

PRAISE:

Preventing Road Accidents and Injuries for the Safety of Employees

3rd Thematic Report: Fitness to Drive

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Fitness to drive

Structure of the report:

Part 1: Workplace Health Promotion

Part 2: Fatigue

Part 3: Alcohol and work related road safety

Part 4: Driving under the influence of illegal drugs or medicines and work related road safety

Each part covers existing legislation, includes examples of initiatives and case studies recommendations to the EU, to Member States and to the employers

Workplace Health Promotion

Driver related risk factors related to health:

Stress, fatigue, distraction, ageing staff, unhealthy diet, consumption of alcohol or prescription medicine or illegal drugs, preexisting diseases, smoking, lack of exercise

Professional drivers additional sector related health conditions: lower back pain, overweight, cardiovascular and respiratory disease, work-related stress

Absence of illness does not mean fitness!

WHP: Business Case

Benefits of WHP:

reduced absenteeism, fewer collisions, less material damage, less casualties, enhanced motivation, improved productivity, easier recruitment, reduced turnover, a positive and caring image

RoI regarding

absenteeism due to WHP: 1:2,5-4,8.

(Bödeker and Kreis, 2004)

WHP: Initiatives

1. Finnish Institute for Occupational Health: Optimal set of screening tests to detect truck drivers' health problem
2. Doc Stop: aims at improving medical care of haulage drivers in transit on European routes.



3. Get the risk out –Risiko Raus campaign in Germany

Fatigue

Fatigue is an important contributory factor in a large proportion of road crashes, especially while driving for work.

It affects not only drivers in the transport sector, but also drivings groups such as shift workers.



Many drivers who drive for work are not covered by regulations, such as self-employed drivers, non vocational drivers, van drivers

Fatigue: EU legislation

- Working time directive (2002/15/EC)
- Driving Time and Rest Period Regulation (EC/561/2006)
- Regulation EEC 3821/85 (Tachographs) amended 1998
- Enforcement of driving times and tachographs Directive 2006/22/EC
- Vehicle Safety Regulation 661/2009 : Lane Departure Warning for trucks and vans from 2013 on

Fatigue: Initiatives

- Geososta, Italy
- THINK! Driver tiredness campaign, UK
- ERIC project, EU co-funded project



INFO DAY: 20th May in this hotel

Alcohol and work related road safety

The business case for addressing alcohol impaired driving in the workplace is strong.

The vast majority of citizens with alcohol problems are employed full time. Employers can reap productivity gains and savings from a reduction in alcohol-related vehicle crashes.



Alcohol and Road Safety at Work: EU level

EU legislation, initiatives and guidance:

- EU Recommendation from 2001 on max. level of alcohol in the blood; 0.2 BAC for prof. drivers
- DG SANCO: EU Alcohol Strategy
- DG Employment: EU Strategy for Health and Safety at Work 2007-2012
- ITS Action Plan: alcolock devices (DG MOVE, DG INFO, DG ENTERPRISE)

Alcohol: good practice

National/local authorities:

Ireland: cooperation between the Road Safety Authority and the Health and Safety Authority to inform employers

Germany: „Young Driver“ road safety action in the local region of Gütersloh

Employers:

ILO's Code of Practice on Management of Alcohol and Drug-Related Issues in the Workplace

Italy: Azienda Transporti Veneto Orientale

Work related DUI: illegal drugs, medicine

Many illegal drugs and medicines influence the driving fitness by lowering concentration, alertness and reaction rate and can even be the cause for accidents.

In 2003, the European Council called on the Commission to ensure that the current programme on road safety is followed up by a set of actions to combat the impact of psychoactive substance abuse on road accidents.

Annex III of the Driving Licence Directive

Driving under the influence of drink, drugs and medicines is also targeted in the EU drugs strategy 2005-12 and the EU drugs action plan 2009-2012.

Work related DUI: illegal drugs

Individual countries' legal responses to drug-impaired driving vary greatly, from zero tolerance laws (sanctioning detection of the substance per se) to impairment laws (sanctioning if the person is deemed unfit to drive).

Prevention programmes that address drugs and driving are in place in the form of training in driving schools as well as various public safety campaigns.

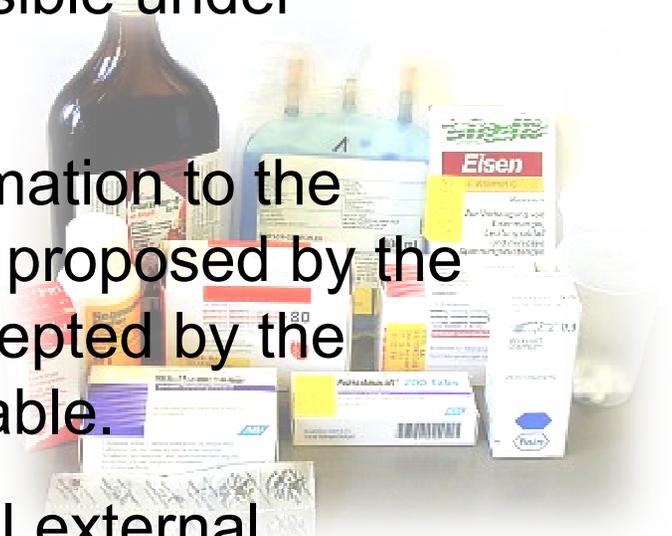


Work related DUI: medicine

Most of the current information for patients to decide whether or not to drive is presented in medicine package inserts. However this information is not clearly stated with advice as to when not to drive or how to decide whether driving is possible under treatment.

There is a need to improve this information to the patient: a new categorisation system proposed by the DRUID researchers and recently accepted by the European Medicines Agency is available.

As in France and Spain, an additional external warning on the box has shown positive effects.



DUI drugs, medicine: Employer level

Employers and fleet operators should be strongly encouraged to set up their own initiatives and written internal policies to tackle the risk of driving under the influence of illegal drugs and/or medicine.

In Belgium, all companies are obliged to develop and integrate in their working place rules a preventative policy for drugs and alcohol.

A Zero tolerance approach to illicit drugs should be promoted, as well as information about the effects on driving of some prescription and over the counter medicine.



THANK YOU FOR YOUR ATTENTION!