

EUROPEAN PARLIAMENT

1999



2004

Committee on Employment and Social Affairs

9 April 2002

WORKING DOCUMENT

on the Commission Communication on adapting to change in work and society: a new Community strategy on health and safety at work 2002-2006 (COM(2002) 118)

Committee on Employment and Social Affairs

Rapporteur: Stephen Hughes

Background

The Commission's proposed Community strategy on health and safety at work (2002-2006) comes some while after the end of the fourth Community programme concerning safety, hygiene and health at work (1996-2000). Although the new Communication refers to the need to build on this and other previous Community programmes in the field, no mention is made of the "final global report...including an independent peer review evaluation" of the fourth programme that the Commission undertook to publish by 31st December 2001¹.

In presenting this new Community strategy, the Commission is responding to its commitment in the Social Policy Agenda² - since recalled on several occasions by the European Parliament (see below). The Commission makes thematic links in the document to its Quality in Work initiative, its Corporate Social Responsibility Green Paper, its White Paper on Governance and the Charter of Fundamental Rights.

Overview of the Commission Communication

The EU's record on health and safety at work puts it on a trend of overall improvement in the field. On the other hand, absolute figures remain high, the situation is actually worsening in some Member States and sectors and enlargement will bring its own challenges - all of which leaves no room for complacency.

The world of work is changing: the labour market is more service-orientated and comprises more diverse forms of employment in different sorts/sizes of organisations, with an ageing and increasingly feminised active workforce. Policies and measures need to take account of patterns of health and safety incidences across socio-economic and demographic groups³ e.g.

- men are more at risk than women from accidents at work, whilst women/men tend to suffer most from different particular diseases
- accidents at work are most frequent amongst young people and most serious amongst older workers
- temporary, part-time and shift workers are more at risk, in contrast to those who have worked longer or are more senior in a particular firm

New diseases and risks are emerging. These include "social risks" - such as stress, depression, anxiety, substance-abuse, violence at work and harrassment - and often relate to a whole set of factors rather than a specific risk.

All of this makes it an appropriate time for the Community to re-define its approach to issues of health and safety at work. Key features of the Commission's proposed response include:

- Importance of a global approach to workers' physical, moral and social well-being - integral part of quality in work and mutually-supportive economic, employment and social policies
- Emphasis on prevention: although this approach is set out in existing legislation, it is not fully understood/implemented; relates to education, awareness-raising and

¹ COM(1995) 282 of 12.7.1995, p.21

² COM(2000) 379 of 28.6.2000

³ Though such analysis needs to take account of patterns of employment (e.g. young people over-represented in precarious employment, most women are employed in services).

anticipation

- Range of policy instruments: legislative, normative (minimum standards) and "progressive" (benchmarking, best practice, social partner action etc)
- Partnership working involving public authorities, social partners, companies, public and private insurers etc - including to make links to related policy areas such as public health, transport and the environment

More specifically, the following are some of the more concrete proposals for action:

- p.10 Commission to produce guides on how to apply existing Directives
- p.10-11 Reference to common labour inspection objectives/standards (no details given)
- p.12 Commission to review implementation of existing Directives and to:
 - propose extending scope of "carcinogenic agents" Directive
 - prepare Communication on musculo-skeletal complaints
 - propose amendments/new provisions on e.g. workplace ergonomics
- p.12 Commission to consider action on harassment and violence at work
- p.12 Commission to consolidate existing Directives and rationalise reporting arrangements
- p.13 Commission to propose merging of advisory committees (ACSHH and SHCMOEI¹)
- p.15 Commission to propose national objective setting in 2002 Employment Guidelines
- p.15 Commission to open an Article 138 procedure with social partners on stress at work
- p.17 Preparations for enlargement: integration of candidate countries into institutions and bodies concerned, as well as Community work on data harmonisation
- p.18 Cooperation with third countries and international organisations e.g. WHO and ILO

European Parliament views on what is needed in the field of health and safety at work

In preparing a response to the proposed Community strategy, it will be important to recall what the European Parliament has previously argued for in relation to health and safety at work. In its resolution² on the Social Policy Agenda, the Parliament called on the Commission to:

"15(c) put in place a genuine Community strategy on health and safety at work which is based on the setting of common comparable objectives, contains an action plan to reinforce the implementation, monitoring and evaluation of the existing directives and includes initiatives on risks that are covered inadequately or not at all, such as skin complaints caused by exposure to the sun's rays, newly emerging risks such as stress and musculo-skeletal disorders and the new work situations, and encourage the use of risk analyses as part of a preventive approach;

(...)

15(h) present a proposal to amend Directive 92/85/EC on the introduction of measures to encourage improvements in the safety and health at work of pregnant workers and workers who have recently given birth or are breastfeeding along the lines of the proposals set out in the resolution adopted by the European Parliament on 6 July 2000 in order to make good the shortcomings revealed with regard to protection and pay for workers and the length of maternity leave;"

¹ The Advisory Committee on Safety, Hygiene and Health Protection at Work and the Safety and Health Commission for the Mining and Other Extractive Industries

² A5-0291/2000 (Rapporteur: Van Lancker)

In its Report¹ on the first Social Policy Agenda scoreboard, the Parliament stated that it:

"14. Regrets, moreover, that the Commission has failed to take into consideration any of Parliament's additional requirements, as set out in its resolution of 25 October 2000 on the new social policy agenda; calls on the Commission to supply information on how it proposes to act on those requirements, in particular:

(...)

- to submit a proposal to amend Directive 92/85/EC on introducing measures to help improve the health and safety of pregnant and breastfeeding workers along the lines of the proposals set out in the resolution adopted by the European Parliament on 6 July 2000, in particular on the length of maternity leave;

(...)

- to take initiatives and submit an action plan designed to effectively prevent musculoskeletal injuries at work"

Further, the Parliament also called on the Commission to:

"16. (...) submit to Parliament a memorandum on policy in the area of health and safety at work that could serve as a consultation document, together with a Green Paper on supplementary sickness insurance, so as to prepare a legislative initiative;"

Some points for discussion

- What is implied by the move away from a Community programme based approach to the proposed Community "strategy"? What status and weight does such a document have? What involvement should the European Parliament seek?
- Does the Commission's document adequately cover the changing circumstances which set the context for workplace health and safety issues (demographics, structure of the labour market etc)?
- Is the new strategy genuinely strategic? Does it offer the right degree of prioritisation and, if so, are the priorities set out the right ones? Are appropriate instruments envisaged for the different challenges?
- How could provisions on the monitoring and follow-up of the strategy be improved? What roles should be envisaged for the Bilbao Agency, the Dublin Foundation and other actors? What about the interaction between Community and national policy-making and implementation?
- Does the proposed strategy take enough account of other international initiatives in this area e.g. the ILO's SafeWork programme?

¹ A5-0004/2002 (Rapporteur: Hermange)