

Health, Safety and Risk Prevention

Improving information, consultation and participation in enterprises



With the financial support of the European Commission

Published by the **European Trade Union Confederation (ETUC – CES)** (2013) within the scope of the project "Health, safety and risk prevention: improving information, consultation and participation in enterprises", with co-financing by the EU (Subsidy No. VS/2012/0317).



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Foreword

Collective and organised participation by workers: the key to successful risk prevention at work

n one Italian region, some hospitals assess risks to reproductive health and take preventive measures. Others do not. It has been observed that the activity of trade-union health and safety representatives plays a determining role in such action. In France, the existence of safety and hygiene committees doubles the probability that workers have been supplied with health and safety information or training, all else being equal (taking into account the sector and size of the company). The existence of active trade unions with specific health and safety representatives is the chief factor which makes the difference between genuine prevention and formal, routine compliance with regulations by employers.

Surveys during which workers have been questioned regarding their expectations of trade unions show that the improvement of working conditions is a priority. This is an obvious mandate: how can workers' rights be defended unless basic requirements such as staying alive and preserving health are discussed? To meet this expectation, trade-union action has many obstacles to overcome as success is never

a given. Much thought and discussion are required; a strategy must be designed which summarises the experience of activists in enterprises. At times, it may appear that such interventions run counter to other trade-union priorities such as wages or employment. In the current context, at a time when European occupational-health policies are being dismantled by the European Commission, the importance of industrial action has increased correspondingly. Top-down reform through European directives will no longer be able to effect major change as long as bottom-up pressure can do nothing to improve the balance of power. Both the European Commissions chaired by Mr. Barroso (2004-2014) turned their backs on the social aspect of the European project, and have succeeded in paralysing the endeavour to harmonise occupational-health legislation which had been dynamically implemented between 1989 and the end of the 1990s. For this reason, the purpose of our report is to clarify the various health-worker representation systems in the various European countries. Rather than a mere comparative resource, it is intended to be a tool for action. By improving trade unionists' knowledge of what is going on in other countries, we hope to encourage joint transnational action, especially by European Works Councils.

Occupational risks are approached in a fragmentary manner by various disciplines such as industrial medicine, industrial hygiene and industrial safety. After World War II, ergonomics and occupational psychology began to be taken seriously. Of late, psychosocial factors have acquired particular visibility. More often than not, specialists compete rather than cooperate. Although the trade unions cannot deny the contribution of these disciplines, in so far as their representatives are acting to improve workplace health and demonstrate their independence from the inevitable pressure by employers. Workplace health should not be unduly confused with other goals such as personnel selection or discipline. The originality and richness of industrial action lies in the basic assumption that workers have their own vision and knowledge of their working conditions and of the latter's impact on their health. In some cases, such knowledge is immediate: back or joint pain, fatigue or discouragement, awareness that scaffolding is unstable or that the pace of work is unbearably fast. In other cases, awareness needs to be organised. It may arise from comparisons between individual experiences, taking into account such factors as age, gender and experience. Occasionally, first impressions may obscure a less obvious issue. When workplaces were massively equipped with individual PCs, the immediate response was a fear of miscarriages. Although this fear was unjustified, it was nonetheless an indirect sign that staff were ill at ease with the more opaque organisation of work and the dangers of increased control by the employer.

Although there are no miracle solutions, we do have a solid starting-point, which is that we enable workers to have their say and do not let specialists take over the issues which relate to their health. This method runs counter to one of the major components of the organisation of work: the divide between those in charge, who do the designing, and the workers, who carry out their decisions. The discussion by workers of the working conditions imposed on them is in itself a way for them to reclaim their dignity. This is what gives industrial action on behalf of safety its deepest meaning. The trade unions are there to give workers a collective voice and to organise the indispensable task of collecting impressions, analysing them and converting them into concrete demands.

The supply of subjective information by workers may fill in blanks and correct the biases of quantitative scientific methods. In the 1970s, complaints by workers concerning limited exposure to certain organic solvents were often treated with suspicion. The protocols on which experts had agreed did not detect any biological abnormalities below certain exposure thresholds. Nevertheless, workers kept on mentioning issues such as memory problems or increased irritability. After surveys had been taken directly at the initiative of trade unions, it became clear that these complaints were justified. Towards the end of the 1980s, there was a proliferation of pathologies with new names such as chronic painters' syndrome, solvent-induced

encephalopathy, psycho-organic syndrome, etc. This single instance summarises what trade unions are about: to render visible what is invisible, to identify the collective character of what is often perceived as individual suffering, to transform collective awareness into collective demands.

As far as workers' representatives in charge of health and safety are concerned, one major challenge is the unequal influence of the various worker categories within trade unions. In general, women, immigrant workers, young people and those in contingent employment or with less recognised qualifications are inadequately represented. The most exploited categories are those whose occupational-health problems are the most neglected. Should this obstacle be overcome, huge potential will be unleashed. For trade unions, this is one of the keys to development in new sectors, as well as an indicator of the quality of their own internal democracy. Such change is also vital if solidarity is to be achieved between the staff of different enterprises which contribute to the same production activity. One criterion of successful industrial action is the capacity to raise issues relating to subcontracting and identify the categories which are least represented and exposed to the worst working conditions. Major accidents in the chemical sector show that subcontractor staff considered to be working in other sectors are deliberately exposed to highly dangerous situations.

The independence of trade unions and their ability to design their own strategies are of primary importance. Whether at the overall level of intersectoral policies or at that of shop stewards working for prevention within individual companies, intense pressures are brought to bear which tend to reduce the role of trade unions to the implementation of policies defined by other players. Often, in occupational-health management systems, priority objectives are determined by the management and shop stewards are then requested to "communicate" them to their colleagues. The poor performance of prevention-related representation systems in companies without trade-union organisations clearly reflects this problem. The role of safety representatives should not be confused with that of "mini-technicians", or worse, of supervisors in charge of monitoring their colleagues' behaviour.

The independence of trade unions is inseparable from their ability to determine the issues concerning which agreements have been reached with the enterprise (e.g. the avoidance of industrial catastrophe), those concerning which compromise is possible, and those which will give rise to conflict. In a way, industrial action is like a pendulum: start with occupational-health requirements, exert the pressure required to reach agreements which change the organisation of work, assess their results and organise conflict on unresolved issues. Within the trade-union movement, any genuine improvement, however limited, tends to increase the confidence of workers in their own strength and in the importance of organised action.

Various factors can contribute to the success of the trade-union movement: the existence of rights backed up by legislation, training, adequate and accurate information, access to expertise when necessary, effective monitoring by labour-inspection departments. Two factors play an especially important role. The first of these is the trade unions' ability to develop networks in order to identify issues, draw attention to the preventive solutions used at other companies, and regularly organise exchanges of experience between trade-union representatives in charge of prevention. Such networks prevent endless repetitions of the same obstacle course, help create solidarity between trade-union activists from different companies and support their activity through improved knowledge. The second factor is the ability of trade-union organisations to link occupational-health issues with other demands, at the level of both enterprises and society in general. During collective bargaining, the fact of taking representatives' experience into account at the initial stage of demand formulation helps avoid the frustrating experience of having to sacrifice quality of life at work to other issues. It is also important to link the requirements for occupational health to those for gender equality. If gender mix is to be achieved in the workplace, it is indispensable that the occupational risks to which female workers are currently exposed be acknowledged. Wage gaps can only be combated if the stereotypes which negate part of women's work qualifications are questioned. We have learned this lesson from the action taken by female nurses in Europe over the past twenty-five years, during which they launched overall movements and made demands which included occupational health, the acknowledgement of their qualifications and better working conditions, to enable them to supply patients with more effective healthcare.

Proactive trade-union policies on health at work have huge potential, not least because their day-to-day action links wide-ranging societal issues with the day-to-day lives of workers. There is continuous interaction between the "micro-level" of diseases, premature body ageing and emotional distress and the "macro-level" of social inequality, the place of work, economic strategies and the overall functioning of the societies we live in. This amounts to a veritable grassroots school which demonstrates the absurdity of the traditional divide between those who are supposed to "be in the know" and give orders and those who are expected to carry out such orders and produce.

The incompatibility of our development model with environmental thresholds has triggered increasing awareness of issues such as global warming, water supply, accumulation of waste and catastrophic urbanisation in many parts of the world. The integration of human working conditions and the issue of social equality are two areas in which action by trade unions could be particularly effective. The restoration of a vision of human labour in harmony with its natural environment is a basic challenge for all environmental policies which do not merely propose to "greenwash" capitalism. In this way, the trade-union movement can link the immediate protection of the workers it organises within enterprises with a more general aspiration to societal change.

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Safety Reps Project

Part I

Cross-Sectional Study Report

November 2013

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Introduction

The Safety Reps Project

IN THE BEGINNING: A NEED FOR INFORMATION

n the 1990S, the Trade Union College – forerunner to the European Trade Union Institute's (ETUI) current Education Department – had, at the request of the European Trade Union Confederation (ETUC), drawn up an educational tool on the various social-dialogue and worker-representation models in the Member States of the time. This tool supplied the state of knowledge of the typology of the major systems extant in the European Union, with descriptions and an analysis of the related negotiating systems. Nevertheless, this indispensable tool, which is still used in trade-union education, did not

include a specific approach to health and safety issues or working conditions.

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Over the past years, issues relating to working conditions and the health and safety of workers have become a major priority in industrial action, a priority which is also understood and shared outside the specialised networks hitherto involved. For instance, until recently, the Commission issued a great many directives ¹ and undertook many stimulus actions on these issues. The research institutes also published information on these issues and the related damage and causes.

This study report was written within the scope of the project "Safety Reps – Health, Safety and Risk Prevention: Improving information, consultation and participation in enterprises". Organised by ETUC, financed by the European Commission and carried out by experts from SECAFI/Consultingeuropa (Paris/Brussels), this project is intended to meet the new needs of trade-union teams, which require a better understanding of the European worker-representation systems dedicated to health, safety and working conditions. ETUC's intention is to produce a useful source of knowledge for social-dialogue players at enterprise level, on the systems and treatment in each Member State of issues relating to working conditions and their consequences in terms of worker health and safety.

By mapping these employee-representation systems, the *Safety Reps* project aims to furnish clear, accessible information on the negotiating and social-dialogue systems intended to protect occupational health and safety and improve working conditions. By supplying all social-dialogue players with the tools to improve the effectiveness of their transnational actions, this project helps increase awareness and knowledge of the realities specific to each country, as well as of a number of priority issues, in players active at the transnational level, such as trade-union leaders, occupational health and safety (OSH) representatives, European Works Committee (EWC) members, participants in sectoral social dialogue and other transnational players.

In today's world, workers' representatives are increasingly called upon to deal with work-related issues at the transnational level. To support such action, they require tools, educational aids and studies which illustrate the various types of professional relations and employee-representative institutions present in Europe. This demand for transnational information is based on three identical observations:

- > An increasing demand for information on how to approach these issues at the level of EWCs and the European sectoraldialogue bodies.
- > Interest in transnational exchanges within these bodies on issues common to and shared by the participants, which would greatly increase the quality of dialogue.
- > A wish to achieve concrete, shared results which are effective for the purpose of action.

It is in this area of action that the lack of information on national systems for social dialogue and the treatment of issues related to working conditions is felt most acutely, as individual representation and transnational positions depend on national systems, which increases the difficulty of achieving a joint approach. Nevertheless, at this point in time, equivalent resources on OSH issues remain scarce. The knowledge on this

fast-evolving subject has not yet been fully organised and issued in a transferable form. To date, little has been done on work-related issues and there is a definite lack of information on the various national social-dialogue systems and the treatment of issues relating to working conditions. The object of the *Safety Reps* project is to fill this gap.

Our intention is to increase the players' ability to take informed and skilful action in the transnational practices of consultation and participation on these issues by supplying indispensable information on organisations, representative bodies, practices and realities in the various countries concerned. Taken as a whole, the deliverables for this study project fill this gap at a time when work-related issues have been given priority by ETUC. In such a context, it appears indispensable that the players' ability to take informed and skilful action in the area of transnational consultation and participation on these issues be increased by the supply of indispensable information on organisations, representative bodies, practices and realities in the various countries concerned. Indeed, individual representation and transnational positions depend on national systems, which increases the difficulty of achieving a joint approach, whereas it is quite obvious that high-quality exchanges require a sound understanding of the cultural and regulatory background against which action takes place in other countries. Ours is therefore a strategic project, which should achieve wide resonance and improve the quality of the action taken by trade unions in social dialogues on these issues.

METHOD

or the purpose of this study, the data-collection method relies on two pillars: a questionnaire and an analysis of documents published on this subject.

1) Data from each country were collected via a questionnaire sent to the trade-union affiliates of ETUC with the assistance of the trade-union officers in the Interest Group Workers of the Advisory Committee on Safety and Health at work (ACSH). The number of subjects was deliberately limited to essentials. To include all the information available would have rendered the result useless from the teaching point of



^{1–} In particular: Council Directive 89/391/EEC of 12 June 1989 on the introduction of measures to encourage improvements in the safety and health of workers at work; and Council Directive 2007/30/EC of 20 June 2007 amending the 1989 Directive with a view to simplifying and rationalising the reports on practical implementation.

view, given the multitude of legislative texts on the subject as well as the complexity of the national systems. For this reason, we organised the collection process into three parts:

- > the legislative framework on OSH issues;
- > the OSH representation systems at enterprise level; and the situation of the representatives (protection, training);
- > these factual data are complemented by the trade-union leaders' opinions concerning the effectiveness of OSH systems in the respective countries of the national bodies affiliated with ETUC and the classification of the risks to which workers are exposed.



The response rate to the questionnaire was impressive, as we received replies from all the Member States as well as a number of third countries (Germany, Austria, Belgium, Bulgaria, Cyprus, Denmark, Spain, Estonia, Finland, France, Greece, Hungary, Ireland, Iceland, Italy, Latvia, Lithuania, Luxemburg, Malta, Norway, the Netherlands, Poland, Portugal, Romania, the United Kingdom, Slovakia, Slovenia, Sweden, Czech Republic), to which informative documents were frequently attached.

2) The document analysis was performed on the informative documents supplied by our respondents, as well as on the bibliographical selection from recent publications on our subject.

With a view to the presentation and discussion of the information collected and its analysis, as well as exchanges of good practices and experiences between the representatives of ETUC's national affiliates, two meetings were also organised within the scope of the *Safety Reps* project:

- > A working seminar in Brussels on 28 and 29 January 2013. This was attended by 25 participants from 16 Member States, as well as the SECAFI/Consultingeuropa staff in charge of the project. A presentation of the initial elements in both plenary sessions and working groups enabled the participants to exchange and share experiences and generated interesting contributions to the content, form and expectations of the final tool.
- A conference in Budapest on 22 and 23 May 2013 was attended by 73 trade unionists from most (22) of the Member States, representatives of EU-OSHA and Eurofound, as well as researchers from SECAFI/Consultingeuropa.

The presentations covered the main points relating to worker participation in OSH, and more especially examples of national arrangements and legal requirements concerning *safety reps* and their training. The participants also discussed the various forms of trade-union support for *safety reps* and worker participation. The statistical data and results of the latest surveys taken by the European agencies were presented by EU-OSHA and Eurofound. Britain's Health and Safety Executive (HSE) presented its experience of worker incentives and the development of a health and safety culture within the scope of the construction project for the 2012 Olympic Games².

A THREEFOLD PROJECT

he underlying aim of the *Safety Reps* project is to draw up a European map of the national employee-representation systems in charge of occupational health and safety, working conditions and the prevention of occupational hazards. Its purpose is to render accessible and comprehensible the various national legal, technical and agreement-based frameworks dedicated to these issues, as well as the related social-dialogue systems within enterprises. The aim of this project is therefore to supply you with a legible, accessible and comparative presentation of the manner in which worker representation on OSH and working conditions is developing in the Member States of the European Union (EU)³.

The *Safety Reps* educational tool comprises three complementary parts which supply three types of data:

- 1) An inventory of all information on the standardised components of each of the national systems in charge of OSH and working conditions.
- 2) Qualitative data concerning the changes made over the past five years and the effectiveness of the standardised systems, to facilitate an understanding of the contextual elements of the treatment of these issues in each country.
- 3) Components intended as material for training sessions and to facilitate transnational work on OSH and working conditions within the scope of worker representation.

The three components of the deliverable therefore supply a current inventory of the conditions and systems of worker representation on OSH and working conditions in the EU Member States:



1) This study report supplies a cross-sectional analysis of the various systems and conditions identified by the research project in connection with the relevant issues. We shall in particular be discussing differences and similarities between Member States and the effectiveness of the existence and operation of the various systems;



- 2) This document complements a training manual intended for employee representatives in charge of the situation of workers at the transnational level. The Training Manual includes an analysis and proposes supporting material for use during training sessions;
- **3)** An interactive database on the ETUI website also offers opportunities to perform searches by subject or by country.

This database includes country factsheets and a cross-tabulation module, and supplies the following information on working conditions and OSH:



- > The national reference framework (legislation, relevant public authorities, etc.);
- > The organisation of the social dialogue: the systems available at enterprise level and the employee-representative bodies, with their powers and functions (information / consultation, negotiation, co-decision);
- > An assessment of the social dialogue: introduction of changes to the systems over the past five years, the purpose of such changes, their manner of implementation (legislation, negotiated agreements) as well as their effect in improving or degrading the treatment of the related issues.

Due to its accessible and legible presentation of the various systems, this computer tool supplies easily understood data for the purpose of information and comparison. The information is classified by country and by subject, which enables searches to be made in either area, or cross-searches to be performed on several countries at once. It enables its users to access all information concerning the standardised components of each of the national systems applicable to OSH and working conditions.

The experiences collected in several Member States show that it makes sense to adopt a strategy which combines OSH representation within enterprises with representation on more traditional issues. Worker participation is essential at all levels. Trade unions' health and safety policies are indissociable from industrial-relations and collective-bargaining systems. Through their activities, trade unions have a role to play in the reactivation of health and safety policies. This activity requires the promotion of the role of the representatives in



charge of OSH – the *safety reps* – to increase the visibility of OSH issues, underpin the definition of collective priorities, and encourage workers to improve working conditions. A transverse presentation of the various models is supplied in the next chapters.

²⁻ All presentations are available on the ETUC website (www.etuc.org).

^{3–} This project was implemented between June 2012 and September 2013. During the data-collection period, the number of EU Member States was 27. Since then, they have been joined by other countries, in particular Croatia.

What is a safety rep?

oday, a number of initiatives have been taken at the European level with a view to improving the occupational health and safety of workers, as well as the latter's participation and representation on these issues. For instance, Directive 89/391/EEC⁴ on occupational safety and health (OSH) comprises "general principles concerning the prevention of occupational risks, the protection of safety and health, the elimination of risk and accident factors, the informing, consultation, balanced participation in accordance with national laws and/or practices and training of workers and their representatives, as well as general guidelines for the implementation of the said principles".

As indicated by the Directive's recital, worker representation and participation must be balanced with national legislation and political traditions. In view of the history and size of the European Union, this implies a high degree of diversity between national situations in terms of social dialogue, trade-union traditions and activity types and sectors. The *Safety Reps* study has confirmed the extreme variety and complexity of the systems extant in the EU. Such diversity makes it difficult to achieve a common definition of employee representation on health and safety issues. For instance, we have noted the variety of terms used in the Member States to designate employee representatives in charge of OSH and working conditions (i.e. *safety reps*).

- In Austria, they are defined as "trusted persons in the area of safety" (*Sicherheitsvertrauenpersonen*). This reference to the trust placed by workers in *safety reps* is also reflected in the term "confidential representative" used in Latvia;
- In Poland, *safety reps* are known as "social health and safety inspectors", whereas in France (for instance), the word "inspector" is used to refer to a government representative in charge of inspection;
- In Spain, the expression "prevention delegate" (delegado de prevencion) is applied to the workers' representative, whereas similar terms such as "safety officer" (Cyprus), "appointed worker" (Luxemburg) and "safety representative" (Iceland) are used to refer to the prevention officer appointed by the employer.
- In the Netherlands, there are no dedicated *safety reps* as the works council (*ondernemingsraad*) performs this function.
- In Sweden, the English term used to refer to workers' representatives in charge of OSH is "safety delegate" rather than "safety rep". Confusingly, the same expression, when used with reference to Germany, may apply to a representative appointed by the employer (albeit approved by the works council).

Despite this diversity, and to facilitate a general understanding of this study, we shall be using the definition proposed by the EPSARE project ⁵ which, beyond the very fact of its existence, summarises both the concept's complexity and its manifestations:

"Health and safety representatives are workers employed in an enterprise and specifically mandated to represent workers' interests on health and safety issues. They may be elected by all workers or appointed by the trade unions. Their mandate gives them specific rights (information, consultation, etc.) framed by the law or a collective agreement."

- > "Employed in an enterprise" is indeed of the essence, as whatever the country this is the level at which most action is taken to preserve health and safety and risk assessment and prevention policies are designed and monitored.
- > "Mandated to represent workers' interests on health and safety issues". Both these areas are at the core of legislation and priorities. They are generally used in the names of the dedicated institutions. The improvement of working conditions, which is key to risk prevention, is rarely mentioned. This, of course, does not mean that this important issue is systematically neglected, but is rather due to the difficulty experienced by employers in opening up social dialogue to the organisation of work, which is considered by many to be the preserve of management, despite the fact that prevention is a shared priority.
- > "They are elected by all workers or appointed by the trade unions" reveals the diversity of the industrial-representation system, just as "framed by the law or a collective agreement" addresses the manner in which collective standards are issued: in some countries, this is achieved by legislation; in others, collective agreements are preferred; while in most nations a consistent mix of law and collective agreements is sought.

The initial observations based on this tentative definition of a safety rep supply material for the following cross-sectional study, which obviously is not intended to pass judgment on the various national systems. There is no such thing as a good or bad model, simply a set of consistent systems born of the social history specific to each country. The main point is to identify from within this mass of experience the systems which appear to be effective and deserve to be transposed into other situations.

Cross-sectional analysis of the various systems

National frameworks

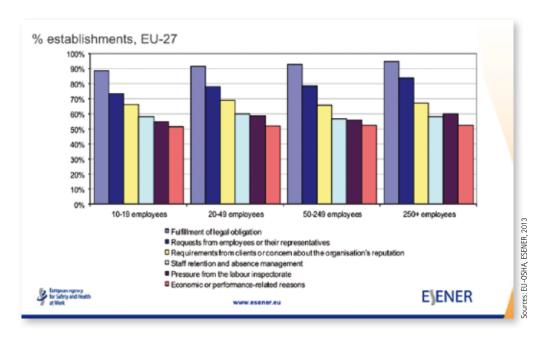
Il countries analysed within the scope of the Safety Reps project supply a legal framework on occupational health and safety issues and working conditions, which in most cases specifies the conditions for worker representation and social dialogue. The differences lie in how detailed and binding they are, as well as the place given to collective agreements. Countries with a strong tradition of social dialogue (e.g. Germany, Austria, Belgium, Finland, France, Italy, Norway, the Netherlands, Portugal, the United Kingdom, Sweden) usually enacted their general legislation in the 1970s and amended it in two stages: during the 1980s, and then in 1990, with the transposition of European Directive 89/391 of 12 June 1989. For their part, the new Member States began to adopt relevant legislation as of the 1990s, some of which is highly structured and incorporates the 1989 Directive, as in Bulgaria, Poland and Romania.

As mentioned in the previous chapter, the purpose of this directive is to promote and improve occupational health and safety. In particular, it specifies employer responsibility and the mandatory nature of employee consultation, participation and training. Its transposition into the legislation of the Member States, initially planned for the end of December 1992, encountered a number of difficulties. As well as the fact that the transposition of directives into national legislation 6 may take a long time and that the provisions of national legislation may be different from those of the original directive, the ideological war waged by free-marketeers against the imposition of rules on enterprises has taken its toll, especially in countries currently affected by debt crisis. In such a context, employee health and safety take a back seat and the laws are defanged, ignored or questioned (Greece, Malta, Portugal, Spain). Conversely, countries such as Germany, Italy and the Netherlands, which have a well-established and undisputed body of legislation, have been reluctant to shake up their existing frameworks, while the United Kingdom, in accordance with its tradition of avoiding binding social legislation, opted for a non-binding code.

Today, in most Member States, employers are obliged to supply a work environment and working conditions which are both healthy and safe for the company staff. Although most legislative frameworks specify that some cooperation is expected on the part of the staff (e.g. in Sweden) in matters relating to

health and safety, legal liability clearly rests with the employer. A recent study by the Bilbao Agency shows that this legal obligation, which is generated by the Framework Directive and its transpositions into national legislation, remains a major (if not the chief) motivator for company managements.

Major reasons of company managements for addressing occupational health and safety



The role of trade unions and more specifically of employee representatives in charge of occupational health and safety and working conditions is acknowledged to be another major driving force in risk prevention. As shown by the above graph, the vigilance of workers and/or their representatives in the area of occupational health and safety is a significant incentive, whatever the size of the company.

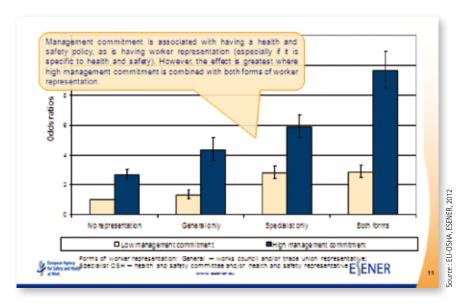
Moreover, as shown by the following graph, the effect of worker representatives on the setting-up of an OSH policy is all the greater when they are specialised in OSH issues and working conditions. It goes without saying that *safety reps* belong in this category. The same graph also shows that the impact of "specialist" representatives is leveraged when they cooperate with the "generalist" representatives. The importance of addressing OSH issues and working conditions via the social dialogue is therefore far from negligible. For instance, in Lux-

embourger companies over a certain size, the representation and participation of workers in OSH issues is shared between the "specialist" safety representative appointed by the employee representatives and the bipartite, "generalist" Mixed Committee. On the other hand, there are no dedicated (i.e. "specialist") OSH employee representatives at Dutch companies, and the "generalist" Works Council is in charge of such issues.

^{6–} Each year, the European Commission issues an "Annual Report on monitoring the application of EU law". At the end of 2011, the EU's acquis comprised 8,862 regulations and 1,885 directives as well as its primary legislation (the treaties).

^{7- &}quot;ESENER. Surveying Europe's enterprises". Presentation made at the Safety Reps conference in Budapest, 22-23 May 2013.





Moreover, the effectiveness of law is largely contingent on the means available for its application. Together with management and trade-union commitment to health and safety issues, it is the existence and efficacy of government agencies and labour inspectorates with genuine powers of investigation, inspection and sanction (as in Malta, France, Poland) which ensures the efficiency with which such issues are dealt with. However, at the present time, the capacity for intervention of these institutions is being weakened by austerity policies which lessen the impact of public agencies. This applies most particularly to Greece. ⁸

In the course of the study, a number of trade-union respondents shared their feeling that the powers of institutions such as labour-inspection services – which in many countries are in charge of checking and sanctioning compliance with the legislation on health, safety and working conditions – are being gradually restricted. For instance, over the past five years, the Swedish Work Environment Authority's budget has been slashed by 30%. Also, despite the legal existence of social-dialogue tools on health, safety and working conditions, they are less intensively used than might have been expected (e.g. Cyprus, Malta, Bulgaria, Romania, etc.).

^{8–} The "Impact of the crisis on working conditions in Europe" study recently (2013) published by Eurofound supplies an in-depth analysis of the consequences of the economic crisis on working conditions in Europe.

The various worker-representation models in Europe

Employers shall consult workers and/or their representatives and allow them to take part in discussions on all questions relating to safety and health at work. This presupposes:

- the consultation of workers,
- the right of workers and/or their representatives to make proposals,
- balanced participation in accordance with national laws and/or practices.

Directive 89/391/EEC, Article 11.1

Ithough the spirit of the Directive is intended to be common to all countries, its transposition and implementation may vary from one Member State to the next. As in the case of the range of names used for *safety reps*, the key components of worker-representation systems on OSH and working conditions vary widely within the European Union. The information collected during the *Safety Reps* project has revealed the existence of different worker-representation types, modes of election or appointment, thresholds, capacities for intervention, trade-union roles, etc. In consequence, the worker-representation systems applied in the area of health and safety cannot easily be reduced to models.

To summarise, we have observed that the broad determinants reflect the industrial-relations model in place in the various countries. Each of these has its own system, the legacy of a specific political and trade-union history anchored in a unique culture and organised according to regulatory frameworks consistent with the national model.

For instance, the German and Austrian model of joint decision-making requires that the works council play a preponderant role at company level, which is not the case in other countries, in particular Belgium, where the collective agreements contain a number of sectoral-level provisions. In the Nordic countries, the tradition of cooperation has induced habits and social-dialogue models which are not the same as those prevalent in the Southern countries.

However, in terms of industrial representation, national systems can be grouped into two major models:

- The single-channel model, in which the trade unions are the sole channel through which workers are represented and take part in negotiation (as in the United Kingdom, Ireland, Sweden, Estonia, Latvia).
- The dual-channel system, in which representation by a trade union is complemented by an elected council. This model may take a variety of forms: it may comprise only members elected by the employees (as in Germany, Austria and the Netherlands), or also include employer's representatives (as in Belgium, Denmark, France and Norway). The respective powers of intervention of the elected body and of the trade-union officers may also differ.

Map of national systems



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The safety-rep models

n the whole, the OSH worker-representation system is consistent with each country's industrial-representation system. However, in many cases, specific organisations arise on the basis of these fundamentals, or even deviate from them, at company level.

- The **single-channel model** also applies to OSH in the United Kingdom, Ireland and Estonia, where the trade union is the sole source of representation.
- The **dual model** comprises action in the area of OSH by both trade unions and a representative body.

However, there are two major variations on this theme:

- The specialised committees, which exist in 17 countries and generally comprise representatives of the staff, the company's specialised departments and the employer. Their composition, manner of appointment, powers of intervention and modes of operation vary widely according to country and even to activity sector.
- The OSH representatives elected by the staff or appointed by the trade unions, who are present in 12 countries.

It should be noted that in 8 countries (Denmark, Spain, Finland, Greece, Italy, Luxemburg, Norway, Sweden) where the dual-channel system is applied, enterprises have both a committee and a representative. Moreover, in the single-channel countries, specialised committees may exist in addition to trade-union officers (Ireland, Sweden, United Kingdom), which constitutes an exception to the rule.

In Germany, Austria and Slovenia, employers may also appoint safety representatives. In Austria, for instance, the appointment of *Sicherheitsvertrauenspersonen* at companies with more than 10 employees must be approved by the works council.

To complete this panorama, it can also be mentioned that in Germany, Austria, the Netherlands and France the works council or equivalent has general powers on OSH issues, based on a vision which links the treatment of such issues with the company's general situation.

To conclude, it appears that although safety-rep systems are consistent with each country's specific traditions of representation and social dialogue, they may vary widely by adopting methods appropriate to the specific nature of an issue. This requires close acquaintance with workplace realities, the ability to assess risks, specific powers of intervention and social-dialogue models adjusted to the variety of company players involved (top management, trade unions, *safety reps*, persons in charge of safety, medical departments, etc.).

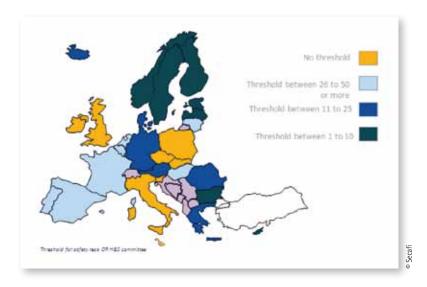
Map of safety-rep models



Thresholds

he issue of the thresholds beyond which workerrepresentation organisations are required is crucial to the coverage of salaried workers as a whole. Again, situations vary widely from one country to the next. Generally, thresholds are set by the legislation, or even by collective agreements. In most cases, 50 employees is the highest threshold (e.g. Belgium, Bulgaria, Estonia, Hungary, Romania). Below that figure, the required number ranges from none (e.g. Ireland) to 10 (e.g. Austria, Denmark, Finland, France, Norway) or even 30 (e.g. Spain).

Threshold map

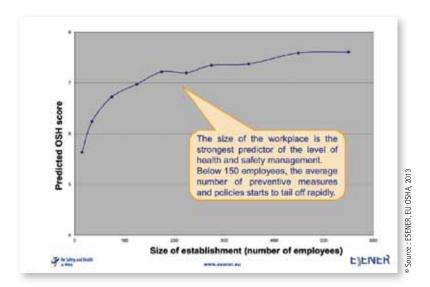


The legislation on thresholds therefore leaves wide gaps which affect the situation of the employees of small and medium-sized enterprises – the total number of which is over 130 million in the EU. Moreover, the risks to which they are exposed are in no way lower than those extant at large companies.

Concerning this point, the latest ESENER ⁹ study made by the Bilbao Agency shows that the degree of attention paid by issues relating to health, safety and working conditions is directly linked to the size of a company (i.e. of its payroll). At companies employing less than 150 staff, the average number of prevention policies and actions declines sharply. In such a context, it is obvious that in all countries trade-union officers are working to reduce legal thresholds for the appointment of OSH worker representatives.

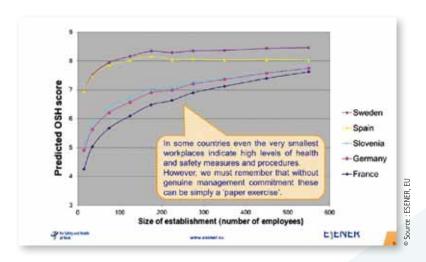
^{9–} "ESENER. Surveying Europe's enterprises". Presentation made at the Safety Reps conference in Budapest, 22–23 May 2013; also the ESENER 2012 report published by EU-OSHA.

Link between company size and OSH prevention policies



Beyond the issue of threshold regulation, that of the ability of trade-union organisations to take charge of these worker groups, which usually show little interest in unionisation and are scattered in a multitude of enterprises (91% of European companies have fewer than 10 employees) has also been raised. Nevertheless, in certain countries, small companies boast a high level of OSH measures and procedures ¹⁰.

Score by country – Link between company size and OSH prevention policy



To ensure the best possible coverage of small and medium-sized enterprises, Sweden, Norway and Italy – for instance – have set up territorial OSH representative schemes which take responsibility for the employees of such companies. In Sweden, "regional representatives" have been appointed since 1949, and, as specified by the agreements, supervise companies within a particular geographical area ¹¹. Such initiatives generate a positive response, which in turn calls forth considerable resources, substantial potential for activism and an appropriate regulatory framework.

Also, many *safety reps* monitor the prevention measures applied to subcontracted staff as well as the staff of their own companies, a practice which deserves to be extended to all trade unions.

Occupational hazards

ASSESSMENT

[...] the employer shall, taking into account the nature of the activities of the enterprise and/or establishment, evaluate the risks to the safety and health of workers, inter alia in the choice of work equipment, the chemical substances or preparations used, and the fitting-out of workplaces. Subsequent to this evaluation and as necessary, the preventive measures and the working and production methods implemented by the employer must:

- assure an improvement in the level of protection afforded to workers with regard to safety and health,
- be integrated into all the activities of the undertaking and/or establishment and at all hierarchical levels.

Directive 89/391/EEC, Article 6.3

uropean Directive 89/391 creates the obligation to document risk assessment in all company types, whatever the country. This stage is therefore essential if prevention is to be adjusted to actual risks and monitoring and adjustment tools are to be designed. The assessment of risks and the quality of the subsequent actions must be reviewed regularly (e.g. on a yearly basis, as in France) if it is to remain relevant. Worker-representative involvement in this assessment process is therefore important. Due to their social-dialogue model, the Scandinavian countries take a cooperative approach. For instance, in Denmark, OSH worker representatives (AMRs) take part in the annual assessment of the work environment. In Sweden, if OSH representatives have doubts concerning the quality of the risk assessment performed by the employer, they may request a counter-inspection from the Work Environment Authority (Arbetsmiljöverket).

Moreover, when it exists, the ability of worker representatives to call upon external experts increases their power of intervention in complex and often highly technical areas. In Portugal, for instance, safety reps may call in specialists from trade-union organisations. In France, external experts accredited by the Ministry of Labour may be mandated by the joint representative body, the Hygiene, Safety and Working Conditions Committee (CHSCT). The employer's agreement is frequently required for such proceedings (e.g. in Hungary, Finland, Estonia and Denmark). Given this context, a number of respondents (e.g. Latvia, France, Bulgaria) mentioned that financial and/or legal issues are frequently raised and complicate the right to an external expert opinion. However, under the French system, an employer may only oppose a decision by employee representatives through the law courts.

A number of actions are also available to worker representatives in certain Member States: the right of veto on the result of a risk assessment in the Netherlands, the ability to alert and call upon the public authorities, the right to withdraw in the event of serious and imminent risks, etc.

The issue of effectiveness, however, remains open. For instance, in most countries, worker representatives may request an intervention by the public authorities in charge of the monitoring and application of OSH laws (e.g. the labour-inspection department in Spain, Greece, France, Poland, the Netherlands or Estonia). Nevertheless, the current lack of support and inspection systems is palpable. Differences may also be introduced when transposing a written policy into reality. We were told that the administrative departments in charge of compliance with the law do not always have adequate resources. However, although they do not have the same powers as a government inspector (e.g. fines, warnings, etc.), most of the OSH representation systems analysed include the right for worker representatives to organise risk-prevention inspections in the workplace. For instance, in Estonia, the mandate of safety reps includes the right to enter workplaces. Visits by OSH representatives for the purpose of inspection are also possible under French and Polish legislation.

In some countries, the social-security bodies are in charge of monitoring the situation and linking the payment of damages or the adjustment of national-insurance contribution rates to the existence of risk assessment. For instance, the Danish Work Environment Authority publishes the results of OSH inspections online with a red, orange or green rating symbol. In France, the work-related accident contribution

rates of employers are linked to the data relating to the actual number of accidents at the company and their seriousness. In Germany, the minimum number of OSH representatives is specified by the regulations of the employers' liability insurance associations (*Berufsgenossenschaften*).

HAZARD CLASSIFICATION

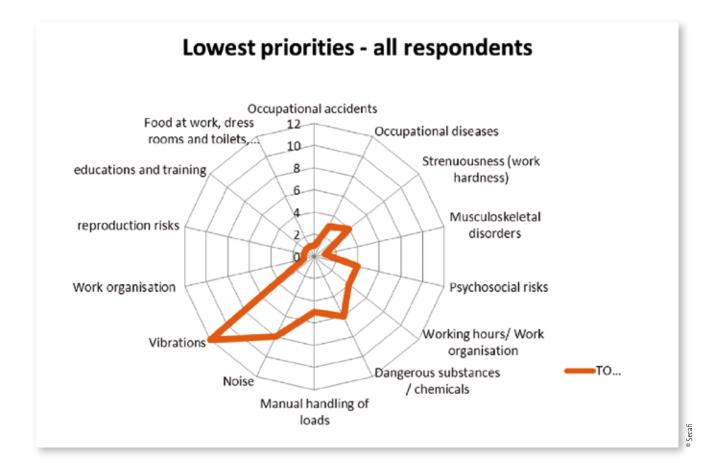
Workers' representatives with specific responsibility for the safety and health of workers shall have the right to ask the employer to take appropriate measures and to submit proposals to him to that end to mitigate hazards for workers and/or remove sources of danger.

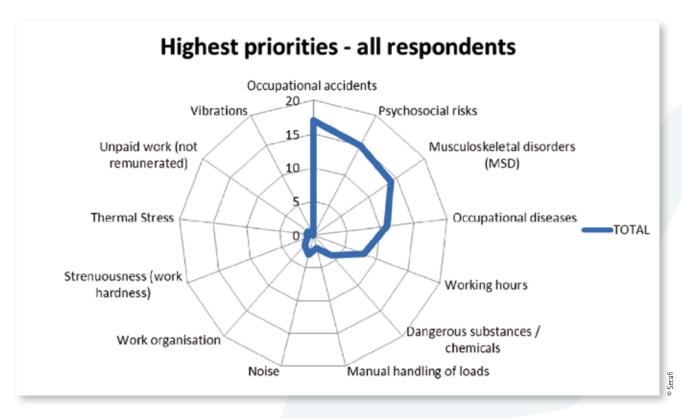
Directive 89/391/EEC, Article 11.3

isk assessment renders this concept less abstract, as it studies the conditions in which workers are exposed to hazards. However, the concept "hazard" refers to several hazard types, which are listed in the literature and the occurrence of which depends on the activity and work environment. For instance, the European Agencies in Dublin and Bilbao have identified a number of occupational-hazard categories (e.g. exposure to noise, heavy lifting, psychosocial hazards, nanomaterials, hazardous substances, musculoskeletal disorders (MSDs), etc.).

"As our society evolves under the influence of new technology and shifting economic and social conditions, so our workplaces, work practices and processes are constantly changing. These new situations bring with them new risks and challenges for workers and employers [...]" 12. This is the context in which we also asked the respondents to classify the risk categories they deemed most and least important. At this point in time, it appears that the nuisance caused by physical work environments (noise, vibration) and exposure to chemicals is given a lower priority than in the past. This may be interpreted as the result of a significant improvement in OSH prevention and working conditions, but also as a consequence of the decline of industrial production and its specific hazards compared with the services sector, where other risk types prevail. Among the risks assessed as being highest, work-related accidents, occupational diseases, musculoskeletal disorders and working hours continue to give cause for concern, as well as the high rating of psychosocial hazards.

It should, however, be remembered that such a risk classification reflects the state of opinion at a given time. Exactitude, therefore, is not the primary goal; rather, we have sought to establish a general trend. The priority given to the risks identified at the companies where worker OSH representatives operate depends primarily on risk assessments carried out in the field. Each sector and activity has its specificities.





Training

Workers' representatives with a specific role in protecting the safety and health of workers shall be entitled to appropriate training.

Directive 89/391/EEC, Article 12.3

he training of employee representatives is widely considered to be an indispensable component of their ability to intervene. This general rule is particularly relevant in the area of health and safety, given the variety and complexity of the issues concerned, which require a substantial background in many different areas, both theoretical and practical.

Most Member States stipulate that employee representatives in general are entitled to a number of days of training leave without loss of pay. Although *safety reps* enjoy the same rights, they are frequently granted extra leave in connection with their specific mandate. Most Member States, in accordance with the 1989 Directive, also grant training rights to all their staff to enable them to implement their own risk prevention. For instance, Dutch representatives are entitled to a minimum of 5 days' training a year; in Bulgaria, an initial 30-hour training course is supplied at the beginning of a representative's mandate. On the other hand, in the Czech Republic, Spain, Luxemburg and others, the duration of training is not specified in the legislation, but further to talks (collective and other agreements, etc.).

In each country, safety-rep training is supplied by the trade unions, which have all set up specific systems. Although the unions' training organisations depend on the various types of engineering specific to each body, all courses explore the same issues: legislation, risk management, risk assessment, risk prevention, the operation of representative bodies and trade-union practices.

However, other forms of training are available. Depending on the country, other institutions may play a part in staff qualification: social-security agencies, government agencies, approved training centres and private consultants.

As part of the *Safety Reps* project, we would like to encourage the development of approaches to training which enable trade-union officers to (further) improve their understanding and actions. For this purpose, a training manual is supplied to complement the comparative analysis in this cross-sectional report. The practical worksheets it contains are based on a method which encourages participants to share their knowledge and experience of the realities of their countries and companies.

¹³⁻ Menéndez, Maria; Benach, Joan and Vogel, Laurent. "The impact of safety representatives on occupational health. A European perspective (EPSARE project)", ETUI, 2009, Page 30.

Preventive services: a new player

OSH management measures were found to be more likely to be seen as effective in workplaces in which there is worker representation, and in particular where it is combined with high management commitment to health and safety.

EU-OSHA, ESENER report for 2012

Ithough employers are directly liable, both morally and legally, for their employees' health and safety, their effectiveness in this area chiefly depends on three criteria which may overlap and combine.

- 1. The degree to which the legislation binds employers, which depends on legislation, national agreements, and the ability of the public authorities to ensure compliance.
- 2. The priority given by the employer to such issues, taking into account the total data which underpin the definition of its strategy and managerial conduct.
- 3. The top manager's personal commitment to these issues, or the delegation of their management to specialised internal departments on which the level of integration of OSH in the definition and management of the company strategy depend.

The first criterion is directly connected with the involvement of and policy implemented by **the public authorities**. Depending on the political tradition and administrative organisation of each country, it may take many different forms. Strong statements have been made concerning the decline of the government's capacity to intervene due to loss of funding and staff, as well as the implementation of less interventionist policies. These observations show that OSH issues are also affected by the spread of new-public-management theories, especially in the countries suffering from the debt crisis.

Depending on each country's situation, government intervention may take several forms:

- Issuance of standards
- Enforcement of compliance with legislation and sanctions
- Advice and support concerning prevention policies
- Production of knowledge by specialised agencies.

In some countries, the public departments (e.g. France, Belgium) perform all of these functions and give priority to one or the other according to the political context. Other countries exercise little control and concentrate rather on playing an advisory role.

The other two criteria may be strongly influenced by workers' representatives. Indeed, "although the impact of safety reps on occupational health has barely been included on the policy and research agenda, available knowledge and research supports the conclusion that unions, workers' representation and safety representatives constitute a key powerful force for improving workers' occupational health in the EU. In sum, research mainly conducted in Anglo-American tradition and Nordic countries has shown that workplaces where trade unions are present are safer and have better occupational health outcomes. [...] strong engagement by trade unions, workers, and safety representatives in the promotion of political debate, policy action and research on this topic is particularly essential".13

Today, as far as OSH and working conditions are concerned, the three traditional players (employers, the public authorities and workers' representatives) are frequently complemented by a more recently created institution: **preventive services**.

Indeed, to ensure the occupational health and safety of workers, employers may resort to various types of organisation, depending on their size and activity. In several cases, they rely on internal or external preventive services. For instance, Estonian employers with over 50 staff must appoint a "work environment specialist" (OSH). In Germany, employers have been legally obliged since the 1970s to request advice from works doctors and OSH specialists. Italian law stipulates that employers must organise a preventive and protection department responsible for identifying and decreasing risk factors.

Our respondents observed that in their view external prevention services were becoming increasingly commercial and obliged to compete with each other. In most Member States, there is a system of accreditation by the public authorities to guarantee the quality of services. However, at this point in time, there is little cooperation between preventive services and trade-union officers.

III. Perspectives

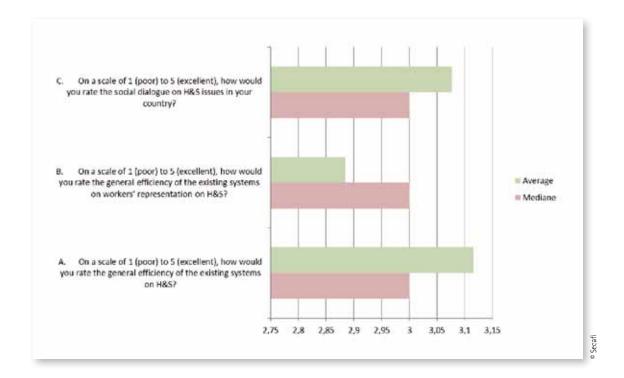
Overall, therefore, our findings suggested that, independent of other factors, management of health and safety is more likely, and is more likely to be effective, in organisations which not only have an employee representative but which also provide that person with an appropriate context in which to work.

EU-OSHA, ESENER report for 2012

The effectiveness of the various systems

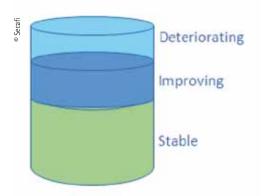
s with the classification of OSH issues, we asked the trade-union officers from the countries which took part in the survey to assess the effectiveness of their national OSH system by rating it on a scale of 1 (poor) to 5 (excellent).

If the median score is taken to be 3, a number of observations can be made: most of the "older" EU countries have well-established systems and are rated above average; although some of the newer arrivals such as Bulgaria, Slovakia and Poland are in the same range, the ratings of Estonia, Malta, the Czech Republic and Romania are below average.



When considering these scores, though, it is important to remember that the rating of the national systems may vary from one trade-union officer to the next in the same country. In most cases, there are "grey zones" between legislation and practice, which may lead to different scores depending on the OSH issue. For this reason, we decided not to publish the various countries' scores in their original form, but to extract an overall summary.

Trade-union respondents were also requested to classify the development of and progress made by the social dialogue in the areas of occupational health and safety and working conditions over the past five years. According to the results, the situation is fairly stable:



However, this "stability" (e.g. in Estonia, the Netherlands, Germany, Finland, Italy, Iceland, etc.) was qualified by a number of reservations. For instance, stability could coexist with a negative (e.g. with reference to the impact of the economic crisis, the threats to the acquis in the area of OSH representation, etc.) or positive trend (e.g. achievement of social agreements). Moreover, trends were not yet clearly identifiable in other countries, as in the respondents' view not enough time had passed for the concrete impact of change to be properly assessed.

Conclusions that the situation was deteriorating (e.g. Czech Republic, Hungary, Luxemburg, etc.) were inter alia based on a decrease of trade-union "power" due to a drop in the number of affiliates, on the impact of the economic crisis on employer agendas and on political priorities, which did not include or no longer included issues relating to occupational health and safety and working conditions.

Conversely, when scores pointed to improvement (e.g. Austria, France, Cyprus, Spain, etc.), an increase in the number of workplace accidents and the drawing-up of social agreements on OSH issues were cited. Again, this needs to be qualified, for instance according to the political situation in the country.

Conclusion

1 Diversity in similarity" is the expression which best summarises the various worker-representation and participation models for issues relating to occupational health and safety and working conditions.

This means that an understanding of the various national representation systems must be achieved in each country if transnational cooperation is to be possible and each system is to draw inspiration from other models to improve its own practices.

There is a growing awareness of the importance of work-related issues and their impact not only on workers' health but on a company's results and more generally on public health. However, the economic situation and the increasing popularity of *laissez-faire* ideologies are compromising existing systems as well as the efficacy of prevention. Quality of life in the workplace is increasingly dependent on the situations specific to each enterprise, and is passing by entire sections of the salaried population, especially those in contingent work and the employees of small enterprises.

Industrial action is a major motivator. The commitment of tradeunion leaders to OSH issues demonstrates the high awareness of the specialised activist network and its need for exchanges. The results of their contributions show that existing systems are largely the result of industrial action. However, at a time of increasing tensions, scaling up requires a level of commitment by the trade unions which extends beyond specialised networks and involves trade-union officers at the highest level. Industrial action on the behalf of workers must be relayed and supported if it is to have any impact on the other players, i.e. the employers and public authorities, commitment by which is just as non-negotiable. A dialogue must involve at least two parties; as in the case of other issues, the effectiveness of the social dialogue on OSH issues requires a direct commitment by employers. The current breakdown of public policies supplies a negative demonstration of the essential character of their role in the public interest and compliance with regulations.

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V. Annexes

Recapitulative table

	Worker-representation models			Safety reps models			Thresholds			
Country	single channel	dual channel – only workers rep	dual channel – mixed	Com- mittee or council	safety reps	mixed	none	<=10	<=25	>25
Austria		Х			Х				Х	
Belgium			Х	Х						Х
Bulgaria	Х			Х				X		
Cyprus		Х				Х			Х	
Czech Republic			X		Х		Х			
Denmark			Х			Х			Х	
Estonia	Х					Х		X		
Finland	X					Х		Х		
France			Х	Х						Х
Germany		Х		Х					Х	
Greece		Х				Х			Х	

Hungary		Х				Х				Х
Iceland	Х					х			Х	
Ireland	Х				Х		Х			
Italy	Х				Х		Х			
Latvia	Х					Х		Х		
Lithuania	Х					Х				Х
Luxembourg			Х	Х						Х
Malta	Х				Х		Х			
Netherlands		Х		Х					Х	
Norway			Х			Х		Х		
Poland			Х		Х		Х			
Portugal		Х			Х					Х
Romania	Х					Х			Х	
Slovak Republic		Х				Х	Х			
Slovenia		Х		Х			Х			
Spain		Х				Х				Х
Sweden	Х					Х		Х		
United Kingdom	Х				Х		Х			

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Part II

Training Manual

November 2013

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Acknowledgments

The authors would like to thank all those who contributed to the Safety Reps project and to the writing of this manual. In particular, we would like to thank:

- 1) Judith Kirton-Darling, Confederal Secretary of ETUC in charge of workplace health and safety;
- 2) Laurent Vogel, Director of the Working Conditions, Health & Safety department of ETUI;
- 3) Viktor Kempa, Researcher at the Health & Safety Department of ETUI;
- 4) The members of the Interest Group Workers of the Advisory Committee on Safety and Health at Work (ACSH) and their deputies;
- 5) The participants in the working seminar in Brussels (28 and 29 January 2013) and in the final conference in Budapest (22 and 23 May 2013).

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Introduction

his part of the Safety Reps tool was drawn up in response to a need to help design and implement training courses and transnational seminars on health, safety and working conditions. Collective training is indispensable if the ability of trade-union players to give priority to and push through the improvement of work situations in the field throughout the EU. The comparison between national systems as presented by the Safety Reps project is primarily intended to supply information. This study can only be useful if people are encouraged to develop training initiatives which enable trade union officers to grasp situations and take action.

This training programme targets trade union officers in charge of the situation of workers at the transnational level, who need to be made aware and qualified to include occupational health and safety (OSH) in their respective social dialogues.

- > In the first place, of course, this means European Works Council (EWC) members. It is a sad fact that within these nodes of European social dialogue at multinational companies, OSH issues are seldom and scantily raised despite their importance to the staff of such companies. However, in EWCs which do deal with such issues, general improvement further to strategic commitment and the transfer of good practices constitute an instance of what can be achieved by training our members, i.e. supplying them with the encouragement and basic tools they require to take action and generalise improvements to health and safety.
- > The same applies to the Sectoral Social Dialogue Committees, the members of which are not always familiar enough with OSH issues and working conditions to include them in the agendas for discussion. However, once again, there appears to be nascent interest within bodies which undertake studies and discussion on the health of workers in their respective sectors. For instance, such initiatives have been taken in the European railway ¹ and steel ² sectors, which have each initiated work on the issue of psychosocial hazards at enterprises in their activity sectors in Europe.

> In this connection, the European Trade Union Federations (ETUFs) have a vital role to play in the strategic organisation concerning such issues. The purpose of this tool is to facilitate their organisation of the structures required to kick-start and coordinate militant networks in their sectors' EWCs, the appointment of representatives in sectoral committees and the implementation of Safety Rep networks in their federal affiliates.

The objective of the proposed training approach is to increase the participants' capacity to perform an analysis and develop joint positions on OSH issues and working conditions. This requires on the one hand that they be familiarised with concepts and methods which enable them to approach such issues, and on the other hand that they all acquire knowledge of national systems and the concurrent workplace realities in a manner which facilitates understanding.

In the course of the *Safety Reps* project, the participants notified us several times, in particular during the working seminar in Brussels (28–29 January 2013) and the conference in Budapest (22–23 May 2013), of their requirements and expectations regarding the comprehension and acquisition of the research material. The purpose of this training manual is to provide **an operational response** to these requirements.

The practical worksheets proposed are based on methods which encourage the expression of the participants' experience and knowledge of the realities in their own countries and enterprises. These contributions are intended to complement the comparative study supplied in the cross-sectional analysis report of the *Safety Reps* project, which, like the interactive database, will be used as a starting-point for discussion.

This type of activity enables the participants to acquire intercultural understanding, and hence more readily accept differences and adjust their expectations to the realities faced by other players. It also encourages unions to adjust their proposals for transnational action according to the differences between the conditions for the declaration, registration, management and discussion of risks and their consequences.

Concerning the actual organisation of sessions: experience has shown that for groups of 25 from 5 to 6 countries and with 5 to 6 different languages, work on these issues using the proposed method requires sessions lasting approximately 4 hours for each thematic phase:

- preparation in sub-groups (1 hour)
- return of sub-groups to plenary session (2 hours)
- discussion and assessment (1 hour).

^{1–} The PSR Rail project (2012-2013), in cooperation with the European Transport Workers' Federation (ETF) and the Community of European Railway and Infrastructure Companies (CER).

²⁻ The joint Eurofound/IndustriAll/Eurofer "Industrial relation practices related to psychosocial aspects of work in the steel sector" project (2013).

Materials supplied



he key elements derived from the *Safety Reps* project and presented in the cross-sectional analysis supplied as an introduction to this training manual are presented by means of slides. These can be used as supporting material during training sessions and seminars, or at the beginning or end of each thematic session, at the trainer's discretion.

Each worksheet refers to the related slides:

Serie 1 : The strategic value of a *Safety Reps* approach

Serie 2: Definition of *Safety Reps*

Serie 3: The national *Safety Reps* systems

1. The various industrial-representation models in Europe

2. Workers' OSH representation models

3. Representation thresholds

Serie 4: The effectiveness of national *Safety Reps* representations systems

Serie 5: The classification of priority risks

PRACTICAL REFERENCE SHEETS

These are numbered 1 to 4 and supply trainers with basic information on which sessions can be based.

Sheet 1 : some basic definitions

Sheet 2: how to analyse workplace situations

Sheet 3: taking risk-prevention action

Sheet 4: two occupational-health issues, MSDs and psychosocial hazards

METHOD SHEETS

These are numbered 1 to 4 and supply thematic sequences and related methods

Sheet 1 : mapping the player network within the enterprise

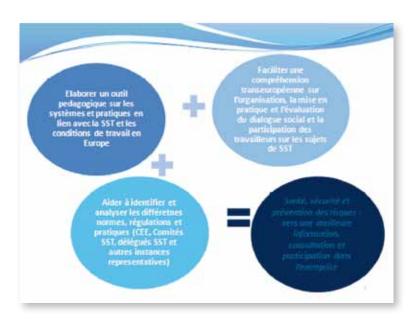
 $\textbf{Sheet 2:} \ \mathsf{mapping the safety-rep organisation}$

Sheet 3: classification of the main risks

Sheet 4 : drawing up a transnational industrial strategy

Teaching materials







The objectives of the Safety Reps project

The transnational requirements are based on 3 identical observations:

- > An increasing demand by EWCs for information on these issues.
- > Transnational exchanges within EWCs on joint issues common to the participants greatly improve the quality of dialogue.
- > The capacity to produce concrete, shared and effective results.

However, there is a lack of information concerning the various national social-dialogue systems and approaches to resolving the issues related to working conditions. National systems underpin individual understanding and positions on transnational issues, making a joint approach more difficult.

The purpose of the *Safety Reps* project is to fill this gap and to increase the various players' ability to take effective and well-informed action when taking part in transnational consultation and participation, by supplying indispensable information on organisation, representative institutions, practices and realities in the various countries concerned.

The quality of transnational exchanges and the effectiveness of action are obviously contingent on an understanding of the cultural and regulatory framework in which players from "other" countries operate. Until now, this issue had not been substantially dealt with in labour-related areas. The innovative character of this project lies in its partners' decision to do so after observing that this was required if anything was to be achieved at a time when labour-related issues are at the forefront of action and social dialogue in Europe. The purpose of this project is to increase the awareness and improve the knowledge of the realities specific to each country of the players active at the transnational level and engaged with these priority issues: trade-union leaders, OSH representatives, members of European Works Councils, participants in sectoral social dialogue.

Series 2: Definition of Safety Reps



The systems of the various European countries are highly diverse and complex, which makes it difficult to supply a common definition of workers' H&S representatives:

e.g. safety delegates, social labour inspectors, H&S representatives, etc.

However, we have selected that proposed by the EPSARE project, which presents a summary of this complexity and its expressions:

"Health and safety representatives are workers employed in an enterprise and specifically mandated to represent workers' interests on health and safety issues. They may be elected by all workers or appointed by the trade unions. Their mandate gives them specific rights (information, consultation, etc.) framed by the law or a collective agreement."

The initial observations based on this tentative definition of a safety rep supply material for the cross-sectional study, which obviously is not intended to pass judgment on the various national systems. There is no such thing as a good or bad model, simply a set of consistent systems born of the social history specific to each country. The main point is to identify from within this mass of experience the systems which appear to be effective and deserve to be transposed into other situations.

"Employed in an enterprise" is indeed of the essence, as whatever the country this is the level at which most action is taken to preserve health and safety and risk assessment and prevention policies are designed and monitored.

"Mandated to represent workers' interests on health and safety issues". Both these areas are at the core of legislation and priorities. They are generally used in the names of the dedicated institutions. The improvement of working conditions, which is key to risk prevention, is rarely mentioned. This, of course, does not mean that this important issue is systematically neglected, but is rather due to the difficulty experienced by employers in opening up social dialogue to the organisation of work, which is considered by many to be the preserve of management, despite the fact that prevention is a shared priority.

"They are elected by all workers or appointed by the trade unions" reveals the diversity of the industrial-representation system, just as "framed by the law or a collective agreement" addresses the manner in which collective standards are issued: in some countries, this is achieved by legislation; in others, collective agreements are preferred; while in most nations a consistent mix of law and collective agreements is sought.

Series 3: The national systems

Les cadres nationaux

- Tous les pays encadrent les questions de santé sécurité par des législations qui, pour la plupart, prévoient les modalités de représentations des travailleurs et de dialogue social.
- Ce qui les différencient se trouvent dans leur caractère plus ou moins détaillé et contraignant ainsi que sur l'espace laissé aux accords collectifs.
 - Les pays à forte tradition de dialogue social (Allemagne, Autriche, Belgique, Finlande, France, Italie, Norvège, Pays Bas, Portugal, Royaume Uni, Suède) se sont dotés d'une législation en général dans les années 1970 et qui a évolué en deux périodes : les années 1980 puis 90 à partir de la transposition de la directive européenne 89/391 du 12 juin 1989.
 - Les nouveaux états membres ont établis des législations adaptées à partir des années 1990, dont certaines très structurées comme en Bulgarie, Pologne, Roumanie intégrant la directive de 1989.





- La transposition de la directive EU 1989 dans la législation des états membres fixée pour la fin décembre 1992 s'est heurtée à des difficultés de plusieurs ordres.
 - La bataille idéologique pesé tout particulièrement dans les pays qui, actuellement traversent une crise liée à la dette. La santé et la sécurité des travailleurs devient secondaire et les textes sont soit affaiblis, soit inappliqués, soit remis en cause (Grèce, Malte, Portugal, Espagne)
 - A l'inverse, les pays comme l'Allemagne, l'Italie, les Pays Bas disposant d'un corpus législatif établi et non contesté, ant hésité à bousculer le cadre en place en intégrant les éléments de la directive
 - Tandis que le Royaume Uni, conformément à sa tradition de faible législation sociale contraignante, a opté pour un code sans caractère obligatoire.





- · L'effectivité du droit dépend pour beaucoup des moyens de son application.
 - C'est, avec l'engagement du management et des syndicats sur les questions de santé et de sécurité, l'existence et l'efficacité d'agences gouvernementales et d'inspections du trovail disposant d'un réel pouvoir d'enquête, de contrôle et de sanction (France, Grèce, Malte, Pologne) qui conditionne l'efficacité de la prise en charge.
 - Or, ces institutions voient leurs capacités d'interventions affaiblies par les politiques d'austérité qui diminuent la force d'impact des agents publics.





The purpose of the **European Directive of 1989** is to promote and improve the health and safety of workers. In particular, it affirms the principle of the responsibility of the employer and the mandatory nature of employee consultation, participation and training.

The effectiveness of legislation largely depends on the means available for its application. This, together with commitment by managements and trade unions to health and safety issues, depends on the existence and effectiveness of government

agencies and labour inspection departments with genuine investigative, inspection and sanctioning powers (France, Greece, Malta, Portugal). However, the capacity for action of such institutions is often weakened by austerity policies, which reduce the potential impact of government agents.

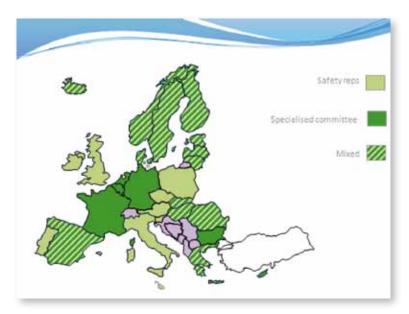
3.2. THE VARIOUS INDUSTRIAL-REPRESENTATION MODELS IN EUROPE



- The single-channel model involves one or more trade-union organisations
- One dual-channel model involves an elected committee comprising only workers' representatives
- Another dual-channel model integrates employers' representatives

3.3. WORKERS' OSH REPRESENTATION MODELS





The safety-reps system reflects the representation and dialogue traditions specific to each country, yet may also distance itself from them by developing appropriate methods.

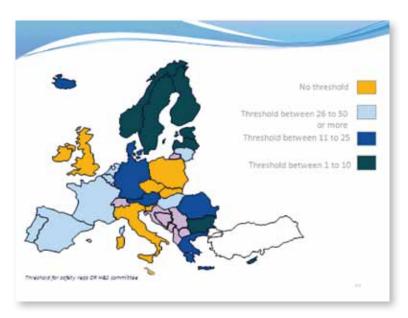
There are two main system types:

- > Specialised committees, which exist in 17 countries and usually comprise representatives of the staff, the company's specialised departments and the employer. Their composition, names, scope for action and mode of operation vary according to country and even activity sector.
- OSH representatives, who are elected by the staff or appointed by the trade unions, which exist in 12 countries.

It should be noted that of some the countries in which a dual-channel system applies have both committees and representatives.

3.4. REPRESENTATION THRESHOLDS





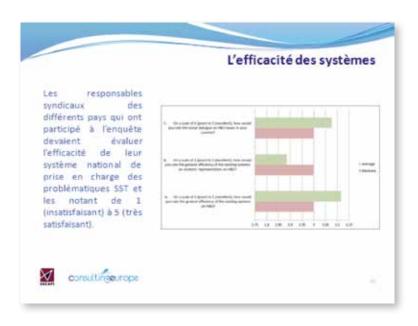
The issue of thresholds therefore leaves yawning gaps between the situations of employees of SMEs/SOHOs in the various countries. Such employees account for 70 million workers in the EU, and the risks they incur are far from less than at large companies. In general, their unionisation rate is low and they are scattered among a myriad companies (91% of European companies have less than 10 workers).

Besides the issue of threshold regulation, the ability of trade unions to incorporate the employees of SMEs/SOHOs poses another problem.

> Sweden (for over 30 years) and Italy have set up territorialrepresentative systems which cover the employees of such enterprises, a form of positive response which obviously requires considerable resources, a large pool of activists and an appropriate regulatory framework.

One should also mention the action of many *Safety Reps* who also cover subcontracted employees, and which deserves to be included in the practices of all trade unions.

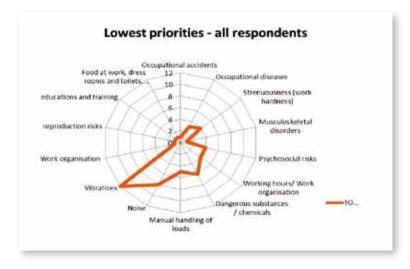
Series 4: The effectiveness of the national systems

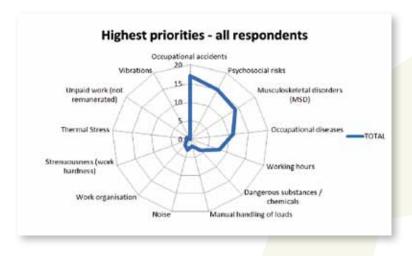


While considering 3 to be the median mark, it is important to note that opinions concerning the marks given to national systems may diverge widely from one member to the next of the same trade union, as well as between the various trade unions in the same country.

Series 5: The classification of risks







Practical reference sheets

Practical Reference Sheet 1: Some basic definitions

These definitions have been taken from the specialised literature and are important to the training process for several reasons:

- They enable the participants to familiarise themselves with a number of concepts and understand their meaning
- They enable participants to clarify the definitions specific to national realities and agree on a shared approach
- They enable the trainer to standardise translations with the interpreters

Hazard: a hazard is the intrinsic capacity or ability of a piece of equipment, substance or work method to damage the health of workers (e.g. electricity, wood dust, water, radioactivity, chronic stress, etc.)

Risk: probability that nuisance potential will be fulfilled in the conditions of exposure to a hazard and/or hazardous use (e.g. use of electrical equipment in the rain, etc.). Risk is an abstract concept. A risk assessment is the result of the study of the conditions of exposure of workers to these hazards.

Health: As defined by the World Health Organisation: "a state of complete physical, mental and social well-being". This is a subjective concept, as one can suffer from a disability or illness and still be in a state of well-being.

Feeling of safety: This is a subjective condition: "one feels safe". This state is derived from the idea that one is not running any risks, and mainly depends on awareness of hazards and of the level of risks taken.

Hygiene: Hygiene is a set of rules, living conditions and care required to preserve health, which applies to measures intended to prevent infections and the occurrence of infectious diseases. It is mainly based on three actions: cleaning and detersion, disinfection and preservation.

Health monitoring: The assessment of a worker's state of health according to his/her exposure to situations involving risks (handling, repetitive movements, chemicals, constraints and stresses, lack of autonomy, etc.) in the workplace.

Occupational diseases: Occupational diseases are the result of more or less prolonged exposure to nuisances or risks which occur in the course of the normal discharge of a worker's duties. Their acknowledgment as occupational diseases depends to a great extent on national legislative frameworks and collective agreements.

Work accident: As in the case of occupational diseases, this definition depends to a great extent on national legislative frameworks and collective agreements. The monitoring of work accidents must take into account both their frequency and the seriousness of their consequences for the victims.

Working conditions: The expression "working conditions" has never been precisely defined, whether in terms of content and limits, as working conditions are contingent on complex social processes.

The study of working conditions requires a combination of contributions by many scientific disciplines, each of which is both indispensable and inadequate: toxicology, physiology of effort, epidemiology, medicine, psychology, ergonomics, industrial sociology, organisational sociology, economics, law.

The description of working conditions - good or bad - needs to be performed by social actors. The definition of what is meant by "working conditions" is therefore a social and political issue. Any characteristic of work has the potential to become a "working condition". Whether or not it should be treated as such should be determined by the social debate.

Physical and mental arduousness of work: The concepts of "working conditions" and "arduousness" are closely linked: the improvement of working conditions must take and has taken the form of reducing the arduousness of work in the long and medium term.

Arduousness, then, is a consequence of poor working conditions and may even be associated with workplace suffering.

Intensification of work: Intensification of work may take the form of increased production by a constant number of staff, or of constant production by a decreased number of staff, but may also be the consequence of more in-depth organisational changes such as "lean production" or the design of hybrid production models such as the combination of the "industrial" organisation model, the purpose of which is regularity, with commodification, which aims for responsiveness, leading to an accumulation of stresses. Event-related forms of work intensification (breakdowns, defects, missing products, etc.) develop as the pressure of urgency increases in the processing of incidents or technical malfunctioning which disrupt production flows. Statistical research has confirmed the existence of a link between work intensity and working conditions. Work intensification appears to be a factor in the deterioration of working conditions, and more particularly a risk factor which needs to be brought under control.

Musculoskeletal disorders (MSDs): This generic definition comprises disorders generated by physical activity and workplace stress and which affect the locomotor apparatus generally (see Sheet 4)

Psychosocial hazards: These are occupational risks of various origins and types, which compromise the physical integrity and mental health of employees and therefore impact the operation of enterprises. They are known as "psychosocial" as they occur at the interface between the individual ("psycho") and his/her work situation ("social") (see Sheet 4)

Stress: "A state of stress occurs when there is unbalance between someone's perception of the constraints due to work environment and one's perception of one's own resources to cope with those constraints." (European Agency for Safety and Health at Work - EU OSHA)

Harassment: Any abusive behaviours (gestures, speech, behaviours, attitudes) which, when repeated or systematic, jeopardise a person's dignity or physical or emotional integrity and imperils the latter's employment or degrades the workplace atmosphere.

Mental workload: This symbolises the cost to a worker of a type of work involving efforts to concentrate, understand and adapt which lead to a decline in performance (mainly in terms of quality), the apparition of fatigue symptoms, an increase in the risk of incidents or accidents, and increased operator dissatisfaction.

Lack of well-being or the "inability to live and work together" is an emotional state related to organisational and relational context. This can range from employees' concern about their future to a more serious condition which reflects a variety of causes and is frequently linked to deterioration in workplace relations, to the inability of employees to determine their place in the organisation, or an inability to cope with unstable situations.

Emotional workload: Could be defined as the emotional cost of work, e.g. the psychological effect of a patient death on a healthcare worker (the price of self-control)

Workplace suffering: Workplace suffering can be characterised as an aggravated form of initial conditions such as stress or lack of well-being. It is an occupational reactive depression related to an enterprise's organisational and social requirements and is often triggered by identifiable behaviours on the part of colleagues or bosses. The belief that there can be no relief from the level of deterioration is what signals the beginning of suffering.

Burnout is a syndrome described as "physical and emotional exhaustion which leads to the development of an inadequate self-image and negative attitudes to work with loss of interest in achievements." A state of physical, emotional and mental exhaustion caused by long-term involvement in emotionally demanding situations, often linked to issues linked to professional identity.

Violence : Violence may be physical and inflicted on goods and/or persons (assault, theft, etc.), or emotional (domination, intimidation, persecution, humiliation, etc.). In a work context, a distinction is made between external violence inflicted by a customer, patient or user, and internal violence, which is inflicted by employees on each other.

Practical Reference Sheet 2: How to analyse workplace situations

An analysis of the true nature of work is an essential process if risk prevention is to be adjusted to the specific situations experienced by workers. The main factors to be taken into account are:

- 1. The person at work
- 2. The workstation
- 3. The organisation of work
- 4. The content of work
- 5. The work environment

1) THE PERSON AT WORK

Make a distinction between pre-established characteristics, which cannot be changed or can only be changed with difficulty, such as:

- gender;
- age;
- body size (anthropometrics), constitution, physical and functional characteristics (physiology); and characteristics which can be more or less easily changed, such as:
 - > level of training;
 - > dexterity:
 - > experience.

2) THE WORKSTATION

Here are a few important characteristics of workstation design:

Sitting or standing position?

This is one of the basic factors in workstation design.

Sedentary activities are found mainly in offices and in administration, whereas standing activities are in the majority in sales and industry.

Activities which combine both sitting and standing are ideal, as they benefit circulation, the muscles and the locomotor apparatus. A workstation which combines the sitting and standing positions makes a significant contribution to an employee's well-being. When the backbone moves, the intervertebral discs are supplied with nutrients, which improves efficiency.

Dimensions

The design of work equipment and workstations is based on the laws of anthropometrics and physiology, whereas the operating mode or production process require no particular dimensions.

Space required for movement and safe distances

Machines and apparatus must be designed in such a way that their use, monitoring and maintenance are easily performed. Suitable workstations give their users enough room to move and incorporate the necessary safe distances.

Lifting

Human beings are not pieces of lifting or transportation equipment. Frequent lifting must be either replaced with partial or total process automation or facilitated by means of appropriate lifting aids. Many lost-time accidents are caused by manual handling or wrong posture.

Facility monitoring and maintenance

A facility's productivity is affected not only by ease of use, but also by the quality of monitoring and maintenance. The quality of monitoring is primarily determined by appropriate presentation of operating status (displays) and smooth operation of controls (adjustment systems, handles), the layout of which must be consistent and functional. The availability of a facility largely depends on maintenance. For this reason, it is important that facilities be easily accessible for maintenance work and that adequate room be provided for maintenance staff. The immediate availability of the following components also plays a pivotal role: lifting aids, means of transportation, tools, monitoring apparatus and spare parts.

3) THE ORGANISATION OF WORK

When work is organised in a manner appropriate to the situation and to human beings, this substantially affects the company atmosphere, the well-being and productivity of employees and the efficiency of the work process.

Operating modes and work equipment

Cost-effective production requires appropriate operating modes and work equipment, as the latter play a considerable part in the degree of fatigue and the speed with which it sets in.

Operating modes which require frequent and repetitive physical movement should, whenever possible, be mechanised and automated. Strenuous physical effort over a long period of time leads to fatigue as well as a decrease in concentration and productivity, with direct negative effects on profitability, health and safety.

Work planning and training

Good training is the key to efficient and safe work. Risk information and instructions for use are as important as explanations on quality and lead times. If the staff, machines or methods are new, training must be especially thorough. In all cases, refresher courses should be given from time to time, and the implementation of training monitored.

Working time and breaks

Flexible working hours leave a certain amount of room for manoeuvre which enables working hours to be adapted to personal requirements. For organisational, technical or economic reasons, flexible hours are not always an option. Breaks should be appropriate to the activity type and be taken before energy reserves are too depleted.

Physiological research has shown that fatigue does not increase in a linear manner: the longer a person works, the faster it increases. Conversely, recovery is maximal at the beginning of a break, and rate of recovery decreases with the length of the break. The result is that, for an equivalent total working time, a larger number of short breaks improve recovery and slow down the progression of fatigue more effectively than a smaller number of longer breaks.

Work assessment and remuneration

A clear and accurate assessment of work and remuneration consistent with productivity are – together with praise, recognition and esteem for the worker – are required for well-being, motivation and the desire to be productive.

This has proved to be a more effective way of managing staff, even during times of crisis, than pressure and criticism.

Margin for responsibility and decision-making

To avoid curbing creativity and a sense of responsibility with the over-organisation of work, it is advisable to remove all constraints which are not absolutely necessary and replace them with opportunities for decision-making. As long as this does not impair other areas of production, quality or lead times, a person should be able to determine how his/her work should be performed, within the scope of his/her means and abilities.

In many cases, the grouping of planning, implementation and monitoring tasks enriches work and has a positive effect on the production process.

The periodic rotation of several tasks within a group diversifies workloads and encourages team spirit and cooperation.

The content of work

The content of work more properly belongs under the heading "organisation of work". However, as this aspect is becoming increasingly important, it makes sense to discuss it separately and in detail.

Work content can be too limited or too wide-ranging. This may lead to under-occupation or overwork, which affect the quality and quantity of work. The issue of the "fit" between training and position is also raised.

Under-occupation and monotony

Under-occupation decreases motivation and job satisfaction. Under-occupation is most frequently encountered in monotonous, unstimulating and undemanding tasks. Such activities are often the result of extreme division of labour (Taylorism), in which complex tasks are subdivided into many intermediate stages (e.g. assembly-line work).

Monotony soon leads to indifference and loss of concentration. Both factors have a negative effect on behaviour in terms of both safety and productivity. Under-occupation and monotony may be reduced and even be done away with altogether by means of the following measures: task rotation and expanding job activities.

Overwork

The limits between underoccupation, balanced activity and overwork vary from one individual to the next. Whereas one person will find an activity to be enriching, it may induce stress and overwork in another. Besides occupational stress, the stresses of private life should also be taken into account (family, community, sports, road traffic, etc.). The sum of all these factors should not exceed the threshold – which varies from one person to the next – of unhealthy stress. Unhealthy occupational stress occurs when work requirements consistently exceed an employee's ability to cope, and manifests in the form of fear, anger, fatigue, boredom, headaches or back pain.

4) THE WORK ENVIRONMENT

A person's work environment substantially affects working conditions, and therefore well-being, safety, job satisfaction, fatigue, health and, ultimately, productivity.

The work environment comprises:

- conditions generated by the performance of the work or which are changed by such performance,
- "external" conditions, i.e. generated by neighbouring workstations,
- conditions imposed by the performance of the work. These include: appropriate lighting and a climate appropriate to the activity and person.

Climate is determined by air temperature, movement and humidity, as well as the surface temperature of rooms and facilities.

A climate conducive to well-being also depends on the amount and intensity of physical movement and muscle exertion. The "ideal" climate varies according to age, gender, constitution, health, nutrition and clothing.

Practical Reference Sheet 3: Taking risk-prevention action

The purpose of Framework Directive 89/391/EEC on the safety and health of workers at work is to improve the protection of workers by means of preventive measures, consultation of staff representatives and employee involvement. This Framework Directive has been transposed into national legislation and applies to all public and private activity sectors.

In particular, the Directive stipulates that **employers are obliged to assess occupational risks** and consult employees on all issues relating to their workplace health and safety.

The involvement of *Safety Reps* in the design of prevention plans is essential according to the general principles of risk prevention which need to be taken into account and with which employer compliance must be achieved.

1) THE GENERAL PRINCIPLES OF PREVENTION: AVOID - PREVENT - PROTECT

Avoid

Avoid risks and assess risks which cannot be avoided

Prevent

- Combat risks at source
- Adjust work to workers, in particular in the areas of workstation design, equipment choice, work methods and production methods
- Take into account changing methods and technology
- **Replace** hazardous substances/equipment with non- hazardous equivalents, or at any rate with less hazardous equivalents

Plan prevention by integrating technology, work organisation, working conditions, industrial relations and the effect of physical (noise, heat, etc.) and psychological (stress, harassment, etc.) ambient factors

Protect

- Take individual and collective protective measures
- Give workers appropriate instructions
- Ensure that each worker is given appropriate and adequate training on health and safety during working hours

2) THREE TYPES OF PREVENTION

Traditionally, there are three different prevention-policy levels:

- **primary prevention** is intended to eliminate risks at source (e.g. reduce the risk of aggressive behaviour by improving reception of the public);
- **secondary prevention** is intended to protect staff by helping them deal with exposure to risks (e.g. conflict-management training);
- tertiary prevention (which is, in fact, remedial) involves taking action to reduce the disruption caused by risks which it has not been feasible or possible to avoid, and requires individual or collective attention to staff affected by workplace suffering (e.g. supply of emotional support further to the death of a colleague at work).

General

Observation has shown that primary prevention is often the Cinderella of action plans, whereas the other two forms are limited in scope. A genuine prevention policy must therefore aim to restore the balance between all three forms of prevention, to the advantage of primary prevention.

Although some primary-prevention actions are intended to be implemented at the highest level of an enterprise, this does not mean that other initiatives cannot be taken at all levels, even at individual work unit level. There is always a measure of room for organisational manoeuvre at each level of a work organisation, which, although they may be limited by the resources available, are not exclusively dependent on such resources.

More generally, experience also shows that the effectiveness of systems also requires logical and consistent interaction between all three forms of prevention.

Primary prevention

This is absolutely essential and must be clearly privileged as far as prevention principles are concerned.

Primary-prevention measures can be divided into the following four groups:

- organisation of work and processes;
- human-resources management;
- management;
- change management.

Actions on the organisation of work or processes include all actions relating to:

- the work context: organisation of premises, conditions in which the activity is to be performed (pressure on users, pressure of urgency, etc.);
- the content of the work: interesting work, ability to supply quality work, ability to respect the work ethic of quality, organisation of mutual assistance and additional support;
- the overall organisational consistency of a department or work unit: consistency between the requirements of the public and staffing levels available, activity peaks, ability to deal with a variety of situations.

Actions on human–resources management include all actions relating to:

- medium-/long-term HR policy: recruitment, skill acquisition, changing tasks, promotion, training policy, wages and salaries;
- the shorter-term management of human resources: assessment interviews, bonuses, etc.

Actions on management include all actions relating to the demands made by the enterprise on its management and the resources used to support them:

- work on the steering tools for an entity or activity, e.g. by balancing the management of "how much" and the management of "how";
- support feedback processes within a team;
- organise exchanges and sharing of good practices between managers.

Actions on change management include all studies and anticipatory measures considered prior to a change:

- diagnosis of strengths and weaknesses;
- installation of premises;
- preparation of reorganisations and mergers, department or entity closures;
- anticipation of technology breakthroughs.

Secondary prevention

This includes what can be done to enable employees to face risk factors.

Quite frequently, the inadequacy of primary-prevention measures leads to the manifestation of the risks staff have to face.

However, in many situations, risks cannot be avoided. In such situations, resources can be utilised to enable workers to face the ensuing difficulties.

For instance, these may include plans implemented to deal with degraded situations, or time set aside for discussion and analysis of difficult situations in order to learn from them and improve the practices and behaviour of all. Another form often taken by such action is the organisation of training appropriate to identified risks, e.g. in the case of facilities open to the public, training which enables staff to prevent or cope with verbal abuse or physical assault. Other actions may be intended to strengthen social bonds, work collectives or manager cooperation.

Tertiary prevention

Tertiary prevention is curative rather than preventive, and may involve two main types of action:

- psychological assistance to staff affected by a serious or even traumatic event (verbal abuse, assault, dispute between staff members, work accident of a colleague, etc.),
- help, assistance and support to staff who are suffering, which involves intervention by professionals.

Practical Reference Sheet 4: Two occupational-health issues

The classification of risks made by the leaders of affiliates during the *Safety Reps* study has highlighted two fast-growing problems: musculoskeletal disorders (MSDs) and psychosocial hazards. This sheet provides a summary of the main information on both these workplace issues.

1) MUSCULOSKELETAL DISORDERS (MSDS)

MSDs are multifactorial diseases with an occupational component.

Musculoskeletal disorders (MSDs) are a priority occupational-health issue, as they account for most occupational diseases.

MSD is a generic term for pathologies which affect the locomotor apparatus in general. Lower back pain is the commonest MSD. Carpal tunnel syndrome accounts for approximately half of upper-limb MSDs which are frequently recognised to be occupational diseases. Shoulder MSDs are increasing faster

than upper-limb MSDs overall. Occupational lower-limb MSDs are rare, with the exception of housemaid's knee.

Research has shown that risk factors should not be analysed according to job type, but according to the movements involved in the task and the work context. MSDs are primarily caused by the application of sustained and/or repetitive biomechanical stresses.

2) PSYCHOSOCIAL HAZARDS

What are they?

Stress has become a multipurpose word which is extremely popular with the media and used to characterise a wide variety of situations. We shall be using the definition supplied by the European Agency for Health and Safety at Work.

"A state of stress occurs when there is unbalance between someone's perception of the constraints due to work environment and one's perception of one's own resources to cope with those constraints." Although the process for the assessment of constraints and resources is psychological, the effects of stress may also affect a person's physical health, well-being and productivity."

Individuals are capable of managing short term pressure but experience great difficulties under continuous or repeated exposure to intense pressures.

Essential points to remember:

- Do not confuse "disorder" and "risk".
- A disorder is characterised by the apparition in one or more individuals of more or less perceptible signs which can worsen until they become pathological: stress, anxiety, depression, aggressiveness, violent behaviour, addiction and other medical symptoms.

- A risk is the probability that a disorder, whether individual or collective, will appear.
- Psychosocial hazards are multifactorial. Although events in the private lives of staff members may increase their exposure to these hazards, the safety rep's role is to monitor and support the detection of pathogenic factors in the organisation of work and working conditions.
- Psychosocial disorders are caused by an imbalance which may be generated by a person's occupational environment and working conditions.
- Exposure to psychosocial hazards may have an impact on both physical (MSDs, cardio-vascular disorders, etc.) and mental health.
- Different individuals may react differently to similar situations. The same individual may, at different stages of his/her life, respond differently to similar situations. Although stress is not a disease, chronic stress can impair efficiency at work and cause health problems.
- Sources of stress external to the work environment may lead to behavioural changes and impaired efficiency at work.
 Conversely, the fact of working in good conditions may enable a person to overcome private difficulties.

Method sheets

Method sheet 1: Mapping the OSH player network within the enterprise

GOAL

To learn about and understand the various national OSH systems, both preventive and curative, present in enterprises.

SUPPORTING MATERIAL(S)

- > The Safety Reps comparison software
- > The questionnaire attached to this sheet

LEARNING METHOD

- > Each participant or subgroup of participants from the same country has one hour to map the systems available in their country's enterprises on the basis of the "Prevention in enterprises" questionnaire, and prepares a clear and concise summary for presentation to the full group.
- > Each participant or subgroup of participants presents its report in no more than 15 minutes.
- > This is discussed by the whole group during an hour for the purpose of clarification.

QUESTIONNAIRE FOR SUB-GROUPS

PREVENTION IN ENTERPRISES						
	Always	Rarely	Never	Don't Know		
Are the national provisions for prevention and protection at work applied in your enterprise?						
Are the European provisions for prevention and protection at work applied in your enterprise?						
Does the enterprise have regulations concerning prevention and protection at work?						
If so, are they applied? By the top management By the middle management By the employees	_ 	_ 	_ 	_ _		

	YES	NO	Don't Know
Does the enterprise have a department dedicated to risk prevention?			
Is there a medical monitoring system for the staff?			
If so, is the doctor involved in the decision concerning the acknowledgement of an employee's disease as occupational?			

Method sheet 2: Mapping the Safety-Rep organisations in the various countries

GOAL

To learn about and understand the various national systems for the representation of employees in the area of OSH, and their scope for action.

SUPPORTING MATERIAL(S)

- > The Safety Reps comparison software
- > The questionnaire attached to this sheet
- > The slides in Series 1 to 4

LEARNING METHOD

- > Each participant or subgroup of participants from the same country has one hour to map the systems available in their country's enterprises on the basis of the "OSH employeerepresentative participation in enterprises" questionnaire, and prepares a clear and concise summary for presentation to the full group.
- > Each participant or subgroup of participants presents its report in no more than 15 minutes.
- > This is discussed by the whole group during an hour for the purpose of clarification.
- > The trainer uses the slides in Series 1 to 4 to draw up a formal map

QUESTIONNAIRE FOR SUB-GROUPS

OSH EMPLOYEE-REPRESENTATIVE PARTICIPATION IN ENTERPRISES					
	YES	NO	Don't Know		
Is there a risk-assessment system in the enterprise?					
Does this risk assessment lead to preventive action plans?					
Do employee representatives take part in this risk assessment?					
If so, does this participation enable the staff and their representatives to be effectively involved:					
Systematically					
It all depends on the subject					
It is done purely for show					
Is there institutional participation by a body of employee representatives on OSH issues and working conditions?					
What is its composition (trade unionists, elected employees' representatives, How does this body interact with: the union, other bodies representing empl Are the <i>Safety Reps</i> trained, and if so, to what extent (time, financing, etc.)?	oyees, the enter		on systems?		
Are the Safety Reps able to intervene in the following areas: • Work accidents • Occupational diseases • Exposure to hazardous situations • Production stoppage in the event of a hazardous situation					
Organisation of work					

Method sheet 3: Classification of the main risks

GOAL

To map the risks and risk sources to which workers in the enterprises or activity sectors represented in the group of participants are exposed.

SUPPORTING MATERIAL(S)

- > The Safety Reps comparison software
- > The questionnaire attached to this sheet
- > The slides in Series 5

LEARNING METHOD

- > Each participant or subgroup of participants from the same country has one hour to map the systems available in their country's enterprises on the basis of the "OSH risks" questionnaire, and prepares a clear and concise summary for presentation to the full group.
- > Each participant or subgroup of participants presents its report in no more than 15 minutes.
- > This is discussed by the whole group during an hour for the purpose of clarification.
- > The trainer uses the slides in Series 5 to illustrate the map.

QUESTIONNAIRE FOR SUB-GROUPS

OSH RISKS							
RISKS							
Classify the risks faced by employees in your enterprises by extent, on a scale of 0 (risk nonexistent) to 5 (very high risk)							
	0	1	2	3	4	5	
Work accidents							
Occupational diseases							
Exposure to hazardous materials							
Exposure to allergenic materials							
Poor work environment (noise, heat, dust, etc.)							
Poor-quality machines and tooling							
Pace of work							
Environmental hazards (fire, explosion, etc.)							
Psychosocial hazards							

WORK ACCIDENTS				
How many work accidents	occurred last year in the workplace?			
Number :	Don't Know ☐			

Over the past 5 years :		Increasi	ng	De	creasing	The Sar	ne	Don't Kno	w
Is the number of accidents in t	he workplace?								
Is the severity of accidents in	he severity of accidents in the workplace?								
Over the past 2 years, how man	ny of the following								
• Fatal accidents		Number : .			Don't Know				
• Accidents with serious physical consequences Number : Don't Know 🗆									
Classify the main accident risks	s faced by employee	es in your en	terpris	es by	extent,				
on a scale of 0 (risk nonexisten	t) to 5 (very high ri	sk)							
		0	1	1	2	3	4	5	
Machines									I
Tooling				<u> </u>					I
• Fall				<u> </u>					I
Handling				<u> </u>					
• Operation of machines in the	workplace			1					l
Use of public roads				1					
• Environment (fires, explosions,	pollution, etc.)			<u> </u>					
		CUPATIONA		EASES		•		1. 14	
To your knowledge, are employ diseases linked to:	yees affected	YI	ES		N	0	Do	n't Know	
Physical effort (musculoskele	tal disorders,	_	_		_				
lower back pain)	• • •								
 Exposure to hazardous mater asthma, skin conditions, vom 									
Exposure to noise	- 317								
Exposure to heat									
Exposure to dust									
Exposure to damp									
Exposure to psychosocial hazards									
Are these diseases officially acl	knowledged as occu	ipational for	the be	enefit	of affected e	mployees?			
Always	Often			F	Rarely		Ne	ver	

Method sheet 4: Drawing up a transnational industrial prevention strategy

GOAL

On the basis of the information gathered during the previous exercises, consider potential transnational industrial actions for risk prevention.

SUPPORTING MATERIAL(S)

- > The information gathered during the previous exercises
- > The practical reference sheets, especially No. 3

LEARNING METHOD

- > Transnational work subgroups are formed.
- > They have one and a half hours to:
 - on the basis of the information gathered during Exercise 3, draw up a joint classification of priority risks
 - on the basis of the information gathered during Exercises 1 and 2, map the players who can be involved
 - define potential strategies for transnational action.
- > Each subgroup presents its report to the group in no more than 15 minutes.
- > In the course of a collective discussion, endeavours are made to design a joint industrial-action strategy for the European Works Council.

EXERCISE

The group of participants now plays the part of a European Works Council to which the group management have presented a summary of the situation in the areas of working conditions, health and safety in the various European subsidiaries.

The positive conclusions of the report do not match the realities observed by the employees' representatives at the EWC. They must therefore make a joint diagnosis of their own and plan an action strategy.

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With the financial support of the European Commission