosthetic appliances kept in repair and renewed as necessary, and
eyeglasses; and
(f) care furnished by members of such other professions as may at any time be
legally recognised as allied to the medical profession, under the supervision of
a medical or dental practitioner.

- **Cash benefits**

Where an employee is disabled, his or her cash benefit is calculated in accordance
with the following table in keeping with international labour standards:
<table>
<thead>
<tr>
<th>Category</th>
<th>Standard Beneficiary</th>
<th>Percentage of total previous earnings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporary or initial incapacity for work</td>
<td>Employee with spouse and two children</td>
<td>60%</td>
</tr>
<tr>
<td>Total loss of earning capacity or corresponding loss of faculty</td>
<td>Employee with spouse and two children</td>
<td>60%</td>
</tr>
<tr>
<td>Death of breadwinner</td>
<td>Surviving spouse with two children</td>
<td>50%</td>
</tr>
</tbody>
</table>

Where the partial loss of earning capacity is likely to be permanent but not substantial, the cash payment could take the form of a lump-sum payment. In all other cases where a periodical payment is required, the employer and employee may agree in exceptional cases for all or a part of the periodical payment to be converted into a lump sum corresponding to the actuarial equivalent.

Earnings are calculated on the basis of full remuneration of the employee including all allowances.

Cash benefits in respect of incapacity for work is paid from the first day in each case of suspension of earnings.

- **Injury resulting in unemployability or disfigurement**

Where the employee becomes unemployable as a result of the employment injury, he or she shall receive supplementary or special benefits to be awarded by the Industrial Court. For example, where a pilot loses a limb, his professional pilot licence may be revoked. In addition, where an employee is disfigured as a result of the employment injury, he or she may be similarly entitled to supplementary or special benefits.

- **Periodic review of benefits**
The MLSMED will establish a tripartite committee to periodically review and recommend changes to the rates of cash benefits. Adjustments of the benefits will take account of cost of living increases.

- **Non-assignment of benefits**

The current prohibition against assignment or attachment of the employment injury benefits to be received by an employee to a third party is maintained. However, this prohibition does not apply in respect of an advance paid by an employer pays to an employee on the understanding that such advance is to be repaid upon receipt of the benefit. In no event the employee is required to repay more than 50% of the benefit due to the employee.

- **Period for making claim**

Employees have a period of four (4) years from the date of the accident or diagnosis of the occupational disease to submit a claim for employment injury benefits.

- **Suspension of benefits**

A claim for employment injury benefits may be disallowed or suspended where:

(a) the person concerned makes a fraudulent claim;

(b) the employment injury is caused by a criminal offence committed by the person concerned;

(c) the employment injury is caused by voluntary intoxication or by the serious and wilful misconduct of the person concerned in circumstances where there is no negligence on the employer’s part regarding the supervision of the employee;

(d) the person concerned, without good cause, neglects to make use of the medical care and allied benefits or the rehabilitation services placed at his or her disposal, or fails to comply with rules prescribed for verifying the occurrence or continuance of the contingency or for the conduct of beneficiaries;

(e) the surviving spouse is living with another person as spouse.
Where the person concerned is overseas, he or she is required to provide a notarised life certificate every six months, failing which payment may be discontinued.

**Occupational diseases**

The definition and list of occupational diseases in OSHA should be applicable. A list of these diseases is attached at Appendix 1.

**Medical examination**

Where an employee gives notice of an employment related injury or occupational disease, the employer shall arrange for the employee to be examined free of charge by a medical practitioner. Where the employee is in receipt of an employment injury benefit, the employer may require the employee to submit for medical examination from time to time to assess his or her fitness to resume duty. All medical expenses will be borne by the employer.

Where an employee refuses, without good cause, to submit himself or herself for medical treatment or examination, the benefits paid to the employee under the employment injury programme may be suspended.

Where an employer arranges for an injured employee to be examined and or assessed by a medical practitioner, the employee shall have the right to receive a copy of all medical reports and assessments in relation to the examination.

Where there is a dispute regarding the employee’s condition or fitness for employment, upon application made by the employee or employer, the Industrial Court may refer the matter to an independent medical referee. The employer bears the cost of this examination.

**Compulsory insurance**
The MLSMED has considered the options available for the coverage of employment injury benefits. The options proposed were:

- compulsory employers’ liability insurance
- a fund, administered by tripartite partners, with financial contributions from employers;
- exclusive coverage by National Insurance Board under an expanded programme;
- a combination of compulsory employers’ liability insurance alongside the existing coverage by National Insurance Board.

The MLSMED considered these options on the basis of efficiency, effectiveness and administrative convenience and has opted for the combination of compulsory employers’ liability insurance alongside the coverage by National Insurance Board. In terms of efficiency and administrative convenience, the MLSMED was attracted to the option of exclusive coverage by National Insurance Board under an expanded programme. However, the MLSMED is mindful that, unlike many other Caribbean countries, the National Insurance Board does not fall under its remit. The MLSMED has found the Special Fund to be unattractive in that it would involve the creation of a costly and unnecessary bureaucracy.

Given the extended and improved coverage of benefits under this policy and the implications for the viability of employers’ businesses and the competitiveness of Trinidad and Tobago, the benefits enshrined in this policy and legal framework comprise the total of both the NIB benefits and benefits due under the employers’ compulsory insurance scheme. It should be noted that only employers’ financial contributions are to fund both NIB employment injury benefits and employers’ liability insurance. The need for workmen’s compensation insurance required by the Workmen’s Compensation Act is no longer necessary; it is to be replaced by employers’ liability insurance.

Employers and insurance companies are cautioned that the employers’ liability insurance must, as a minimum, be consistent with the provisions of the new legislation that would emerge from this policy framework. The liberal exclusions in current employers’ liability insurance contracts must be reconciled with the requirements of this policy. In addition, employers should consider the inclusion of coverage for pain and suffering caused by employment related injuries.
Administration and adjudication

The MLSMED notes that the Industrial Court is a specialised court to deal with employment issues, including matters relating to occupational safety and health. The MLSMED concurs with the views of stakeholders that it is only logical that jurisdiction for dealing with matters relating to the settlement of disputes concerning unemployment injury benefits should be transferred to the Industrial Court.

Every effort will be made to ensure that there is an efficient management and determination of claims before the Industrial Court, including case management and conciliation services.

The Industrial Court will be requested to ensure that procedures for payment of claims result in prompt settlement. The Industrial Court will have jurisdiction over employment injury matters that are filed after the enactment of the new legislation. Matters pending before the High Court at the time of the enactment of the new legislation would remain to be determined by the Commissioners (Marshall of the Court or Magistrate in the case of Tobago).

The MLSMED has taken note of the concerns of stakeholders of Tobago concerning access to justice in industrial relations matters and would expeditiously explore with other relevant Government agencies the feasibility of the early establishment of a branch of the Industrial Court in Tobago.

Review and monitoring

The Occupational Safety and Health Authority shall be charged with the responsibility of monitoring and reviewing the operations of the policy and legal framework for employment injury benefits. It shall be restructured accordingly and given the resources and administrative support required.
Summary of Reforms

(i) an extension of coverage from “workmen” to all employees, including unpaid persons engaged in certain voluntary organisations;
(ii) definition of employee to include every person in an employment relationship regardless of the designation of that person;
(iii) definition of employer to include a person who engages employees from an employment agency;
(iv) definition of arising out of and in the course of employment to include commuting accidents;
(v) an extension of coverage of dependants to include all persons in a state of dependency on the deceased employee;
(vi) extension of occupational diseases similar to those prescribed under OSHA;
(vii) improvement in cash benefits and medical care benefits in keeping with international labour standards;
(viii) periodic review of cash benefits to take into account cost of living increases;
(ix) harmonisation of benefits from employer’s insurance with National Insurance benefits;
(x) development of a concept of no-fault liability;
(xi) reduced circumstances for denial or suspension of benefits;
(xii) introduction of compulsory employers’ liability insurance with removal of the exceptions in standard policies;
(xiii) shift of adjudication from the High Court to the Industrial Court;
(xiv) extension of time to bring action for unemployment injury benefits from one year to four years from date of accident.
APPENDIX 1

LIST OF OCCUPATIONAL DISEASES

1. DISEASES CAUSED BY AGENTS

1.1. Diseases caused by chemical agents

1.1.1 Diseases caused by beryllium or its toxic compounds
1.1.2 Diseases caused by cadmium or its toxic compounds
1.1.3 Diseases caused by phosphorus or its toxic compounds
1.1.4 Diseases caused by chromium or its toxic compounds
1.1.5 Diseases caused by manganese or its toxic compounds
1.1.6 Diseases caused by arsenic or its toxic compounds
1.1.7 Diseases caused by mercury or its toxic compounds
1.1.8 Diseases caused by lead or its toxic compounds
1.1.9 Diseases caused by fluorine or its toxic compounds
1.1.10 Diseases caused by carbon disulphide
1.1.11 Diseases caused by the toxic halogen derivatives of aliphatic or aromatic hydrocarbons
1.1.12 Diseases caused by benzene or its toxic homologues
1.1.13 Diseases caused by toxic nitro- and amino-derivatives of benzene or its homologues
1.1.14 Diseases caused by nitroglycerin or other nitric acid esters
1.1.15 Diseases caused by alcohols, glycols, ketones
1.1.16 Diseases caused by asphyxiants; carbon monoxide, hydrogen cyanide or its toxic derivatives, hydrogen sulphide
1.1.17 Diseases caused by acrylonitrile
1.1.18 Diseases caused by oxides of nitrogen
1.1.19 Diseases caused by vanadium or its toxic compounds
1.1.20 Diseases caused by antimony or its toxic compounds
1.1.21 Diseases caused by hexane
1.1.22 Diseases of teeth caused by mineral acids
1.1.23 Diseases caused by pharmaceutical agents
1.1.24 Diseases caused by thallium or its compounds
1.1.25 Diseases caused by osmium or its compounds
1.1.26 Diseases caused by selenium or its compounds
1.1.27 Diseases caused by copper or its compounds
1.1.28 Diseases caused by tin or its compounds
1.1.29 Diseases caused by zinc or its compounds
1.1.30 Diseases caused by ozone, phosgene
1.1.31 Diseases caused by irritants: benzoquinone and other corneal irritants
1.1.32 Diseases caused by any other chemical agents not mentioned in the preceding items 1.1.1 to 1.1.31, where a link between the exposure of a worker to these chemical agents and the diseases suffered is established

1.2 Diseases caused by physical agents

1.2.1 Hearing impairment caused by noise
1.2.2 Diseases caused by vibration (disorders of muscles, tendons, bones, joints, peripherals blood vessels or peripherals nerves)
1.2.3 Diseases caused by work in compressed air
1.2.4 Diseases caused by ionising radiations
1.2.5 Diseases caused by heat radiation
1.2.6 Diseases caused by ultraviolet radiation
1.2.7 Diseases caused by extreme temperature (e.g., sunstroke, frostbite)

1.2.8 Diseases caused by any other physical agents not mentioned in the preceding items 1.2.1 to 1.2.7, where a direct link between the exposure of a worker to these physical agents and the diseases suffered is established

1.3 Diseases caused by biological agents

1.3.1 Infectious or parasitic diseases contracted in an occupation where there is a particular risk of contamination

2. DISEASES BY TARGET ORGAN SYSTEMS

2.1 Occupational respiratory diseases

2.1.1 Pneumoconioses caused by sclerogenic mineral dust (silicosis, anthracosilicosis, asbestosis) and silicotuberculosis, provided that silicosis is an essential factor in causing the resultant incapacity or death

2.1.2 Bronchopulmonary diseases caused by hard-metal dust

2.1.3 Bronchopulmonary diseases caused by cotton, flax, hemp or sisal dust (byssinosis)

2.1.4 Occupational asthma caused by recognised sensitising agents or irritants inherent to the work process

2.1.5 Extrinsic allergic alveolitis caused by the inhalation of organic dusts, as prescribed by national legislation

2.1.6 Siderosis

2.1.7 Chronic obstructive pulmonary diseases

2.1.8 Diseases of the lung caused by aluminium

2.1.9 Upper airways disorders caused by recognised sensitising agents or irritants inherent to the work process

2.1.10 Any other respiratory disease not mentioned in the preceding items 2.1 to 2.1.9, caused by an agent where a direct link between the exposure of a worker to this agent and the disease suffered is established.
2.2 Occupational skin diseases

2.2.1 Skin diseases caused by physical, chemical or biological agents not included under other items

2.2.2 Occupational vitiligo

2.3 Occupational musculo-skeletal disorders

2.3.1 Musculo-skeletal diseases caused by specific work activities or work environment where particular risk factors are present

Examples of such activities or environment include: (a) rapid or repetitive motion (b) forceful exertion (c) excessive mechanical force concentration (d) awkward or non-neutral postures (e) vibration Local or environmental cold may increase risk

3. OCCUPATIONAL CANCER

3.1 Cancer caused by the following agents

3.1.1 Asbestos

3.1.2 Benzidine and its salts

3.1.3 Bis chloromethyl ether (BCME)

3.1.4 Chromium and chromium compounds

3.1.5 Coal tars, coal tar pitches or soot

3.1.6 Beta-naphthylamine

3.1.7 Vinyl chloride

3.1.8 Benzene or its toxic homologues

3.1.9 Toxic nitro- and amino-derivatives of benzene or its homologues

3.1.10 Ionising radiations

3.1.11 Tar, pitch, bitumen, mineral oil, anthracene, or the compounds, products or residues of these substances

3.1.12 Coke oven emissions

3.1.13 Compounds of nickel
3.1.14 Wood dust

3.1.15 Cancer caused by any other agents not mentioned in the preceding items 3.1.1 to 3.1.14, where a direct link between the exposure of a worker to this agent and the cancer suffered is established.