

Community strategy 2007-2012 on health and safety at work

2007/2146(INI) - 18/12/2007 - `summary.subTitle`

The Committee on Employment and Social Affairs adopted the own-initiative report by Glenis WILLMOTT (PES, UK) in response to the Commission's communication on the Community strategy 2007-2012 on health and safety at work. It recalls that around 167 000 people died in 2006 as a result of a work accidents or a work-related disease and that each year some 300 000 workers suffer permanent disability. That is why MEPs welcome the Commission's target for an average reduction of 25% in workplace accidents across the EU.

However, MEPs believe that this strategy can be strengthened by insisting on the following points:

Fight against the greatest risks and strengthen the work-related illnesses section of the strategy: for MEPs, priority must be given to activities and sectors that pose a particular risk (for example, metallurgy, construction, electricity and silviculture). They particularly regret the silence over objectives for reducing work-related illnesses and invite the Commission to apply statistical procedures to better identify and measure occupational diseases, and, in particular, occupational cancers. To further reduce the risk of occupational diseases, MEPs suggest that the Commission consider the option of transforming the EU recommendation concerning occupational diseases (2003/670) into a minimum directive. They also call on the Commission to expand the scope of the strategy so as not to limit it to single accidents or occupational diseases but to also include social factors linked to professional activity (for example, type of contract, working conditions and availability of work). MEPs highlight, in this regard, that changes in work relations and the decline in job security give rise also to environmental, psychological and social problems that need to be addressed.

Encourage checks: to ensure better application of the existing legal instruments on occupational health and safety, MEPs call on the Commission and Member States to strengthen surveillance mechanisms and to apply minimum requirements for the quality of preventive services and work inspection. They also call for tougher sanctions in the event of standards being ignored. It is also necessary to better assess implementation of legislation, exchange best practices, and strengthen the culture of prevention and early warning systems as well as social dialogue and the involvement of employees in the workplace. Noting the recurring lack of resources needed to verify the effective implementation of legislation in Member States, MEPs call for extra measures to strengthen this part of the strategy as well as a series of technical measures to evaluate the performance of national inspection systems. In particular, Member States should ensure that there is, at the very least, a ratio of 1 labour inspector to every 10000 workers and to focus inspections on priority sectors with high risks of accidents.

Promote prevention: MEPs, convinced that prevention is the best way to avoid work accidents, call on the Commission to take measures to ensure that employers fulfill their responsibilities in providing appropriate preventive services and in constantly evaluating occupational risks. Member States must also regularly adapt the planned measures to keep in line with technological advances.

Use reliable and comparative data: MEPs call on the Commission to improve the level of information on risks and occupational diseases: it is necessary to collect more figures and data on workers with chronic diseases and to analyse their working conditions and to draw up a charter for the protection of the rights of cancer patients and people with other chronic diseases in the workplace. There must also be ways to aid the reintegration of workers who have just received treatment. MEPs highlight, in this regard, that the rehabilitation and reintegration of workers after ill health or an accident at work is vital and must become a national priority.

Other risks: MEPs also review particularly serious risks to which employees are exposed, namely asbestos. MEPs recall that asbestos-initiated diseases in Europe are forecasted to be very high for many years ahead. They, therefore, call on the Commission to organise a hearing on how to tackle the problems related to exposure to asbestos in buildings and other constructions such as ships, trains and machinery. MEPs also call on Member States to draw up national action plans on phasing out asbestos, including obligations to map asbestos in buildings and provide for the safe removal of asbestos.

In addition, MEPs regret that, despite repeated requests, the Commission has yet to bring forward a legislative amendment to Directive 2000/54/EC to address the serious risks to health care workers arising from working with needles and medical sharps. They, therefore, expect a suitable amendment to the directive to be adopted well before the end of the legislature in mid-2009. In the meantime, they invite the Commission to adopt an EU code of practice on the prevention of healthcare associated infections.

Other specific measures have been called for in order to improve the current legislation that applies to 'ignored' professions (farm labour, healthcare workers, professional drivers, domestic workers, home workers, and the military, where appropriate) and to people with disabilities. In addition, MEPs expect urgent measures to tackle musculoskeletal disorders (MSDs), bearing in mind that in this category the number of occupational diseases continues to rise.

In conclusion, MEPs call for early identification and monitoring of new and emerging risks (e.g. nanotechnologies and psychosocial risks) and ask both the Commission and the Member States to apply and enforce the framework directive and the existing health and safety provisions fully and irrespective of their legal status to all workers.