



**COUNCIL OF
THE EUROPEAN UNION**

Brussels, 5 December 2005

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SOC 500

NOTE

from: Presidency

to: Council (Employment, Social Policy, Health and Consumer Affairs)

Subject: **The Future of Occupational Safety and Health in the EU
(18/19 October 2005, Liverpool)
(Other business item)**

Delegations will find attached a note from the Presidency on the above topic for the session of the EPSCO Council on 8 and 9 December 2005.

**UK Presidency event: ‘The Future of Occupational Safety and Health in the EU’
18-19th October 2005, Liverpool**

The United Kingdom with the support of the European Commission organised an event on the above subject in Liverpool on 18 and 19 October 2005, aimed at identifying the key themes that might form the framework for the next EU Occupational Safety and Health (OSH) strategy to run from 2007-2012. The event consisted of an open conference on the first day featuring presentations from employers and workers on a number of health and safety themes that were discussed in detail by a meeting of European Directors General of Health and Safety on the second day.

The outcomes from the meeting of Directors General have been reported to the Commission’s Director General of DG Employment, Social Affairs and Equal Opportunities under cover of a letter signed by the UK Presidency and the forthcoming Austrian and Finnish Presidencies.

It is the belief of Directors General that the new EU OSH strategy could usefully be developed around five themes:-

1. Mainstreaming occupational health and safety

DGs agreed that mainstreaming OSH (ie integrating considerations of OSH into the development and implementation of other policies) should be a central pillar of the next Community Strategy. There was broad agreement about the link between OSH and competitiveness. But if we are to mainstream OSH into this key area of Community activity, DGs agreed that we must have simple clear messages: in particular, the message that good health and safety is good business, not an impediment – an aid to competitiveness, not a barrier.

The choice of fields for mainstreaming activity is important. DGs wanted a pragmatic approach, agreeing priorities for attention at both EU and national levels, on the basis of key criteria. They prioritised the following policies:

- research – a foundation policy
- public health and the ageing population – sister policies
- education and business formation – instrument policies
- DGs recognised that this work must begin ‘at home’ – not just in their own Member States but also in their own ministries.

2. Better Regulation

DGs agreed that this was an important, and sensitive, topic. They were clear that better regulation did not mean deregulation, though they recognised some fears in this respect. At the heart of the better regulation agenda is a desire for regulations which are:

- evidence-based – with full understanding of their impact;
- modern – relevant to the current state of scientific and technical knowledge and to modern businesses;
- easily understood – not too complicated, particularly for small businesses;
- carrying no unnecessary red tape or administrative burden;
- enforceable – so that they can be implemented consistently; and
- driving real improvements in OSH.

New legislation should be considered only if there was clear evidence that it was needed. DGs identified the importance of making the fiche d’impact system work effectively.

The drive for better regulation must occur at both European and national level. DGs agreed that the initial onus was on each Member State to simplify and modernise the matters under their national control, including the ways that they had nationally transposed EU Directives. DGs recognised a role for the new Community strategy in:

- sharing best practice in this field, so that the gains of better regulation could be experienced across Europe
- solving difficulties together: in particular, considering any implications for EU directives arising from these national simplification initiatives.
- Identifying priorities for simplification without loss of outcomes.

3. Targeting interventions for maximum results

DGs agreed that securing compliance through enforcement and other measures will continue to form an important element of Member States' health and safety systems. But the use of this model alone is not sufficient to deal with the industrial and commercial environment in Europe today. We need to look for new ways to promote and achieve good standards of OSH. In addition, a flexible range of interventions is required that can cope with the differing challenges posed by large trans-national companies and the increasing number of Small and Medium sized (SMEs) developing in the European Union. For example, developing reward and recognition programmes that can recognise, as beacons of excellence, large companies efficiently managing health and safety.

4. Setting targets to deliver outcomes

DGs recognised that targets were an important political signal, and could increase the visibility of OSH on the political agenda. To be effective, it was necessary to have a limited number of targets, and clarity about roles and responsibilities in meeting targets. It was also important to recognise the limitations of targets: targets cannot do the job alone. They agreed on the need to examine further the scope for target-setting at European level.

5. Building an evidence base

DGs agreed that a key element in delivering solid improvement in health and safety performance was a reliable, relevant evidence base for action, against which MSs can gauge progress.

They recognised the practical and political difficulties in achieving evidence-based policy making – not least that MSs faced many problems and risks that were not yet fully understood (eg from biotechnologies). Those problems and risks were frequently common to many, if not all, MSs, and so DGs agreed on the importance of coordinating research efforts in the interests of cost-effectiveness.

DGs also agreed on the importance of communicating research findings in suitable language to the public, and using the findings sensibly. Public attitudes to risk were an important dimension in OSH policy making.

DGs suggested it would be helpful to collaborate at European level in building evidence about ‘what works?’ in MSs’ various OSH interventions.

Conclusions

The meeting identified an underlying theme about the importance of working with and through others to achieve objectives. It was therefore necessary to give a great deal of thought to communication and to simplifying messages. It would also be necessary to secure effective complementarity between what MSs can do individually at national level, and what is done collectively at European level. The discussions on each theme had given some useful pointers on this.