



SAFE-D

STRENGTHENING WORKPLACE SAFETY THROUGH APPLIED
ERGONOMICS IN THE DIGITAL AGE

SAFE-D Final Report



**Co-funded by
the European Union**

Safe D: Strengthening Workplace Safety
Through Applied Ergonomics in The Digital
Age 2023-2-HU01-KA210-ADU-000171333

SAFE-D Final Report

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1 Introduction

The SAFE-D project, *Strengthening Workplace Safety through Applied Ergonomics in the Digital Age*, was implemented as an Erasmus+ partnership project by organisations from Hungary, Bulgaria and Türkiye. The project addressed a practical challenge that is common in many small and medium-sized enterprises: ergonomic risks are present in everyday work, but they are often managed informally, without systematic analysis, structured learning or continuous workplace improvement.

The project was based on the idea that ergonomics can contribute not only to accident prevention and legal compliance, but also to healthier work, better work organisation, employee participation and sustainable organisational performance. In small enterprises, access to ergonomic expertise, training opportunities and structured improvement methods is often limited. Therefore, SAFE-D focused on developing a practical training and support approach that helps organisations recognise ergonomic problems, understand their causes and implement feasible improvements in real workplace settings.

Training has a central role in the SAFE-D approach. It is not understood as a one-way transfer of theoretical knowledge, but as a guided learning and intervention process. Participants are encouraged to observe work situations, identify risks, discuss problems with employees, define realistic goals, plan improvements, test solutions and reflect on the results. In this sense, the training process supports both competence development and practical workplace change.

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The project results are presented in four complementary documents: the **Need Analysis Report**, the **Curriculum and Intervention Guidebook**, the **Tool Box** and the **Trainers Manual**. Together, these materials provide a training-based framework for applying ergonomics in small and medium-sized enterprises.

Purpose and Use of the Final Report (Extended Version)

The SAFE-D Final Report – Extended Version presents the implementation, results, impact and follow-up of the SAFE-D project in a more detailed and explanatory form. It is based on the final project report prepared for the Erasmus+ reporting system, but it provides a broader narrative than the online reporting fields allowed.

The Erasmus+ reporting platform required the project results to be entered into predefined fields with strict length limitations. These limitations did not make it possible to include all relevant implementation details, contextual explanations, pilot experiences, partner reflections and supporting descriptions in full. Therefore, this document was prepared as an extended version of the final report, in order to present the project implementation in a complete, transparent and readable form.

The document describes the three main implemented project activities: Activity 1 – Need Analysis and Curriculum Development; Activity 2 – On-site Workshops and Mentoring; and Activity 3 – Project Management, Dissemination and Reporting. These activities correspond in

content to the activities planned in the original application, but the present report describes them according to the way they were actually implemented, adapted, tested and finalised during the project period.

The difference between the activity descriptions in the reporting system and the descriptions in this extended report is therefore not a change in the project's substance. Rather, it reflects the difference between a limited administrative reporting format and a full professional project report. The reporting system did not allow the activity descriptions originally entered at application stage to be fully updated or expanded in line with the final implementation narrative. This extended report therefore explains the actual work carried out by the partnership, while remaining consistent with the approved project objectives and the planned activity structure.

The Final Report – Extended Version should be read as a complementary documentation and interpretation of the SAFE-D project. It supports transparency, quality assurance and future reuse of the project results by presenting the project logic, partner contributions, implementation process, pilot results, dissemination activities, open access approach and sustainability measures in one coherent document. It also helps trainers, adult education providers, occupational safety and ergonomics professionals, SMEs and other stakeholders understand how the SAFE-D materials were developed and validated in real workplace contexts.

2 Context – Project Identification

Beneficiary organisation:
DSGI Human Engineering Ltd., Hungary.

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Organisation OID:
E10318915

Project number:
2023-2-HU01-KA210-ADU-000171333

Project title:
Strengthening Workplace Safety through Applied Ergonomics in the Digital Age

Action type:
KA210-ADU – Small-scale Partnerships in Adult Education

Sector:
Adult Education

Project duration:
01/04/2024 – 31/03/2026

Granted EU contribution:
60,000 EUR

National Agency receiving the report:

HU01 – Tempus Public Foundation

Language of the report:

English (internal drafting) / Hungarian (final submission)

3 Project Summary

The SAFE-D project was initiated in response to the growing need to improve workplace safety and ergonomics in small and medium-sized enterprises (SMEs), particularly in the context of increasing digitalisation and changing work environments. SMEs often operate under strong economic pressure, with limited access to structured ergonomics knowledge, standards, and training opportunities.

The project partners identified that, despite the availability of international ergonomics standards and methodologies, their practical application in SMEs remains limited due to lack of awareness, accessibility barriers, and insufficient integration into everyday business practices.

The project therefore aimed to explore the real needs of SMEs, understand their operational constraints, and develop a practical, applicable approach to integrating ergonomics into workplace safety and organisational development.

3.1 Objectives

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The main objective of the SAFE-D project was to strengthen workplace safety through the practical application of ergonomics in SMEs.

More specifically, the project aimed to:

- analyse the current state of ergonomics and safety practices in SMEs
- develop a tailored training methodology adapted to SME realities
- increase awareness and practical competencies related to ergonomics
- support SMEs in implementing real improvements in workplace safety
- integrate digital tools into ergonomics practice
- create transferable training materials applicable across countries

The project also aimed to promote a mindset shift, encouraging SMEs to see ergonomics not as a regulatory burden, but as a value-creating activity.

3.2 Implementation

The project was implemented through three main integrated activities:

- **A1 – Need Analysis and Curriculum Development**
Including surveys, interviews, site visits, and analysis of regulatory and practical environments in partner countries.

- **A2 – On-site Workshops and Mentoring**
Including pilot training programmes, company-level problem-solving activities, and consultations.
- **A3 – Project Management and Dissemination**
Including coordination, quality assurance, dissemination activities, and integration of results into educational and professional contexts.

The implementation required continuous adaptation to local conditions, as SMEs in different countries showed significant differences in structure, mindset, and operational maturity.

3.3 Results

The project delivered all main planned outputs and several additional practical results. The four main consolidated deliverables were the SAFE-D Need Analysis Report, Curriculum and Intervention Guidebook, Tool Box and Trainers Manual. These were complemented by the Workbook, pilot training materials, national pilot reports and a comparative pilot synthesis.

The project also achieved strong practical implementation results. Activity 1 included structured company visits, questionnaires, interviews and national context analysis in Hungary, Türkiye and Bulgaria. Activity 2 implemented pilot training and mentoring in all partner countries, involving **11 organisational pilot settings and 45 direct participants**.

The project directly engaged SMEs through workplace visits, consultations, mentoring, training sessions and final presentations. Participants worked on real ergonomic and occupational safety problems and developed practical solutions, including workstation adjustments, ergonomic checklists, improved tool placement, posture routines, lifting technique improvements, QR-code-based ergonomic guidance, PPE-related improvements, job rotation ideas and strengthened safety procedures.

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The project also integrated digital tools into ergonomics practice and created materials that can be reused in adult education, vocational training, higher education, workplace consultancy and future SME development activities. Overall, the project increased ergonomic awareness and showed that small, feasible interventions can support safer, healthier and more effective workplaces. Separate company-level training logs, participant attendance records, workbook outputs and mentoring documentation were maintained for each pilot setting. The implementation was organised through small-group workplace-based learning cohorts in order to ensure active participation, personalised mentoring and direct workplace application of ergonomic interventions.

3.4 Project Description – Objectives, Priorities and Topics

3.4.1 Most Relevant Priority

Priority selected at application stage:

Horizontal priority – Inclusion and diversity in education, training, youth and sport

Did this priority change during implementation?

No

3.4.2 Other Relevant Priorities

- Improving the availability of high-quality, flexible and recognised learning for adults
- Enhancing quality assurance in adult education opportunities

Did these priorities change during implementation?

No

3.4.3 Most Relevant Topics

- Creating new, innovative or joint curricula or courses
- Digital transformation planning and implementation
- Overcoming skills mismatch and addressing labour market needs

Did these topics change during implementation?

No

3.5 Outcomes, Achievements and Objective Fulfilment

The project achieved its original objectives and produced concrete, usable and tested results for strengthening workplace safety through applied ergonomics in SME-related environments. The project successfully combined research, curriculum development, training, mentoring, workplace-based implementation and dissemination.

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The first objective was to identify the real needs of small enterprises in relation to ergonomics, occupational safety and adult learning. This objective was fully achieved through Activity 1. The consortium completed a needs analysis based on desk research, questionnaire-based data collection, interviews, national context analysis and structured company visits in Hungary, Türkiye and Bulgaria. The needs analysis did not only examine workplace conditions, but also explored organisational behaviour, decision-making patterns, SME constraints and barriers to practical implementation. A key finding was that SMEs often operate under strong economic and time pressure, with limited management capacity. As a result, ergonomics is frequently treated as a secondary or compliance-related issue rather than as a strategic tool for improving work quality, safety, well-being and performance.

The second objective was to develop a tailored ergonomics curriculum and practical support materials for adult learners and SME environments. This objective was also fully achieved. The project produced a coherent set of outputs, including the SAFE-D Needs Analysis Report, Curriculum and Intervention Guidebook, Tool Box, Trainers Manual, Workbook, Logbook and pilot training materials. These materials translated scientific and standard-based ergonomics knowledge into a practical, step-by-step intervention model suitable for SMEs. The training methodology focused not only on knowledge transfer, but also on awareness raising, attitude change, workplace observation, employee involvement, realistic planning and implementation support and complementary

The third objective was to test the developed methodology through on-site workshops and mentoring activities. This objective was achieved through Activity 2. The pilot phase was implemented in Hungary, Türkiye and Bulgaria, involving 11 organisational pilot settings and 45 direct participants. Separate company-level implementation logs, attendance records, mentoring notes and participant workbook outputs were maintained throughout the pilot process. The pilots tested the SAFE-D materials in real workplace environments and confirmed their practical relevance. The national pilots represented complementary implementation contexts: adaptive blended mentoring in Hungary, structured industrial implementation in Türkiye, and micro-enterprise/service-sector implementation in Bulgaria.

In Hungary, the pilot involved 5 companies and 13 direct participants. It confirmed that SMEs are willing to work on ergonomics when the topic is connected to real operational problems, but initial engagement requires trust-building, direct contact and practical relevance. Hungarian outcomes included workstation-related ergonomic improvements, better support for sitting behaviour, improvements in tool use and work organisation, QR-code-based access to ergonomic guidance materials, and stronger management and employee reflection on workplace conditions. Several participating organisations also expressed interest in continuing ergonomics-related workplace improvement activities after completion of the pilot phase.

In Türkiye, the pilot demonstrated that the SAFE-D methodology can be integrated into industrial and production-oriented environments. The Turkish implementation supported workplace analysis, audits, corrective action planning, management-level presentations and future-oriented ergonomics policy recommendations. Concrete improvement areas included manual handling, PPE storage and hygiene, job rotation, workstation analysis, machine guarding and lockout/tagout awareness.

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In Bulgaria, the pilot confirmed that the methodology is also applicable in very small enterprises and service-sector contexts. The Bulgarian cases addressed posture, repetitive movements, standing and sitting alternation, recovery between tasks, workstation adaptation and shared ergonomic culture in micro-enterprise networks. Practical results included improved workstation setup, posture routines, ergonomic checklists, improved lifting techniques and stronger awareness of human factors.

The project also achieved important qualitative outcomes. Participants became more aware of ergonomic risks and more capable of identifying problems in their own workplaces. Trainers and company representatives reported that the mentoring approach helped participants move from general awareness to concrete action. In several cases, the pilots generated real workplace improvements or structured improvement plans. The project also showed that small, low-cost and realistic interventions can be meaningful for SMEs when they are supported by clear guidance and participatory methods.

All original objectives were met. No major objective was abandoned. Some aspects required adaptation during implementation, especially recruitment of SMEs, scheduling, and country-specific adjustment of the methodology. These adaptations did not reduce the project's achievements; rather, they made the outputs more realistic and transferable.

The project exceeded initial expectations in several areas. First, the empirical basis became stronger than originally expected, especially through the extended Hungarian company visit process and the broad country-level pilot documentation. Second, the training materials became more comprehensive than initially planned: instead of only a guide and workbook, the consortium developed an integrated package including a Tool Box, Trainer's Manual and Logbook. Third, the outputs were already used beyond the immediate project context, including higher education, vocational and adult training, professional consultancy and dissemination activities. Fourth, the pilots confirmed not only the educational value of the methodology, but also its potential contribution to organisational development, safety culture and SME competitiveness.

The project fulfilled its objectives by creating, testing and validating a practical ergonomics intervention model for SMEs. It provided evidence that applied ergonomics can be taught effectively when adult learning is connected to real workplace problems, supported by mentoring, and focused on feasible improvements.

3.6 Addressing Target Group Needs and Transnational Cooperation

The project addressed the needs of the identified target groups by developing a flexible, practical and workplace-based ergonomics approach for SMEs, micro-enterprises, employees, managers, business owners, trainers and adult learners. The needs analysis showed that the main problem in SMEs is not only lack of information, but limited time, weak implementation capacity, low awareness of standards, and difficulty in translating ergonomic principles into daily work practice. Therefore, the project focused on simple tools, mentoring, workplace observation, practical tasks and feasible small-scale improvements.

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The developed outputs — Needs Analysis Report, Curriculum and Intervention Guidebook, Tool Box, Workbook and Trainers Manual — were designed to support this need directly. They helped participants recognise ergonomic risks, analyse real work situations, involve colleagues, plan improvements and reflect on results. The pilot implementation confirmed that this approach was suitable for different workplace realities, including office work, production, service activities, public-service environments, industrial settings, beauty services, printing and micro-enterprise contexts.

The Hungarian pilot showed that SMEs are interested in ergonomics when the topic is linked to real operational problems. However, initial engagement required significant trust-building and continuous communication. The final Hungarian pilot involved 5 companies and 13 direct participants, supported by opening and closing sessions, on-site consultations and online follow-up. It also reached additional employees and managers through participatory workplace discussions. Concrete outcomes included workstation-related improvements, better support for sitting behaviour, tool-use and work-organisation improvements, and QR-code-based access to ergonomic guidance materials.

The Turkish pilot demonstrated the value of a more structured industrial approach. It showed that ergonomics can be connected to management-level planning, workplace audits, corrective action proposals and future-oriented occupational safety development. The Turkish experience also

highlighted that ergonomics is often understood narrowly as accident prevention, while its contribution to quality, productivity, continuity and profitability needs stronger emphasis.

The Bulgarian pilot confirmed that the SAFE-D methodology is also applicable in very small enterprises and service-sector workplaces. It addressed needs such as posture correction, repetitive movement, micro-break routines, workstation setup, service-sector ergonomics and shared safety culture in small networks of workers. The Bulgarian results showed high satisfaction, strong applicability of the content and willingness for future participation and dissemination.

Transnational cooperation was essential for the quality of the project. The partners from Hungary, Türkiye and Bulgaria brought different regulatory, organisational and cultural perspectives. These differences helped the consortium understand that SME realities vary significantly: the meaning of “small enterprise”, the level of formal safety management, the role of inspections, innovation capacity and ergonomic awareness differ between countries.

At the same time, cooperation revealed strong common patterns. In all three countries, SMEs face operational pressure, limited resources, fragmented ergonomic knowledge and difficulties in implementing structured improvements. This common understanding made it possible to develop a methodology that is not country-specific, but transferable and adaptable.

The main benefit of transnational cooperation was therefore the combination of shared learning and local adaptation. Joint development, discussion and review of project documents ensured professional consistency, while national pilots tested the methodology in different realities: adaptive blended mentoring in Hungary, structured industrial implementation in Türkiye, and micro-enterprise/service-sector application in Bulgaria. This strengthened the European added value of the project and confirmed that the SAFE-D approach can support SME-oriented adult learning beyond the original partnership.

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3.7 Monitoring of Progress, Quality and Achievement

The project applied a continuous, practice-oriented monitoring and quality assurance approach throughout implementation. Progress was followed through regular online coordination meetings, milestone-based reviews, iterative development of outputs, and continuous feedback from project activities. Partner meetings were generally organised on a monthly basis, with more frequent communication during intensive phases such as deliverable development, pilot implementation and final reporting. In addition to formal meetings, the partners maintained regular contact through email, bilateral discussions and small-group consultations.

Quality assurance was based on both internal and partner-level review. Draft deliverables were first checked by the responsible partner for professional accuracy, practical applicability, clarity and consistency with the project objectives. They were then shared with the consortium for peer review, discussion and further refinement. The main project documents and deliverables were accepted only after partner-level agreement was reached. This process helped ensure that the outputs reflected the shared professional understanding of the consortium and were not limited to the perspective of one partner.

The quality assurance process was also strongly connected to practical implementation. Feedback from needs analysis activities, company visits, pilot training, mentoring sessions, participant tasks and final presentations was used to refine the methodology and materials. The Guidebook, Tool Box, Workbook and Trainers Manual were therefore not only reviewed as documents, but also tested and validated through company-level implementation.

Formal and semi-formal tools also supported quality assurance. These included structured company visit guides, training materials, workbooks, logbooks, participant feedback forms, trainer observations, evaluation questionnaires, quality assurance checklists and partner evaluation sheets. These tools helped the consortium monitor whether the activities were progressing as planned and whether the materials were understandable, applicable and relevant for SMEs.

The main challenges identified through monitoring were the difficulty of engaging SMEs, limited time availability of participants, scheduling conflicts, differences in national contexts, and the need to adapt common methods to local realities. These challenges were discussed regularly and managed through flexible implementation. For example, the partners adapted training formats, consultation methods and pilot organisation according to the needs of the participating companies.

The monitoring process confirmed that the project remained aligned with its objectives. Although implementation required continuous adaptation, all planned core activities and deliverables were completed, the main outputs were finalised, and the project results were validated through partner review and real workplace application.

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3.8 Evaluation of Objectives and Planned Results

The evaluation of the project was carried out as a continuous, multi-level process combining partner review, participant feedback, trainer evaluation, company-level feedback and assessment of completed outputs. The consortium did not treat evaluation as a final administrative step only. Project documents, deliverables and implementation results were regularly discussed by the partners, reviewed from professional and practical perspectives, and accepted only when a common agreement was reached.

The achievement of objectives was assessed through the completion and validation of the main deliverables, including the Needs Analysis Report, Curriculum and Intervention Guidebook, Tool Box, Workbook, Trainers Manual, Logbook, pilot training materials and the comparative pilot synthesis. These documents were reviewed by the project partners and adjusted on the basis of professional discussion, implementation experience and feedback from the pilot phase.

The practical success of the project was evaluated mainly during Activity 2. The pilot phase was implemented in Hungary, Türkiye and Bulgaria, involving 11 organisational pilot settings and 45 direct participants. The evaluation included participant feedback, trainer observations, company representative evaluations, review of completed workplace tasks, final presentations, consultation outcomes and documentation of workplace-level improvements.

In Hungary, the pilot involved 13 participants from 5 companies; 12 participants were counted toward the training completion target, as one participant was directly involved in project implementation. The official FAR satisfaction survey received 3 responses at the time of reporting. The average scores were very high: training organisation, preliminary information, value for money, learning materials, infrastructure and independent learning support all received 5.00; applicability of acquired knowledge, trainer evaluation, educational methods, and feedback during learning received 4.67. No negative ratings appeared. Project-specific trainee questionnaires also confirmed strong results: participant averages ranged approximately between 4.4 and 5.0, the overall participant average remained above 4.5, and no score of 1 or 2 was recorded. Trainer evaluations ranged between 4.5 and 5.0, while company executive evaluations ranged between 4.7 and 5.0. These results indicate high professional quality, practical relevance and positive organisational reception.

The Turkish pilot evaluation also showed consistently positive results. The visual distribution of trainee, trainer and management responses was concentrated in the upper categories of the 5-point Likert scale. Participants considered the training relevant, clear and applicable to their work context, while company management feedback confirmed the organisational value of the programme. The Turkish pilot also produced documented workplace improvement plans and management-level presentations. The evaluation process also confirmed that practical workplace-based tasks and mentoring activities were more effective for adult learners than purely theoretical instruction.

The Bulgarian pilot evaluation confirmed very high satisfaction, strong applicability of the training content and willingness for future participation and dissemination. The Bulgarian cases also documented practical improvements such as better workstation setup, posture routines, improved lifting techniques, ergonomic checklists and stronger awareness of human factors.

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The evaluation confirmed that the project reached its planned objectives. The developed materials were completed, reviewed, accepted and tested in practice. Participants successfully completed training requirements, workplace-based tasks were implemented, final outputs were presented, and concrete ergonomic and occupational safety improvements or improvement plans were initiated. The project therefore achieved both its formal deliverables and its practical objective: strengthening applied ergonomics and workplace safety in SME-related environments.

3.9 Quality of Project Implementation and Lessons Learned

The overall quality of project implementation was high. The project achieved its planned objectives, produced the expected outputs, and generated practical results in real SME environments. The consortium developed the needs analysis, guidebook, training materials, toolbox, trainer support materials and pilot documentation, and tested them through workplace-based training and mentoring in the partner countries.

A major strength of the project was its strong practical orientation. The activities were not limited to theoretical discussion: the partners reached SMEs, visited workplaces, collected empirical information, developed training tools, and supported participants in identifying and addressing real ergonomic and occupational safety problems. The project also created more extensive

materials than initially expected, because some elements of the original project design required further clarification during implementation. Instead of choosing a minimal solution, the partners developed a coherent set of complementary outputs.

The project also benefited from the continuous commitment of all partners. Although the partners worked in different national, organisational and cultural contexts, the project remained an active priority throughout the implementation period. Regular coordination, joint reflection, review of outputs, consultation with external stakeholders and adaptation of materials supported quality assurance.

At the same time, implementation was demanding. The most difficult task was reaching and engaging SMEs. Many small enterprises were overloaded, had limited time, and were cautious about external assessment. Considerable effort was needed to build trust, explain that the visits were not inspections, and motivate companies and participants to invest time in the activities. This was especially visible during the needs analysis and pilot recruitment phases.

Another challenge was the need for local adaptation. The meaning of “SME”, the regulatory environment, innovation culture and organisational maturity differed considerably between Hungary, Türkiye and Bulgaria. Therefore, common solutions had to be adapted to local realities. Communication across countries was also sometimes more difficult than expected because of timing, language, cultural differences and parallel workload. Nevertheless, these challenges were managed through flexibility and continuous learning.

The Hungarian experience showed that the main barrier in SMEs is often not the lack of technical solutions, but the lack of attention, time and organisational capacity to deal with ergonomics in a structured way. Practice-based, participatory learning worked particularly well: when participants addressed their own workplace problems and involved colleagues or managers, the results became more realistic and better accepted.

The Turkish experience highlighted that ergonomic awareness differs greatly between enterprises and even between workers in the same workplace. It also showed that many business owners still understand ergonomics mainly as accident prevention, while its contribution to productivity, quality, motivation and profitability is less recognised. Another important lesson was that responsibility for ergonomics must be matched with sufficient authority and organisational support.

Across the project, one key lesson was that SMEs need more than information. They need motivation, simple tools, mentoring, management support and a clear implementation pathway. Ergonomics becomes meaningful for them when it is connected to everyday work, employee well-being, efficiency, service quality and business sustainability.

The project also confirmed that digitalisation is both an opportunity and a challenge. Digital tools can support ergonomic assessment, training, documentation and awareness-raising, but new technologies may also create new physical, cognitive and organisational risks. This highlighted the importance of balancing technological innovation with human-centred workplace design and continuous ergonomic awareness

The project was successfully implemented, but not as a mechanical execution of a fixed plan. It was a real learning process. The consortium had to adapt, solve problems, and respond to the realities of SMEs. This strengthened the final results and made the project outputs more practical, transferable and sustainable.

3.10 Erasmus+ Horizontal Aspects

The SAFE-D project addressed the Erasmus+ horizontal aspects mainly through its practical, workplace-based and participatory approach.

Inclusion and diversity were addressed by focusing on SMEs and micro-enterprises, which often have limited access to structured training, expert support and development opportunities. The project helped make ergonomics knowledge more accessible to companies with limited resources and different levels of organisational maturity. Inclusion was also supported through participatory methods. During company visits, consultations and pilot activities, not only formal training participants but also additional employees, supervisors and managers were involved in problem identification and solution development. This helped include different workplace perspectives and practical experiences. The methodology was flexible enough to involve smaller, less formal or owner-led businesses, where roles are not always clearly separated. The training content also considered diverse worker needs, including differences in age, physical capacity, task demands and work organisation.

Digital transformation was an important element of the project. Although digital tools were not the only focus of the needs analysis, they became increasingly relevant during the development of the Tool Box, training materials and pilot implementation. The project used online communication platforms for partner cooperation, mentoring and follow-up consultations. Digital formats of the workbook, training materials and documentation tools supported flexible learning and easier reuse. In the Hungarian pilot, QR-code-based access to ergonomic guidance materials was developed as a practical solution for workplace awareness-raising. Participants also used simple digital documentation tools for recording observations, preparing tasks and sharing results. The project confirmed that even low-cost digital tools can effectively support ergonomics implementation in SMEs. The project also increased awareness of digital ergonomics, screen-related workload, remote and hybrid work conditions, and technology-supported workplace communication.

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Green transition and environmental sustainability were not the primary thematic focus of the project, but the project contributed indirectly to sustainability. Ergonomics improvements can support more efficient work organisation, better use of tools and space, reduced unnecessary strain, fewer errors and more sustainable work routines. The project also promoted low-cost, small-scale and realistic improvements, which are often more resource-efficient than large redesigns. A further sustainability element is the long-term reuse of the developed materials. The Guidebook, Tool Box, Workbook and Trainers Manual can be applied in future adult education, vocational training, higher education, consultancy and SME development activities. In Hungary and Türkiye, the results are already being considered for integration into educational and professional programmes, which strengthens the long-term impact of the project.

Participation in democratic life and civic engagement was supported through the participatory ergonomics approach. The project encouraged employees, managers and trainers to discuss workplace problems openly, identify risks together and develop feasible improvements. This strengthened workplace dialogue, shared responsibility and organisational learning. Employees were not treated only as recipients of safety instructions, but as active contributors to workplace improvement. This approach is closely linked to civic and democratic values, as it promotes participation, responsibility, cooperation and evidence-based decision-making at workplace level.

The project contributed to the Erasmus+ horizontal aspects by making applied ergonomics more accessible, supporting digital and practical learning, promoting sustainable use of project results, and strengthening participation and shared responsibility in SME workplaces.

3.11 Lump-Sum Funding Assessment

The lump-sum funding model was appropriate for the scale and nature of the project. It provided a clear financial framework, reduced the administrative burden connected to detailed cost reporting, and allowed the consortium to focus primarily on the delivery of results, the quality of outputs and the practical implementation of activities.

The model also gave the partners a useful degree of flexibility. This was important because the project required continuous adaptation to real SME conditions, especially during company recruitment, needs analysis, site visits, pilot training and mentoring. The partners could allocate effort according to actual implementation needs rather than rigid cost categories.

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At the same time, the budget was limited and required careful planning, prioritisation and internal resource management. The project involved considerable fieldwork, partner coordination, development of several deliverables, translation and adaptation of materials, company-level consultations and pilot implementation in three countries. These tasks required substantial professional commitment from all partners. In several cases, partners had to balance project work with other institutional and professional responsibilities.

The lump-sum approach therefore supported efficiency, but it also made it necessary to manage time and resources carefully. It encouraged practical decision-making and a results-oriented mindset. Rather than expanding activities without limit, the consortium had to focus on those actions that were most relevant for achieving the project objectives.

4 Participating Organisations

Number of participating organisations: 3

Role	Organisation Name	OID	Country	Type	Start Date	End Date
Beneficiary	DSGI Human Engineering Ltd.,	E10318915	Hungary	Consulting organisation	01/04/2024	31/03/2026

Partner	CAPPADOCIA Innovation Institute Ltd.	E1031931 3	Türkiye	SME	01/04/2024	31/03/2026
Partner	Bulgarian Association of Ergonomics and Human Factors	E1027485 7	Bulgaria	NGO / Association	01/04/2024	31/03/2026

4.1 Partner Strengths and Distribution of Responsibilities

The SAFE-D project was implemented by a balanced and complementary partnership. Each organisation contributed specific professional strengths, national experience and implementation capacity, which supported the successful completion of the project.

DSGI Human Engineering Ltd. Hungary, as the beneficiary organisation, brought strong expertise in applied ergonomics, occupational safety, workplace analysis, training development and professional consultancy. DSGI coordinated the overall project implementation, supported the methodological development of the project, and played a leading role in connecting the needs analysis, training concept and pilot implementation. DSGI also contributed strongly to quality assurance, reporting, the development of project documentation, and the integration of results into higher education, adult training and professional practice.

Cappadocia Innovation Institute / CAPPINNO, Türkiye, contributed practical experience in SME development, innovation management and adult education. The Turkish partner had strong access to local enterprise networks and provided valuable insight into industrial and production-oriented SME contexts. CAPPINNO played an important role in the company visits, stakeholder analysis, pilot implementation, and adaptation of the SAFE-D methodology to the Turkish regulatory and business environment. The Turkish contribution was especially important in demonstrating how ergonomics can be linked to productivity, management commitment, workplace organisation and future-oriented safety development.

The Bulgarian Association of Ergonomics and Human Factors, Bulgaria, contributed academic, scientific and professional expertise in ergonomics and human factors. The organisation supported the professional validation of the project approach and provided strong input to the needs analysis, company visits, pilot implementation and dissemination. The Bulgarian partner was particularly important in testing the SAFE-D methodology in micro-enterprise and service-sector contexts, where ergonomics must be practical, low-cost and directly applicable. BAEHF also contributed to professional networking and dissemination through its national and international ergonomics connections.

Responsibilities were distributed in a collaborative way. All partners contributed to the needs analysis, company visits, questionnaire dissemination, national context analysis, development of training materials, pilot implementation and dissemination activities. Each partner was responsible for national-level implementation in its own country, while the main deliverables were developed, reviewed and finalised through joint partner discussion and peer review.

The partnership combined central coordination with national adaptation. DSGI coordinated the overall process and ensured coherence between outputs. CAPPINNO and BAEHF provided national implementation, sector-specific experience, feedback and validation. All partners participated in reviewing project documents and deliverables, and outputs were accepted only after professional discussion and common agreement.

This distribution of responsibilities worked well because the project required both a shared methodology and local flexibility. The partners operated in different regulatory, cultural and organisational environments, so the common SAFE-D approach had to be adapted to national realities. The cooperation therefore created added value beyond what a single-country project could have achieved: it allowed the consortium to compare SME needs, test the methodology in different settings, and develop outputs that are practical, transferable and relevant across countries.

4.2 Project Management, Communication and Cooperation

Project management was based on a combination of structured coordination and flexible, adaptive cooperation. The beneficiary organisation, **DSGI Human Engineering Ltd.**, coordinated the overall implementation, monitored progress, supported the preparation of deliverables, and ensured that the activities remained aligned with the project objectives. At the same time, all partners had responsibility for national implementation, local adaptation, data collection, pilot organisation and dissemination in their own country.

Communication between partners was maintained through regular online meetings, email exchange, bilateral discussions and shared document review processes. Partner meetings were organised around key project milestones, such as the preparation of the needs analysis, development of training materials, pilot implementation, evaluation and final reporting. During intensive phases, communication became more frequent and task-specific. In addition to planned meetings, the partners used informal communication to solve practical issues and coordinate the next steps.

A central element of project management was the joint development and review of outputs. Draft documents, reports and training materials were discussed by the partners, revised when needed, and accepted only after professional agreement was reached. This ensured that the results reflected a shared consortium-level understanding and not only one national perspective. The same principle was used during the pilot phase: feedback from implementation was used to refine the methodology and strengthen the practical relevance of the materials.

The main management challenge was that the project had to be implemented in very different national and organisational contexts. SMEs in Hungary, Türkiye and Bulgaria differed in size, maturity, regulatory environment, available time, management practices and openness to external support. As a result, the common methodology had to be adapted locally. This required flexibility from all partners and continuous reflection on what could realistically be implemented in each country.

Another difficulty was the engagement of SMEs. Companies often had limited availability, and recruitment required personal contact, trust-building and repeated explanation of the project's practical benefits. Scheduling company visits, consultations and pilot activities was also challenging because participants had to balance project activities with daily operational work.

Communication and coordination were sometimes affected by time constraints, competing professional responsibilities, language differences and different working cultures. In some cases, partners had to solve local implementation problems independently before bringing the results back to the consortium. This made cooperation less linear than originally expected, but it also strengthened the learning value of the project.

The partners handled these difficulties through flexibility, mutual trust and a shared commitment to the project goals. When challenges appeared, the consortium adjusted timelines, adapted methods, discussed alternative solutions and focused on achieving meaningful results rather than mechanically following the initial plan. The project therefore became a learning-oriented cooperation process.

All planned activities were completed, the main outputs were developed and validated, and the pilots were implemented in all partner countries. The cooperation created clear added value by combining Hungarian applied ergonomics and training expertise, Turkish SME and industrial implementation experience, and Bulgarian ergonomics and human factors expertise. This combination made the final SAFE-D methodology more realistic, adaptable and transferable.

5 Implementation – Overview of Activities

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5.1 Activity Overview Table

Activity	Location	Start Date	End Date	Duration (days)	Budget (EUR)
A1. Need Analysis and Curriculum Development	Hungary, Bulgaria, Türkiye	01/04/2024	29/09/2025	547	20,000
A2. On-site Workshops and Mentoring	Hungary, Bulgaria, Türkiye	02/08/2024	01/02/2025	184	20,000
A3. Project Management and Dissemination	Hungary, Bulgaria, Türkiye	01/02/2025	01/11/2025	274	20,000
Total					60,000

For reporting purposes, the activity periods indicate the formal implementation periods of the activities. The preparation, testing, revision and finalisation of individual deliverables partly overlapped, because the outputs were updated iteratively on the basis of pilot implementation, partner review and final quality assurance.

5.2 Activity A1 – Need Analysis and Curriculum Development

5.2.1 Description of implemented activity

Activity A1 focused on identifying the real training and development needs of small enterprises in relation to workplace safety, occupational health and applied ergonomics. The activity provided the empirical, professional and methodological foundation for the later SAFE-D training concept, curriculum logic and practical intervention model.

The activity was implemented in the three partner countries: **Hungary, Türkiye and Bulgaria**. It combined desk research, field-based empirical work, questionnaire-based data collection, stakeholder input and curriculum development. The main purpose was not only to collect information about ergonomic risks, but also to understand why ergonomics and occupational safety principles are often difficult to apply in the everyday operation of small and micro-enterprises.

The implemented activity included the following components:

- review of national and sectoral contexts related to occupational safety, ergonomics and adult education;
- review of relevant scientific and professional literature;
- analysis of EU, ILO and national-level materials related to occupational safety and ergonomics;
- analysis of regulatory, institutional, standardisation and training environments in the partner countries;
- development and use of a structured company visit methodology;
- on-site company visits and workplace observations;
- informal interviews and discussions with company representatives, employees and other stakeholders;
- questionnaire-based data collection among employees, managers, adult learners and training providers;
- synthesis of national findings into a comparative needs analysis;
- development of a tailored ergonomics curriculum logic and Guidebook for small enterprises.

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The empirical part of Activity A1 was implemented through a mixed-method approach. Across the three partner countries, **at least 24 enterprises were covered through structured company visits: 14 in Hungary, 5 in Bulgaria, and 5 in Türkiye**. In addition, questionnaire-based data collection reached **111 respondents** across the partner countries. The collected data provided both quantitative and qualitative insight into workplace ergonomics, organisational behaviour and SME implementation constraints. The questionnaires addressed exposure to ergonomic risks, previous training experience, self-reported discomfort and health complaints, organisational capacity and constraints, and expectations towards future training solutions.

The enterprise visits focused on real workplace conditions. They covered working environment characteristics, ergonomic risk factors such as posture, repetition and static load, workplace organisation, the availability and use of occupational safety measures, and access to ergonomics-

related guidance and training. The visits were not official audits or inspections. Their purpose was to understand real work processes, typical constraints and practical training needs.

In Hungary, **DSGI Human Engineering Ltd.** conducted a substantial company visit process in two phases. In 2024, DSGI carried out nine enterprise visits. In 2025, the process was repeated and extended with five additional enterprise visits. As a result, the Hungarian needs analysis was based on 14 company visits in total. The visited companies represented diverse workplace realities, including office-based work, administrative and service activities, production-related environments, logistics-related work, information technology, maintenance-related activities and mixed organisational settings. The Hungarian visits confirmed that ergonomic and occupational safety challenges are not limited to physically demanding workplaces. They also appear in office work, hybrid work, service environments and small owner-led organisations.

The Hungarian company visits followed the SAFE-D Company Visit Guide. The methodology included document analysis where available, structured workplace observation, review of the general working environment, assessment of safety measures, observation of ergonomic workstation setup, review of posture, repetitive tasks and manual work conditions, observation of PPE availability and use, review of tools and equipment safety, discussion with company representatives and employees, employee feedback, photographic documentation where appropriate, and identification of development needs relevant to the SAFE-D curriculum.

In **Bulgaria**, the Bulgarian Association of Ergonomics and Human Factors conducted five structured company visits in Varna. These visits covered diverse sectors, including construction, manufacturing, beauty services, digital printing and office-based work. The Bulgarian visits used document analysis, staff interviews, on-site ergonomic observation, environmental measurements, photographic documentation and human-factors screening. The findings showed sector-specific problems, but also common patterns such as limited ergonomic awareness, posture-related risks, insufficient safety signage, inconsistent documentation practices, cognitive fatigue in office work and insufficient micro-break routines.

In **Türkiye**, the enterprise visits and stakeholder interviews explored occupational safety and ergonomics problems from the perspectives of enterprise owners, managers, employees, customers, suppliers, OSH inspectors, trainers, job seekers and new employees. The Turkish findings highlighted several organisational root causes behind insufficient occupational safety and health performance, including limited continuous management commitment, weak communication, insufficient employee involvement, inconsistent safety training, over-reliance on external inspections, weak incident follow-up, limited attention to long-term risks, and insufficient integration of OSH into business processes.

The results of Activity A1 showed that the main challenge is not the complete absence of regulation, standards or formal occupational safety structures. In all partner countries, occupational safety and health is supported by legal and institutional frameworks. However, these frameworks do not automatically lead to effective ergonomic practice in small enterprises. Ergonomics is often treated as a secondary element of compliance rather than as a practical tool for improving work organisation, workplace design, employee well-being and productivity.

The needs analysis identified a clear gap between formal knowledge and practical application. Many small enterprises are aware of occupational safety requirements, but they lack accessible methods, time, internal capacity and implementation logic to apply ergonomic principles in everyday work. This led the consortium to conclude that the SAFE-D training approach should not be based on theory-heavy knowledge transfer. Instead, it needed to support practical problem-solving, workplace observation, employee participation, step-by-step implementation and organisational learning.

Based on these findings, the partners developed a tailored curriculum logic and Guidebook. The Guidebook translated the results of the needs analysis into a structured SAFE-D ergonomic intervention model. This model follows a 6+1 phase logic: preliminary self-assessment, framework creation and goal setting, condition analysis, conceptual design, detailed planning, implementation and pilot testing, and evaluation, documentation and knowledge sharing.

There were no fundamental deviations from the originally planned activity. Activity A1 remained focused on needs analysis, field research and curriculum development. However, some implementation adaptations were necessary and justified.

First, the needs analysis had to be implemented flexibly because SMEs were difficult to reach and often had limited availability. Participation depended strongly on personal contact, trust-building and the ability to explain that the activity was not an inspection.

Second, the empirical work was not designed as a statistically representative national survey. It was implemented as an applied, practice-oriented needs analysis. This approach was appropriate for the project because the aim was to identify recurring patterns, constraints and practical training needs that could inform curriculum development.

Third, the Hungarian implementation was extended beyond the minimum enterprise visit requirement. Instead of limiting the process to five visits, DSGI conducted 14 company visits. This strengthened the empirical basis of the Hungarian needs analysis and made it possible to refine the curriculum and training concept before the pilot implementation.

Fourth, some outputs became more detailed and comprehensive than originally expected. During implementation, the partners recognised that a simple curriculum description would not be sufficient. The project therefore developed a broader conceptual and methodological framework, including the Guidebook and the SAFE-D intervention model, which later supported Activity A2 and the pilot training process.

Activity A1 was implemented successfully and provided the necessary evidence base for the further development of the SAFE-D training materials and workplace-based mentoring methodology.

5.2.2 Target group of the implemented activity

The primary target group of Activity A1 consisted of adults connected to small and micro-enterprise work environments. This included employees, managers, business owners,

entrepreneurs and people responsible for workplace safety, work organisation or organisational development.

The activity also addressed adult education providers, trainers, professional organisations and stakeholders from occupational safety, ergonomics and human factors networks. In line with the original project concept, the broader target group also included unemployed adults and job seekers, because basic ergonomic literacy can support employability, safer job entry and better understanding of workplace expectations.

In practice, the direct fieldwork focused mainly on SMEs, micro-enterprises, employees, managers and company representatives. This was necessary because the needs analysis required access to real workplaces, real tasks and actual organisational conditions. The questionnaire-based part of the activity allowed the project to reach a broader adult learning target group, while the company visits provided deeper workplace-level insight.

In Hungary, the target group was represented through 14 company visits covering diverse work environments. These included office-based work, administrative and service activities, production-related environments, logistics-related work, information technology, maintenance-related activities and mixed organisational settings. This made it possible to explore both physical and office-based ergonomic problems and to identify practical needs relevant to different types of SMEs and SME-related organisations.

The target group remained consistent with the original project plan, but its practical interpretation required flexibility. The participating enterprises differed significantly in size, sector, organisational maturity and internal management capacity. Some businesses were closer to self-employment or owner-led microbusinesses than to formally structured SMEs. Others had more developed organisational systems and clearer internal safety responsibilities.

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This variation was useful for the project. It showed that the SAFE-D methodology needed to be adaptable to different levels of organisational maturity. Very small businesses require simple, visual, low-cost and immediately applicable tools. More structured SMEs may benefit from systematic assessment methods, action planning, internal training and integration with occupational safety management.

The sectors represented during the needs analysis were diverse. They included manufacturing, construction, installation, digital printing, beauty services, office-based work, logistics-related activities, administrative work, service-sector functions, IT-related activities, maintenance-related work and mixed organisational environments. This diversity confirmed that ergonomic risks are not limited to physically demanding industrial tasks. They are also present in office work, service work, small workshops, customer-facing work and digitally supported work environments.

There was no major deviation from the planned target group. The main adaptation was that the activity concentrated on those actors who could provide meaningful information about real work situations: employees, managers, business owners, trainers and company representatives. This strengthened the practical relevance of the needs analysis and ensured that the later training concept was based on realistic SME conditions.

5.2.3 Contribution to the project objectives

Activity A1 made a fundamental contribution to the achievement of the SAFE-D project objectives. It provided the knowledge base, empirical evidence and curriculum logic for all later project activities.

The first major contribution was the identification of real workplace needs. The activity showed that ergonomic risks are present in small enterprises, but they are often managed informally. Workers may experience discomfort, fatigue or physical strain, but these problems are not always recognised as ergonomic issues. Managers may recognise the importance of safety, but they often lack time, resources and practical tools to address ergonomics systematically.

The second contribution was the identification of the gap between formal regulation and practical implementation. The partner countries have established occupational safety and health frameworks, and several relevant standards and regulations exist. However, SMEs often experience these frameworks mainly through documentation, inspections or external services. The practical meaning of ergonomics is less visible in daily work organisation and operational decision-making.

The third contribution was the clarification of training needs. Activity A1 showed that SME actors need more than general information. They need practical, understandable and context-sensitive guidance. The most important needs include recognising ergonomic risks in everyday tasks, applying simple assessment methods, involving employees, planning feasible improvements, using existing tools more effectively, and understanding how digital tools can support ergonomic improvement.

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The Hungarian findings strongly supported this conclusion. The 14 company visits showed that ergonomics was often present as a practical issue but not as a structured management topic. Office ergonomics was also a significant issue: sitting posture, monitor position, chair adjustment, desk layout, and the lack of movement or micro-break routines appeared as recurring themes. The visits also showed that safety documentation often existed, but its practical connection to everyday behaviour varied. Employee involvement and communication were central issues, and smaller organisations needed realistic, low-cost and step-by-step solutions.

The fourth contribution was the development of a curriculum logic suitable for adult education. The needs analysis confirmed that a conventional classroom-based model would not be sufficient. The project therefore developed a process-based training approach built around workplace problems, guided autonomy, mentoring, peer learning and practical outputs. This directly supported the later design of Activity A2.

The fifth contribution was the creation of a shared professional understanding among the partners. Activity A1 helped the consortium compare national contexts, identify common challenges and understand country-specific differences. This was important for creating a transferable methodology that could be used in Hungary, Türkiye and Bulgaria while still allowing national adaptation.

The sixth contribution was the integration of digital and future-oriented aspects into the project logic. The needs analysis showed that digital tools are still underused in SME ergonomics practice. As a result, the SAFE-D curriculum was designed to include digital support as an optional but important element, for example through documentation, checklists, visual guidance, simple data collection and digital communication tools.

In this way, Activity A1 directly supported the project's overall objective: strengthening workplace safety through applied ergonomics in the digital age. It transformed the project from a general idea into an evidence-based, workplace-oriented and pedagogically structured intervention concept.

5.2.4 Achieved results of the activity

Activity A1 achieved several important quantitative, qualitative and methodological results.

The main quantitative results were the following:

- the needs analysis was implemented in three partner countries: Hungary, Türkiye and Bulgaria;
- at least **24 enterprises** were covered through structured company visits;
- **14 company visits** were conducted in Hungary;
- **5 company visits** were conducted in Bulgaria;
- **5 company visits** were conducted in Türkiye;
- **111 valid questionnaire responses** were collected across the partner countries;
- four main questionnaire target groups were addressed: employees, employers/managers, training managers/adult education providers and adult learners;
- structured company visit and observation tools were used;
- national regulatory, institutional, standardisation and training contexts were analysed;
- scientific and professional literature was reviewed;
- a comprehensive SAFE-D Need Analysis Report was prepared;
- a SAFE-D Guidebook and curriculum logic were developed on the basis of the needs analysis.

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The main qualitative results were the following.

First, the activity identified recurring ergonomic risk factors in small enterprises. These included suboptimal working postures, repetitive tasks, static load, manual handling, poor workstation adjustment, limited task rotation, insufficient micro-break routines, poor use of existing equipment, and limited awareness of cumulative workload.

Second, the activity identified organisational barriers to ergonomic improvement. These included lack of time, limited resources, weak internal responsibility, informal management practices, inconsistent training, weak communication, limited employee involvement and the tendency to treat occupational safety as a compliance issue rather than a continuous improvement process.

Third, the activity showed that SMEs need simple and practical tools. The findings confirmed the importance of checklists, visual guides, short explanations, workplace observation methods, examples, mentoring and step-by-step intervention planning. These tools are more suitable for SMEs than complex expert-only assessment systems.

Fourth, the activity demonstrated the importance of human factors. The company visits and stakeholder discussions showed that ergonomic improvement is not only about furniture, machines or physical workload. It also involves mental workload, communication, task variability, stress, safety culture, motivation and participation.

Fifth, the activity produced concrete input for the curriculum. The needs analysis directly shaped the SAFE-D intervention model. The resulting curriculum logic moved from traditional knowledge delivery towards intervention-driven learning. This means that participants are expected to work on real problems, define goals, analyse work conditions, plan feasible interventions, test or prepare solutions, document results and share lessons learned.

Sixth, the activity produced a transferable European learning model. Although the partner countries differ in legal, institutional and organisational context, the needs analysis identified common patterns across SMEs. These common patterns supported the development of a methodology that is adaptable to other European SME environments.

The country-specific findings also added important value.

In **Hungary**, the 14 company visits formed a substantial empirical basis for Activity A1. The visits confirmed that Hungarian SME-related workplaces face a wide range of ergonomic and occupational safety challenges, including posture-related problems, office workstation issues, repetitive work, manual handling, inconsistent use of ergonomic solutions, limited employee feedback systems, uneven documentation practices and varying levels of safety awareness. At the same time, the visits showed that companies are open to improvement when the approach is practical, respectful and adapted to their real conditions.

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In **Bulgaria**, the five company visits showed strong motivation for improvement, supportive management attitudes and good communication with BAEHF experts. At the same time, they revealed missing safety signage, poor ergonomic furniture, limited awareness of human factors, lighting problems in office work, congested layouts in some workplaces, dust exposure in manufacturing and insufficient micro-break routines.

Company Name:

BEL-RS Ltd

Time and Place of the Visit:



SAFE-D Company visit BEL-RS Ltd, Bulgaria

The photograph illustrates a moment from the SAFE-D company visit process in Bulgaria, carried out as part of Activity 1 – Need Analysis and Development of a Tailored Ergonomics Curriculum for Small Enterprises. The visit took place at BEL-RS Ltd. on 7 November 2024 and was conducted by the Bulgarian Association of Ergonomics and Human Factors. The picture should be understood as a documented snapshot of the exploratory workplace assessment at that specific point in time. It shows how the project team collected information through discussion with company representatives, observation of workplace conditions and review of safety and ergonomics-related practices. The visit was not an inspection, but a structured needs-analysis activity aimed at understanding real SME working conditions and identifying practical opportunities for improving workplace safety, ergonomics and employee well-being.

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In **Türkiye**, the needs analysis highlighted the importance of continuous management commitment, employee involvement, effective communication, recurring training, incident follow-up, mental health and stress management, and integration of occupational safety into business processes. The Turkish findings strongly supported the need for preventive, educational and supportive approaches rather than only punitive or inspection-driven systems.

Activity A1 also produced several broader learning outcomes for the project. It confirmed that ergonomics training should be practical, participatory and workplace-based. It showed that employee involvement is essential for identifying real problems. It demonstrated that small-scale, low-cost improvements can be meaningful in SME environments. It also confirmed that training should support not only knowledge, but also attitude, ownership and application.

The outputs of Activity A1 were used directly in Activity A2. The Guidebook, curriculum logic and intervention model provided the methodological foundation for the on-site ergonomics workshops, mentoring activities, participant workbooks, training logs and pilot implementation.

Therefore, Activity A1 did not remain an isolated research activity. It became the foundation for the practical training and mentoring phase of the project.

Activity A1 successfully achieved its planned objectives. It provided a comprehensive and practice-oriented understanding of the needs of small and micro-enterprises in relation to occupational safety and applied ergonomics. The activity combined desk research, company visits, questionnaires, interviews, national context analysis and curriculum development.

The empirical basis of the activity was stronger than originally expected. Across the partner countries, at least 24 enterprises were covered through structured company visits, including 14 visits in Hungary, 5 in Bulgaria and 5 in Türkiye. This provided a strong practical foundation for identifying real workplace needs and shaping the later SAFE-D training methodology.

The most important result of the activity was the recognition that SMEs do not only need more information. They need practical guidance, simple tools, mentoring, employee involvement and a clear implementation pathway. This conclusion shaped the entire SAFE-D methodology and led to the development of a workplace-based, intervention-oriented curriculum model.

Activity A1 therefore made a decisive contribution to the project. It created the empirical and conceptual foundation for Activity A2, supported the development of the SAFE-D Guidebook and training materials, and ensured that the project outputs were aligned with real SME needs.

5.3 Activity A2 – On-site Workshops and Mentoring

5.3.1 Description of the implemented activity

Activity 2 focused on the practical implementation, testing and validation of the SAFE-D methodology through workplace-based ergonomics workshops, mentoring activities, guided workplace analysis, and company-level ergonomic intervention projects.

The activity was implemented in three partner countries: Hungary, Türkiye and Bulgaria. Altogether, the pilot phase involved **11 organisational pilot settings and 45 direct participants**. The participating organisations represented a broad range of workplace realities, including office work, public-service activity, production, energy, machinery manufacturing, furniture manufacturing, construction and installation, beauty services, printing and personalised gifts, logistics-related work, and industrial cleaning technology.

The activity was built on the results of Activity 1. The needs analysis confirmed that micro and small enterprises often do not primarily lack information about occupational safety and ergonomics; rather, they need practical support in recognising ergonomic problems, setting realistic priorities, involving employees, and translating general knowledge into everyday workplace action. Activity 2 therefore moved beyond a conventional training course and applied an intervention-based learning model. Participants were supported in identifying real ergonomic issues in their own work environment, analysing them in context, developing feasible solutions, and reflecting on the results.

The developed SAFE-D materials were used as the professional and methodological basis of the activity. These included the SAFE-D Curriculum and Intervention Guidebook, Tool Box, Workbook, Trainers Manual and pilot training materials. The materials formed a coherent intervention system: the Curriculum and Intervention Guidebook provided the conceptual and professional foundation, the Tool Box supported ergonomic assessment and solution development, the Workbook guided participants through practical tasks, and the Trainers Manual supported facilitation, mentoring and implementation. The materials were revised iteratively during implementation based on trainer observations, participant feedback and workplace realities

The implementation followed a common logic across the partner countries:

1. initial orientation and relevance building,
2. workplace-level problem identification,
3. goal setting and task clarification,
4. analysis of workplace conditions,
5. development of possible intervention options,
6. planning and implementation or preparation of small-scale improvements,
7. evaluation, presentation and reflection,
8. documentation and consolidation of lessons learned.



Hungarian participants at the closing session

In Hungary, the pilot was implemented by **DSGI Human Engineering Ltd.** in February and March 2026. It involved 13 participants across five organisational settings: a modern office environment on Váci Road, a public-service organisation in Várpalota, a production environment in Esztergom, the Hungexpo office context, and a smaller industrial cleaning technology company. The Hungarian implementation followed a blended format, including a face-to-face opening session, online consultations, on-site workplace visits, mentoring support, participant project work, and a closing presentation session. The pilot started with a face-to-face opening session on

26 February 2026 and ended with a closing presentation session on 31 March 2026.and orientation

In **Türkiye**, the pilot was implemented in three companies: BATEN Renewable Energy, MUTLUSU Water Pumps Manufacturing, and ERSA Furniture Manufacturing. The Turkish pilot involved **25 direct participants**: 12 from BATEN Energy, 9 from MUTLUSU, and 4 from ERSA Furniture. The implementation followed a structured multi-stage blended process, including preliminary self-assessment, goal setting, workplace analysis, conceptual planning, technical and human planning, implementation, evaluation, documentation and reporting. This national pilot was especially valuable for testing the SAFE-D model in industrial and production-oriented environments.

In **Bulgaria**, the pilot was implemented by the Bulgarian Association of Ergonomics and Human Factors in three SMEs in Varna: BEL-RS in construction and installation, Mari Studio in beauty services, and WildArt in printing and personalised gifts. The Bulgarian pilot involved **7 direct participants** and was delivered through one full working day of on-site training per company. The methodology included ergonomic questionnaires, satisfaction surveys, on-site observations, photographic documentation, attendance lists, follow-up interviews, demonstrations, workstation assessments, micro-break routines, checklists, risk identification and human factors analysis.

Activity 2 was implemented successfully and achieved its core purpose: the SAFE-D methodology and materials were tested in real workplace settings, and the training concept was validated across different national, organisational and sectoral contexts.

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Several justified implementation adaptations were introduced in response to real workplace conditions and partner-country contexts.

First, the implementation format was adapted to national and organisational realities. The original plan referred to an introductory training session, on-site consultations and Zoom consultations. This logic was maintained, but the exact structure varied between countries. Hungary used a blended, facilitation-based and highly reflective mentoring model. Türkiye applied a structured multi-week industrial implementation process. Bulgaria used intensive one-day company-level on-site training supported by questionnaires, observation and follow-up. These differences did not weaken the activity; rather, they strengthened the validation of the SAFE-D model by testing it under different realistic conditions.

Second, the developed materials were broader and more coherent than originally described. The proposal referred mainly to a course guide and workbook. During implementation, these were complemented by a Tool Box, Trainer's Manual, pilot training materials and comparative pilot synthesis. This expansion was necessary because the pilot showed that companies needed not only training content, but also facilitation tools, documentation support and practical guidance for workplace implementation.

Third, the Hungarian pilot required adaptive project management. The successfully completed Hungarian pilot was the second implementation attempt. The original Hungarian pilot was started according to the initial project timeline, but organisational and personnel changes in the participating enterprises made continuation impossible. The Hungarian team therefore

reorganised the implementation and completed the pilot with a more stable participant group and a blended mentoring structure. This was not a failure of implementation, but an important learning outcome. It demonstrated that SME-related workplace interventions require flexibility, contextual adjustment and realistic project management.

5.3.2 Target group of the implemented activity

The target group of Activity 2 consisted primarily of people directly connected to workplace improvement in micro, small and SME-related organisations. The direct participants included employees, managers, business owners, company representatives, HR/support actors, trainers and other organisational participants who were able to identify workplace problems, contribute to analysis, support implementation, or influence organisational learning.

In Hungary, the target group included company representatives and organisational participants from five different workplace settings. Their roles varied according to the organisation, but they were all involved in identifying ergonomic problems, developing intervention ideas and presenting results. The Hungarian pilot showed that the SAFE-D approach is most effective when the target group is not defined only by job title, but by the participant's practical role in recognising, supporting or implementing ergonomic improvement.

In Türkiye, the target group included employees, company representatives, trainers and management-level actors from the energy, machinery and furniture sectors. The Turkish implementation demonstrated that the training was relevant not only for individual learners, but also for company-level safety management and organisational development.

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In Bulgaria, the target group included managers, an engineer, a project leader, an operator, an intern and a beautician. The Bulgarian pilot was especially important because it showed the relevance of SAFE-D for very small enterprises, self-employed professionals, service-sector workplaces and small partner networks.

The indirect target group was broader than the direct participants. In several cases, other employees, managers or supporting organisational actors were involved through consultations, worker feedback, workplace observation, internal discussions, HR participation, or planned follow-up measures. Therefore, the actual organisational reach of Activity 2 was wider than the number of direct participants alone.

There was no substantial deviation from the main target group. The core focus remained on SME-related workplaces and adult learners connected to workplace safety and ergonomics. The main adaptation was that the direct pilot implementation concentrated on people who could participate in real workplace-based improvement processes. This was appropriate because the SAFE-D methodology requires practical access to work systems, tasks, tools, behaviour and organisational decision-making.

The direct pilot participants were mainly employees, managers, company representatives, HR/support actors, trainers and organisational participants involved in workplace improvement. Although the original target group also included unemployed individuals seeking employment,

this group was not a central direct participant group in the pilot implementation. The reason is that Activity 2 was primarily workplace-based and required access to real company environments, work processes and organisational decision-making. The training materials and results, however, remain relevant for adult learners and job-seekers, because they can be used in further adult education and employability-oriented training.

Some participating organisations were larger or more structured than micro-enterprises. This was especially visible in the Turkish industrial pilot, due to the country-dependent SME classification. This controlled and useful broadening of the implementation context allowed the partnership to test whether the SAFE-D methodology could be transferred from micro and small enterprises to more complex industrial settings. The results confirmed that the model is flexible and can be adapted to different organisational scales.

5.3.3 Contribution to the project objectives

Activity 2 made a central contribution to the achievement of the SAFE-D project objectives. It translated the findings of the needs analysis and the developed training materials into real workplace practice.

First, the activity validated the SAFE-D training materials. The Guidebook, Tool Box, Workbook, Trainers Manual and Logbook were not only prepared as formal outputs, but were tested in practical pilot environments. This confirmed that the materials can support workplace-based adult learning, ergonomic problem identification and intervention planning.

Second, Activity 2 increased ergonomic awareness and applied competence among participants. Across the three countries, participants worked with topics such as prolonged sitting, workstation behaviour, manual handling, repetitive movement, working height, tool-related strain, PPE use, machine guarding, micro-breaks, mental workload, fire safety, chemical safety and safety culture. This helped participants understand ergonomics not as an abstract concept, but as a practical approach to improving health, safety, comfort, efficiency and work quality.

Third, the activity supported the implementation or preparation of practical ergonomic improvements. The pilots produced QR-code-based ergonomic guidance, awareness materials, instructional video concepts, workstation reorganisation, ergonomic checklists, improved tool placement, improved lifting techniques, posture routines, lumbar support, footrests, manual handling improvement proposals, PPE-related improvements, job rotation planning, eye-rest awareness measures, and strengthened machine guarding and lockout/tagout procedures. Several participating organisations also initiated internal discussions regarding future ergonomics-related training and workplace improvement planning.

Fourth, the activity strengthened organisational ownership. The pilots showed that meaningful ergonomic improvement depends not only on external expert advice, but also on internal recognition, employee involvement, management support and realistic scope-setting. This was especially clear in the Hungarian pilot, where the trainer acted mainly as a facilitator and mentor, helping participants define their own workplace problems and work through them in a structured way.

Fifth, Activity 2 supported the sustainability of the project results. The pilots generated practical examples, good practices, participant feedback and country-level lessons that can be used in future training, dissemination and further development. The process also showed which elements of the methodology should be retained: workplace-centred learning, facilitation-based support, peer exchange, small-scale interventions, behavioural reinforcement, and follow-up.

Sixth, the activity validated the transferability of the SAFE-D model. The three national pilots jointly demonstrated that the methodology can work in different implementation realities: adaptive and reflective blended mentoring in Hungary, structured industrial implementation in Türkiye, and micro-enterprise and service-sector application in Bulgaria. This cross-country validation is one of the most important achievements of Activity 2.

5.3.4 Achieved results of the activity

Activity 2 achieved both quantitative and qualitative results.

The main quantitative results were the following:

- the activity was implemented in **three partner countries**: Hungary, Türkiye and Bulgaria;
- **11 organisational pilot settings** were involved;
- **45 direct participants** took part in the pilot activities;
- **5 organisational settings and 13 participants** were involved in Hungary;
- **3 companies and 25 participants** were involved in Türkiye;
- **3 SMEs and 7 participants** were involved in Bulgaria;
- several sectors were covered, including office work, public service, production, energy, machinery, furniture, construction and installation, beauty services, printing and personalised gifts, logistics-related work and industrial cleaning technology;
- the SAFE-D Guidebook, Tool Box, Workbook, Trainers Manual, Logbook and pilot training materials were applied during the activity;
- country-level pilot reports and a comparative Activity 2 synthesis were prepared.

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The main qualitative results were the following.

In Hungary, the pilot confirmed the value of an intervention-based and facilitation-oriented learning model. Participants worked on real workplace problems and developed practical or conceptual solutions. Examples included QR-code-based workstation guidance, chair-adjustment video concepts, awareness materials, small physical or organisational improvements, worker feedback processes, and structured intervention plans. The Hungarian experience showed that the main gap in SME-related environments is often not the complete absence of knowledge, but the lack of ownership, application logic, realistic prioritisation and behavioural reinforcement.

In Türkiye, the pilot demonstrated that the SAFE-D methodology can be operationalised effectively in industrial and production-oriented contexts. The three companies used the training and mentoring process to identify ergonomic risks, review tasks, develop corrective actions, and connect ergonomics with occupational safety management. Practical results included manual

handling awareness, job rotation planning, improved PPE storage and hygiene practices, eye-rest awareness measures, machine guarding improvements, lockout/tagout strengthening, and more systematic recognition of ergonomic risks in production-related tasks.

In Bulgaria, the pilot confirmed the relevance of SAFE-D for very small enterprises and service-sector workplaces. BEL-RS improved lifting techniques and updated internal training. Mari Studio introduced lumbar support, footrest and posture routines. WildArt reorganised workstation layout, introduced ergonomic checklists and improved tool placement. The Bulgarian pilot also strengthened awareness of human factors, micro-breaks, mental workload, fire safety and chemical safety.

Across all countries, the pilots confirmed that ergonomics training is most effective when it is connected to real workplace situations. Participants responded positively when the training was practical, problem-centred, and linked to their own work environment. The activity also showed that small, feasible and visible interventions can be more effective than ambitious but unrealistic development plans.

The activity also produced important methodological results. It confirmed that the trainer's role should not be limited to lecturing. In the SAFE-D model, the trainer is more effective as a facilitator, mentor and reflective partner. This approach helps participants define problems more clearly, set realistic goals, compare possible solutions, and build internal ownership.

Finally, Activity 2 generated evidence for the wider use of the SAFE-D methodology. The pilots demonstrated that the model is suitable for adult education, workplace training, SME development, occupational safety improvement and applied ergonomics. The outputs and lessons learned can be used by companies, trainers, adult education providers and professional organisations.

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The evaluation of Activity 2 showed that the SAFE-D methodology is relevant, practical and transferable. The feedback from participants, trainers and company-level actors confirmed that the training materials were understandable and useful, and that the intervention process helped participants move from general awareness to practical action.

A key lesson was that SME environments require adaptive implementation. Companies often have limited time, limited management capacity, overloaded daily operations and different levels of organisational maturity. For this reason, a rigid training model would not be appropriate. The SAFE-D model worked because it allowed different organisations to select relevant problems and develop solutions that matched their own possibilities.

Another important lesson was that ergonomics should not be treated only as a technical topic. In several pilot cases, the main issue was not missing equipment, but behaviour, work organisation, internal communication, and the underuse of existing tools. This was especially clear in the Hungarian office cases, where good ergonomic infrastructure already existed, but everyday use did not always follow ergonomic principles.

The pilots also showed the importance of management and organisational involvement. Where managers, HR actors or other supporting functions were involved, the interventions had stronger organisational legitimacy and better sustainability potential.

Peer learning was another important success factor. The closing presentations and shared discussions allowed participants to compare workplace situations, recognise common problems across different sectors, and learn from each other's solutions. This strengthened the educational value of the activity and created a broader learning effect beyond individual company cases.

The activity also confirmed the importance of practical, visual and digital support tools. QR codes, videos, checklists, short guidance materials, digital health-promotion tools and simple reminders were useful because they connected ergonomic knowledge directly to workplace behaviour.

5.4 Activity A3 – Project Management, Dissemination and Reporting

5.4.1 Description of the implemented activity

Activity A3 covered the overall coordination, project management, quality assurance, dissemination, exploitation and reporting of the SAFE-D project. The activity ensured that the work of the three partners remained aligned, that deliverables were developed and reviewed, that project results were disseminated, and that the final documentation was prepared in a coherent way.

The project was implemented through continuous cooperation between the partners from Hungary, Türkiye and Bulgaria. Management activities included regular online coordination meetings, continuous email communication, bilateral and small-group discussions, monitoring of progress, coordination of responsibilities, internal review of deliverables, preparation of reports, and collection of supporting documentation.

In addition to online cooperation, **three in-person project meetings** were organised during the project period. These meetings supported direct professional exchange, strengthened trust between partners, helped clarify project tasks and deliverables, and allowed the consortium to discuss implementation challenges in more depth.



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SAFE-D Project meeting in Varna at 27 July, 2025.

Quality assurance was not treated as a single final control step. The main project documents and deliverables were discussed by the partners, reviewed from professional and practical perspectives, revised when necessary, and accepted only after common agreement was reached. This applied to the main outputs, including the needs analysis, Guidebook, Tool Box, Workbook, Trainers Manual, pilot reports and final synthesis.

Dissemination was implemented throughout the project. It included formal communication through partner websites, social media channels, professional networks, academic and professional discussions, and educational use of project results. Dissemination also took place naturally through project activities during project activities. Company visits, interviews, training sessions, on-site consultations and closing presentations all functioned as awareness-raising and knowledge-transfer opportunities.

Exploitation of results was also part of Activity A3. The project outputs were designed to remain usable beyond the project period in adult education, higher education, vocational training, workplace consultancy, SME development and professional awareness-raising activities.

There was no major deviation from the original purpose of Activity A3. The activity remained focused on management, dissemination and reporting. However, implementation required more flexibility than originally expected. SME recruitment, company availability, national differences, partner schedules and the practical realities of pilot implementation required adaptive coordination. In several cases, workflows and timelines had to be adjusted, but these adaptations supported the successful completion of the project rather than changing its objectives.

5.4.2 Target group of the implemented activity

The direct target group of Activity A3 consisted of the project partners, as the activity focused on coordination, reporting, quality assurance and management of the project. This included the Hungarian beneficiary organisation, **DSGI Human Engineering Ltd.**, the Turkish partner CAPPINNO, and the Bulgarian Association of Ergonomics and Human Factors.

The dissemination and exploitation elements of Activity A3 addressed a broader target group. This included SMEs, micro-enterprises, employees, managers, business owners, adult learners, trainers, occupational safety professionals, ergonomics experts, higher education actors, vocational and adult training providers, and professional or civil organisations.

The practical target group was broader than originally visible from the management description, because dissemination was embedded into real project activities. During company visits, consultations and pilot activities, additional employees and managers were reached beyond the formal participants. In Hungary, for example, the pilot directly involved 13 training participants and representatives of 5 SMEs, while further employees and managers were reached through workplace consultations and discussions.

There was no substantial deviation from the planned target group. The main adaptation was that the project reached several target groups through integrated professional interaction rather than only through separate dissemination events. This made dissemination more natural and more closely connected to the needs of SMEs.

5.4.3 Contribution to the project objectives

Activity A3 supported the achievement of the project objectives by ensuring that the project was implemented, documented, reviewed, disseminated and prepared for long-term use.

First, it ensured project coherence. The partners worked in different national and organisational environments, but Activity A3 helped maintain a common professional direction. Through regular communication, three in-person meetings and joint review, the consortium kept the needs analysis, curriculum development, pilot implementation and reporting connected to the same SAFE-D intervention logic.

Second, Activity A3 supported quality. Deliverables were not simply produced by individual partners and submitted separately. They were reviewed, discussed and accepted at partnership level. This strengthened the professional consistency of the project outputs and helped ensure that the final materials were usable across national contexts.

Third, the activity supported implementation. Project management helped coordinate responsibilities, timelines, national pilot activities, documentation and reporting. This was especially important because SMEs were difficult to reach, and each country required local adaptation.

Fourth, dissemination activities helped make the project visible and useful beyond the immediate consortium. The project results were introduced to companies, employees, trainers, professional networks, academic audiences and education-related contexts. This supported the project's wider objective of raising awareness of applied ergonomics in SME environments.

Fifth, exploitation planning contributed to sustainability. The project materials were designed so that they can be reused after the project in adult education, vocational training, higher education, professional consultancy and future cooperation projects.

In this way, Activity A3 was essential for turning the project from a set of separate activities into a coherent, documented and transferable project result.

5.4.4 Achieved results of the activity

Activity A3 resulted in the successful coordination, dissemination and reporting of the SAFE-D project.

The main achieved results were:

- continuous coordination of the three-country partnership;
- regular partner communication and professional exchange;
- organisation of **three in-person project meetings**;
- preparation, review and finalisation of project deliverables;
- creation of a coherent documentation system;
- partner-level quality assurance and joint acceptance of outputs;
- dissemination through partner websites, social media, professional networks, training contexts and company-level interactions;
- embedded dissemination through company visits, consultations, training sessions and pilot presentations;
- preparation of the final report and supporting project documentation;
- preparation of results for future use and exploitation.

A further important result was that the project created a shared professional knowledge base among the partners. This included a better understanding of SME needs, the practical barriers to ergonomics implementation, the value of workplace-based adult learning, and the importance of adapting common methods to national and organisational realities.

The activity also generated sustainability results. The outputs are available for future use in training, education and consultancy. In Hungary, the results are planned to be used further in higher education, adult training, vocational education and professional consultancy. In Türkiye, the results can support SME development, industrial training and future ergonomics-related

services. In Bulgaria, the results are relevant for ergonomics networks, micro-enterprises and service-sector workplaces.

Activity A3 therefore successfully fulfilled its role. It ensured that the project was managed, documented, disseminated and prepared for continued use. It also strengthened the professional cooperation between partners and created a basis for future joint initiatives.

6 Impact and Follow-up

6.1 Impact on Participants and Organisations

What was the impact of the project on the participants, participant organisations, target groups and other relevant stakeholders? Do you have plans to continue using the results of the project or continue to implement some of the activities after the project's end? (*Maximum 3,000 characters*)

The SAFE-D project had a clear impact on participants, participating organisations, partner organisations and wider target groups. Its main value was that participants did not only receive theoretical information about ergonomics and workplace safety, but applied the knowledge to real workplace situations.

At participant level, the project improved ergonomic awareness, the ability to identify workplace problems, and confidence in developing practical improvement ideas. Participants learned to observe work processes, recognise ergonomic risk factors, define realistic development goals, and connect safety, health, comfort and efficiency. The workplace-based training and mentoring approach made the learning process more meaningful, because participants worked on problems from their own organisations.

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In Hungary, the pilot helped participants move from general awareness to practical action. They completed the training requirements, developed workplace-relevant solutions and presented their results in a structured way. The process strengthened their motivation and responsibility, and helped them understand ergonomics as a useful tool for workplace improvement rather than as an abstract or purely regulatory requirement.

At organisational level, the project contributed to stronger recognition of ergonomics as a practical management and development issue. In several participating SMEs, ergonomics-related problems that had previously been handled informally or postponed were brought into a structured improvement process. Concrete examples included workstation-related adjustments, improved support for sitting behaviour, changes in tool use and work organisation, QR-code-based access to ergonomic guidance, posture routines, improved lifting techniques, ergonomic checklists, PPE-related improvements and stronger attention to safety procedures.

The project also strengthened workplace dialogue. In several cases, employees, managers and other organisational actors were involved in identifying problems and discussing feasible solutions. This participatory approach increased acceptance and supported organisational ownership. Where management support was present, the impact was stronger, because ergonomic

improvement became connected not only to health and safety, but also to work quality, efficiency and competitiveness.

The project also had an important impact on the partner organisations. All partners gained a deeper understanding of SME realities in different national contexts. They improved their training, mentoring and facilitation methods and gained valuable experience in adapting ergonomics concepts to different organisational, cultural and regulatory environments.

The results will continue to be used after the end of the project. The developed materials and methodology are suitable for adult training, vocational education, higher education, workplace consultancy and SME development activities. In Hungary, DSGI plans to integrate the results into education, training, consultancy and cooperation with professional and civil-sector partners. The experience gained through SAFE-D will also support future project applications and the further development of SME-oriented ergonomics and workplace safety methods.

The project created impact beyond the direct training events. It increased awareness, supported practical workplace improvements, strengthened organisational reflection and created reusable tools for future education, consultancy and professional development. The project also strengthened the long-term cooperation potential between the partner organisations and created a basis for future European collaboration in ergonomics, workplace safety and adult learning

6.2 Impact at Local, Regional, European and International Level

The SAFE-D project created impact at local, regional, national and European level.

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At **local level**, the strongest impact was visible in the participating companies. Through company visits, pilot training, on-site consultations and mentoring, the project helped SMEs recognise ergonomic and occupational safety problems in their own workplaces. In several cases, this led to concrete improvements or improvement plans, such as workstation adjustments, better tool placement, posture routines, ergonomic checklists, improved lifting techniques, QR-code-based ergonomic guidance, PPE-related improvements and stronger attention to safety procedures. The project also increased dialogue between employees and managers and helped make ergonomics more visible as a practical workplace development issue.

At **regional and national level**, the project contributed to professional learning and awareness-raising in each partner country. In Hungary, the project results were connected to higher education, vocational and adult training, professional consultancy, chamber-related and civil-sector activities. The project also helped clarify how Hungarian SMEs can be reached, motivated and supported in ergonomics-related development. In Türkiye, the project became especially relevant because changes in the occupational safety and health environment increased the importance of ergonomics and workplace safety support for companies. The Turkish implementation showed how the SAFE-D approach can be connected to industrial training, management commitment and organisational development. In Bulgaria, the project strengthened the visibility of ergonomics and human factors in micro-enterprise and service-sector environments, especially through practical cases in small companies and professional networking.

At **European level**, the project produced a transferable methodology for applying ergonomics in SME contexts. The transnational cooperation was essential because it showed that SMEs in different countries face similar challenges, such as limited time, limited resources, low awareness of ergonomic standards and difficulties in turning knowledge into practice. At the same time, the project also revealed important national differences in regulation, organisational maturity, business culture and implementation capacity. This combination strengthened the European relevance of the results: the SAFE-D model is not a single-country solution, but an adaptable framework that can be used in different SME environments.

At **international level**, the project contributed to professional exchange between ergonomics, occupational safety and adult education actors in three countries. It created a common knowledge base, tested materials in different contexts and generated experience that can support further international cooperation. The partners see potential for continuing the cooperation in future Erasmus+ or other international projects, possibly in a broader partnership structure. Future directions may include extending the methodology beyond workplace ergonomics towards product and service ergonomics, system-based thinking, human-centred innovation and digital ergonomics.

As an additional dissemination and visibility result, SAFE-D was recognised as a Top 5 Finalist, 5th Place, in the EU Project of the Year Award category at the 2025 Triple E Awards. This external recognition helped increase the visibility of the project and supported the wider professional relevance of its results.

6.3 Dissemination of Results

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Dissemination was implemented throughout the project and was closely connected to the actual project activities. The consortium did not treat dissemination only as a final communication task, but as an integrated part of implementation, awareness-raising and knowledge transfer.

Inside the partnership, dissemination took place through regular coordination meetings, exchange of interim findings, shared development of deliverables, partner review of project documents and mutual learning from national implementation experiences. The partners discussed the results of the needs analysis, company visits, training material development and pilot activities, and used these exchanges to improve the common methodology.

Outside the partnership, dissemination was carried out through several channels. The main target groups were SMEs and their employees, managers, business owners, trainers, adult learners, higher education and vocational education actors, professional and civil organisations, and the broader ergonomics and workplace safety community.

A major dissemination channel was direct contact with SMEs. During questionnaire distribution, interviews, company visits, consultations and pilot training, the project was introduced to companies and workplace actors. These activities did not only collect information or support training; they also raised awareness of ergonomics and workplace safety. The questionnaire itself functioned as a dissemination tool, because it encouraged respondents to reflect on ergonomic risks and training needs.

Company visits and consultations also had a strong dissemination effect. They reached not only formal participants, but also additional employees, supervisors and managers who became involved in workplace discussions, observation and solution development. In this way, dissemination occurred directly inside companies and was linked to real work situations.

The project results were also disseminated through professional and educational channels. In Hungary, the materials and experiences were used in university teaching, vocational and adult-learning-related activities, professional discussions and consultancy contexts. This increased the reach of the project beyond the direct pilot participants and helped integrate the results into longer-term educational and professional practice.

Online dissemination was supported through partner websites and social media channels, including Facebook and Instagram. Project dissemination also included workplace-level presentations, mentoring discussions, participant reflection activities and practical demonstration sessions.. Partners created or maintained project-related website sections in national languages and/or English. These channels were used to present the project objectives, activities, outputs and results to a wider audience.

The project also supported dissemination through academic and professional visibility. The needs analysis and project experience contributed to academic and professional discussions, and the project was also linked to professional recognition and award-related visibility opportunities. These activities helped position SAFE-D within the wider field of ergonomics, occupational safety and adult education.

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At transnational level, dissemination was strengthened by the cooperation between partners from Hungary, Türkiye and Bulgaria. Each partner shared the project with its own national networks, while the common outputs demonstrated that the methodology could be adapted to different national and organisational contexts. This created European added value and supported further international use.

The project also generated follow-up dissemination potential. The partners intend to continue using the materials in training, education, consultancy and future cooperation. The SAFE-D experience has already inspired ideas for further project applications and for extending the methodology beyond workplace ergonomics toward product and service ergonomics, system-based thinking and human-centred innovation.

6.4 Use of Erasmus+ Platforms

The Erasmus+ environment was used primarily as a reference and dissemination framework during the project.

During preparation, the partnership consulted Erasmus+ guidance and examples of previous projects to better understand expectations and structure. This supported the development of the project proposal and later the organisation of reporting and deliverables. The final report framework itself explicitly includes the use of Erasmus+ platforms as part of preparation, implementation, and follow-up.

During implementation and closure, the project team planned to use the Erasmus+ Project Results Platform for publishing the main public outputs of the project. A conservative publication strategy was adopted: only the four core public deliverables were selected for open publication, while several supporting and implementation-oriented materials remained on internal file servers for documentation and possible audit purposes. This helped keep the public output package clear and user-friendly, while still preserving evidence of implementation.

The partners also intend to continue using Erasmus+ visibility and dissemination opportunities after the end of the project, especially for:

- making the main project results accessible
- supporting future cooperation
- and linking the project experience to future applications and educational activities

6.5 Open Access and Sustainability of Results

The SAFE-D project follows the Erasmus+ principle of open access. The partnership will make the main transferable project results publicly available, so that they can be used by trainers, SMEs, adult education providers, professional organisations and other interested stakeholders after the end of the project.

The core public deliverables are the SAFE-D Need Analysis Report, which presents the empirical and contextual basis of the project; the SAFE-D Curriculum and Intervention Guidebook, which explains the learning and intervention logic of the SAFE-D approach; the SAFE-D Tool Box, which provides practical workplace assessment and implementation resources; the SAFE-D Trainers Manual, which supports trainers and facilitators in guiding the intervention process; and the SAFE-D Workbook, which supports participant-level application. Where relevant for public dissemination, selected pilot reports and the comparative synthesis report are also made available.

These materials represent the main reusable outcomes of the project. They provide practical knowledge on SME needs, applied ergonomics, workplace safety, training methodology, mentoring and small-scale workplace improvement. They are suitable for wider use because they are not limited to one company or one national context, and they can be adapted to different training and consultancy situations.

The main deliverables will be made available through the Erasmus+ Project Results Platform and, where appropriate, through partner websites and professional communication channels. This ensures transparency, public visibility and free access to the project's key outputs.

At the same time, not all working documents created during the project will be published openly. Some materials were produced mainly for internal implementation, administration, company-level preparation, quality control or reporting support. These documents may contain context-specific information, draft elements, company-related working notes or implementation details that are not appropriate or useful for general public publication. They will be stored by the partners for auditability, internal learning and future professional use.

No major limitation is planned for the use of the open materials. However, the project experience showed that effective use requires adaptation to local and organisational contexts. Users may need to adjust examples, terminology, training length, sector-specific cases or facilitation methods to the needs of particular SMEs. This flexibility is not a restriction, but a condition for meaningful practical application.

Sustainability will be ensured through several mechanisms. The partners intend to continue using the results in adult education, vocational education, higher education, workplace consultancy, SME development and professional awareness-raising activities. In Hungary, DSGI plans to integrate the results into education, training and consultancy work, and to use the methodology in future cooperation with professional and civil-sector partners. The materials will also support future training programmes related to ergonomics, occupational safety and organisational development.

The partners also intend to build on the SAFE-D experience in future cooperation. Possible directions include further Erasmus+ applications, broader international partnerships, and the extension of the methodology towards product and service ergonomics, digital ergonomics and human-centred organisational development.

7 Feedback to the European Commission

Proportionality and Simplicity of Procedures

Answer: **Yes**

Development of High-Quality Practices

Answer: **Yes**

The project developed several high-quality practices that can continue to be used after the project period in the fields of ergonomics, workplace safety and adult learning. The most important of these was the workplace-based, practice-oriented ergonomics improvement approach. The project did not only provide training materials to participants; it created a process in which participants identified and analysed their own workplace problems and developed feasible improvement proposals.

A further high-quality practice was the direct link between needs analysis and pilot implementation. The results of company visits, questionnaires, interviews and national context analyses were integrated into the training methodology and tool development. This ensured that the project outputs did not remain theoretical, but responded to real SME situations.

The mentoring-supported learning approach was also a strong practice. Participants did not work on their tasks without support; consultations, workplace discussions and trainer feedback helped them throughout the process. This was particularly important for small enterprises, where dedicated ergonomics or occupational safety expertise is often limited.

Another good practice was the focus on small, realistic and feasible interventions. The project did not rely on major investments or complex organisational changes. Instead, it supported improvements that could be started even with limited resources, such as workstation adjustments, better tool placement, posture routines, improved lifting techniques, ergonomic checklists, QR-code-based ergonomic guidance and stronger safety procedures.

The participatory approach was also a high-quality practice. Employees, managers and trainers were involved in identifying problems and developing solutions. This strengthened workplace dialogue, shared responsibility and acceptance of the improvements.

However, the project could not establish high-quality practice equally in every area. The main limitation was SME engagement. Many small enterprises were overloaded, had limited time and were cautious about external contact. In several cases, significant trust-building was needed to clarify that the project was not an inspection, but a development and learning opportunity. For this reason, company involvement was not always as broad or as fast as originally expected.

The project also did not create one fully uniform pilot model across all three countries. This was not a management failure, but the result of major differences in local contexts. In Hungary, an adaptive mentoring-based approach worked well. In Türkiye, a more structured approach in industrial and production environments was effective. In Bulgaria, a flexible application tailored to micro-enterprises and service-sector workplaces proved most suitable. Therefore, the project developed not a rigidly uniform model, but a methodology based on common principles and adaptable to different countries and companies.

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A further limitation was that the use of digital tools was not equally advanced in all partner countries and company contexts. The project successfully used simple digital solutions, such as online consultation, digital documentation and QR-code-based guidance materials. However, a more advanced digital ergonomics assessment system was not established everywhere. This was mainly due to the different digital maturity, resources and technological background of the target SMEs.

The strongest high-quality practices were learning based on real workplace problems, mentoring, participatory ergonomics, small and feasible improvements, and transnational exchange of experience. The areas where fully uniform or deeply integrated practices could not be developed were mainly influenced by the limited capacity of small enterprises, national differences and different levels of digital maturity. These limitations also provided an important lesson: ergonomics development in SMEs works best when it is simple, flexible, trust-based and directly connected to everyday work.

8 Project in numbers

This chapter summarises the quantitative implementation results of the SAFE-D project and shows how the main numerical commitments and indicators of the original application were covered during the project. The figures should be read together with the qualitative descriptions in the previous chapters, because several SAFE-D results were not only numerical outputs, but

also workplace-based learning processes, pilot experiences, mentoring outcomes and reusable professional materials.

The original application defined three main activities with an equal budget allocation of EUR 20,000 each, giving a total Erasmus+ lump-sum grant of EUR 60,000. The planned activities were Activity 1 – Need Analysis and Development of Tailored Ergonomics Curriculum for Small Enterprises, Activity 2 – On-site Ergonomics Workshops and Mentoring Activities, and Activity 3 – Project Management, Dissemination Activities and Reporting. These three activity areas were fully implemented, with justified adaptation to the actual timing, partner-country contexts and SME availability.

8.1 Overall Project Figures

Indicator	Planned / expected in the application	Achieved / documented in the project	
Partner countries	3	3: Hungary, Bulgaria, Türkiye	
Project partners	3	3 partner organisations	
Main project activities	3	3 completed activities	
Total project budget	EUR 60,000	EUR 60,000	47
Main public deliverables	Training and reporting outputs	4 core public deliverables plus supporting materials	
Core public documents	Not limited to one format	Need Analysis Report, Curriculum and Intervention Guidebook, Tool Box, Trainers Manual	
Additional supporting outputs	Training and implementation support	Workbook, Logbook, pilot training materials, national pilot reports, comparative pilot synthesis	
Organisational pilot settings	Strategic selection of micro and small businesses	11 organisational pilot settings	
Direct pilot participants	Adult learners and workplace actors	45 direct participants	
Sectors covered in pilots	SME-related environments	Office work, public service, production, energy, machinery, furniture, construction and installation, beauty services, printing and personalised gifts, logistics-related work, industrial cleaning technology	

8.2 Activity 1 – Need Analysis and Curriculum Development in Numbers

Activity 1 created the empirical and methodological basis of the SAFE-D approach. The original application planned desk research, review of country and sector reports, analysis of scientific and professional sources, enterprise visits, questionnaires, and the development of a needs analysis report and tailored curriculum logic. It also planned at least 5 enterprise visits in each partner country. This target was exceeded: the project covered at least 24 enterprises through structured company visits, including 14 in Hungary, 5 in Bulgaria and 5 in Türkiye.

Activity 1 indicator	Planned / expected in the application	Achieved / documented in the project	
Partner countries included in needs analysis	3	3	
Minimum enterprise visits	At least 5 per country / at least 15 total	24 enterprise visits total	
Enterprise visits in Hungary	At least 5	14	
Enterprise visits in Bulgaria	At least 5	5	
Enterprise visits in Türkiye	At least 5	5	
Questionnaire-based data collection	Employees, managers, adult learners and training actors	111 respondents across partner countries	48
Analytical methods	Desk research, reports, scientific sources, observations, questionnaires	All implemented	
Needs analysis report	Planned	Completed	
Tailored ergonomics curriculum / guide logic	Planned	Completed and integrated into SAFE-D Guidebook	
Link to Activity 2	Needs analysis to guide training and mentoring	Completed; Activity 2 built on Activity 1 findings	

The Activity 1 results confirmed that the main problem in SMEs is not only lack of information, but also limited practical capacity to recognise ergonomic problems, set priorities and implement feasible improvements. This finding directly shaped the SAFE-D intervention model and justified the later focus on workplace observation, mentoring, simple tools, employee involvement and small-scale improvements.

8.3 Activity 2 – Workshops, Mentoring and Pilots in Numbers

Activity 2 tested the SAFE-D methodology in real workplace settings. The original application planned training materials, a workbook, a detailed course guide, selection of micro and small businesses, an introductory training session, on-site consultations, online consultations, feedback collection, a collective workshop and dissemination of best practices. During implementation, this logic was maintained, but the exact format was adapted to the national and organisational realities of the participating companies.

Activity 2 indicator	Planned / expected in the application	Achieved / documented in the project
Countries implementing pilot activities	3	3
Organisational pilot settings	Strategic selection of micro and small businesses	11 organisational settings
Direct pilot participants	Adult learners, employees, managers and workplace actors	45 direct participants
Hungary pilot	SME-related workplace pilot	5 organisational settings, 13 participants
Türkiye pilot	SME / industrial workplace pilot	3 companies, 25 participants
Bulgaria pilot	SME and micro-enterprise pilot	3 SMEs, 7 participants
Training materials	Workbook and course guide	Guidebook, Tool Box, Workbook, Trainers Manual, Logbook and pilot materials
Introductory training	Approx. 6-hour introductory session	Implemented through nationally adapted opening / orientation formats
On-site learning	On-site consultations	Implemented through visits, workplace observations, company-level mentoring and practical training
Online consultation / follow-up	Zoom consultations	Implemented through blended and follow-up support where relevant
Closing / collective workshop	Participants present learning outcomes	Closing presentations, feedback and reflection activities implemented
Feedback collection	Planned	Participant, trainer and company-level feedback collected

Activity 2 indicator	Planned / expected in the application	Achieved / documented in the project
Best-practice sharing	Planned	Practical examples and pilot lessons documented

The pilot phase involved 11 organisational settings and 45 direct participants. Hungary involved 5 organisational settings and 13 participants; Türkiye involved 3 companies and 25 participants; Bulgaria involved 3 SMEs and 7 participants. The pilot settings represented different work realities, including office work, public service, production, energy, machinery, furniture, construction and installation, beauty services, printing and personalised gifts, logistics-related work and industrial cleaning technology.

The implementation also produced practical workplace results. Examples included QR-code-based ergonomic guidance, workstation guidance materials, chair adjustment video concepts, ergonomic checklists, improved tool placement, improved lifting techniques, posture routines, lumbar support, footrests, manual handling proposals, PPE-related improvements, job rotation planning, eye-rest awareness measures, and strengthened machine guarding and lockout/tagout procedures.

8.4 Activity 3 – Management, Quality, Dissemination and Reporting in Numbers

Activity 3 indicator	Planned / expected in the application	Achieved / documented in the project	50
Project management activity	Planned	Completed	
Shared digital working environment	Planned	Implemented through shared documentation and partner-level file exchange	
Regular online communication	Monthly virtual meetings planned	Regular online meetings, email exchange, bilateral and small-group consultations implemented	
Physical partner meetings	3 meetings, each partner hosting one	3 in-person project meetings organised	
Quality assurance	Quality plan and review process	Partner-level review, document revision and joint acceptance of outputs	
Reporting	Regular reporting and final reporting	Activity reporting, pilot reporting, final report and supporting documentation prepared	
Dissemination plan	Planned	Implemented through partner communication, websites, social media, professional networks and embedded project activities	

Activity 3 indicator	Planned / expected in the application	Achieved / documented in the project
Sustainability / valorisation	Planned	Results prepared for future use in adult education, vocational training, higher education, consultancy and future cooperation
Public availability of results	Planned dissemination	Main transferable outputs prepared for open access publication

Activity 3 ensured that the project was coordinated, documented, reviewed, disseminated and prepared for future use. The original application planned a shared folder system, monthly virtual meetings, three physical project meetings, partner reporting, role allocation, quality assurance, sustainability planning, dissemination planning, website and social media communication, and final reporting.

A key result of Activity 3 was that project management and dissemination were not limited to administration. Dissemination also happened through company visits, interviews, training sessions, consultations and closing presentations. This helped reach SMEs, managers, employees, trainers, occupational safety professionals, ergonomics experts, education providers and professional organisations in a natural and practice-oriented way.

8.5 Indicator Fulfilment Summary

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Overall, the SAFE-D project covered the main numerical and implementation indicators of the original application. The partnership implemented all three planned activity areas, maintained the three-country cooperation structure, used the full approved lump-sum activity logic, completed the needs analysis, developed the training and intervention materials, implemented pilot activities in all partner countries, organised partner-level management and quality assurance, and prepared the project results for dissemination and future use.

Some indicators were implemented in an adapted way. This was especially visible in Activity 2, where the original plan referred to a common introductory training session and a fixed consultation structure. In practice, the same intervention logic was maintained, but the national implementation formats differed. Hungary used a blended and reflective mentoring model, Türkiye applied a structured multi-stage industrial implementation process, and Bulgaria used intensive company-level on-site training with observation and follow-up. This adaptation did not reduce the fulfilment of the activity; it strengthened the validation of the SAFE-D approach across different SME and workplace realities.

The project therefore achieved both the planned quantitative outputs and the broader professional purpose of the application: it created, tested and documented a practical, transferable and SME-sensitive ergonomics training and intervention model for adult education and workplace improvement.

9 Project Closing Remarks

The SAFE-D project has reached its formal conclusion, but its results are intended to remain active beyond the project period. The partnership developed, tested and consolidated a practical approach for strengthening workplace safety through applied ergonomics in small and medium-sized enterprises. The project confirmed that ergonomics is not only a matter of compliance or technical adjustment. It is also a practical way to improve work organisation, employee well-being, participation, safety culture and sustainable workplace performance.

A central lesson of SAFE-D is that SMEs often need more than general information. They need simple tools, realistic guidance, mentoring, employee involvement and step-by-step support for turning ergonomic knowledge into workplace action. The project therefore moved from needs analysis to curriculum development, from training materials to workplace-based piloting, and from pilot experience to transferable outputs. The Need Analysis Report, Curriculum and Intervention Guidebook, Tool Box, Trainers Manual and supporting materials together form a reusable framework for future training, consultancy, adult education and workplace development activities.

The implementation also showed the value of transnational cooperation. The Hungarian, Bulgarian and Turkish partners worked in different organisational, regulatory and cultural contexts, but the project revealed common challenges across SME environments: limited time, limited resources, fragmented ergonomic knowledge and the difficulty of moving from awareness to implementation. At the same time, the national pilots demonstrated that the SAFE-D methodology can be adapted to different workplace settings, including office work, production, service activities, micro-enterprises and industrial environments.

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The project met its main objectives and produced results that can support further professional and educational work. It created practical resources, tested them in real workplace contexts, involved companies and participants directly, and generated examples of feasible ergonomic improvement. The results are openly reusable and may support adult education providers, trainers, SMEs, occupational safety professionals, ergonomics experts and other stakeholders who wish to promote safer, healthier and more human-centred work.

The SAFE-D consortium closes the project with the conclusion that applied ergonomics can become a realistic and valuable part of SME development when it is presented in an accessible, participatory and practice-oriented way. The project outputs provide a foundation for continuing this work after the formal project period, supporting future training, workplace improvement, professional cooperation and dissemination activities.