

# Transposition, implementation and enforcement of EU OSH legislation

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# Transposition, implementation and enforcement of EU OSH legislation



- EU OSH legislation consists of 24 linked Directives (a Framework Directive and 23 individual Directives).
- Collectively these provide a common basis for occupational health and safety management within the EU Member States.

# Transposition, implementation and enforcement of EU OSH legislation



- All Member States (MSs) have fully transposed the Framework Directive and most (if not all) of the individual Directives that build on this.
- Many of the omissions relate to Directives that are irrelevant to the MS (such as the vessels directives).

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- Some MSs did however include (or have since added) more stringent or further requirements (e.g. additional OELs).
- However, taking an overall view across the 24, the majority of the requirements specified within the Directives remain unchanged in national legislation.

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- Details of their transposition and subsequent implementation vary between MSs.
- In 22 of the 27 MSs examined, national legislation reflects a common structure where the main principles and requirements, principally from the Framework Directive, are transposed in one single piece of legislation.
- This was not necessarily new legislation.

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- In other MSs, although they had existing OSH legislation in place, the opportunity was taken to review and revise this.
- As many MSs already had OSH legislation in place, the transposition of the OSH Directives did not necessarily have a significant immediate impact on the level of protection provided to workers in these MSs or on enforcement activities.

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- It seems that the concept of the 24 Directives as a coherent package of measures with common threads has not necessarily cascaded down to employers.

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- In the same way as the manner of transposition varies between different MSs, so do the arrangements for implementation and enforcement.
- In some MSs, not only does legislation covering different sectors require different legislative action but policing and enforcement of the implementation of that legislation falls under a different government body or department.



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- The body competent for OSH inspections varies from one MS to another depending on the institutional setting of the country.
- As a rule, the Labour Inspection is the main responsible authority. In a few cases, the main authority falls under the Ministry of Health, or there is an autonomous authority dedicated to OSH.

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- The ex-post evaluation report identifies sanctions as a key element of the enforcement system.
- A spectrum of sanctions usually exists, ranging from instruction to improve the workplace; through suspension of the activity; to punitive measures such as fines and imprisonment.

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- Reviews of the published international literature suggest 'limited evidence' of no general deterrence effect on health and safety outcomes of the probability of inspections.

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- However, more recent evidence identified 'moderately strong' evidence for an effect of legislation on injuries/fatalities and for effects of inspections on both compliance and, again on injuries/fatalities.
- More recent evidence still suggests an apparent reluctance (at least in some jurisdictions) to use the stronger sanctions.

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- The evaluation of the 24 OSH Directives found that it is difficult to determine the extent to which (if at all) any reduction in accidents can be attributed to the influence of the OSH acquis.

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- With many changes within the EU over the relevant period, other than the introduction of the OSH Directives, it is not possible to attribute any reduction in accident rates to the Directives.
- It is even harder to determine the contribution of specific Directives because of a mis-match between the categorisation of accidents and the Directives that address risks.

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- For work-related ill-health, inadequacies in the underlying data again make it impossible to determine attribution of ill-health to any specific risks.
- As a result it is similarly impossible to establish the extent to which any change may or may not be attributable to the provisions of the OSH Directives.

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- In summary, it seems that the body of legislation has been consistently transposed into national legislation and there are signs that at least the main planks of this legislation are being implemented (and enforced) within Member States, although questions can be asked over the quality of some aspects of that implementation.



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- Where problems have been identified in MSs relating to implementing specific provisions of any Directive the approach appears generally to be one of providing further clarification and guidance rather than seeking to amend or adjust the legislation.

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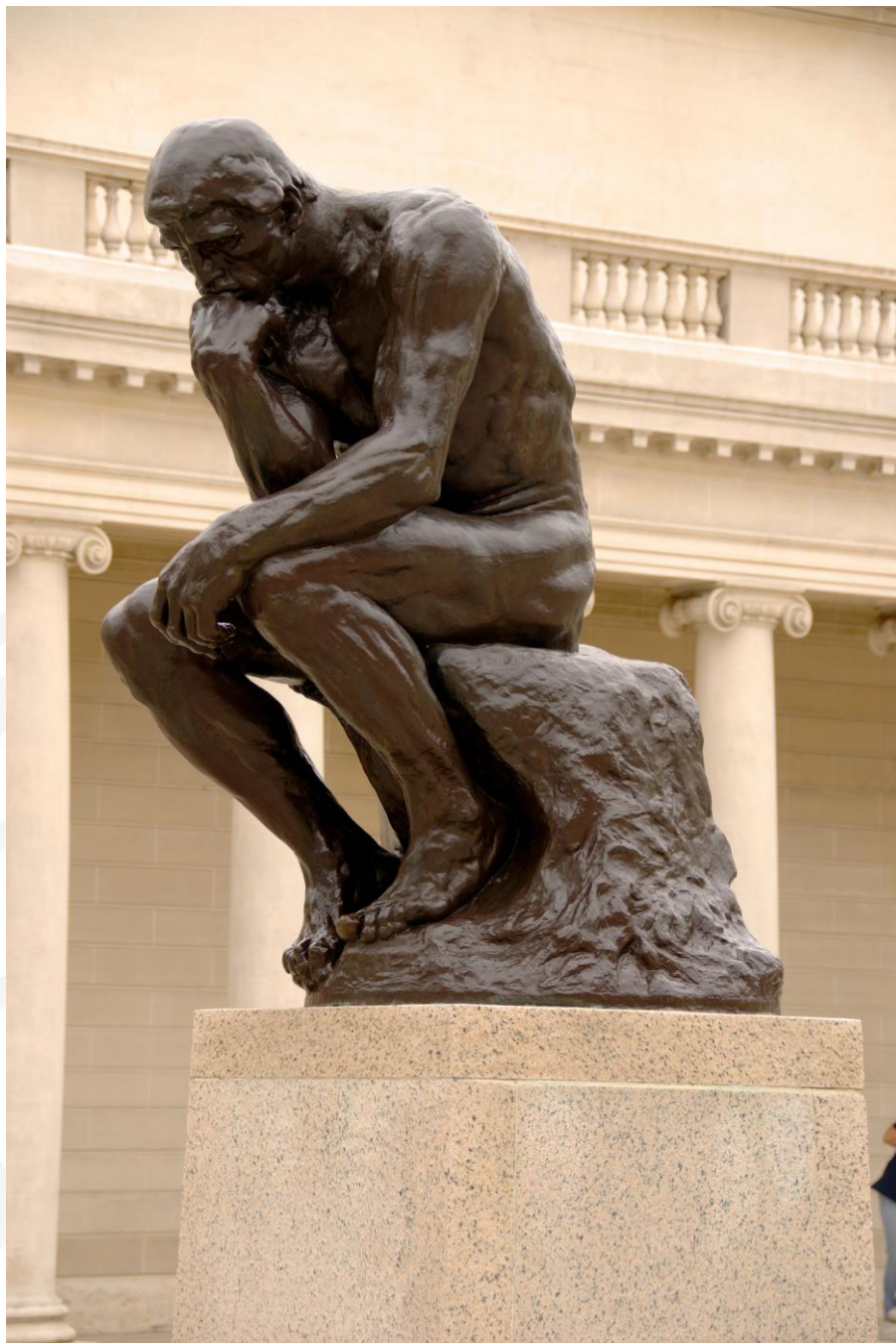
- However, it is clear that many challenges remain if we are to make the workforce of the EU as healthy and safe at work as possible.



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- Acquiring better quality, more comprehensive data across the EU relevant to work-related ill-health to provide a better understanding of the risks to that health and how best to manage them presents one of those challenges.



**Thoughts or  
questions?**