



HEALTH AND SAFETY AT WORK

Improving health and safety at work has been an important issue for the EU since the 1980s. The introduction of legislation at European level set minimum standards for the protection of workers, while allowing Member States to maintain or introduce more stringent measures. Health and safety at work is a key component of the European Pillar of Social Rights Action Plan, which was adopted at the Lisbon Social Summit in 2021.

LEGAL BASIS

Articles 91, 114, 115, 151, 153 and 352 of the Treaty on the Functioning of the European Union (TFEU).

OBJECTIVES

On the basis of Article 153 TFEU, the EU is able to adopt legislation (directives) on health and safety at work in order to support and complement the activities of the Member States. To this end, minimum requirements are laid down at EU level allowing Member States to introduce a higher level of protection at national level if they so wish. The Treaty also stipulates that the directives adopted must not impose administrative, financial or legal constraints that would hold back the creation and development of SMEs.

ACHIEVEMENTS

A. Institutional development

Under the auspices of the European Coal and Steel Community (ECSC), various research programmes were carried out in the field of occupational safety and health (OSH). The need for a global approach to the matter became manifest with the establishment of the European Economic Community (EEC) in 1957. The Advisory Committee on Safety, Hygiene and Health Protection at Work was set up in 1974 to assist the Commission ([Council Decision 74/325/EEC](#)). Minimum OSH requirements were needed in order to complete the European single market. A number of directives were therefore adopted, such as Directive 82/605/EEC (replaced by [Directive 98/24/EC](#)) on protection against the risks associated with metallic lead, Directive 83/477/EEC (last amended by [Directive 2009/148/EC](#)) on asbestos, and Directive 86/188/EEC (last amended by [Directive 2003/10/EC](#)) on noise.



1. Single European Act

The adoption of the [Single European Act](#) in 1987 brought health and safety at work into the EEC Treaty for the first time, in an article laying down minimum requirements and allowing the Council to adopt occupational health and safety directives by qualified majority. The aims were: to improve workers' health and safety at work; to harmonise conditions in the working environment; to prevent 'social dumping' as completion of the internal market progressed; and to prevent companies from moving to areas with a lower level of protection in order to gain a competitive edge.

2. Treaty of Amsterdam (1997)

The [Amsterdam Treaty](#) strengthened the status of employment issues by introducing the title on employment and the Social Agreement. For the first time, directives setting out minimum requirements in the field of health and safety at work and working conditions were adopted by both Parliament and the Council by means of the codecision procedure.

3. Contribution of the Lisbon Treaty (2007)

The [Lisbon Treaty](#) contains a 'social clause' under which social requirements must be taken into account in the EU's policies. Upon the entry into force of the Lisbon Treaty, the [Charter of Fundamental Rights of the European Union](#) became legally binding on the Member States when they apply EU law.

4. European Pillar of Social Rights (2017)

The [European Pillar of Social Rights](#), signed by the Council, the Commission and Parliament in November 2017, sets out 20 rights and principles, including the right, enshrined in Article 31 of the Charter of Fundamental Rights, to working conditions which respect workers' health, safety and dignity. According to principle 10 of the Pillar, workers have the right to a high level of protection of their health and safety at work, as well as the right to a working environment adapted to their professional needs and which enables them to prolong their participation in the labour market. Though not legally binding in itself, the pillar is a package of legislative and soft-law measures that aims to drive upward convergence in living and working conditions in the EU.

B. Milestones: Directives and European Agency for Occupational Health and Safety

1. Framework Directive 89/391/EEC and individual directives

Article 137 of the Treaty of Nice (now Article 153 TFEU) formed the basis for EU efforts to improve the working environment with a view to protecting workers' health and safety. The adoption of [Framework Directive 89/391/EEC](#), with its specific focus on the culture of prevention, was a milestone. It provided for preventive measures, information, consultation, balanced participation and training for workers and their representatives, in the public and the private sector. The framework directive forms the basis for 25 individual directives in different areas and for [Council Regulation \(EC\) No 2062/94](#) establishing a European Agency for Safety and Health at Work. It has also had an impact on other legislative acts relating to temporary agency workers and aspects of working time in various directives.

The individual directives include the following:



- Health and safety requirements for the workplace (89/654/EEC) and the provision of safety and/or health signs at work (92/58/EEC);
- The use of work equipment (89/655/EEC amended by Directive 2001/45/EC and Directive 2009/104/EC); of personal protective equipment (89/656/EEC) and work with display screen equipment (90/270/EEC) and manual handling (90/269/EEC);
- Sectors: temporary or mobile construction sites (92/57/EEC); mineral-extracting industries (drilling) (92/91/EEC; 92/104/EEC) and fishing vessels (93/103/EC);
- Groups: pregnant workers (92/85/EEC) and protection of young people at work (94/33/EC);
- Agents: protection of workers from the risks related to exposure to carcinogens or mutagens at work (2004/37/EC), chemical agents at work (98/24/EC amended by Directive 2000/39/EC and Directive 2009/161/EU), asbestos at work ([2009/148/EC](#)) and biological agents at work (2000/54/EC); protection against ionising radiation (Directive 2013/59/Euratom repealing previous related directives); protection of workers potentially at risk from explosive atmospheres (99/92/EC); exposure of workers to the risks arising from physical agents (vibration) (2002/44/EC), noise (2003/10/EC), electromagnetic fields (2004/40/EC amended by Directive 2013/35/EU), and artificial optical radiation (2006/25/EC);
- Substances: alignment of several directives on classification, labelling and packing of substances and mixtures (Directive 2014/27/EU).

Updating [Directive 2004/37/EC](#) on the protection of workers from the risks related to exposure to carcinogens or mutagens at work is an ongoing process which will continue in the future: a first batch of 13 substances was covered in a [proposal in May 2016](#), adopted in December 2017 ([Directive \(EU\) 2017/2398](#)). A [second proposal in January 2017](#) reviewing limits for a further seven substances was adopted in January 2019 as [Directive \(EU\) 2019/130](#) after Parliament succeeded in getting an occupational exposure limit value for diesel engine exhaust included in the scope. A third [proposal in April 2018](#), covering a further five substances used in metallurgy, electroplating, mining, recycling, laboratories and healthcare, was adopted in June 2019 as [Directive \(EU\) 2019/983](#). A [fourth revision of the directive](#), with new or revised limit values for three cancer-causing substances (acrylonitrile, nickel compounds and benzene) was adopted in March 2022 as [Directive \(EU\) 2022/431](#). The directive is one of the first measures adopted under Europe's Beating Cancer Plan. The Commission has since put forward two more proposals in this connection. In August 2022, it presented a legislative proposal to amend [Directive 2009/148/EC on the protection of workers from the risk related to exposure of asbestos at work](#) in order to further reduce workers' exposure and protect them from the risk of cancer. Parliament adopted its first reading position on this proposal on 3 October 2023. Furthermore, in February 2023, the Commission presented a [proposal to revise the Carcinogens, Mutagens and Reprotoxic Substances Directive \(2004/37/EC\) and the Chemical Agents Directive \(98/24/EC\)](#) in order to lower the limit values for lead and add a limit value for diisocyanates to the Chemical Agents Directive. Both lead and diisocyanates are used during building renovations and in the production of batteries,



wind turbines and electric vehicle lighters. By limiting exposure to these chemicals, the EU seeks to protect those working to ensure the green transition

Social partner agreements concluded within social dialogue are another way to initiate social legislation (2.3.7). In December 2016, the Council adopted Directive (EU) 2017/159, implementing the social partners' agreement on improving working conditions in the fisheries sector concluded in 2013. However, a similar agreement for the hairdressing sector was not adopted in the form of a directive.

2. European Agency for Safety and Health at Work (EU-OSHA)

The European Agency for Safety and Health at Work, a tripartite agency based in Bilbao, was set up in 1996. Its aim is to foster the sharing of knowledge and information in order to promote a culture of risk prevention. It has developed the web-based platform for [Online interactive Risk Assessment \(OiRA\)](#), which contains SME-friendly sectoral risk assessment tools in all languages, and the [Dangerous Substances e-tool](#), which provides company-specific advice on dangerous substances and chemical products and how to apply good practice and protective measures. Its European Risk Observatory monitors and forecasts new and emerging risks in order to enable preventive action. Furthermore, since 2000, the agency has run 'healthy workplaces' awareness-raising campaigns on various health and safety subjects. The 2023-2025 campaign seeks to raise awareness about the impact of new technologies on work and the associated challenges and opportunities around OSH.

C. Community action programmes and strategies on health and safety at work

Between 1951 and 1997, ECSC research programmes operated in the field of health and safety at work. The European Social Agenda, adopted in 2000, contributed to a more strategic approach to the matter at EU level. Subsequently, the 2002-2006 Community strategy on health and safety at work adopted a global approach to well-being in the workplace. The Community strategy for 2007-2012 focused on prevention. Its aim was to achieve a continuous reduction in occupational accidents and diseases in the EU. The EU Strategic Framework on Health and Safety at Work 2014-2020 aimed to tackle three major challenges: improving and simplifying existing rules, strengthening the prevention of work-related diseases, including new risks, and taking account of the ageing workforce. Particular attention was paid to the needs of micro- and small businesses.

As part of the [European Pillar of Social Rights Action Plan](#), the Commission brought forward a new [EU Strategic Framework on Health and Safety at Work](#) for 2021-2027. It focuses on anticipating and managing change in the new world of work, improving the prevention of workplace accidents and illnesses, and increasing preparedness for any potential future health crises.

Following the outbreak of the COVID-19 pandemic, the Biological Agents Directive (2000/54/EC) was updated to include SARS-CoV-2 in the list of biological agents to account for the new risks in the workplace. The Commission encouraged employers to assess the risks and take preventive and protective measures to minimise harm, especially for those working in direct contact with the virus. In November 2022, the



Commission adopted a [recommendation](#) suggesting that the Member States recognise COVID-19 as an occupational disease in certain cases.

In the light of the increasing use of digital technologies at work, the Commission incorporated OSH aspects into [Regulation \(EU\) 2023/1230 on machinery](#) (adopted in June 2023). OSH aspects are also addressed in the proposal for a [regulation laying down harmonised rules on artificial intelligence](#) (the Artificial Intelligence Act) and the [proposal for a directive on improving working conditions in platform work](#), in the latter case focusing on preventing health and safety risks in algorithmic management. The Commission also intends to review the Workplace Directive and the Display Screen Equipment Directive.

ROLE OF THE EUROPEAN PARLIAMENT

Parliament has frequently emphasised the need for optimal protection of workers' health and safety. It has adopted resolutions calling for all aspects directly or indirectly affecting the physical or mental well-being of workers to be covered by EU legislation. It supports the Commission in its efforts to improve the provision of information to SMEs. It takes the view that work must be adapted to people's abilities and needs, and not vice versa, and that working environments should take greater account of the special needs of vulnerable workers.

Parliament has urged the Commission to investigate emerging risks that are not covered by current legislation, e.g. exposure to nanoparticles, stress, burnout and violence and harassment in the workplace. In particular, Parliament was instrumental in the adoption of a framework agreement on prevention from sharp injuries in the hospital and healthcare sector signed by the EU social partners, which was implemented by [Council Directive 2010/32/EU](#). It has also called for improvements to the existing legislation on the protection of pregnant workers and protection of workers from musculoskeletal disorders. Further key requests include establishing a directive laying down minimum standards for the recognition of occupational diseases, and extending the scope of Framework Directive 89/391/EEC.

In September 2018, Parliament adopted a resolution on pathways for the reintegration of workers recovering from injury and illness into quality employment, based on three pillars: prevention and early intervention, return to work, and changing attitudes towards the reintegration of workers. In October 2021, Parliament adopted a [resolution](#) with recommendations to the Commission on protecting workers from asbestos. It proposed developing a comprehensive European strategy for the removal of all asbestos in order to safely remove the substance from the built environment once and for all and thus better protect workers and citizens. It also proposed updating Directive 2009/148/EC on asbestos. A legislative proposal has since been tabled by the Commission and Parliament has adopted its first reading position on this proposal, endorsing an agreement reached with the Council in trilogue.

Beyond amending proposed legislation and monitoring and encouraging the Commission's other work in the field of health and safety, Parliament also approaches the subject in a forward-looking manner, looking into new risks. On 10 March 2022, Parliament adopted a [resolution on a new EU strategic framework on health and safety](#)



[at work post 2020](#). In the resolution, it makes a series of demands, including for more ambitious action on work-related cancer, a broader and more comprehensive directive on musculoskeletal disorders and rheumatic diseases, and for the gender dimension to be mainstreamed in all occupational health and safety measures. It also calls for the right to disconnect to be included in the strategic framework and for a directive to be proposed on the prevention of psychosocial risks. On 5 July 2022, Parliament adopted a [resolution on mental health in the digital world of work](#), recognising the impact of the COVID-19 pandemic on the organisation of work and the mental health of workers. In the resolution, Parliament calls on the Commission to propose legislative initiatives on the management of psychosocial risks and well-being at work and to put forward an EU mental health strategy and a European care strategy.

For more information on this topic, please see the [website](#) of the Committee on Employment and Social Affairs.

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