



Brussels, 28.6.2021  
SWD(2021) 149 final

**COMMISSION STAFF WORKING DOCUMENT**  
**STAKEHOLDER CONSULTATION - SYNOPSIS REPORT**

*Accompanying the*

**Communication from the Commission to the European Parliament, the Council, the  
European Economic and Social Committee and the Committee of Regions**

**EU strategic framework on health and safety at work 2021-2027  
Occupational safety and health in a changing world of work**

{COM(2021) 323 final} - {SWD(2021) 148 final}

# SYNOPSIS REPORT

## 1. INTRODUCTION

This report covers feedback and input from the public, administrations, associations and other organisations ('stakeholders') on the previous EU strategic framework on health and safety at work (2014-2020) ('the previous framework'). It also covers input for the new EU strategic framework on health and safety at work (2021-2027) ('the new framework').

A **consultation strategy** was designed to enable a wide consultation capturing the views and opinions of the public and all relevant stakeholders in different fora, including through an open public consultation (OPC). The aim of the consultation was to take stock of the quality and implementation of the previous strategic framework and to support the new framework by providing input to the EU strategic orientations for the period 2021-2027 in this policy area. The consultation process drew on the **stakeholder mapping** that identified the following relevant stakeholders:

- the Advisory Committee on Safety and Health at Work (ACSH);
- the Senior Labour Inspectors Committee (SLIC);
- national authorities (ministries of employment/social affairs, national institutes for occupational safety and health, labour inspectorates, etc.);
- social partners at Member-State and EU levels;
- employers, including micro, small and medium enterprises and workers;
- academic/research institutes;
- occupational safety and health (OSH) professionals (private experts/consultants, external OSH protective and preventive services, OSH networks, etc.);
- other groups, such as public insurance organisations.

The consultation strategy was aimed at gathering input through various **consultation methods** and **tools**, notably:

- the opinions and positions of the main OSH stakeholders (such as the ACSH, the SLIC, and EU employers' and workers' representatives) as well as the opinion of the EU institutions (Council and European Parliament);
- an external study to take stock of the previous framework<sup>1</sup>;
- the results of the OPC<sup>2</sup>;
- feedback on the published roadmap;
- regular exchanges with – and *ad hoc* contributions from – stakeholders.

The contributions received confirmed strong support from the public and stakeholders for a new framework. The contributions also confirmed the importance of common objectives and coordinated action to mobilise all actors around the same goal – the improvement of occupational

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1 A separate staff working document presenting, among others, the results of the study will be published in parallel: <https://ec.europa.eu/social/BlobServlet?docId=24123&langId=en>

2 A separate consultation report as part of the above-mentioned study, will be published. It will offer a more comprehensive overview of the contributions received within the OPC.

health and safety. In the communication<sup>3</sup> that this report accompanies, these contributions have been taken into account. The communication identifies the main priority issues as well as concrete actions that could be taken. Contributions that went beyond the scope of the EU's powers were not taken into account.

## **2. METHODOLOGY**

Stakeholders had the opportunity to provide online feedback on the roadmap<sup>4</sup> for the new framework using an open-text field. They also had the opportunity to participate in an OPC by submitting their feedback through an online questionnaire. In addition, the Commission received contributions from stakeholders through regular exchanges and *ad hoc* submissions. On behalf of DG Employment, Social Affairs and Inclusion (DG EMPL), an external contractor carried out some of the consultation activities.

The OPC combined a mixture of 'closed' questions (where respondents chose from a pre-determined selection of answers) and 'open' questions (where they were free to write any response they chose). Participants were given a 500-character limit for all questions except questions 23 and 25. For these two questions, responses of 2 500 characters were allowed.

The OPC results, the feedback on the roadmap, and other contributions were analysed quantitatively and qualitatively. For the roadmap feedback and other contributions, only issues mentioned at least twice by stakeholders have been considered in the analysis for this report. Where no reference to a particular stakeholder group was made, this means that various stakeholder groups – not constituting a majority of stakeholder groups – raised the issues mentioned.

To identify themes/issues of relevance for the new framework, MS Excel and text-analysis tools were used for the OPC, while manual analysis was used for the roadmap feedback and other contributions. Where relevant, thematic grouping was applied to free-text responses to determine approximate frequencies of issues raised in these responses. This involved a degree of interpretation.

## **3. CONTRIBUTIONS RECEIVED THROUGH REGULAR EXCHANGES WITH KEY STAKEHOLDERS OR ON AN AD HOC BASIS**

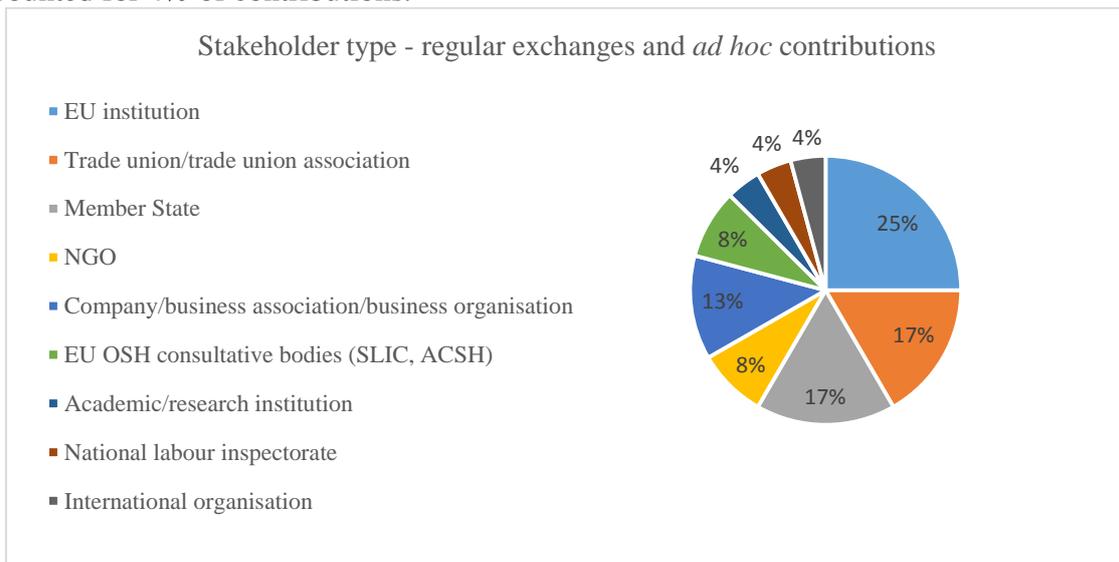
Between June 2019 and February 2021, over 20 contributions were received on the new framework through regular exchanges or ad hoc submissions. The European Parliament (EP) and the Council provided 25% of contributions, while individual Member States and trade unions/trade union associations provided 17% each. Contributions were also provided by companies/business associations (13% of all contributions), non-governmental organisations (NGOs) (8%), and EU OSH consultative bodies (the ACSH and SLIC) (8%). International

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3 Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions: "EU strategic framework on health and safety at work 2021-2027 – Occupational safety and health in a changing world of work"

4 <https://ec.europa.eu/info/law/better-regulation/have-your-say/initiatives/12673-EU-Strategic-Framework-on-Health-and-Safety-at-Work-2021-2027>

organisations, national labour inspectorates, and academic/research institutions each accounted for 4% of contributions.



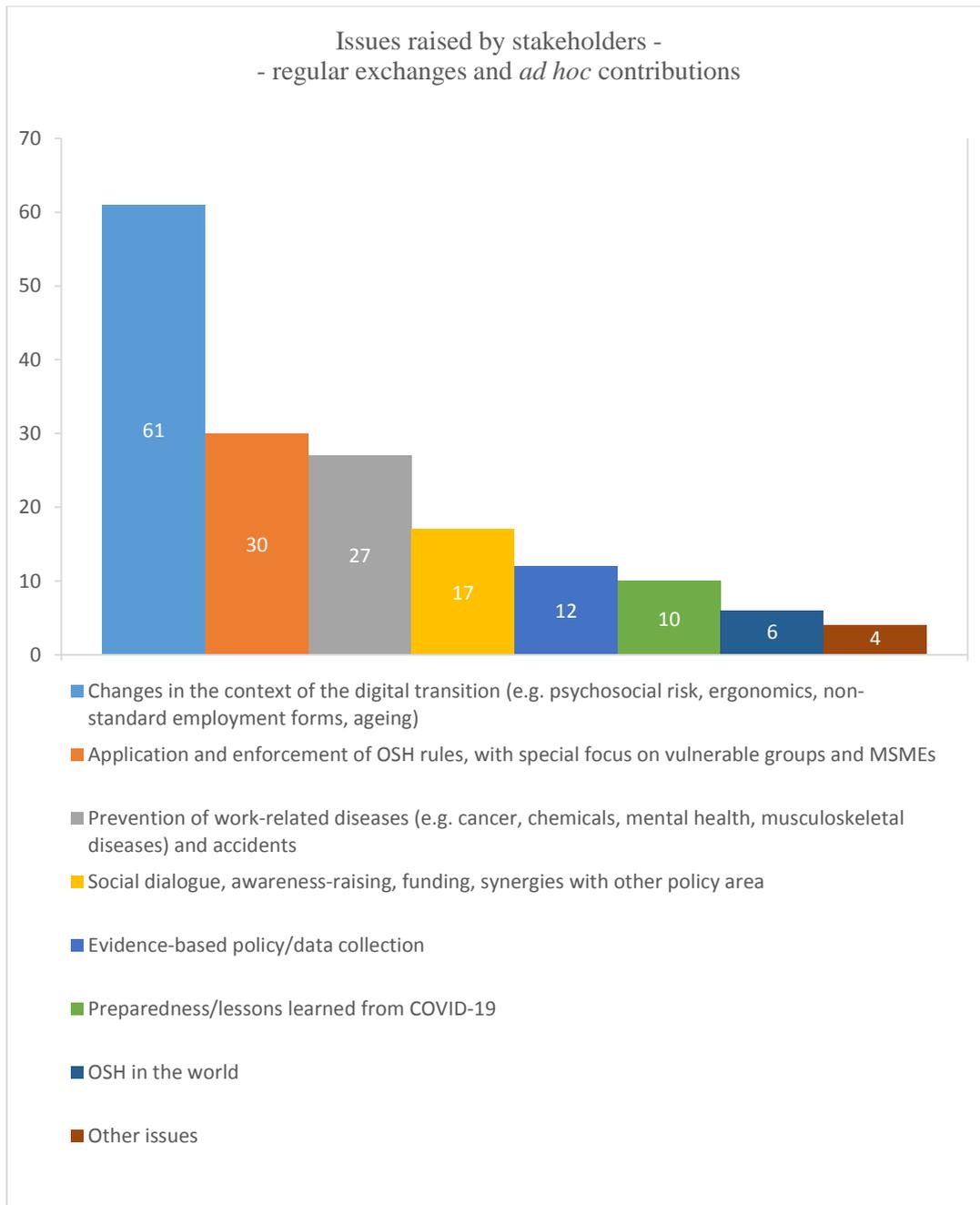
The issue most frequently raised in the stakeholder contributions was that of the **changes in the world of work** caused by the combined effects of technological progress, demographic change, climate change and globalisation. Most contributions in this context referred to the **rapid ageing of the EU population** and the need to integrate older workers to ensure that they lived a productive, healthy and long working life. Many of these contributions also discussed effective **return-to-work** policies for people who had been out of work for some time. Other contributions on this subject discussed the increased risks arising from rapid digitalisation and new forms of work, two trends that have been accelerated by the pandemic. These risks include **ergonomic** and **psychosocial risks**, OSH risks in **non-standard employment forms**, and the risks of **working from home**.

Most stakeholders also referred to the need to support the **application of OSH rules**, particularly in **micro, small and medium enterprises**, and the need to improve the **enforcement of these rules**. In this area, the issue most frequently raised in stakeholder consultations was the need to ensure OSH protection for **vulnerable groups**.

Another issue that stakeholders considered to be important was the **prevention of work-related diseases** (in particular cancer and the need to continuously update legislation in this field) and **accidents at work**.

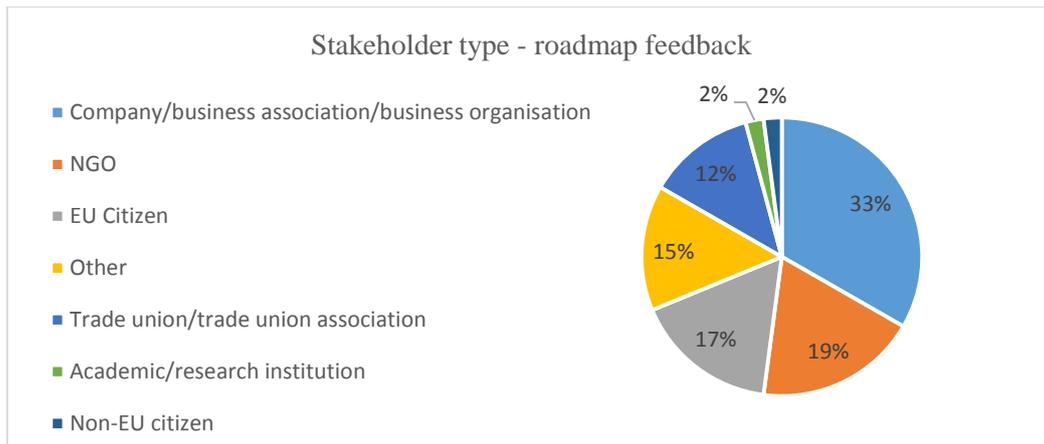
Stakeholders also pointed to the need to support the implementation of OSH rules with: (i) **social dialogue**; (ii) **awareness-raising**; (iii) **EU and national funding**; and (iv) **improving synergies with other policy areas** (especially chemicals legislation). They also referred to the need to improve **OSH statistical data** and the **OSH evidence base**, building more on **science and research**.

Non-business stakeholders also said it was important to **learn lessons** from the current **pandemic** and to improve **OSH around the world**. Several stakeholders also pointed to **specific OSH risks** in some professions or economic sectors, as well as the need to **strengthen capacities** for **OSH** on various levels.



#### 4. FEEDBACK ON THE ROADMAP

Between 29 October and 26 November 2020, 49 stakeholders submitted online feedback on the Commission roadmap. These stakeholders represented a variety of sectors. Most responses came from companies and business associations (33%), followed by NGOs and the public (19% each), other stakeholder types (15%), trade unions/trade union associations (12%) and academic/research institutions (2%).



The issues most frequently raised by stakeholders were: (i) the **prevention of work-related diseases and accidents at work**; and (ii) the request to address work-related diseases (cancer in particular) and accidents at work in the new framework. Several non-business stakeholders stressed the importance of: (i) continuously updating **binding occupational exposure limits (BOELs)**; and (ii) supplementing the Carcinogens and Mutagens Directive (**CMD**), including for nanomaterials and reprotoxic substances. On the other hand, several industry stakeholders asked for: (i) activities and facilities to help businesses adapt to stricter BOELs; and (ii) a moratorium on stricter BOELs until 2022 due to the pandemic. Another important issue raised by stakeholders in this context (mentioned mostly by trade unions) is the need to combat **violence** as well as **sexual and psychological harassment at work**. As part of a focus on accidents at work and work-related diseases, several stakeholders proposed linking the new framework with the global ‘**vision zero**’<sup>5</sup> campaign aiming at achieving zero work-related deaths in the EU.

Stakeholders were also greatly concerned about the **changes in the world of work** caused by the rapid uptake of new technologies, demographic changes, new ways of organising work, and climate change. Most contributions in this area referred to **ergonomic and psychosocial risks**. Many stakeholders asked for musculoskeletal diseases to be tackled urgently due to the rise of teleworking. These stakeholders asked for the response to musculoskeletal diseases to focus on prevention and adapted policies. Some stakeholders asked for appropriate legal instruments to address psychosocial risks at work. In addition, several stakeholders raised concerns related to **old-age**, including: (i) the need for improved **return-to-work** policies; and (ii) OSH risks in **non-standard forms of employment**.

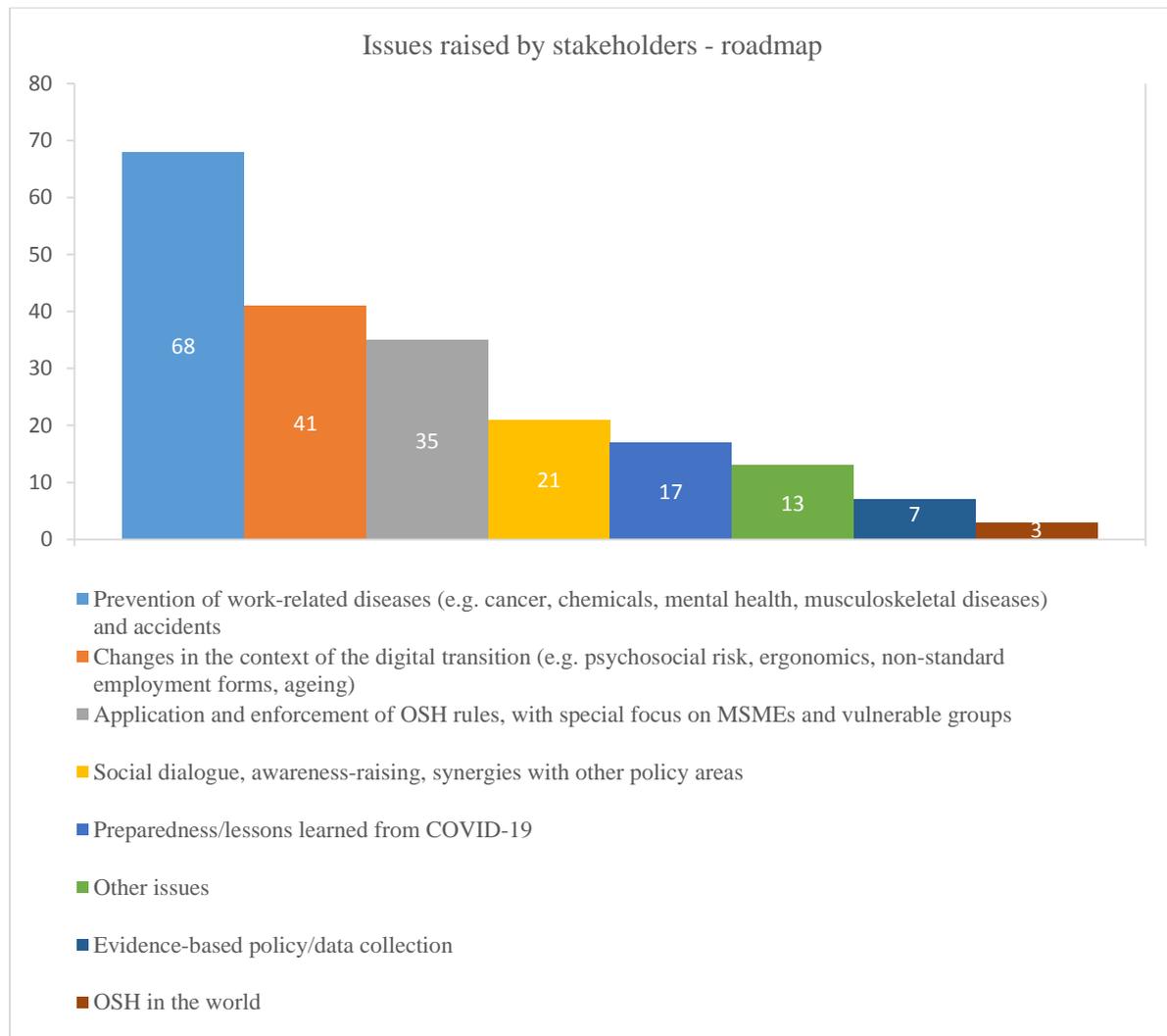
Most stakeholders mentioned the importance of supporting the **application of OSH rules** (especially in micro, small and medium enterprises) and improving **enforcement** by strengthening the resources of labour inspectorates. In this context, non-business stakeholders stressed the need to ensure that OSH rules were also applied to **vulnerable groups**, such as: (i) younger, female, seasonal and migrant workers; (ii) workers with disabilities/illnesses; and (iii) frontline (e.g. healthcare) workers.

Many stakeholders also mentioned the importance of **social dialogue, awareness-raising and improving synergies with other policy areas** (especially the areas of chemicals, environment and public health). Stakeholders also stressed the importance of integrating in

<sup>5</sup> <http://visionzero.global/>

the new framework **lessons learned from the pandemic** – especially lessons related to musculoskeletal diseases, non-standard forms of employment and the increase of mental health problems. Some stakeholders asked for COVID-19 to be recognised as an occupational disease.

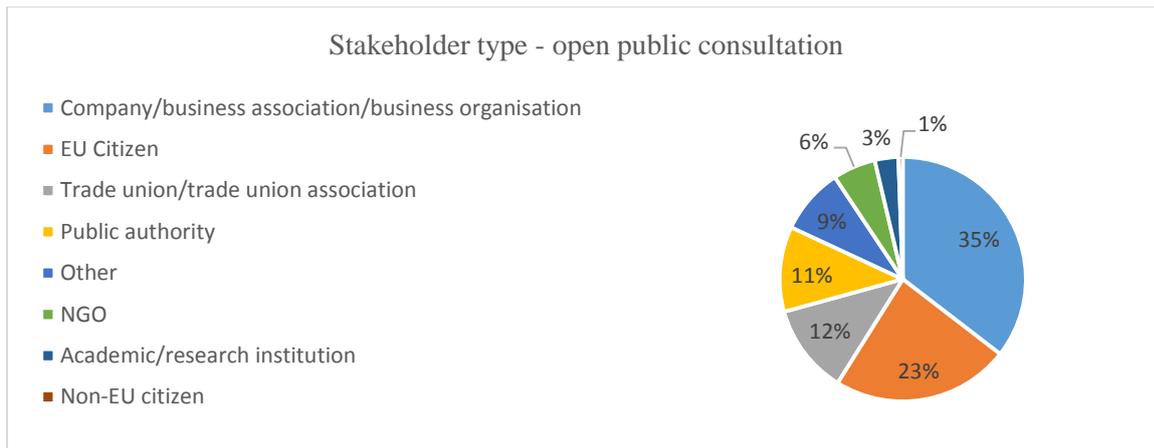
Another important issue raised by stakeholders was the need to improve **OSH statistical data** and **the OSH evidence base**. Several stakeholders also mentioned the need to strengthen international cooperation in OSH and to set EU-wide and global **minimum OSH requirements and objectives**.



## 5. FEEDBACK FROM THE OPC

The OPC<sup>6</sup> took place from 7 December 2020 to 1 March 2021, with 355 respondents replying to the questionnaire on the previous and future EU strategic frameworks. Respondents to the OPC came from 26 EU Member States and 7 non-EU countries.

<sup>6</sup> <https://ec.europa.eu/info/law/better-regulation/have-your-say/initiatives/12673-EU-Strategic-Framework-on-Health-and-Safety-at-Work-2021-2027-/public-consultation>



Of the OPC respondents, 64% strongly agreed or agreed that workplace safety and health in their country/the EU had improved overall since 2014. This view was more prevalent for respondents representing employers and employers’ associations (83% of whom agreed or strongly agreed) and lower for respondents representing workers’ associations (48% of whom agreed or strongly agreed).

Most respondents felt that the previous framework contributed either ‘to a great extent’ (15%) or ‘somewhat’ (54%) to improved health and safety at work at EU level. Slightly fewer respondents felt that the previous framework contributed ‘to a great extent’ (9%) or ‘somewhat’ (54%) to improved health and safety at work at national level. Less than half of respondents felt that the framework contributed ‘to a great extent’ (6%), or ‘somewhat’ (43%) to improved health and safety at *regional level*, and ‘to a great extent’ (8%) or ‘somewhat’ (43%) to improved health and safety at *workplace level*.

Respondents considered that the highest priority in the previous framework was addressing issues such as the ageing of the workforce and emerging new risks. Of respondents, 90% stated that this was very important or important.

Opinions were divided on whether progress had been made in the actions under the seven strategic objectives in the previous framework. For each strategic objective, half or less than half of respondents agreed: (i) that good progress had been made against each action; (ii) that the action had led to tangible results; (iii) that the actions were relevant to the priorities in the area of OSH; and (iv) that the appropriate stakeholders had been involved in developing the action. In most cases, more respondents agreed than disagreed that progress had been made in these areas.

When comparing responses on each of the seven strategic objectives, respondents were most positive about the progress made under the first strategic objective (review national OSH strategies) and the second strategic objective (facilitate compliance with OSH legislation). Respondents appeared to find the fifth objective (addressing the ageing of the workforce, emerging new risks and work-related and occupational diseases) to be the most relevant of the strategic objectives, followed by the first objective, the second objective, and the sixth objective (improve data collection). The first, second and fifth objectives were perceived to have produced the most tangible results.

Respondents reported the least progress and least evidence of tangible results under the fourth objective (simplify legislation) and the seventh objective (improve international cooperation). It is notable that these two objectives were also perceived to be the least relevant.

On the first strategic objective, approximately half of OPC respondents (53%) said good progress had been made, while 20% disagreed. The same proportion (53%) agreed that the actions under the first strategic objective were relevant to the priorities in the area of OSH, while 39% agreed that these actions involved the appropriate stakeholders, and 41% agreed that they led to tangible results.

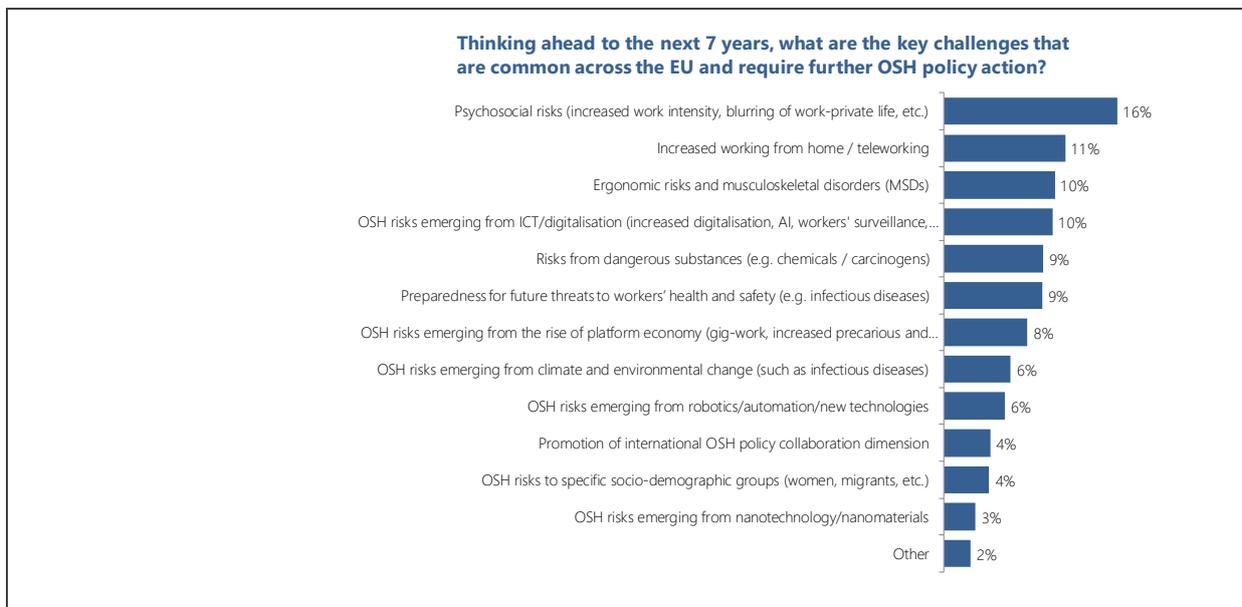
Of respondents to the OPC, 35% felt that employers were involved ‘too little’ in the design of the previous framework, whereas 33% felt workers’ organisations were involved too little. A further 33% felt OSH professionals were involved too little, and 31% felt employers’ organisations were involved too little.

Respondents mentioned the following key barriers to fulfilling the objectives of the previous framework: (i) limited staff and money (mentioned by 41%); (ii) lack of interest among employers (mentioned by 35%); and (iii) lack of awareness/understanding of OSH among key stakeholders (mentioned by 34%).

Most respondents (68%) supported an updated or adapted framework, while 11% felt that a successor framework should remain largely the same as the 2014-2020 iteration. A very small number of respondents (<1%) were in favour of discarding the framework, while 14% believed the framework’s current model needed to be fundamentally altered.

Respondents felt that the two most important OSH challenges that needed to be addressed in the next 7 years were psychosocial risks and the trend of increased working from home.

### Key challenges common across the EU that require further OSH policy action



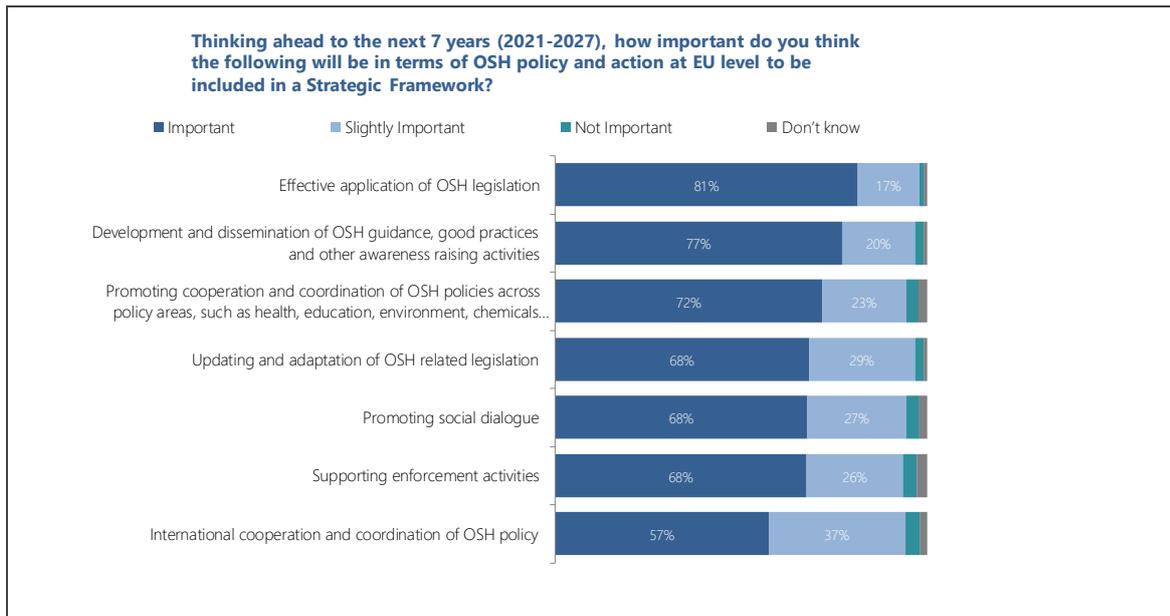
All respondents (n=349)

Source: Consultation report from external study

OPC respondents also suggested the **following main areas of focus for the future framework:**

- effective application of OSH legislation;
- development and dissemination of OSH guidance, good practices and other awareness-raising activities;
- promoting cooperation and coordination of OSH policies across policy areas, such as health, education, environment, chemicals, etc.

**Main areas of OSH policy and action at EU level to be included in the future framework**



Figures below 5% not displayed.

All respondents (n=342-346)

**Source: Consultation report from external study**