



# **ANEC**

# The European consumer voice in standardisation







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### Consumer participation in standardisation...



## has been centralised at the European level since 1995



'The European Association for the Co-ordination of Consumer Representation in Standardisation'

(or 'The European consumer voice in standardisation')





**General Assembly (ANEC/GA)** 

(one individual from each of 33 countries)

**Steering Committee (ANEC/SC)** 

(up to 10 members from GA)

Secretariat (9.5 FTEs)

Working Groups (ANEC/WGs)

(8 WGs comprising experts drawn from member countries)





Associate Member of



- Co-operating Partner of CENELEC
- Ordinary member of



• Past Member of W3C World WIDE WEB

• Observer in ISO/COPOLCO



Member of EC expert groups



#### Main ANEC Partners





# The mainstream European consumers organisation

 especially in helping to shape European legislation and public policies in the consumer interest

### **Consumers International**



- especially in ensuring the participation of consumer experts in international standardisation (ISO, IEC, UNECE)





# Joint call for a Pan-European Accident and Injury Data system (March 2013)

















### With the support of:







































**ENPC European Nursery Products Confederation** 

# Injury data: essential for evidence based consumer safety policy and practice in the EU

- Harmonised methodology and classification

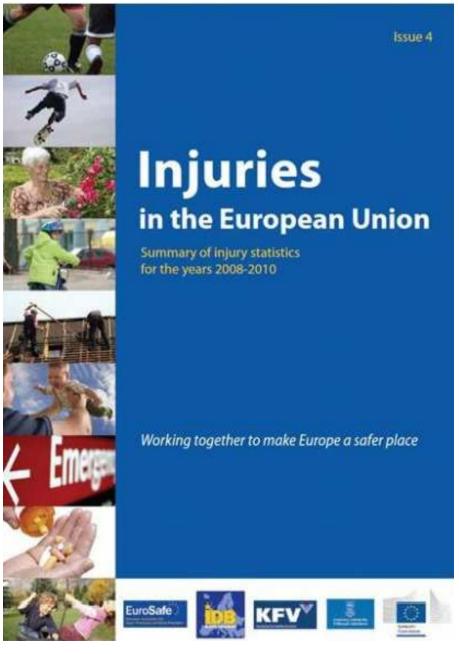
### Complementary to:

- Market surveillance
- Industry reports
- Consumer reports
- Standardization on a hazard-based approach



- Majority of notifications relate to highly regulated products (toys /electrical appliances)
- Product-related accident data are indispensable for identification of new and emerging hazards and/or insufficient standards



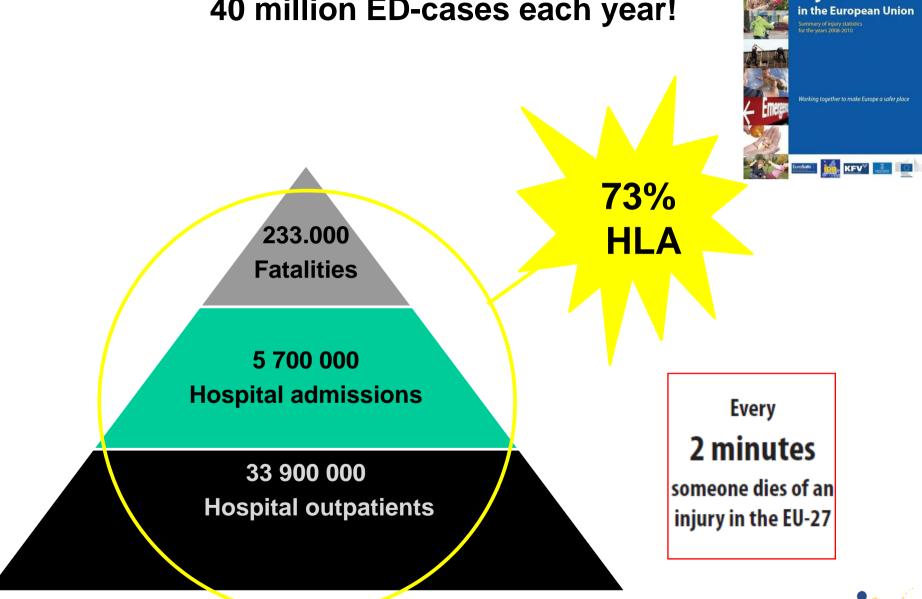




- most recent IDB data from the currently participating member states
- in combination with European injury data made publicly accessible through Eurostat and WHO



# Size of the injury problem: 40 million ED-cases each year!





**Injuries** 

# HLAs represent 73% of all injuries

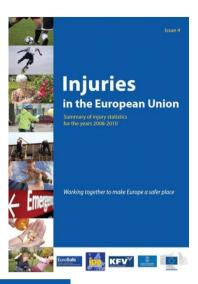
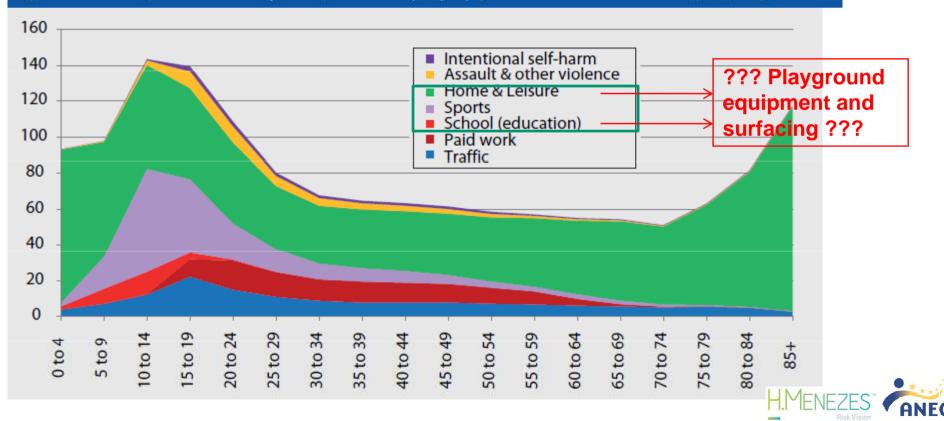
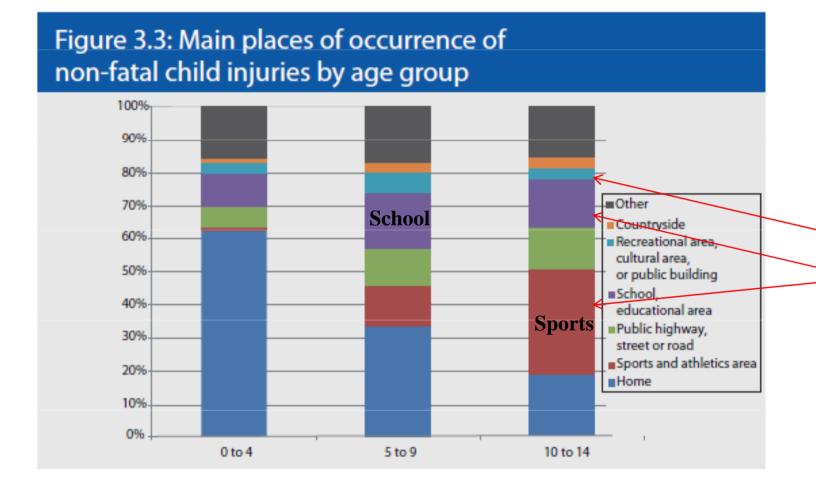
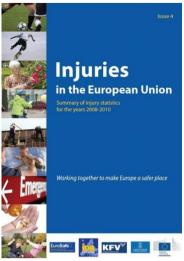


Figure 2.10: Hospital treated injuries per 1000 by injury prevention domain and age group, EU-27



### **Places of Occurrence**

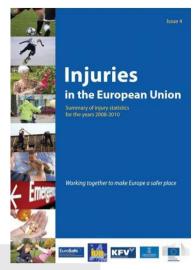


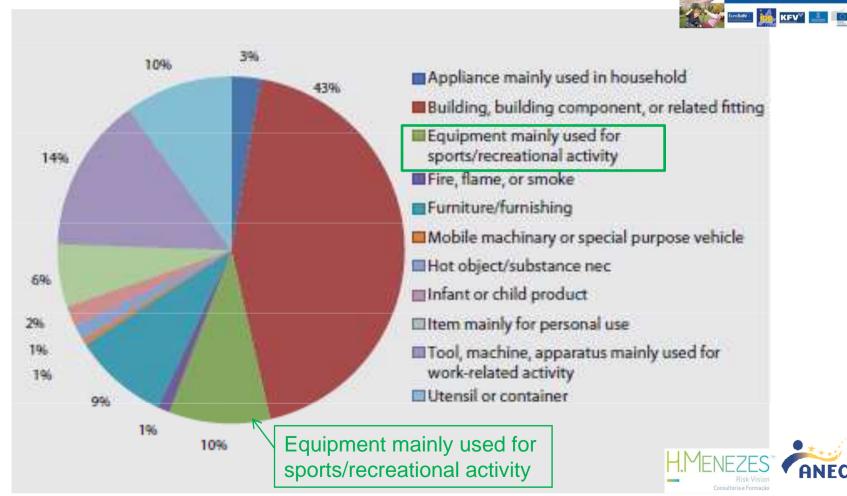


Playgrounds, Recreational areas, Sports



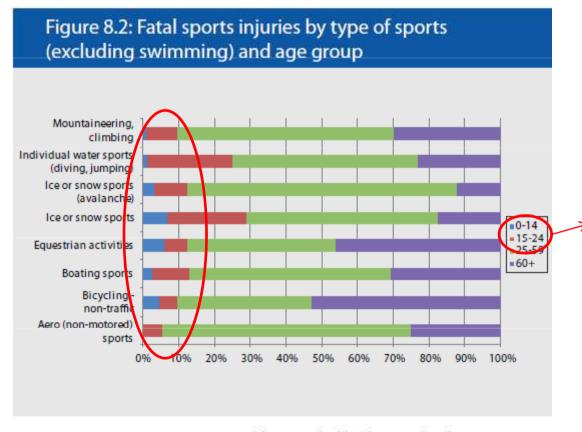
# Product related non-fatal home and leisure injuries by product category



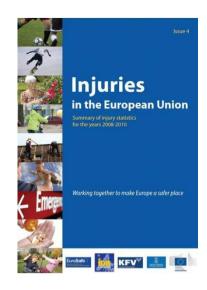


# Sports Injuries Which products involved?

Equipment mainly used for sports/recreational activity



Source: WHO MDB. See Annex "List of figures and tables" for more details.



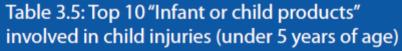
Children and young people

Type of sports will vary with cultural differences and country characteristics



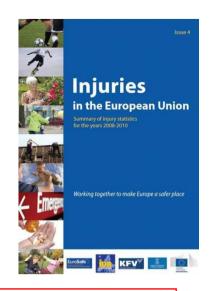
# What do we know about products involved and/or causing the injury?

Equipment mainly used for sports/recreational activity



Rank order	Product
1	Swing
2	Slide, sliding board
3	High chair, booster seat
4	Toys
5	Changing table
6	Playground climbing apparatus
7	Baby pram, buggy etc.
8	Other specified playground equipment
9	Marble, bead
10	Tricycle, ride-on toy

Source: EU IDB. See Annex "List of figures and tables" for more details.



Domestic swing (toy) or playground equipment? How did it happen? Fall? Collision?

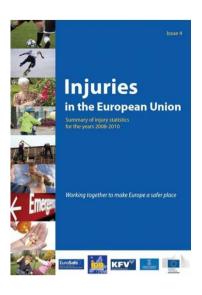
Complying with EN1176? Entrapment? Collision? Fall height? Compliant impact surface? How serious are the injuries?

Domestic or public use? Complying with standard? Poor design? Lack of maintenance? Entrapment? Fall? Impact surface?



## **Injury Data needed for:**





Injury Data: Enable assessment of the health burden of injury at <u>regional</u>, <u>national and</u> <u>EU-level</u>

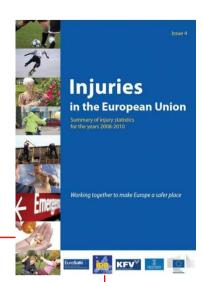
**Information about risks:** Identify risks related to specific age-groups, activities, settings or environments, **products** and responsible policy or legal domains

**Priorities and target groups:** Facilitate decision making on priority issues and target groups to address

**Prevention Actions:** Identify the proper mix of prevention measures to tackle the actual risk factors and target audiences (complementary strategies)

**Evaluation:** to measure whether the targets of prevention policies and actions are being met

# **Injury Data needed for:**



- Public awareness
- Transparent responsibilities → Multi-sector strategies
- Effective standards → Minimum requirements for acceptable risk
- Safety by design → Effective standards and good practise
- Smart enforcement
- Evidence based investments
- Evaluation ——— Dynamic process

**Risk Management** 

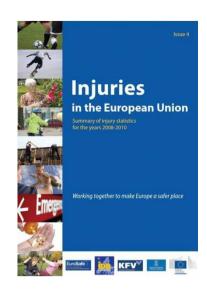


# Injury Data: a health sector priority

"Health sector plays key role in injury prevention as:

- The Health sector mandate includes preventing and responding to all major health threats and causes of mortality and morbidity including injury;
- A susbstancial proportion of direct costs related to injury is absorbed by the health sector

The Health sector is uniquely positioned to collect data, analyse risk factors and to generate multi-sector prevention efforts accross a range of sectors"

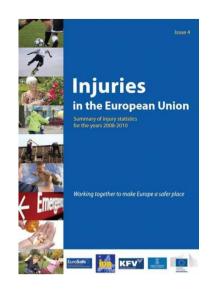




### What would it cost?

- Direct medical cost in EU due to injuries:
   78 billion € p/y, i.e. 150 € per EU-citizen
- Full IDB-system:5 euro cent (0,05 €) per EU-citizen
- ROI: a multiple of investment









#### What needs to be done?

- pan-European IDB-system
- Funded by MSs & EU
- Binding arrangements for all countries to provide ED-based injury data
- Accessible to all stakeholders
- Continued EU-level exchange of vital injury data from mid-2014 onwards



#### **Success** depends on a strong commitment

- from EU-institutions and
- from national authorities to take leadership into this process and to take ownership of a national injury data system



# For standards development will this be enough? How much will it tell us about the products involved / causing the injury?

#### Emerging hazards / New products

- -Yes, enough as a start to identify the need for a new standard or a new requirement
- Further research on the product or situation may be necessary

#### •Existing standards:

•One or few serious case(s) related to equipment may be enough to trigger revision of requirements

#### E.g. EN1176

- Stability of one post equipment: inspection and maintenance
- •Nest / basket swings suspension: amendment





## E.g. Nest / basket swings suspension

- •EN1176-2 only requires one suspension point for Type 1 swings;
- •1 accident in UK where the suspension broke
- Seat collapsed and a few children were injured
- •Proposed amendment: type 1 swing seats for several users will need a secondary means of

supporting happens

the seat like it already with type 3 swings











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E.g. EN1176

- Stability of one post equipment: inspection and maintenance
- Nest / basket swings suspension: amendment
- •Other cases, injury data does not give enough information on the involved products and risk reduction through standardization may be difficult to implement E.g.
- Arm fractures on Playgrounds





## **Arm fractures on playgrounds**

- Many reports on arm fractures from falls on playgrounds
- -Few information about severity of injury related to surface or fall height
- Some public health researchers call for lowering fall height to 1,5 m (currently it's 3m). This would take away the function in many pieces of equipment and the challenge and opportunities that children need to play.
- EN1176-1 and EN1177 impact attenuatting surfacing is due to protect against head injuries (HIC test)
- How does it perform to protect long bones? HIC test doesn't seem to be enough
- More data needed in order to change EN1177: type of injury, type of fall, height of fall, type of material, compliance to EN1177
- After the accident: Inspection on site by independent expert is needed: Critical fall height of surface at the time of fall and injury: depending on weather conditions, how many days have passed...
- Specific research needed: IDB and ED-based data not enough



# Playgrounds: Risk of injury related to the product can be due to:

#### Non compliance with standards:

- -Design of the equipment prototype test house conformity assessment
- -Production quality control
- -Installation instructions from manufacturer, experience of installer
- -Site layout dimensions of safety areas, installation
- -Post installation inspection previous to use
- -Equipment OK, impact area not OK or Impact attenuatting surface not compliant
- -No routine, operational inspections manufacturer instructions
- -Insufficient or lack of maintenance manufacturer instructions
- -Safety management system not in place
- -Enforcement, social and cultural factors
- -Expertise and competence of all involved: designers, producers, builders, inspectors,...

#### **Compliance with standards:**

- -Risk Assessment
- -Weather conditions
- -Number of users at the time of accident
- -Children / users: natural behaviour, exploring the equipment, abilities and competence, clothes and shoes;
- -Supervision

#### **Combination of various factors**

