

THE PERSPECTIVES OF IMPLEMENTATION OF HEALTH ACCOUNTS RELATED TO HEALTH AND SAFETY AT WORK, PART OF NATIONAL SYSTEM ACCOUNTS IN ROMANIA

Abstract

The primary goal of this paper is the current state and prospects of implementation of satellite accounts in National Accounts System in Romania to meet certain specific needs in terms of data, in line with EU requirements, namely the Regulation (EC) no. 2223/96 of the Council from June 25th 1996 on the European System of National and Regional Accounts in the Community (OJ L 310, 30.11.1996), as amended (1998-2009). This regulation basically refers to specific information relevant and provided at EU level: analysis of the role of tourism in national economy; cost analysis and financing of healthcare; analyzing the importance of research and development and of human resources for the national economy; analysis of revenue and expenditure of households; analyzing the household production; analyzing the interaction between economy and environment; evolution analysis of the welfare; the differences between national accounts and business accounts; estimation of tax revenues; social economy; and natural resources.

Key words: National Accounts System in Romania, satellite accounts, health account, health and safety at work.

1. Introduction

Article 152 of the Treaty establishing the European Community states that „a high level of human health protection shall be ensured in the definition and implementation of all Community policies and activities”, thus acknowledging that public health is heavily dependent on policies in many other areas, including environment, agriculture, industry, trade, and social and economic policy (Costuleanu, 2011).

Health is an important priority for Europeans, who expect to be protected against illness and disease at home, in the workplace and when travelling. Health issues cut across a range of topics-including consumer safety, health and safety at the workplace, environmental and social policies (*, 2009).

Information about healthcare systems and, ultimately, about the health of a population is a prerequisite for monitoring the performance of health policy. The regional indicators currently available for health provide an insight into similarities, particularities and contrasts across regions in Europe. Effective knowledge management for health information requires more than generating information, such as data or indicators at European level. It also requires mechanisms for providing analysis and highlighting possible areas for action, exchanging and disseminating information in an appropriate way to people who can make use of it; and then supporting and monitoring the application of information in practice. A great deal has already been done with regard to generating information at Community level, and this should be brought together in an overall map of progress so far. Though more will be needed, it should also now be complemented by a greater focus on analysis, dissemination and application of European health information.

2. Health and safety at work as satellite health accounts in EU

The main last indicators used to assess the European health information, representing the basis of EU satellite health accounts are as follows (**, 2010):

- a). healthy life years;
- b). deaths due to chronic disease;

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- c). suicides;
- d). unmet needs for healthcare;
- e). production of toxic chemicals;
- f). exposure to air pollution by particulate matter;
- g). exposure to air pollution by ozone;
- h). annoyance by noise;
- i). serious accidents at work;
- j). health status, health determinants and use of healthcare services;
- k). healthcare;
- l). healthcare: hospital discharges, hospital length of stay and medical procedures;
- m). healthcare: human and physical resources;
- n). healthcare expenditure.

EUROSTAT statistics is including in „Population and social conditions” chapter some health statistics related to health and safety at work (***, 2011).

Health and safety at work is including: structural indicators on health and safety at work; accidents at work (ESAW)-until 2007; accidents at work (ESAW)-2008 onwards; work related accidents, health problems and hazardous exposure-2007 Labour Force Survey; and work related health problems and accidental injuries (LFS 1999).

Furthermore, structural indicators on health and safety at work are including: accidents at work-serious accidents-total-index of the number of serious accidents at work per 100 thousand persons in employment (1998=100); accidents at work-serious accidents-females-index of the number of serious accidents at work for women per 100 thousand females in employment (1998=100); accidents at work-serious accidents-males-index of the number of serious accidents at work for men per 100 thousand males in employment (1998=100); accidents at work-fatal accidents-index of the number of fatal accidents at work per 100 thousand persons in employment (1998=100).

Accidents at work (ESAW)-until 2007 is including: number of accidents at work by economic activity, severity and sex; number of accidents at work by economic activity, severity and age; number of fatal accidents at work by Member State and age, excluding road traffic accidents and accidents on board of any mean of transport in the course of work; number of accidents at work by economic activity and severity; number of accidents at work by economic activity and size of enterprise; number of accidents at work by economic activity and employment status; number of accidents at work by part of body injured and severity; number of accidents at work by type of injury and severity; standardised incidence rate of accidents at work by economic activity, severity and sex; standardised incidence rate of accidents at work by economic activity, severity and age; standardised incidence rate of fatal accidents at work by Member State and age, excluding road traffic accidents and accidents on board of any mean of transport in the course of work; standardised incidence rate of accidents at work by economic activity and size of enterprise; standardised incidence rate of accidents at work by economic activity and employment status. These ones are completed by causes and circumstances of accidents at work (ESAW Phase III), respectively: number of accidents at work by contact-mode of injury, economic activity, sex, age and severity; incidence rate of accidents at work by contact-mode of injury, economic activity, sex, age and severity; percentual distribution of accidents at work by contact-mode of injury, economic activity, sex, age and severity; number of accidents at work by deviation, economic activity, sex, age and severity; incidence rate of accidents at work by deviation, economic activity, sex, age and severity; percentual distribution of accidents at work by deviation, economic activity, sex, age and severity; number of accidents at work by material agent of deviation, economic activity, sex, age and severity; incidence rate of accidents at work by material agent of deviation, economic activity, sex, age and severity; percentual distribution of accidents at work by material agent of deviation, economic activity, sex, age and severity; number of accidents at

work by material agent of specific physical activity, economic activity, sex, age and severity; incidence rate of accidents at work by material agent of specific physical activity, economic activity, sex, age and severity; percentual distribution of accidents at work by material agent of specific physical activity, economic activity, sex, age and severity; number of accidents at work by material agent of contact-mode of injury, economic activity, sex, age and severity; incidence rate of accidents at work by material agent of contact-mode of injury, economic activity, sex, age and severity; percentual distribution of accidents at work by material agent of contact-mode of injury, economic activity, sex, age and severity; number of accidents at work by specific physical activity, economic activity, sex, age and severity; incidence rate of accidents at work by specific physical activity, economic activity, sex, age and severity; percentual distribution of accidents at work by specific physical activity, economic activity, sex, age and severity; number of accidents at work by working environment, economic activity, sex, age and severity; incidence rate of accidents at work by working environment, economic activity, sex, age and severity; percentual distribution of accidents at work by working environment, economic activity, sex, age and severity; number of accidents at work by working process, economic activity, sex, age and severity; incidence rate of accidents at work by working process, economic activity, sex, age and severity; percentual distribution of accidents at work by working process, economic activity, sex, age and severity; number of accidents at work by type of workstation, economic activity, sex, age and severity; incidence rate of accidents at work by type of workstation, economic activity, sex, age and severity; percentual distribution of accidents at work by type of workstation, economic activity, sex, age and severity.

Accidents at work (ESAW)-2008 onwards are including main indicators and details by economic sector NACE Rev.2-2008 onwards. In their turn, the main indicators are comprising: accidents at work by sex and age (NACE Rev. 2: A_C-N); days lost from accidents at work by sex and age (NACE Rev. 2: A_C-N); accidents at work by sex and age, excluding road traffic accidents and accidents on board of any mean of transport in the course of work (NACE Rev. 2: A_C-N except H); accidents at work by size of enterprise (NACE Rev. 2: A_C-N); accidents at work by ISCO and employment status (NACE Rev. 2: A_C-N); accidents at work by part of body injured and severity (NACE Rev. 2: A_C-N); accidents at work by type of injury and severity (NACE Rev. 2: A_C-N). On the other hand, details by economic sector NACE Rev.2-2008 onwards are including: non-fatal accidents at work by economic activity and sex; fatal accidents at work by economic activity; non-fatal accidents at work by economic activity and age; days lost from accidents at work by economic activity; accidents at work by economic activity and size of enterprise; accidents at work by economic activity and part of body injured; accidents at work by economic activity and type of injury.

Work related accidents, health problems and hazardous exposure-2007 Labour Force Survey is comprising: accidents at work; work related health problems; and hazardous exposure. Accidents at work are including: persons reporting an accident at work in the past 12 months by sex, age and education-in %; persons reporting that their most recent accidental injury at work or in the course of work resulted in sick leave in the past 12 months, by sex, age and education-in %; persons reporting that their most recent accidental injury at work or in the course of work resulted in sick leave of more than one month in the past 12 months in the EU and by country-in %; persons reporting that their most recent accidental injury at work or in the course of work in the past 12 months was on the road-in %; persons reporting an accident at work in the past 12 months, by sex, age and economic activity sector-in %; persons reporting that their most recent accidental injury at work or in the course of work resulted in sick leave in the past 12 months, by sex, age and economic activity sector-in %; persons reporting an accident at work in the past 12 months, by sex, age and occupation-in %; persons reporting an accident at work in the past 12 months, by sex, age and professional status-in %; persons reporting an accident at work in the past 12 months, by sex, age and size

of enterprise-in %; persons reporting an accident at work in the past 12 months, by sex, and full time/part time working-in %; persons reporting an accident at work in the past 12 months, by sex, and atypical working time-in %. The work related health problems are including: persons reporting one or more work-related health problems in the past 12 months, by sex, age and education-in %; persons reporting that their most serious work-related health problem resulted in sick leave in the past 12 months, by sex, age and education-in %; persons reporting that their most serious work-related health problem resulted in sick leave of more than one month in the past 12 months-in %; persons reporting that their most serious work-related health problem resulted in limitations in the past 12 months-in %; persons reporting their most serious work-related health problem work in the past 12 months, by type of problem-in %; persons reporting one or more work-related health problems in the past 12 months, by sex, age and economic activity sector-in %; persons reporting one or more work-related health problems in the past 12 months, by sex, age and occupation-in %; persons reporting one or more work-related health problems in the past 12 months, by sex, age and professional status-in %; persons reporting one or more work-related health problems in the past 12 months, by sex, age and size of enterprise-in %; persons reporting one or more work-related health problems in the past 12 months, by sex and working time-in %. The hazardous exposure: persons reporting exposure to factors that can adversely affect mental well-being, by sex, age and education-in %; persons reporting exposure to factors that can adversely affect physical well-being, by sex, age and education-in %; persons reporting the mental factor they were most exposed to by type-in %; persons reporting the physical factor they were most exposed to by type-in %; persons reporting exposure to factors that can adversely affect mental well-being, by sex, age and economic activity sector-in %; persons reporting exposure to factors that can adversely affect physical well-being, by sex, age and economic activity sector-in %; persons reporting exposure to factors that can adversely affect mental well-being, by sex, age and size of enterprise-in %; persons reporting exposure to factors that can adversely affect physical well-being, by sex, age and size of enterprise-in %.

Work related health problems and accidental injuries (LFS 1999) is including accidental injuries and health problems. In turn, the accidental injuries are comprising: accidental injuries at work in 1999, by sex (unit: percentage in each Member State); accidental injuries at work by severity and type of injury (unit: percentage in each Member State); accidental injuries at work by type of injury, work status after the accidental injury and age (unit: percentage for each type of injury); relative standardised incidence rate of accidental injuries at work by permanency of the job, length of service in the enterprise and economic activity of the employer (mean rate for each Member State=100); relative standardised incidence rate of accidental injuries at work by educational attainment level and sex (mean rate for each Member State=100); relative incidence rate of accidental injuries at work by working hours, number of job contract, economic activity of the employer, age and sex (EU mean rate=100); relative incidence rate of accidental injuries at work by occupation and economic activity of the employer (EU mean rate=100); relative incidence rate of accidental injuries at work by severity, permanency of the job, length of service in the enterprise and economic activity of the employer (EU mean rate=100 for each severity); relative incidence rate of accidental injuries at work by severity, frequency of night work and age (EU mean rate=100 for each severity); relative incidence rate of accidental injuries at work by severity, frequency of shift work and age (EU mean rate=100 for each severity); relative incidence rate of accidental injuries at work by severity, working hours and sex (EU mean rate=100 for each severity). Health problems are related to: work-related health problems in 1999, by sex (unit: percentage in each Member State); number of work-related health problems by diagnosis group, sex and number of complaints per victim; number of work-related health problems by diagnosis group, severity, activity and employment status of the victim and age; standardised prevalence rate of work-related health problems by diagnosis group, economic activity of the employer

and age; standardised prevalence rate of work-related health problems by severity, diagnosis group, economic activity of the employer and age; relative prevalence rate of work-related health problems by severity, diagnosis group, permanency of the job, length of service in the enterprise and economic activity of the employer; relative prevalence rate of work-related health problems by severity, diagnosis group, occupation and economic activity of the employer (EU mean rate=100 for each severity).

3. Conclusion

In contrast to the above list of indicators and accounts, for Romania "The 2008-2010 multi-annual national statistics program" includes some very shy actions on health satellite accounts for 2008 (implementation of data collection on health expenditure, harmonized with OECD methodology and with the most recent methodological recommendations of EUROSTAT), yearly (for the collection of health expenditure of the three areas: funding sources, health functions and services, health service providers; an additional field is the collection of expenditure on health human resources in the standardized format), for 2009 (review the national methodology of the System of Health Accounts, following the preparation and publication of the second edition of the OECD-EUROSTAT-WHO methodology) and for 2010 (dissemination of statistics on health expenditure).

Acknowledgements

This work was supported by the project "Post-Doctoral Studies in Economics: training program for elite researchers-SPODE" co-funded from the European Social Fund through the Development of Human Resources Operational Programme 2007-2013, contract no. POSDRU/89/1.5/S/61755.

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