Study to support the evaluation of the EU Strategic Framework on health and safety at work 2014-2020

Final Report

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Directorate-General for Employment, Social Affairs and Inclusion

LIST OF ACRONYMS

Abbreviation	Description
2017 Communication	Communication on the modernisation of the EU Occupational Safety and Health Legislation and Policy
ACSH	Advisory Committee on Safety and Health at Work
CAD	Chemical Agents Directive
CETA	Comprehensive Economic Trade Agreement
CMD	Carcinogens and Mutagens Directive
DG EMPL	Directorate-General for Employment, Social Affairs and Inclusion
DNEL	Derived no-effect level
EC	European Commission
ECHA	European Chemicals Agency
EP	European Parliament
ERO	European Risk Observatory
ESENER	European Survey of Enterprises on New and Emerging Risks
EU	European Union
EU-OSHA	European Agency for Safety & Health at Work
EU Strategic Framework	EU Strategic Framework on Health and Safety at work 2014-2020
FTA	Free Trade Agreement
HWC	Healthy workplaces campaign
ILO	International Labour Organisation
IT	Information Technology
LI	Labour Inspectorate
MoU	Memorandum of Understanding
MS	EU Member State(s)
MSDs	Musculoskeletal disorders
MSEs	Micro and small enterprises
MSMEs	Micro, small and medium enterprises
NCA	National Competent Authority
OECD	Organisation for Economic Cooperation and Development
OEL	Occupational Exposure Limit
OiRA	Online interactive risk assessment
OPC	Open Public Consultation
OSH	Occupational safety and health
PSR	Psychosocial risks
RAC	Committee for Risk Assessment
REFIT evaluation	Ex-post evaluation of the European Union occupational safety and health Directives
SCOEL	Scientific Committee on Occupational Exposure Limits
SLIC	Senior Labour Inspectors Committee
SMEs	Small and medium-sized enterprises
WHO	World Health Organisation

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Report structure

This report starts with a brief one page summary of findings, followed by a more elaborate executive summary.

This is followed by the main body of the report, which is structured as follows:

- **Section 1: Introduction** provides a brief overview of the study's background, context, approach and methodology.

- **Section 2: Implementation of the EU Strategic Framework** reports on the extent to which the specific actions within the EU Strategic Framework have been implemented.

- **Section 3: Study Findings** includes responses to questions on the EU Strategic Framework's relevance, effectiveness, coherence and EU added value.

- **Section 4: Conclusions and Recommendations** relates to the EU Strategic Framework's design, implementation and effects. Additionally, this section includes considerations for the EU Strategic Framework 2021-2027.

Annexes, including the OPC Report (Task 5), National Implementation Report (Task 6) and national country reports (Task 2)

Summary of Findings

The EU Strategic Framework's objectives and actions have provided a unified strategic direction for improving occupational safety and health to date. They continue to support the development of a level playing field at EU level in terms of the further development, implementation and enforcement of the EU OSH *acquis.* In particular:

- The design of the EU Strategic Framework was praised for its **conciseness and clarity**. The three main challenges and the seven key strategic objectives corresponded to the main problems and challenges facing the EU in the area of safety and health at work. Additionally, most stakeholders welcomed the decision to include concrete actions and named actors responsible for their implementation under each objective.

- Evidence from the national and EU-level data collection indicates **good internal coherence** within the EU Strategic Framework. There is some clear evidence of synergies and mutually beneficial effects from actions carried out under different strategic objectives. In general, the challenges and priorities align well with those identified at national level.

- Most stakeholders consulted for this study **appreciate the broad scope and flexibility of the current EU Strategic Framework**, which covers most of the priority issues identified at national level. The current Framework provides much-needed flexibility for different countries and actors to implement and adapt EU-level priorities in a pragmatic way, responding to the specific needs of the national, sectoral and temporal context.

Regarding the EU Strategic Framework's **implementation**, this study has identified **clear progress against all seven strategic objectives**. Specifically, there is evidence of progress under all but one of the actions identified within the Framework. Although the nature of some of the actions means they may never be viewed as "completed", good progress has been made against most actions. The majority of actions could be viewed as having been achieved within the reference period. Implementation of a number of actions which were expected to be completed before 2016 was, however, delayed.

In terms of the EU Strategic Framework's **results and impacts**, the study found that objectives and actions provide a unified strategic direction for improving occupational safety and health. They support a level playing field in terms of the further development, implementation and enforcement of the EU OSH *acquis.* The following impacts have been noted:

- The existence of a Strategic Framework at EU level provides a **common reference for Member States when designing their own OSH strategies and policies**. Additionally, it **lends weight to health and safety considerations in broader political and strategic discussions** (both within the Members States and on the international stage).

- In some areas, there is strong evidence to support a "contribution story" linking the actions carried out to broader effects. Some of these have already materialised, while others appear likely to follow in the foreseeable future.

- The EU Strategic Framework has been identified as an **important reference for many stakeholders.** NCAs, in particular, have used it to prioritise action on OSH at national level.

- The EU Strategic Framework (and the 2017 Communicaton) **have supported the revision of the EU OSH *acquis***, leading to the updating of six key directives in this field.

This study has found broad support for a future Strategic Framework at EU level. It recommends a balance between **broad scope and flexibility of design** on the one hand, and **focus on a limited number of core priorities and accountability in terms of monitoring progress** on the other. To continue to address traditional OSH risks, a number of new priorities have been identified. These include addressing the changing world of work and the changing status of workers and employers as well as the need to consider OSH within the context of broader global trends such as climate change.

Executive Summary

Study context and approach

The EU Strategic Framework on Health and Safety at Work 2014-2020 (EU Strategic Framework) was adopted on 6 June 2014. It was intended to ensure that the European Union (EU) continues to play a leading role in promoting high standards for working conditions both within Europe and internationally. The EU Strategic Framework identified the following three major challenges[1] facing the EU with regard to improving health and safety in the workplace:

- The need to improve implementation of existing health and safety rules, in particular by enhancing the capacity of micro and small enterprises (MSEs) to put in place effective and efficient risk prevention strategies.

- The need to improve the prevention of work-related diseases by tackling new and emerging risks without neglecting existing risks.

- The need to consider and take into account the ageing of the EU's workforce.

Seven strategic objectives were identified to help address these challenges. Each objective was addressed by key actions implemented by different actors in the field of European workplace health and safety. These were, inter alia, the European Commission (EC), the Member States (MS), social partners, labour inspectorates (LIs) and EU-OSHA.

In 2017, the EC published a Communication on the modernisation of the EU Occupational Safety and Health Legislation and Policy (the 2017 Communication)[2]. This was informed by the results of the ex-post evaluation of the European Union occupational safety and health Directives (REFIT evaluation)[3]. The 2017 Communication set out several key actions to bring a new impetus to and further operationalise the EU Strategic Framework on Health and Safety at Work in the latter half of its implementation. This included a focus on occupational cancer, compliance at MSME level and the modernisation of OSH legislation.

The scope of the evaluation support study is very broad. It covers both the quality / design of the Strategic Framework itself, and its implementation at national and EU level. To address each of these elements, the study entails a thorough assessment of the actions carried out by different actors as well as their effects and impacts. It also includes a review of implementation in all EU MS.[4]

This study uses a **theory-based approach.** This entails eliciting the "theory" of how the intervention is intended to work before gathering evidence in a targeted way to test how far this was confirmed in practice. The study aims to consider the EU Strategic Framework's design, its implementation at both EU and MS level, and its contribution to generating impacts in line with its objectives.

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[1] European Commission, 2014, *Commission Communication COM(2014) 332 of 6 June 2014 'on an EU Strategic Framework on Health and Safety at Work 2014-2020'*, available at: https://ec.europa.eu/social/main.jsp?catId=151.

[2] European Commission, 2017, *Commission Communication COM(2017) 12 to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions of 10 January 2017 on 'Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy'.*

[3] European Commission, 2017, *Commission Staff Working Document (2017), 'Ex-post evaluation of the European Union occupational safety and health Directives (REFIT evaluation)', accompanying the Commission Communication COM(2017) 12 to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions of 10 January 2017 on 'Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy'*, available at: eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52017SC0010&from=en.

[4] This means the 27 current Member States of the EU, as well as, where relevant, the UK, which was a Member State until 31 January 2020, i.e. for most of the period covered by the Framework.

Implementation Review

The implementation review carried out as part of this study identified **clear progress against all seven strategic objectives**. Specifically, there is evidence of progress under all but one of the 29 actions identified within the EU Strategic Framework. Similarly, although due to the nature of some of the actions they may never be viewed as "completed", good progress has been made against most of them. Indeed, the majority could be viewed as having been achieved as envisaged within the reference period. Some actions that were expected to be completed by 2016 were, however, delayed. The 2017 Communication provided concrete actions with a clear timeframe for implementation and was a catalyst for progress in implementation during the second half of the reference period.

- **Objective one: Further consolidate national strategies.** Interviewees commonly regarded this as the objective under which the most progress was made. This relates both to the extent to which MS have updated their national strategies following the adoption of the EU Strategic Framework, and the extent to which the influence of the EU Strategic Framework can be seen in these strategies. At EU level, the creation of the OSH Barometer marks significant progress in terms of making national OSH strategies accessible.

- **Objective two: Facilitate compliance with occupational safety and health (OSH) legislation.** This included the implementation of awareness raising campaigns at EU and national level, a series of EU-level peer reviews on specific OSH topics, the publication of guidance and research, and the development of 248 OiRA tools in 17 languages (as of April 2021). A significant number of outputs were achieved under this objective and there is now a strong onus on MS to adapt and promote these at national level.

- **Objective three: Better enforcement of OSH legislation by Member States.** There was steady progress in implementation, despite significant concerns regarding enforcement capacity of many LIs due to national funding cuts. At EU level, the Senior Labour Inspectors Committee (SLIC) implemented a number of actions to support a more coordinated approach to enforcement in EU MS. This included a rolling programme of national evaluations and exchanges and the development of common training standards.

- **Objective four: Simplify existing legislation.** The European Commission updated six EU directives following the ex-post evaluation of the EU OSH Framework Directive and 23 related directives. This represents a significant effort to modernise the EU OSH *acquis*. At national level, ten MS implemented activities in support of this objective. The question of what simplifications might be required to support micro-enterprises in low-risk sectors remains to some extent unanswered.

- **Objective five: Address the ageing of the workforce, emerging new risks, prevention of work-related and occupational diseases.** Activity under this objective focused on tackling occupational diseases. Initiatives aimed at raising awareness and sharing best practices on managing dangerous substances accompanied the introduction of new Occupational Exposure Limits (OELs) under the Chemical Agents Directive (CAD) and Chemicals and Mutagens Directive (CMD). Other initiatives focused on mental health and psychosocial risks (PSRs), digitalisation, musculoskeletal disorders (MSDs) and demographic change. While a lot of progress has been made under this objective, its specific focus on new and emerging risks means that there will always be more left to do.

- **Objective six: Improve statistical data collection and develop the information base.** Among the most significant achievements are the publication of an EU index of occupational diseases (EODS) and two data visualisation tools. One of these is on costs and benefits related to OSH and the other on OSH country profiles (the OSH Barometer). Preliminary work has also been carried out to establish a database of occupational exposure, although progress in this area has been limited. Accidents at work and occupational diseases are the two main areas of work where progress has been most tangible. At national level, few MS have adopted measures to improve statistical data collection and develop the information base. Most of these measures concern the

improvement of the quality of data on accidents at work. Almost no measures were adopted to improve data on occupational diseases.

- **Objective seven: Better coordinate EU and international efforts to address OSH and engage with international organisations.** Although there are different views among stakeholders with regard to the importance of objective seven, notable progress can be observed in this area. Particular examples include cooperating with international organisations on data collection, continued dialogue on OSH with countries including the USA and China, and incorporating OSH and labour inspection commitments in international free trade agreements (FTAs).

Relevance

Evidence from the national and EU-level data collection points to a clear consensus that a Strategic Framework for OSH at European level was and remains highly relevant. It both helps to ensure consistency between MS in terms of worker protection and to elevate the importance of workplace health and safety in national policy debates. Most stakeholders consulted for this study appreciated the broad scope and flexibility of the current EU Strategic Framework, which covers most of the priority issues identified at national level. However, some interviewees felt that a more robust strategy or policy would have been desirable, with a reduced number of key priorities, and/or more specific objectives and targets.

The three main challenges and the associated seven key strategic objectives identified in the EU Strategic Framework were largely perceived as corresponding to the main problems and challenges facing the EU in the area of safety and health at work. Additionally, there was strong support for including concrete actions and named actors responsible for their implementation. However, views were more divided on whether the actions and the actors identified to carry them out were sufficient to pursue the strategic objectives.

Effectiveness

The implementation review carried out as part of this study has identified **clear progress against all seven strategic objectives,** resulting from the implementation of the different actions identified within the EU Strategic Framework. A review of progress against the actions, outputs and outcomes foreseen in the intervention logic demonstrates the effectiveness of the EU Strategic Framework as a catalyst to action. Specifically, there is evidence of activity against all but one of the specified actions.

The 2017 Communication played a useful role in ensuring progress continued in the latter half of the EU Strategic Framework's implementation period. It acted as an interim "stock-check", identifying key areas of intervention and defining further priority actions to ensure the ambition of the EU Strategic Framework was realised. The 2017 Communication identified actions such as the modernisation of EU OSH legislation and the development of OiRA tools. This appears to have helped maintain focus and momentum.

This study has identified a number of promising outcomes under each of the seven objectives. Nonetheless, none of the objectives can be viewed as having been completely "achieved". This is due partly to the nature of the OSH context, which involves a constant evolution of working culture and a concurrent evolution of OSH challenges. Additionally, some stakeholders (representing workers, employers, NCAs and OSH experts) considered the progress in addressing the three challenges identified in the EU Strategic Framework to be considerable, but inconsistent. In particular, significant progress has been noted on research and the development of support tools to help address the challenges identified. More remains to be done, however, in order to ensure these changes are implemented in practice. This includes, for example, to increas the evidence of compliance amongst MSMEs and to increas data collection and sharing on work-related diseases. For more information on this point, see Section 3.2.3.

Coherence

Evidence from the national and EU-level data collection points to good internal coherence within the EU Strategic Framework. There is some clear evidence of synergies and mutually beneficial effects from actions carried out under different strategic objectives. The EU Strategic Framework also seems to be well aligned with OSH priorities in various EU MS, suggesting clear coherence with national OSH policies and strategies across the EU.

No significant overlaps or contradictions were identified between the challenges, objectives and actions described in the EU Strategic Framework. The various elements of the EU Strategic Framework (i.e. the seven strategic objectives and the corresponding actions) work with each other to address its overall objective of improving occupational safety and health. The EU Strategic Framework identified specific issues that pose barriers to better OSH and set out actions to overcome these.

The broad and cross-cutting nature of the EU Strategic Framework's objectives implies a clear *potential* complementarity with other EU policies. Additionally, there is clear alignment between the EU Strategic Framework and the work of international organisations, particularly the ILO. There are some specific examples of collaboration between different policy areas, particularly with regard to chemicals and trade. There is still room to further exploit potential interlinkages and synergies going forward in areas such as public health, the environment and industrial strategy.

EU Added Value

The exact nature and extent of the EU Strategic Framework's influence and added value varied depending on the Member State and action in question. As the EU Strategic Framework is not binding on any of the actors, its overall influence should not be over-estimated. Nonetheless, the research conducted for this study shows that the EU Strategic Framework did contribute to reinforcing several existing initiatives. It has also been credited with launching numerous new initiatives at both EU and national level. It achieved this by making priorities explicit, providing an overarching framework that links and contextualises the different activities, and calling on different stakeholders to take responsibility for concrete actions.

The EU Strategic Framework has helped to ensure that OSH remains high on the agenda at EU level and in MS, as well as on the international stage. It has also contributed to a more level playing field by helping to develop common standards and tools to support enforcement and compliance. This common approach can generate economies of scale across the EU and allows less advanced countries in a given area to learn from the more advanced ones. Some specific examples of the EU Strategic Framework's added value include:

- The review and alignment of national OSH strategies represents a clear case of EU 'soft power', whereby commonly defined priorities combined with strategic encouragement and support provision can contribute to positive changes at national level.

- The development of standardised campaigns, guidelines, support tools and other materials that can be adapted to different national circumstances leads to economies of scale and ensures that common standards and approaches are shared between EU MS.

- Updating EU legislation ensures that national legislation remains fit for purpose, through the transposition and implementation of the revised directives.

- It is clear that the EU as a whole has more leverage to insist on the inclusion of OSH clauses in FTAs than MS would individually, which is another way in which the EU adds value.

Conclusions

The EU Strategic Framework has provided a common direction in support of coordinated action to improve occupational safety and health and support at EU level. In particular:

- The design of the EU Strategic Framework was praised for its **conciseness and clarity**. The three main challenges and the associated seven key strategic objectives largely corresponded to the main problems and challenges facing the EU in the area of safety and health at work. Additionally, the decision to include concrete actions and named actors responsible for their implementation under each objective provided a tangible roadmap to achieving the objectives.

- Evidence from the national and EU-level data collection points **to good internal coherence** of the EU Strategic Framework. There is some clear evidence of synergies and mutually beneficial effects from actions carried out under different strategic objectives. In general, the challenges and priorities align well with those identified at national level.

- Most stakeholders consulted for this study **appreciated the broad scope and flexibility of the current EU Strategic Framework**, which covers the majority of the priority issues identified at national level. The current Framework provides much-needed flexibility for different countries and actors to implement and adapt various EU-level priorities in a pragmatic way, responding to the specific needs of the national, sectoral and temporal context.

- Some stakeholders felt that a **more robust strategy or policy** (such as the preceding 2007-2012 Community Strategy on Health and Safety at Work) would have been desirable. They advocated for a reduced number of key priorities, and/or more specific objectives and targets. Those who supported this option believed it would provide more impetus and accountability for progress on OSH-related issues.

- Additionally, some stakeholders identified a **slight disconnect between the challenges identified and some of the concrete objectives and actions** included in the EU Strategic Framework. In particular, they missed a clear link between the challenges identified and the actions described under objectives four and seven.

Although it is difficult to measure concrete impacts which can be clearly attributed to the EU Strategic Framework, a number of conclusions can be drawn with regard to its influence:

- The EU Strategic Framework **provides a common reference for Member States** when designing their own OSH strategies and policies. Additionally, **it lends weight to health and safety** considerations in broader political and strategic discussions (both within the Members States and on the international stage).

- In some areas, there is strong evidence to support a "contribution story" **linking the actions carried out to broader effects.** Some of these effects have already materialised, while others appear likely to follow in the foreseeable future.

- There is also clear evidence that the EU Strategic Framework has contributed to significant progress on **improving OSH culture within the EU**, despite a certain degree of variation depending on the specific objectives and actions in question. Nearly all the outputs foreseen within the intervention logic have been realised. There has also been progress against most of the outcomes foreseen for each specific objective.

- The EU Strategic Framework was identified as an important reference for many stakeholders. National competent authorities (NCAs), in particular, have used it to **prioritise action on OSH at national level**. Additionally, social partners have found it to be a useful tool both to lobby for an increased focus on OSH generally and to increase attention on specific issues such as MSDs and PSR.

- The inclusion of OSH in FTAs as well as high level bilateral discussions on OSH matters with leading economies has **elevated the importance of workplace health and safety on the global stage** and positioned the EU as a leading actor in this field.

- The EU Strategic Framework (and the 2017 Communicaton) have supported the **revision of the EU OSH *acquis.*** This has led to the updating of six key directives in this field.

Recommendations for a future Strategic Framework

With regard to the design of a future Strategic Framework, this study recommends a balance between **broad scope and flexibility of design** on the one hand and **focus on a limited number of core priorities and accountability in terms of monitoring progress** on the other. Striking the right balance between these two – taking into account the political and socio-economic context at the time – is key for maximising the success of the future framework.

One specific approach that could help the future Framework strike this balance would be to combine a longer-term strategy with shorter term action plans. Building on the success of the 2017 Communication in revisiting the EU Strategic Framework's priorities and actions at the mid-point (in 2017), a future Strategic Framework could be accompanied by **shorter-term priorities and implementation plans** of approximately two or three years duration. These would focus on operationalising the aims contained within the higher-level Strategic Framework. In addition to named actors and timeframes for implementation, shorter-term implementation plans could include, for example, **concrete indicators.** These would help to monitor ongoing progress and increase transparency between different stakeholders.

Stakeholder feedback has also highlighted resource constraints as a significant barrier to OSH implementation within MS. It may therefore be appropriate to investigate the possibility of building bridges with existing funding streams (such as the European Social Fund) to help stakeholders access financial support for implementation of actions identified in a future Strategic Framework.

Emerging Priorities

The main priorities that have emerged from the research and consultation activities for a potential future Strategic Framework can be summarised as follows:

- Firstly, there is a need to **remain focused on the challenges and issues identified in the EU Strategic Framework 2014-2020**. Occupational diseases, demographic change, psychosocial risks and MSDs have only increased in importance in recent years. Additionally, there is a continued need to support both LIs and companies to improve OSH standards.

- Stakeholders also underlined the **need to continue considering traditional OSH challenges** (including workplace accidents and risks such as falling from heights, or in the agricultural and construction sectors). These risks could be overlooked if a future Strategic Framework prioritises new and emerging risks too strongly.

- Consideration should also be given to the **impacts of a number of longer-term trends in the world of work**. Issues such as increasingly globalised supply chains, the greening of the economy, a move towards more flexible and atypical labour, a transition towards teleworking and increased digitalisation all have implications for the future implementation of OSH. Further consideration should be given to the opportunities and risks associated with these emerging trends.

- Ensuring OSH protection is **fit for purpose with regard to different types of workers** and that differentiated impacts on different groups have been thoroughly taken into account. This particularly applies to migrant workers, those employed in the gig economy, platform workers and those working in the domestic sphere (including in-home private carers, cleaners and teleworkers). The gendered impacts of OSH as well as specific considerations required for those with disabilities should also be considered.

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- Taking into consideration the impacts of the COVID-19 outbreak on workplace health and safety, consideration should also be given to **broader global trends such as climate change and the potential for future pandemics** and how these may impact on the workplace of the future. For example, this may include impacts of retrofitting programmes on potential exposure to asbestos and the implications of the transition to a low carbon economy. A holistic approach to OSH, including **mainstreaming OSH considerations** into areas such as environmental policy and public health, could help to increase resilience when facing future challenges.

Zusammenfassung der Ergebnisse

Die Ziele und Maßnahmen des Strategischen Rahmens der EU haben eine einheitliche strategische Richtung für die Verbesserung von Sicherheit und Gesundheitsschutz am Arbeitsplatz vorgegeben. Sie unterstützen weiterhin die Entwicklung gleicher Wettbewerbsbedingungen auf EU-Ebene im Hinblick auf die Weiterentwicklung, Umsetzung und Durchsetzung des EU-*Acquis* im Bereich Sicherheit und Gesundheitsschutz am Arbeitsplatz. Insbesondere:

- Der Gestaltung des Strategischen Rahmens der EU wurde für seine **Prägnanz und Klarheit** gelobt. Die drei Hauptherausforderungen und die sieben zentralen strategischen Ziele entsprachen den wichtigsten Problemen und Herausforderungen, mit denen die EU im Bereich Sicherheit und Gesundheitsschutz am Arbeitsplatz konfrontiert ist. Darüber hinaus begrüßten die meisten Interessenvertreter die Entscheidung, unter jedem Ziel konkrete Maßnahmen aufzunehmen und Akteure zu benennen, die für deren Umsetzung verantwortlich sind.

- Die Erkenntnisse aus der Datenerhebung auf nationaler und EU-Ebene deuten auf eine **gute interne Kohärenz** innerhalb des Strategischen Rahmens der EU hin. Es gibt klare Hinweise auf Synergien und gegenseitig vorteilhafte Effekte von Maßnahmen, die unter verschiedenen strategischen Zielen durchgeführt wurden. Im Allgemeinen stimmen die Herausforderungen und Prioritäten gut mit denen überein, die auf nationaler Ebene ermittelt wurden.

- Die meisten Interessenvertreter, die für diese Studie konsultiert wurden, **bewerten den breiten Anwendungsbereich und die Flexibilität des aktuellen Strategischen Rahmens der EU positiv**, da er die meisten der auf nationaler Ebene identifizierten prioritären Themen abdeckt. Der aktuelle Rahmen bietet den verschiedenen Ländern und Akteuren die dringend benötigte Flexibilität, um die Prioritäten auf EU-Ebene auf pragmatische Weise umzusetzen und anzupassen und dabei auf die spezifischen Bedürfnisse innerhalb ihres nationalen, sektoralen und zeitlichen Kontextes zu reagieren.

Im Hinblick auf die **Umsetzung** des Strategischen Rahmens der EU hat diese Studie **klare Fortschritte bei allen sieben strategischen Zielen** festgestellt. Mit nur einer Ausnahme gibt es Belege für Fortschritte bei allen Aktionen, die innerhalb des Rahmens identifiziert wurden. Obwohl einige Aktionen aufgrund ihrer Beschaffenheit niemals als "abgeschlossen" betrachtet werden können, wurden bei den meisten Aktionen gute Fortschritte erzielt. Die Mehrheit der Maßnahmen kann als innerhalb des Bezugszeitraums verwirklicht angesehen werden. Die Umsetzung einer Reihe von Maßnahmen, die vor 2016 abgeschlossen sein sollten, hat sich jedoch verzögert.

In Bezug auf die **Ergebnisse und Auswirkungen** des Strategischen Rahmens der EU ergab die Studie, dass die Ziele und Maßnahmen eine einheitliche strategische Richtung zur Verbesserung von Sicherheit und Gesundheitsschutz am Arbeitsplatz vorgeben. Sie unterstützen gleiche Bedingungen für die Weiterentwicklung, Umsetzung und Durchsetzung des EU-Acquis in diesem Bereich. Die folgenden Auswirkungen wurden festgestellt:

- Das Vorhandensein eines Strategischen Rahmens auf EU-Ebene bietet einen **gemeinsamen Bezugspunkt für die Mitgliedstaaten bei der Gestaltung ihrer eigenen Strategien und Maßnahmen**. Darüber hinaus verleiht er Überlegungen zu Sicherheit und Gesundheitsschutz am Arbeitsplatz **mehr Gewicht** in umfassenderen politischen und strategischen Diskussionen (sowohl innerhalb der Mitgliedstaaten als auch auf internationaler Ebene).

- In einigen Bereichen gibt es starke Belege für eine "Beitragsgeschichte", die die durchgeführten Maßnahmen mit weitergehenden Auswirkungen verbindet. Einige davon sind bereits eingetreten, während andere wahrscheinlich in absehbarer Zukunft folgen werden.

- Der Strategische Rahmen der EU wurde als **wichtige Referenz für viele Interessengruppen** identifiziert. Insbesondere die nationalen Arbeitsschutzbehörden haben ihn genutzt, um Maßnahmen zu Sicherheit und Gesundheitsschutz am Arbeitsplatz auf nationaler Ebene zu priorisieren.

- Der Strategische Rahmen der EU (und die Mitteilung von 2017) haben die **Überarbeitung des EU-Acquis im Bereich Sicherheit und Gesundheitsschutz am Arbeitsplatz unterstützt**, was zur Aktualisierung von sechs wichtigen Richtlinien in diesem Bereich geführt hat.

Diese Studie hat eine breite Unterstützung für einen zukünftigen Strategischen Rahmen auf EU-Ebene gefunden. Sie empfiehlt ein Gleichgewicht zwischen einem **breiten Anwendungsbereich und einer flexiblen Gestaltung** einerseits, und der **Konzentration auf eine begrenzte Anzahl von Kernprioritäten**, sowie der Übernahme von **Verantwortung für die Überwachung der Fortschritte** andererseits. Um weiterhin die traditionellen Risiken im Bereich Sicherheit und Gesundheitsschutz am Arbeitsplatz anzugehen, wurde eine Reihe neuer Prioritäten identifiziert. Dazu gehören die Auseinandersetzung mit der sich verändernden Arbeitswelt und dem sich wandelnden Status von Arbeitnehmern und Arbeitgebern sowie die Notwendigkeit, Sicherheit und Gesundheitsschutz am Arbeitsplatz im Kontext allgemeiner globaler Trends wie dem Klimawandel zu betrachten.

Kurzfassung

Kontext und Ansatz der Studie

Der Strategische Rahmen der EU für Gesundheit und Sicherheit am Arbeitsplatz 2014-2020 (Strategischer Rahmen der EU) wurde am 6. Juni 2014 verabschiedet.[5] Er sollte sicherstellen, dass die Europäische Union (EU) weiterhin eine führende Rolle bei der Förderung hoher Standards für Arbeitsbedingungen sowohl innerhalb Europas als auch international spielt. Der Strategische Rahmen der EU identifizierte die folgenden drei großen Herausforderungen, vor denen die EU im Hinblick auf die Verbesserung von Sicherheit und Gesundheitsschutz am Arbeitsplatz steht:

- Die Notwendigkeit, die Umsetzung der bestehenden Gesundheits- und Sicherheitsvorschriften zu verbessern, insbesondere durch die Stärkung der Fähigkeit von Kleinst- und Kleinunternehmen (KKU), wirksame und effiziente Strategien zur Risikoprävention einzusetzen.

- Die Notwendigkeit, die Prävention von arbeitsbedingten Krankheiten zu verbessern, indem neue und neu auftretende Risiken angegangen werden, ohne dabei bestehende Risiken zu vernachlässigen.

- Die Notwendigkeit, die zunehmende Alterung der Arbeitskräfte in der EU zu berücksichtigen und ihr Rechnung zu tragen.

Es wurden sieben strategische Ziele identifiziert, um diese Herausforderungen zu bewältigen. Jedes Ziel wurde durch Schlüsselaktionen in Angriff genommen, die von verschiedenen Akteuren im Bereich der Sicherheit und des Gesundheitsschutzes am Arbeitsplatz durchgeführt wurden. Dies waren u. a. die Europäische Kommission (EK), die Mitgliedstaaten (MS), die Sozialpartner, die Arbeitsaufsichtsbehörden und EU-OSHA.

Im Jahr 2017 veröffentlichte die EK eine Mitteilung[6] zur Modernisierung der EU-Rechtsvorschriften und -Politik im Bereich Sicherheit und Gesundheitsschutz am Arbeitsplatz. Diese stützte sich auf die Ergebnisse der Ex-post-Evaluierung der EU-Richtlinien über Sicherheit und Gesundheitsschutz am Arbeitsplatz (REFIT-Evaluierung).[7] In der Mitteilung wurden mehrere Schlüsselmaßnahmen festgelegt, um dem Strategischen Rahmen der EU für Gesundheit und Sicherheit am Arbeitsplatz in der zweiten Hälfte seiner Umsetzung neue Impulse zu verleihen und ihn weiter zu operationalisieren. Dazu gehörte ein Schwerpunkt auf berufsbedingte Krebserkrankungen, die Einhaltung der Vorschriften auf KKMU-Ebene und die Modernisierung der Arbeitsschutzvorschriften.

Der Umfang dieser Studie zur Unterstützung der Evaluierung des Strategischen Rahmens der EU ist sehr breit. Er umfasst sowohl die Qualität / Gestaltung des Rahmens selbst als auch seine Umsetzung auf nationaler und EU-Ebene. Um jedes dieser Elemente zu behandeln, beinhaltet die Studie eine gründliche

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[5] Europäische Kommission, 2014, *Mitteilung der Kommission COM(2014) 332 vom 6. Juni 2014 'über einen strategischen Rahmen der EU für Gesundheit und Sicherheit am Arbeitsplatz 2014-2020'*

[6] Europäische Kommission, 2017, *Commission Communication COM(2017) 12 of 10 January 2017 on 'Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy'.*

[7] Europäische Kommission, 2017, *Commission Staff Working Document (2017), 'Ex-post evaluation of the European Union occupational safety and health Directives (REFIT evaluation)', accompanying the Commission Communication COM(2017) 12 of 10 January 2017 on 'Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy'*

Bewertung der von verschiedenen Akteuren durchgeführten Maßnahmen sowie deren Auswirkungen und Folgen. Sie umfasst auch eine Beurteilung der Umsetzung in allen EU-Mitgliedstaaten.[8]

Diese Studie verwendet einen **theoriebasierten Ansatz**. Dies bedeutet, dass die "Theorie" darüber, wie die Intervention funktionieren soll, eruiert wird, bevor gezielt Nachweise gesammelt werden, um zu prüfen, inwieweit dies in der Praxis bestätigt wurde. Die Studie zielt darauf ab, die Gestaltung des Strategischen Rahmens der EU, seine Umsetzung sowohl auf EU- als auch auf MS-Ebene und seinen Beitrag zur Entstehung von Auswirkungen im Einklang mit seinen Zielen zu untersuchen.

Beurteilung der Umsetzung

Die im Rahmen dieser Studie durchgeführte Umsetzungsbeurteilung ergab **deutliche Fortschritte bei allen sieben strategischen Zielen**. Insbesondere gibt es Belege für Fortschritte bei allen bis auf eine der 29 Aktionen, die innerhalb des Strategischen Rahmens der EU identifiziert wurden. Auch wenn einige der Aktionen aufgrund ihrer Beschaffenheit niemals als "abgeschlossen" betrachtet werden können, wurden bei den meisten von ihnen gute Fortschritte erzielt. In der Tat kann die Mehrheit als innerhalb des Bezugszeitraums wie vorgesehen verwirklicht angesehen werden. Einige Maßnahmen, die bis 2016 abgeschlossen sein sollten, haben sich jedoch verzögert. Die Mitteilung von 2017 enthielt konkrete Maßnahmen mit einem klaren Zeitrahmen für die Umsetzung und war ein Katalysator für Fortschritte bei der Umsetzung in der zweiten Hälfte des Bezugszeitraums.

- **Ziel eins: Weitere Konsolidierung der nationalen Strategien**. Die Befragten betrachteten dies allgemein als das Ziel, bei dem die meisten Fortschritte erzielt wurden. Dies bezieht sich sowohl auf das Ausmaß, in dem die MS ihre nationalen Strategien in Folge der Verabschiedung des Strategischen Rahmens der EU aktualisiert haben, als auch auf den Umfang, in dem der Einfluss des Strategischen Rahmens der EU in diesen Strategien zu erkennen ist. Auf EU-Ebene stellt die Schaffung des OSH-Barometers einen bedeutenden Fortschritt in Bezug auf die Zugänglichkeit nationaler Arbeitsschutzstrategien dar.

- **Ziel zwei: Erleichterung der Einhaltung der Rechtsvorschriften im Bereich Sicherheit und Gesundheitsschutz bei der Arbeit**. Dazu gehörten die Durchführung von Sensibilisierungskampagnen auf EU- und nationaler Ebene, eine Reihe von 'Peer Reviews' auf EU-Ebene zu bestimmten Arbeitsschutzthemen, die Veröffentlichung von Leitlinien und Forschungsarbeiten sowie die Entwicklung von 248 OiRA-Tools in 17 Sprachen (Stand: April 2021). Im Rahmen dieses Ziels wurde eine beträchtliche Anzahl von Ergebnissen erzielt, und die MS sind nun stark gefordert, diese auf nationaler Ebene anzupassen und zu verbreiten.

- **Ziel drei: Bessere Durchsetzung der Rechtsvorschriften durch die Mitgliedstaaten**. Es gab stetige Fortschritte bei der Umsetzung, trotz erheblicher Bedenken hinsichtlich der Durchsetzungskapazität vieler Arbeitsaufsichtsbehörden aufgrund nationaler Mittelkürzungen. Auf EU-Ebene führte der Ausschuss Hoher Arbeitsaufsichtsbeamter (SLIC) eine Reihe von Maßnahmen zur Unterstützung eines besser koordinierten Ansatzes bei der Durchsetzung in den EU-Mitgliedstaaten durch. Dazu gehörten ein fortlaufendes Programm nationaler Bewertungen und Austauschmaßnahmen sowie die Entwicklung gemeinsamer Ausbildungsstandards.

- **Ziel vier: Vereinfachung der bestehenden Rechtsvorschriften**. Die Europäische Kommission aktualisierte sechs EU-Richtlinien (angestoßen durch die Ex-post-Evaluierung der EU-Rahmenrichtlinie für Sicherheit und Gesundheitsschutz am Arbeitsplatz und 23 damit verbundener Richtlinien). Dies stellt eine bedeutende Anstrengung zur Modernisierung des EU-Acquis in diesem Bereich dar. Auf nationaler Ebene führten zehn MS Aktivitäten zur Unterstützung dieses Ziels durch. Die Frage, welche Vereinfachungen erforderlich sein könnten, um Kleinstunternehmen in risikoarmen Sektoren zu unterstützen, bleibt jedoch in gewissem Maße unbeantwortet.

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[8] Das heißt die 27 derzeitigen Mitgliedsstaaten der EU, sowie, wo relevant, das Vereinigte Königreich, da es bis zum 31. Januar 2020, also für den Großteil der Geltungszeit des Rahmens, ein Mitgliedsstaat war.

- **Ziel fünf: Bewältigung der Herausforderungen der Alterung der Erwerbsbevölkerung, neuer und aufkommender Risiken sowie Prävention arbeitsbezogener und berufsbedingter Krankheiten**. Die Aktivitäten im Rahmen dieses Ziels konzentrierten sich auf die Bekämpfung von Berufskrankheiten. Initiativen zur Sensibilisierung und zum Austausch bewährter Praktiken im Umgang mit gefährlichen Substanzen begleiteten die Einführung neuer Grenzwerte für die berufsbedingte Exposition im Rahmen der Richtlinie über chemische Arbeitsstoffe und der Richtlinie über Chemikalien und Mutagene. Weitere Initiativen konzentrierten sich auf psychische Gesundheit und psychosoziale Risiken, Digitalisierung, Muskel-Skelett-Erkrankungen und den demografischen Wandel. Obwohl im Rahmen dieses Ziels viele Fortschritte erzielt wurden, bedeutet der spezifische Fokus auf neue und aufkommende Risiken, dass es immer noch mehr zu tun gibt.

- **Ziel sechs: Verbesserung der Erhebung statistischer Daten und Weiterentwicklung der Informationsgrundlage**. Zu den wichtigsten Errungenschaften zählen die Veröffentlichung eines EU-Index für Berufskrankheiten (EODS) und zwei Datenvisualisierungsinstrumente. Eines davon befasst sich mit Kosten und Nutzen von Sicherheit und Gesundheitsschutz am Arbeitsplatz, das andere mit Länderprofilen zu diesem Thema (das OSH-Barometer). Es wurden auch Vorarbeiten zum Aufbau einer Datenbank über die berufsbedingte Exposition durchgeführt, obwohl die Fortschritte in diesem Bereich noch begrenzt sind. Arbeitsunfälle und Berufskrankheiten sind die beiden Bereiche, in denen am meisten Fortschritte zu verzeichnen sind. Auf nationaler Ebene haben nur wenige MS Maßnahmen zur Verbesserung der statistischen Datenerhebung und zur Weiterentwicklung der Informationsgrundlage ergriffen. Die meisten dieser Maßnahmen betreffen die Verbesserung der Qualität der Daten über Arbeitsunfälle. Es wurden fast keine Maßnahmen zur Verbesserung der Daten über Berufskrankheiten ergriffen.

- **Ziel sieben: Bessere Koordinierung der Anstrengungen auf EU- und internationaler Ebene zum Thema Sicherheit und Gesundheitsschutz am Arbeitsplatz und Austausch mit internationalen Organisationen**. Obwohl es unter den Interessenvertretern unterschiedliche Ansichten über die Wichtigkeit von Ziel sieben gibt, sind in diesem Bereich beachtliche Fortschritte zu beobachten. Besondere Beispiele sind die Zusammenarbeit mit internationalen Organisationen bei der Datenerhebung, der fortgesetzte Dialog über Arbeitsschutz mit Ländern wie den USA und China sowie die Aufnahme von Verpflichtungen zu Arbeitsschutz und Arbeitsinspektion in internationale Freihandelsabkommen (FHA).

Relevanz

Die Erkenntnisse aus der Datenerhebung auf nationaler und EU-Ebene deuten auf einen eindeutigen Konsens darüber hin, dass ein Strategischer Rahmen für Sicherheit und Gesundheitsschutz am Arbeitsplatz auf europäischer Ebene höchst relevant war und nach wie vor ist. Er trägt sowohl dazu bei, die Kohärenz zwischen den MS in Bezug auf den Arbeitnehmerschutz zu gewährleisten, als auch die Bedeutung von Sicherheit und Gesundheitsschutz am Arbeitsplatz in den nationalen politischen Debatten hervorzuheben. Die meisten Interessenvertreter, die für diese Studie befragt wurden, bewerteten den breiten Anwendungsbereich und die Flexibilität des aktuellen EU-Strategierahmens positiv, da er die meisten der auf nationaler Ebene ermittelten prioritären Themen abdeckt. Einige Befragte waren jedoch der Meinung, dass eine robustere Strategie oder Politik wünschenswert gewesen wäre, mit einer geringeren Anzahl von Schlüsselprioritäten und/oder spezifischeren Zielen und Vorgaben.

Die drei wichtigsten Herausforderungen und die damit verbundenen sieben zentralen strategischen Ziele, die im Strategischen Rahmen der EU identifiziert wurden, wurden weitgehend als mit den Hauptproblemen und -herausforderungen der EU im Bereich Sicherheit und Gesundheitsschutz am Arbeitsplatz übereinstimmend wahrgenommen. Darüber hinaus gab es eine starke Unterstützung für die Aufnahme konkreter Maßnahmen und die Benennung von Akteuren, die für deren Umsetzung verantwortlich sind. Allerdings waren die Meinungen geteilter darüber, ob die Maßnahmen und die zu ihrer Durchführung benannten Akteure ausreichend waren, um die strategischen Ziele zu verfolgen.

Effektivität

Die im Rahmen dieser Studie durchgeführte Beurteilung der Umsetzung des Strategischen Rahmen der EU hat deutliche Fortschritte bei allen sieben strategischen Zielen festgestellt, die sich aus der Umsetzung der verschiedenen im Rahmen festgelegten Maßnahmen ergeben. Eine Überprüfung des Fortschritts in Bezug auf die in der Interventionslogik vorgesehenen Maßnahmen, Ergebnisse und Resultate verdeutlicht die Wirksamkeit des strategischen Rahmens der EU als Katalysator für Aktionen. Es gibt Belege für Aktivitäten bei allen bis auf eine der im Rahmen genannten Aktionen.

Die Mitteilung von 2017 spielte eine nützliche Rolle, indem sie sicherstellte, dass in der zweiten Hälfte des Umsetzungszeitraums des Strategischen Rahmens der EU weitere Fortschritte erzielt werden. Sie diente als zwischenzeitliche Bestandsaufnahme, indem sie wichtige Handlungsbereiche identifizierte und weitere vorrangige Maßnahmen definierte, um sicherzustellen, dass die Ziele des Strategischen Rahmens der EU verwirklicht wurden. In der Mitteilung von 2017 wurden Maßnahmen wie die Modernisierung der EU-Rechtsvorschriften für Sicherheit und Gesundheitsschutz am Arbeitsplatz und die Entwicklung von OiRA-Tools genannt. Dies scheint geholfen zu haben, den Fokus und die Dynamik aufrechtzuerhalten.

Diese Studie hat eine Reihe von vielversprechenden Ergebnissen unter jedem der sieben Ziele identifiziert. Nichtsdestotrotz kann keines der Ziele als vollständig "erreicht" angesehen werden. Dies liegt zum Teil am Kontext des Arbeitsschutzes, der einer ständige Entwicklung der Arbeitskultur und einer gleichzeitigen Entwicklung der Herausforderungen im Arbeitsschutz unterworfen ist. Darüber hinaus hielten einige Interessenvertreter (von Arbeitnehmern, Arbeitgebern, nationalen Behörden und Arbeitsschutzexperten) die Fortschritte bei der Bewältigung der drei im Strategischen Rahmen der EU genannten Herausforderungen zwar für beträchtlich, aber uneinheitlich. Insbesondere bei der Forschung und der Entwicklung von Instrumenten, die bei der Bewältigung der identifizierten Herausforderungen helfen können, wurden erhebliche Fortschritte festgestellt. Es bleibt jedoch noch mehr zu tun, um sicherzustellen, dass diese Veränderungen in der Praxis umgesetzt werden. Dazu gehört zum Beispiel, nachweislich die Einhaltung von Vorschriften unter KKMU zu erhöhen und die Datenerhebung und den Datenaustausch über arbeitsbedingte Krankheiten zu verbessern. Für weitere Informationen zu diesem Punkt siehe Abschnitt 3.2.3.

Kohärenz

Die Erkenntnisse aus der Datenerhebung auf nationaler und EU-Ebene deuten auf eine gute interne Kohärenz innerhalb des Strategischen Rahmens der EU hin. Es gibt einige klare Hinweise auf Synergien und gegenseitig vorteilhafte Effekte von Maßnahmen, die im Rahmen verschiedener strategischer Ziele durchgeführt werden. Der Rahmen scheint auch gut mit den Prioritäten für Sicherheit und Gesundheitsschutz am Arbeitsplatz in verschiedenen EU-MS abgestimmt zu sein, was auf eine klare Kohärenz mit den nationalen Politiken und Strategien innerhalb der EU hindeutet.

Es wurden keine nennenswerten Überschneidungen oder Widersprüche zwischen den im Strategischen Rahmen der EU beschriebenen Herausforderungen, Zielen und Maßnahmen festgestellt. Die verschiedenen Elemente des Strategischen Rahmens der EU (d. h. die sieben strategischen Ziele und die entsprechenden Maßnahmen) wirken zusammen, um das übergeordnete Ziel der Verbesserung von Sicherheit und Gesundheitsschutz am Arbeitsplatz zu erreichen. Der Strategische Rahmen der EU hat spezifische Probleme identifiziert, die Hindernisse für einen besseren Arbeitsschutz darstellen, und Maßnahmen zur Überwindung dieser Probleme festgelegt.

Der breite und bereichsübergreifende Charakter der Ziele des Strategischen Rahmens der EU bedingt eine eindeutige *potenzielle* Komplementarität mit anderen EU-Politiken. Darüber hinaus gibt es eine klare Abstimmung zwischen dem Strategischen Rahmen der EU und der Arbeit internationaler Organisationen, insbesondere der ILO. Es gibt einige konkrete Beispiele für die Zusammenarbeit zwischen verschiedenen

Politikbereichen, insbesondere in Bezug auf Chemikalien und Handel. Es gibt jedoch noch Spielraum für die stärkere Nutzung potenzieller Verflechtungen und Synergien in Bereichen wie der öffentlichen Gesundheit, der Umwelt und der Industriestrategie.

Mehrwert der EU

Die genaue Art und das Ausmaß des Einflusses und des Mehrwerts des Strategischen Rahmens der EU variierten je nach Mitgliedstaat und Maßnahme. Da der Rahmen für keinen der Akteure verbindlich ist, sollte sein Gesamteinfluss nicht überschätzt werden. Nichtsdestotrotz zeigen die für diese Studie durchgeführten Recherchen, dass der Strategische Rahmen der EU dazu beigetragen hat, mehrere bereits bestehende Initiativen zu verstärken. Es wurde ihm auch bescheinigt, zahlreiche neue Initiativen auf EU- und nationaler Ebene angestoßen zu haben. Er hat dies erreicht, indem er die Prioritäten explizit gemacht hat, einen übergreifenden Rahmen geschaffen hat, der die verschiedenen Aktivitäten miteinander verbindet und in einen Kontext stellt, und die verschiedenen Interessengruppen aufgefordert hat, Verantwortung für konkrete Maßnahmen zu übernehmen.

Der Strategische Rahmen der EU hat dazu beigetragen, dass das Thema Sicherheit und Gesundheitsschutz am Arbeitsplatz auf EU-Ebene und in den MS sowie auf internationaler Ebene weiterhin oben auf der Tagesordnung steht. Er hat auch zu einheitlicheren Wettbewerbsbedingungen beigetragen, indem er die Entwicklung gemeinsamer Standards und Instrumente zur Unterstützung der Durchsetzung und Einhaltung der Vorschriften unterstützt hat. Dieser gemeinsame Ansatz kann EU-weit zu Skaleneffekten führen und ermöglicht es Ländern, die in einem bestimmten Bereich weniger fortgeschritten sind, von den fortschrittlicheren zu lernen. Als konkrete Beispiele für den Mehrwert des Strategischen Rahmens der EU lassen sich nennen:

- Die Überarbeitung und Abstimmung der nationalen Strategien für Sicherheit und Gesundheitsschutz am Arbeitsplatz ist ein klarer Fall von "Soft Power" der EU, bei der gemeinsam definierte Prioritäten in Verbindung mit strategischer Anregung und Unterstützung zu positiven Veränderungen auf nationaler Ebene beitragen können.

- Die Entwicklung von einheitlichen Kampagnen, Leitlinien, Hilfsmitteln und anderen Materialien, die an unterschiedliche nationale Gegebenheiten angepasst werden können, führt zu Skaleneffekten und stellt sicher, dass gemeinsame Standards und Ansätze allen EU-MS zugänglich sind.

- Durch die Aktualisierung der EU-Gesetzgebung wird sichergestellt, dass die nationalen Rechtsvorschriften zweckmäßig bleiben, insbesondere durch die Umsetzung und Implementierung der überarbeiteten Richtlinien.

- Es liegt auf der Hand, dass die EU als Ganzes mehr Einfluss hat, um auf die Aufnahme von Arbeitsschutzklauseln in Freihandelsabkommen zu bestehen, als es die MS einzeln tun würden. Dies ist eine weitere Art, wie die EU einen Mehrwert schafft.

Schlussfolgerungen

Der Strategische Rahmen der EU hat eine gemeinsame Zielrichtung zur Unterstützung koordinierter Maßnahmen zur Verbesserung von Sicherheit und Gesundheitsschutz am Arbeitsplatz auf EU-Ebene vorgegeben. Insbesondere:

- Der Gestaltung des Strategischen Rahmens der EU wurde für seine **Prägnanz und Klarheit** gelobt. Die drei Hauptherausforderungen und die sieben zentralen strategischen Ziele entsprachen den wichtigsten Problemen und Herausforderungen, mit denen die EU im Bereich Sicherheit und Gesundheitsschutz am Arbeitsplatz konfrontiert ist. Darüber hinaus lieferte die Entscheidung, unter

jedem Ziel konkrete Maßnahmen und die für deren Umsetzung verantwortlichen Akteure zu benennen, einen greifbaren Fahrplan zur Erreichung der Ziele.

- Die Erkenntnisse aus der Datenerhebung auf nationaler und EU-Ebene deuten auf eine **gute interne Kohärenz** innerhalb des Strategischen Rahmens der EU hin. Es gibt klare Hinweise auf Synergien und gegenseitig vorteilhafte Effekte von Maßnahmen, die unter verschiedenen strategischen Zielen durchgeführt wurden. Im Allgemeinen stimmen die Herausforderungen und Prioritäten gut mit denen überein, die auf nationaler Ebene ermittelt wurden.

- Die meisten Interessenvertreter, die für diese Studie konsultiert wurden, **bewerten den breiten Anwendungsbereich und die Flexibilität des aktuellen Strategischen Rahmens der EU positiv**, da er die meisten der auf nationaler Ebene identifizierten prioritären Themen abdeckt. Der aktuelle Rahmen bietet den verschiedenen Ländern und Akteuren die dringend benötigte Flexibilität, um die Prioritäten auf EU-Ebene auf pragmatische Weise umzusetzen und anzupassen und dabei auf die spezifischen Bedürfnisse innerhalb ihres nationalen, sektoralen und zeitlichen Kontextes zu reagieren.

- Einige Interessenvertreter waren der Ansicht, dass eine **robustere Strategie oder Politik** (wie etwa die vorangegangene Gemeinschaftsstrategie für Gesundheit und Sicherheit am Arbeitsplatz 2007-2012) wünschenswert gewesen wäre. Sie sprachen sich für eine geringere Anzahl von Schlüsselprioritäten und/oder spezifischere Ziele und Vorgaben aus. Diejenigen, die diese Option befürworteten, waren der Meinung, dass dadurch mehr Impulse und Verantwortlichkeit für Fortschritte in Bezug auf Fragen des Arbeitsschutzes gegeben würden.

- Darüber hinaus sahen einige Interessenvertreter eine **leichte Diskrepanz zwischen den im Rahmen genannten Herausforderungen und einigen der konkreten Ziele und Maßnahmen**. Insbesondere vermissten sie eine klare Verbindung zwischen den wichtigsten Herausforderungen und den unter den Zielen vier und sieben beschriebenen Maßnahmen.

Obwohl es schwierig ist, konkrete Auswirkungen zu messen, die eindeutig dem Strategischen Rahmen der EU zugeschrieben werden können, lassen sich eine Reihe von Schlussfolgerungen in Bezug auf seinen Einfluss ziehen:

- Der Strategische Rahmen der EU bietet den Mitgliedstaaten **eine gemeinsame Referenz** für die Gestaltung ihrer eigenen Strategien und Maßnahmen. Darüber hinaus verleiht er Überlegungen zu Sicherheit und Gesundheitsschutz am Arbeitsplatz **mehr Gewicht** in umfassenderen politischen und strategischen Diskussionen (sowohl innerhalb der Mitgliedstaaten als auch auf internationaler Ebene).

- In einigen Bereichen gibt es starke Belege für eine "Beitragsgeschichte", die **die durchgeführten Maßnahmen mit weitergehenden Auswirkungen verbindet**. Einige dieser Effekte sind bereits eingetreten, während andere voraussichtlich in absehbarer Zeit folgen werden.

- Es gibt auch eindeutige Belege dafür, dass der Strategische Rahmen der EU zu erheblichen Fortschritten bei der **Verbesserung der Arbeitsschutzkultur in der EU** beigetragen hat, auch wenn es ein gewisses Maß an Variationen je nach den jeweiligen spezifischen Zielen und Maßnahmen gab. Nahezu alle in der Interventionslogik vorgesehenen Teilergebnisse („outputs") wurden realisiert. Auch bei den meisten der für jedes Einzelziel vorgesehenen Ergebnisse („outcomes") wurden Fortschritte erzielt.

- Der Strategische Rahmen der EU wurde als wichtige Referenz für viele Interessengruppen identifiziert. Insbesondere die nationalen zuständigen Behörden haben ihn genutzt, um Maßnahmen zu Sicherheit und Gesundheitsschutz am Arbeitsplatz **auf nationaler Ebene zu priorisieren**. Darüber hinaus empfanden ihn die Sozialpartner als nützliches Instrument, um sich für eine stärkere Fokussierung auf Sicherheit und Gesundheitsschutz am Arbeitsplatz im Allgemeinen einzusetzen, sowie um die Aufmerksamkeit auf spezifische Themen wie Muskel-Skelett-Erkrankungen und psychosoziale Risiken zu lenken.

- Die Aufnahme von Sicherheit und Gesundheitsschutz am Arbeitsplatz in Freihandelsabkommen sowie in bilateralen Gesprächen auf hoher Ebene mit führenden Wirtschaftsnationen haben die **Bedeutung von Sicherheit und Gesundheitsschutz am Arbeitsplatz auf der globalen Bühne erhöht** und die EU als führenden Akteur in diesem Bereich positioniert.

- Der Strategische Rahmen der EU (und die Mitteilung von 2017) haben die **Überarbeitung des EU-Acquis im Bereich Sicherheit und Gesundheitsschutz am Arbeitsplatz** unterstützt. Dies hat zur Aktualisierung von sechs wichtigen Richtlinien in diesem Bereich geführt.

Empfehlungen für einen zukünftigen Strategischen Rahmen

Im Hinblick auf die Gestaltung eines zukünftigen Strategischen Rahmens empfiehlt diese Studie ein Gleichgewicht zwischen einem **breiten Anwendungsbereich und einer flexiblen Gestaltung** einerseits, und der **Konzentration auf eine begrenzte Anzahl von Kernprioritäten** sowie der Übernahme von **Verantwortung für die Überwachung der Fortschritte** andererseits. Die richtige Balance zwischen diesen beiden zu finden – unter Berücksichtigung des politischen und sozioökonomischen Kontextes zum jeweiligen Zeitpunkt – ist der Schlüssel zur Maximierung des Erfolgs des zukünftigen Rahmens.

Ein konkreter Ansatz, der dazu beitragen könnte, dass der künftige Rahmen dieses Gleichgewicht findet, wäre die Kombination einer längerfristigen Strategie mit kurzfristigeren Aktionsplänen. Anknüpfend an den Erfolg der Mitteilung von 2017, in der die Prioritäten und Maßnahmen des Strategischen Rahmens der EU zur Halbzeit (im Jahr 2017) überdacht wurden, könnte ein künftiger Strategischer Rahmen von **kurzfristigeren Prioritäten und Umsetzungsplänen** von etwa zwei oder drei Jahren Dauer begleitet werden. Diese würden sich auf die Operationalisierung der im übergeordneten Strategischen Rahmen enthaltenen Ziele konzentrieren. Neben der Benennung von Akteuren und Zeitrahmen für die Umsetzung könnten die kurzfristigeren Umsetzungspläne z. B. **konkrete Indikatoren** enthalten. Diese würden helfen, den laufenden Fortschritt zu überwachen und die Transparenz zwischen den verschiedenen Akteuren zu erhöhen.

Stakeholder feedback has also highlighted resource constraints as a significant barrier to OSH implementation within MS. It may therefore be appropriate to investigate the possibility of building bridges with existing funding streams (such as the European Social Fund) to help stakeholders access financial support for implementation of actions identified in a future Strategic Framework.

Das Feedback der Interessenvertreter hat auch die Ressourcenknappheit als ein wesentliches Hindernis für die Umsetzung von Sicherheit und Gesundheitsschutz am Arbeitsplatz in den MS hervorgehoben. Es könnte daher sinnvoll sein, die Möglichkeit zu prüfen, Brücken zu bestehenden Finanzierungsmöglichkeiten (wie dem Europäischen Sozialfonds) zu schlagen, um den Interessenvertretern den Zugang zu finanzieller Unterstützung für die Umsetzung der Maßnahmen, die in einem künftigen Strategischen Rahmen genannt sind, zu erleichtern.

Aufkommende Prioritäten

Die Hauptprioritäten für einen potenziellen zukünftigen Strategischen Rahmen, die sich aus den Recherche- und Konsultationsaktivitäten ergeben haben, können wie folgt zusammengefasst werden:

- Erstens ist es erforderlich, sich **weiterhin auf die im Strategischen Rahmen der EU 2014-2020 identifizierten Herausforderungen und Themen zu konzentrieren**. Berufskrankheiten, der demografische Wandel, psychosoziale Risiken und Muskel- und Skeletterkrankungen haben in den letzten Jahren nur an Bedeutung gewonnen. Darüber hinaus besteht weiterhin die Notwendigkeit, sowohl die Arbeitsaufsichtsbehörden als auch die Unternehmen bei der Verbesserung der Arbeitsschutzstandards zu unterstützen.

- Die Interessenvertreter betonten auch die **Notwendigkeit, weiterhin traditionelle Herausforderungen im Bereich Sicherheit und Gesundheitsschutz am Arbeitsplatz zu**

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berücksichtigen (einschließlich Arbeitsunfälle, Stürze aus der Höhe, und sonstige Risiken in der Landwirtschaft und im Baugewerbe). Diese Risiken könnten übersehen werden, wenn ein zukünftiger Strategischer Rahmen neue und aufkommende Risiken zu stark priorisiert.

- Es sollten auch die **Auswirkungen einer Reihe von längerfristigen Trends in der Arbeitswelt** berücksichtigt werden. Themen wie die zunehmende Globalisierung der Lieferketten, die umweltfreundlichere Gestaltungder Wirtschaft, der Trend zu flexibleren und atypischen Arbeitsverhältnissen, der Übergang zur Telearbeit und die zunehmende Digitalisierung haben alle Auswirkungen auf die künftige Umsetzung von Sicherheit und Gesundheitsschutz am Arbeitsplatz. Die mit diesen aufkommenden Trends verbundenen Chancen und Risiken sollten weiter berücksichtigt werden.

- Es sollte sichergestellt werden, dass **der Arbeitsschutz im Hinblick auf verschiedene Arten von Arbeitnehmern zweckmäßig ist** und dass die unterschiedlichen Auswirkungen auf verschiedene Gruppen gründlich durchdacht wurden. Dies gilt insbesondere für Wanderarbeiter, Beschäftigte in der sogenannten Gig-Economy, Plattformarbeiter und Beschäftigte im häuslichen Bereich (einschließlich privater häuslicher Pflegekräfte, Reinigungskräfte und Telearbeitskräfte). Die geschlechtsspezifischen Auswirkungen von Sicherheit und Gesundheitsschutz am Arbeitsplatz sowie spezifische Überlegungen, die für Menschen mit Behinderungen erforderlich sind, sollten ebenfalls berücksichtigt werden.

- Taking into consideration the impacts of the COVID-19 outbreak on workplace health and safety, consideration should also be given to **broader global trends such as climate change and the potential for future pandemics** and how these may impact on the workplace of the future. For example, this may include impacts of retrofitting programmes on potential exposure to asbestos and the implications of the transition to a low carbon economy. A holistic approach to OSH, including **mainstreaming OSH considerations** into areas such as environmental policy and public health, could help to increase resilience when facing future challenges.

- Angesichts der Auswirkungen des Ausbruchs von COVID-19 auf die Gesundheit und Sicherheit am Arbeitsplatz sollte auch berücksichtigt werden, wie sich **allgemeinere globale Trends wie der Klimawandel und das Potenzial für zukünftige Pandemien** auf den Arbeitsplatz der Zukunft auswirken können. Dies kann zum Beispiel die Auswirkungen von Nachrüstungsprogrammen für die potenzielle Gefährdung durch Asbest, oder die Folgen des Übergangs zu einer klimafreundlicheren Wirtschaft umfassen. Ein ganzheitlicher Ansatz für Sicherheit und Gesundheitsschutz am Arbeitsplatz, einschließlich der Einbeziehung von Arbeitsschutzaspekten in Bereiche wie Umweltpolitik und öffentliche Gesundheit, könnte dazu beitragen, die Widerstandsfähigkeit gegenüber künftigen Herausforderungen zu erhöhen.

Résumé des conclusions de l'étude

Les objectifs et les actions du cadre stratégique de l'UE ont fourni une orientation stratégique commune pour l'amélioration de la sécurité et de la santé au travail (SST) à ce jour. Ils continuent à soutenir le développement de conditions de concurrence équitables au niveau de l'Union Européenne (UE) via le développement, la mise en œuvre et l'application de l'acquis communautaire en matière de SST. En particulier :

- L'élaboration du cadre stratégique de l'UE a été saluée pour sa **concision et sa clarté**. Les trois principaux défis et les sept objectifs stratégiques clés correspondaient aux principaux problèmes et défis auxquels l'UE est confrontée dans le domaine de la sécurité et de la santé au travail. En outre, la plupart des parties prenantes ont salué la décision d'inclure des actions concrètes et de désigner les acteurs responsables de leur mise en œuvre pour chaque objectif.

- Les données recueillies aux niveaux national et européen indiquent une **bonne cohérence interne** au sein du cadre stratégique de l'UE. Il existe des preuves évidentes de synergies et d'effets mutuellement bénéfiques entre les actions menées au sein des différents objectifs stratégiques. De façon géneral, les défis et les priorités au niveau européen reflètent bien ceux identifiés au niveau national.

- La plupart des parties prenantes consultées pour cette étude **apprécient le large champ d'application et la flexibilité du cadre stratégique actuel de l'UE**, qui couvre la plupart des questions prioritaires identifiées au niveau national. Le cadre actuel offre la flexibilité nécessaire aux différents pays et acteurs pour mettre en œuvre et adapter les priorités de l'UE de manière pragmatique, en répondant aux besoins spécifiques du contexte national, sectoriel et temporel.

En ce qui concerne la **mise en œuvre** du cadre stratégique de l'UE, cette étude a identifié des **progrès évidents par rapport aux sept objectifs stratégiques**. Plus précisément, des progrès ont été mesurés pour toutes les actions identifiées dans le cadre stratégique, sauf une. Bien que la nature de certaines actions signifie qu'elles ne pourront jamais être considérées comme "achevées", de bons progrès ont été réalisés pour la plupart des actions. La majorité des actions peuvent être considérées comme ayant été réalisées au cours de la période de référence. La mise en œuvre d'un certain nombre d'actions qui devaient être achevées avant 2016 a toutefois été retardée.

En ce qui concerne les **résultats et les impacts** du cadre stratégique de l'UE, l'étude a révélé que les objectifs et les actions fournissent une orientation stratégique commune pour l'amélioration de la sécurité et de la santé au travail. Ils soutiennent des conditions de concurrence équitables au sein the l'UE via le développement, la mise en œuvre et l'application de l'acquis communautaire en matière de SST. Les impacts suivants ont été constatés :

- L'existence d'un cadre stratégique au niveau de l'UE fournit une **référence commune aux États membres lorsqu'ils élaborent leurs propres stratégies et politiques en matière de SST**. En outre, il **donne du poids aux considérations de santé et de sécurité dans les discussions politiques et stratégiques plus larges** (tant au sein des États membres que sur la scène internationale).

- Dans certains domaines, il existe des preuves solides permettant de souligner la contribution du cadre stratégique, et d'établir un lien entre les actions menées au sein du cadre et des effets plus larges. Certains de ces effets se sont déjà concrétisés, tandis que d'autres semblent devoir suivre dans un avenir proche.

- Le cadre stratégique de l'UE a été identifié comme une **référence importante pour de nombreuses parties prenantes**. Les Autorités Nationales Compétentes (ANC), en particulier, l'ont utilisé pour donner la priorité aux actions en matière de SST au niveau national.

- Le cadre stratégique de l'UE (et la communication de 2017) a **contribué à la révision de l'acquis communautaire en matière de SST**, ce qui a conduit à la mise à jour de six directives clés dans ce domaine.

Cette étude a révélé un large soutien en faveur d'un futur cadre stratégique au niveau de l'UE. Elle recommande un équilibre entre, d'une part, **un champ d'application large et une souplesse de conception** et, d'autre part, **une concentration sur un nombre limité de priorités essentielles et une responsabilité claire en termes de suivi des progrès**. Pour continuer à traiter les risques traditionnels en matière de SST, un certain nombre de nouvelles priorités ont été identifiées. Celles-ci comprennent la prise en compte de l'évolution du monde du travail et du statut des travailleurs et des employeurs, ainsi que la nécessité de considérer la SST dans le contexte de tendances mondiales plus larges telles que le changement climatique.

Résumé Analytique

Contexte et approche

Le cadre stratégique de l'UE pour la santé et la sécurité au travail 2014-2020 (cadre stratégique de l'UE) a été adopté le 6 juin 2014. Il visait à garantir que l'Union européenne (UE) continue à jouer un rôle de premier plan dans la promotion de normes élevées en matière de conditions de travail, tant en Europe qu'au niveau international. Le cadre stratégique de l'UE a identifié trois grands défis[9] auxquels l'UE est confrontée en ce qui concerne l'amélioration de la santé et de la sécurité au travail :

- La nécessité d'améliorer la mise en œuvre des règles de santé et de sécurité existantes, notamment en renforçant la capacité des micro et petites entreprises à mettre en place des stratégies de prévention des risques efficaces et efficientes.

- La nécessité d'améliorer la prévention des maladies liées au travail en s'attaquant aux risques nouveaux et émergents sans négliger les risques existants.

- La nécessité de prendre en compte le vieillissement de la main-d'œuvre de l'UE.

Sept objectifs stratégiques ont été identifiés pour aider à relever ces défis. Des actions clés ont été élaborées pour atteindre chaque objectif, qui ont été mises en œuvre par différents acteurs dans le domaine de la santé et de la sécurité au travail en Europe. Il s'agissait, entre autres, de la Commission européenne (CE), des États membres (EM), des partenaires sociaux, des inspections du travail (IT) et de l'EU-OSHA.

En 2017, la CE a publié une communication sur la modernisation de la législation et de la politique de l'UE en matière de sécurité et de santé au travail (la communication de 2017)[10]. Celle-ci s'est appuyée sur les résultats de l'évaluation ex post des directives de l'Union européenne en matière de sécurité et de santé au travail (évaluation REFIT)[11]. La communication de 2017 a défini plusieurs actions clés visant à donner un nouvel élan au cadre stratégique de l'UE pour la santé et la sécurité au travail et à le rendre plus opérationnel au cours de la seconde moitié de sa mise en œuvre. Elle mettait notamment l'accent sur le cancer professionnel, la conformité au niveau des MPME et la modernisation de la législation en matière de SST.

L'étude d'appui à l'évaluation couvre un large périmètre, de la qualité/la conception du cadre stratégique lui-même à sa mise en œuvre au niveau national et européen. Pour aborder chacun de ces éléments, l'étude implique une évaluation approfondie des actions menées par les différents acteurs ainsi que de leurs effets et impacts. Elle comprend également un examen de la mise en œuvre dans tous les États membres de l'UE[12].

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[9] European Commission, 2014, *Commission Communication COM(2014) 332 of 6 June 2014 'on an EU Strategic Framework on Health and Safety at Work 2014-2020'*, available at: https://ec.europa.eu/social/main.jsp?catId=151.

[10] European Commission, 2017, *Commission Communication COM(2017) 12 to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions of 10 January 2017 on 'Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy'.*

[11] European Commission, 2017, *Commission Staff Working Document (2017), 'Ex-post evaluation of the European Union occupational safety and health Directives (REFIT evaluation)', accompanying the Commission Communication COM(2017) 12 to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions of 10 January 2017 on 'Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy'*, available at: eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52017SC0010&from=en.

[12] This means the 27 current Member States of the EU, as well as, where relevant, the UK, which was a Member State until 31 January 2020, i.e. for most of the period covered by the Framework.

Cette étude utilise une approche **basée sur la théorie**. Il s'agit de rendre claire la manière dont l'intervention est – théoriquement - censée fonctionner avant de recueillir des preuves de manière ciblée pour vérifier dans quelle mesure cela a été confirmé dans la pratique. L'étude vise à examiner la conception du cadre stratégique de l'UE, sa mise en œuvre au niveau de l'UE et des États membres, et sa contribution à la création d'impacts conformes à ses objectifs.

Examen de la mise en œuvre

L'examen de la mise en œuvre effectué dans le cadre de cette étude a permis d'identifier **des progrès évidents par rapport aux sept objectifs stratégiques**. Plus précisément, des progrès ont été mesurés pour l'ensemble des 29 actions identifiées dans le cadre stratégique de l'UE, sauf une. De même, bien qu'en raison de la nature de certaines des actions, elles ne puissent jamais être considérées comme "achevées", des progrès notables ont été réalisés pour la plupart d'entre elles. En effet, la majorité d'entre elles peuvent être considérées comme ayant été réalisées comme prévu au cours de la période de référence. Certaines actions qui devaient être achevées en 2016 ont toutefois été retardées. La communication de 2017 a fourni des actions concrètes assorties d'un calendrier de mise en œuvre clair et a été un catalyseur de progrès pour la mise en œuvre des actions du cadre stratégique au cours de la seconde moitié de la période de référence.

- **Premier objectif : Poursuivre la consolidation des stratégies nationales.** Les personnes consultées dans le cadre de cette étude considèrent généralement qu'il s'agit de l'objectif pour lequel les progrès les plus importants ont été réalisés. Cet objectif visait à comprendre dans quelle mesure les États membres avaient mis à jour leurs stratégies nationales suite à l'adoption du cadre stratégique au niveau européen, ainsi que l'influence du cadre stratégique de l'UE sur le contenu de ces stratégies. Au niveau de l'UE, la création du Baromètre SST marque un progrès significatif en termes d'accessibilité des stratégies nationales de SST.

- **Deuxième objectif : Faciliter le respect de la législation sur la sécurité et la santé au travail (SST).** Cet objectif comprenait la mise en œuvre de campagnes de sensibilisation aux niveaux européen et national, une série d'examens par les pairs au niveau de l'UE sur des sujets spécifiques liés à la SST, la publication d'outils de direction, d'orientation et de rapports de recherche, et le développement de 248 outils OiRA en 17 langues (à partir d'avril 2021). Un nombre important de résultats ont été obtenus dans le cadre de cet objectif et il incombe désormais aux États membres d'adapter ces outils et de les promouvoir au niveau national.

- **Troisième objectif : Une meilleure application et mise en vigueur de la législation sur la SST par les États membres.** Des progrès constants ont été réalisés dans ce domaine, malgré des préoccupations importantes concernant la capacité de supervision de nombreux inspecteurs du travail en raison des coupes budgétaires au niveau national. Au niveau de l'UE, le Comité des hauts responsables de l'inspection du travail (CHRIT) a mis en œuvre un certain nombre d'actions visant à soutenir une approche plus coordonnée de la mise en vigueur de la législation dans les États membres de l'UE. Cela inclut notamment un programme continu d'évaluations et d'échanges nationaux et l'élaboration de normes de formation communes.

- **Quatrième objectif : Simplifier la législation existante.** La Commission européenne a mis à jour six directives européennes à la suite de l'évaluation ex post de la directive-cadre européenne sur la SST et de 23 directives connexes. Cela représente un effort significatif pour moderniser l'acquis communautaire en matière de SST. Au niveau national, dix États membres ont mis en œuvre des activités visant à soutenir cet objectif. Toutefois, la question de savoir quelles simplifications pourraient être nécessaires pour soutenir les micro-entreprises dans les secteurs à faible risque est restée dans une certaine mesure sans réponse.

- **Objectif 5 : Faire face au vieillissement de la main-d'œuvre, aux nouveaux risques émergents, à la prévention des maladies liées au travail et des maladies professionnelles.** L'activité au titre de cet objectif s'est concentrée sur la lutte contre les maladies professionnelles. Des initiatives visant à sensibiliser et à partager les meilleures pratiques en matière de gestion des substances dangereuses ont accompagné l'introduction de nouvelles limites d'exposition

professionnelle (LEP) en vertu de la directive sur les agents chimiques (DAC) et de la directive sur les substances chimiques et mutagènes (DCM). D'autres initiatives ont porté sur la santé mentale et les risques psychosociaux (RPS), la numérisation, les troubles musculosquelettiques (TMS) et l'évolution démographique. Si de nombreux progrès ont été accomplis dans le cadre de cet objectif, l'accent mis sur les risques nouveaux et émergents signifie qu'il y aura toujours plus à faire.

- **Objectif six : améliorer la collecte de données statistiques et développer la base de données.** Parmi les réalisations les plus importantes figurent la publication d'un indice européen des maladies professionnelles et deux outils de visualisation des données. L'un d'eux porte sur les coûts et les avantages liés à la SST et l'autre sur les profils de pays en matière de SST (le baromètre de la SST). Des travaux préliminaires ont également été réalisés pour établir une base de données sur l'exposition professionnelle, bien que les progrès dans ce domaine aient été limités. Les accidents du travail et les maladies professionnelles sont les deux principaux domaines dans lesquels les progrès ont été les plus tangibles. Au niveau national, peu d'EM ont adopté des mesures pour améliorer la collecte de données statistiques et développer une base de données. La plupart de ces mesures concernent l'amélioration de la qualité des données sur les accidents du travail. Presque aucune mesure n'a été adoptée pour améliorer les données sur les maladies professionnelles.

- **Objectif sept : mieux coordonner les efforts de l'UE et de la communauté internationale en matière de SST et s'engager auprès des organisations internationales.** Bien que les parties prenantes aient des avis divergents quant à l'importance de l'objectif sept, des progrès notables peuvent être observés dans ce domaine. Parmi les exemples mentionnés, citons la coopération avec les organisations internationales en matière de collecte de données, la poursuite du dialogue sur la SST avec des pays tels que les États-Unis et la Chine, et l'intégration d'engagements en matière de SST et d'inspection du travail dans les accords internationaux de libre-échange (ALE).

Pertinence

Les données collectées par notre étude aux niveaux national et européen font apparaître un consensus sur le fait qu'un cadre stratégique pour la SST au niveau européen était et reste très pertinent. Il permet à la fois de garantir la cohérence entre les États membres en termes de protection des travailleurs et d'accroître l'importance de la santé et de la sécurité au travail dans les débats politiques nationaux. La plupart des parties prenantes consultées pour cette étude ont apprécié le large champ d'application et la flexibilité de l'actuel cadre stratégique de l'UE, qui couvre la plupart des questions prioritaires identifiées au niveau national. Toutefois, certaines personnes interrogées ont estimé qu'une stratégie ou une politique plus robuste aurait été souhaitable, avec un nombre réduit de priorités clés, et/ou des objectifs et des cibles plus spécifiques.

Les trois principaux défis et les sept objectifs stratégiques clés identifiés dans le cadre stratégique de l'UE ont été largement perçus comme correspondant aux principaux problèmes et défis auxquels l'UE est confrontée dans le domaine de la sécurité et de la santé au travail. En outre, l'inclusion d'actions concrètes et la désignation des acteurs responsables de leur mise en œuvre ont été largement saluées. Toutefois, les avis étaient plus partagés quant à savoir si les actions et les acteurs identifiés pour les mener à bien étaient suffisants pour poursuivre les objectifs stratégiques.

Efficacité

L'examen de la mise en œuvre du cadre stratégique effectué dans le cadre de cette étude a permis d'identifier **des progrès évidents par rapport aux sept objectifs stratégiques**, résultant de la mise en œuvre des différentes actions identifiées dans le cadre stratégique de l'UE. Un examen des progrès réalisés par rapport aux actions, aux résultats et aux impacts prévus dans la logique d'intervention

démontre l'efficacité du cadre stratégique de l'UE en tant que catalyseur de l'action. En effet, des progrès ont été réalisés sur l'ensemble des actions identifiées dans le cadre stratégique de l'UE, sauf une.

La communication de 2017 a été particulièrement utile pour veiller à ce que les progrès se poursuivent au cours de la seconde moitié de la période de mise en œuvre du cadre stratégique de l'UE. Elle a fait office de "bilan" intermédiaire, en identifiant les principaux domaines d'intervention et en définissant d'autres actions prioritaires pour garantir la réalisation de l'ambition du cadre stratégique de l'UE. La communication de 2017 a identifié des actions telles que la modernisation de la législation européenne en matière de SST et le développement d'outils OiRA. Cela semble avoir contribué à maintenir le cap et la dynamique.

Cette étude a identifié un certain nombre de résultats prometteurs pour chacun des sept objectifs. Néanmoins, aucun des objectifs ne peut être considéré comme ayant été complètement "atteint". Cela est dû en partie à la nature du contexte de la SST, qui implique une évolution constante de la culture du travail et une évolution simultanée des défis de la SST. En outre, certaines parties prenantes (représentant les travailleurs, les employeurs, les ANC et les experts de la SST) ont estimé que les progrès réalisés pour relever les trois défis identifiés dans le cadre stratégique de l'UE étaient considérables, mais inégaux. En particulier, des progrès significatifs ont été constatés dans la recherche et le développement d'outils de soutien pour aider à relever les défis identifiés. Il reste cependant beaucoup à faire pour que ces changements soient mis en œuvre dans la pratique. Il s'agit, par exemple, d'accroître les preuves de conformité parmi les MPME et d'augmenter la collecte et le partage de données sur les maladies liées au travail. Pour plus d'informations sur ce point, voir la section 3.2.3.

Cohérence

Les données recueillies aux niveaux national et européen témoignent d'une bonne cohérence interne au sein du cadre stratégique de l'UE. Il existe des preuves évidentes de synergies et d'effets mutuellement bénéfiques entre les actions menées au sein des différents objectifs stratégiques. Le cadre stratégique de l'UE semble également bien refléter les priorités en matière de SST identifiées dans divers États membres de l'UE, ce qui fait état d'une bonne cohérence entre les politiques et stratégies nationales en matière de SST et celles de l'UE.

Aucune redondance ou contradiction significative n'a été identifié entre les différents défis, objectifs et actions décrits dans le cadre stratégique de l'UE. Les différents éléments du cadre stratégique de l'UE (c'est-à-dire les sept objectifs stratégiques et les actions correspondantes) fonctionnent les uns avec les autres pour atteindre son objectif global d'amélioration de la sécurité et de la santé au travail. Le cadre stratégique de l'UE a identifié des problèmes spécifiques qui constituent des obstacles à une meilleure SST et a défini des actions pour les surmonter.

La nature transversale des objectifs du cadre stratégique de l'UE implique une complémentarité *potentielle* avec d'autres politiques de l'UE. En outre, il existe un alignement clair entre le cadre stratégique de l'UE et le travail des organisations internationales, notamment l'OIT. Il existe quelques exemples spécifiques de collaboration entre différents domaines politiques, notamment en ce qui concerne les produits chimiques et le commerce. Toutefois, il est possible d'exploiter davantage les liens et synergies potentiels dans des domaines tels que la santé publique, l'environnement et la stratégie industrielle.

Valeur ajoutée de l'UE

La nature et l'étendue exactes de l'influence et de la valeur ajoutée du cadre stratégique de l'UE varient selon l'État membre et l'action en question. Le cadre stratégique de l'UE n'étant contraignant pour aucun des acteurs, son influence globale ne doit pas être surestimée. Néanmoins, les recherches menées pour cette étude montrent que le cadre stratégique de l'UE a contribué à renforcer plusieurs initiatives existantes. Il a également été crédité du lancement de nombreuses nouvelles initiatives, tant au niveau

européen que national. Il y est parvenu en rendant les priorités explicites, en fournissant un cadre général qui relie et contextualise les différentes activités, et en invitant les différentes parties prenantes à assumer la responsabilité d'actions concrètes.

Le cadre stratégique de l'UE a contribué à garantir que la SST reste une priorité au niveau de l'UE et des États membres, ainsi que sur la scène internationale. Il a également contribué à rendre les règles du jeu plus équitables en aidant à développer des normes et des outils communs pour soutenir l'application des règles et la conformité à celles-ci. Cette approche commune peut générer des économies d'échelle à travers l'UE et permet aux pays moins avancés dans un domaine donné d'apprendre des plus avancés. Voici quelques exemples spécifiques de la valeur ajoutée du cadre stratégique de l'UE :

- La révision et l'alignement des stratégies nationales de SST représentent un cas clair de "soft power" de l'UE, où des priorités définies en commun, combinées à un encouragement et un soutien stratégique, peuvent contribuer à des changements positifs au niveau national.

- L'élaboration de campagnes, de lignes directrices, d'outils de soutien et d'autres supports communs pouvant être adaptés aux différentes situations nationales permet de réaliser des économies d'échelle et garantit le partage de normes et d'approches communes entre les États membres de l'UE.

- La mise à jour de la législation européenne permet de s'assurer que les législations nationales restent adaptées aux besoins, grâce à la transposition et à la mise en œuvre des directives révisées.

- Il est clair que l'UE dans son ensemble a plus de poids pour insister sur l'inclusion de clauses relatives à la sécurité et à la santé au travail dans les accords de libre-échange que les États membres individuellement, ce qui est une autre façon pour l'UE d'apporter une valeur ajoutée.

Conclusions

Le cadre stratégique de l'UE a fourni une orientation commune pour soutenir une action coordonnée visant à améliorer la sécurité et la santé au travail et le soutien au niveau de l'UE. En particulier :

- La conception du cadre stratégique de l'UE a été saluée pour sa **concision et sa clarté**. Les trois principaux défis et les sept objectifs stratégiques clés associés correspondaient aux principaux problèmes et défis auxquels l'UE est confrontée dans le domaine de la sécurité et de la santé au travail. En outre, la décision d'inclure des actions concrètes et de désigner les acteurs responsables de leur mise en œuvre pour chaque objectif a fourni une feuille de route tangible pour atteindre les objectifs.

- Les données recueillies aux niveaux national et européen témoignent de la **bonne cohérence interne** au sein du cadre stratégique de l'UE. Il existe des preuves évidentes de synergies et d'effets mutuellement bénéfiques entre les actions menées au sein des différents objectifs stratégiques. De façon général, les défis et les priorités au niveau européen reflètent bien ceux identifiés au niveau national.

- La plupart des parties prenantes consultées pour cette étude **ont apprécié le large champ d'application et la flexibilité du cadre stratégique actuel de l'UE**, qui couvre la majorité des questions prioritaires identifiées au niveau national. Le cadre actuel offre la flexibilité nécessaire aux différents pays et acteurs pour mettre en œuvre et adapter diverses priorités au niveau de l'UE de manière pragmatique, en répondant aux besoins spécifiques du contexte national, sectoriel et temporel.

- Certaines parties prenantes ont estimé qu'une **stratégie ou une politique plus solide** (comme la précédente stratégie communautaire 2007-2012 sur la santé et la sécurité au travail) aurait été souhaitable. Ils ont préconisé un nombre réduit de priorités clés et/ou des objectifs et des cibles plus spécifiques. Ceux qui ont soutenu cette option ont estimé qu'elle donnerait plus d'impulsion et encouragerait les acteurs à se sentir plus responsables vis-à-vis des progrès réalisés sur les questions liées à la SST.

- De plus, certaines parties prenantes ont identifié une **légère déconnexion entre les défis identifiés et certains des objectifs et actions concrets** inclus dans le cadre stratégique de l'UE. Spécifiquement, elles n'ont pas trouvé de lien clair entre les défis identifiés et les actions décrites dans les objectifs quatre et sept.

Bien qu'il soit difficile de mesurer les impacts concrets qui peuvent être directement attribués à la mise en œuvre du cadre stratégique de l'UE, un certain nombre de conclusions peuvent être tirées quant à son influence :

- Le cadre stratégique de l'UE constitue **une référence commune pour les États membres** lorsqu'ils élaborent leurs propres stratégies et politiques en matière de SST. En outre, il **donne du poids aux considérations de santé et de sécurité** dans les discussions politiques et stratégiques plus larges (tant au sein des États membres que sur la scène internationale).

- Dans certains domaines, il existe des preuves solides permettant de souligner la contribution du cadre stratégique, et d'établir **un lien entre les actions menées au sein du cadre et des effets plus larges**. Certains de ces effets se sont déjà concrétisés, tandis que d'autres semblent devoir suivre dans un avenir proche.

- Il est également évident que le cadre stratégique de l'UE a contribué à des progrès significatifs dans **l'amélioration de la culture de la SST au sein de l'UE**, malgré un certain degré de variation en fonction des objectifs et actions en question. Presque tous les résultats prévus dans la logique d'intervention ont été réalisés. Des progrès ont également été réalisés par rapport à la plupart des résultats prévus pour chaque objectif spécifique.

- Le cadre stratégique de l'UE a été identifié comme une référence importante pour de nombreuses parties prenantes. Les autorités nationales compétentes (ANC), en particulier, l'ont utilisé pour donner la **priorité aux actions en matière de SST au niveau national**. En outre, les partenaires sociaux ont trouvé qu'il s'agissait d'un outil utile pour faire pression en faveur d'une attention accrue sur la SST en général et sur des questions spécifiques telles que les troubles musculosquelettiques (TMS) et les risques psychosociaux (RPS).

- L'inclusion de la sécurité et de la santé au travail dans les accords de libre-échange et les discussions bilatérales stratégiques tenues sur les questions de sécurité et de santé au travail avec les principales économies mondiales (Chien et Etats Unis en tête) ont **renforcé l'importance de la sécurité et de la santé au travail sur la scène mondiale** et ont fait de l'UE un acteur de premier plan dans ce domaine.

- Le cadre stratégique de l'UE (et la communication de 2017) a soutenu la **révision de l'acquis communautaire en matière de SST**. Cela a conduit à la mise à jour de six directives clés dans ce domaine.

Recommandations pour un futur cadre stratégique

En ce qui concerne l'élaboration d'un futur cadre stratégique, cette étude recommande de trouver un équilibre entre, d'une part, un **champ d'application large et une souplesse de conception** et, d'autre part, la **concentration sur un nombre limité de priorités essentielles et une responsabilité claire en termes de suivi des progrès**. Trouver le bon équilibre entre ces deux éléments - en tenant compte du contexte politique et socio-économique du moment - est essentiel pour maximiser les chances de succès du futur cadre.

Une approche qui pourrait aider le futur cadre à trouver cet équilibre serait de combiner une stratégie à plus long terme avec des plans d'action à plus court terme. S'appuyant sur le succès de la communication de 2017, qui a permis de réexaminer les priorités et les actions du cadre stratégique de l'UE à mi-parcours (en 2017), un futur cadre stratégique pourrait être accompagné de **priorités et de plans de mise en œuvre à plus court terme**, d'une durée de deux ou trois ans environ. Ceux-ci se concentreraient sur l'opérationnalisation des objectifs contenus dans le cadre stratégique. En plus de désigner les acteurs et les délais de mise en œuvre, les plans de mise en œuvre à plus court terme pourraient inclure, par exemple, des **indicateurs concrets**. Ceux-ci permettraient de suivre les progrès en cours et d'accroître la transparence entre les différentes parties prenantes.

Dans leur retour d'expérience, les parties prenantes ont également mentionné le manque de ressources comme un obstacle important à la mise en œuvre de la SST au sein des EM. Il pourrait donc être opportun d'étudier la possibilité de créer des passerelles avec les fonds de financement existants (tel que le Fonds social européen) afin d'aider les parties prenantes à accéder à un soutien financier pour la mise en œuvre des actions identifiées dans un futur cadre stratégique.

Priorités émergentes

Les principales priorités qui sont ressorties des activités de recherche et de consultation pour un éventuel futur cadre stratégique peuvent être résumées comme suit :

- Tout d'abord, il est nécessaire de **rester concentré sur les défis et les questions identifiés dans le cadre stratégique de l'UE 2014-2020**. Les maladies professionnelles, l'évolution démographique, les risques psychosociaux et les TMS n'ont fait que gagner en importance au cours des dernières années. En outre, il est toujours nécessaire de soutenir à la fois les inspections du travail et les entreprises pour améliorer l'application des normes de SST.

- Les parties prenantes ont également souligné la **nécessité de continuer à prendre en compte les défis traditionnels en matière de SST** (notamment les accidents du travail et les risques tels

que les chutes de hauteur, ou dans les secteurs de l'agriculture et de la construction). Ces risques pourraient être négligés si un futur cadre stratégique accordait trop de priorité aux risques nouveaux et émergents.

- Il convient également de tenir compte de **l'impact d'un certain nombre de tendances à plus long terme dans le monde du travail**. Des questions telles que la mondialisation croissante des chaînes d'approvisionnement, l'écologisation de l'économie, l'évolution vers une main-d'œuvre plus flexible et atypique, la transition vers le télétravail et la numérisation accrue ont toutes des implications pour la mise en œuvre future de la SST. Il convient d'examiner plus en profondeur les opportunités et les risques associés à ces tendances émergentes.

- S'assurer que la protection liée à la SST est **adaptée aux différents types de travailleurs** et que les impacts différenciés sur les différents groupes ont été minutieusement pris en compte. Cela s'applique en particulier aux travailleurs migrants, aux travailleurs précaires (comme ceux de la "gig economy"), aux travailleurs des plateformes numériques (de type Uber) et à ceux qui travaillent dans la sphère domestique (y compris les aides privées à domicile, les agents d'entretien et les télétravailleurs). Les impacts sexués de la SST ainsi que les considérations spécifiques requises pour les personnes handicapées doivent également être pris en compte.

- Au vu des impacts de l'épidémie de COVID-19 sur la santé et la sécurité sur le lieu de travail, il convient également de prendre en compte les **tendances mondiales plus larges telles que le changement climatique et la possibilité de futures pandémies**, ainsi que leur impact sur le lieu de travail de demain. Par exemple, cela peut inclure les impacts des programmes de modernisation sur l'exposition potentielle à l'amiante et les implications de la transition vers une économie à faible émission de carbone. Une approche holistique de la SST, **intégrant les considérations de la SST** dans des domaines tels que la politique environnementale et la santé publique, pourrait contribuer à accroître la résilience de l'UE face aux défis futurs.

1 Introduction

The European Commission (specifically the Directorate-General for Employment, Social Affairs and Inclusion – DG EMPL) has commissioned a Consortium made up of Ipsos and Milieu (collectively referred to as 'the contractor') to carry out a study to support the evaluation of the EU Strategic Framework on Health and Safety at Work 2014-2020 (EU Strategic Framework). The study serves two primary purposes. These are: to assess the overall quality and design of the Framework, and to assess its implementation at EU and national level. Additionally, the outputs of the study will serve as a source of information for the future Strategic Framework, which is foreseen for 2021-2027.

The study was tasked to:

- Analyse the **impact** of the EU Strategic Framework 2014-2020.

- Assess to what extent the general and specific **objectives** have been achieved.

- Identify the **strengths and weaknesses** in its implementation.

- Provide a list of **recommendations** in relation to the future strategy after 2020, both in terms of priorities to be addressed and of measures to be adopted for better implementation.

The scope of the evaluation support study is very broad. It covers both the quality / design of the EU Strategic Framework itself and its implementation at national and EU level. To address these elements, the study entails a thorough assessment of the actions carried out by different actors as well as their effects and impacts. It includes a review of implementation in all EU Member States (MS).[13]

1.1 Background and Context

The EU Strategic Framework on Health and Safety at Work 2014-2020[14] was adopted on 6 June 2014. It was intended to ensure that the EU continues to play a leading role in the promotion of high standards for working conditions both within Europe and internationally.

The EU Strategic Framework identified the following three major challenges[15] facing the EU with regard to improving health and safety in the workplace:

- The need to improve implementation of existing health and safety rules, in particular by enhancing the capacity of micro and small enterprises (MSEs) to put in place effective and efficient risk prevention strategies.

- The need to improve the prevention of work-related diseases by tackling new and emerging risks without neglecting existing risks.

- The need to consider and take into account the ageing of the EU workforce.

Seven strategic objectives were identified to help address these challenges. Each objective was to be pursued through key actions implemented by different actors in the field of EU workplace health and safety. These are, inter alia, the European Commission (EC), the Member States (MS), social partners, the Senior Labour Inspectors Committee (SLIC) and EU-OSHA. Table 1 provides an overview of the different strategic

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[13] This means the 27 current Member States of the EU, as well as, where relevant, the UK, which was a Member State until 31 January 2020, i.e. for most of the period covered by the Framework.

[14] European Commission, 2014, *Commission Communication COM(2014) 332 of 6th June 2014 'on an EU Strategic Framework on Health and Safety at Work 2014-2020'*, available at: https://ec.europa.eu/social/main.jsp?catId=151.

[15] European Commission, 2014, *Commission Communication COM(2014) 332 of 6th June 2014 'on an EU Strategic Framework on Health and Safety at Work 2014-2020'*, available at: https://ec.europa.eu/social/main.jsp?catId=151.

objectives, the actions to be implemented in order to achieve each objective, and the actors identified as responsible for each action.

Table 1: Summary of actions and actors in the EU Occupational Safety and Health (OSH) Strategic Framework 2014-2020[16]

Strategic objective	Action	Responsible actor(s)*					
		EC	Member States	ACSH (Tripartite Structure)	SLIC	EU-OSHA	Others
1. Further consolidate national strategies	Review national OSH strategies		X	(X)			
	Establish a database of national strategies	X				(X)	
	Nominate contact points for national strategies	X		X	X	X	
2. Facilitate compliance with OSH legislation	Provide financial and technical support on implementing OIRA and other IT-based tools		X			(X)	(x)
	Develop guidance and identify examples of good practice	X				X	
	Promote the exchange of good practice	X	(X)	(X)			
	Continue with awareness raising campaigns	X	(X)			(X)	
3. Better enforcement of OSH legislation by Member States	Map resources of labour inspectorates and evaluate their capacity				X		
	Evaluate exchange/training programme of labour inspectors, enhance tools for cooperation	X			(X)		
	Assess effectiveness of sanctions and fines imposed by MS	X	(X)	(X)	(X)		
4. Simplify existing legislation	Identify simplifications / reductions of burden, promote debate with stakeholders	X		X			
	Encourage MS to identify sources of specific regulatory burden, promote exchange of good practice and information	(X)	X				
	Assess the situation of micro-enterprises in low-risk sectors	X					
5. Address ageing workforce, emerging new risks, work-related and occupational diseases	Establish a network of OSH professionals and scientists	X					
	Support the dissemination of the findings of the European Risk Observatory	X				(X)	
	Identify and exchange good practice on ways to improve OSH conditions for specific categories of workers					X	
	Promote rehabilitation and reintegration measures	X				(X)	
	Identify and disseminate good practice on mental health problems at work					X	

[16] The actors marked as responsible in this table reflect those referenced explicitly within the EU Strategic Framework, and do not consider other actors who may have been implicated in the actual implementation of specific actions (covered in the implementation review in Section 2).

Strategic objective	Action	Responsible actor(s)*					
		EC	Member States	ACSH (Tripartite Structure)	SLIC	EU-OSHA	Others
6. Improve statistical data collection and develop the information base	Assess and improve the quality of data on accidents at work (ESAW)	X	X				
	Examine options to improve data on occupational diseases at EU level	X	X				
	Launch discussions within ACSH on a common database on occupational exposures	X		X			X
	Examine options to improve information on costs and benefits in the area of OSH[17]	X					
	Develop a tool to monitor the implementation of the EU Strategic Framework 2014-2020	X		X			
7. Better coordinate EU and international efforts to address OSH and engage with international organisations	Continue to support candidate countries during accession negotiations	X					
	Strengthen OSH cooperation with the ILO, WHO and OECD	X					
	Review the Memorandum of Understanding (MoU) with the ILO to better reflect OSH policy	X					
	Contribute to implementing OSH commitments in EU free-trade and investment agreements	X					
	Address OSH deficits in the global supply chain and contribute to G20 initiatives	X					
	Strengthen ongoing cooperation and dialogue on OSH with strategic partners	X					

* X = leading role; (X) = supporting role

Source: Commission Communication COM (2014) 332

In 2017, the European Commission published a Communication on the modernisation of the EU Occupational Safety and Health Legislation and Policy[18] (the 2017 Communication). This was informed by the results of the ex-post evaluation of the European Union occupational safety and health Directives (REFIT evaluation)[19]. The 2017 Communication identified the need for measures to be 'results-oriented instead of paper-driven'. It set out several key actions to help provide a new impetus to and further operationalise the EU Strategic Framework on Health and Safety at Work in the latter half of its implementation. The 2017 Communication identified three key occupational safety and health actions to achieve this, namely:

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[17] No actor was explicitly identified as responsible for implementation of this action within the EU Strategic Framework

[18] European Commission, 2017, *Commission Communication COM(2017) 12 to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions of 10 January 2017 on 'Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy'.*

[19] European Commission, 2017, *Commission Staff Working Document (2017), 'Ex-post evaluation of the European Union occupational safety and health Directives (REFIT evaluation)', accompanying the Commission Communication COM(2017) 12 to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions of 10 January 2017 on 'Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy'*, available at: eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52017SC0010&from=en.

- Stepping up the fight against occupational cancer through legislative proposals accompanied by increased guidance and awareness-raising;

- Helping businesses, in particular micro-enterprises and SMEs, comply with occupational safety and health (OSH) rules; and

- Cooperating with MS and social partners to remove or update outdated rules and to refocus efforts on ensuring better and broader protection, compliance and enforcement on the ground.

These three actions were further refined into 29 concrete steps to be implemented from 2017 to 2019. As in the EU Strategic Framework, the 2017 Communication assigned specific actors responsible for the delivery of each action. Additionally, the 2017 Communication provided a deadline for completion of each of the steps. This created a concrete timetable for the delivery of actions foreseen in the document.

In 2019, the European Commission published the results of a Fitness Check on chemicals legislation other than REACH[20]. The Fitness Check was initiated in 2015 to assess whether EU chemicals legislation was fit for purpose and was being implemented as intended. It recognised the cross-cutting nature of chemicals legislation, which affects environmental legislation and other areas of regulation. The REFIT evaluation provides a further stepping-stone towards improving the efficiency of the EU's approach to reducing workers' exposure to dangerous substances and shaping future OSH policy.

1.2   Methodology

This study uses a **theory-based approach.** This means first eliciting the "theory" of how the intervention is intended to work, and then gathering evidence in a targeted way to test how far this was confirmed in practice. The study aims to consider the EU Strategic Framework's design, its implementation at both EU and MS level, and its contribution to generating impacts in line with its objectives.

The study is grounded in an intervention logic (see Figure 1), which provides a visual summary of the study team's understanding of the EU Strategic Framework and its main desired effects (outputs, outcomes and impacts). This shows how the actions described in the EU Strategic Framework form the building blocks for achieving each of the seven objectives, with each action leading to longer-term outcomes and impacts at both EU and MS level.

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[20] European Commission, 2019, *Findings of the Fitness Check of the most relevant chemicals legislation (excluding REACH) and identified challenges, gaps and weaknesses*, available at: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:52020DC0102.

Figure 1: Intervention logic

Key contextual and external factors

- Technological development and breakthroughs
- Changes within the labour market
- Macro-economic changes
- Demographic changes
- New / emerging work-related challenges and risks

Impacts

- Increased productivity, competitiveness, sustainability of social security systems
- Healthier workers able to work productively for longer
- Fewer accidents, occupational diseases prevented, new / emerging risks addressed
- Effective OSH culture and measures in all EU workplaces

Outcomes

- OSH high on political agenda in MS
- MS strategies reflect EU priorities in national context
- MS supported in implementation

- EU OSH legislation fit for purpose, admin burden minimised
- MS transposing and national legislation fit for purpose, admin burden minimised
- Compliance challenges of enterprises (in particular SMEs) effectively addressed
- Labour inspectorates able to effectively enforce legislation and facilitate compliance

- Scientific evidence generated and disseminated to address challenges / risks
- EU actions in place to address identified challenges / risks

- Reliable, timely and comparable statistical data on OSH is available
- More evidence-based policy making facilitated at national and EU level

- Better coordination of EU and international efforts around OSH
- Labour standards raised and applied effectively worldwide
- Candidate countries aligned with EU OSH acquis

Outputs

- National OSH strategies reviewed
- Database covering national strategies
- Contact points established

- Risk assessments carried out
- Good practices identified, shared and taken up
- Awareness of target audiences raised

- Better use of resources & capacity in labour inspectorates
- Practice exchanges and trainings
- National sanctions & fines assessed

- Simplified OSH legislation
- MS transposed OSH legislation & drafted national reports
- More micro enterprises carried out risk assessments

- OSH professionals network established
- ERO findings disseminated
- Results of the EP project implemented
- Good practices on mental health disseminated

- Data on accidents, occupational diseases assessed / improved
- Database on occupational exposures created
- Monitoring tool developed

- Multilateral and bilateral cooperation strengthened
- Capacity of candidate countries enhanced
- Synergies at EU and international level exploited

Actions

- Review national OSH strategies
- Collect information
- Map and exchange good practices

- Support for OiRA & other IT tools
- Develop guidance, identify & exchange good practice
- Awareness-raising campaigns

- Map & evaluate labour inspectorates' resources & capacity
- Examine & evaluate labour inspectorates' trainings & exchange programmes
- Assess sanctions & fines imposed by MS

- Identify regulatory burdens & promote debate
- Identify sources of regulatory burden, analyse & share good practices
- Assess the situation of micro-enterprises

- Establish network of OSH professionals
- Disseminate findings of ERO
- Promote & exchange OSH good practices
- Implement EP pilot
- Disseminate good practices on mental health

- Assess quality of data on accidents
- Examine options to improve occupational diseases data
- Create database on occupational exposures
- Develop monitoring tool

- Support candidate countries
- Strengthen cooperation with ILO, WHO, OECD
- MoU with ILO
- Support OSH implementation in FTAs
- Address deficits in global supply chain

| Objective 1: Consolidate national strategies | Objective 2: Facilitate compliance with OSH legislation | Objective 3: Better enforcement of OSH legislation | Objective 4: Simplify existing OSH legislation | Objective 5: Address key challenges and risks | Objective 6: Improve data and information base | Objective 7: Coordinate EU & international efforts |

The study aims to answer a series of research questions defined in the original Tender Specifications. These were operationalised into a research framework consisting of key questions, judgement criteria / indicators, and information sources for each of the research questions. Section 3 includes answers to each of the research questions, based on triangulating the evidence from EU-level and country-level data collection. The different data collection tasks which formed the evidence base for this study are described in Section 1.3 (below).

1.3   Evidence base

The evidence gathered for this study includes more than 100 interviews with relevant actors and stakeholders, an open public consultation, and the review of a wide range of secondary sources including policy documents and legislation, official statistics, monitoring data, and relevant literature.

Figure 2 below provides a visual overview of the different tasks included in the study and how each of these contributes to the study findings.

Figure 2: Schematic overview of the six main tasks
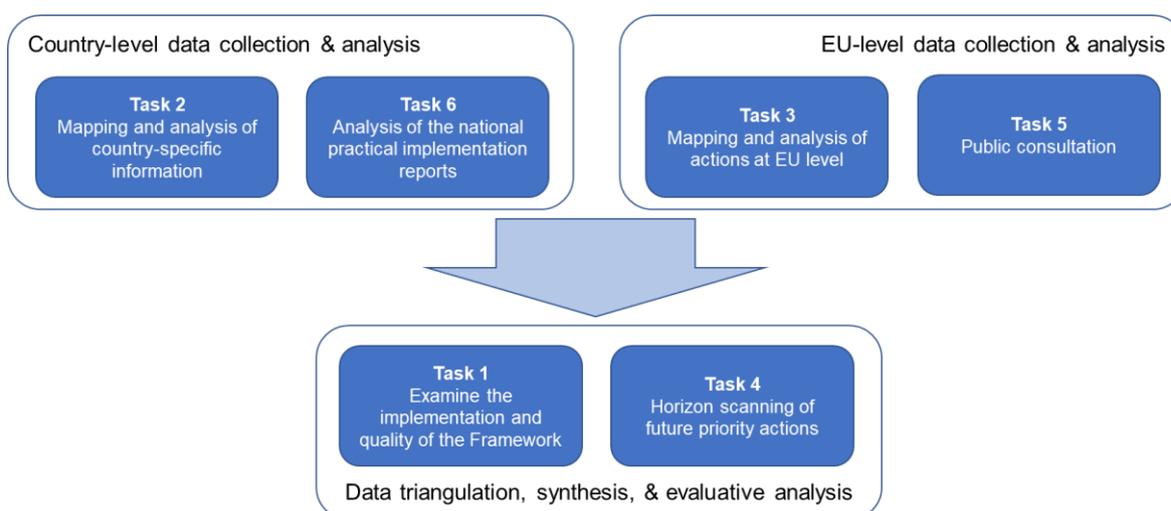
Data collection at EU and national level was organised according to four key tasks, which form the evidence base for the findings included in this report.

Task six: Review of national implementation reports

The study team carried out a full review of national implementation reports submitted by EU MS for the years 2013-2017, as well as any additional datasets or monitoring information provided by the MS alongside the reports.

Based on this information, the study team developed summary tables to review the measures and initiatives adopted during the reference period in each MS in line with the EU Strategic Framework. These also provided relevant information on how MS have transposed and implemented the OSH directives, their views on the difficulties encountered and suggestions to improve the EU OSH acquis. The results of Task six were fed into task two and are also contained in a self-standing report, which is presented alongside this study.

Task two: Mapping and analysis of country-specific information

Task two involved a country-by-country analysis of the current state of play in the EU-27 regarding the implementation of national OSH policy and the extent to which this contributed to the objectives described in the EU Strategic Framework.

The research team distributed to members of the Advisory Committee on Safety and Health at Work (ACSH) a questionnaire targeting national authorities. Twenty national authorities had provided written responses[21] (May 2021).

In addition to this, national correspondents gathered additional information on implementation of the EU Strategic Framework in their respective countries. They also conducted a comprehensive review of national strategy or action plan documents and legislation. This built on the review of the national implementation reports provided by the EC, the survey targeting national authorities, and the EU-OSHA report on National Strategies in the field of OSH. Where relevant, the team supplemented the desk research with academic and grey literature (academic articles, reports, documents linked to initiatives and campaigns, etc.).

National correspondents carried out interviews with stakeholders at the national level (national competent authorities (NCAs), employers' associations, and trade unions). This helped to obtain feedback, corroborate the desk research findings, update information, provide informed opinion on actions carried out at national level, and fill in the gaps highlighted by the desk research.

Information on national actions included in this study dates to the completion of data collection under task two (February 2021).

Task three: Mapping and analysis of actions at EU level

A mapping tool of EU-level actions covering the initiatives carried out between 2014 and 2020 was developed based on desk research during the inception phase. This was further expanded in the data collection phase using documentation and feedback provided by EU-level interviewees. In particular, the study team ensured that the mapping clearly indicates the outputs related to each action and which actors and stakeholders were involved in each output.

Additionally, interviews were carried out with actor/stakeholder groups responsible for the implementation of different EU-level actions. The interviews were used to gain an overview of progress against the seven strategic objectives and to identify emerging trends and strategic priorities for the future in the field of OSH. Twenty-five interviews were carried out with selected stakeholders at EU level. An overview of the interviews is provided in Table 2.

Table 2: Overview EU-level interviews

Actor/stakeholder type	Target	Contacted	Completed
EU institutions, agencies and bodies	13	13	10
European social partners	8	6	6
ACSH	N/A	6	5
SLIC	N/A	2	2

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[21] Austria, Belgium, Croatia, Cyprus, Czechia, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Latvia, Malta, Poland, Slovenia, Spain, Sweden and the Netherlands.

Actor/stakeholder type	Target	Contacted	Completed
International organisations and others	4	2	2
Total	**25**	**29**	**25**

Task five: Open Public Consultation

The Open Public Consultation (OPC) on the EU Strategic Framework was launched on 7 December 2020 and remained open until 1 March 2021. The OPC received a total of 355 responses from 26 EU MS and seven non-EU countries (Bosnia and Herzegovina, Switzerland, the United States, the United Kingdom, North Macedonia, Norway and Turkey). The largest groups of respondents were EU citizens (83) and companies/business organisations (81). Other groups represented included business associations (45), trade unions (42) and public authorities (40). An overview of the OPC respondents is provided in Table 3.

Table 3: Open Public Consultation responses

Respondent Type	Responses Received
Academic/research institution	11
Business association	45
Company/business organisation	81
Consumer organisation	0
Environmental organisation	0
EU citizen	83
Non-EU citizen	2
Non-governmental organisation (NGO)	20
Public authority	40
Trade union	42
Other	31

Source: Public consultation

The vast majority (86%) of respondents claimed to be involved in or have contributed to the design and/or implementation of OSH policy, legislation and/or other measures at some level (EU, national/sub-national, in the workplace or in another capacity). Fourteen percent were not involved at any level. A little over one third of respondents (34%) described themselves as being involved in OSH policy and/or legislation implementation in the workplace. Over one quarter (28%) of respondents were involved at the national or sub-national (regional or municipal) level, while 14% of respondents were involved at EU-level. The remainder (9%) were involved in another capacity.

Tasks one and four: Data triangulation, synthesis and analysis

The remaining two tasks were related not to the collection of data, but to its analysis, synthesis, triangulation and interpretation. This involved a retrospective analysis of data on the quality, implementation and effects of the EU Strategic Framework (task one) and a prospective analysis of key issues to be prioritised in the successor framework (task four). A 'virtual' (i.e. online) workshop was held with around 20 selected participants, representing all the main stakeholder groups. During the workshop, the study team presented and gathered feedback on key emerging results of the study. The workshop was also used to

collect inputs on participants' views on the main OSH issues to be addressed during the next decade.

1.4   Limitations and Challenges

Although the study team employed the best possible mix of methods and data (within the time and resources available) to meet the objectives of the study, it is nonetheless subject to certain limitations and caveats. These are mainly due to the 'soft' nature of the study subject (the EU Strategic Framework is in essence a policy document without any binding effects) and to the very broad scope (as outlined above, the EU Strategic Framework lists 29 actions to be implemented by a wide range of different actors). When considering the results presented in the remainder of this report, it is therefore important to keep in mind the following:

- In view of the nature and scope of the EU Strategic Framework, as well as the timing of the study (right at the end of the implementation period of the EU Strategic Framework), it was not possible to measure its impacts. This is for the following main reasons:

  - It is inherently difficult to robustly assess the effects of a 'soft' intervention, as it is not possible to provide a definitive answer to the question of attribution. While the EU Strategic Framework has contributed to progress with many initiatives and actions, this does not necessarily mean that none of these would have been implemented had the EU Strategic Framework not existed. Hence, their effects cannot be attributed entirely to the EU Strategic Framework.

  - The fact that the EU Strategic Framework called on so many actors at EU level as well as in all MS to take such a wide range of different actions means it would be impossible to provide a fully comprehensive, robust account of the effects of every single action (for more on this also see the point on the research at national level below).

  - Finally, the ultimate desired impacts of the EU Strategic Framework (the top level in the intervention logic depicted above) take time to materialise. One would expect the various outcomes to eventually contribute to improvements in the key impact indicators (such as the prevention of work-related accidents and diseases), but this will only become observable in the longer term.

- The study undertook research into the implementation of the Framework in all EU MS. This involved a mix of secondary and primary data collection (as described under tasks two and six above), which provided a detailed overview of the main strategies and priorities in the area of OSH, the overall level of activity and the most significant actions in each country. At the same time, it is important to note that the national research does not and cannot claim to be comprehensive, i.e. identify each relevant action that might have been undertaken. Doing so would have required more time and resources, and a broader consultation of relevant stakeholders at the national level than was possible within the scope of this study.

2 Implementation of the EU Strategic Framework

This section reviews the implementation of the actions foreseen in the EU Strategic Framework and their effects. These are presented in line with the structure of the Framework: strategic objective by strategic objective, and action by action.

2.1 Objective one: Further consolidate national strategies

The first objective focuses on the coordinating role of the EU in ensuring national OSH strategies are aligned and regularly updated. Building on the success of the 2007-2012 EU OSH Strategy, the 2014-2020 EU Strategic Framework aims to provide a "stronger and more systematic EU role in supporting the implementation of national strategies, through policy coordination, mutual learning and the use of EU funding."[22]

The EU Strategic Framework lists three main actions under objective one, as described in Table 4. The EC was responsible for two of the concrete actions described under objective one, and MS were expected to lead on the third action. The European Agency for Safety and Health at Work (EU-OSHA), the Advisory Committee on Safety and Health at Work (ACSH), the Senior Labour Inspectors Committee (SLIC) and social partners (representing workers and employers at EU and national level) were expected to play a supporting role in implementing the different actions foreseen under this objective.

Table 4: Summary of actions under objective one

| Action identified in the Strategic Framework	Lead actor(s)	Supporting actor(s)
Review national OSH strategies in light of the new EU strategic framework	Member States	Relevant stakeholders, including social partners
Establish a database covering all national OSH strategy frameworks	European Commission	EU-OSHA
Nominate contact points for national strategies which will meet regularly to map and exchange good practice	European Commission	EU-OSHA, ACSH and SLIC

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[22] European Commission, 2014, *EU Strategic Framework on Health and Safety at Work 2014-2020*

Figure 3 shows the views of OPC respondents with regard to objective one. Over half of respondents agreed or strongly agreed that good progress had been made against the specific actions (53%) defined under objective one and that these actions were relevant to the actual priorities in the area of OSH (53%). Forty one percent agreed or strongly agreed that the actions under the first strategic objective led to tangible results and 39% agreed or strongly agreed that the appropriate stakeholders had been involved.

Figure 3: Opinions on progress under the first strategic objective – Further consolidate national strategies

Q7a. Under its first strategic objective the EU Strategic Framework on Health and Safety at Work 2014-2020 called on Member States to review their national occupational safety and health (OSH) strategies in light of the new EU Strategic Framework. The Commission and EU-OSHA were tasked with establishing a database of covering all national OSH strategies, and facilitating the exchange of good practices. (**Link to EU Strategic Framework**).

In your opinion and based on your experience, do you agree or disagree that actions taken by Member States:
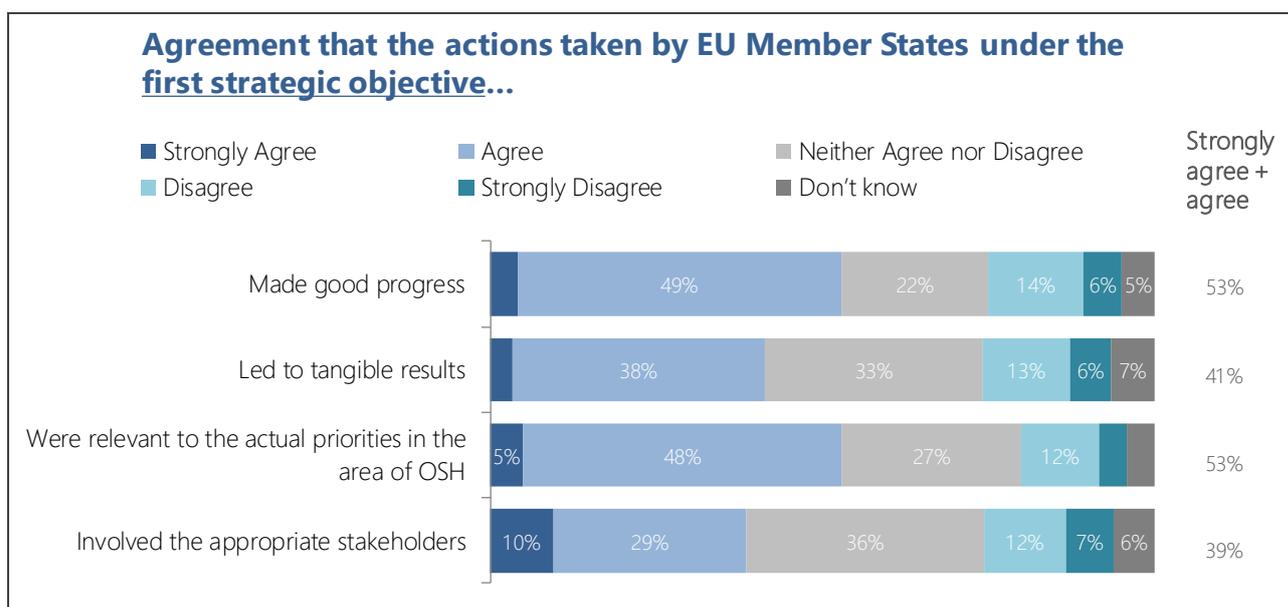
Figures below 5% not displayed.
Those somewhat or very familiar with the Framework (n=240-244)
Source: Public Consultation

Action one: Review national OSH strategies

The consolidation of national strategies envisaged under objective one of the EU Strategic Framework was expected to build upon the objectives defined in the previous 2007-2012 Community Strategy on Health and Safety at Work entitled "Improving quality and productivity at work"[23]. The 2007-2012 Strategy successfully encouraged MS to develop and implement national OSH strategies. During the 2007-2012 period, all 27 MS[24] had adopted a national strategy to help achieve the objectives of the four areas identified in the Community Strategy (improvement of the preventive effectiveness of health surveillance,

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[23]European Commission, 21 February 2007, *Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions - Improving quality and productivity at work: Community strategy 2007-2012 on health and safety at work*, available at: https://eur-lex.europa.eu/legal-content/EN/ALL/?uri=celex%3A52007DC0062.

[24] Croatia became an EU member on 1 July 2013.

action to promote the rehabilitation and reintegration of workers, social and demographic change, strengthening policy coherence).[25]

In the EU Strategic Framework, the EC invited MS "to consider reviewing their national strategies in light of the new EU Strategic Framework, in close consultation with relevant stakeholders, including social partners". Research at national level has identified an up-to-date national OSH strategy in almost all MS, except for Luxembourg and Croatia (where the 2009-2013 strategy was prolonged).

Table 5 provides an overview of the current state of play regarding the adoption of national strategies in each MS. It also considers the extent to which an explicit reference has been made to the EU Strategic Framework. Finally, the table describes whether national strategies define concrete actions or groups of actions to achieve the strategies' objectives.

Table 5: Overview of national OSH strategies in EU MS 2014-2020

	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU
Adoption / review since 2014	N 2013-2020	Y 2016-2020	Y 2018-2020	N 2013-2020	Y 15-16; 17-18; 19-20	Y 13-18; 19-24	N 2010-2020	Y 2016-2023	Y 2014-2020	Y 2015-2020	Y 2020-2030	Y 2016-2020	N 2009-2013	Y 2016-2022
Reference to 2014 EU SF	N/A	Y	Y	N/A	Y	N	N/A	N	Y	Y	Y	Y	N/A	Y
Action lists or tasks / action plans	Y	Y	Y	Y	Y	N	Y	N	Y	Y	N	Y	Y	N

	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	UK
Adoption / review from 2014	Y 16-18; 19-21	Y 2014-2018	Y 2017-2021	N	Y 2016-2020	Y 2014-2020	N 2012-2020	Y 14-16; 17-19; 20-22	Y 2015-2020	Y 2018-2020	Y 2016-2020	Y 2018-2027	Y 2016-2020	Y 2015-2020
Reference to 2014 EU SF	Y	N	Y	N/A	Y	Y	N/A	Y	Y	Y	Y	Y	N	N
Action lists or tasks / action plans	Y	N	Y	N/A	Y	Y	N	Y	Y	Y	N	Y	N	Y

Source: Information from national reports co under Task 2.

As the table demonstrates, a large majority of MS have operationalised the objectives in their national strategies through action lists or further action plans. However, the different action plans within each national strategy show significant variance between MS, in terms of the level of detail included on the actions to be undertaken.

Objective one encourages MS not only to "further consolidate national strategies", but also to align them with the objectives of the EU Strategic Framework. A majority of the national strategies adopted after 2014 refer to the EU Strategic Framework. Several interviewees described it as the impetus for the national strategy or as an important starting point for the identification of challenges and the definition of objectives in the field of OSH at national level. As can be seen in Figure 4, responses to the OPC corroborate the national research findings regarding alignment of EU and national strategies. Six in ten OPC respondents

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[25]European Commission, 2013, *Evaluation of the European Strategy on Safety and Health at Work 2007-2012*, available at: https://ec.europa.eu/social/BlobServlet?docId=10965&langId=en.

(60%) familiar with the Framework agreed that their national OSH strategy is aligned with the priorities/key objectives of the EU Strategic Framework 2014-2020. Only approximately one in ten (11%) disagreed with this statement.

Figure 4: Views on alignment of their country's OSH strategy with EU Strategic Framework
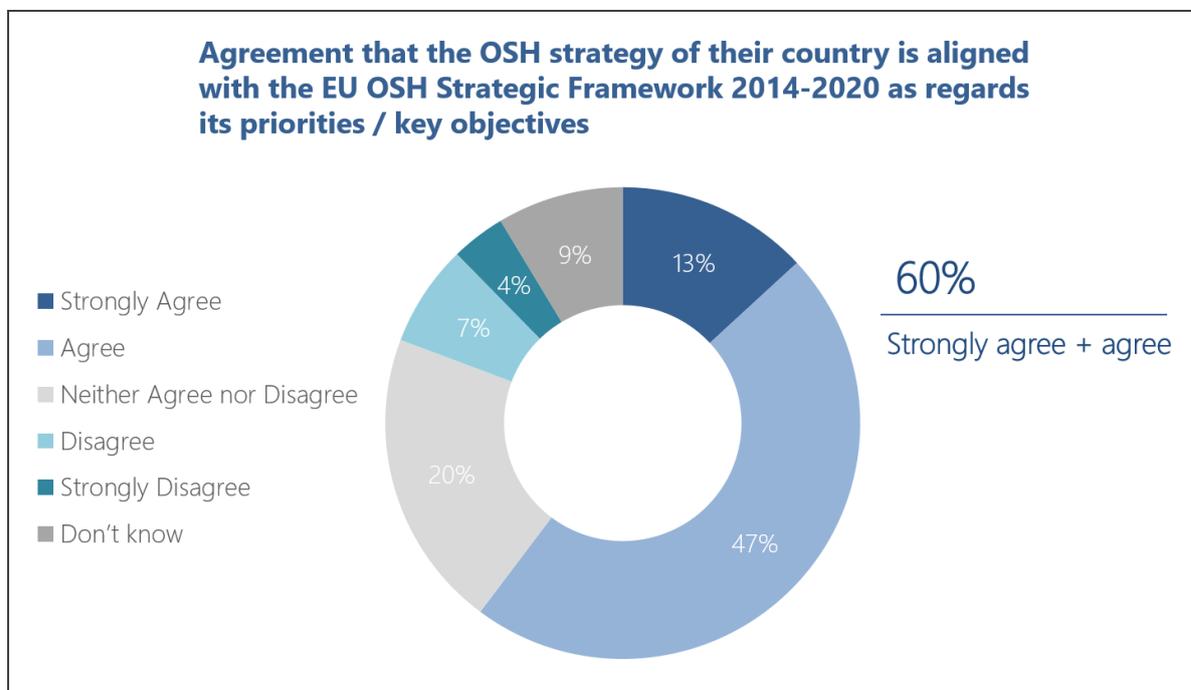
Those somewhat or very familiar with the Framework (n=244)

Source: Public Consultation

The national research carried out under task 2 identified in seven MS (Belgium, Bulgaria, Czechia, Estonia, Romania, Sweden and Slovenia) examples of strong alignment with the challenges identified in the EU Strategic Framework. The national research also identified direct links to the objectives in Czechia, Spain, Ireland and Malta. National research in the other MS did not provide indications of such strong ties with the EU Strategic Framework. In the UK and the Netherlands, researchers identified impactful mutual influences. A full overview of the connections has been developed by EU-OSHA. It shows that although all MS follow the EU Strategic Framework at least partially, no Member State follows it completely[26]. The level of alignment between national strategies and each specific objective of the EU Strategic Framework is explored in the objective-by-objective review in the remainder of this section.

In some cases, where national strategies do not refer to the EU Strategic Framework, this appears to be a matter of timing. For example, although Austria, Denmark and the Netherlands have an up-to-date national strategy, these were adopted prior to the publication of the EU Strategic Framework and lasted until 2020. This effectively prevented them from adopting new strategies in the years directly following the publication of the EU Strategic Framework.

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[26] EU OSHA, 2019, *National Strategies in the field of Occupational Safety and Health in the EU*.

Timeframe of national OSH strategies

The duration of national strategies is defined in accordance with the national context and varies significantly across MS, from cycles of two to three years (Bulgaria, Czechia, Ireland, Poland, Romania) to longer-term strategies stretching for eight to ten years (Estonia, Finland, Denmark, Slovenia). Other MS fell in between these extremes (e.g. France, Spain). In Germany and Poland, the phases of the national strategies are part of multi-annual programmes that are not time limited.

Another option implemented by some MS is the adoption of longer-term strategies, broken down into shorter implementation plans to allow for revisions and adaptations in response to emerging developments and circumstances that could not have been foreseen at the time of drafting. Slovenia and Spain exemplify this combined approach. Spain has divided its six-year strategy into three two-year implementation phases. Slovenia, meanwhile, has broken down its strategy into three-year implementation phases.

Finally, some MS chose to extend existing strategies rather than developing a new strategy. This was the case in Croatia (which extended its 2009-2013 strategy to cover 2014 to 2016) and Italy (which extended its strategy for one year in 2019). Spain has also extended its current strategy to run until the end of 2021, in view of the disturbances caused by the COVID-19 pandemic.

Noticeable changes in the national strategies compared to the previous period

A number of changes can be noted in the national strategies published after 2014, when compared to those that preceded them. One important change is the increased involvement of social partners both in the design of strategies and in the implementation of actions in some countries (as observed in Austria, France and Slovenia).

Another notable change is a clear focus on monitoring and evaluation. At least four countries (Austria, Greece, Italy and Slovenia) built in mechanisms to evaluate impact, in order to better understand how best to allocate financial and human resources in the future. One method available to ensure progress has been the adoption of quantified objectives against which success can be measured. This was a key feature of the Community Strategy for 2007-2012 but was not included in the EU Strategic Framework on Health and Safety at Work 2014-2020. The response to this change in MS was mixed. Mirroring the change at EU level, the most recent Belgian national strategy removed any commitment to quantifiable targets. The Danish and Portuguese strategies, however, do include quantifiable targets. Portugal committed to the goal of reducing occupational accidents by 30% between 2015 and 2020. Denmark set three specific quantified objectives: a reduction of serious accidents at work by 25%; a reduction of employees suffering from psychological overload by 20%; and a reduction of employees suffering from MSDs by 20%.

Action two: Establish a database of national strategies

At EU level, EU-OSHA, with support from the ACSH Strategy Working Party, carried out a review of all national strategies (including the United Kingdom). The review was published in a report, *National Strategies in the field of Occupational Safety and Health in the EU*[27], which provides a comprehensive overview of national strategies by objective and examines their links to the EU Strategic Framework. Interviewees at both EU and national level welcomed this overview.

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[27] Accessible via: https://osha.europa.eu/en/safety-and-health-legislation/osh-strategies

Additionally, the EC tasked EU-OSHA to implement a data visualisation tool known as the OSH Barometer[28]. The tool was released in 2020 and provides an accessible, straightforward approach to measuring the activities and performance of different MS against a range of OSH-related metrics. It allows interested parties to have an overview of OSH strategies, statistics, practices and achievements across countries. More detailed information on the development of the tool and the data sources used can be found under Objective six (improve statistical data collection).

Action three: Nominate contact points for national strategies

According to an internal (unpublished) Stocktaking document prepared by DG EMPL for the ACSH[29], a contact point group of national experts was established in 2015 to facilitate the exchange of information and experience in this area. Building on this, in 2016 and 2018 the ACSH organised two workshops on national OSH strategies. These were used to assess progress in terms of updating the national strategies, informally exchange knowledge and learning, and identify areas of good practice.

Stakeholders interviewed for this study expressed limited awareness of the contact point group. Nonetheless, the relative alignment of national strategies with the EU Strategic Framework could be considered an indicator of successful coordination in this field.

Summary of progress

Objective one was commonly regarded by interviewees as the objective under which the most progress has been made. This relates both to the extent to which MS have updated their national strategies after the adoption of the Strategic Framework and to the influence of the EU Strategic Framework on these strategies. Additionally, the creation of the OSH Barometer and the 2019 review of national strategies mark significant progress in terms of making national OSH strategies accessible. A number of interviewees mentioned that the success in this area stems mainly from the inclusive and comparative approach adopted at EU level. The fact that the EU Strategic Framework exists provides a common reference point for national actors and social partners, and the provision of different fora for exchange (ACSH, SLIC, social dialogue and EU-OSHA's networks) between national authorities and social partners from across the EU.

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[28] https://visualisation.osha.europa.eu/osh-barometer#!/.

[29] European Commission, 2020, *Stocktaking – EU OSH policy progress and ongoing work (unpublished).*

2.2 Objective two: Facilitate compliance with OSH legislation

Objective two focuses on providing the support needed to ensure higher levels of compliance with OSH legislation across Europe, particularly amongst MSEs. This includes developing tools to facilitate actions such as risk assessments, awareness raising, the production of high-quality guidance and the promotion of peer-to-peer learning.

The Strategic Framework includes four actions under objective two, as summarised in Table 6. Responsibility for the implementation of objective two was divided between the EC and EU-OSHA, with support from ACSH and SLIC at EU level as well as the MS.

Table 6: Summary of actions under Objective two

Action identified in the Strategic Framework	Lead actor(s)	Supporting actor(s)
Provide financial and technical support on implementing OiRA and other IT-based tools	Member States	EU-OSHA
Develop guidance and identify examples of good practice taking the specific nature and conditions of SMEs and particularly micro-enterprises into account	European Commission EU-OSHA	
Promote the exchange of good practice	European Commission	Member States (ACSH)
Continue with awareness raising campaigns	European Commission	Member States EU-OSHA

Figure 5 shows the views of OPC respondents regarding the actions identified under objective two. More than half of respondents strongly agreed or agreed that the related actions made good progress (51%) and were relevant (53%). Fewer respondents believed these actions involved the appropriate stakeholders (46%) or led to tangible results (37%).

Figure 5: Opinions on progress under the second strategic objective – Facilitate compliance with OSH legislation

Q8. Under its second strategic objective the EU Strategic Framework on Health and Safety at Work 2014-2020 called on Member States to provide support on implementing IT-based tools to facilitate compliance with OSH legislation. The Commission, in collaboration with EU-OSHA and/or other actors, was tasked with developing guidance, promoting the exchange of good practices, and carrying out awareness raising activities. (Link to EU Strategic Framework). Based on your experience, do you agree or disagree that these actions…

Agreement that the actions taken under the second strategic objective…

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Don't know	Strongly agree + agree
Made good progress	6%	45%	23%	18%	5%		51%
Led to tangible results		33%	33%	19%	6%	5%	37%
Were relevant to the actual priorities in the area of OSH	11%	42%	25%	13%	5%		53%
Involved the appropriate stakeholders	9%	37%	24%	18%	6%	7%	46%
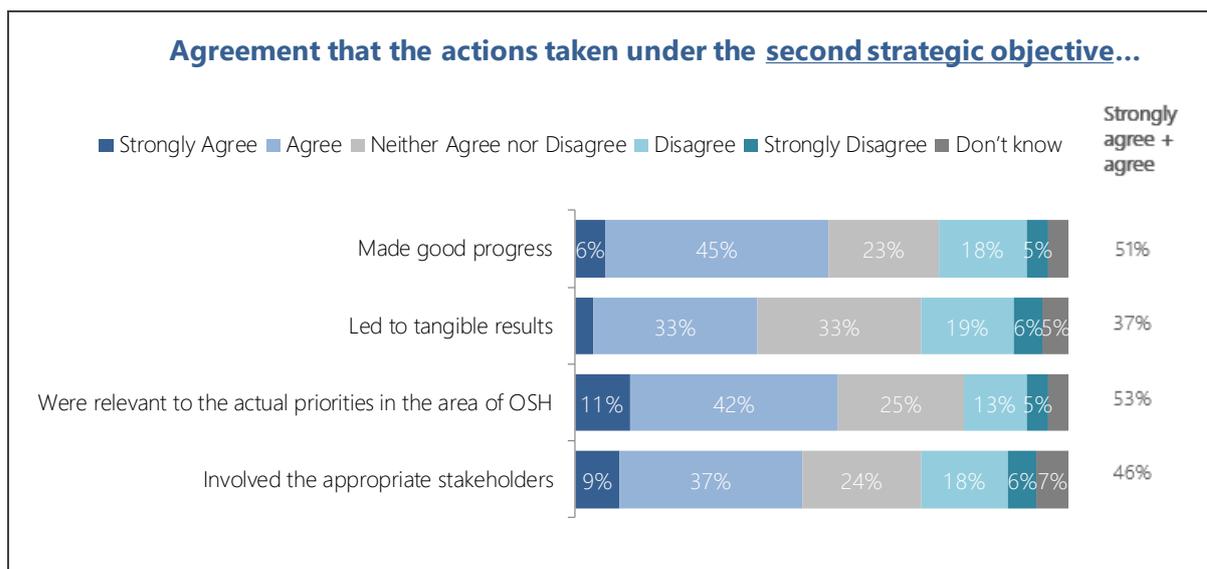
Figures below 5% not displayed.[30]
Those somewhat or very familiar with the Framework (n=244)

Source: Public Consultation

Action one: Provide financial and technical support on implementing OiRA and other IT-based tools

The EU Strategic Framework invited MS to *provide financial and technical support on implementing OiRA and other IT-based tools in Member States, focusing on priority sectors*, with support from the European Social Fund and EU-OSHA. A majority of stakeholders who were interviewed, including EU social partners, ACSH representatives and others, agreed there has been significant progress on this action. The OiRA activity, led by EU-OSHA, is well-known and viewed as a particular success story of the 2014-2020 period. A mid-term evaluation of the OiRA activity was carried out in 2020. This showed a significant increase in the overall number of tools developed, from 34 in 2014 to 209 by 31 August 2020. As of April 2021, a total of 248 tools in 17 languages were available on the OiRA website, covering a broad range of sectors.[31]

EU-OSHA, in particular, credited the inclusion of action one (objective two) in the EU Strategic Framework with raising awareness of and investing in IT-based risk assessment tools at national level. Recent initiatives, such as the development of a feature to produce

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[30] As percentages are rounded to the nearest whole number, they may not always add up to 100%.

[31] EU-OSHA, OiRA Tools, available at: https://oiraproject.eu/en/oira-tools

completion certificates for those who have finished a risk assessment on OiRA, are expected to further boost the implementation of risk assessment amongst MSEs.

Table 7 below provides an overview of MS where financial and technical support for the implementation of OiRA has been identified by desk research and interviews, or where other tools are used. Additionally, the table provides information on the number of OiRA tools available per Member State on the EU-OSHA's OiRA website.

Table 7: Financial and technical support on implementing OiRA and IT-based tools

	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	UK
Financial support to OIRA		X			X								X										X			X		
Other measures to support OIRA			X		X				X			X				X	X		X	X						X		
Use of other online risk assessment tools	X	X			X	X	X	X		X					X							X			X			
Number of OiRA tools available in nat. lang. on EU-OSHA's website	0	12	41	11	12	0	0	0	14	7*	5	17	5	0	0	2	20	0	22	4*	0	0	15	0	0	21	0	0

Source: Information from national reports compiled under Task 2 and information from oiraproject.eu, consulted on 25/02/2021.

* Duplicates in other languages not counted (Catalan, Maltese)

Use of online interactive risk assessment tools

As can be seen in Table 7 above, 15 MS have developed national level OiRA tools in collaboration with EU-OSHA. In addition, some MS (Czechia, Denmark, Estonia, Ireland, the Netherlands and Spain) have developed their own interactive risk assessment tools (IRAT) prior to or in parallel with EU-OSHA's OiRA activity. Although originally a member of the OiRA community, Czechia, also being part of the IRAT community, decided to develop its own tools from 2021.

The EU-level IRAT network, which is run by EU-OSHA alongside their own OiRA community, has allowed for an exchange between IRAT and OiRA partners in the form of lessons learned and tips from their experiences of developing online interactive risk assessment tools. EU-OSHA holds an annual e-tools seminar that promotes the exchange of good practice around the development of e-tools to support risk assessment. An EU level peer review in 2017, which focused on the development, promotion and usage of web-based tools to improve compliance with OSH legislation, was also well received by participants and interviewees.

Although not a member of the IRAT network, the UK has also developed a Health and Safety app and risk assessments tools, including a Stress Indicator Tool that has been inspired by exchanges within the ACSH.

Evidence is emerging that online tools can be an extremely effective mechanism for improving risk management culture in SMEs. In Ireland, for example, use of the BeSMART

tool is considered a primary driver of the reduction of non-fatal injuries in SMEs in the period 2014-2018.

Promotion of Online interactive Risk Assessment tools and other IT-based tools
EU and national financial support for OiRA tools has been identified in half of the MS. For example, in Czechia, the support also includes research on these tools by the Ministry of Labour and Social Affairs. A number of MS, including Bulgaria, Latvia and Slovenia[32], have chosen to organise free seminars with the assistance of EU-OSHA. Additionally, Latvia is promoting OiRA tools on social platforms and involving sectoral organisations in their dissemination. Slovenia prepared promotional adverts and promoted OiRA at seminars and other events. In other countries, as exemplified by Greece and Cyprus, labour inspectors promote the use of OiRA tools during their inspections.

Regarding support for other online risk assessment tools developed at national level, specific actions for promotion and development were reported in Austria, Germany, and Ireland. In Germany, tools are promoted via accident insurance institutions and professional organisations, which are both directly involved in the design process and close to employers and workers.

In Spain, measures were implemented to further increase the usage of the national tool Prevencion10.es. These included the development of device agnostic (i.e. mobile and tablet friendly) platforms and the option of anonymous guest access.

Barriers to the use of OiRA or IRAT tools

Despite the promotion of OiRA tools at EU and national level, there is significant variance in terms of usage between MS and sectors. According to a mid-term evaluation of the OiRA activity carried out in 2020, the most popular OiRA tool available at that time was used to carry out approximately 5,600 risk assessments per year.[33] At the other end of the spectrum, however, the least popular tool was only used on average twice a year.[34]

Some stakeholders at national level identified barriers to the uptake of OiRA tools, including the significant amount of time needed to complete risk assessments, or a lack of basic knowledge of IT applications in certain MSMEs. Additionally, some feedback from this study's national research and consultations suggests that OiRA tools may not always be sufficiently flexible or adapted to the realities of the workplace. Finally, stakeholders in some MS consider that legal protection or guarantee obtained through the OiRA tools would increase their usage. Recent initiatives to include a certification feature may help to overcome this issue in future.

EU-OSHA has identified a number of additional barriers to uptake of OiRA tools within MS. These include:

- a lack of resources dedicated to OiRA at national level, in particular in terms of human resources.

- limitations based on the national approach and culture to OSH.

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[32] The assistance of the EU-OSHA is taking place via National Focal Points, and specific promotional schemes are offered to two or three Member States per year (Focal point Assistance Tool, FAST). Information obtained via EU-OSHA.

[33] Ipsos, 2020, *Mid-term evaluation of the OiRA Activity.*

[34] As OiRA tools are developed per sector for use at national level, usage can vary significantly depending both on the number of MSEs in a given country and the size of the sector in question.

● a lack of concerted and well-integrated national promotion strategies.

The uptake of OiRA tools seems more impactful in MS where companies conduct risk assessments internally, in comparison to those which have a culture of using external OSH service providers (e.g. Slovenia, Luxembourg). According to EU-OSHA, the involvement of external service providers in the promotion and use of OiRA tools can nevertheless constitute an added value.

Stakeholders interviewed for this study expressed strong support for the OiRA tools and viewed the OiRA activity as a significant success. Nonetheless, some expressed a desire to transition from a "risk assessment" approach to a "risk management" mindset, with more action-oriented tools to help enterprises address the problems they identify.[35] Some interviewees (representing workers, employers and EU agencies) pointed out the difficulties of an EU activity aimed directly at MSEs. While the EU legislation establishes minimum requirements and the EC promotes cooperation and exchange of good practice within the EU OSH community, ultimate responsibility for compliance and direct outreach to businesses remains with the MS. EU-OSHA's OiRA activity offers an easy approach to (and support for) MS and social partners to develop online interactive risk assessment tools for different sectors. Responsibility for their development, dissemination and use still lies with the MS authorities (sometimes in collaboration with social partners).

Action two: Develop guidance and identify examples of good practice, taking the specific nature and conditions of SMEs and particularly micro enterprises into account

EU-OSHA, the EC, ACSH and SLIC have developed guidance at EU level to support this action. Some of the employers' representatives interviewed noted, however, that the guidance does not specifically target SMEs, in particular micro-enterprises.

This guidance combines consideration both of long-term trends (such as psychosocial risks, wellbeing at work and MSDs) and of responses to emerging risks. A notable example is the publication of guidance to support a safe return to the workplace during the COVID-19 pandemic, developed in 2020. Additionally, the European Commission in cooperation with the ACSH has published a number of user guides. Some of these are general (e.g. work-related vehicle risks) and some are targeted at sectors with a significant proportion of MSEs (e.g. risk prevention in small fishing vessels, OSH best practice in agriculture, livestock farming, horticulture and forestry). SLIC has published guides to help labour inspectors assess the quality of risk assessment and risk management measures with regard to psychosocial risks and MSDs.[36] The EC has also published non-binding guidelines on the implementation of specific directives, such as Directive 2013/35/EU on Electromagnetic Fields.

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[35] OiRA tools include information on both risk assessment and risk management, so this feedback may have been provided based on a misunderstanding of how the tools work.

[36] SLIC, 2018, *Guide for assessing the quality of risk assessments and risk management measures with regard to prevention of psychosocial risks*, available at: https://circabc.europa.eu/ui/group/fea534f4-2590-4490-bca6-504782b47c79/library/22e5a918-47d6-4646-93f3-ebd341f6c571?p=1&n=10&sort=modified_DESC

SLIC, 2018, *Guide for assessing the quality of risk assessments and risk management measures with regard to prevention of MSDs*, available at: https://circabc.europa.eu/ui/group/

fea534f4-2590-4490-bca6-504782b47c79/library/d0635fd4-d6c6-4d79-8d76-fb3982f1eec6?

p=1&n=10&sort=modified_DESC

As shown in Table 8, MS have adopted and implemented a variety of non-binding measures and actions to facilitate compliance with OSH legislation.

Table 8: Mapping of general measures and actions used to facilitate compliance with OSH legislation

	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	UK
Guidelines, information and FAQs	X		X	X		X	X	X		X	X	X	X	X	X			X		X	X	X	X	X	X	X	X	X
Training programmes	X		X	X	X	X		X	X	X	X			X	X	X		X		X	X	X	X	X	X		X	
Awareness raising campaigns	X	X	X	X	X	X			X	X		X	X		X			X				X	X	X	X			
Campaigns at schools		X			X													X				X	X				X	
Consultation, workshops, conferences	X		X	X	X			X	X	X	X		X		X		X		X	X		X	X	X	X	X	X	X
Expert support													X	X			X								X	X		
Financial support		X	X									X	X														X	
Campaigns on social media / local media																	X		X				X		X			

Source: Information from national reports compiled under Task 2.

The most common actions implemented at MS level are described below:

- **Guidelines targeting certain OSH risks or working activities.** For instance, Malta developed guidelines for migrant workers on OSH requirements translated in relevant foreign languages; the LI in Slovenia published several manuals and practical OSH guidelines (e.g. Safety Instructions for repairing sleet damage and working in the forest); Spain also set technical guides linked to the legal provisions transposing specific EU Directives; in Hungary, a special campaign of information has been initiated for employers hiring temporary workers; Slovakia developed comprehensive handbooks for newly established companies and for self-employed workers, as well as concise leaflets for employers and employees in SMEs.

- **Training programmes** targeting labour inspectors and/or social partners. Examples include training targeted to seasonal agricultural workers in Italy and the requirement in Cyprus for the Department of Labour Inspection to participate in training programmes planned by employers'/workers' organised bodies.

- **Consultations (e.g., workshops, conferences).** For instance, in Portugal and Greece, OSH authorities launched workshops and seminars in several regions to promote compliance with health and safety rules at work (e.g. workshops on workers' exposure to asbestos); in Czechia, an annual health and safety conference is organised, which focuses on news in the field of health and safety and current issues in this area; and in Slovenia a conference on gender perspectives of occupational safety and health provides an example of the horizontal approach to OSH. In Poland, the Safe Work Leaders' Forum gathers large companies and their subcontractors, to exchange on best OSH practices and how to address challenges.

- **Expert support**. In Sweden, Regional Safety Representatives (RSRs), nominated by the trade unions and financed jointly by them and from public funds, can visit workplaces where at least one employee is a member of the trade union, to assess the OSH situation. The focus here is more on dialogue than punitive action. External OSH expert services also provide information on new rules, training courses for management and workers, and participate in safety rounds or inspections of the work environment. In Slovenia, the LI provides expert support to employers and employees in conflict resolution. The 6-year project 'Let's eliminate conflicts at the workplace' aims to encourage employers and employees to implement mediation, conciliation or any other out-of-court dispute settlement and to consequently decrease conflict-related psychosocial risks. In Hungary, a free helpline has been set up to assist companies in complying with OSH legislation in the context of the CLP and REACH regulations. Additionally, the threshold triggering the mandatory appointment of health and safety representatives in companies has been reduced from 50 to 20. This has approximately doubled the number of OSH representatives in SMEs.

- **Financial support** to social partners to launch OSH actions. In Bulgaria, financial support is provided to companies through the national Working Conditions Fund. In France, SMEs benefit from special funding to acquire preventive equipment or receive training, with a prioritisation based on risks (MSDs, carcinogens, mutagens and toxic chemical agents, and the construction sector). Croatia linked eligibility for funding to investments in health and safety at work.

Specific measures to support MSEs

In parallel and/or within the context of general measures to facilitate compliance with OSH legislation, MS have adopted a wide array of measures specifically targeting MSEs to support them in complying with OSH legislation. These include inter alia:

- The creation in Austria of a working group promoting risk awareness and assessment in MSEs and in Poland of a Network of Health and Safety Experts to support MSEs.

- Specific financial support to MSEs linked to OSH compliance in Bulgaria and Denmark.

- Specific OSH advice to MSEs with less than five employees in Denmark.

- Workshops targeting MSEs in Greece.

- Involvement of MSEs in OSH policymaking in France.

- Legal adaptations for MSEs. Examples include Denmark and Hungary (less expensive fines), and Sweden (no requirement for MSEs to collate policy documents, routines and annual audits to avoid administrative burden while maintaining the same level of protection).

Action three: Promote the exchange of good practice

While some examples of information sharing were identified under this action, a number of stakeholders (NCAs, workers' and employers' representatives) interviewed for this study described this area as one where more could have been done. Some stakeholders suggested that the strong focus on OiRA and other online risk assessment tools may to

some extent have limited the development of other EU level initiatives to support compliance.

The main activity organised by the EC has been peer reviews between national authorities, three of which were organised during the reference period. In October 2017, the Irish government hosted a peer review meeting on the use of web-based tools for OSH risk assessment[37]. This was followed in June 2018 by a peer review meeting in Denmark on the efficient transposition, implementation and enforcement of EU OSH legislation[38]. A third peer review was organised in Sweden in October 2019 on "Legislation and practical management of psychosocial risks at work" [39]. The peer reviews were well received by participants.

Additionally, EU-OSHA has organised several conferences and meetings through its OiRA and IRAT communities to encourage mutual learning and best practice exchange. Initiatives such as the Good Practice Awards, carried out within the framework of the healthy workplaces campaign (HWC), are also designed to identify and celebrate best practice within enterprises at national level[40].

Action four: Continue with awareness raising campaigns

EU-OSHA implemented four HWCs in the period under review. These covered the following topics: management of stress (2014-15), healthy workplaces for all ages (2016-17), management of dangerous substances (2018-19) and prevention of MSDs (ongoing).[41] Evaluations of the campaigns have noted a steady increase in the number of unique visitors to the campaign website and online events from one campaign to the next. This suggests that they have been well received by EU-OSHA's main stakeholders. Interviewees for this study noticed a clear alignment between the campaign topics and EU-level priorities and activities in the field of OSH. For example, the campaign on dangerous substances was reported to support the implementation of the continuously updated EU chemicals legislation and as being very well aligned with the Roadmap on Carcinogens.

A number of different awareness raising campaigns have also been implemented at national level (in addition to national campaigns organised within the remit of the HWC). These included:

- **Awareness raising / inspection campaigns on OSH matters,** as exemplified by Spain (technical assistance campaigns), Belgium (inspection campaigns on temporary and mobile construction sites to promote measures to prevent risks), Austria (campaigns on carcinogenic materials), Hungary (campaigns on the employment of temporary workers) and Germany (a nationwide prevention and audit campaign in enterprises, providing support where necessary to comply with OSH

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[37] Peer review meeting on the use of web-based tools for OSH risk assessment on 2-3 October, available at: https://ec.europa.eu/social/main.jsp?langId=en&catId=89&newsId=9025.

[38] Peer review meeting on the efficient transposition, implementation and enforcement of EU OSH legislation, available at: https://ec.europa.eu/social/main.jsp?langId=en&catId=148&newsId=9193&furtherNews=yes.

[39] Peer review meeting on Legislation and practical management of psychosocial risks at work. Available at: https://ec.europa.eu/social/BlobServlet?docId=23048&langId=en.

[40] More information on the Good Practice Awards can be found at: https://osha.europa.eu/en/campaigns-and-awards/awards/good-practice-awards.

[41] EU-OSHA, Healthy Workplaces Campaign, available at: https://osha.europa.eu/en/healthy-workplaces-campaigns.

legislation – leading to 25,000 audits in 2.5 years as part of the work programme ORGA).

- **Campaigns in schools**, including training programmes for technical school graduates in Greece and initiatives in Cyprus to promote OSH in schools. Slovenia and Ireland also mainstreamed OSH topics in primary schools and universities through a series of programmes and seminars for teachers, but also for students, pupils and pre-school children. Romania has conducted campaigns in high schools. Portugal has also developed programs to act in schools on the topic of OSH (Mind Safety and Safety Matters). In Lithuania, labour inspectors periodically visit primary schools to give lessons on OSH for second to fourth year pupils.

- **Mass / social media campaigns**, exemplified by the approach of Portugal (which successfully promoted the "Practical Guide to Safety and Health in the Placement and Reception of Temporary Workers" on *Facebook)* and Malta (which launched mass media campaigns targeting temporary or mobile construction sites and young workers). In Lithuania, social media campaigns were carried out, focusing on newly employed workers and falls from heights.

Summary of progress

Significant activity has taken place in relation to the actions under this objective, particularly with regard to EU-OSHA's OiRA and HWC activities, as well as specific awareness raising campaigns organised at national level. Stakeholders were generally positive about EU-level initiatives and the strategic linking of different activities, including the Roadmap on Carcinogens, the HWCs, the peer reviews and the OiRA activity. However, some stakeholders (representing employers) perceived progress and actions implemented in this area as insufficient. The limitations of what can be achieved only at EU level were also a subject of discussion amongst interviewees, with a strong onus on MS to use the EU-level initiatives as a catalyst for developing their own tools, guidance and other initiatives to support compliance within businesses of different sizes and sectors.

Although stakeholders generally agreed that the OiRA activity is worthwhile, one criticism raised (by stakeholders representing workers and employers) was that perhaps too much focus had been placed on this, at the expense of developing other approaches to facilitate compliance (for example, awareness raising campaigns, stakeholder coordination, development and distribution of guidance and good practice examples, etc.).

Some employers', workers' and NCA representatives also expressed a desire for a more holistic approach to risk management. They asked for further guidelines and other materials to better understand the legislation to be developed, and requested support for MSEs to develop solutions to address the risks identified. Although some guidelines were developed (which coincided with the revision of EU OSH legislation described under objective four), certain stakeholders (particularly employers' representatives) perceived that more could have been done in this regard.

2.3   Objective three: Better enforcement of OSH legislation by Member States

Objective three focuses on the role of labour inspectors in facilitating compliance with legislation, deterring undeclared work and identifying key emerging risks and priorities. National and EU-level actions under this objective focus on understanding the current capacity of labour inspectors to carry out these duties, evaluating and improving current capacity building activities and analysing the effectiveness of fines and sanctions, as well

as other "soft" enforcement measures. In its 2019 opinion on Future Priorities of EU OSH Policy, the ACSH underlined the essential nature of adequate monitoring and enforcement at MS level in order to ensure that the OSH *acquis* is applied uniformly across the EU, guaranteeing a level playing field for companies and the same basic level of protection for workers.[42]

The main actions identified to improve enforcement of OSH legislation were primarily addressed to the EC and SLIC. SLIC plays a key role at EU level in promoting effective and equivalent enforcement of the EU OSH Directives, and in the exchange of national enforcement policies, experiences and practices. It also develops common principles of labour inspection in the field of health and safety at work, and methods for assessing the national inspection systems in relation to those principles. Through awareness-raising campaigns, exchanges and training programmes for labour inspectors it promotes increased knowledge and mutual understanding of the different national systems and practices of labour inspection and of the methods and legal frameworks for action.[43] At Member State level, LIs are the main actors in charge of the enforcement of OSH legislation. They monitor and inspect how OSH requirements are applied in workplaces and issue warnings or levy sanctions in case of infringements of these requirements.

A summary of the actions foreseen under objective three is provided in Table 9 below.

Table 9: Summary of actions under objective three

| Action identified in the Strategic Framework	Lead actor	Supporting actor
Map the resources of labour inspectorates and evaluate their capacity to carry out their main duties on enforcing OSH legislation	SLIC	N/A
Evaluate the programme of exchange/training of labour inspectors and examine ways to enhance the current tools for cooperation within the SLIC, taking into account new OSH challenges	European Commission	SLIC
Assess the effectiveness of sanctions and administrative fines imposed by Member States, as well as other measures of 'soft enforcement' and non-traditional ways of monitoring compliance	European Commission	SLIC, ACSH

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[42] ACSH, 2019, *Opinion on Future Priorities of EU OSH Policy.*

[43] ACSH, 2019, *Opinion on Future Priorities of EU OSH Policy.*

Figure 6 shows OPC responses regarding the actions implemented under the third objective. Similarly to the first and second strategic objective (see above), half (50%) of respondents agreed or strongly agreed that the actions under the third strategic objective were relevant to the actual priorities in the area of OSH. A smaller proportion agreed or strongly agreed that the actions under the third strategic objective involved the appropriate stakeholders (37%), had made good progress (35%) or had led to tangible results (28%).

Figure 6: Opinions on progress under the third strategic objective – Better enforcement of OSH legislation

Q9. The Framework's third strategic objective called for better enforcement of OSH legislation by Member States. Key actions included: mapping labour inspectorates' resources and evaluating their capacities to enforce occupational safety and health (OSH) legislation, evaluating the programme of exchange/training of labour inspectors, and assessing the effectiveness of monitoring compliance. (Link to EU Strategic Framework). Based on your experience, do you agree or disagree that these actions…
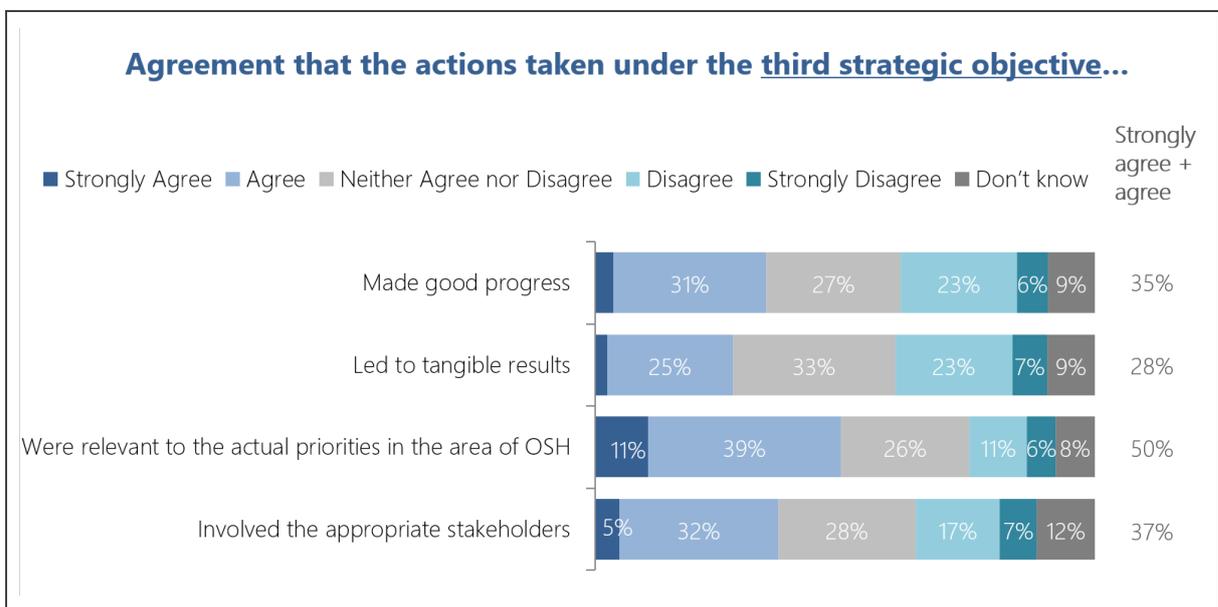
Figures below 5% not displayed.[44]
Those somewhat or very familiar with the Framework (n=243-245)
Source: Public Consultation

Action one: Map resources of Labour Inspectorates

The SLIC document library[45] includes a map of competences published in 2016, with information on the organisations responsible for different areas of workplace health and safety in all EU MS as well as Iceland, Lichtenstein, Norway and Switzerland[46]. Additionally, the document library includes a number of annual reports and handbooks shared by national LIs. These reports, provided on a voluntary basis, give a detailed overview of the resources and capacity of LIs to carry out their main duties regarding OSH enforcement.

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[44] As percentages are rounded to the nearest whole number, they may not always add up to 100%.

[45] SLIC document library (public access), available at: https://circabc.europa.eu/ui/group/fea534f4-2590-4490-bca6-504782b47c79/library/31647d8a-ccec-44af-ba1f-f4f37bb356b6.

[46] SLIC, 2016, *Map of Competences*, available at: https://circabc.europa.eu/ui/group/fea534f4-2590-4490-bca6-504782b47c79/library/87f37226-8b74-4de6-b4c5-a63fbe31752b/details.

The documents include information on the main actors in each country in terms of enforcement, sectors covered (and excluded), and the national authority (including, for example, number of staff, number of inspectors, increases/decreases in staff, inspection activities and enforcement activities). On April 2021, the website included information from 15 MS, provided between 2015 and 2018, but no overarching mapping document.

Additionally, SLIC has carried out research into specific issues that are also relevant to the responsibilities and workload of national LIs. Two particularly relevant examples are:

- *Study about the impact of the Economic Crisis on the European labour inspection systems from 2008 to 2014*, published in 2016 by the SLIC Working Group on the Impact of the Crisis. The study focuses on the impact of the 2008 financial crisis on employment (and the implications for labour inspectors) and the impact of budgetary restrictions associated with austerity on LIs. While the report demonstrates no reduction in overall LI performance, it does highlight a worsening of working conditions for labour inspectors and provides a series of recommendations for the future.

- *Study on improving intervention of labour inspection in MSEs regarding legislation transposing EU OSH directives*, commissioned by DG EMPL and published in 2017. The study identifies MSEs as a key target for labour inspectors, as they represent the majority of businesses at EU level. The report considers how LIs could adapt their activities to make them more effective at improving OSH compliance amongst these actors. This includes better understanding the specific needs of MSEs and target their communication, inspections and other activities to help support MSEs improve compliance.

These studies both support the development of a more nuanced understanding of the challenges faced by LIs across Europe. However, the study found no evidence of a more formalised mapping of LI resources or an overarching attempt to collate, compare and analyse the information provided to understand the needs and capacities of LIs across the EU.

Action two: Evaluate SLIC exchange/training programme and examine ways to enhance current tools for cooperation within the SLIC, taking into account new OSH challenges

There is an ongoing programme of bilateral exchanges organised within the remit of SLIC, with individual labour inspectors visiting their counterparts in other countries to understand specific aspects of OSH enforcement and labour inspection. Table 10 provides an overview of the number of SLIC exchanges that took place between 2014 and 2020.

Table 10: Number of SLIC exchanges (2014-2020)

Year of SLIC Exchange	Number of SLIC Exchanges
2014	21
2015	22
2016	29
2017	17
2018	14
2019	18
2020	On hold due to the pandemic

Year of SLIC Exchange	Number of SLIC Exchanges
Total number of SLIC Exchange visits	**121**

SLIC has also committed to a rolling programme of LI evaluations. A team of several MS representatives who visit the host country for a week carries out these evaluations. An evaluation rota defines the upcoming host countries to be evaluated. This document is presented for adoption twice a year at the SLIC Plenary. Evaluations are carried out with reference to an Evaluation Reference Manual, which describes common evaluation principles, a reference evaluation plan and timescales, an evaluation protocol and questionnaire, and implementation tools such as letter templates and checklists. Additional tips are included throughout the manual, to reflect the learning gained from previous evaluation rounds. The Reference Manual is regularly updated, with the most recent version dating from 2019. Table 11 provides details of the countries involved in hosting evaluations in the 2014-2020 period.

Table 11: SLIC Evaluation Programme (2014-2020)

Year of the SLIC Evaluation	Host Countries of the SLIC Evaluation
2014	United Kingdom, Finland
2015	Belgium, Portugal
2016	Estonia, Malta, Sweden
2017	Germany, Greece, Ireland
2018	Netherlands, Slovakia
2019	Cyprus, Italy
2020	On hold due to the Pandemic
Total number of SLIC evaluations	**14**

A detailed report and executive summary of each evaluation are shared with all SLIC members using the SLIC CIRCA intranet site. The executive summaries are reviewed every two years, in order to identify common themes. The Evaluation Reference Manual suggests that these themes should also be linked to the SLIC thematic days.

The first round of evaluations focused on benchmarking LIs' performance against the common principles described in the Reference Manual. Future evaluations are expected to build on this foundational work, exploring the extent to which the Strategic Framework is reflected in the work of LIs as well as how recommendations from previous evaluations have been implemented.

In May 2019, SLIC published a document entitled "Common standards for OSH Inspector Training Programme". This document describes a seven-part training programme which is designed to align with common principles of OSH inspection, as described in ILO Convention 81 (Convention concerning Labour Inspection in Industry and Commerce). EU social partners and members of the ACSH expressed strong support for the role of SLIC in supporting the training of labour inspectors and providing a common framework.

Action three: Assess effectiveness of sanctions and administrative fines, 'soft enforcement' measures and non-traditional ways of monitoring compliance

Some activities can be identified at EU level that provide an indication of progress on this action. Firstly, the study on improving intervention of labour inspection in MSEs includes an EU level analysis of sanctions and administrative fines. It also presents a range of measures that are currently being used, or could be used in future, to improve monitoring of compliance amongst MSEs. These include non-traditional outreach, soft enforcement measures and administrative fines and sanctions.

In May 2015, as part of the 68th SLIC plenary meeting in Latvia, SLIC organised a thematic day to discuss punitive and supportive measures. This included presentations from international organisations (ILO and OECD) and national labour inspectors on a variety of topics, including an overarching discussion of enforcement principles and use of sanctions, experience sharing around control-based and advice-based approaches to enforcement, and case studies discussing issues related to health, safety and overall OSH management.

LIs in MS are also involved in the assessment of the effectiveness of sanctions and administrative fines as well as other measures of 'soft enforcement' and non-traditional ways of monitoring compliance. Table 12 provides an overview of relevant developments in MS, both with regard to LI capacity and actions implemented to improve enforcement in the reference period.

Table 12: Developments in national Labour Inspectorates between 2014 and 2020

	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	UK
Problems reportedly affecting the capacity of LIs																												
Lack of financial resources			X					X														X				X		X
Insufficient number of labour inspectors		X	X			X		X	X				X		X				X			X				X		
Increase in the number of workers per inspector				X								X									X							
Decrease of inspections	X	X				X									X		X				X							X
Actions taken for a better enforcement																												
Shift to advisory and consulting of employers	X	X	X	X	X		X		X	X	X		X	X				X					X				X	
Software to target inspections			X																									
Increased training of inspectors	X		X		X			X			X						X		X							X	X	
Institutional changes										X			X								X							
Risk-based and targeted inspections			X				X		X	X							X		X	X				X	X	X		X
Automation (fines and proceedings)																					X							
Sharp increase in inspector staff																		X										

	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	UK
Centralised information system			X	X								X	X														X	

Source: Information from national reports compiled under Task 2.

NB: The information relies on the identification of such actions via desk research and consultations.

Labour inspectorates' resources, capacities and training of labour inspectors

LIs play an important role in controlling and enforcing compliance with OSH legislation. However, as highlighted in the Strategic Framework and underlined by the SLIC Opinion on future EU OSH enforcement priorities[47], the budgetary constraints of MS can create deficiencies in human resources for LIs and compromise the enforcement of OSH legislation and policies. This issue has been reported by several stakeholders at MS level[48], who note either a decrease in the absolute numbers of labour inspectors, or an increase in the number of workers under the responsibility of each inspector. Capacity issues have been identified via desk research and consultations in at least 17 MS. This is corroborated by the review of national implementation reports carried out under Task 6, which found that the resources and capacity of LIs reportedly decreased in nearly all MS between 2013 and 2017.

National research carried out under this study has identified some specific examples of the implications of the reduction in LI capacity:

- In Croatia, certain stakeholders have reported that the lack of human resources of LIs constitute a barrier to the fulfilment of proactive actions and of advisory functions.

- In Bulgaria, it has been reported that controls have become more formalistic, i.e. on the unique basis of documents rather than practical risk assessments (BG).

- In Latvia, the State has difficulties recruiting labour inspectors due to the low level of remuneration.

Not all countries reported a decrease in LI resources over the reference period. In Germany, Denmark, Luxembourg, Malta and Portugal, the number of inspectors has increased in recent years, although this took place to a different extent in each country. Feedback from social partners (especially workers' representatives) suggests that these increases were not always viewed as sufficient.

In addition to resource constraints, LIs face some additional obstacles to effective enforcement. In particular, OSH experts, NCAs and workers reported the need for specialised skills to address issues such as psychosocial risks and chemical or biological agents. Additionally, OSH experts, NCAs and workers' representatives explained that LIs often have limited or no jurisdiction to carry out inspection in a domestic setting. This brings

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[47] Senior Labour Inspectors' Committee (SLIC), 21 October 2020, *Opinion on future EU OSH Enforcement priorities contributing to a renewed EU OSH Strategy*, https://circabc.europa.eu/ui/group/fea534f4-2590-4490-bca6-504782b47c79/library/59de9da0-5102-4f1f-8862-af64c899a327/details.

[48] Workers' representatives in Belgium, Bulgaria, Croatia, France, Germany, Ireland, Poland, Portugal, Spain and the UK, and employers' representatives in Croatia, Germany, Greece, and the UK.

up the question on how to ensure the protection of domestic workers, such as cleaners and carers.

Reinforcement of the Labour Inspectorate's status and specialised bodies

A number of countries have taken action to reinforce the capacity of their LIs. Specific examples identified at national level include:

- Croatia created its State Inspectorate in April 2019, integrating all inspection sectors, including the LI (whose services were previously detached from the Ministry of Labour), in order to create synergies between inspection sectors and reinforce efficiency of the labour inspection.

- Spain reformed its Social Security and Labour Inspectorate Body to create a group of specialised inspectors in occupational risk prevention.

- Malta created a dedicated corps of LIs, the Machinery, Equipment, Plant and Installations Section (MEPI), specialised in the supervision of rules related to work equipment, which has itself set up an information system to verify and keep track of the validity of equipment's' certificates.

Decrease in inspections and diversification of activities

Several MS have observed a decrease in the number of inspections and controls of workplaces carried out, as highlighted explicitly in Austria, Belgium, Germany, Ireland and the UK. In many cases, this is linked to a diversification or adaptation of the role and activities of LIs.

- In Austria, this trend is explained by the reinforcement of and the shift to an advisory role of the LI.

- In Malta, the best ways to address the shortage of resources are being reflected. Possibilities identified include phone-based inspections with workers' safety representatives or the employer upon complaints, or the automation of some of the inspectors' administrative tasks, as described below (UK).

- In the UK, market intelligence and forecasting are used to identify priority "high-risk" sectors and locations for inspectors. Consultations have shown a very significant decrease in the number of inspections carried out, as well as an associated decrease in prosecutions.

Additionally, 11 MS reported using risk-based approaches to help prioritise inspections and better allocate resources. Specific examples include:

- Denmark, which has focused on risk-based inspections since 2012.

- Bulgaria, which conducts every year thematic controls of risky industries and activities, and which has developed a specific software to identify companies and areas with the highest risks.

The COVID-19 pandemic and lockdowns have restrained the possibility of physical inspections throughout the EU. In the UK, phone-based inspections were carried out during this period, to test the employers' knowledge of their obligations. Later, physical inspections were only conducted when particular concerns arose. In Lithuania, "e-inspections" were already conducted in many sectors of activity in 2019. They were based on employers' online declarations of their compliance with OSH legislation. To continue carrying out in-

person inspections, Luxembourg's LI has been split into "bubbles" (one third on active duty and two-thirds working from home).

Training of labour inspectors and guidance

Several MS (Austria, Bulgaria, Germany, Luxembourg, Malta and Slovenia) have implemented training programmes to improve specific areas of knowledge and skills, and to conduct effective controls, despite the lack of financial resources described above. The forms of trainings vary. For example, in Germany video tutorials were offered within the framework of the Joint Occupational Safety and Health Strategy (*GDA*) between 2013 and 2018. Their efficacy has been evaluated as low in one work programme on MSDs, however, due to the lack of IT infrastructure and equipment.

Examples of initiatives intended to address specific risks or knowledge gaps include:

- Germany has provided training on PSRs and MSDs for the period 2019-2024.

- Luxembourg has adopted a programme that encourages labour inspectors to obtain specialised knowledge in specific sectors, such as construction. In a similar vein, workers' representatives in Croatia highlighted the importance of specialised training for LIs to reinforce the knowledge of inspectors in specific fields, such as construction.

- Italy has promoted better enforcement of OSH legislation by establishing guidelines for inspections between 2014 and 2019, to harmonise the way legislation is enforced in specific sectors.

Improving the enforcement capacities of labour inspectors

National research under Task 2 has unearthed several initiatives intended to improve the enforcement capacities of labour inspectors at national level. One common method is the development of electronic information system databases, used to increase follow-up on actions undertaken by inspectors, facilitate better analysis of data on risks areas, and allow for a better targeting for risk-based inspections. The introduction of electronic databases was reported specifically in Bulgaria, Cyprus, France and Slovenia. Additionally, Malta has set up an automation system for the issuance of administrative fines and referral of legal proceedings to courts, to spare time for inspectors and not let any infringement unpunished. Spain has also created a database to monitor sanctions procedures once initiated.

Another method for improving enforcement is to increase or extend the powers granted to LIs. In France, for example, LIs are now able to require the evaluation of protective equipment by external accredited services, or to adopt cease-work orders in all fields of economic activity in case of imminent dangers for workers. The Latvian LIs also considered this latter possibility as especially efficient as it creates a strong and immediate incentive to remove the hazard or risk identified.

In Lithuania, since 2018 the LI is responsible for issuing permits for temporary agencies and for their supervision. Temporary employment agencies are required to declare compliance with the labour standards criteria on an annual basis.

'Soft enforcement' and non-traditional ways of monitoring compliance

The soft enforcement of OSH legislation implies a dialogue between the inspection authorities and the companies supervised. A common approach, which is promoted by the EU Strategic Framework and has been identified in 14 MS[49], is to put more weight on the advisory roles of LIs. Specific instances exemplifying this more cooperative approach to enforcement are provided below:

- Czechia has set up a Safe Enterprise programme in which educational and preventive activities are organised by the LI and participating companies are given an OSH certificate to improve their reputation for OSH compliance.

- Austria and Portugal have included follow-up visits to ensure that the soft enforcement measures and advice given are not disregarded.

- In Belgium and Cyprus, LIs can offer "on the spot" training to MSEs being inspected.

- In Malta, workers' health and safety representatives are invited to participate in inspections to provide circumstantiated feedback.

- In Latvia, the "Consult First" initiative which promotes cooperation between companies and LIs to identify potential solutions before the adoption of constraining measures has been evaluated as especially successful.

Finally, in some MS the enforcement of OSH policies has been promoted and ensured by other stakeholders, without requiring the involvement of LIs:

- In Sweden, soft enforcement is inherent to the system of prevention, as Regional Safety Representatives nominated by trade unions may visit companies where at least one employee is member of the trade union, with a focus on prevention and dialogue.

- In France, consulting engineers and control agents of the social security, who are not LIs, may issue injunctions in face of an exceptional risk for employers to take "any justified measure of prevention" within a specified timeframe.

- In Hungary, since 2020, employers themselves carry out investigations of increased exposure cases, instead of the LI. If the source of the exposure is identified and effectively eliminated, the authorities are not involved on site, which has resulted in doubling the number of notifications and detection of increased exposure cases.

Effectiveness of sanctions

National research under task two unearthed limited information on the effectiveness of sanctions. Indeed, only two MS (Estonia and Latvia) were found to have carried out official evaluations on the effectiveness of sanctions. In six additional MS, stakeholders were able to comment on the effectiveness of the national sanctions system.

The evaluations in Estonia and in Latvia were conducted prior to a reform of the sanctions regime for violations of OSH regulations. In Latvia, the adoption of a completely new system of sanctions in the Administrative Liability Law has required the State to conduct an evaluation of the effectiveness of sanctions and administrative fines. The results of this evaluation showed that pre-existing sanctions were insufficient. This led to a new maximum sanction of EUR 32,000, a twelvefold increase on the previous regime. In Sweden, the level of administrative fines for violations of the Working Environment Act has been increased to

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[49] Austria, Belgium, Bulgaria, Cyprus, Czechia, Denmark, Greece, Spain, Finland, Croatia, Hungary, Lithuania, Portugal, Slovenia (Table 12).

a maximum of SEK 1 million (approx. EUR 100,000). In accordance with the Spanish national strategy's objective on improving compliance, rules on sanctions and infringement procedures were updated and adapted to the regulatory changes in the "Social Order".

In several MS stakeholders were supportive of the use of sanctions as the principal means of enforcing OSH rules. Nevertheless, a number of barriers to effectiveness were identified. In Poland, workers' representatives were critical of the very low incidence of fines for violations of OSH legislation and underlined the need for effective sanctions as a deterrent to infringements. In Portugal, the delays and lengthy judicial procedures were felt to limit the dissuasive effect of sanctions.

To improve the effectiveness of sanctions, Hungary allows labour inspectors to impose on-the-spot fines during inspections. Ireland publicises information on sanctions levied and the names of companies that infringed OSH legislation in the national media.

However, research in the Netherlands has found that a 2012 shift towards more stringent enforcement has not led to conclusive results, and a reinforcement of the culture of self-enforcement within companies is now being promoted.

Summary of progress

Overall progress in implementation of this objective at EU level appears to have been steady, but at national level efforts to improve enforcement were often limited by resource constraints.

The ACSH highlighted in its Opinion[50] the importance of SLIC in promoting better coordination of enforcement at MS level and this view is reflected across all stakeholder groups. At national level, LIs (many of whom have faced significant funding cuts in the last decade) expressed significant concerns related to their limited enforcement capacity. To cope with these limited capacities and decrease in the numbers of inspections that can be carried out, LIs develop, inter alia, risk-based approaches to prioritise inspections. The COVID-19 pandemic in 2020 was also identified as a significant obstacle to continued enforcement, making it very difficult for LIs to carry out in-person inspections. Nonetheless, a few solutions have been developed to carry on inspection activities.

An evolution of the LIs' functions towards more advisory activities has been identified in more than half of the MS. In a similar vein, soft enforcement measures with strong involvement of employers and workers have been adopted in at least nine MS.

A significant amount of activity can be noted at EU level and a lot of information has been gathered and shared, particularly regarding the first two actions. However, there appears to have been limited progress regarding the envisaged coordinated effort to map or evaluate the overall resources and activities of LIs at EU level. There is also a notable gap with regard to evaluating the effectiveness of activities at national level. Most MS have not evaluated the effectiveness of their sanctions regime in response to infringements of OSH legislation.

Interview feedback from non-SLIC stakeholders suggests a limited awareness of the actions taken to date under this priority, to some extent reflective of the fact that much of the information related to SLIC activities is not publicly available and many stakeholders are not aware of their day-to-day activities. This has led to concerns regarding the extent of progress against this objective. Stakeholders representing social partners, EU agencies and the ACSH called for more transparency in order to allow for a better understanding of what concrete actions are being taken at EU level to support labour inspectors in their OSH enforcement role.

Looking forward, the majority of stakeholders were in agreement regarding the continued importance and relevance of better enforcement, particularly at MSE level, and the need to reinforce hard and soft enforcement measures. There is strong support for increased coordination, capacity building and support to national LIs at EU level, although more transparency with regard to publishing outcomes and engaging with other stakeholders (e.g. ACSH, European social partners and EU institutions and agencies such as EU-OSHA) would be welcomed.

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[50] ACSH, 2020, *Opinion on Future Priorities of EU OSH Policy.*

2.4 Objective four: Simplify existing legislation

Objective four reflects the need to eliminate unnecessary administrative burden and simplify EU legislation in accordance with the objectives of the overarching REFIT programme. With regard to OSH legislation, this means assessing the extent to which legislation is fit for purpose, examining how it can be better implemented and supporting parity between MS in terms of implementation. Any simplification efforts should seek to balance strong worker protection with a reduction of administrative burden for MSEs.

Three main actions were identified with regard to simplification, with responsibility for implementation divided between MS and the EC. ACSH was expected to provide support in terms of ensuring a robust public debate around the EU's simplification agenda. Table 13 below provides an overview of the different actions identified under objective four and the actors tasked with implementing them.

Table 13: Summary of actions under objective four

Action identified in the Strategic Framework	Lead actor	Supporting actor
Identify possible simplifications and/or reductions of unnecessary burden as part of the evaluation of the OSH legislation, and promote a public debate with all stakeholders	European Commission	ACSH
Encourage Member States to identify sources of specific regulatory burden created by their own transposing legislation on OSH and national legislation, and analyse national implementation reports to identify good practice and to promote exchange of information	Member States	European Commission
Assess the situation of micro-enterprises in low-risk sectors and consider how to simplify the implementation of risk assessment, including documentation	European Commission	N/A

As demonstrated by Figure 7, approximately one quarter of OPC respondents (23%) felt that the actions taken under the fourth strategic objective had made good progress, and almost one fifth (19%) thought that they had led to tangible results. Over one third (36%) of respondents felt that the related actions were relevant to the actual priorities in the area of OSH and 28% of respondents agreed or strongly agreed that the actions involved the appropriate stakeholders.

Figure 7: Opinions on progress under the fourth strategic objective – Simplification of legislation

Q10. Under its fourth strategic objective the EU Strategic Framework on Health and Safety at Work 2014-2020 refers to the simplification of legislation at both EU and national level, in order to reduce unnecessary burden, and to encourage the promotion of good practice. Link to EU Strategic Framework). Based on your experience, do you agree or disagree that these actions…
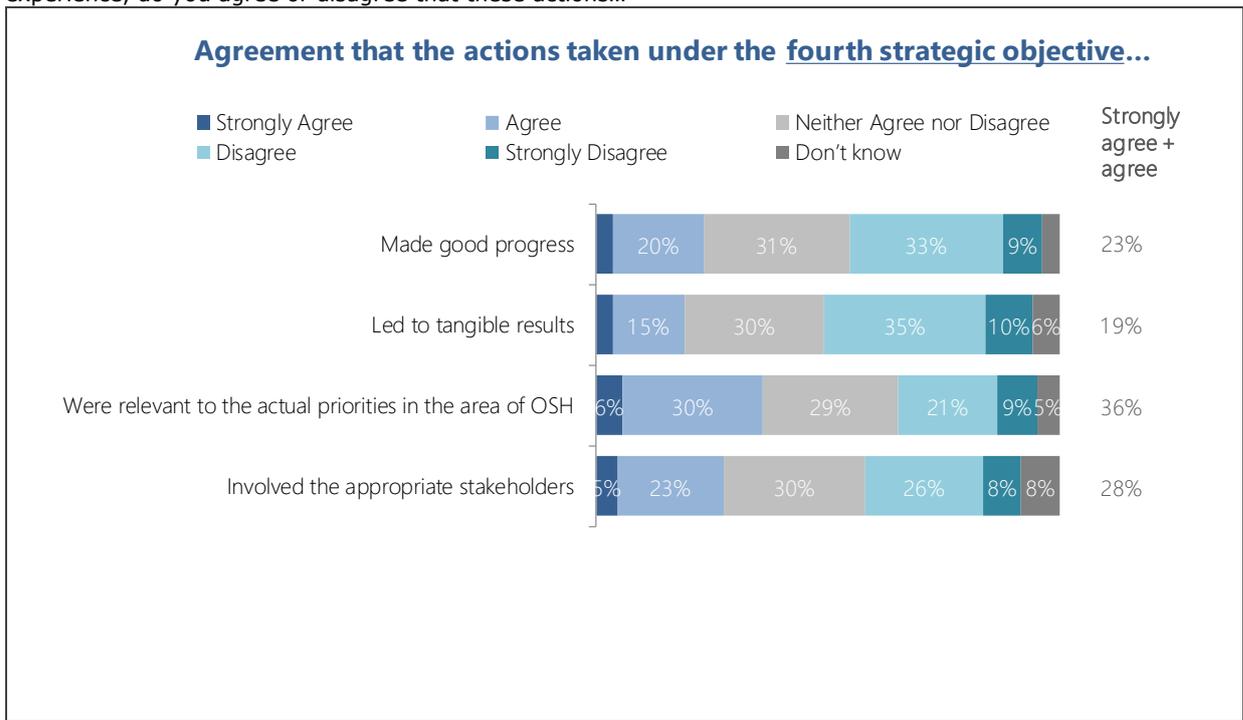
Figures below 5% not displayed.

Those somewhat or very familiar with the Framework (n=243-247)
Source: Public Consultation

Action one: Identify possible simplifications and/or reductions of unnecessary burden and promote a public debate with all stakeholders

The majority of stakeholders interviewed for this study identified the European Commission's work on updating and modernising European OSH legislation as one of the most significant developments under the EU Strategic Framework. Clear progress has been made since 2014 with regard to updating EU legislation and removing unnecessary duplication, where necessary, although this task is ongoing. Most of the activity in this area took place after 2017, when the European Commission published the Staff Working Document on its evaluation of EU OSH Framework Directive 89/391/EEC and 23 related Directives. This led to the publication, also in 2017, of the Communication on the modernisation of the EU Occupational Safety and Health Legislation and Policy, which identified a number of pieces of legislation to be updated in order to ensure the EU OSH *Acquis* remains relevant and fit for purpose.

The 2017 Communication identified six Directives in need of modernisation. These are:

- **The OSH Signs Directive (Directive 92/58/EEC)**
  A specific guidance document to better explain the relation between this Directive and the EN ISO 700 Signs Standard has been developed in order to avoid any misunderstanding. In December 2020, the ACSH adopted an opinion on a non-binding guidance in this respect.

- **The Biological Agents Directive (Directive/2000/54/EC)**
  The list of biological agents in Annex III was reviewed and updated in 2019, together with an update of Annexes V and VI. The Directive was updated again in 2020 to include SARS-CoV-2 (Coronavirus) in Annex III (Directive (EU 2020/739).

- **Medical Treatment on Board Vessels Directive (Directive/92/29/EEC)**
  The compulsory list of medical supplies laid down in the Directive was reviewed and the relevant annexes to the Directive were updated in 2019 (Directive (EU) 2019/1834).

- **The Personal Protective Equipment Directive (Directive 89/656/EEC)**
  The annexes to the Directive were updated in 2019 to take account of the latest technological evolutions (Directive (EU) 2019/1832 of 24 October 2019).

- **The Workplaces Directive (Directive/89/654/EEC)**
  It is currently being reviewed, with a particular focus on whether the definition of "workplace" should be updated to reflect new working realities (e.g. platform working, teleworking etc). The annexes are also being reviewed.

- **The Display Screen Equipment Directive (Directive/90/270/EEC)**
  This Directive is also being revisited to remove references to obsolete technologies and update certain definitions (such as "workstation") to reflect the modern workplace. Additionally, exemptions included in the Directive are being reviewed to check whether they are still relevant and/or required.

Most stakeholders praised these changes, particularly for their focus on modernising and updating the legislation. However, there were concerns, voiced primarily by representatives of workers and OSH experts, that the simplification agenda might result in reducing the overall protection guaranteed by the EU OSH *acquis.*

Furthermore, a number of occupational exposure limits (OELs) as well as other provisions under the Carcinogens and Mutagens Directive (CMD) have been revised or introduced, addressing 26 carcinogens or mutagens. In addition, two Directives were adopted establishing a fourth and a fifth list of indicative occupational exposure limit values for chemical substances/groups of substances under the scope of the Chemical Agents Directive (CAD). Preparatory work is also underway to review the current limit values of lead and establish a new OEL for di-isocyanates under the scope of the CAD and to review the existing OEL within the Asbestos at Work Directive.

During the process some inconsistencies emerged between the approaches of EU OSH chemicals legislation and REACH Regulation. Relevant Commission services have collaborated closely to resolve these issues and to ensure complementarity between the sets of legislation. Significant progress has been made in this regard, thanks to close collaboration, cooperation and coordination between the relevant Commission services. Additionally, the provision of scientific advice was streamlined by asking RAC/ECHA to provide scientific opinions underpinning EU OSH chemicals legislation.

Whilst clear progress has been made at EU level towards resolving the issue, it has led to some concerns. For example, employers and some NCAs stated that exposure limits are being developed that cannot be achieved or measured, and therefore cannot be enforced. Additionally, some employers' and workers' representatives expressed a desire for further

work to clarify the interface between the OSH chemicals legislation and the REACH Regulation. They hope that this will address the underlying issue of having two different legislative approaches to determining safe exposure limits. Others highlighted the need to ensure that the ACSH and social partners were adequately involved in any OEL setting process, in line with the Treaty obligations. There are some different opinions between employers' and workers' representatives regarding the need for "simplification" of legislation (understood as decreasing administrative burden) and "modernisation" (understood as focusing on the extent to which legislation remains fit for purpose). While both groups support the latter, employers expressed concern that the initial aim of simplification had to some extent been diluted by the modernisation agenda.

Action two: Encourage Member States to identify sources of specific regulatory burden created by their own transposing legislation on OSH and national legislation and analyse national implementation reports to identify good practice and to promote exchange of information

While responsibility for this action lay with the MS, the EC had a role to play in supporting the detection of specific sources of regulatory burden, identifying good practice and promoting information sharing. Some progress has been identified to date. The ACSH has plans to create a working party to look at the costs, benefits and administrative burden of OSH legislation but this has not yet been implemented. Additionally, the EC commissioned a review of the national implementation reports as part of this study. This has been carried out under Task six of this evaluation and a separate report has been submitted in order to fulfil action two.

Table 14 provides an overview of the extent to which MS have taken specific actions to support the simplification of OSH legislation, based on the information collected as part of the national level research.

Table 14: Overview of actions taken at national level in support of objective four

	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	UK
Actions to identify regulatory burdens					X			X						X					X	X	X				X	X	X	X
Actions to simplify OSH legislation	X	X	X		X	X		X			X	X	X	X	X				X	X		X			X			
Digitisation of obligations											X	X					X							X			X	

Source: Information from national reports compiled under Task 2.

Processes for the identification of regulatory and administrative burdens

A number of stakeholders interviewed as part of the national research expressed a desire for more action towards simplification (in particular employers in Spain, Italy, Portugal and Sweden, and workers in Bulgaria, Denmark, Portugal and Sweden). In Malta, the NCA has acknowledged the complexity of certain areas of law and is taking action to remove unnecessary burdens. However, the extent to which MS have put specific actions in place that allow for the identification of regulatory and administrative burdens varies significantly. One important success factor identified by countries seeking to simplify OSH legislation is the involvement of social partners in the process.

Germany, Italy and Slovenia had already conducted substantial simplification actions in 2007-2012, and therefore did not make any significant efforts to simplify further OSH legislation in the reference period for this study.

Countries including Malta, Ireland, Croatia, Latvia and Czechia have endeavoured to take a systematic approach to simplification. Malta has set the simplification of legislation as a priority focus within its national OSH strategy, and the Maltese national competent authority has set up a specific programme to review the OSH legislation in force, with the purpose of identifying burdens and suggesting simplifications to the legislator. In Croatia, the process of identification of burdens and simplification of rules in 2017 was part of a global review of the administrative barriers affecting the economic growth of the country.

Ireland has also undertaken a review of (all) OSH legislation to identify outdated, defunct or replaced statutes and ensure coherence of cross-references in its body of legislation. Additionally, whenever EU OSH legislation is transposed into Irish law, the text of existing laws is reviewed and repealed or revoked as necessary.

In some MS, such as Latvia, Slovenia and Czechia, the regulatory burden must be assessed every time a new piece of OSH legislation or an amendment to existing OSH legislation is proposed.

National research also uncovered some less successful attempts at reducing regulatory and administrative burdens. One example is the 'Programme for reform of the rules' implemented by the Swedish national competent authority in 2016-2018. This aimed to create a more consolidated and easily navigable system but was criticised by social partners who did not believe that it has led to improvements for companies. In Slovenia, workers' representatives expressed dissatisfaction with the methods used to identify administrative burdens for employers. Additionally, doubts were cast on the success of the 2013 review of administrative burdens in OSH policies.

Actions towards the simplification of OSH legislation

In their attempts to simplify OSH legislation, MS must ensure a sufficient level of protection to workers, which cannot be lowered compared to standards of EU legislation. This has been identified as a significant barrier to simplification (e.g. in France) and could indicate that simplification would generally be more appropriate at EU level, to ensure an appropriate balance between both simplification and a minimum level of protection for all workers in MS.

One of the most significant simplification processes identified at national level is the codification of OSH legislation. Examples of this approach include the Belgian Code of Wellbeing at Work, the adoption of a new Framework Act on Occupational Health and Safety in Croatia after its accession to the European Union, and the simplification of the ordinance on workplaces in Germany.

Several MS, including Denmark, Malta and Poland, identified the integration of the obligatory assessment of the explosion protection document pursuant to Directive 1999/92/EC into the general workplace risk assessment document as a measure to simplify the administrative procedures required from companies. Additionally, in 2017 Croatia and Bulgaria both adopted rules for the simplification of reporting accidents at work and occupational diseases. In Slovenia, the digitisation projects facilitated reporting of accidents at work and occupational diseases.

Exemptions from certain obligations have also been adopted. One concrete example of this approach is the extension in Croatia of the definition of temporary construction sites, which are now defined as construction sites of a duration of up to 60 days. This extension lifted

the burden of certain mandatory declarations for those sites in terms of risk assessment, instructions for safety work, proof of workers' training, work equipment test report.

Another approach to simplification has involved the removal of certain (declaratory) obligations, which were deemed not effective enough. Austria has lifted several administrative obligations in 2017, including the obligation to keep records of near misses. In Bulgaria, for example, the obligation to make a written declaration to the LI on the lack of change of circumstances (e.g. concerning the location, type and nature of the production activity, number of employees, working conditions, risk factors and measures ensuring the prevention of breakdowns and accidents) has been removed. Similarly, in Poland, workers who are re-employed by the same employer in the same position and with the same working conditions have been removed from the mandatory preliminary medical examination scheme. In Estonia, information that is already available in a national database is no longer requested from companies.

Finally, rather than focusing on legislative simplifications, some MS have chosen instead to focus on improving companies' understanding of OSH legislation and supporting implementation, via the development of OiRA and other online tools. This is the case, for example, in Greece and Portugal (described in more detail under objective two).

Digitisation of processes to reduce administrative burdens

A small number of initiatives to move administrative procedures online were identified to make compliance easier.

- In France, for example, an online platform has been developed to allow enterprises to declare demolition, removal and encapsulation plans for asbestos.

- In Bulgaria, work permits to minors are accessible electronically, reducing the approval time from 15 to 7 days.

- Latvia and Lithuania allow the online declaration of accidents at work and the digital reporting of risk assessments.

- Finland allows the reporting of total working hours via an internet-based system.

- Austria has brought amendments to the Labour Inspection Act, which permitted the delivery of documents from labour inspectors to employers not based in Austria and fostered mutual exchange of information, via the Internal Market Information System (IMI).

- In Slovenia, several digitisation projects have been initiated to facilitate reporting of accidents at work and occupational diseases digitally. The COVID-19 pandemic was identified as one factor behind the transition to digital reporting in Slovenia, with the introduction of digital reports to notify authorities of the number of employees who are teleworking.

Simplification of rules for SMEs

Only a few instances of simplification of legislation or administrative processes specifically for SMEs were identified via the national research. These are listed below.

- In Ireland, the safety statement that small contractors with fewer than three employees must provide can be substituted with the proof of compliance with the relevant Code of Practice.

- Croatia has simplified rules on mandatory OSH councils in SMEs. Sweden, while maintaining the core obligations on SMEs (risk analyses, action plans and

instructions for hazardous work), has removed document requirements from the systematic work environment management of micro enterprises.

- In France, certain rules on the SME workplaces were amended (requirement to provide locker rooms changed to secured storage unit).

- Austria has extended the interval between inspections of office (or similar) workplaces between 1 and 10 employees, from two to three years.

Action three: Assess the situation of micro-enterprises in low-risk sectors and consider how to simplify the implementation of risk assessment

There is limited evidence of a coordinated effort at EU level to identify opportunities for simplifying the requirements placed on micro-enterprises. This may be in part due to research carried out by EU-OSHA as part of its European Survey of Enterprises on New and Emerging Risks (ESENER) activity[51]. ESENER indicates that while one obstacle faced by MSMEs enterprises is that implementing OSH legislation represents an administrative burden, small business owners are often faced with the obstacle of not being aware of their obligations or not fully understanding OSH principles.

Additionally, DG EMPL commissioned a study on the obligation to document the risk assessment for very small enterprises[52]. The study found that an exemption from the documentation obligation for micro-enterprises in low-risk sectors may lead to a small net benefit under some scenarios, but that a negative net benefit (and possibly a substantial one) could not be ruled out.

Interviewees from EU-OSHA, as well as some social partners, therefore questioned whether simplification is the most important action to support MSEs and pointed instead to the need for increased awareness raising, other programmes (financial, technical support, training) targeting MSEs, a focus on extending protection to all workers, a sector-based approach and better-targeted support for OSH compliance.

Summary of progress

Significant progress has been made in this area at EU level with regard to the updating of legislation following the ex-post evaluation of the EU OSH Framework Directive and 23 related Directives. However, it remains to be seen if this will result in simplification on the ground. While simplification of national legislation is clearly the responsibility of individual MS, stakeholders (especially workers' and employers' representatives) believe there is nonetheless room to coordinate more proactively this effort at EU level (particularly within the ACSH). Additionally, the question of what simplifications might be required to support micro-enterprises in low-risk sectors remains to some extent unanswered.

Much remains to be done at national level to identify sources of specific regulatory burden created by transposing legislation and national legislation. Ten MS were found to be implementing activity in support of this action. Simplification measures adopted by MS are diverse and often try to address very specific problems. Thus, it remains difficult to assess

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[51] EU-OSHA, ESENER, available at: https://visualisation.osha.europa.eu/esener#!/en

[52] European Commission, December 2012, *Study on the consequences of the documentation of the risk assessment (Article 9 of Directive 89/391/EEC) by very small enterprises engaged in low-risk activities, compared with a possible exemption from that obligation* (VC/2011/451).

the extent to which the simplifications brought in individual MS are significant for employers and workers and result from activity at EU level. Digitalisation projects relate mostly to helping fulfil companies' administrative obligations towards national authorities or LIs. However, these can be found in only a few MS.

There was general support for the European Commission's decision to focus on "modernising" rather than "simplifying" legislation. This was believed to have been a sensible way to reduce unnecessary burdens resulting from outdated expectations or obsolete technologies, whilst ensuring that protection remains high. Employer representatives nonetheless expressed concerns that, in some instances, the focus on modernisation may have led to less progress on simplification of the administrative burden imposed on MSEs.

2.5 Objective five: Address the ageing of the workforce, emerging new risks, prevention of work-related and occupational diseases

Objective five recognises the changing landscape of OSH and the need to address new challenges such as the ageing workforce. Additionally, it is intended to address the emergence of new technologies, products, industries and ways of working that impact the risk landscape workers are facing.

The Strategic Framework included several actions under objective five. Table 15 below lists those actions, as well as the actors the Framework identified as responsible for their implementation.

Table 15: Summary of actions under objective five

Action identified in the Strategic Framework	Lead actor	Supporting actor
Establish a network of OSH professionals and scientists and ascertain the need to set up an independent scientific consultation body that would channel their recommendations into the work of the Commission	European Commission	N/A
Support the dissemination of the findings of the European Risk Observatory among the relevant actors	European Commission	EU-OSHA
Promote the identification and exchange good practice on ways to improve OSH conditions for specific categories of workers, e.g. older workers, inexperienced younger workers (including those employed in different forms of temporary contracts), apprenticeships, workers with disabilities and women	EU-OSHA	N/A
Promote rehabilitation and reintegration measures by implementing the results of the European Parliament pilot project on older workers and of the HWC in 2016-17	European Commission	EU-OSHA
Identify and disseminate good practice on preventing mental health problems at work	EU-OSHA	N/A

As can be seen in Figure 8, a majority of OPC respondents (56%) agreed that the actions implemented under objective five were relevant. Furthermore, 44% of OPC respondents agreed that the actions involved the appropriate stakeholders, 41% agreed that they had made good progress and 33% agreed that they had led to tangible results.

Figure 8: Opinions on progress under the fifth strategic objective – address the ageing of the workforce, emerging new risks, and work-related and occupational diseases

Q11. Under its fifth strategic objective, to address the ageing of the workforce, emerging new risks, and work-related and occupational diseases, the EU Strategic Framework on Health and Safety at Work 2014-2020 called for support in the dissemination of findings from the European Risk Observatory, and good practices to support older and other specific groups of workers, as well as mental health issues at work, were to be identified and promoted. (Link to EU Strategic Framework). Based on your experience, do you agree or disagree that these actions...
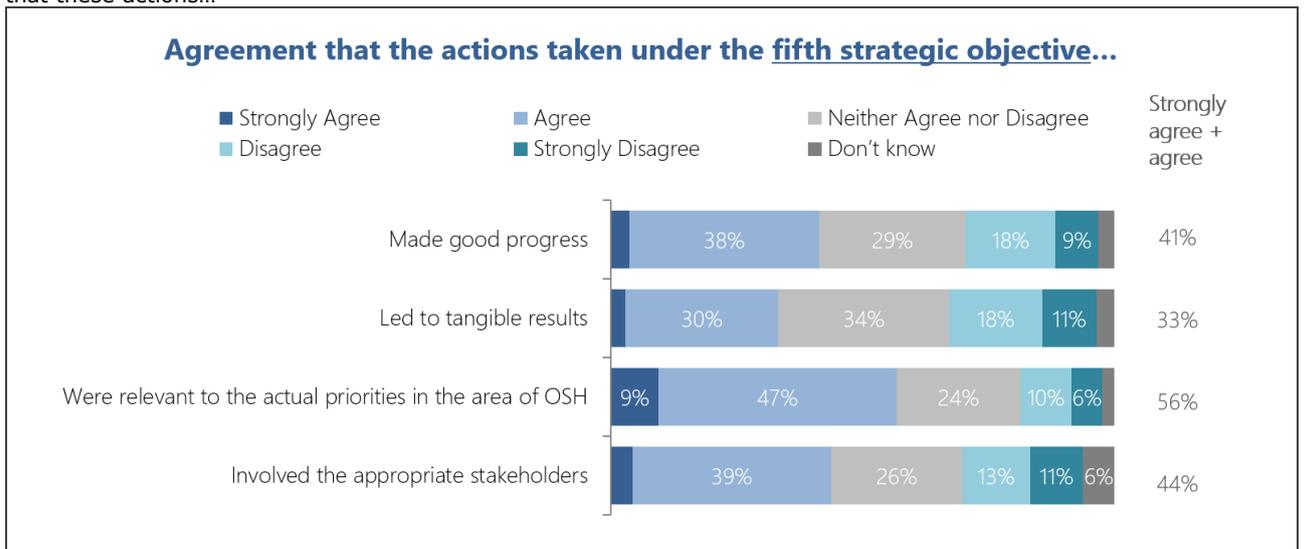
Figures below 5% not displayed.
Those somewhat or very familiar with the Framework (n=238-247)
Source: Public Consultation

Action one: Establish a network of OSH professionals and scientists and ascertain the need to set up an independent scientific consultation body that would channel their recommendations into the work of the Commission

No specific measure or initiative was found under this action.

Action two: Support the dissemination of the findings of the European Risk Observatory among the relevant actors

The European Risk Observatory[53] is an EU-OSHA initiative, which gathers, analyses and publishes information on emerging risks in order to help "anticipate change" and provide a platform for debate between experts and policy makers. While the majority of stakeholders interviewed referenced the research carried out by EU-OSHA and praised the quality of its work, none of the interviewees made an explicit reference to the European Risk Observatory. This makes it difficult to establish a clear link between the reports being referenced and the Observatory.

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[53] EU-OSHA, European Risk Observatory, available at: https://osha.europa.eu/en/about-eu-osha/what-we-do/european-risk-observatory#:~:text=The%20aim%20of%20EU%2DOSHA's,and%20effectiveness%20of%20preventive%20measures.

EU-OSHA noted that the European Risk Observatory "brand" is no longer being actively promoted, although research is still being implemented and shared. This may explain the limited awareness amongst interviewees with regard, specifically, to the Observatory.

Action three: Promote the identification and exchange good practice on ways to improve OSH conditions for specific categories of workers

EU-OSHA has published a number of case studies, reports and discussion papers sharing good practice on working with chronic MSDs, as well as analysing trends and drivers of change around developments in ICT, the digitalisation of work and other emerging issues in the workplace, including issues affecting specific types of workers. Specific examples include a report on rehabilitation and return to work after cancer[54] and another on mainstreaming gender into OSH practice[55].

Action four: Promote rehabilitation and reintegration measures by implementing the results of the European Parliament pilot project on older workers and of the HWC in 2016-17

To promote rehabilitation and reintegration measures, among others, responding to the consequences of an ageing workforce, on the request of the European Parliament a 3-year pilot project 'Safer and healthier work at any age' was initiated. EU-OSHA managed the project and worked towards improving knowledge of policies and initiatives addressing the ageing of the workforce and their implementation across Europe. They do this by providing reliable information and analysis for policy development in the area of OSH and facilitating the exchange of good practice.

Action five: Identify and disseminate good practice on mental health problems at work

EU-OSHA published several reports on mental health in the workplace. The HWC 2014-15 was also dedicated to the topic of managing work-related stress. The European Commission also published guidance on mental health at work. This included guidance on implementing a comprehensive approach and an evaluation of policy and practice to promote mental health in the workplace, both published in 2014.[56]

Further actions on occupational diseases

In addition to the actions explicitly listed in the EU Strategic Framework, the study team has identified a number of other developments throughout the Framework's implementation period that contribute towards objective five. This applies particularly to addressing work-related risks and occupational diseases, especially risks posed by carcinogens and other hazardous chemicals. A key development in this regard was the updating of several EU OSH Directives in line with the 2017 Communication by the European Commission on "*Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy*". The most notable among these are the three amendments to the Carcinogens and Mutagens Directive (CMD) (and a fourth proposal put forward by the Commission), the two new lists of Indicative Occupational Exposure Limit Values in the implementation of the Chemicals Agents Directive (CAD), and the two technical updates of the Biological Agents Directive (BAD) (as described under objective four).

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[54] EU-OSHA, 2016, *Rehabilitation and return to work after cancer : Literature review*, available at : https://osha.europa.eu/en/publications/rehabilitation-and-return-work-after-cancer-literature-review

[55] EU-OSHA, 2014, *Mainstreaming gender into OSH practice*, available at: https://osha.europa.eu/en/publications/mainstreaming-gender-occupational-safety-and-health-practice/view

[56] For more information see the European Commission website, available at: https://ec.europa.eu/social/main.jsp?catId=716&langId=en.

Another important development at EU level was the Roadmap on Carcinogens, launched in 2016, which brings together the European Commission, EU-OSHA, Member States and social partners. It is intended to "*promote awareness raising as well as the development and exchange of good practices that prevent or reduce exposure to carcinogens at the workplace*"[57]. Interviewees highlighted this as an example of how involvement of key stakeholders not only at EU, but also at national level, coupled with alignment to wider policy action at EU level can create momentum and long-term impact.

Interviewees from EU institutions highlighted an increasing focus of the European Commission on the exposure of workers to chemicals, noting a shift away from a risk-based approach towards a hazard-based approach[58]. The new EU *Chemicals Strategy for Sustainability – Towards a Toxic-Free Environment*, adopted in October 2020, exemplifies this shift, as it contains a focus on making consumer products free of chemicals that cause cancers, gene mutations, affect the reproductive or the endocrine system, or are persistent and bio-accumulative[59]. However, implementation and enforcement of legislation is the responsibility of MS. It therefore remains to be seen whether the legislative changes will result in reduced exposure in the long-term.

Further actions on emerging new risks

Stakeholders pointed to the key role played by EU-OSHA in working towards the aims set out in objective five beyond the five actions described within the EU Strategic Framework. The Agency conducted and published a significant body of research on new and emerging risks and occupational diseases throughout the Framework implementation period, which interviewees identified as a key driver towards increasing awareness of these issues. This includes, for example, an OSH overview on MSDs, a foresight project looking at the impact of rapid developments in digital technologies on working conditions, and research published on alert and sentinel systems to catch early signs of work-related diseases. The HWCs implemented during the Framework's implementation period addressed key emerging risks, namely "*Manage Stress*" (2014-2015), "*Healthy Workplaces for All Ages*" (2016-2017), *"Manage Dangerous Substances"* (2018-2019), and now *"Lighten the Load"* focusing on the prevention of work-related MSDs (2020-2022). Importantly, the research and guidance included the publication of guidelines on adapting workplaces, shifting to working from home, and protecting workers in light of the COVID-19 pandemic.

More recently, progress was also noted in addressing violence and harassment, which stakeholders identified as increasingly important risks in the world of work, in particular due to increased working from home, which means domestic violence is now effectively occurring within the workplace of many victims. The European Commission presented a proposal to the Council encouraging MS to ratify the International Labour Organisation's (ILO) Convention on the elimination of violence and harassment in the world of work. EU-level social partners and EU-OSHA also recognise violence (including domestic violence) and harassment as a workplace risk. EU-OSHA has published research and issued guidance on this. The COVID-19 pandemic has highlighted the urgency of dealing with

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[57]Roadmap on Carcinogens Covenant, 2019, « *Roadmap Covenant* », viewed 22.02.2021, available at: https://roadmaponcarcinogens.eu/.

[58] A hazard is the intrinsic, dangerous characteristic of a substance, whereas a risk only emerges when a hazard is coupled with exposure to it. A shift towards a hazard-based approach would therefore make substances, and thus products, safer already before workers (or consumers) get exposed to them, reducing risk without requiring more prevention measures at the workplace.

[59] European Commission, 2020, *Chemicals Strategy for Sustainability - Towards a Toxic-Free Environment*.

issues such as violence in the workplace, particularly when for many EU workers their workplace is currently also their home.

Further actions on the ageing workforce

In addition to EU-OSHA's focus on "Healthy Workplaces for All Ages" during its 2016-2017 HWC, several other initiatives addressing the challenges related to demographic change in the workforce took place within the Framework's implementation period. Notably, the European social partners (BusinessEurope, UEAPME, CEEP and ETUC, and the liaison committee EUROCADRES/CEC) agreed/decided through the social dialogue to sign an autonomous framework agreement in 2017 "on active aging and an inter-generational approach". In this agreement, they committed to promote and implement tools and measures to facilitate older workers' active participation and continuation in the labour market until the legal retirement age. At the same time, they will try to make sure that measures are taken to ease inter-generational transitions in the context of high youth unemployment, which includes a special aim to "ensuring and maintaining a healthy, safe and productive working environment"[60].

Nevertheless, given the scale of the challenges to be addressed when it comes to the ageing workforce, many stakeholders believed that more could have been done, particularly with regard to demographic change within the workforce. Demographic change hits certain sectors (those with a higher median age) harder and the specific nature of tasks carried out by older workers may lead to specific challenges for this particular demographic. Therefore, sector-specific solutions may be required in certain industries.

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[60]ETUC, 2019, *European Social Partners' Autonomous Framework Agreement on Active Ageing and an Inter-generational Approach* , viewed 22.01.2021, https://www.etuc.org/sites/default/files/circular/file/2019-07/European%20Social%20Partners%E2%80%99%20Autonomous%20Framework%20Agreement%20on%20Active%20Ageing.pdf.

Activities carried out by Member States

Although none of the specific actions under objective five is explicitly ascribed to MS, it nonetheless appears clear that MS were also expected to address the challenges from the ageing workforce, emerging new risks, work-related and occupational diseases. Table 16 provides a summary of the measures implemented by MS, which relate to the issues addressed by objective five.

Table 16: Overview of Member States actions on risks affecting particular age groups, disabled workers and women

	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	UK
Legal changes to address risks affecting particular age groups, disabled workers and women																												
Legal changes older workers					X																		X					
Legal changes disabled workers																												
Legal changes women workers				X								X					X											
Legal changes young workers																	X											
Policy actions to address risks affecting particular age groups, disabled workers and women																												
Policy actions older workers		X			X	X		X	X		X	X	X	X	X		X	X	X	X		X		X			X	X
Policy actions disabled workers	X	X			X							X										X						
Policy actions women at work	X																X										X	
Policy actions young workers	X																X										X	

Source: Information from national reports compiled under Task 2.

Legislative and policy changes with a focus on risks affecting certain age groups (esp. older workers, but also young workers), disabled workers and women

The paragraphs below provide a more detailed review of some of the specific legal provisions and policy initiatives to protect particular groups of workers.

Older workers

Actions to address challenges related to the ageing workforce were identified in almost all MS. These are mainly policy actions such as for example:

● The development of a cross-policy strategic document, the priority of which is promoting the active life of older people in the field of employment (Bulgaria).

● The establishment of a "*Demographic Network*" with the aim of bringing companies together to develop knowledge and share best practice on the ageing workforce (Germany).

● Awareness-raising campaigns on "Healthy jobs – regardless of age" (Estonia).

- Prioritisation of ageing workers in their general comprehensive health screening program (mobile diagnostic centre) (Hungary).

- Launch of projects to implement the comprehensive business model for active and healthy ageing with the aim to foster/enable longer working lives and decrease absence from work due to ill health (Slovenia).

- Policy actions related to the implementation of the EP pilot project on older workers and of the HWC (Czechia, Croatia, Finland, Ireland, Luxembourg, Poland and Romania).

Czechia and Portugal adopted legal measures setting more stringent health checks for older workers (i.e. compulsory health annual checks performed by occupational medicine for fifty-year-old workers, shorter intervals between two health checks for workers over fifty years old).

Several MS did **not explicitly address demographic** change in their OSH strategies and/or legislation. Different reasons for this were put forward, depending on the country in question. In Cyprus, for example, this is not viewed as a priority because the population is considerably younger than the rest of Europe, although the median age is increasing. In Denmark, no specific measures are foreseen for the ageing workforce as the national focus is on improving conditions for all workers equally. In Sweden, the perspective of the OSH legislation is that it is too late to intervene when older workers have already had injuries: the strategy is to address risk factors in time, benefiting all age groups.

Women, disabled and young workers

Some MS (Austria, Bulgaria, Cyprus, France, Slovenia) also reported legal changes and/or policy actions related to female workers. For example, in France, Article L.4121-3 of the Labour Code has been amended to integrate a differentiated evaluation of the health and safety risks in the enterprise based on gender. In Cyprus, additional provisions have been included in the relevant regulations providing protection to pregnant workers and workers who recently gave birth. In Slovenia, guidelines for mainstreaming workforce diversity into risk assessment are being developed – taking into account gender, ageing and young workers, migrant workers, disabled workers etc. In Austria, an inspection campaign on the assessment of maternity protection in large enterprises was conducted.

Specific policy actions were also identified in certain MS with regard to disabled workers (Austria, France, Poland) and young workers (Austria, Czechia, Lithuania, Slovenia). In Lithuania, children are taught to adopt safe and health working skills via educational activities and information materials, in collaboration with the LI, businesses and schools, and social media are used to communicate with the youth.

The policy approach in the Netherlands does not focus on specific age groups or specific vulnerable groups, but rather focuses on the importance of fostering each individual's employability via satisfactory and healthy working conditions. A similar approach exists in the United Kingdom, where the general outcome-based approach and focus on good implementation should be adequate to protect specific groups of workers.

Legislative and policy changes addressing the need to adapt OSH requirements to changes in work organisation

Various challenges related to the increased use of information technology and atypical contractual arrangements were highlighted by several MS (such as Austria, Bulgaria, Czechia, Denmark, Portugal, France, Latvia, Slovenia, Sweden and Malta). However, limited legal changes to adapt OSH legislation to new types of work organisation, or policy actions to address these changes, were reported. One outlier is Latvia, where the Labour Protection Law was amended to set out OSH requirements for remote work and self-

employed persons. Amendments were also made to extend the rules on the notification of occupational accidents to remote work. In Slovenia, multidisciplinary analyses have been conducted on precarious work, serving as a basis for the 2021-2023 OSH action plan.

Legislative and policy changes adapted to the risks linked to new technologies, new products and new chemicals

Both legal changes and policy actions have been taken by several MS to address the risks linked to new technologies, new products – in particular, nanomaterials – and new chemicals.

Table 17 provides an overview of legal and policy changes implemented in response to new technologies and new risks.

Table 17: Overview of national actions implemented in response to new and emerging risks (psychosocial risks, new technologies, new products, new chemicals)

	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	UK
Legal changes to adapt to new and emerging risks (psychosocial risks, new technologies, new products, new chemicals)																												
Psychosocial risks	X	X				X		X			X		X				X											X
Green technologies																												
Nanomaterials		X																										
Carcinogens and mutagens[61]						X											X									X		
Other Chemical agents		X		X	X						X						X									X		
Other (e.g. heat)		X		X									X															
Policy actions to address new and emerging risks (psychosocial risks, new technologies, new products, new chemicals)																												
Psychosocial risks					X	X											X		X			X	X	X	X	X		
Green technologies					X																		X					
Nanomaterials	X				X			X				X										X	X					X
Carcinogens and mutagens	X					X												X				X	X				X	
Other chemical agents			X			X					X	X	X	X		X				X			X			X	X	
Other (e.g. heat)								X				X			X													

Source: Information from national reports compiled under Task 2.

The measures adopted are mainly policy measures, such as issuing guidelines on managing risks related to nanomaterials (e.g. Austria), streamlining the work of labour inspections with ECHA recommendations (Slovakia), supporting research (Czechia),

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[61] This refers to measures implemented in addition to transposition of the relevant EU Directives (described under objective four).

adopting national strategies/programmes in this field (e.g. Italy, Poland), organising campaigns (e.g. Slovenia) and increasing targeted visits (e.g. Austria, Portugal).

Some MS adopted legislative changes to address these new risks. For example:

- Austria, Germany and Finland amended their OSH legislation to integrate considerations on psychosocial risks into risk assessments (e.g. involving psychologists in the identification and assessment of risks in Austria).

- In Belgium, information on nanomaterials must be registered in order to ensure information is passed along the supply chain.

- Ireland developed the "Work Positive" online tool (accompanied by some other online tools and guidance) to facilitate risk assessments regarding stress.

- Germany adopted many legislative changes related to hazardous chemicals and biological agents as well as new forms of cancers.

- In Cyprus, specific legislation has been introduced to address heat stress.

- In Sweden, a new regulation on target values for carcinogenic and mutagenic substances came into force in 2018 and was amended in 2020 to include some further substances.

- Slovenia set more and lower OELs for certain chemical agents and Slovakia adopted more stringent limit values for certain carcinogens and mutagens.

- Finally, Bulgaria has noted that the inclusion of more specific legal requirements regarding the assessment of the risk of nanomaterials exposure was needed and suggests measures should be adopted on this at EU level.

Summary of progress

Progress against this strategic objective and the specific actions identified within the Strategic Framework has been relatively steady, with a particular emphasis in recent years on the effort to tackle occupational diseases caused by exposure to hazardous chemicals. Work on chemicals legislation (described under objective 4) resulting from the ex-post evaluation of the EU OSH *acquis* was a key driver of progress in this area, as it provided momentum for initiatives aimed at raising awareness as well as sharing best practices on managing hazardous chemicals and the associated risks. Progress was also noted on addressing other types of occupational diseases, namely MSDs. However, some stakeholders considered the lack of a sufficient legislative basis an obstacle to further action.

While a lot of progress has been made under this objective, the specific focus on new and emerging risks means that there will always be more left to do.

Several points were repeatedly highlighted in stakeholder interviews:

- COVID-19 has exacerbated some existing risks and emerging trends, particularly with regard to ways of working, which have experienced a rapid shift within the last years. Working from home and teleworking are much more common, and digitalisation will continue to bring further changes, as well as further risks. This requires policy makers to look at the existing corpus of legislation and practices with a new lens, and to adapt these to the new state of play, where necessary, or to improve implementation in light of new developments. In particular, many believed that psychosocial risks and the issue of MSDs are currently not sufficiently addressed within the OSH *acquis*. However, this was not the view of employers,

who felt that these issues are better dealt with through non-legislative means and a broader approach (not only OSH), since they are affected not only by workplace factors but also to those outside the work context.

- Changes to ways of working also entail a broader definition of what constitutes a worker. The classical employer-employee model is no longer valid in many cases, as the number of self-employed workers, informal workers and workers in the gig-economy is increasing. These workers are currently not covered by OSH legislation, a gap that various stakeholders identified as requiring further action.

The 2019 ACSH opinion "Towards better health and safety in the workplace – Opinion on Future Priorities of EU OSH Policy" states: "The ACSH considers that efforts to anticipate changes in the world of work and to identify their potential impact on workers' safety and health need to be continued. In particular as regards the impact of new and growing forms of employment (e.g. self-employed, platform economy, job sharing, ICT-based mobile work) and new technologies (e.g. automation, digitalisation, robotics) and that further initiatives at the European level should be considered"[62].

2.6 Objective six: Improve statistical data collection and develop the information base

Objective six focuses on the importance of reliable, comparable and up to date data to facilitate robust and evidence-based policy making in the field of OSH. The EU Strategic Framework identifies specific challenges in the area of occupational exposure, occupational disease and ill health, in particular. As far as the European Statistics on Accidents at Work are concerned, issues were identified with regard to collecting fully comparable data at EU level, in particular for non-fatal work accidents. Objective six therefore focuses on the need for common approaches to identify and measure risks to workers' safety and health and the importance of good quality data collection across the EU.

The EU Strategic Framework indicates five main actions under Objective six. Most of the actions were to be implemented by the European Commission, with the support of competent national authorities. One action (examine options to improve information on costs and benefits of OSH) was not allocated to any specific actor.

An overview of the actions, along with the lead actor and the actors with a supporting role, is presented in Table 18.

Table 18: Summary of actions under objective six

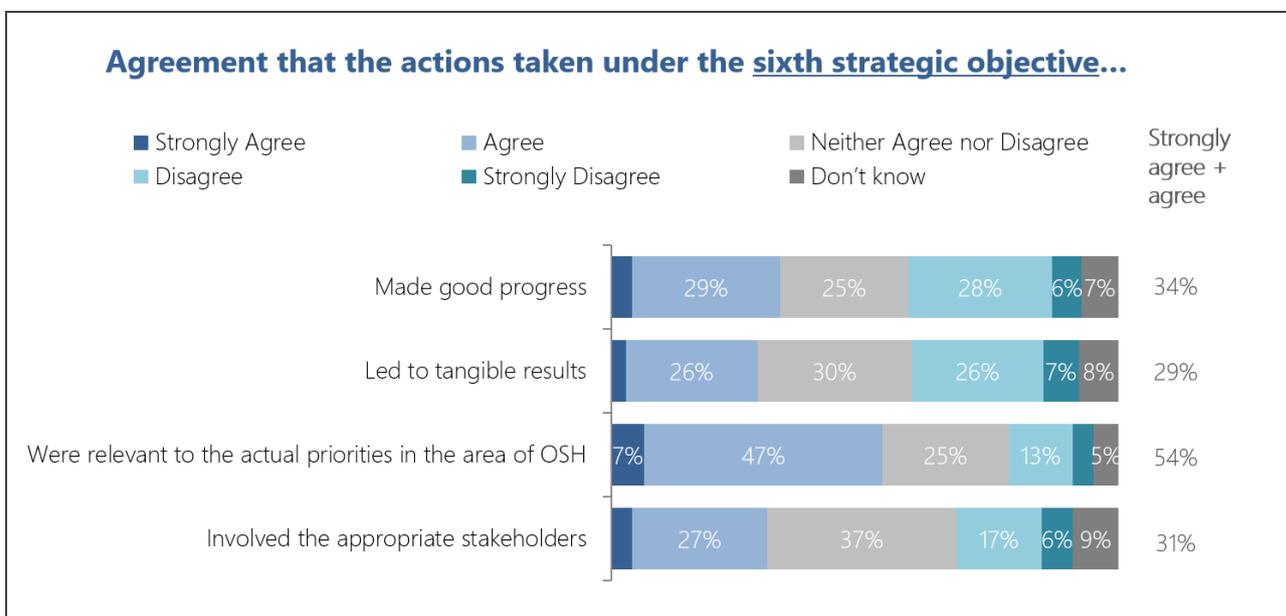| Action identified in the EU Strategic Framework	Lead actor	Supporting actor(s)
Assess and improve the quality of data on accidents at work transmitted by Member States in the framework of the European Statistics on Accidents at Work (ESAW) data collection, with the aim of improving coverage, reliability, comparability and timeliness	European Commission	Competent national authorities

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[62] European Commission, ACSH, 2019, *Towards better health and safety in the workplace - Opinion on Future Priorities of EU OSH Policy.*

By the end of 2016, examine options to improve data on occupational diseases at EU level and assess the feasibility of a simplified data transmission	European Commission	Competent national authorities
Launch discussions within ACSH on a common database on occupational exposures	European Commission, ACSH and national experts	N/A
Before 2016, examine options to improve information on costs and benefits in the area of OSH	N/A	N/A
Before 2016, develop a tool to monitor the implementation of the EU strategic framework 2014-2020, including policy and performance indicators, building on the 2009 strategy scoreboard	European Commission	ACSH

Figure 9 shows the views of OPC respondents regarding the specific actions implemented under objective six. More than half of respondents (54%) agreed that the related actions were relevant, while 34% agreed these actions made good progress, 31% agreed they involved the appropriate stakeholders and 29% agreed that they had led to tangible results.

Figure 9: Opinions on progress under the sixth strategic objective – Improve statistical data collection

Q12. Under its sixth strategic objective the EU Strategic Framework on Health and Safety at Work 2014-2020 outlined the need to improve the available data and information, inter alia by assessing and improving the availability and comparability of data on accidents at work, and on occupational diseases at EU level. (Link to EU Strategic Framework). Based on your experience, do you agree or disagree that these actions…

Figures below 5% not displayed.
Those somewhat or very familiar with the Framework (n=244-246)
Source: Public Consultation

Action one: Assess and improve the quality of data on accidents at work transmitted by Member States in the framework of the European Statistics on Accidents at Work (ESAW) data collection, with the aim of improving coverage, reliability, comparability and timeliness

Statistics on accidents at work were already available at EU level prior to the development of the Strategic Framework. During the reference period, emphasis was placed on the need to further improve data quality. Under the provisions of Regulation (EU) 349/2011,[63] MS were required to provide data quality assessments on work accidents statistics, as well as metadata sheets detailing definitions and methodologies, with a view to further improving comparability across MS. Interviewed stakeholders confirmed that having a clear legal basis for data collection has allowed them to produce consistent datasets. Metadata have been made available to the general public with information on dimensions such as coverage, accuracy, timeliness, and punctuality, in an effort to strengthen data coherence and comparability. However, interview feedback suggests that further improvements can be made, especially in relation to addressing under-reporting of non-fatal work accidents and occupational diseases. Stakeholders highlighted this as an area where methodological limitations are evident, but proposed that assumptions on the level of underreporting could be refined by using the findings from the 2020 module of the EU Labour Force Survey 2020 as a benchmark for weighted data.

In addition to this, EU-OSHA published the OSH Barometer in May 2020. The tool is the result of an initiative launched by the European Commission in 2015 to implement some of the priorities of the Strategic Framework 2014-2020, with the aim of monitoring the OSH situation in the MS on a permanent basis. In spite of existing comparability problems with regard to some data (e.g. occupational diseases), mainly due to differences in MS' reporting systems, the OSH Barometer is seen as a significant step towards making OSH data more transparent and easily accessible to relevant stakeholders and the general public. There is room for further progress – for example, indicators can be refined or expanded through a collaborative process. Ensuring buy-in from stakeholders was described as having been the key to success for the OSH Barometer. It is expected that, even though some MS have not provided data, pressure from media or social partners will lead national authorities to improve the amount and quality of data they share.

The provision of high-quality data on accidents at work at EU level is dependent on MS collecting and sharing data of sufficient completeness and quality. The national research therefore investigated the measures implemented within MS to improve the quality of this data. Findings from the national research are summarised in Table 19.

Table 19: Summary of national measures to improve the quality of data on accidents at work

	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	UK
Measures to improve the quality of data on accidents at work					X			X			X	X	X			X		X	X			X				X		

Source: Information from national reports compiled under Task 2.

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[63] European Commission, 2011, *Commission Regulation (EU) No 349/2011 of 11 April 2011 implementing Regulation (EC) No 1338/2008 of the European Parliament and of the Council on Community statistics on public health and health and safety at work, as regards statistics on accidents at work.*

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Some MS have adopted measures to improve the quality of data on accidents at work. The efforts of Poland, Spain, Latvia, Czechia, Slovenia and Finland appear particularly noteworthy in this regard:

- In Poland, the multi-annual National Programme requires the analysis of data on accidents at work and the identification of areas where improved data collection may help to reduce future accidents. In addition, information was also disseminated on the CIOP-PIB electronic database on accidents at work[64], containing, inter alia, statistical data, methodology and principles for recording and analysing accidents in Polish enterprises.

- In Latvia, the need to improve information and data for monitoring and evaluating the situation on the ground was also noted in the national strategy., The strategy entailed carrying out large-scale studies, including with European Social Fund (ESF) funding.

- Czechia plans to establish a public portal, which will contain an anonymised database of work accidents from various perspectives and will be connected with other databases to allow for comprehensive information on work accidents. Finally, an algorithm will be created to predict the occurrence of accidents and their causes.

- Slovenia is also updating the information system of the LI in order to establish a comprehensive work accidents database.

- In Finland, the system of occupational injuries is based on a reporting procedure where the employee reports his/her injury to the foreman, who fulfils the injury claim to the insurance company. The inspectors in the insurance companies check the claim before they pay the compensation to the company. The official statistics of occupational injuries are based on these compensation claims.

Some MS launched actions that have not yet been finalised or were abandoned. France, for example, launched a project intended to improve the scope of data collected since 2004. This project is still ongoing, however, without concrete results to date. In a similar vein, Italy launched the National Information System for Prevention, an IT system that would provide data for monitoring, planning, and evaluating prevention activity for work-related accidents and professional diseases by means of harmonised databases. However, full implementation of the system is still pending. In Croatia, a central OSH data processing system, to be established by the Ministry of Labour pursuant to the National Programme for OSH 2017-2020, was never adopted. In Spain, the national strategy identifies the priority of improving the statistical data and information base through the coordination of activities carried out by public authorities, such as collecting, analysing and disseminating information on the prevention of occupational risks, and those related to analysis and research in this area. Specific measures, such as developing a directory of information sources (databases, surveys and statistical registers) were planned in the 2019-2020 action plan but have not yet been implemented.

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[64] The CIOP-PIB database on accidents at work was created by the Central Institute for Labour Protection – National Research Institute, which is the coordinator of the National Programme in Poland.

__Action two: By the end of 2016, examine options to improve data on occupational diseases at EU level and assess the feasibility of a simplified data transmission__

European Occupational Diseases Statistics (EODS) are one of the domains where progress has been tangible, although relatively slow-paced. In fact, improving the availability of data on occupational diseases was highlighted as one of the main priorities in the field of data availability on OSH at EU level, although activities under this action are still in the early stages.

A pilot data collection project managed by Eurostat is underway and is currently classed as 'experimental'. It involves 24 MS that are providing data on recognised occupational diseases for a number of variables. The pilot builds on a previous attempt at building an occupational diseases dataset that started in 2000 and whose dissemination was discontinued in 2009 due to comparability issues. The new pilot, launched in 2017, seeks to overcome the harmonisation shortcomings highlighted during the previous project and established a European Index of Occupational Diseases, alongside a more detailed dataset. The pilot phase has first sought to understand differences in the recognition procedure of occupational diseases across MS and the different public or private data providers involved, a crucial step to ensure comparability across national datasets. The pilot relies on voluntary contributions from MS, in the absence of a specific implementing regulation to collect and share statistics under Regulation (EC) 1338/2008 on Community statistics on public health and health and safety at work. Currently, data is published at EU-aggregate level from 2013 onwards. EODS country profiles were published in the first half of 2021.

Overall, stakeholders consulted (particularly OSH experts, EU agencies and workers) on the issue of data collection on occupational diseases agreed that the main factors that have hindered more significant progress in this area were:

- the lack of shared definitions;

- the absence of binding requirements on MS;

- the absence of national provisions on data collection in relation to occupational diseases.

The main obstacles to creating a European dataset related to the question of which diseases are recognised as occupational diseases within MS and according to which diagnostic and administrative criteria – areas where there are significant discrepancies. Some interviewees highlighted that as this is a national competence and often linked to social security payments, these discrepancies are logical, and the issue may be difficult to solve.

As with accidents as work, high quality data on occupational diseases relies on the provision of complete and comparable data by MS. Findings from the national research, which identified attempts at MS level to improve data on occupational diseases, are summarised in Table 20.

Table 20: National actions to improve data on occupational diseases

	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	UK
Measures to improve data on occupational diseases			X													X							X	X				

Source: Information from national reports compiled under Task 2.

Overall, a few MS appear to have initiated some actions to improve data on occupational diseases during the reporting period:

- Bulgaria plans to adopt a national register of employees exposed to asbestos and to conduct a series of surveys to ensure health surveillance.

- France plans to create a national network of vigilance and prevention of professional pathologies to detect new and emerging risks.

- Portugal is developing a system of statistical indicators using the European Occupational Disease Statistics methodology.

- Romania planned to update and develop an electronic national register for occupational diseases over the period 2018-2020.

- In Italy, a number of initiatives were introduced during the 2014-2019 period, including:

  o the expansion and standardisation of the data of the Italian National Mesothelioma Register (ReNaM);

  o the launch of the National Nasal and Sinus Cancer Register;

  o the launch of MALPROF, a non-compensation-based database of medical complaints and compensation claims for occupational diseases maintained by INAIL (Istituto nazionale Assicurazione Infortuni sul Lavoro); and the Physical Agents Portal, which aims to collect information for the assessment and prevention of risks such as noise, hand-arm vibrations, whole-body vibrations, electromagnetic fields, and artificial or natural optical radiation.

Action three: Launch discussions within ACSH on a common database on occupational exposures

Progress in relation to a database on occupational exposures has been limited. A pilot study (HazChem@Work) was conducted to estimate occupational exposure levels for a list of hazardous chemicals and to produce a database. In 2018, EU-OSHA explored the feasibility of progressing the project further. Industry stakeholders pointed out that another work strand in the field of occupational exposures is seeking to assess the level of exposure to carcinogens based on a computer-assisted telephone survey. They also noted that this approach could be a source of concern insofar as it relies on assessed rather than measured exposure.

Action four: Before 2016, examine options to improve information on costs and benefits in the area of OSH

At EU level, EU-OSHA has released a visualisation of costs and benefits of OSH that relies on a study carried out by the ILO, the Finnish Ministry of Social Affairs and Health (MSAH), the Finnish Institute of Occupational Health (FIOH), the WSH Institute in Singapore, the International Commission on Occupational Health (ICOH) and EU-OSHA. The aim of this tool is to develop updated worldwide costs and benefits estimates for work-related injuries and illnesses. The statistics are based on available data at international level, mainly relying on the World Health Organisation (WHO) and ILO data sources. An ACSH working party, which was due to be set up on this issue, has not yet been established.

Table 21 provides an overview of initiatives implemented in MS to improve information on costs and benefits related to OSH.

Table 21: Measures to improve information on costs and benefits in the area of OSH in Member States

	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	UK
Measures to improve information on costs and benefits in the area of OSH	X				X	X						X							X							X		

Source: Information from national reports compiled under Task 2.

Based on the information at the study team's disposal, a few MS have adopted measures to improve information on costs and benefits in the area of OSH during the reference period:

- Czechia set up a working group on the costs of accident at work, to establish an effective and transparent assessment methodology.

- In Latvia, the costs and benefits evaluation of proposed legislation and policy documents (including, thus, the National Strategy and Strategic Action Plans) is a legal requirement.

- In France, the impact evaluation of policies at regional level is published in regional OSH dashboards, while the national plan is regularly evaluated. A final evaluation report will be published mid-2021. Measures adopted include the creation of research programmes and a doctoral study programme on OSH subjects.

- In Germany, the overall achievements and each of the three work programmes of the German Strategy are evaluated, including their costs and benefits.

In Austria and Spain, some evaluations on OSH were / are being carried out, but the results are not publicly available. In Austria, there is one specific accompanying evaluation for the actions of the National Strategy with regard to carcinogenic working materials; however, the results are not public. In a similar vein, in Spain, there is an evaluation process at the end of each two-year OSH action plan, but no evaluation results seem to have been made publicly available. On the other hand, though, in Austria, the Austrian Chamber of Labour published the estimation of costs.

Action five: Before 2016, develop a tool to monitor the implementation of the EU strategic framework 2014-2020, including policy and performance indicators, building on the 2009 strategy scoreboard

In 2015, the European Commission launched an initiative to implement some of the priorities of the Strategic Framework 2014-2020, with the aim of monitoring the OSH situation in the MS on a permanent basis. This initiative led to the development of the OSH Barometer, which was launched in 2020. The OSH Barometer helps to provide an overview of the situation in MS and the extent to which their policies and strategies align with the EU Strategic Framework. However, the OSH Barometer is not designed to monitor progress against all objectives and actions defined in the Strategic Framework, meaning there is still a gap in terms of monitoring overall progress.

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Summary of progress

Progress against the actions under Objective six has generally been consistent, although at times it has been slow-paced, primarily due to divergences in data reporting and occupational disease recognition practices at national level. Work has been carried out to improve the reporting of data on accidents at work, and results have emerged from initiatives to improve the availability of datasets on occupational diseases at EU level.

Among the most significant achievements are the publication of an EU index of occupational diseases (EODS data collection), and two data visualisation tools published by EU-OSHA, one on costs and benefits related to OSH, and the other on OSH country profiles (the so-called 'OSH Barometer'). Preliminary work has also been carried out with a view to establish a database of occupational exposure, although progress in this area has been limited. One of the main aims of the OSH Barometer is to create a permanent monitoring tool for the assessment of OSH achievements at MS level, including the impact of EU policy initiatives such as the Strategic Framework 2014-2020. The system includes, among other things, a dedicated and periodically updated section on national OSH strategies, which also reflects the way Members States have implemented the priorities of the EU Strategic Framework 2014-2020 in their national policies.

Clear progress has been made on improving statistical data collection at EU level, but much remains to be done. Accidents at work and occupational diseases are the two main areas of where progress has been most tangible. In the efforts made to improve data collection and data availability at EU level, a clear obstacle is the application of different definitions and data collection practices across the MS, which undermines harmonisation efforts but may be inevitable, given that it is a national competence. At national level, a limited number of MS have adopted measures to improve the statistical data collection and develop the information base. Most of these measures concern the improvement of the quality of data on accidents at work. Almost no measures were adopted to improve data on occupational diseases.

Objective seven: Better coordinate EU and international efforts to address OSH and engage with international organisations

Objective seven of the EU Strategic Framework on Health and Safety at Work 2014-2020 seeks to increase and improve the coordination and alignment of EU efforts to address OSH with those of other actors at (the) international level. Within the EU Strategic Framework, six concrete actions were defined to work towards objective seven, all of which fell within the remit of the European Commission. These are described in Table 22.

Table 22: Summary of actions under Objective seven

Action identified in the EU Strategic Framework	Lead actor	Supporting actor
Continue to support candidate countries during accession negotiations on chapter 19 and potential candidate countries benefiting from a Stabilisation and Association Agreement in their efforts to align their OSH legislation with EU law	European Commission	N/A
Strengthen OSH cooperation, in particular with the ILO, but also the WHO and the OECD	European Commission	N/A
Launch a review of the Memorandum of Understanding with the ILO to better reflect OSH policy	European Commission	N/A
Contribute to implementing the sustainable development chapter of EU free-trade and investment agreements regarding OSH and working conditions	European Commission	N/A
Address, notably jointly with the ILO, OSH deficits in the global supply chain and contribute to G20 initiatives on safer workplaces in this regard	European Commission	N/A
Strengthen ongoing cooperation and dialogue on OSH with strategic partners	European Commission	N/A

As shown in Figure 10, about four in ten OPC respondents (42%) believed that the actions implemented under objecive seven were relevant, while 35% agreed that they involved the appropriate stakeholders, 28% agreed that they had made good progress, and 22% agreed that they had led to tangible results.

Figure 10: Opinions on progress under the seventh strategic objective – Better coordinate EU and international efforts

Q13. Under its seventh strategic objective, the EU Strategic Framework on Health and Safety at Work 2014-2020 identified several actions to better coordinate EU and international efforts and to promote occupational safety and health (OSH) in the world and to strengthen support to candidate countries and international cooperation. (Link to EU Strategic Framework). Based on your experience, do you agree or disagree that these actions…
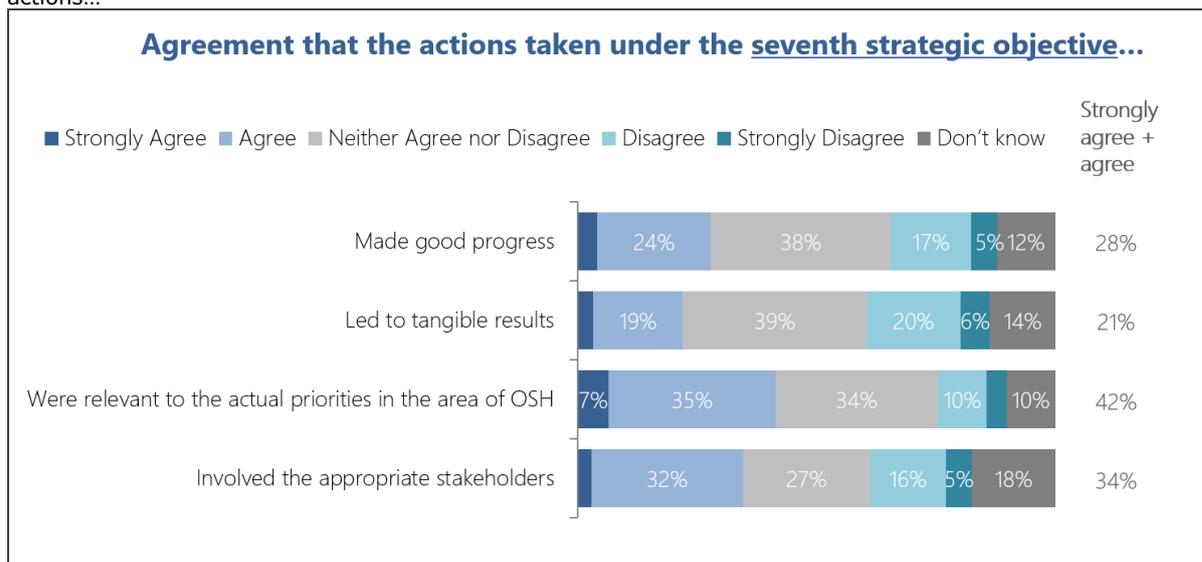
Figures below 5% not displayed.
Those somewhat or very familiar with the Framework (n=240-244)
Source: Public Consultation

Action one: Continue to support candidate countries during accession negotiations

Units within the Directorate-General for Employment, Social Affairs and Inclusion (DG EMPL) are working with candidate countries (including Montenegro, Serbia, Albania and North Macedonia) to support them during accession negotiations by ensuring alignment of legislation, including alignment with chapter 19 (Social policy and employment) of the *acquis.*

Action two: Strengthen OSH cooperation with the ILO, WHO, and OECD

OSH cooperation between the European Commission and the International Labour Organisation (ILO) has been strengthened through several joint initiatives. In February 2021, both parties signed a renewed exchange of letters to update that framework for cooperation between the two entities. This explicitly named the promotion of occupational safety and health and decent working conditions, including across global supply chains, as a key priority.

The European Commission (through DG EMPL, as well as through the Directorate-General for International Partnerships) is a member of the Global OSH Coalition, and has been (since 2014) one of the donors of the Vision Zero Fund (VZF). Further collaboration and cooperation between the European Union and the ILO can be seen in the scope of SLIC and EU-OSHA, where the ILO acts as an observer. ILO representatives are also invited to present at SLIC's annual thematic days and SLIC Plenaries. The European Commission also supports the work of the ILO and WHO on the update of chemical safety data cards.

Additionally, cooperation and alignment have increased among the ILO, the WHO, EUROSTAT and EU-OSHA. This relates to the area of data collection, where estimations are sought of the burden caused by work-related injury and disease.

Cooperation has been aided by the fact that the objectives of the EU Strategic Framework on Health and Safety at Work 2014-2020 reflected the ILO Conventions. For example, the EU and its MS supported the latest ILO declaration[65] (from 2019) that acknowledged OSH as fundamental for decent work. The Commission has proposed a Council Decision authorising Member States to ratify, in the interest of the European Union, the Violence and Harassment ILO Convention of 2019 (No. 190)[66]. Additionally, in November 2018 the EC and ILO organised a joint high-level conference on the subject of workers and OSH.[67] This was intended to promote ratification of the 2011 Domestic Workers Convention (No. 189).

Action three: Review the MoU with the ILO to better reflect OSH policy

A Memorandum of Understanding (MoU) between the EU, the European Investment Bank (EIB) and the ILO was established in 2015. However, despite the increasing cooperation between the EU and the ILO, the action to review the MoU between the two to better reflect OSH policy has not progressed as far as might have been expected during the EU Strategic Framework's implementation period. However, stakeholders reported that work towards this is being carried out and the process of review is ongoing.

Action four: Contribute to implementing OSH commitments in EU free-trade and investment agreements

The European Commission's efforts to contribute to implementing OSH commitments in EU free-trade and investment agreements bore fruit in negotiations for the Comprehensive Economic and Trade Agreement (CETA) between Canada and the EU, where OSH issues were given particular relevance in several articles of Chapter 23, as well as in the Economic Partnership Agreement between the EU and Japan. Furthermore, provisions on OSH are also to be included in free-trade agreements currently being negotiated. Interviewees from the EU and international institutions reported that the European Commission, following a review from 2018 of the EU's trade and sustainable development chapters, has worked hard to ensure that fundamental ILO conventions are included in free-trade agreements. However, although the inclusion of OSH requirements was hailed as a success, some interviewees (including workers' and employers' representatives, and OSH experts) raised questions on the extent to which the implementation of these requirements can be monitored. The fact that OSH is not one of the Fundamental Principles and Rights at Work is seen by some as an obstacle to ensuring a more active approach to push for

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[65] ILO, 2019, *Centenary Declaration for the Future of Work*, available at: https://www.ilo.org/global/about-the-ilo/mission-and-objectives/centenary-declaration/lang--en/index.htm

[66] https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A52020PC0024.

[67] For more information, visit:
https://ec.europa.eu/social/main.jsp?langId=en&catId=88&eventsId=1360&furtherEvents=yes.

implementation. In its follow-up work to the Centenary Declaration (described under action two)[68], the ILO is proactively addressing this concern.

Action five: Address OSH deficits in the global supply chain and contribute to G20 initiatives

Some progress was also noted on the action to address OSH deficits in the global supply chain and contribute to G20 initiatives. The European Commission has developed and supported a number of projects on corporate social responsibility and global supply chains, such as the ILO-EU project "OSH in Global Supply Chains". The European Commission, through its membership of the G20, is contributing to bringing attention to OSH. In 2020, the G20 ministers affirmed their commitment to sharing best practices on OSH and on mitigating measures to improve occupational safety and health policies to protect workers' representatives, including those that have been impacted by COVID-19.

Action six: Strengthen ongoing cooperation and dialogue on OSH with strategic partners

In addition to the increased cooperation with multilateral organisations (ILO, WHO), cooperation and dialogue with some strategic partners has also been strengthened. The European Commission has held annual joint events with China and cooperates on other bilateral initiatives related to OSH. Similarly, dialogue with the United States of America as another key strategic partner is considered very relevant. This has been implemented through joint events such as the 8th EU/US Joint conference in September 2015, although collaboration has fallen off since 2016.

Summary of progress

Although there are some different views among stakeholders with regard to the importance of objective seven, notable progress can be observed in this area – particularly with regard to cooperating on data collection and the inclusion of OSH in international free trade agreements.

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[68] ILO, 2021, *Follow-up to the resolution on the ILO Centenary Declaration for the Future of Work: Proposals for including safe and healthy working conditions in the ILO's framework of fundamental principles and rights at work*, available at : https://www.ilo.org/wcmsp5/groups/public/---ed_norm/---relconf/documents/meetingdocument/wcms_769712.pdf

3 Study Findings

This section presents the main findings emerging from the triangulation of research findings. It provides detailed responses to each of the questions in the research framework and findings on the EU Strategic Framework's relevance, effectiveness, coherence and EU added value.

3.1 Relevance

This section considers the relevance of the EU Strategic Framework within the context of the needs and priorities of stakeholders at both EU and national level. It includes an analysis of the extent to which the relevant issues were identified and appropriately addressed, as well as the extent to which the appropriate actors were involved in the design of the EU Strategic Framework and the implementation of the actions identified.

Evidence from the national and EU-level data collection points to a clear consensus that a strategic framework for OSH at European level was and remains highly relevant, both to help ensure consistency between MS in terms of worker protection and to elevate the importance of workplace health and safety in national policy debates. Most stakeholders consulted for this study appreciated the broad scope and flexibility of the current EU Strategic Framework that covers most of the priority issues identified at national level. However, some interviewees felt that a more robust, strategy or policy would have been desirable, with a reduced number of key priorities, and/or more specific objectives and targets.

The three main challenges and the associated seven key strategic objectives identified in the EU Strategic Framework were largely perceived as corresponding to the main problems and challenges facing the EU in the area of safety and health at work. Additionally, there was strong support for including concrete actions and named actors responsible for their implementation. However, views were more divided on whether the actions and the actors identified to carry them out were sufficient to pursue the strategic objectives. Some stakeholders underlined a lack of ownership for and accountability regarding implementation of some of the actions in the EU Strategic Framework.

3.1.1 Were the objectives of the Strategic Framework chosen adequately?

Do the three main challenges identified in the Framework correspond to the main challenges perceived by key stakeholders?

The EU Strategic Framework identified three main challenges which were "common across the Union" in 2014 and therefore merited coordinated action at EU level. These are:

- Improving the implementation record of MS, in particular by enhancing the capacity of micro and small enterprises to put in place effective and efficient risk prevention measures;

- Improving the prevention of work-related diseases by tackling existing, new and emerging risks;

- Tackling demographic change.

Findings from Tasks 2 (national mapping), 3 (EU mapping), 5 (OPC) and 6 (review of national implementation reports) suggest broad agreement from all stakeholders that these challenges reflected the main issues being faced within the EU at the time of adoption.

Over three quarters of OPC respondents (78%) agreed that the EU Strategic Framework focussed on the key challenges and issues in the area of OSH. Disaggregation of findings per stakeholder types did not reveal significant disparities across stakeholder groups on this issue. When prompted specifically about the three main challenges identified in the Strategic Framework, a vast majority of OPC respondents reported that they were important priorities. Indeed, 91% of respondents expressed support for addressing health and safety issues such as the ageing of the workforce and new emerging risks (with 60% describing this as very important and 31% as important).

This is corroborated by feedback from interviewees at EU and national level, who highlighted the relevance of these challenges at the time of adoption and the importance of a coordinated approach to solving them. As can be seen in Section 2.1, most national strategies reference with some or all of the key challenges described in the EU Strategic Framework.

The implementation review in section 2 underscores a number of **ongoing difficulties associated with both understanding the prevalence of work-related diseases and identifying relevant risks**. Improving data collection and increasing the comparability of data, in order to better understand the prevalence of work-related diseases and to help identify existing as well as new and emerging risks remains a significant challenge at EU and national levels.

Demographic change within the workforce remains a significant challenge as the European population ages and many MS increase the official retirement age. In many areas, the ageing workforce reflects a broader trend towards more sedentary, desk-based professions (which are viewed as less strenuous for older workers). However, these changes carry their own risks – particularly with regard to MSDs and psychosocial concerns. Additionally, a significant proportion of the workforce still carry out physically strenuous jobs, which may place increased strain on older workers. At the same time, active ageing is an important topic, to ensure the focus is on the capabilities of workers of all ages, to work longer in a healthy and productive way.

The national mapping also showed that a number of MS have **adopted advanced policies connected to issues** identified in the EU Strategic Framework in their own national strategies. These include additional issues (present in the objectives of the EU Strategic Framework but not explicitly identified as challenges) such as PSR, MSDs, new chemical substances like nanomaterials, and other concerns related to changes in the world of work (many of which are highlighted in Section 3.1.2 below).

Are those challenges still the most relevant, or have other issues emerged?

There is a general consensus that the **challenges identified in the EU Strategic Framework remain relevant.** Most stakeholders interviewed at EU level, as well as a majority of OPC respondents, support a continued focus on the challenges described in the current EU Strategic Framework in a future iteration. A number of additional challenges have been identified, which merit consideration for inclusion in a future Strategic Framework.

In this section, we therefore provide an overview of the emerging challenges that have been reported by more than one MS in the national mapping and have been corroborated by feedback from OPC respondents and/or in-depth interviews at EU level. Different stakeholder groups (particularly those representing workers and employers) expressed different opinions, however, with regard to which challenges should be prioritised, how they should be addressed, and the extent to which action at EU level is appropriate.

The main emerging priorities identified for consideration in a future EU Strategic Framework can be summarised as follows:

Priorities that have increased in significance since 2014

- More research into the prevalence and causes of **occupational diseases, PSR and MSDs** as well as adapting legislation and assessing how research, awareness-raising, exchange of good practice, benchmarking and other tools can help to prevent them remain important priorities. Indeed, at least eight Members States identified psychosocial risks and/or MSDs as a key legal/policy priority in their national OSH strategies. This appeared as particularly important across all stakeholder groups, especially as the incidence of all three can be expected to be further exacerbated by a number of other emerging priorities described in the following bullet points.

- **Increased digitalisation (including the development of artificial intelligence, automation, robotisation, use of digital tools, etc.),** which is changing the type of work carried out by humans. Digitalisation can bring benefits in terms of allowing humans to do less dangerous, dirty and monotonous tasks, as well as giving them more autonomy and flexibility. Conversely, it poses challenges in terms of ensuring that workers have the right skills to do different tasks and of ensuring a positive interaction between machines and humans. It can also lead to an increase in MSDs and other occupational diseases due to a more sedentary working lifestyle. Fears have also been raised around increased surveillance by employers and less autonomy for workers. The emergence of artificial intelligence, in particular, is already changing traditional workplace hierarchies and some social partners have raised concerns around the psychological impacts of humans being effectively "managed" by machines.

- **New patterns of work** (for example, increased atypical labour) are linked to increased digitalisation. This has led to the rise of the so-called "gig economy", with opportunities for more flexible working arrangements. However, NCAs, workers' representatives and OSH experts report that many workers are being denied OSH protection by their role as bogus-self-employed contractors often doing multiple jobs for multiple employers. This is characterised by interaction between those requesting the work and those providing it often being depersonalised and automated through online platforms. Employers pointed to the need to ensure OSH is addressed in all situations, and to the importance of EU-OSHA's role in further identifying and analysing new risks and opportunities.

Priorities reflecting the needs of a diverse European workforce

- **The gendered impacts of OSH**, which a number of stakeholders (especially NCAs, workers' representatives and OSH experts) noted, has not been paid enough attention thus far. This can be seen in the different types of jobs men and women carry out. For example, in jobs with less oversight, such as cleaners and carers who work in people's homes, or (often pseudo-self-employed) beauticians and hairdressers, women are overrepresented compared to men. The prevalence of domestic carers and other positions in the healthcare sector can be expected to increase further in future as the population ages. Additionally, evidence is emerging that increased teleworking may affect women disproportionately, both in terms of psychosocial risks (linked to increased pressure from combining domestic and professional responsibilities) and their physical safety (as working from home increases exposure to domestic violence, and brings this into the professional sphere). Employers highlight the importance of differentiating between the impacts of different risk factors on men and women from the impacts of behaviour patterns

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related to gender, but not to risk factors. Social and cultural issues have an impact on occupational health and safety, but should be addressed in the fields where they are generated.

- **Ensuring OSH protection is fit for purpose with regard to different types of workers.** This particularly applies to migrant workers, those employed in the gig economy, platform workers and those working in the domestic sphere (including in-home private carers, cleaners and teleworkers).

Other priorities raised

- **Improved preparedness for shock events** with potentially significant repercussions in the area of occupational health and safety, such as health crises and climate change events. The outbreak of the COVID-19 pandemic was perceived as having been a useful stress test of the current OSH framework, with some stakeholders describing it as having "highlighted the cracks in the existing system". Acting as an exacerbating factor, it increased the speed of certain existing trends[69] and highlighted the benefits and limitations of the existing system[70].

- **The increasingly international and globalised nature of** work creates a new paradigm where companies are operating increasingly in global markets and may be competing with firms that are based and managed outside the EU.

- A number of stakeholders (representing workers, NCAs and OSH experts) called for reframing the current challenges and objectives around the simplification of OSH legislation. It was mentioned that key issues revolved around **modernising OSH legislation and improving its accessibility** to a variety of stakeholders to ensure better compliance. It was mentioned for instance that more could be done to ensure that the legislation is readable and can be interpreted by a wider range of stakeholders, including MSEs.

- Finally, some stakeholders underlined the **need to continue to consider traditional OSH challenges** (including workplace accidents in the agricultural and construction sectors and risks such as falling from heights) that risk being overlooked if a future Strategic Framework prioritises emerging risks too strongly.

Were the objectives and challenges selected and defined in a way that was in line with the main needs of, and conducive to facilitating action by, key stakeholders?

The approach taken to designing the EU Strategic Framework on Health and Safety at Work 2014-2020 involved **significant consultation with national competent authorities and cross-sectoral social partners through existing structures** (such as the ACSH and social dialogue). It also included an open public consultation involving a broader range of stakeholders, an ex-post evaluation of the preceding strategy and other formal and informal outreach to various stakeholders.

Feedback from all stakeholder groups consulted for this evaluation suggests that **nearly all relevant stakeholders were given sufficient opportunity to engage with the formal process of developing the Strategic Framework**, and that the combination of engagement activities was appropriate and sufficient. However, some raised concerns that although cross-sectoral partners were appropriately involved, sectoral social partners could have been more closely integrated into discussions around the design and implementation

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[69] e.g. an increase in teleworking, a blurring of the boundaries between the professional and the private persona.

[70] e.g. the extent to which current OSH legislation and structures are able to protect all workers.

of the EU Strategic Framework. While some social partners considered the Strategic Framework flexible enough to meet the needs of all stakeholders, others raised concerns that the final product, however, may have been watered down by other political considerations.

Some workers' representatives also raised concerns that they had not been given enough opportunities to feed into the development of the EU Strategic Framework at the (very early) design phase. While recognising the importance of the public consultation and other outreach activities, some suggested that proposals were being presented to them more as a "fait accompli" than at a point where they might have had an opportunity to shape the EU's approach. Some stakeholders (representing workers, employers and NCAs) also expressed concerns that although the consultation process engaged with all formal participants in the tripartite structure, this did not necessarily cover workers or employers identified as being most likely to be non-compliant. Specific examples of those not included were migrant workers, casual workers (i.e. those not in permanent or regular employment) and employers who are not members of professional associations.
.

The EU Strategic Framework was praised in consultations for its conciseness, clarity and flexibility, with a clear structure focused on the challenges, objectives, actions and actors. This is corroborated by the OPC findings, showing that 58% of respondents agreed (and fewer than 10% disagreed) that the structure and formulation of the EU Strategic Framework was clear. However, when comparing different respondent groups, it can be observed that employers and employers' associations were relatively less likely to agree that the EU Strategic Framework was clearly formulated and structured (49% agreed, compared to 78% of public authorities and 70% of workers' associations).

Views were divided on whether the objectives and challenges were defined in a way that was conducive to facilitating action by key stakeholders. Just under half (43%) of OPC respondents agreed that the Strategic Framework ensured involvement and ownership from its various stakeholders. Public authorities were more likely to agree that the EU Strategic Framework ensured involvement and ownership from the stakeholders compared to both workers' associations and employers / employers' associations (respectively 63%, 44% and 43% agreed). Employer and workers' representatives reflected these concerns in interviews carried out for the EU and national mapping.
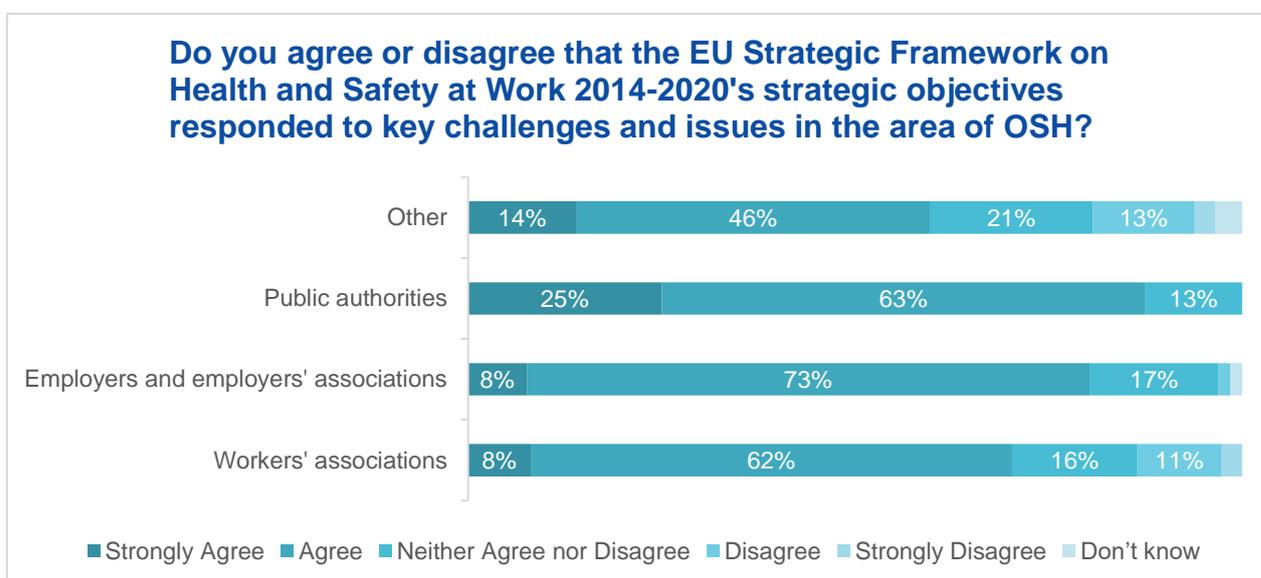
The very existence of **a Strategic Framework at EU level was viewed an important factor to help ensure continued attention to OSH** and progress on implementation at national level, particularly for national authorities and social partners. Employers also highlighted the importance of drawing lessons at EU level from national OSH strategies that work well. Some stakeholders (representing some national authorities and workers' representatives) expressed a preference for a more concrete strategy or policy at EU level, which they believed would be a more robust way of holding relevant actors accountable. Criticism of the current Framework concerned a lack of accountability with regard to implementation; a perceived focus on procedural elements rather than long-term goals; and what some saw as a passive "continuation" of existing activities rather than a proactive attempt to concretely address the specific challenges identified. In order to facilitate more ambitious action, these stakeholders preferred a more "robust" strategy with clearer priorities, targets and timeframes for implementation, accompanied by concrete indicators. Additionally, employer representatives expressed a desire that actors named as responsible for specific actions should be held accountable and required to provide updates on their progress in implementation.

Did the seven strategic objectives correspond with the main problems and challenges facing the EU in the area of safety and health at work during the period 2014-2020?

The seven **strategic objectives were largely perceived as corresponding to the main problems and challenges facing the EU** in the area of safety and health at work. Indeed, 70% of OPC respondents agreed that these objectives responded to the key challenges facing the EU during the 2014-2020 period. Specifically, more than 80% of respondents perceived facilitation of compliance with OSH legislation (objective two), better enforcement of OSH legislation by EU MS (objective three), the improvement of statistical data collection and the development of the information base on work related accidents and diseases (objective six) to be important or very important.

While agreement varied across stakeholder groups – with public authorities (88%) and employers and employers' associations (81%) more likely to agree with this statement than workers' associations (70%) or other stakeholders (60%) – the seven strategic objectives were always perceived by a majority of respondents to respond to key issues in the area of OSH.

Figure 11: Opinions on relevance across strategic objectives

Do you agree or disagree that the EU Strategic Framework on Health and Safety at Work 2014-2020's strategic objectives responded to key challenges and issues in the area of OSH?

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Don't know
Other	14%	46%	21%	13%		
Public authorities	25%	63%	13%			
Employers and employers' associations	8%	73%	17%			
Workers' associations	8%	62%	16%	11%		

Figures below 5% not displayed.
Those somewhat or very familiar with the Framework (n=240-247)

Source: Public Consultation

A strong indicator of the EU Strategic Framework's overall relevance is the extent to which national OSH strategies align with it. The box below provides an example of two MS (Poland and Spain) whose strategies shows clear evidence of having been inspired by the EU Strategic Framework.

National OSH strategies inspired by the EU Strategic Framework

The first objective of the EU Strategic Framework is entrusted to MS, which are encouraged to review their national OSH strategies in light of this framework. Poland and Spain provide good examples of national OSH strategies that are closely aligned with the EU Strategic Framework, suggesting strong complementarity between OSH priorities at national level and those identified at EU level.

The Polish National Programme is multi-annual and organised around three-year periods since its first stage achieved in 2010. Currently, stage five is being implemented for the years 2020 to 2022. In Spain, the Spanish Strategy on Occupational Safety and Health 2015-2020 is also flexible and is implemented via two-year Action Plans.

The main challenges identified by the national competent authority in Poland strongly reflect the challenges and issues identified in the EU Strategic Framework. These include: the rapid ageing of the workforce, psychosocial risks linked to changes in the working environment, the development of new technologies, atypical forms of employment, MSDs and risks associated with exposure to chemical substances.

The Polish National Programme makes a direct reference to the EU Strategic Framework in the development of the National Programme. In terms of strategic objectives, four objectives set out by the Strategic Framework are fully integrated in the fifth stage (Objectives 2 to 5). Objective 1 has been implemented by the adoption of the National Programme and objective 7 has not been specifically addressed considering that the actions are to be addressed at EU level. Objective 6 on the improvement of statistical data collection and development of the information base is the only objective that has not been specifically reflected in Poland.

In Spain, the coherence of the national strategy with the EU Strategic Framework was described as high, and the Framework has been an important source for the negotiations on adoption of the strategy. As a result, the challenges and objectives of the EU Strategic Framework are all reflected in the national OSH strategy, but with different weight. The first (improvement of the implementation record, SMEs) and second (prevention of diseases, new and emerging risks) key challenges of the EU Strategic Framework, and its second and fifth objectives are particularly prominent, considering the relevance of the implementation of OSH legislation in SMEs and the rates of workplace cancers. Conversely, the third challenge of tackling demographic change is not reflected as clearly. In the interviews it was mentioned that there had been a perceived lack of prioritisation for keeping elderly people in employment, possibly in view of the high youth unemployment levels in Spain.

Nevertheless, areas of development and issues relevant at national level remain unexplored in the EU Strategic Framework, i.e., in Poland, the high prevalence of accidents in traditional sectors and enforcement by self-employed workers and small family businesses. In Spain, other areas include risks related to traffic, risks that younger workers, immigrants and women face and the need to strengthen intra-company collaboration of workers and employers.

These two examples illustrate the role of the EU Strategic Framework in the adoption of national strategies and the adaptability of its challenges and objectives to the national circumstances.

Respondents to the OPC were broadly supportive of all the priorities in the current EU Strategic Framework. In particular, 91% of respondents described addressing health and safety issues such as the ageing of the workforce and new and emerging risks (objective five) as either very important (60%) or important (31%). The facilitation of compliance with OSH legislation (objective two), better enforcement of OSH by EU MS (objective three), the improvement of statistical data collection and the development of the information base on work related accidents and diseases (objective six) were also perceived to be important or very important by more than 80% of respondents.

Findings from the qualitative consultations with stakeholders showed broad agreement on the perceived relevance of **objectives three** (better enforcement of OSH legislation) **and five** (address key challenges and risks) across stakeholder groups, both at national and EU-level. However, interviews with EU agencies, national representatives and workers identified **a gap around psychosocial risks and MSDs**, which were perceived by many as not having been focused on explicitly enough within Objective 5.

While evidence from the qualitative consultations with national and EU-level stakeholders confirmed the trend observed in the OPC results, **there was a degree of variation in the opinions expressed between key stakeholder groups**:

- Perceptions regarding the relevance of **objective two** (facilitate compliance with OSH legislation) varied considerably depending on the type of stakeholder interviewed. Social partners (especially those representing employers) both at national and EU-level viewed it as an essential part of the Strategic Framework, while others (national competent authorities, employers, workers and OSH experts) expressed doubts regarding the extent to which the EU can have an impact on compliance at national level. All stakeholders agreed, however, on the need for a greater focus on compliance with and implementation of legislation in order to ensure that the safeguards guaranteed under OSH legislation are realised in practice.

- There were also some different views amongst stakeholders regarding the relevance of **objective four** (simplify existing OSH legislation). On the one hand, there is concern that an unnecessary focus on reducing perceived "red tape" is leading to a weakening of protection for workers. On the other hand, there are concerns that legislation which is perceived as too complex or difficult to implement may lead to safeguards which only exist on paper and do not reflect the realities on the ground. Finally, and as mentioned above, some stakeholders are calling for a reframing of this objective to focus on modernising OSH legislation and increasing its accessibility to wider stakeholders.

- A few interviewees, representing social partners (representing workers and employers), questioned the importance of **objective seven** (better coordinate EU and international efforts), suggesting that the primary focus of the EU Strategic Framework should be on EU activity. For others, however (including interviewees from international organisations, employers and some EU bodies), the international perspective is a vital component of the EU's health and safety obligations. This was highlighted by some as particularly important considering the global nature of many supply chains and the importance of ensuring companies within the EU are not being undercut by companies headquartered outside of the EU, in a country with lower health and safety standards.

### 3.1.2 Were the actions / actors identified to pursue these objectives appropriate?

To what extent were the actions (1) relevant, (2) necessary and (3) sufficient to achieve their respective objectives?

The actions identified to achieve the seven strategic objectives can be generally judged to be both relevant and necessary.

A review of OPC responses highlights qualified agreement that the actions taken under the EU strategic objectives were *necessary and relevant* to the actual priorities in the area of OSH, with some disparities being observed across the seven strategic objectives. On the whole, these disparities were in line with the variations in stakeholder views observed in the section above on the relevance of the objectives themselves The actions under objective 5 were found to be most relevant (with 56% of OPC respondents agreeing they were relevant). The actions under objectives 7 and 4 were found less relevant (with 42% and 36% of OPC respondents, respectively, agreeing they were relevant).

Figure 12: Opinions on relevance of actions across strategic objective

Q7a-Q13. Based on your experience, do you agree or disagree that these actions…:
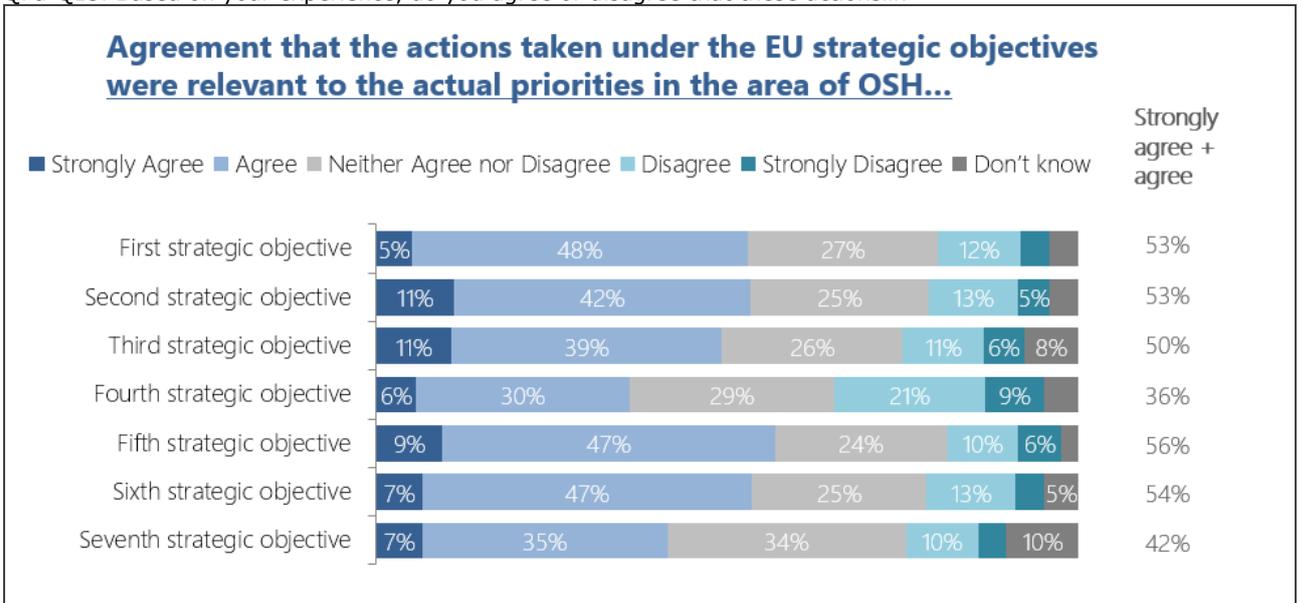
Figures below 5% not displayed.
Those somewhat or very familiar with the EU Strategic Framework (n=240-247)

Source: Public Consultation

However, **views were more divided around whether the actions identified were *sufficient* to pursue the strategic objectives**. On the one hand, interviewees representing ACSH, Senior Labour Inspectors Committee (SLIC) and the EU institutions expressed very **positive views regarding the decision to explicitly link each action to a lead actor**. This was viewed as providing a useful mandate also for the relevant actors/stakeholders to act, and a level of accountability which ensured the actions remained a priority. On the other hand, in some cases, employers' representatives highlighted a **lack of ownership of some of the actions in the EU Strategic Framework leading to a lack of accountability with regard to implementation**.

Were the actors identified in the Framework (1) relevant, (2) necessary and (3) sufficient to implement the actions assigned to them?

There was limited agreement from the stakeholders consulted as to whether the actors identified in the Strategic Framework to implement the actions assigned to them were relevant and sufficient.

This is perhaps demonstrated most clearly by the OPC, where **none of the seven objectives recorded a majority of OPC respondents agreeing that the actions**

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undertaken involved the appropriate stakeholders. Agreement that the actions taken under the EU Strategic Framework involved the appropriate stakeholders was highest with regards to the second strategic objective (46%), followed by the fifth strategic objective (44%). Agreement was lowest for the fourth (28%) and sixth (31%) strategic objectives.

Figure 13: Opinions on stakeholder involvement across strategic objective

Q7a-Q13. Based on your experience, do you agree or disagree that these actions…:
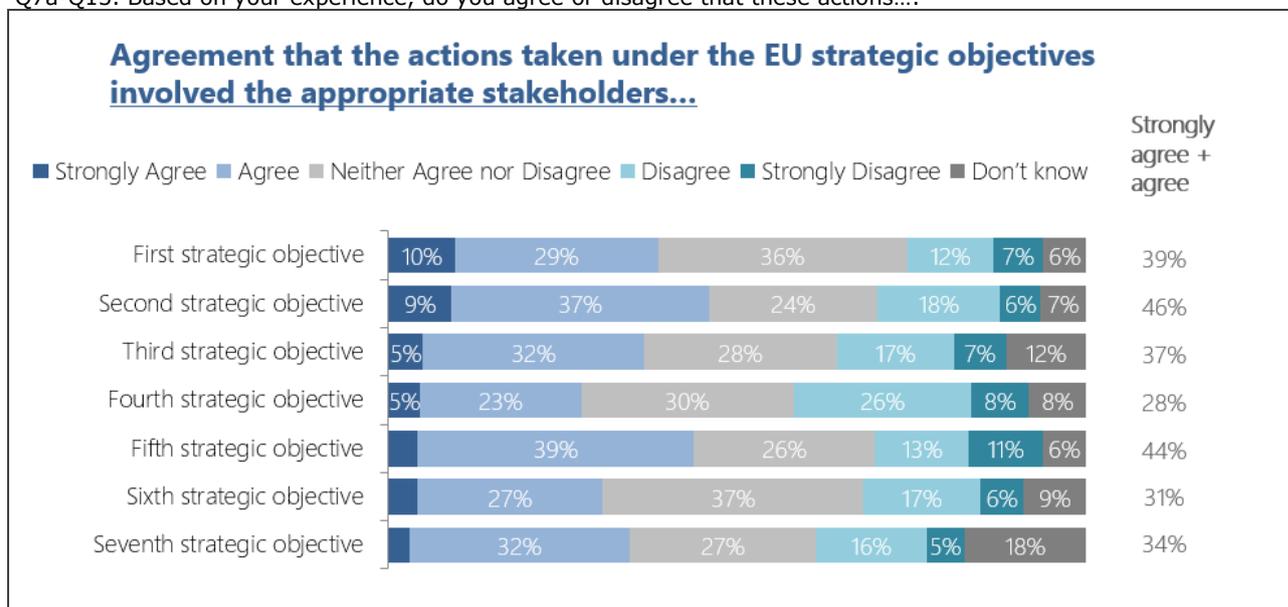
Figures below 5% not displayed.[71]
Those somewhat or very familiar with the EU Strategic Framework (n=238-244)

Source: Public Consultation

Evidence from qualitative consultations shed some light on what might have driven the lack of consensus noted in the OPC results above. While the stakeholders consulted and involved in the implementation of the Strategic Framework were perceived to be both relevant and necessary, some stakeholders (particularly workers and employers) raised questions as to whether they were sufficient.

Some workers and national representatives in particular raised **concerns with regards to the representativeness of the tripartite approach used for the consultation process**. Given the increase in atypical labour (for example, freelancers, agency workers, contractors, bogus self-employed workers, migrant workers, undeclared workers and other non-unionised groups) and the increasingly globalised nature of work (which means employers may be headquartered outside of Europe), a large number of workers and employers are excluded from the traditional tripartite approach to consultation.

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[71] As percentages are rounded to the nearest whole number, they may not always add up to 100%.

3.2 Effectiveness

This section assesses the extent to which the EU Strategic Framework has achieved its objectives by examining the observable outputs, outcomes and impacts of the Framework at EU and national level. Overall, the Framework appears to have successfully involved the most relevant stakeholders in its design and implementation. Additionally, the majority of outputs and outcomes foreseen in the intervention logic (Section 1.2) have been achieved, although some gaps have been identified with regard to specific actions.

3.2.1 To what extent did the different stakeholders, in particular social partners, accept the strategic framework and feel involved in its implementation?

The main stakeholders implicated in the EU Strategic Framework are national governments, social partners (representing workers and employers), the European Commission and other EU institutions, agencies and bodies. International institutions such as the OECD, ILO and WHO are also implicated in successful implementation, particularly under objective seven (better coordinate EU and international efforts) but also with regard to improving data collection (objective six). Interviews carried out at national and EU level identified high levels of acceptance of the EU Strategic Framework among the key stakeholder groups represented in it. There were differences in levels of awareness and buy-in between MS, however, particularly amongst social partners. Additionally, some social partners (primarily workers and some employers) and EU agencies expressed concern that workers and employers who were not actively involved with trade unions or employers' associations might be less engaged with the EU Strategic Framework.

What have the Commission and other relevant actors done to engage stakeholders in the implementation of the Framework, and how successful were these efforts?

The EU Strategic Framework nominates specific actors to lead on and support the implementation of the actions identified under each objective. All named actors were included in the consultation process, which fed into the design of the EU Strategic Framework, meaning that a level of buy-in for those nominated to implement each of the actions should be expected.

In terms of monitoring implementation, the ACSH is an important forum for engagement with social partners and NCAs. The ACSH has a working party dedicated to the EU Strategic Framework (the ACSH WP "Strategy"), which was described by ACSH members and EU level social partners as a key instrument in ensuring continued engagement. Social partners (representing workers and employers) noted varying levels of engagement with the implementation of the EU Strategic Framework between different MS.

As noted in Figure 14 below, OPC responses suggest opinions are divided regarding the extent to which different actors have contributed to the implementation of the EU Strategic Framework. Approximately six in ten respondents (61%) felt that national and regional authorities had contributed "about the right amount" to the implementation of the EU Strategic Framework. About one in four respondents (38%) felt that employers (including the self-employed) had contributed too little to the implementation of the EU Strategic Framework, and a third (33%) felt the same about employers' organisations and workers' organisations.

Figure 14: Contribution of stakeholders to the implementation of the Framework

In your opinion, did the following stakeholders contribute to the implementation of the EU OSH Strategic Framework 2014-2020 and its actions?

■ Too much ■ About the right amount ■ Too little ■ Not at all ■ Don't know

Stakeholder	Too much	About the right amount	Too little	Not at all	Don't know
OSH professionals (private expert / consultant, external prevention...		39%	29%	7%	19%
National or regional public authorities		61%	23%		10%
Workers' organisations (trade union, etc.)		46%	33%		14%
Public insurance organisations		24%	21%	11%	42%
Employers' organisations (employers' associations, trade associations,...		46%	33%	6%	13%
Academic / research institutions		29%	29%	8%	33%
Employers (incl. self-employed)		29%	38%	9%	23%
Other civil society organisations/NGOs		12%	23%	13%	51%
Other		16%			74%

Figures below 5% not displayed.
Those somewhat or very familiar with the Framework (n=236-238)

Source: Public Consultation

What were the main drivers of and barriers to effective engagement and buy-in?

There was broad consensus amongst stakeholders consulted for this study that they had been appropriately consulted in designing the EU Strategic Framework and felt a level of ownership for it, which helped increase their overall engagement. As described in the previous section, the main forum for engagement cited by different stakeholders was the ACSH, which was used at EU level as a useful structure for workers, employers and NCAs. Some workers' representatives suggested that the level of engagement from social partners (in the ACSH, to some extent, but primarily at national level) is linked to the extent to which they are involved with the implementation of national strategies. Where there is not a strong tradition of cooperation between NCAs and social partners nationally, this may also be reflected in limited engagement with the EU Strategic Framework. Additionally, some employers highlighted the need for more formal accountability structures. These would ensure that those responsible for specific actions were held responsible for reporting their progress regarding implementation on a regular basis.

As discussed in the section on relevance, some workers' representatives and NCAs felt that there was room for improvement with regard to the inclusion of workers and employers not represented by trade unions and employers' associations. Given the increase in atypical labour (for example, freelancers, agency workers, contractors, 'bogus' self-employed workers, migrant workers, undeclared workers and other non-unionised groups) and the increasing internationalisation of the world of work, employers and workers not engaged with traditional industrial relations structures may have not been fully represented in the tripartite approach to consultation.

The OPC results provide some further information about the specific barriers to effective engagement. In particular, respondents cited limited human and financial resources (41%), lack of interest / uptake by employers (35%), lack of awareness / understanding of OSH among key stakeholders (34%), a presumed lack of monitoring, benchmarks and targets (24%), and external factors, such as the COVID-19 pandemic (22%) as the five most significant barriers to fulfilling the objectives of the EU Strategic Framework.

3.2.2 What effects were generated by the actions?

To what extent have the various actions identified in the Framework been launched / completed?

Except for one action, all actions identified within the Framework have been launched. Similarly, although the nature of some of the actions prevents them from ever being viewed as "completed", good progress can be noted against most actions and the majority could be viewed as having been completed within the reference period. Implementation of a number of actions which were expected to be completed before 2016 was, however, delayed.

Stakeholder accountability could be increased through the creation of a formal accountability structure to monitor ongoing progress against the EU Strategic Framework at EU level – an action which was foreseen under objective six but only partially implemented. This may have helped to hold those responsible for implementing specific actions to account and ensured that the relevant stakeholders were consulted and involved in the implementation of each action.

The information below provides a more detailed review of which actions have been launched under each objective and the extent to which they could be judged to be completed.

Objective one: Further consolidate national strategies (for further information, see section 2.1)

Under objective one, all EU-level actions identified in the Framework have been launched and completed effectively. EU-OSHA has carried out a comprehensive review of national OSH strategies, providing detailed insight into the similarities and differences across national OSH strategies. In addition to this, the ACSH organised two workshops in 2016 and 2018 to take stock of the implementation of national strategies and draw lessons for the future. Similarly, the launch of the OSH Barometer effectively established a database of national strategies. Furthermore, a contact point group of national experts was established in 2015 to facilitate the exchange of information and experience in the field of OSH.

Additionally, research at national level has identified an up-to-date national OSH strategy in almost all MS, except for Luxembourg and Croatia. The extent to which national strategies align with the EU Strategic Framework appears to vary. Clear references to the EU Strategic Framework were identified in seventeen national strategies. Of the remaining eleven MS, five had national strategies which were developed prior to 2014 and one had no national strategy. The remaining five MS have national strategies which reflect some but not all of the challenges and/or objectives included in the EU Strategic Framework.

Objective two: Facilitate compliance with OSH legislation (for further information, see section 2.2)

Objective two was concerned with tools and initiatives to facilitate compliance with OSH legislation. All actions listed under objective two continued to be renewed and expanded in scope throughout the reference period, and although by nature they cannot be considered 'completed' due to their ongoing expansion, significant progress has clearly been made at both EU and national level.

The development and extension in sectoral scope of OiRA tools appear to have achieved the targets described in the 2017 Communication (albeit slightly after the original deadline

set for this). The OiRA activity continues to be developed to support EU-level social partners and MS to create new tools. Several actors at EU level were involved in developing guidance on good practice examples, especially for SMEs. Similarly, MS put in place a variety of initiatives to support businesses in complying with OSH legislation (see Table 8). Some stakeholders (representing NCAs, workers and employers) felt that less progress had been made on the exchange and promotion of good practice, although a number of pieces of guidance were developed (e.g. guidance on risk prevention in small fishing vessels, OSH best practice in agriculture, livestock farming, horticulture and forestry) and three EU-level peer review meetings were held. Employers' representatives, in particular, felt that the guidance and support tools developed under objective two could have been more specifically targeted at MSEs.

In addition to this, other conferences and meetings were organised by EU-OSHA around the use of web-based risk assessment tools. HWCs continued throughout the reference period, and were implemented alongside the Good Practice Awards initiative, which helped share best practices among businesses.

Objective three: Better enforcement of OSH legislation by Member States (for further information, see section 2.3)

Objective three, due to its nature, relied extensively on MS for implementation. In many cases, enforcement capacity was limited by funding cuts leading to decreased LI resources. The national mapping carried out under Task 2 identified capacity issues in at least 17 MS. This was corroborated by the review of national implementation reports carried out under Task 6, which found that the resources and capacity of LIs decreased in nearly all MS between 2013 and 2017. Finally, the COVID-19 outbreak has impacted on enforcement capacity across the EU, preventing LIs from carrying out in-person inspections in many cases.

LIs have introduced several measures to improve efficiency, including introducing IT tools to support more targeted, data-driven interventions, and transitioning to "risk-based" approaches to help prioritise inspections. Nonetheless, LIs and workers' representatives have reported concerns that the reduction in resources in many MS is impacting negatively on enforcement capacity.

At EU level, SLIC has carried out a rolling programme of bilateral exchanges and evaluations to promote shared learning and improve enforcement capacities. Additionally, SLIC has carried out research into the impacts of the 2008 financial crisis on LI resources and published guidance on improving LI intervention in MSEs. The Committee has also published a set of common standards to support training of labour inspectors across the EU (described in more detail under EU added value).

The actions described above point to a significant amount of activity in support of improving enforcement capacity and promoting mutual learning in a difficult environment. There has clearly been significant sharing of information and learning between LIs through SLIC. LIs have also worked to develop innovative approaches at national level to overcome both limited resources and the restraints imposed by COVID. The actions described fall short of a coordinated effort to map or evaluate the overall resources and activities of LIs at EU level. There is also a gap with regard to evaluating the effectiveness of activities at national level. Most MS have not evaluated the effectiveness of their sanctions regime in response to infringements of OSH legislation. Therefore, despite the significant progress noted under this objective, it is not possible to declare all actions foreseen in the EU Strategic Framework as completed.

Objective four: Simplify existing legislation (for further information, see section 2.4)

Clear progress was made during the reference period in identifying possible legislative simplification and removing unnecessary burden in the area of OSH (action one). This work culminated in the publication of the 2017 Communication, which identified six EU Directives as priority targets. Three of these Directives (or their annexes) have been updated, two are currently under review, and non-binding guidance has been published to provide clarity on potentially contradictory requirements for the sixth Directive. Additionally, 26 binding OELs have been adopted under the CMD and 41 indicative OELs have been adopted under the CAD.

There has been less progress against the second action, which encouraged MS to identify sources of specific regulatory burden created by their own transposing legislation on OSH and national legislation, and analyse national implementation reports to identify good practice and to promote exchange of information. While research carried out under Task 2 has identified a diverse range of activities aimed at simplifying legislation and reducing the burden associated with OSH compliance, 10 MS have worked to identify sources of specific regulatory burden created by transposing legislation and national legislation.

Action three called for an assessment of the situation of micro-enterprises in "low-risk" sectors, with respect to simplifying the implementation of risk assessment, including documentation. DG EMPL commissioned a study to investigate the burden of documenting risk assessments for very small enterprises, the results of which were inconclusive[72][73].

While some progress can be noted on all of the actions implemented under objective four, more could have been done particularly with regard to the second[74] and third actions[75]. Most stakeholders supported the work carried out under action one to modernise and update existing legislation. Nonetheless, employers raised concerns that the focus on modernisation could not be equated with simplification and argued that this meant progress on achieving objective four was limited. Others, including workers, OSH experts and some NCAs, argued that a focus on modernisation was more appropriate and that significant progress had been made.

Objective five: Address the ageing of the workforce, emerging new risks, prevention of work-related and occupational diseases (for further information, see section 2.5)

Different levels of progress were remarked against the specific actions identified under objective five. Additionally, as Section 2.5 explains, several additional initiatives were implemented in the field of occupational diseases, emerging new risks, and ageing workforce.

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[72] European Commission, December 2012, *Study on the consequences of the documentation of the risk assessment (Article 9 of Directive 89/391/EEC) by very small enterprises engaged in low-risk activities, compared with a possible exemption from that obligation* (VC/2011/451).

[73] As described in Section 2.4, the study found that an exemption from the documentation obligation for micro-enterprises in low risk sectors may lead to a small net benefit under some scenarios, but that a negative net benefit (and possibly a substantial one) could not be ruled out.

[74] Action two: Encourage Member States to identify sources of specific regulatory burden created by their own transposing legislation on OSH and national legislation, and analyse national implementation reports to identify good practice and to promote exchange of information.

[75] Action three: Assess the situation of micro-enterprises in low-risk sectors and consider how to simplify the implementation of risk assessment, including documentation.

No initiative or measure was found that could respond to action one, which called for the creation of a network of OSH professionals and scientists that could form an independent scientific consultation body. With regard to disseminating research from the European Risk Observatory, this action could not be completed due to the Observatory having been discontinued (although research is still carried out and shared). There has nonetheless been significant progress on actions three, four and five. This includes the publication of significant amounts of research, case studies, reports and discussion papers on mental health in the workplace, rehabilitation and reintegration of older workers, and improving OSH conditions for specific categories of workers.

A range of measures were also identified at national level addressing issues including PSRs, MSDs, hazardous substances and specific issues faced by different groups of workers including women, migrant workers, and people with disabilities. In particular, almost all MS were found to have implemented actions to address challenges related to the ageing workforce. Some examples of these are described in the box below.

Actions to support OSH of the ageing workforce

Tackling demographic change is one of the three main OSH challenges that, according to the EU Strategic Framework, are common across the EU and require further policy action. It argues that, in view of the fact that Europe's working population is ageing, sound health and safety for workers is necessary for a sustainable working life and active and healthy ageing. Therefore, under objective five, the Framework includes actions to identify ways to promote the physical and psychological health of older workers. A number of MS have made supporting OSH of the ageing workforce a priority within their national strategies and policies during the reference period, and the research carried out for this study suggests that, at least in some cases, this was influenced to a certain extent by the EU Strategic Framework.

For example, in **Sweden**, interviewed stakeholders described the objective to address the ageing workforce as the most influential aspect of the EU Framework. It has a direct equivalent in the Swedish national strategy, which is framed broadly, taking a "whole-life" perspective, where risks are addressed in a preventive manner and not only at a later stage of work-life when injuries or conditions may already have appeared. A large-scale government-sponsored research project on changing demographics and sustainable work life presented its findings in 2017. This, as well as the results of the EP pilot project on older workers (in which Sweden participated), has reportedly informed policy since, and is reflected in ongoing work towards ensuring a sustainable working life for all ages.

Latvia implemented a project in 2014-2016 on "Developing a Comprehensive Active Ageing Strategy for Longer and Better Working Lives", co-financed by the European Commission. The objective of the project was to develop an evidence-based and comprehensive Active Ageing Strategy (adopted in 2016) that would facilitate longer and better working lives, taking into account the considerable demographic challenges that the country is facing.

In **France**, the Occupational Health Plan 2016-2020 addresses the ageing workforce under the angle of work-related strain (Action 1.8 on "developing the offer of services towards companies to give them the means to accompany active ageing"). Actions include the creation of a prevention kit against occupational fatigue, and steps to improve the epidemiologic knowledge and awareness-raising about work-related cardiovascular accidents and diseases, which particularly concern persons over the age of 45.

In **Romania**, one of the four general objectives, as well as one of the six specific objectives, of the 2018-2020 National Strategy relate directly and explicitly to the ageing workforce. Under action 4.1, the government committed to actions for raising awareness

> on workforce ageing, new and emerging risks and prevention of occupational diseases. Regular medical checks were described as an important potential preventative method, but interviewed stakeholders acknowledged that raising awareness of and facilitating uptake among employers and employees remained challenging.

Objective six: Improve statistical data collection and develop the information base (for further information, see section 2.6)

All actions identified under objective six have been started but progress on completing the actions has been slow-paced. Among the most significant achievements are the publication of an EU index of occupational diseases (EODS data collection), and two data visualisation tools: one on costs and benefits related to OSH, and the other on OSH country profiles (the OSH Barometer). Preliminary work has also been carried out to establish a database of occupational exposure, although progress in this area has been limited. The OSH Barometer partially fulfils the requirements of action six, which calls for a tool to monitor the implementation of the EU strategic framework 2014-2020. However, this is limited to a comparison of national level indicators and does not provide an overview of progress against all actions identified in the EU Strategic Framework.

Improving statistical data collection at EU level is a particularly challenging endeavour. This is mainly due to underlying divergences in data collection and reporting between MS', which leads to a lack of harmonised data at EU level. To achieve the ambition of this objective, more and improved data collection is required at national level. The national mapping (Task 2) identified ten MS who had launched actions to improve the quality of data on accidents at work. Additionally, four MS were found to have launched actions to improve data quality on occupational diseases. Limited progress was noted against these actions to date, suggesting that there is still some way to go. Some stakeholders expressed the hope that the OSH Barometer, which collates and compares data between MS on a variety of OSH indicators, would encourage further actions to improve the quality and comparability of data available on both accidents at work and occupational diseases.

Objective seven: Better coordinate EU and international efforts to address OSH and engage with international organisations (for further information, see section 2.7)

Significant progress was made against nearly all actions under objective seven. In particular, the EU's international commitment to OSH was evidenced by the inclusion of OSH elements in Free Trade Agreements (action four) and DG EMPL has worked to support candidate countries during accession negotiations by ensuring alignment of legislation, including with chapter 19 of the *acquis* (action one). Strategic cooperation with partners was also evidenced through annual joint events with China and an ongoing OSH dialogue with the USA (action six).

Some progress was also noted on action five to address OSH deficits in the global supply chain and contribute to G20 initiatives. There was limited progress in the reference period on reviewing the EU's MoU with the ILO to better reflect OSH policy (action three). In February 2021, however, both parties signed a renewed exchange of letters that explicitly named the promotion of occupational safety and health and decent working conditions, including across global supply chains, as a key priority. Additionally, a number of joint initiatives were organised to favour coordination between the European Commission and the ILO, and experts from the OECD and ILO were invited to present at the SLIC Plenaries at the SLIC thematic days (action two).

To what extent have the actions that were implemented generated their main intended effects (outputs & outcomes)?

Data collected from Tasks 2, 3, 5 and 6 shows a broad consensus that – overall – the EU Strategic Framework has made significant progress on improving OSH culture within the EU, despite a certain degree of variation depending on the specific objectives and actions in question. Reviewing the outputs and outcomes against those included in the intervention logic (Figure 1), nearly all the expected outputs have been realised and it is possible to note progress against the outcomes foreseen for each specific objective. For objectives one, five and seven, nearly all the outcomes foreseen in the logic model have materialised.

Objective one was broadly regarded by interviewees at national and EU level as particularly successful. This is due to the progress made on updating national OSH strategies and the clear evidence of alignment between them and the EU Strategic Framework. Over half of OPC respondents (53%) agreed or strongly agreed that progress has been made against actions, with 41% agreeing or strongly agreeing that the actions have generated tangible results. Stakeholder feedback from NCAs particularly, but also workers and employers, also suggests progress has been made against all of the expected outcomes foreseen in the intervention logic, namely moving OSH up the political agenda in MS, aligning MS strategies with EU priorities and supporting MS with implementation.

One of the most significant activities under **objective two** was the continuation of the OiRA activity by EU-OSHA. The mid-term evaluation of the OiRA activity measured a significant increase in both the number of tools developed and their utilisation over the reference period. In total, as of 31 August 2020, the evaluation reported that more than 120,000 risk assessments had been started by more than 92,000 users across 209 tools[76]. The HWCs also continued to drive engagement with key OSH-related topics. According to data from the final evaluation of the 2017-2018 HWC, there were more than 330,000 visits to the campaign website, HWC info sheets were downloaded a total of 23,000 times, the number of visits to the campaign database totalled over 46,000, and the campaign e-tool was visited over 32,000 times. Stakeholders noted, however, that the initiatives under objective two rely considerably on MS' willingness to engage. In some cases, a lack of engagement may hinder impact. 37% of OPC respondents either agreed or strongly agreed that the actions developed under objective two translated into concrete results. In spite of the positive reception for EU level actions (in particular OiRA and HWCs) and a plethora of initiatives at national level, stakeholders continue to report that, in most MS, compliance with OSH legislation represents a major problem, especially among MSEs.

Objective three, which focuses on MS' enforcement of OSH rules, seems to be one of the areas where progress has overall been steady but rather limited. Stakeholders representing workers, employers, and national authorities generally agreed on the need for better coordination in this area, however actions to improve enforcement were limited by resource constraints within MS. Additionally, the COVID-19 outbreak in 2020 represented a significant barrier to carrying out inspections on business premises in the last year of the reference period. OPC responses show that 28% of respondents agreed or strongly agreed that objective three had led to tangible results.

Successful outputs were achieved in relation to updating EU OSH legislation under **objective four**. The updates have helped to render the legislation fit for purpose, removing outdated terminology and updating annexes to reflect modern realities (for example including SARS-CoV-2 in the Biological Agents Directive and updating the Personal Protective Equipment Directive to reflect scientific and technological evolutions). Additionally, 67 new OELs have been adopted under the CMD and CAD. According to European Commission impact assessments accompanying the different revisions, the

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[76] Ipsos, 2020, *Mid-term evaluation of the OiRA activity*

health benefits for workers could be significant (see box below). However, tangible effects may be subject to a time lag while MS transpose the relevant legislation. As of March 2021, six health and safety directives are due for transposition by MS. This time lag in terms of effects is reflected to some extent in the OPC results, where 19% of respondents agreed or strongly agreed that objective four has yielded tangible results.

Objectives two, three and four are expected to lead to shared outcomes within the intervention logic. Progress has been made against most of these outcomes (particularly ensuring EU OSH legislation is fit for purpose and helping to address compliance challenges of MS). More remains to be done regarding transposition of the relevant legislation (currently on the books for 2021 and due to be completed soon) and enabling LIs to effectively enforce legislation. It should be noted, however, that the main barrier identified to enforcement relates to resource constraints within MS which cannot be directly addressed at EU level.

Setting OELs and other provisions for hazardous chemicals / groups of hazardous chemicals under the CMD and CAD

An estimated 200,000 EU workers die of work-related diseases each year in the EU.[77] Approximately 80,000 of these deaths result from work-related cancer due to exposure to carcinogens, according to information published in the 2016 Roadmap on Carcinogens.[78] The EU Strategic Framework recognised work-related diseases as one of the major challenges facing the EU and MS. Specific attention should be paid to occupational cancers, diseases caused by asbestos, lung diseases, skin diseases, asthma and other chronic conditions[79].

In addition to the OSH Framework Directive, other directives at EU level are relevant to address risks associated with exposure to hazardous chemicals in the workplace. The Carcinogens and Mutagens Directive (CMD)[80], the Chemical Agents Directive (CAD) [81] and the Asbestos at Work Directive (AWD)[82] are of particular importance. The CMD addresses risks associated with exposure to carcinogens or mutagens, inter alia, by setting binding occupational exposure limits (OELs). It also places an obligation on employers to identify and assess such risks to workers in the workplace and prevent exposure to them if they occur. If neither replacement of carcinogens or mutagens by a non-hazardous (or less hazardous) alternative nor their production and use in a closed system is possible, workers' exposure should be reduced to the lowest possible level (and shall not exceed the set OELs). The CAD addresses risks associated with exposure to hazardous chemical agents in the workplace, inter alia, by defining indicative and

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[77] EU-OSHA, Work-related diseases, available at: https://osha.europa.eu/en/themes/work-related-diseases.

[78] The Facts about Carcinogens, available at: https://roadmaponcarcinogens.eu/about/the-facts/.

[79] European Commission, 2014, *EU Strategic Framework on Health and Safety at Work 2014-2020.*

[80] European Commission, 2019, *Directive (EU) 2019/983 of the European Parliament and of the Council of 5 June 2019 amending Directive 2004/37/EC on the protection of workers from the risks related to exposure to carcinogens or mutagens at work*, available at: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=uriserv:OJ.L_.2019.164.01.0023.01.ENG&toc=OJ:L:2019:164:TOC.

[81] European Commission, 1998, *Council Directive 98/24/EC of 7 April 1998 on the protection of the health and safety of workers from the risks related to chemical agents at work (fourteenth individual Directive within the meaning of Article 16(1) of Directive 89/391/EEC)*, available at: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A31998L0024.

[82] European Commission, 2009, *Directive 2009/148/EC on the protection of workers from the risks related to exposure to asbestos at work.*

binding OELs, as well as biological limit values. Again, employers shall identify, assess and prevent these risks.

Additionally, an OEL for asbestos is included in the AWD.

The 2017 Communication on the modernisation of the EU OSH Legislation and Policy also identified the fight against occupational cancer and dealing with hazardous chemicals as one of the top three actions required to bring a new impetus to the EU Strategic Framework on Health and Safety at Work[83]. The 2017 Communication introduced specific actions to be completed in the second half of the EU Strategic Framework, including amendments to the CMD and the introduction of further indicative OELs under the scope of the CAD.

Between 2017 and 2019, three legislative amendments to the CMD were formally adopted,[84] addressing 26 carcinogens and mutagens. Additionally, two lists of indicative OELs were adopted in 2017 and 2019, addressing 41 substances or groups of substances under the CAD. The three amendments of the CMD will improve protection of around 40 million workers[85].

Clear progress was made in relation to **objective five**, in particular in the area of exposure limits and carcinogens, MSDs, and new and emerging risks. Many stakeholders, however, highlighted that the COVID-19 pandemic is likely to have caused long-lasting changes or to have accelerated trends in relation to working patterns and work arrangements. For one in three respondents to the OPC, tangible results in this area were already visible. Significant progress has also been made against the outcomes foreseen in the intervention logic for objective five, particularly with regard to generating and disseminating scientific evidence to address identified risks and challenges. There is less evidence to support the realisation of the second outcome, however, which relates to putting actions in place to address the identified challenges and risks.

While many of the actions and outputs foreseen in the intervention logic for objective six have been realised, there is still quite some way to go before reliable, timely and comparable data will be available to support evidence-based policy making. Nonetheless, the projects implemented to improve statistical data collection present a clear positive step in this direction. As previously noted, the expansion and consolidation of data collection on OSH under **objective six** has been gradual but solid. Data visualisation tools were published by EU-OSHA, including the OSH Barometer, which can be expected to facilitate access to data on OSH and improve data comparability across MS. Progress has also been made on statistical data collection at EU level, although it has progressed more slowly and not all MS have participated. Twenty nine percent of OPC respondents agree or strongly agree that this objective has already produced tangible outcomes.

Lastly, on **objective seven**, there is evidence of strong collaboration between the European Commission and the ILO. An exchange of letters between the two institutions in February 2021, which included a specific reference to OSH issues, further strengthened this

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[83] European Commission, 2017, *Commission Communication COM(2017) 12 to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions of 10 January 2017 on 'Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy'*.

[84] Directive (EU) 2017/2398, Directive (EU) 2019/130 and Directive (EU) 2019/983.

[85] https://ec.europa.eu/commission/presscorner/detail/en/statement_19_683.

partnership. OSH issues have been explicitly included in international trade negotiations by virtue of the inclusion of specific provisions on OSH and labour inspection in FTAs negotiated since 2016. 22% of the stakeholders who participated in the Open Public Consultation agreed or *strongly* agreed with the fact that objective seven had resulted in tangible outcomes. When considering the outcomes foreseen under objective seven in the intervention logic, there is clear evidence to support two of the expected outcomes (improved coordination of EU and international efforts around OSH, and improved alignment of candidate countries with the OSH acquis). It is difficult to measure progress with regard to improved labour standards internationally (the third outcome identified in the intervention logic), and even harder to contribute these to the EU Strategic Framework. Nonetheless the FTAs mentioned above, coupled with bilateral initiatives on OSH with the USA and China (two leading world economies) are expected to act in support of this outcome.

Overall, to what extent have these actions contributed to ensuring a safer, healthier work environment – in the EU as a whole, and/or for different groups of workplaces or workers?

Considerations on the extent to which the set of actions implemented under the seven objectives have contributed to safer and healthier workplaces rely to a large extent on anecdotal evidence and opinions. These views were expressed in interviews with workers' representatives, employers, and national authorities (given that within the scope of this study, it was not possible to systematically analyse specifically what ultimate impacts might be attributable to each of the many actions).

All categories of stakeholder consulted for this study shared the view that the EU Framework is effective in setting a direction for OSH policy and acting as a catalyst for action. NCAs, in particular, cite the EU Strategic Framework as an important point of reference. To ensure that OSH considerations remain high on the national agenda within MS. Additionally, interview feedback from different stakeholders at national and EU level highlights the value of structures such as the ACSH, SLIC, the OiRA and IRAT communities and the social dialogue in facilitating the movement of ideas between different stakeholder groups and different MS.

The impact of the EU Strategic Framework can be seen both in the consolidation of national OSH strategies and in raising the profile of issues such as demographic change and psychosocial risks which may not otherwise have been considered in all EU MS. One clear example of the influence of the EU Strategic Framework is its promotion of considerations related to stress, which has ensured that countries which might not have considered this a priority issues have nonetheless addressed it within their national strategies (see box below).

The influence of the EU Strategic Framework on national approaches to work-related stress

The second challenge identified in the EU Strategic Framework addresses the need to improve the prevention of work-related diseases by tackling existing, new and emerging risks. Psychosocial risks and work-related stress were further identified in the 2017 Communication as "among the most challenging […] OSH concerns". The document noted that over half of EU workers report stress as common in their workplace and underscored the obligation for employers to consider psychosocial risks in the risk assessment process. Furthermore, it committed the EC to work with EU-OSHA and the ACSH to identify and disseminate good practice in this field.

The 2014-15 Healthy Workplaces campaign "Manage Stress" created impetus for discussing stress across the EU and was the basis for the main awareness-raising

actions implemented in MS including Croatia, Poland, Portugal and Slovenia. In addition, many MS have taken action to address work-related stress in the 2014-2020 period.

Key examples include:

- Germany requires that psychological stress be considered in risk assessments. The prevention and mitigation of mental stress remains a strategic objective of Germany for its GDA 2019-2024.

- In the same vein Austria requires risks assessments to include an assessment of mental strains (psychosocial, psycho-mental and psycho-emotional strains), and enterprises must develop and evaluate measures for the permanent reduction of psychosocial risks.

- Ireland has developed Work Positive, a tool to tackle psychosocial issues, which provides employee feedback on stress at work, and delivers structured guidance enabling employers to develop an action plan against the stressors (risk identification, legal compliance, assistance in developing an effective health and wellbeing action plan, improvement of employee engagement and performance). To increase the uptake of the tool, online learning courses were provided. An upgraded, extended Workplace Stress Audit tool has been developed in 2017 and is now called Work Positive CI (i.e. Critical Incident). The Irish Health and Safety Agency has drafted two "workplace stress guidance documents" to the benefit of employers and employees.

- In Slovenia, an e-tool for the management of psychosocial risks and absenteeism has been set-up.

- The Danish Working Environment Authority has been allocated additional funding in 2019, in particular with a view to address work-related psychological strain and symptoms of stress or depression, via the development of inspection campaigns, new tools and training.

- Malta has conducted campaigns focused on the prevention of stress.

- In Croatia, the Institute for Health Protection and Safety at Work has collaborated with social partners to hold expert seminars in all regions of Croatia, in particular on stress at workplaces.

- In Lithuania, the Order setting out Guidelines on Psychosocial Occupational Risk Factors was renewed in 2018 to take into account changing work conditions in companies, the specifics of small enterprises and update the list of factors that must be subject to assessment.

Interview feedback from the EU and national mapping activities has highlighted the importance of the EU Strategic Framework and the 2017 Communication in ensuring work-related stress remains a priority at national level across the EU. Knowledge sharing at EU level also contributed to strengthening the approaches taken to dealing with work-based stress. The United Kingdom, for example, credited knowledge exchange within the ACSH (and particularly information shared by the Baltic and Scandinavian MS) with having helped them to develop a Stress Indicator Tool for use at national level. National social partners praised the tool for its quality and usability.

The OPC asked respondents for their views on the development of OSH at national and EU level since 2014. Of the 352 respondents to this question, the majority agreed (53%) or strongly agreed (11%) that the situation has become better. On the other hand, 15% strongly disagreed. When asked on the extent to which the EU Strategic Framework

contributed to improved health and safety for different groups, significant variations emerged between stakeholder groups. In total, 43% of respondents agreed (or strongly agreed) that the EU Strategic Framework contributed to better OSH for different groups of workers, but the percentage of those agreeing was higher among national authority respondents (75%) and employers' representatives (63%), whereas only a minority of workers' representatives (21%) felt the same way.

Further to this, feedback received via the OPC confirmed that a considerable number of respondents felt that the EU Strategic Framework had contributed to better workplace safety and health for women, young people, or workers in contact with carcinogens. Nevertheless, a number of contributors highlighted that some groups, such as platform workers or seasonal workers, had not benefitted from improvements in OSH regulation and that more attention should be given to those groups. Other respondents identified inconsistencies among the different EU MS approaches or an unclear division of responsibilities between EU and national authorities. A few respondents questioned the focus on specific groups of workers, suggesting that the EU Framework should adopt a less targeted approach.

Were there any unforeseen or unintended positive or negative effects?

Given the broad scope of the EU Strategic Framework (covering many relevant issues, challenges and objectives) and its soft nature (as a non-binding policy document), it is perhaps unsurprising that this study has not identified any unforeseen or unintended, positive or negative effects. By and large, the effects of the Framework were along the lines of what was intended or foreseen, and the fact that key stakeholders were involved in its design helped avoid any "surprises" in this respect. All stakeholder groups consulted for this study (workers, employers and national authorities) stressed that the tripartite nature of the drafting and implementation of the EU Strategic Framework had particularly favoured collaboration among stakeholders. Representatives of workers, employers, and national authorities alike valued the opportunities for exchange offered at EU level, and many underlined how this had had a role in facilitating progress within MS on OSH policy.

While not many interviewees reported negative impacts linked to the implementation of the EU Strategic Framework, some stakeholders representing workers, employees, and national authorities were of the opinion that under objective two, too much emphasis had been placed on OiRA, to the detriment of other alternative risk assessment strategies and tools. In particular, some workers, employers and national representatives expressed their desire for a more comprehensive strategy for risk assessment.

3.2.3 Have the objectives of the Strategic Framework been achieved, and if not, why?

To what extent has the Strategic Framework contributed to progress in terms of achieving each of the seven objectives?

The implementation review carried out as part of this study has identified **clear progress against all seven strategic objectives,** resulting from the implementation of the different actions identified within the EU Strategic Framework. A review of progress against the actions, outputs and outcomes foreseen in the intervention logic (Section 3.2.2) demonstrates the effectiveness of the EU Strategic Framework as a catalyst to action. Specifically, as described in the previous section, there is evidence of activity against all but one of the specified actions.

The 2017 Communication played a useful role in ensuring progress continued in the latter half of the EU Strategic Framework's implementation period. The Communication acted as an interim "stock-check", identifying key areas of intervention and defining further priority actions to ensure the ambition of the EU Strategic Framework was realised. Actions such as the modernisation of EU OSH legislation and the development of OiRA tools were identified within the Communication and this initiative appears to have helped maintain focus and momentum.

The EU Strategic Framework represents an important point of reference at EU level. It is intended to raise awareness, promote discussion and act as a catalyst for action by different stakeholder groups in addressing the main OSH challenges identified through the implementation of specific actions and objectives. By promoting collaboration between NCAs, workers, employers and other OSH specialists, the EU Strategic Framework is intended to support the creation of a level playing field with regard to worker protection and improve workplace health and safety across the EU and internationally.

This study has identified a number of promising outcomes under each of the seven objectives. Nonetheless, none of the objectives can be viewed as having been completely "achieved". This is due in part to the context, which involves a constant evolution of working culture and a concurrent evolution of OSH challenges. Additionally, progress in addressing the three challenges identified in the EU Strategic Framework – while considerable – has been inconsistent. For example:

- Almost all MS have an up-to-date OSH strategy, and the level of alignment between these and the EU Strategic Framework is high. However, there are still differing levels of implementation between MS.

- Several useful tools have been developed and promoted at EU and national level to support compliance with and enforcement of OSH legislation. Given the scale of the challenges faced by MSEs and LIs, however, the contribution of these tools to increasing compliance with and enforcement of OSH legislation across the EU is likely to have been minor.

- Significant work has been carried out at EU level to support LIs with regard to training standards, enforcement capacity and addressing emerging risks[86] and other specific challenges faced by LIs. However, limited resources at national level have prevented many LIs from further reinforcing their enforcement capacity.

- There has been significant work to update and modernise EU OSH legislation, with six EU directives awaiting transposition. However, it is difficult to identify any actions related to this activity to date, as much of it occurred in the second half of the reference period and has therefore not been implemented in all EU MS.

- Similarly, a significant number of indicative and binding OELs have been adopted under the CAD and CMD. However, some employers and NCAs have raised concerns that it may not be possible to effectively measure and therefore enforce some of these limits.

- There has been significant progress on improving data collection on workplace accidents and work-related diseases. Nonetheless, further work is required to establish a complete and comparable European dataset.

- Whilst OSH and labour inspections have been included in a number of FTAs, the extent to which these will be enforceable remains unclear. The EC has committed

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[86] See, for example the SLIC publication on Psychosocial Risks: SLIC, 2018, *Guide for assessing the quality of RA and risk management measures with regard to prevention of psychosocial risks*.

to enforcing the commitments included in the FTAs and a dispute settlement mechanism is in place[87]. The impact of the OSH obligations included under Chapter 19 on OSH in non-EU countries has yet to be seen.

None of these considerations should be viewed as undermining the considerable progress made on implementing the actions foreseen within the EU Strategic Framework. Rather, more time is needed in order for these changes to be embedded within EU MS and for the impacts foreseen within the intervention logic to emerge.

What were the key drivers and barriers that explain the (lack of) progress against each objective?

One of the key strengths of the EU Strategic Framework lies in the strong tripartite approach that underlies its definition and implementation. This represents a core pillar of the EU's approach to OSH and has been a significant driver of progress against all of the objectives. Cooperation between national authorities, workers and employers in the design of national strategies was identified as a key indicator of success in their implementation.

The proactive approach and high levels of engagement from different stakeholders has also helped to drive progress on modernising the EU OSH acquis, developing common standards, tools and guidance to support both enforcement and compliance (through EU-OSHA, the ACSH and SLIC) and working to improve the information base.

As mentioned above, the 2017 Communication also acted as a useful driver of progress. The focus on key priorities and tangible actions with clear deadlines helped to generate further momentum in the second half of the EU Strategic Framework's implementation period.

Significant barriers include resource constraints that have hindered LIs' ability to effectively carry out enforcement. On the part of companies, limited resources also hinder compliance. This is further reinforced by a limited awareness of some of the tools and support available, which prevents companies from accessing them. Additionally, some workers and employers highlighted the lack of an accountability mechanism to monitor progress against the objectives as a key barrier to progress. In the last year of implementation, the COVID-19 outbreak was also identified as a barrier to implementation particularly with regard to enforcement (for LIs) and compliance (for MSEs). Conversely, the COVID-19 pandemic has acted to increase the visibility of OSH considerations within the EU – as can be noted by the significant interest in COVID-specific tools and publications (including, for example, the COVID OiRA tools developed by EU-OSHA).

Finally, the design of the EU Strategic Framework can be regarded as both a driver and a barrier to achieving the objectives defined within it. On the one hand, its flexibility and all-encompassing nature allows MS to adapt national OSH strategies to their specific contexts while remaining aligned with the core priorities defined within the document. However, the flexibility inherent in such an all-encompassing document may have failed to provide very specific incentives.

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[87] In 2018, the EU triggered the second stage of the dispute settlement procedure against the Republic of South Korea in relation to compliance with labour obligations under Chapter 13 of the EU-Korea FTA. Whilst this does not specifically pertain to OSH obligations, it nonetheless remains an interesting test case which may provide further information regarding the extent to which such obligations can and will be enforced.

3.3   Coherence

This section considers the overall coherence of the EU Strategic Framework, both in terms of synergies between the actions, objectives and challenges identified within the document itself (internal coherence) and with regard to broader EU and national priorities (external coherence).

Evidence from the national and EU-level data collection points to good internal coherence within the EU Strategic Framework, with some clear evidence of synergies and mutually beneficial effects from actions carried out under different strategic objectives. The Framework also seems to be relatively well aligned with OSH priorities in different EU MS, suggesting clear coherence with national OSH policies and strategies across the EU.

The EU Strategic Framework's objectives and actions provide a unified strategic direction for improving occupational safety and health and support a level playing field in terms of the further development, implementation and enforcement of the EU OSH acquis. The research has also identified opportunities to further capitalise on the cross-cutting nature of workplace health and safety, particularly through the development of explicit synergies with EU and national policy in fields such as public health and the environment.

3.4.1 To what extent were the actions promoted by the Strategic Framework coherent and correspondent with a non-contradictory intervention logic? If they were not, why?

The intervention logic (Figure 1) shows how, in theory, the actions included in the Strategic Framework form a coherent approach to support the realisation of each of the seven objectives. Evidence gathered through this evaluation supports the broader structure described within the intervention logic. As described in the implementation chapter (Section 2) and within the section on effectiveness (Section 4), there is clear evidence that the actions implemented within the context of the EU Strategic Framework have led to the realisation of most of the outputs and outcomes which were foreseen for each objective.

Interviewees at national and EU level were broadly positive regarding the overall coherence of the EU Strategic Framework, with most stakeholders viewing its actions and objectives as being well structured, consistent and an important vehicle for promoting OSH practices. Some stakeholders questioned the inclusion of objective 4 (simplification) and objective 7 (international collaboration), suggesting that these were less obviously linked to the three key challenges identified in the Framework. More details on this can be found in Sections 2.4 and 2.7 of the implementation chapter.

To what extent were there synergies, economies of scale, or other mutually beneficial effects among the various actions included in the Framework?

There are some notable examples of synergies between various actions included in the same objective or among actions contained within different objectives, which had mutually beneficial effects on each other.

- One clear example of synergies between different actions is the work carried out on carcinogens. This brought together awareness raising campaigns (under objective two), legislative changes (under objective four) and the Roadmap on Carcinogens (objective five) to provide a strong message with regard to dangerous substances. It addressed what needed to be done at EU and national level, as well as within the workplace, to tackle this issue.

- Similarly, the intention to further strengthen collaboration with international organisations (objective seven) can only have been supported by the decision to invite ILO and WHO representatives to present at the SLIC plenaries and thematic

days (objective three). This collaboration extended to the work carried out on data collection under objective 6, where there was close collaboration between Eurostat, EU-OSHA and the ILO in identifying data and agreeing common definitions with regard to occupational diseases.

- The OSH Barometer also represents a clear economy of scale, combining the creation of a database of national strategies (objective one) with efforts to improve data collection on different OSH indicators (objective six). EU-OSHA staff reported collaborating with WHO and ILO on the selection of data sources, which can be expected to further reinforce international cooperation (objective seven).

Were there any overlaps or contradictions between elements of the Framework, and if so, what were their effects?

No significant overlaps or contradictions were identified among the challenges, objectives and actions described in the EU Strategic Framework. The different elements of the EU Strategic Framework on health and safety at work 2014-2020 (i.e. the seven strategic objectives and the corresponding actions outlined underneath them) work with each other to achieve the overall objective of the EU Strategic Framework to improve occupational safety and health. They each address specific issues that pose barriers to better OSH and set out actions to overcome these.

The different objectives also build on each other, creating space for interaction between the specific actions being implemented within the broader framework of the EU Strategic Framework as a whole. Implementation of objective 1 (consolidating national strategies) for example is influenced by actions taken at EU level under the other objectives and the Strategic Framework as a whole (for example, the development of support tools under objective 2 and the work on improving data collection under objective 6). Objective 2 (facilitate compliance), 3 (better enforcement) and 4 (simplify existing legislation) go hand-in-hand, as can be seen by their common outcomes within the intervention logic. Finally, objective 6 (improve statistical data collection) helps provide the underlying evidence to identify emerging risks (objective five) and monitor progress against the other objectives.

3.4.2 To what extent has the implementation of the Strategic Framework affected other policy areas? Which were the limits there, if any?

The broad and cross-cutting nature of the EU Strategic Framework's objectives implies a clear *potential* complementarity with other EU policies. However, while there are some specific examples of collaboration between different policy areas, particularly regarding chemicals and trade, there is still room to further exploit potential interlinkages and synergies going forward in areas such as public health, the environment and industrial strategy.

To what extent are the actions promoted under the EU Strategic Framework coherent with national OSH objectives?

Overall, the objectives and associated actions included in the EU Strategic Framework were perceived as being largely coherent with, and of relevance for addressing, the OSH objectives set within national OSH strategies. National stakeholders also noted links between OSH objectives and policy areas such as health, employment, education, justice, finance, and legislation on chemicals. Many acknowledged that in order to ensure a successful implementation at national levels, these objectives and policy areas need to be addressed in an integrated and comprehensive approach. Furthermore, it was noted that in some cases more work is needed to facilitate coordination and cooperation between the

different actors involved in the implementation of the national strategies, so as to respond in an effective and timely manner to specific national OSH issues.

National level research (task 2) shows that the majority of the national strategies adopted after 2014 refer to the EU Strategic Framework. Additionally, interviews carried out at national level frequently identified the EU Strategic Framework as a driver for change, acting as an important starting point for the identification of challenges and the definition of objectives in the field of OSH at national level in at least eight MS. In most others, the EU Strategic Framework was at least one of the key documents "on the table" that influenced the definition of the national policy priorities. Responses to the OPC consultation corroborate the national research findings regarding alignment of EU and national strategies. Six in ten OPC respondents (60%) familiar with the Framework agreed that their national OSH strategy is aligned with the priorities/key objectives of the EU Strategic Framework 2014-2020.

Even in countries where the role of the impact of the EU Strategic Framework on the national strategy is less clear (e.g., France, Denmark, Germany, Ireland, UK), the importance of its existence in creating coherence between national OSH policies was recognised by national stakeholders.

No significant contradictions were identified between OSH objectives at EU level and national legislation, particularly in those national strategies that closely mirror the EU Strategic Framework. Additionally, interviews with NCAs and EU social partners identified some specific areas that were prioritised at national level as a result of their inclusion in the EU Strategic Framework.

Did any of its effects reinforce or contradict other policy objectives or priorities?

In addition to its coherence with OSH policy, the implementation of the EU Strategic Framework was found to have impacted on several other policy areas at national level. Feedback from NCAs and social partners at national level highlighted the need for collaboration between institutions and agencies responsible for different areas of policy in order to ensure effective implementation. For example, the NCA in Bulgaria held inter-institutional forums, seminars and trainings targeted at officials and inspectors from the Ministry of Environment and Water, the Ministry of Health, the Regional Health Inspectorates and the General LI on specific legislation in the field of chemicals and mixtures.

However, other countries reported a certain lack of coordination between the national OSH strategy and other policy strategies, particularly in the area of public health and the economy. Specific examples included tensions between OSH obligations and a desire to prioritise economic growth, and contradictions with certain national responses to the COVID-19 pandemic (for example in Austria, where the obligation to wear masks at work due to the COVID-19 pandemic was in contradiction to an earlier rule preventing certain types of workers from wearing them).

Occupational safety and health is a cross-cutting issue with implications for other policy areas, including most notably public health policy, environmental policy and industrial policy. Issues such as mental health, psychosocial risks and MSDs are not limited to the workplace but have a broader impact on people's health. Additionally, issues that impact negatively on human health, such as the use of chemical substances or air pollution, also have negative environmental consequences. Regulation and legislation affecting the workplace have economic implications, which can impact the ease of doing business and the costs associated with protection of the workforce.

Additionally, there is significant overlap with trade policy, as labour conditions in other countries can have a significant impact on the cost and competitiveness of products

entering the EU market. The box below demonstrates how cooperation between DG EMPL and DG TRADE on including OSH considerations in FTAs has helped to reinforce action in this area.

Inclusion of OSH obligations in Free Trade Agreements

The inclusion of labour standards in free trade agreements (FTAs) is a key tool for ensuring OSH standards are maintained along the supply chain. The EU includes requirements related to labour standards in the trade and sustainable development (TSD) chapters of relevant FTAs. Dedicated government bodies (TSD Committee and the Trade Committee) and society structures (Domestic Advisory Groups and Civil Society Forums) are tasked with monitoring the implementation of the specific commitments included in each FTA. Under Objective 7 of the EU Strategic Framework, the European Commission is tasked with contributing to implementing the sustainable development chapter of EU free-trade and investment agreements regarding OSH and working conditions. DG TRADE leads on the negotiation of FTAs, with support from DG EMPL with regard to labour and social issues.

The first mention of labour standards in an EU FTA dates back to the signing of an FTA between the EU and South Korea in 2009[88]. This included a general commitment "to promote foreign direct investment without lowering or reducing environmental, labour or occupational health and safety standards in the application and enforcement of environmental and labour laws of the Parties"[89].

Since the publication of the EU Strategic Framework in 2014, more specific OSH-related commitments have been included in FTAs under negotiation. The main template for these commitments is the Comprehensive Economic Trade Agreement (CETA) that the EU signed with Canada in 2016. This includes two specific references to OSH:

- Under Article 23.3.2, each party commits to "ensure that its labour law and practices promote the following objectives included in the ILO Decent Work Agenda, and in accordance with the ILO Declaration on Social Justice for a Fair Globalization of 2008 adopted by the International Labour Conference at its 97th Session, and other international commitments".

- Under Article 23.3.3, each party commits to "ensure that its labour law and practices embody and provide protection for working conditions that respect the health and safety of workers, including by formulating policies that promote basic principles aimed at preventing accidents and injuries that arise out of or in the course of work, and that are aimed at developing a preventative safety and health culture where the principle of prevention is accorded the highest priority".

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[88] Harrison et. Al, 2018, *Labour Standards Provisions in EU Free Trade Agreements: Reflections on the European Commission's Reform Agenda*, CUP, available at: https://www.cambridge.org/core/journals/world-trade-review/article/labour-standards-provisions-in-eu-free-trade-agreements-reflections-on-the-european-commissions-reform-agenda/13756E42EE84E463BC6298DDF0EAB1BD.

[89] European Commission, 2019, *Commission Staff Working Document: Individual reports and info sheets on implementation of EU Free Trade Agreements accompanying the document Report from the Commission to the European parliament, the Councill, the European Economic and Social Committee, and the Committee of the Regions on Implementation of Free Trade Agreements*, available at: https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52019SC0370&from=en.

Following the agreement of CETA, the EU included provisions similar to those cited under Article 23.3.2 in signed FTAs with Japan (2019), Singapore (2019) and Vietnam (2020)[90]. Furthermore, EC officials confirmed that these provisions are also being included in ongoing negotiations with Australia, New Zealand and Indonesia.

In February 2018, the European Commissioner for Trade introduced a 15-point plan for improving the implementation and enforcement of Trade and Sustainable Development chapters in EU Free Trade Agreements[91]. Action point 13 committed to continue including commitments on the effective occupational health and safety and labour inspection system in future FTAs. Additionally, the plan includes commitments to be more assertive in enforcing the commitments agreed within TSDs and to ensure social partners are involved in implementation of TSD commitments.

In line with the 15-point plan, EC officials have confirmed that the number of themes covered in ongoing negotiations with Mexico, Indonesia and Mercosur has been expanded to include occupational safety and health, working conditions, labour inspection, access to remedies and the responsible management of supply chains.

Although OSH provisions were not included in the original Agreements, OSH considerations were also discussed at TSD Committee meetings in 2017, 2018 and 2019 for existing FTAs. These covered more general OSH issues (Moldova) as well as labour inspections (Peru, Ecuador, Ukraine and Georgia).[92]

The inclusion of OSH considerations in ongoing discussions around trade and its explicit inclusion in FTAs is a result of strong cooperation between DG TRADE and DG EMPL. It underscores the EU's commitment to protection of workers and is a potentially impactful way to leverage the EU's influence in order to guarantee OSH protection for workers beyond the EU's borders.

The priorities described within the EU Strategic Framework do not explicitly contradict the other EU policy objectives or priorities described above. Section 5.5 of the EU Strategic Framework acknowledges the interlinkages between OSH policy and the policy areas mentioned above, and outlines areas where there is potential to actively explore synergies. The new chemicals strategy of 2020 provides a good example of how such synergies could be exploited. The strategy combines aspects of OSH, environmental and industrial policy in one coherent document, describing the alignment of EU-level interventions in the field of chemicals with wider EU strategic priorities.

While not contradicting other policy areas, the EU Strategic Framework could more explicitly reinforce other European objectives and strategic priorities. Some stakeholders representing both employers and workers as well as EU institutions, agencies and bodies noted a somewhat siloed approach to different policy areas at EU level, and expressed a

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[90] DG TRADE, Negotiations and Agreements, available at: https://ec.europa.eu/trade/policy/countries-and-regions/negotiations-and-agreements/index_en.htm#_in-place.

[91] European Commission, 2018, *Non paper of the Commission services: Feedback and way forward on improving the implementation and enforcement of Trade and Sustainable Development chapters in EU Free Trade Agreements*, available at: https://trade.ec.europa.eu/doclib/docs/2018/february/tradoc_156618.pdf.

[92] European Commission, 2019, *Commission Staff Working Document: Individual reports and info sheets on implementation of EU Free Trade Agreements accompanying the document Report from the Commission to the European parliament, the Council, the European Economic and Social Committee, and the Committee of the Regions on Implementation of Free Trade Agreements*, available at: https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52019SC0370&from=en.

wish for more collaboration and communication between the different DGs within the Commission.

The partly intersecting remits of DG EMPL and DG GROW have caused confusion in some instances. NCAs as well as national and EU-level social partner representatives referred to different approaches being implemented to specific elements of industrial policy which touches on OSH. This resulted in some uncertainty and concerns regarding stakeholders' ability to understand and keep track of developments under different policy areas concerning workers' protection, from exposure to hazardous chemicals.

Interviewees at both national and EU level also referred to different approaches to scientific assessment underpinning different pieces of EU chemicals legislation. This issue was also reflected in the 2017 Communication[93] and the 2019 Fitness Check of the most relevant EU chemicals legislation (excluding REACH)[94]. Both of these documents identified inconsistencies in scientific advice and risk assessments issued by different EU scientific bodies depending on the competencies and remit determined by the relevant legislation. Employers, workers and representatives of EU agencies cited the example of different exposure limits between REACH and OSH legislation (as discussed in Section 2.4). Since 2017, relevant Commission services have worked closely together to resolve these issues and ensure complementarity between the two sets of legislation. For example, inconsistency concerning scientific assessment has been solved by using RAC/ECHA as the only scientific body providing assessments of workers' protection from exposure to chemicals.

Room for increased collaboration also exists in other areas, such as monitoring data and data sharing. For example, one suggestion made by interviewed stakeholders was that, instead of different entities gathering data only on aspects directly within their responsibilities, a more efficient way to look at how to monitor and share data on overlapping areas (such as in the triangle global health, OSH, and public health) would be beneficial and could potentially lead to better data.

3.4 EU added value

The final evaluation criterion considered as part of this study is EU added value – i.e. the value resulting from the EU Strategic Framework that is additional to the value that would have resulted from interventions initiated at regional or national levels, by public authorities and/or the private sector. The response to this question needs to take into account the scope of the EU competence in the area in question. In the case of employment and social policy (including OSH), the legislative competence is shared between the EU and the MS. More specifically, Article 153 TFEU authorises the EU to adopt legislation (directives) in the field of safety and health at work, in order to support and complement the activities of MS. This is the legal basis for the EU OSH *acquis*, and an important part of the rationale for EU action to ensure the consistent and effective implementation of the said *acquis*.

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[93] European Commission, 2017, *Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy*, available at https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A52017DC0012.

[94] European Commission, 2019, *Findings of the Fitness Check of the most relevant chemicals legislation (excluding REACH) and identified challenges, gaps and weaknesses*, available at: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:52020DC0102.

3.5.1 To what extent have the EU-level Framework and actions generated positive effects above and beyond what would have resulted from action at national / regional level only?

As already discussed in the previous sections (see in particular the findings on relevance and effectiveness), stakeholders consulted for this study consistently saw added value in the EU Strategic Framework. The vast majority both welcomed the existence of (and in many cases, emphasised the need for) *an* OSH strategy at EU level, and felt the specific Strategic Framework 2014-2020 had proved to be relevant and useful for their own efforts to promote high standards for working conditions in their own countries, as well as across the EU.

More specifically, the main ways in which the Framework generated positive effects above and beyond what Member State NCAs and social partners could have achieved on their own can be summed up as follows:

- **Inform national policy**: The EU Strategic Framework was an important reference document for MS in defining and in some case adjusting, their national priorities in the field of OSH. It played this role, to a greater or smaller extent, in all MS – including, in at least a few cases, leading to a greater emphasis on certain issues, such as psychosocial risks. This has resulted in a relatively high degree of alignment of the national strategies with the EU's Framework, and thus also with each other, thereby contributing to a more level playing field as regards working conditions.

- **Raise the profile of OSH**: Many stakeholders consulted for this study reported having found the Framework useful as a "lobbying tool". Both the mere existence of an EU strategy for OSH, and the specific content of the 2014-2020 Framework, has reportedly helped both NCAs and social partners to push for OSH policy in general, and/or specific challenges or objectives to be given adequate priority and resources at national level. The fact that the EU Strategy clearly identifies who is responsible for specific actions was found useful by some. Similar effects can be observed at EU level in certain areas, for example regarding the consideration of OSH in FTAs.

- **Facilitate the revision of EU legislation**: The Framework (and the 2017 Communication) have acted as a catalyst for the revision of significant parts of the EU OSH *acquis* in recent years. It identifies key priorities and guiding principles for this, both in terms of simplification and ensuring the rules are fit for the purpose of addressing key existing, new and emerging risks. This generates added value, as MS obviously must transpose, but cannot alter on their own, the EU legislation.

- **Foster the development of common initiatives and tools**: The Framework clearly was not the only reason why EU-level actors (in particular EU-OSHA) have produced and implemented a large number and variety of tools, campaigns and other materials that can be used and adapted by actors in the MS to their specific national circumstances. Nonetheless, the Framework has been an additional impetus for the launch, continuation and/or ramping up of numerous such initiatives, which have generally been found very helpful by stakeholders, especially in MS that would otherwise struggle to find the resources to produce their own equivalents.

- **Provide a framework for pan-EU collaboration:** Finally, the EU Strategic Framework has also provided extra impetus and direction to the work of the EU-level consultation and collaboration fora, in particular ACSH (with its tripartite structure) and SLIC (for LIs). These committees fed into the design of the Framework, and subsequently led on or contributed to several actions, generating added value for MS in particular by facilitating the exchange of information and good practices via peer reviews, exchange visits, publications, and other similar activities.

As discussed in more detail in the previous sections, the exact nature and extent of the Framework's influence and added value varied depending on the Member State and action

in question. Considering that the Strategic Framework is merely a "soft" policy document, and as such is not binding on any of the actors, its overall influence should not be over-estimated. It seems likely that many of the actions mentioned in the Framework, and discussed in this report, would have gone ahead in some form, even if the Framework had not been adopted in 2014. Nonetheless, the research conducted for this study shows that, by making priorities explicit, providing an overarching framework that links and contextualises the different activities, and calling on different stakeholders to take responsibility for concrete actions, the EU Strategic Framework did contribute to reinforcing several existing and launching numerous new initiatives at both EU and national level. Overall, this represents considerable added value, above and beyond what MS could have achieved acting individually.

3.5.2 In which areas, objectives or actions was the EU added value most / least significant, and why?

As noted above, the EU Strategic Framework has generated EU added value in a number of different ways – including:

- common priorities that contribute to ensuring OSH is high on the agenda and to a more level playing field;

- EU legislation that is more fit for purpose;

- common initiatives and tools that can generate economies of scale across the EU;

- and good practice exchange to 'raise the floor' and allow less advanced countries in a given area to learn from the more advanced ones.

These different mechanisms are present, to a greater or lesser extent, across all of the strategic objectives and corresponding actions included in the EU Strategic Framework, and it is therefore difficult to conclude categorically where EU action added the most (or least) value. Nonetheless, a few specific areas stand out:

- **Objective one**, which concerns the review of national OSH strategies, is the most obvious example of where the EU Framework provided strategic direction, but also generated a certain amount of 'peer pressure', which resulted in nearly all MS updating and, in many cases, aligning their OSH policies with common objectives. This represents a clear case of EU 'soft power', whereby commonly defined priorities and some strategic 'nudging' and support can contribute to positive changes in national policies.

- The three objectives that relate to EU OSH legislation also provide an interesting illustration of the different ways in which EU action (under the auspices of the Strategic Framework) can add value. EU action was clearly *necessary* regarding the updates of EU Directives (under **objective four**). It was also widely acknowledged that **objective two** adds significant value by providing common tools and initiatives (such as OiRA and the HWC), that can be adapted to national circumstances. These instruments also foster awareness and facilitate compliance with OSH legislation. Finally, as regards enforcement (**objective three**), this is the remit of national LIs. Nonetheless, the EU provided support via SLIC in the form of exchange of good practices, common standards and training (see the text box below).

- **Objective five** is about raising awareness and understanding of the key OSH challenges related to the ageing workforce, emerging new risks, and work-related

and occupational diseases, in order to enable stakeholders at all levels to address these more effectively. As such, similarly to objective one above, the added value lies primarily in informing national policy, as well as, to some extent, in economies of scale from the development of common initiatives and materials.

- **Objective six** is an area of *potentially* high EU added value, in view of the need to improve and harmonise the data and information base across the EU, so as to make more reliable, timely and comparable statistical data available and thereby facilitate evidence-based OSH policy making. However, the actions in this area also illustrate the challenges of adopting common approaches and definitions across MS with different ideas and traditions, and therefore progress has been somewhat limited, and the high *potential* EU added value has not fully materialised.

- Finally, action under **objective seven** was entirely reserved for the European Commission, inter alia due to its exclusive competence in the area of trade policy, and as such, it is difficult to comment on the EU added value in this area relative to the others. In any case, it seems clear that the EU as a whole has more leverage to insist on the inclusion of OSH clauses in FTAs than MS would individually, which is another way in which the EU adds value.

Development of SLIC training support materials and programmes in support of improved enforcement

The 2017 Communication on the modernisation of the EU OSH Legislation and Policy[95] recognised the key role of SLIC in identifying best practices regarding enforcement and inspection by MS and its contribution to competence building and guidance to inspectorates. The Communication tasked SLIC with developing a set of common standards for the training of LIs in different MS. By developing a common reference point for the training of LIs across the EU, SLIC is helping to develop a common approach to enforcement at EU level.

The Common standards for OSH Inspector training programmes[96] were published in 2019. It aims to establish a set of essential trainings for LIs to undertake across all 27 EU MS. The common standards' publication covers seven key areas of training that form the fundamentals of the work of LIs:

1. Training on risks mentioned in the framework directive and in the daughter directives;
2. Training the inspectors on the evaluation of risk assessment;
3. Training on preparation for an inspection;
4. Training on the investigation of occupational accidents and diseases;
5. Training on inspector duties and rights;
6. Training on communication skills;

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[95] European Commission, 2017, *Commission Communication COM(2017) 12 to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions of 10 January 2017 on 'Safer and Healthier Work for All - Modernisation of the EU Occupational Safety and Health Legislation and Policy'.*

[96] SLIC, 2019, *Common standards for OSH Inspector training programme,* available at: https://circabc.europa.eu/ui/group/fea534f4-2590-4490-bca6-504782b47c79/library/31647d8a-ccec-44af-ba1f-f4f37bb356b6

> 7. Training on management of conflict and pressure.
>
> The common standards document is a direct output of the EU Strategic Framework under objective 3 (improve enforcement). Additionally, some of the training topics contribute to the implementation of other objectives identified within the EU Strategic Framework. For example, training on evaluation of risk assessment is linked to objective two (facilitate compliance with EU legislation), while training on the investigation of occupational accidents and diseases can be linked to objective 5 (address the ageing workforce, emerging new risks, work-related and occupational diseases).
>
> For each of these training areas, the Common Standards for OSH Inspector training programmes specify the aims and expected outcomes for LIs. A review of all the chapters highlights the use of the mentoring method as a key step to educate young and/or recently hired labour inspectors.
>
> In addition to the adoption of the Common Standards for Inspector Training Programmes, SLIC has also developed a number of training modules on specific issues, which have contributed to the wider work and objectives pursued as part of the Strategic Framework. This includes for instance a module on chemical hazards in the workplace, which contributes to Objective 4 and 5 of the Strategic Framework, respectively 'simplify existing legislation (particularly assessing the situation in micro-enterprises)' and 'address ageing workforce, emerging new risks, work-related and occupational diseases'.
>
> This strand of work undertaken by the EC and SLIC to evaluate the training programmes of labour inspectors across MS. The subsequent development of the Common Standards for Inspector Training Programmes has been **key to ensuring a level playing field in terms of minimum standards for inspection in different MS**. In turn, this can be expected to lead to better compliance with and enforcement of OSH legislation by MS, and increased capacity to address the three challenges identified in the Strategic Framework (ageing workforce, emerging new risks, work-related and occupational diseases).

4 Conclusions and Recommendations

This section draws together the main conclusions emerging from this study about the EU Strategic Framework's design, implementation and impacts. Finally, it turns to the emerging priorities in terms of both design and key themes to be considered in the next Strategic Framework (2021-2027).

4.1 Framework design

The EC's approach to designing the EU Strategic Framework 2014-2020 was generally deemed to be both inclusive and proportionate. Nearly all relevant stakeholder groups found they were given sufficient opportunity to engage with the formal process of developing the EU Strategic Framework. Some social partners (representing workers) would have appreciated more opportunity to feed into the development of the EU Strategic Framework at the (very early) design phase. Some stakeholders (representing workers, employers and NCAs) also expressed concerns that although the consultation process engaged with all formal participants in the tripartite structure, this did not necessarily cover sectoral social partners, workers or employers identified as being most likely to be non-compliant.

The EU Strategic Framework's objectives and actions provide a unified strategic direction for improving OSH and support a level playing field in terms of the further development, implementation and enforcement of the EU OSH *acquis*. In particular:

- The design of the EU Strategic Framework was praised for its **conciseness and clarity**. The three main challenges and the associated seven key strategic objectives largely corresponded to the main problems and challenges facing the EU in the area of safety and health at work. Additionally, the decision to include concrete actions and named actors responsible for their implementation under each objective provided a tangible roadmap to achieving the objectives.

- Evidence from the national and EU-level data collection points **to good internal coherence** of the EU Strategic Framework. There is some clear evidence of synergies and mutually beneficial effects from actions carried out under different strategic objectives. In general, the challenges and priorities align well with those identified at national level.

- Most stakeholders consulted for this study **appreciated the broad scope and flexibility of the current EU Strategic Framework**, which covers most of the priority issues identified at national level. The current Framework provides much-needed flexibility for different countries and actors to implement and adapt the quite broad array of EU-level priorities in a pragmatic way, responding to the specific needs of the national, sectoral and temporal context.

- However, some felt that a **more robust strategy or policy** (such as the preceding 2007-2012 Community Strategy on Health and Safety at Work) would have been desirable, with a reduced number of key priorities, and/or more specific objectives and targets. Those who supported this option believed it would provide more impetus and accountability for progress on OSH-related issues.

- Additionally, some stakeholders identified a **slight disconnect between the challenges identified and some of the concrete objectives and actions** included in the strategy. In particular, they missed a clearer link between the challenges identified and the actions described under objectives four and seven.

The design of the EU Strategic Framework can be regarded as both a driver and a barrier to achieving the objectives defined within it. On the one hand, its flexibility and wide-ranging nature allows MS to adapt national OSH strategies to their specific contexts while remaining aligned with the core priorities defined within the document. However, the flexibility inherent

within such an all-encompassing document may have failed to provide very specific incentives.

4.2 Framework implementation

The implementation review carried out as part of this study identified **clear progress against all seven strategic objectives**. Specifically, there is evidence of activity under all but one of the 29 actions identified within the EU Strategic Framework. Similarly, although the nature of some of the actions means they may never be viewed as "completed", good progress has been made against most actions, and the majority could be viewed as having been achieved as foreseen within the reference period. Implementation of a number of actions which were expected to be completed by 2016 was, however, delayed. The 2017 Communication provided concrete actions with a clear timeframe for implementation and acted as a helpful catalyst for progress in implementation during the second half of the reference period.

The following points can be noted regarding implementation of each of the strategic objectives:

- **Objective one was commonly regarded by interviewees as the objective under which the most progress has been made**. This relates both to the extent to which Member States have updated their national strategies following the adoption of the Strategic Framework, and to the extent to which the influence of the EU Strategic Framework can be seen in these strategies. Additionally, the creation of the OSH Barometer and the 2019 review of national strategies mark significant progress in terms of making national OSH strategies accessible and comparable.

- **There has been significant activity under objective two** including the development of tools, guidance and case studies to support implementation. Awareness raising campaigns were also launched on specific issues, many of which aligned with activities being carried out under other objectives (especially objectives four and five). The OiRA activity, in particular, was successful in developing a wide range of tools adapted to a variety of sectoral and national contexts.

- While there is **evidence of progress under objective three (improve enforcement),** this was limited by constrained resources amongst LIs at national level. Nonetheless, there are some encouraging signs of activity at EU level. For example, the programme of national evaluations and exchanges being undertaken by SLIC and the development of a common framework for labour inspectors' training can be expected to result in a more coordinated approach to enforcement across EU MS, with clear opportunities for knowledge sharing.

- **The EC's focus on modernising the significant body of EU OSH legislation under objective four** and – in particular – on fighting against occupational cancer by setting new or updating existing occupational exposure limit values was also an important development linked to the EU Strategic Framework. This was operationalised and concretised via the 2017 Communication. There is now an onus on MS to transpose and implement the relevant legislation. Some stakeholders noted that progress on objective four relates more to *modernising* existing legislation, rather than necessarily focusing on real *simplification* – with differing levels of support for this approach between workers and employers.

- **While a lot of activity was noted under objective five**, the specific focus on new and emerging risks means that there will always be more left to do. Although one of the actions has not been launched, significant activity has taken place at both EU and national level in relation to addressing demographic change, emerging issues and specific risks faced by different groups of workers.

- **Eurostat and EU-OSHA have also worked hard to improve data on accidents and work-related diseases under objective six**. The OSH Barometer provides a significant first step towards making national OSH indicators accessible and comparable. Eurostat has also tackled the complexities of data collection in the field of OSH through its pilot project on European Occupational Diseases Statistics. Their approach appears to be both pragmatic and proportionate, and it is foreseen that the ongoing data collection pilot will bear fruit in future years. There is now a need for MS to work with EU institutions and bodies to improve the quantity and quality of OSH-related data collected at national level.

- **Finally, important advances have been made under objective seven** particularly with regard to the inclusion of OSH requirements in FTAs and efforts to engage with other global economies (such as China and the USA).

Key drivers of progress for all objectives include the strong tripartite approach that underlies the Framework's design and implementation, and high levels of engagement from different groups of key stakeholders. Additionally, cooperation between national authorities, workers' and employers in the design of national strategies was identified as a key indicator of success in their implementation. Significant barriers to implementation include limited awareness of some of the initiatives amongst target groups (especially MSEs). Additionally, progress on implementation at national level has been limited by resource constraints, especially amongst LIs.

Some workers' and employers' representatives also highlighted the need for an accountability mechanism to monitor progress against the objectives and hold those responsible for implementation to account. This was viewed as a limitation in ensuring the EU Strategic Framework was able to fully achieve its ambition. Indeed, the lack of a mechanism to monitor progress (as foreseen under objective six) has made the process of monitoring implementation and tracing longer-term impacts of the EU Strategic Framework more challenging.

4.3 Results & impacts

Although it is difficult to measure concrete impacts which can be clearly attributed to the EU Strategic Framework, a number of conclusions can be drawn with regard to its influence. Additionally, in some areas, there is strong evidence to support a "contribution story" linking the actions carried out to broader effects (some of which have already materialised, while others appear likely to follow in the foreseeable future):

- Firstly, there is a **clear consensus among stakeholders at all levels on the importance of having a framework at European level**. This refers both to the EU Strategic Framework being a common reference for Member States when designing their own OSH strategies and policies, and giving weight to considerations on health and safety in broader political and strategic discussions (both within the MS and on the international stage).

- There is also clear evidence that the EU Strategic Framework has contributed to significant progress on **improving OSH culture within the EU**, despite a certain degree of variation depending on the specific objectives and actions in question. Nearly all the outputs foreseen within the intervention logic have been realised and there has been progress against most of the outcomes foreseen for each specific objective.

- Many stakeholders identified the EU Strategic Framework as an important reference. These were in particularly NCAs, who have used it to **prioritise action on OSH at national level**. Additionally, social partners have found it to be a useful tool both to lobby for an increased focus on OSH generally, and to increase attention on specific issues such as MSDs and PSR.

- The inclusion of OSH in FTAs as well as high level bilateral discussions on OSH matters with leading economies have **elevated the importance of workplace health and safety on the global stag**e and positioned the EU as a leading actor in this field.

- The EU Strategic Framework (and the 2017 Communicaton) have supported the **revision of the EU OSH *acquis***, leading to the updating of six key directives in this field.

4.4 Recommendations for the next Strategic Framework (2021-2027)

This study has uncovered a considerable range of opinions amongst and within different stakeholder groups regarding the optimal design of a future EU Strategic Framework and its contents. This section highlights some recommendations which aim to acknowledge and address this divergence of views.

4.4.1 Considerations regarding design

With regard to the design of a future Strategic Framework, this study has identified a balance between **broad scope and flexibility of design** on the one hand, and **focus on a limited number of core priorities and accountability in terms of monitoring progress** on the other. Striking the right balance between these two – taking into account the political and socio-economic context at the time – is key for maximising the success of the future framework.

One specific approach that could help the future Framework strike this balance would be to combine a longer-term strategy with shorter term action plans. Building on the success of the 2017 Communication in revisiting the EU Strategic Framework's priorities and actions at the mid-point (in 2017), a future Strategic Framework could be accompanied by **shorter-term priorities and implementation plans** of approximately two or three years duration. These would focus on operationalising the aims contained within the higher-level Strategic Framework. In addition to named actors and timeframes for implementation, shorter-term implementation plans could include **concrete indicators** to monitor ongoing progress and increase transparency between different stakeholders.

Stakeholder feedback has also highlighted resource constraints as a significant barrier to OSH implementation within MS. It may therefore be appropriate to investigate to what extent it may be possible to build bridges with existing funding streams (such as the European Social Fund) to help stakeholders access financial support for implementation of actions identified in a future Strategic Framework.

4.4.2 Emerging priorities

The research at EU and national level has unearthed some broadly convergent views (some differences in nuance notwithstanding) with regard to a number of **important trends and emerging priorities in the field of OSH**. These are discussed in detail in Section 3.1.1.

A number of the common challenges identified in Section 3.1.1 are demonstrated clearly by Figure 15. This shows OPC respondents' views regarding the key challenges which are common across the EU and require further OSH policy action. The most common challenge selected was psychosocial risks (51% of respondents), followed by increased working from home/teleworking, ergonomic risks and MSDs and OSH risks emerging from ICT/digitalisation.

Figure 15: Views on challenges for the future that require OSH policy action
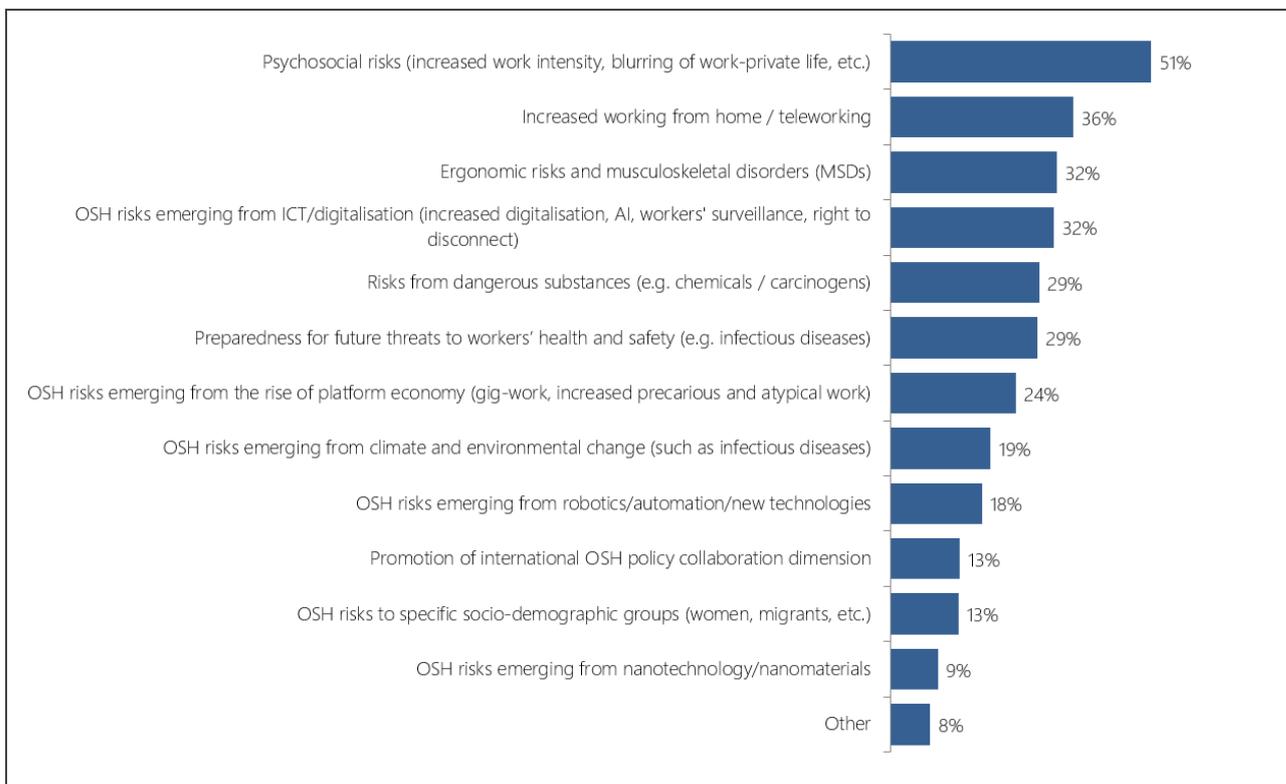
All respondents (n=349), *NB: Multiple responses per respondent were allowed*
Source: Public Consultation

The main priorities that have emerged from the research and consultation activities – which are therefore strong candidates for featuring in the successor of the current EU Strategic Framework - can be summarised as follows:

- Firstly, there is a need to **remain focused on the challenges and issues identified in the EU Strategic Framework 2014-2020**. Occupational diseases, demographic change, PSR and MSDs have only increased in importance in recent years. Additionally, there is a continued need to support both LIs and companies to improve OSH standards.

- Stakeholders also underlined the **need to continue to consider traditional OSH challenges** (including workplace accidents in the agricultural and construction sectors and risks such as falling from heights). These risks could be overlooked if a future Strategic Framework prioritises emerging risks too strongly.

- Consideration should also be given to the **impacts of a number of longer-term trends in the world of work**. Issues such as increasingly globalised supply chains, a move towards more flexible and atypical labour (including platform work and the gig economy), a transition towards teleworking and increased digitalisation all have implications for the future implementation of OSH. Thus, further consideration should be given to the opportunities and risks associated with these emerging trends.

- Ensuring OSH protection is **fit for purpose with regard to different types of workers** and that different impacts on different groups have been thoroughly considered. This particularly applies to migrant workers, those employed in the gig economy, platform workers and those working in the domestic sphere (including in-home private carers, cleaners and teleworkers). The gendered impacts of OSH as well as specific considerations required for workers with disabilities should also be considered.

- Taking into consideration the impacts of the COVID-19 outbreak on workplace health and safety, consideration should also be given to **broader global trends such as climate change and the potential for future pandemics.** A future Framework should reflect how these may impact the workplace of the future (for example, the impacts of retrofitting programmes on potential exposure to asbestos and the implications of the transition to a low carbon economy). A holistic approach to OSH, including **mainstreaming OSH considerations** into areas such as environmental policy and public health, could help to increase resilience in the face of future challenges.

ANNEX A: OPC Report

ANNEX B: NATIONAL IMPLEMENTATION REPORT

ANNEX C: COUNTRY REPORTS

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