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*****I**

REPORT

on the proposal for a regulation of the European Parliament and of the Council
on Community statistics on public health and health and safety at work
(COM(2007)0046 – C6-0062/2007 – 2007/0020(COD))

Committee on the Environment, Public Health and Food Safety

Rapporteur: Karin Scheele

Draftsman (*): Jiří Maštálka, Committee on Employment and Social Affairs

(*) Procedure with associated committees – Rule 47 of the
Rules of Procedure

Symbols for procedures

- * Consultation procedure
majority of the votes cast
- **I Cooperation procedure (first reading)
majority of the votes cast
- **II Cooperation procedure (second reading)
majority of the votes cast, to approve the common position
majority of Parliament's component Members, to reject or amend the common position
- *** Assent procedure
majority of Parliament's component Members except in cases covered by Articles 105, 107, 161 and 300 of the EC Treaty and Article 7 of the EU Treaty
- ***I Codecision procedure (first reading)
majority of the votes cast
- ***II Codecision procedure (second reading)
majority of the votes cast, to approve the common position
majority of Parliament's component Members, to reject or amend the common position
- ***III Codecision procedure (third reading)
majority of the votes cast, to approve the joint text

(The type of procedure depends on the legal basis proposed by the Commission.)

Amendments to a legislative text

In amendments by Parliament, amended text is highlighted in ***bold italics***. Highlighting in *normal italics* is an indication for the relevant departments showing parts of the legislative text for which a correction is proposed, to assist preparation of the final text (for instance, obvious errors or omissions in a given language version). These suggested corrections are subject to the agreement of the departments concerned.

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DRAFT EUROPEAN PARLIAMENT LEGISLATIVE RESOLUTION

**on the proposal for a regulation of the European Parliament and of the Council on
Community statistics on public health and health and safety at work
(COM(2007)0046 – C6-0062/2007 – 2007/0020(COD))**

(Codecision procedure: first reading)

The European Parliament,

- having regard to the Commission proposal to the European Parliament and the Council (COM(2007)0046)¹,
 - having regard to Article 251(2) and Article 285(1) of the EC Treaty, pursuant to which the Commission submitted the proposal to Parliament (C6-0062/2007),
 - having regard to Rule 51 of its Rules of Procedure,
 - having regard to the report of the Committee on the Environment, Public Health and Food Safety and the opinion of the Committee on Employment and Social Affairs (A6-0365/2007),
1. Approves the Commission proposal, as amended;
 2. Calls on the Commission to refer the matter to Parliament again if it intends to amend its proposal substantially or replace it with another text;
 3. Instructs its President to forward its position to the Council and Commission.

Text proposed by the Commission

Amendments by Parliament

Amendment 1 Recital 3

(3) Council Resolution No 2002/C 161/01 of 3 June 2002 on a new Community strategy on health and safety at work (2002-2006) (6) called on the Commission and the Member States to step up work in hand on harmonisation of statistics on accidents at work and occupational illnesses, so as to have available comparable data from which to make an objective assessment of the

(3) Council Resolution No 2002/C 161/01 of 3 June 2002 on a new Community strategy on health and safety at work (2002-2006) (6) called on the Commission and the Member States to step up work in hand on harmonisation of statistics on accidents at work and occupational illnesses, so as to have available comparable data from which to make an objective assessment of the

¹ OJ C ..., ..., p.

impact and effectiveness of the measures taken under the new Community strategy. In addition, Commission Recommendation C(2003) 3297 final of 19 September 2003 concerning the European schedule of occupational diseases recommended that the Member States progressively make their statistics on occupational diseases compatible with the European schedule, in accordance with the work being done on harmonising European statistics on occupational diseases.

impact and effectiveness of the measures taken under the new Community strategy, *as well as emphasising, in a specific section, the need to take into account the increase in the proportion of women on the labour market and to respond to their specific needs in relation to policies on health and safety at work*. In addition, Commission Recommendation C(2003) 3297 final of 19 September 2003 concerning the European schedule of occupational diseases recommended that the Member States progressively make their statistics on occupational diseases compatible with the European schedule, in accordance with the work being done on harmonising European statistics on occupational diseases.

Amendment 2 Recital 17

(17) In particular, the Commission should be empowered to determine definitions, subjects and breakdown (including variables and classifications), sources whenever relevant and provision of data and metadata (including reference periods, intervals and time limits) as regards the domains referred to in Article 2 and in the Annexes 1 to 5 to this Regulation. Since these are measures of general scope designed to amend or delete non-essential elements of this Regulation, or to supplement this Regulation by the addition of new non-essential elements, they *should* be adopted in accordance with the regulatory procedure with scrutiny provided for in Article 5a of Decision 1999/468/EEC.

(17) In particular, the Commission should be empowered to determine definitions, subjects and breakdown (including variables and classifications - *inter alia, where possible and necessary, classifications by gender and age*), sources whenever relevant and provision of data and metadata (including reference periods, intervals and time limits) as regards the domains referred to in Article 2 and in the Annexes 1 to 5 to this Regulation. *It is important that gender and age be included in the breakdown variables as this allows the impact of gender and age differences on health and safety in the workplace to be taken into account*. Since these are measures of general scope designed to amend or delete non-essential elements of this Regulation, or to supplement this Regulation by the addition of new non-essential elements, they *must* be adopted in accordance with the regulatory procedure with scrutiny provided for in

Justification

The Commission should be empowered to determine definitions, subjects and breakdowns. Regarding the breakdowns gender should be included to have information regarding possible gender differences concerning health and safety at work.

Amendment 3
Recital 17 a (new)

(17a) Complementary financing for the collection of the data in the field of health and safety will be provided in the framework of the Community programme for employment and social solidarity (PROGRESS). Within this framework financial resources should be used to help Member States in further building up national capacities to implement improvements and new tools for statistical data collection in the field of health and safety at work.

Justification

The priorities of PROGRESS are defined by the PROGRESS committee in DG EMPL. Financial support to help Member States in further building up national capacities to implement improvements and new tools of statistical data collections should be included. At present it is not per definition included.

Amendment 4
Article 1, paragraph 1

1. This Regulation establishes a common framework for the systematic production of Community statistics on public health and health and safety at work.

1. This Regulation establishes a common framework for the systematic production of Community statistics on public health and health and safety at work. ***The statistics shall be produced in compliance with standards on impartiality, reliability, objectivity, cost-effectiveness and statistical***

confidentiality.

Justification

The first article of the Regulation should also lay down the conditions concerning the production of Community statistics.

Amendment 5
Article 1, paragraph 2

2. The statistics shall include, in the form of a minimum data set, information required for Community action in the field of public health, for supporting national strategies for the development of high-quality, accessible and sustainable health care as well as for Community action in the field of health and safety at work.

2. The statistics shall include, in the form of a minimum data set, information required for Community action in the field of public health, for supporting national strategies for the development of high-quality, **universally** accessible and sustainable health care as well as for Community action in the field of health and safety at work.

Justification

It is important that access to public health care should be guaranteed in the Member States.

Amendment 6
Article 3, point (c)

(c) 'public health' means all elements related to the health of European citizens and residents, namely their health status, including morbidity and disability, the determinants having an effect on that health status, health-care needs, resources allocated to health care, the provision of, and access to, health care as well as the health care expenditure and financing, and the causes of mortality;

(c) 'public health' means all elements related to the health of European citizens and residents, namely their health status, including morbidity and disability, the determinants having an effect on that health status, health-care needs, resources allocated to health care, the provision of, and **universal** access to, health care as well as the health care expenditure and financing, and the causes of mortality;

Justification

Universal health care access is essential in ensuring that people enjoy decent health levels throughout their lives.

Amendment 7
Article 5, paragraph 3

3. The statistical methodologies and data collections to be developed for the compilation of statistics on public health and health and safety at work at Community level shall take into consideration the need for coordination, whenever relevant, with the activities of international organisations in the field, in order to ensure international comparability of statistics and consistency of data collections.

3. The statistical methodologies and data collections to be developed for the compilation of statistics on public health and health and safety at work at Community level shall take into consideration the need for coordination, whenever relevant, with the activities of international organisations in the field, in order to ensure international comparability of statistics and consistency of data collections. ***Within the European Union, studies and surveys of the European Agency for Safety and Health at Work and of the European Foundation for the Improvement of Living and Working Conditions should be taken into account. Outside Europe, cooperation with the United Nations, and especially with the International Labour Office and World Health Organisation, should be further enhanced.***

Justification

It is important that all information on statistical definitions and methods is used in order to limit the information burden for the Member States and also to use the experiences of these organisations on the field of collection data on health and safety at work. For example the surveys done by European Foundation for the Improvement of Living and Working Conditions on exposures and not only the health outcomes are an excellent tool which should be used by Eurostat.

Amendment 8
Annex I, point (d), indent 1 a (new)

- tracking of any disease whose incidence is increasing or decreasing,

Justification

It is important to collect data on conditions/diseases that demonstrate a change in incidence. Any increase in incidence presents challenges. There is a need to examine a condition and its increase in order to gather as much information as possible to treat the needs of the disease and provide valuable insight into that condition. Decreases in incidence can also provide us

with valuable data that will help us to further decrease the incidence of the condition and to help other conditions to decrease.

Amendment 9
Annex V, point (b)

A case of occupational disease is defined as a case recognised by the national authorities responsible for recognition of occupational diseases. The data shall be collected for incident occupational diseases and deaths due to occupational disease. A case of work-related health problem and illness does not necessarily refer to recognition by an authority and the related data shall be collected mainly from population surveys.

A case of occupational disease is defined as a case recognised by the national authorities responsible for recognition of occupational diseases. The data shall be collected for incident occupational diseases and deaths due to occupational disease. A case of work-related health problem and illness does not necessarily refer to recognition by an authority and the related data shall be collected mainly from population surveys.
Work-related health problems and illnesses are those health problems and illnesses which can be caused, worsened or jointly caused by working conditions. This includes physical and psychosocial health problems.

Justification

The term occupational diseases is very limited and does not cover the majority of the illnesses caused by the workplace. It is important to ensure that the definition covers both physical as well as mental and social illnesses/problems caused, co caused or aggravated by the working environment. At the moment not enough data exists on work-related illnesses/problems to be able to get an accurate picture of the risks workers are exposed to or the social inequalities that exist between different types of workers.

Amendment 10
Annex V, point (d), indents 1 and 2

- characteristics of the diseased person and the disease or health-related problems.

- characteristics of the enterprise and workplace.

- characteristics of the diseased person and the disease or health-related problems,
including gender, age and employment status.

- characteristics of the enterprise and workplace, ***including size and sector of the enterprise.***

EXPLANATORY STATEMENT

The aim of this draft regulation on Community statistics on public health and health and safety at work is to establish a legal framework for the production of statistics in these two areas. The shift from the gentlemen's agreements which have hitherto been the norm to a legal framework with increased sustainability and stability will also enable Member States to benefit from improved planning in terms of time and above all from clearer requirements for the requisite data standards.

The importance of having comparable statistics at EU level was already stressed in the Community strategy on health and safety at work 2002-2006 and linked with the requirement that work on statistical information systems be continued. The fundamental importance of collecting, preparing and analysing data concerning health at Community level is also highlighted in the Programme of Community Action in the Field of Public Health 2003-2008. The comparability of the data supplied by Member States and the requisite coordination when collecting such data play a crucial role in this process. This is essentially the aim of this draft regulation: to ensure progress towards better quality and comparability standards for data collections, including those which have already been carried out. The regulation on Community statistics is an essential accompaniment to - and therefore indispensable in - our being able to continue to meet the fundamental objectives of Public Health Programme 2003-2008 (Decision No 1786/2002/EC) and build on a firm foundation as we press on with the statistical components of the Action Programme until 2013.

A link with the concerted strategy for modernising social protection (Communication from the Commission to the Council, the European Parliament, the Economic and Social Committee and the Committee of the Regions: A concerted strategy for modernising social protection (COM(1999) 347) is also set out. Meaningful statistical data are a prerequisite for an improvement in employability and the EU objective of guaranteeing high quality requirements in the health system, as well as for ensuring health care which can be financed in the long term.

Data protection and ruling out traceability to individual citizens is a crucial question in the collection and preparation of data, particularly in the field of health care.

The confidentiality of the European Statistical System (ESS) is ensured by means of a large number of regulations. In particular, Directive 95/46/EC of the European Parliament and of the Council of 24 October 1995 guarantees the protection of natural persons in the processing of personal data and in the free movement of data. Furthermore, work within the ESS must be undertaken in accordance with the European Statistics Code of Practice, which cites "statistical confidentiality" as one of the main principles to be followed. Even if the use of confidential data is necessary in order to generate meaningful indicators, it is not possible to draw conclusions on the identity of individuals on the basis of the results which appear in the final publications and on the homepage.

Moreover, no additional budget resources are needed in order to finance the data collections envisaged in the regulation. Financing is effected in part from the operating budget of EUROSTAT (the Statistical Office of the European Communities) and is also available from

the financial framework of the Health Programme as a result of the link with the programme of Community action in the field of public health (2003-2008), the objectives of which stipulate the need for the collection of data in the Community. This is also included in the proposal for the second Action Programme on public health until 2013. In connection with analytical tasks, mention should be made of the Community Programme for Employment and Social Solidarity - PROGRESS 2007-2013 (Decision No 1672/2006/EC of the European Parliament and of the Council of 24 October 2006), the clearly defined objective of which is to support the development of statistical tools and methods and common indicators.

This draft regulation is an essential contribution to the compilation and evaluation of Community data concerning health and to the production of meaningful statistics on public health and health and safety at work. It covers key aspects such as data protection and financing, and its objectives are consistent and linked to various Community endeavours in the field of health and social issues.

28.6.2007

OPINION OF THE COMMITTEE ON EMPLOYMENT AND SOCIAL AFFAIRS

for the Committee on the Environment, Public Health and Food Safety

on the proposal for a regulation of the European Parliament and of the Council on Community statistics on public health and health and safety at work
(COM(2007)0046 – C6-0062/2007 – 2007/0020(COD))

Draftsman (*): Jiří Maštálka

(*) Procedure with associated committees - Rule 47 of the Rules of Procedure

SHORT JUSTIFICATION

The aim is to establish a framework for the systematic production of statistics regarding health and health and safety at the workplace. The main goal is to give a consolidated and firm legal basis to the collection of the data. Eurostat is the designated organisation for the implementation of the regulation. The proposal is not focused on policy developments. The collected data will give a statistical overview of the developments concerning health and health and safety of the workplace in Member States and in the EU.

The development of indicators is important in view of the Lisbon strategy and demographic change. One of the key objectives of the strategy is more and better jobs and within this one of the elements is improving health and safety at the workplace. Also the Community strategy on health and safety at work 2002 - 2006¹ calls upon Commission and Member States to step up work on harmonising statistics on accidents at work and occupational illnesses. It is also important to have this information in order to improve prevention and thereby reducing the economic costs.

Presently, the data is collected through a "gentlemen's agreement", causing some limitations in the comparability. In order to receive comparable data the Member States need clear time schedules and objectives for the implementation. During consultations it became clear that without a legal framework a large majority of the Member States would not be able to collect the data.

¹ COM(2002)0118.

Article 285 of the Treaty establishing the European Community provide the legal basis for Community statistics. Only then the Commission can coordinate the necessary harmonisation of the statistical information, while the collection of the data is done by the Member States. The Commission will ensure this by dealing with subject such as definition of variables, breakdown, dates of implementation and frequency, etc.. Gender should be introduced as a breakdown to have information regarding possible gender differences. Flexibility will be left to Member States concerning for example main elements of sources.

For the health and safety on the workplace the used definitions are given in annexes IV and V of the proposal. For the domain of the Accidents at work (annex IV) within the European Union studies and surveys of the European Agency for Safety and Health at Work and of the European Foundation for the Improvement of Living and Working Conditions should be taken into account. Outside Europe cooperation with the UN should be further enhanced, especially with the International Labour Office and World Health Organisation.. Occupational diseases and other work-related health problems and illnesses (annex V) are defined as a case which is recognised by national authorities. Some of the data will also be collected from a population survey.

The complementary financing will be provided for the health and safety at the workplace in the framework of the Community programme for employment and social solidarity (PROGRESS)¹. The priorities of this programme are defined by the PROGRESS committee in DG EMPL. In principle financial support to help Member States in further building up national capacities to implement improvements and new tools of statistical data collections should be included.

AMENDMENTS

The Committee on Employment and Social Affairs calls on the Committee on the Environment, Public Health and Food Safety, as the committee responsible, to incorporate the following amendments in its report:

Text proposed by the Commission ²	Amendments by Parliament
Amendment 1 Recital 3	
(3) Council Resolution No 2002/C 161/01 of 3 June 2002 on a new Community strategy on health and safety at work (2002-2006) (6) called on the Commission and the Member	(3) Council Resolution No 2002/C 161/01 of 3 June 2002 on a new Community strategy on health and safety at work (2002-2006) (6) called on the Commission and the Member

¹ COM(2005)0536.

² OJ C, p.

States to step up work in hand on harmonisation of statistics on accidents at work and occupational illnesses, so as to have available comparable data from which to make an objective assessment of the impact and effectiveness of the measures taken under the new Community strategy. In addition, Commission Recommendation C(2003) 3297 final of 19 September 2003 concerning the European schedule of occupational diseases recommended that the Member States progressively make their statistics on occupational diseases compatible with the European schedule, in accordance with the work being done on harmonising European statistics on occupational diseases.

States to step up work in hand on harmonisation of statistics on accidents at work and occupational illnesses, so as to have available comparable data from which to make an objective assessment of the impact and effectiveness of the measures taken under the new Community strategy, ***as well as emphasising, in a specific section, the need to take into account the increase in women on the labour market and to respond to their specific needs in relation to policies on health and safety at work.*** In addition, Commission Recommendation C(2003) 3297 final of 19 September 2003 concerning the European schedule of occupational diseases recommended that the Member States progressively make their statistics on occupational diseases compatible with the European schedule, in accordance with the work being done on harmonising European statistics on occupational diseases.

Amendment 2
Recital 17

(17) In particular, the Commission should be empowered to determine definitions, subjects and breakdown (including variables and classifications), sources whenever relevant and provision of data and metadata (including reference periods, intervals and time limits) as regards the domains referred to in Article 2 and in the Annexes 1 to 5 to this Regulation. Since these are measures of general scope designed to amend or delete non-essential elements of this Regulation, or to supplement this Regulation by the addition of new non-essential elements, they should be adopted in accordance with the regulatory procedure with scrutiny provided for in Article 5a of Decision 1999/468/EEC.

(17) In particular, the Commission should be empowered to determine definitions, subjects and breakdown (including variables and classifications - *inter alia, where possible and necessary, classifications by gender and age*), sources whenever relevant and provision of data and metadata (including reference periods, intervals and time limits) as regards the domains referred to in Article 2 and in the Annexes 1 to 5 to this Regulation. ***It is important that gender and age be included in the breakdown variables as this allows the impact of gender and age differences on health and safety in the workplace to be taken into account.*** Since these are measures of general scope designed to amend or delete non-essential elements of this Regulation, or to supplement this Regulation by the addition of new non-essential elements, they should

be adopted in accordance with the regulatory procedure with scrutiny provided for in Article 5a of Decision 1999/468/EEC.

Justification

The Commission should be empowered to determine definitions, subjects and breakdowns. Regarding the breakdowns gender should be included to have information regarding possible gender differences concerning health and safety at work.

Amendment 3 Recital 17 a (new)

(17a) Complementary financing for the collection of the data in the field of health and safety will be provided in the framework of the Community programme for employment and social solidarity (PROGRESS). Within this framework financial resources should be used to help Member States in further building up national capacities to implement improvements and new tools for statistical data collection in the field of health and safety at work.

Justification

The priorities of PROGRESS are defined by the PROGRESS committee in DG EMPL. Financial support to help Member States in further building up national capacities to implement improvements and new tools of statistical data collections should be included. At present it is not per definition included.

Amendment 4 Article 1, paragraph 1

1. This Regulation establishes a common framework for the systematic production of Community statistics on public health and health and safety at work.

1. This Regulation establishes a common framework for the systematic production of Community statistics on public health and health and safety at work. ***The statistics shall be produced in compliance with standards on impartiality, reliability, objectivity, cost-effectiveness and statistical***

confidentiality.

Justification

The first article of the Regulation should also lay down the conditions concerning the production of Community statistics.

Amendment 5
Article 5, paragraph 3

3. The statistical methodologies and data collections to be developed for the compilation of statistics on public health and health and safety at work at Community level shall take into consideration the need for coordination, whenever relevant, with the activities of international organisations in the field, in order to ensure international comparability of statistics and consistency of data collections.

3. The statistical methodologies and data collections to be developed for the compilation of statistics on public health and health and safety at work at Community level shall take into consideration the need for coordination, whenever relevant, with the activities of international organisations in the field, in order to ensure international comparability of statistics and consistency of data collections. ***Within the European Union, studies and surveys of the European Agency for Safety and Health at Work and of the European Foundation for the Improvement of Living and Working Conditions should be taken into account. Outside Europe, cooperation with the UN, and especially with the International Labour Office and World Health Organisation, should be further enhanced.***

Justification

It is important that all information on statistical definitions and methods is used in order to limit the information burden for the Member States and also to use the experiences of these organisations on the field of collection data on health and safety at work. For example the surveys done by European Foundation for the Improvement of Living and Working Conditions on exposures and not only the health outcomes are an excellent tool which should be used by Eurostat.

Amendment 6
Article 7, paragraph 4

4. Every five years Member States shall supply the Commission (Eurostat) with two reports, prepared in conformity with the

4. Every five years Member States shall supply the Commission (Eurostat) with two reports, prepared in conformity with the

standards referred to in paragraph 2, on the quality of the data transmitted and the sources of the data. The first report shall concern public health statistics and the second health and safety at work statistics. Every **five** years the Commission (Eurostat) shall draw up a report on the comparability of the data disseminated.

standards referred to in paragraph 2, on the quality of the data transmitted and the sources of the data. The first report shall concern public health statistics and the second health and safety at work statistics. Every **two and a half** years the Commission (Eurostat) shall draw up a report on the comparability of the data disseminated.

Justification

It is important to have the comparable information as soon as possible. To keep the pressure on Eurostat and the Member States and because in many Member States the national authorities do not have a system in place to measure health and safety at work the evaluation should be done earlier.

Amendment 7 Annex V, point b

(b) A case of occupational disease is defined as a case recognised by the national authorities responsible for recognition of occupational diseases. The data shall be collected for incident occupational diseases and deaths due to occupational disease. A case of work-related health problem and illness does not necessarily refer to recognition by an authority and the related data shall be collected mainly from population surveys.

(b) A case of occupational disease is defined as a case recognised by the national authorities responsible for recognition of occupational diseases. The data shall be collected for incident occupational diseases and deaths due to occupational disease. A case of work-related health problem and illness does not necessarily refer to recognition by an authority and the related data shall be collected mainly from population surveys. ***Work-related health problems and illnesses are those health problems and illnesses which can be caused, worsened or jointly caused by working conditions. This includes physical and psychosocial health problems.***

Justification

The term occupational diseases is very limited and does not cover the majority of the illnesses caused by the workplace. It is important to ensure that the definition covers both physical as well as mental and social illnesses/problems caused, co caused or aggravated by the working environment. At the moment not enough data exists on work-related illnesses/problems to be able to get an accurate picture of the risks workers are exposed to or the social inequalities that exist between different types of workers.

Amendment 8
Annex V, point d

(d) The minimum data set to be provided shall cover the following list of subjects:

- characteristics of the diseased person and the disease or health-related problems.

- characteristics of the enterprise and workplace.

- characteristics of the causative agent or factor.

Not all subjects are necessarily to be provided at the time of each data provision. The variables and breakdowns required shall be drawn from the above list and agreed upon with Member States.

(d) The minimum data set to be provided shall cover the following list of subjects:

- characteristics of the diseased person and the disease or health-related problems, ***including gender, age and employment status.***

- characteristics of the enterprise and workplace, ***including size and sector of the enterprise.***

- characteristics of the causative agent or factor.

Not all subjects are necessarily to be provided at the time of each data provision. The variables and breakdowns required shall be drawn from the above list and agreed upon with Member States.

PROCEDURE

Title	Community statistics on public health and health and safety at work
References	COM(2007)0046 - C6-0062/2007 - 2007/0020(COD)
Committee responsible	ENVI
Opinion by Date announced in plenary	EMPL 13.3.2007
Enhanced cooperation - date announced in plenary	21.6.2007
Drafts(wo)man Date appointed	Jiří Maštálka 28.2.2007
Discussed in committee	8.5.2007 26.6.2007
Date adopted	27.6.2007
Result of final vote	+: 28 -: 0 0: 1
Members present for the final vote	Jan Andersson, Alexandru Athanasiu, Edit Bauer, Jean-Luc Bennaïmias, Emine Bozkurt, Iles Braghetto, Philip Bushill-Matthews, Derek Roland Clark, Luigi Cocilovo, Jean Louis Cottigny, Richard Falbr, Ilda Figueiredo, Karin Jöns, Ona Juknevičienė, Raymond Langendries, Elizabeth Lynne, Thomas Mann, Jiří Maštálka, Maria Matsouka, Mary Lou McDonald, Csaba Őry, Elisabeth Schroedter, José Albino Silva Peneda, Gabriele Stauner, Gabriele Zimmer
Substitute(s) present for the final vote	Rumiana Jeleva, Magda Kósáné Kovács, Sepp Kusstatscher, Glenis Willmott

PROCEDURE

Title	Community statistics on public health and health and safety at work
References	COM(2007)0046 - C6-0062/2007 - 2007/0020(COD)
Date submitted to Parliament	7.2.2007
Committee responsible Date announced in plenary	ENVI 13.3.2007
Committee(s) asked for opinion(s) Date announced in plenary	EMPL 13.3.2007
Enhanced cooperation Date announced in plenary	ENVI 21.6.2007
Rapporteur(s) Date appointed	Karin Scheele 8.3.2007
Discussed in committee	16.7.2007
Date adopted	2.10.2007
Result of final vote	+: 40 -: 0 0: 0
Members present for the final vote	Adamos Adamou, Liam Aylward, Pilar Ayuso, Johannes Blokland, John Bowis, Frieda Brepoels, Dorette Corbey, Chris Davies, Jill Evans, Anne Ferreira, Matthias Groote, Satu Hassi, Gyula Hegyi, Jens Holm, Marie Anne Isler Béguin, Eija-Riitta Korhola, Urszula Krupa, Linda McAvan, Roberto Musacchio, Péter Olajos, Miroslav Ouzký, Vladko Todorov Panayotov, Vittorio Prodi, Guido Sacconi, Amalia Sartori, Karin Scheele, Richard Seeber, María Sornosa Martínez, Antonios Trakatellis, Thomas Ulmer, Anja Weisgerber, Glenis Willmott
Substitute(s) present for the final vote	Iles Braghetto, Karin Jöns, Caroline Lucas, Miroslav Mikolášik, Eluned Morgan, Bart Staes
Substitute(s) under Rule 178(2) present for the final vote	Pier Antonio Panzeri, Willi Piecyk