Confidence in knowledge

For a knowledge institute such as RIVM, reliability is absolutely essential. Society must be able to trust us; people must be confident that whatever we say is indeed so. Our independent position is crucial in this regard. It confers on us the right and obligation to provide correct, scientific answers to the questions posed to us. It forms the basis of high-quality scientific products which serve a clear societal purpose. After all, the topics with which we are engaged affect everyone.

This report covers 2010, a year which saw a number of threats to public health and to the environment. A volcanic eruption in Iceland cast a cloud of ash over much of Europe. There was an outbreak of the infectious disease Q fever in the Netherlands. An increase in the prevalence of multiresistant bacteria was yet again reported. The ability to quantify, interpret and explain such risks demands considerable knowledge and expertise, as well as close cooperation with other important parties.

RIVM is involved in complex public matters and performs its tasks by serving professionals and public alike. We shall continue to seek ways of addressing the exact requirements of our target groups, such as making greater use of the social media. Knowledge is our greatest asset. RIVM employs committed scientists who devote themselves to the organisation’s primary task: ensuring that knowledge on health and the environment is available to society at large. This is a very important task which we gladly take upon ourselves as an engaged, independent and expert organisation. We continue to enjoy our work, even though the government-wide reassignment of responsibilities has forced us to make certain choices with regard to the precise nature of our tasks. I have every confidence in our knowledge and in the future.

Prof. André van der Zande
Director-General, RIVM
Independent knowledge and research institute

The main commissioning bodies of RIVM are the Ministry of Health, Welfare and Sport, the Ministry of Economic Affairs, Agriculture and Innovation, the Ministry of Infrastructure and the Environment, and the Ministry of Social Affairs and Employment. The Institute also undertakes work for the Ministry of Defence and other ministries, departments and authorities, including inspectorates and international organisations like the European Union and the United Nations.

RIVM is committed to being a reliable partner for the authorities and professionals. However, our commissioning bodies have no influence over the arrangement and results of our work. The Institute has an independent scientific position regulated under the RIVM Act. Scientific independence is an absolute precondition for RIVM, both in the performance of its tasks and in its considerations on whether to enter into strategic knowledge alliances. RIVM guarantees that there will be no conflicts of interest. RIVM may provide to third parties the available knowledge and information independently of clients. The Scientific Supervisory Committee monitors the scientific quality of the Institute. The Committee consists of a number of highly respected scientists. A summary of the annual report of the Scientific Supervisory Committee can be found on page 26.

Profile

The National Institute for Public Health and the Environment (RIVM) is a specialised Dutch government agency. RIVM is the premier expertise and orchestration centre in its field and its remit is to modernise, gather, generate and integrate knowledge and make it usable in the public domain. By performing these tasks RIVM contributes sustainably to promoting the health of the population and the environment by providing protection against health risks and environmental damage.

We serve the public interest by:
- acting with integrity, using specialised knowledge of health and the environment;
- identifying, evaluating and tackling risks together with our partners;
- sharing knowledge with national and international authorities;
- contributing to public health and environmental innovations.

RIVM:
- develops, integrates and maintains knowledge and expertise in association with partners and learns from institutes and authorities in other countries and from the business community;
- conducts research aimed at supporting policy-making and overseeing public health and the environment;
- works on contract but remains scientifically independent;
- makes its knowledge available and usable for clients and other users in the Netherlands and other countries;
- performs statutory duties;
- identifies and reports trends in public health and the environment;
- acts with knowledge, resources and manpower during disasters;
- orchestrates prevention, intervention, after-care and knowledge;
- facilitates and coordinates networks of professionals and operational organisations;
- carries out temporary tasks that can subsequently be taken over by others.
Improved communication on HPV vaccination

RIVM has improved its communication on HPV vaccination against cervical cancer. To create better contacts with the target group, a weekly chat surgery was held as part of the second round of public information in 2010. Video clips featuring girls, parents and experts on a special website dedicated to HPV vaccination has brought the information campaign more into line with the public.

A strong anti-vaccination lobby in 2009 resulted in a lower response than expected. Public information on HPV vaccination was too much in one direction in that year and was often by traditional means of communication. So in 2010 RIVM sought a dialogue with girls and their parents. The objective was to let girls and their parents jointly take an informed decision based on the correct scientific information as to whether or not to be vaccinated against cervical cancer.

Although the primary goal of the new campaign was not to increase the degree of vaccination, the figure did go up by 5%. The degree of vaccination against HPV is expected to rise gradually.

Major differences in healthcare quality

Access to healthcare in the Netherlands remains good. Services are nearby and accessible. Few people decide against visiting a doctor on account of the cost. However, the differences between care providers are considerable, both in terms of price and in terms of quality. This conclusion was drawn by the authors of Healthcare Performance Report 2010.

Just like the 2008 edition, the Healthcare Performance Report 2010 shows that there is room for improvement in harmonisation and coordination between care providers. Four out of every ten rheumatism patients, for example, have to repeat the same story to ever-changing physicians and nurses. The Healthcare Performance Report uses 125 indicators to define the accessibility, quality and costs of healthcare in the Netherlands. RIVM has been publishing the document every two years since 2006.

Projects and research

Resistant bacteria among people and animals

Various reports circulated in 2010 about the emergence of resistant bacteria in Europe. They included a report from the United Kingdom in August about the emergence of the NDM-1 enzyme created, for example, by the E. coli bacterium in patients who were treated in or travelled through India, Pakistan and Bangladesh. Bacteria with this enzyme are resistant to most types of antibiotics, thus making it difficult or impossible to treat serious infections. Two persons in the Netherlands were found to have a bacterium with NDM-1 enzyme in 2010. Additionally, ESBL-producing bacteria have been found in raw chicken meat in Dutch shops. ESBLs are enzymes capable of rendering ineffective an important group of antibiotics, penicillin and cephalosporin. The practical consequence of resistance caused by ESBL production is that these antibiotics can no longer be used for empiric treatment.

RIVM emphasised the existing recommendations for adequately heating the meat and maintaining good kitchen hygiene. With the current knowledge, RIVM saw no reason to advise against eating chicken meat, nor to recommend withdrawing chicken from sale.
REACH: towards safe use of chemical substances
By year-end 2010 the business community had submitted for about 4,300 chemical substances a total of some 25,000 registrations (i.e. dossiers about safety risks for people and the environment of specific usages of a chemical substance). The REACH bureau of RIVM supported the European Chemicals Agency (ECHA) and the Dutch government in this process. RIVM evaluated draft decisions in which ECHA checks the quality of registrations. RIVM further prepared the Dutch proposal for imposing stringent restrictions on the use of a certain hazardous substance and imposing market restrictions on another hazardous substance.

Sweet tastes tempt young people towards earlier and more alcohol consumption
The sweet tastes of some alcoholic drinks lower the threshold for young people to drink alcohol sooner and in larger quantities. The taste ingredients of these drinks lead to taste recognition and appreciation reactions in the brain and this can suppress the aversion to alcohol. This finding emerged from research conducted by RIVM in 2010. In drinks popular among young people (with alcohol percentages of up to 15%), the quantity of sugar per litre was found to be similar to that of normal fruit juices and soft drinks. As young people generally have to get used to the bitter taste of alcohol, the familiar tastes of soft drinks provide a stimulus to start drinking these alcoholic drinks more easily.

Lower number of Q fever cases in 2010
There was a spectacular reduction in 2010 in the number of newly notified human Q fever cases. The culling of dairy goats and dairy sheep from December 2009 to July 2010 and the vaccination of goats and sheep appear to have been effective measures. Whereas 2,354 cases of illness were reported in 2009, the figure in 2010 was 506. Unlike previous years, there was no peak in the notifications after the lambing season. Nevertheless, the number of reports in 2010 was still considerably higher than what was considered ‘very high’ in 2007. Most reports again came from the southern provinces of the Netherlands. RIVM conducted research in 2010 into the spread of the Q fever bacterium, that can cause such complaints as fever, severe headache and pneumonia. Most people contract Q fever by breathing air that contains the bacterium. Particularly during the lambing periods of infected goats and sheep, people can inhale contaminated particles.
Icelandic ash cloud drifts across Western Europe

Volcanic eruptions in Iceland caused high-altitude ash clouds to drift across Western Europe in April. Readings from the 50 measurement stations of RIVM’s national air quality measurement network were used to assess the health risks of the ash cloud for the Netherlands. The network’s measurements of particulate matter and sulphur dioxide revealed only occasional slightly increased values possibly caused by the volcano. Subsequently extra rainwater analyses were performed to identify any increased or changed precipitation patterns. Slight increases were found in the precipitation of sulphate and fluoride. However, the increases were so slight that it was not necessary to take extra measures.

Cosmetics complaints website receives more than one thousand reports

On the www.cosmeticaclachten.nl website of RIVM, more than 1,000 complaints were made in 2010 that might have resulted from the use of cosmetics. The most frequent complaints concern redness and itching of the skin. Most complaints occur on or around the eyelids and in the face. The most frequently mentioned product categories are skin care products, hair care products and make-up. A relatively high number of complaints about sun care products have also been received. Consumers are able to report online any skin complaints and other hypersensitivity reactions that occur after using cosmetics. The website www.cosmeticaclachten.nl is part of a three-year study. The study will be evaluated in summer 2011.

Different approach to ‘Measuring the Netherlands’

‘Measuring the Netherlands’ is a national survey that examines the lifestyle and health of the Dutch population. It looks at factors such as overweight, increased cholesterol, high blood pressure and diabetes. Because response rates used to be quite low, in 2010 the researchers adopted an intensified recruitment method for the last two participating towns, Amersfoort and Alkmaar. Major changes were that non-respondents were visited at home to invite them to participate, younger people (aged 18-29) were no longer included and the compensation per respondent was increased from 10 to 50 euros. It is proving increasingly difficult to recruit people for a survey of this kind. The 2009 response rate was roughly 30%; with the new intensive recruitment method the response rate was approximately 45%. During 2009-2010 around 14,000 Dutch people in total were invited to take part, distributed across seven municipalities. Earlier surveys were conducted in Tilburg, Oudewater, Groningen, Haarlemmermeer and Vlaardingen. The final participants were examined in December 2010. Data processing is in full swing and the first results will be presented around summer 2011.
Risks posed by nanotechnology

Nanotechnology is considered a pioneering technology. Manufactured free and non-degradable nano particles can adversely affect people and the environment, however. Internationally, governments are making coordinated investments in gathering knowledge of these harmful effects as quickly as possible. RIVM is performing a pivotal function for the Netherlands in this effort. RIVM’s Knowledge and Information Centre for Nanotechnology Risks is supporting central government and informing professionals. In 2010, RIVM submitted proposals for establishing an accepted definition of nano materials. RIVM also had tests performed on food and consumer products already on sale in the market. In cooperation with the Netherlands Organization for Applied Scientific Research (TNO), RIVM performed inhalation studies. Temporary reference values were derived for the most commonly used nano materials so as to limit exposure to them at the workplace.

Fifth Public Health Status and Forecast Report

It was a milestone year for the Public Health Status and Forecast Report in 2010. In this fifth edition, dubbed ‘Towards better health’, RIVM concluded that the Netherlands needs to continue investing in the health of its citizens. While public health is in good shape, it is not yet good enough by a long way. There has been a significant increase in the life expectancy of the Dutch in recent years, for example, but health gaps between rich and poor remain large and persistent. Moreover, everybody will be badly needed in an ageing economy. Long-term health policy requires concerted action and it needs to be focused more on reducing physical and mental limitations. But prevention has potential and, based on the vision of this latest Public Health Status and Forecast Report, it is possible to take the following step – ‘Towards better health’.

Increase in Lyme disease

Lyme disease has been increasing in the Netherlands since 1994. This observation emerged from a national survey that RIVM published in 2010. In 2009, general practitioners in the Netherlands observed in approximately 22,000 consulting patients a red ring-shaped skin rash, the first sign of Lyme disease. This represented an increase of 5,000 people compared with 2005. A tick bite is capable of transmitting a bacterium that causes Lyme disease. Together with the increase in clinical Lyme diagnosis, there was also a rising trend in the number of individuals who consulted their GP for a tick bite. For some years now the Week of the Tick has been held late March at the start of the tick season. The purpose of this themed week is to prevent tick bites and thereby Lyme disease by providing targeted public guidance. The Week of the Tick in 2010 was focused mainly on professionals like forest rangers who work in green environments.
RIVM and Utrecht University cooperate on alternatives to tests on animals

The National Knowledge Centre for Alternatives to Animal Testing (NKCA) was established at RIVM at year-end 2010. After more than a year of preparations, its official organisational embedding was a fact. The centre coordinates the sharing of knowledge of alternatives to animal tests in the Netherlands. Better cooperation should lead to innovative methods being used sooner, enabling experimental research involving animals increasingly to be replaced, reduced and refined (the 3Rs).

Gains are achievable in various fields by improving the throughput of knowledge of the 3Rs. This could include research into cancer and other diseases, into the development and quality monitoring of medicines – including serums and vaccines – and modernisation of the risk evaluation of chemical substances.

NKCA has a statutory status and is a cooperative venture of RIVM and the Faculty of Animal Medicine of the Utrecht University.

Advice on noise nuisance caused by JSF and AWACS

At the request of the Friesland provincial government and the Ministry of Defence, RIVM gave a second opinion on noise nuisance caused by the new JSF aircraft. The main conclusion was that based on current insights it was possible, within the present noise zone of the Leeuwarden airbase, to station the JSF there. However, there is still some uncertainty about the precise noise load. A good noise measurement programme will provide greater clarity and may safeguard flights within the noise zone.

RIVM has earlier submitted advice on the noise nuisance among local residents at Onderbanken, close to the NATO airbase at Geilenkirchen. This occurred in response to serious concerns among the residents. RIVM launched a follow-up study in 2010 into the noise caused by AWACS aircraft based on ten scenarios. This showed that the biggest noise nuisance reduction, i.e. 25%, would be achieved with a scenario where there are more aircraft movements in the northerly direction (‘northern route’).
Possible health risks at two companies

In the year under review RIVM conducted investigations at two companies where local residents might have been exposed to health risks.

It was discovered in 2009 that the Sterigenics company at Zoetermeer had emitted too much ethylene oxide in the previous years. Ethylene oxide is a carcinogenic substance used by the company to sterilise medical articles. This resulted in considerable anger and concern among local residents and members of the municipal council. The upshot was that the South-Holland West municipal health department asked RIVM to assess the health risks.

The initial investigation revealed that approximately 2000 local residents and Sterigenics employees at Zoetermeer had incurred a slight extra risk of cancer equal to 1 or 2 per 100,000 in the 2006-2008 period. The investigation into the preceding period will shortly be completed.

RIVM was also asked to provide an insight into substances emitted by the Thermphos company at Vlissingen and their effects on health. In recent years the Zeeland provincial government has been receiving more and more complaints from people who live or work in the Sloe area of East Vlissingen. The complaints concern mainly odour and irritation of the eyes and mucous membranes, but there are also concerns about lasting health effects. The complaints are attributed to emissions by Thermphos, a manufacturer of phosphorus and phosphorus compounds. Among other things RIVM produced dispersion calculations for the substances emitted by the factory. The results of the calculations did not correspond with the observations of the local residents. In response to this outcome the provincial government asked RIVM to advise it on all possibilities for further investigation of the influence of Thermphos on health. A follow-up investigation will start shortly.

National breast cancer screening reaches 20 years

National breast cancer screening in the Netherlands marked its 20th anniversary in 2010. As part of this milestone RIVM and the five regional screening organisations arranged an international symposium. Participants from various European countries met to exchange knowledge of breast cancer screening. Screening for breast cancer in the Netherlands is remarkable for the high turnout, with 83% of invited women in the 50-75 age bracket being checked once every two years. The high response is due in part to the 66 mostly mobile screening centres in the participant’s local area or town. Remco Reij, programme coordinator for national breast cancer screening, says: ‘Thanks to this screening we have been able to save the lives of about fourteen thousand women. It is estimated that deaths due to breast cancer have been reduced by one-quarter to one-third.’
Exotic mosquitoes pose risk of new infectious diseases in the Netherlands

Exotic mosquitoes were found at the end of July in the towns of Heijningen, Oosterhout and Oss in the province of Brabant. They were the Asian tiger mosquito, the rock hole mosquito and the yellow fever mosquito. The found mosquitoes can be carriers of viruses that cause serious diseases like yellow fever, dengue, West Nile fever and chikungunya.

RIVM’s Centre of Infectious Diseases Control coordinates the prevention and control of infectious diseases and plays a role in controlling these mosquitoes. Exotic mosquito species were found and tackled in 2010 at a total of six tyre-trading companies in the provinces of Brabant, Limburg and Utrecht. Once settled, these exotic mosquitoes are virtually impossible to eradicate.

Health close to home

RIVM supports municipalities in making their health policy, with the aim of healthier behaviour among their residents and healthier surroundings. In 2010 RIVM digitally published its Healthy Municipality Guide as guidance for everybody involved in developing and implementing municipal health policy. Every Dutch municipality is responsible for producing its own municipal health policy memorandum. This is a document that spells out what the municipality is doing to promote the health of its residents. Additionally, RIVM issued its Healthy School Guide for primary schools. This practical document was written for professionals who assist schools in health-promoting activities. These might be policy measures, but also education or alterations to the surroundings. Examples of the latter are schoolyards conducive to physical exercise and classrooms with sufficient fresh air.
Cooperation arrangements

Nationally and internationally, RIVM has numerous cooperation partners. Within the Netherlands, RIVM collaborates with research institutes like the Netherlands Organization for Applied Scientific Research (TNO), the Netherlands Institute for Health Services Research (NIVEL), the Institute of Food Safety (RIKILT), the Royal Netherlands Meteorological Institute (KNMI), the Water Department of the Directorate-General for Public Works and Water Management (RWS), Deltares Institute for Delta Technology, Agentschap NL (an agency of the Ministry of Economic Affairs, Agriculture and Innovation) and several universities. Contacts with planning agencies are equally important. RIVM also maintains close functional ties with municipalities, provinces and municipal health authorities.

Internationally, RIVM is a member of various networks that support the European Commission. RIVM also cooperates with institutes like the European Centre for Disease Prevention and Control (ECDC) in Stockholm, the European Food Safety Authority (EFSA) in Parma, the Organisation for Economic Co-operation and Development (OECD) in Paris, the European Medicines Agency in London (EMA), the European Directorate for the Quality of Medicines (EDQM) in Strasbourg, the European Environment Agency (EEA) in Copenhagen and the European Chemical Agency (ECHA) in Helsinki. RIVM further maintains close contacts with the World Health Organization (WHO) and the World Bank.

Director-General: Prof. André van der Zande
Deputy Director-General: Drs Niek Parlevliet
Director of the Centre for Infectious Disease Control: Prof. Roel Coutinho
Director of the Public Health and Health Services Division: Dr Moniek Pieters
Acting Director of the Nutrition, Medicines and Consumer Safety Division: Dr Moniek Pieters
Director of the Environment and Safety Division: Dr Reinout Woittiez
Financial statements 2010

**Balance sheet at 31 December 2010 (all amounts in EUR x 1,000)**

<table>
<thead>
<tr>
<th>Assets</th>
<th>31-12-2010</th>
<th>31-12-2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intangible fixed assets</td>
<td>826</td>
<td>1,354</td>
</tr>
<tr>
<td>Property, plant and equipment</td>
<td>8,936</td>
<td>8,171</td>
</tr>
<tr>
<td>- land and buildings</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>- installations</td>
<td>2,433</td>
<td>2,000</td>
</tr>
<tr>
<td>- other fixed assets</td>
<td>6,503</td>
<td>6,171</td>
</tr>
<tr>
<td>Inventory</td>
<td>17,200</td>
<td>20,240</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>9,997</td>
<td>7,822</td>
</tr>
<tr>
<td>Outstanding items</td>
<td>55,354</td>
<td>54,464</td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>28,943</td>
<td>59,880</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td><strong>121,256</strong></td>
<td><strong>151,931</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities</th>
<th>31-12-2010</th>
<th>31-12-2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equity</td>
<td>4,571</td>
<td>8,156</td>
</tr>
<tr>
<td>- operating reserve</td>
<td>7,690</td>
<td>8,685</td>
</tr>
<tr>
<td>- reserves required by law</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>- undistributed profits</td>
<td>3,119-</td>
<td>529-</td>
</tr>
<tr>
<td>Loans taken out with the Ministry of Finance</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Provisions</td>
<td>16,332</td>
<td>15,087</td>
</tr>
<tr>
<td>Accounts payable</td>
<td>8,863</td>
<td>8,312</td>
</tr>
<tr>
<td>Payable</td>
<td>91,490</td>
<td>112,220</td>
</tr>
<tr>
<td><strong>Total liabilities</strong></td>
<td><strong>121,256</strong></td>
<td><strong>151,931</strong></td>
</tr>
</tbody>
</table>

**Itemised statement of income and expenditure over 2010**

(all amounts in EUR x 1,000)

<table>
<thead>
<tr>
<th>Itemisation</th>
<th>A Amount originally budgeted</th>
<th>B Actual amount</th>
<th>C = B - A Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Income</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Revenues from Ministry of Health, Welfare and Sport (owner)</td>
<td>13,144</td>
<td>20,886</td>
<td>7,742</td>
</tr>
<tr>
<td>Revenues from Ministry of Health, Welfare and Sport (commissioning body)</td>
<td>104,296</td>
<td>110,428</td>
<td>6,132</td>
</tr>
<tr>
<td>Revenues from Ministry of Infrastructure and the Environment</td>
<td>48,686</td>
<td>47,248</td>
<td>1,438-</td>
</tr>
<tr>
<td>Revenues from Ministry of Economic Affairs, Agriculture and Innovation</td>
<td>650</td>
<td>4,699</td>
<td>4,049</td>
</tr>
<tr>
<td>Revenues from other departments</td>
<td>2,500</td>
<td>7,403</td>
<td>4,903</td>
</tr>
<tr>
<td>Revenues from third parties</td>
<td>170,205</td>
<td>164,959</td>
<td>5,246-</td>
</tr>
<tr>
<td>Interest received</td>
<td>1,050</td>
<td>394</td>
<td>656-</td>
</tr>
<tr>
<td>Released from provisions</td>
<td>-</td>
<td>965</td>
<td>965</td>
</tr>
<tr>
<td>Exceptional revenues</td>
<td>-</td>
<td>2,196</td>
<td>2,196</td>
</tr>
<tr>
<td><strong>Total income</strong></td>
<td><strong>340,531</strong></td>
<td><strong>359,179</strong></td>
<td><strong>18,648</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Expenditure</strong></th>
<th>31-12-2010</th>
<th>31-12-2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating expenses</td>
<td>335,355</td>
<td>353,085</td>
</tr>
<tr>
<td>Interest paid</td>
<td>393</td>
<td>381</td>
</tr>
<tr>
<td>Depreciation</td>
<td>4,783</td>
<td>4,670</td>
</tr>
<tr>
<td>Added to provisions</td>
<td>-</td>
<td>4,162</td>
</tr>
<tr>
<td><strong>Total expenditure</strong></td>
<td><strong>340,531</strong></td>
<td><strong>362,298</strong></td>
</tr>
<tr>
<td><strong>Balance</strong></td>
<td>-</td>
<td>3,119-</td>
</tr>
</tbody>
</table>
Notes to the financial statements

The itemised statement shows that income and expenditure were significantly higher than budgeted. This is largely due to the prescribed system for preparing the budget, which allows inclusion only of hard undertakings given by primary clients. The figures further include income and expenditure for contracts awarded in the course of the fiscal year. The balance of income and expenditure in 2010 was a loss of €3.1 million. The main causes are the friction costs for the various outplacements, a negative operating result of the former vaccination records and a provision created for loss-making EU projects.

Staff

At year-end 2010, RIVM employed 1,570 persons, or 1,349 FTEs. The FTEs include 49% women. RIVM has 285 female employees at or above university level (= 36% of the entire group). Among male employees, 46% operate at or above university level. RIVM employed 23 professors in 2010. The average age of the RIVM workforce is 46 and the average length of service is 12 years.

Measured across the full year, the sick leave rate was 3.6% in 2010. This makes the absence rate 0.6% lower than the maximum standard of 4.2% set for RIVM. RIVM as a whole received a score of 7.2 in the employee satisfaction survey.

Highlights from the Annual Environmental Report

RIVM shares its site with the Netherlands Vaccine Institute (NVI) and the Netherlands Environmental Assessment Agency (PBL). The environmental licence is issued for the entire site, with various environmental facilities being shared, e.g. wastewater and waste collection facilities. Consequently, the Annual Environmental Report provides a picture of RIVM, NVI, and PBL. RIVM obtained a combined new permit (General Permit) under the Environmental Management Act and the Pollution of Surface Waters Act in 2008. The permit includes a Company Environmental Plan legally valid for 2007-2010. The Plan includes various improvements such as soil protection measures, a central system for registering chemicals, and sustainable procurement. Most improvements measures have already been taken, some will be continued in the years to come and have been included in the new Company Environmental Plan for 2011-2014, which was approved at the end of 2010.

Compared with 2009, the environmental performance of RIVM, NVI and PBL in 2010 was as follows:
- Water consumption decreased by 6% to 117,700 m³ due to a decrease of water consumption in the sterilisation process.
- The quantity of pollution units in waste water increased from 690 to 707 as a result of more discharges of organic substances.
- The total quantity of waste decreased by 4% to 765 tons. Waste includes waste paper, industrial waste, and laboratory waste.

RIVM, NVI and PBL spent approximately €3 million on environmental, energy and water costs in 2010 (including energy consumption, waste processing and levies for waste water).
Scientific Supervisory Committee

The task of the Scientific Supervisory Committee is to monitor the scientific quality of RIVM. It does so by maintaining supervision over and advising on the level and quality of performed research and the quality system of RIVM. Based on its findings, the Committee issues a statement each year regarding the quality of research and the quality system of RIVM. The Committee reports its opinion to the Institute’s owner, the Deputy Secretary-General of the Ministry of Health, Welfare and Sport.

The Committee devoted special attention in 2010 to the commotion surrounding Q fever. The Committee obtained comprehensive information about this subject.

As in previous years, the Committee was informed extensively about the consequences of discharging the responsibilities assigned to RIVM by central government. The Institute has opted to continue its work across the full spectrum, but to perform less in-house research and to undertake more orchestration. As a result, the research base within the Institute will become narrower and the Institute will be more dependent upon the results of research conducted elsewhere. This is a cause of concern for the Committee from the point of view of scientific quality, also in 2010. Strategic talks are in progress with the owner of RIVM and the various ministries that are its clients. The Committee took note of the intensive programme of change launched by the acting DG in 2010 for the reorganisation of some operational entities. The Committee will continue to keep a watch on developments and their potential influence on scientific quality, also as regards international activities.

The year under review was also dominated by the choice of Strategic RIVM Research (SOR) projects that may start in 2011 in the framework of a new SOR round for 2011-2014. The Committee welcomes its early involvement. In response to the SOR 2009 annual report, the Committee feels a greater need for better substantive information (including progress information) and information about the choices made. The Committee would also like extra attention to be given to the communicative attractiveness of the SOR annual report.

There were two scientific audits in 2010, i.e. the VGC Scientific Audit for the Evaluation of Medicines and Medical Products and the Scientific Audit for the Centre of Infectious Diseases Control. The Committee is satisfied with the thoroughness with which the audits were conducted.

At the time of the VGC Scientific Audit for the Evaluation of Medicines and Medical Products, a reorganisation of duties and staffing was under preparation by RIVM and the Agency of the Medicines Evaluation Board (aCBG). RIVM has been instructed to design a research programme in consultation with its partners in the chain. The Committee is concerned about this development. The Committee is of the opinion that RIVM’s knowledge and expertise of pharmaceutical analyses, toxicology and biologicals must also be assured for the years ahead by means of targeted investments. The Committee will maintain a careful and critical watch on this research programme in 2011.
This annual report is also available in Dutch.

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Colophon

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