



European Sectoral Social Dialogue in the Hospital Sector HOSPEEM-EPSU Joint Work Programme 2014-2016

Adopted at SSDC HS - 6 March 2014

1. Introduction:

Setting the scene:

Healthcare is one of the most significant sectors in the EU economy employing directly around one in every ten workers in the EU. The healthcare and hospital sector is also one of the sectors with the greatest potential for job creation in Europe¹ due to different factors, not least the increasing demand for healthcare services due to demographic change.

However, the sector faces major challenges that are multifaceted and complex and that stem from the combined effect of different factors, in particular:

- the health workforce itself is ageing with insufficient new recruits to replace those that are retiring,
- problems of retention due to demanding working conditions, limited career opportunities and non competitive remuneration in some health occupations in a number of countries,
- demand for new or regularly updated skills and competences due to an increased use of new technologies and new care patterns to cope with chronic conditions of a growing number elderly and,
- patients expecting and demanding higher quality service, more involvement in decision making about the health services that they get and a greater emphasis on preventative care.

These factors need to be matched with the pressure put on healthcare budgets stemming from the deep Europe-wide economic crisis faced by Members States, with a direct impact on the health systems, the health workforce and availability of health service.

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¹ In 2010 there were around 17, 1 million jobs in the healthcare sector which accounted for 8% of all jobs in the EU-27. Data from Eurostat (2011) NACE Rev.2 categories 86 & 87

In this setting, the healthcare systems are under strain to find innovative solutions both in technology and processes, implement a more cost effective management to provide high quality healthcare, and undertake reforms in the way in which healthcare systems are organised.

Furthermore, the 2014 European Year for Reconciling Work and Family Life will constitute a good opportunity for social partners to focus on innovative solutions that can help balance the demands from both professional and private setting of healthcare staff.

Our approach/role:

Aware of these challenges, HOSPEEM and EPSU are committed to contribute to tackle the problems affecting the health sector, in particular in view of the extent to which they affect the health workforce, by making active and effective use of the Social Dialogue through:

- agreeing within the HOSPEEM-EPSU sectoral social dialogue committee for the hospital sector on actions and agreements, making use of the instruments negotiated² and building upon the concrete work done so far;
- cooperating with the European institutions and contributing to EU policy making through a bottom-up approach, by which we aim to feed European policies with the practical knowledge of employers and employees³;
- influencing and shaping European debates on employment issues in the healthcare sector.

As European Sectoral Social Partners, HOSPEEM and EPSU are engaged in a wide range of activities and committed to make of this work programme 2013/14-2015 a key pillar of their joint agenda. It will constitute the framework in which the upcoming activities of the Sectoral European Social Dialogue for the healthcare and hospital sector will be developed and shaped. This work-programme has to be considered as a living document identifying the major areas of cooperation on which we intend to work together in the coming years. Nevertheless HOSPEEM and EPSU may decide to update it in the light of developments regarding relevant policy initiatives at EU level or projects that HOSPEEM and EPSU may engage in.

The deliverables produced within the framework of Social Dialogue can take different formats (report; documentation from seminar/technical workshop/conference; guidelines; recommendations; common declaration; framework of actions; framework agreement; etc.) in the context of different types of activities, such as exchange of experience and good practice; seminar/technical workshop/conference; project; negotiations.⁴

³ HOSPEEM and EPSU are currently involved in the Action Plan for the EU Health Workforce and the Joint Action on European Health Workforce Planning and Forecasting with the status of "collaborating partners".

² Ex: HOSPEEM-EPSU Framework of Actions on Recruitment and Retention, 17 December 2010.

⁴ Communication from the Commission, Partnership for change in an enlarged Europe - Enhancing the contribution of European social dialogue (Annex 2), COM(2004) 557 final, 12 August 2004.

2. Our priorities

2.1 Priority areas:

- Occupational health and safety
- Recruitment and retention of healthcare workforce

2.2 Transversal priorities:

The planned activities and projects laid down in this document will be constantly complemented by the following transversal priorities which have guided the joint work of HOSPEEM and EPSU so far:

- Enhancing the impact of the activities undertaken in the context of the sectoral social dialogue committee for the hospital sector.
- Building up and strengthening the capacity of social partners in the sector across all Member States.
- Promoting an exchange of knowledge and experience in the field of healthcare, social and employment policy between social partners' organisations and their representatives. This comprises also maintaining an active working relationship with the relevant cross-sectoral social partners and complementing their work where suitable.
- Influencing policies at EU level by the monitoring and involvement in European consultations and legislative processes, both pro-active and re-active, where these would have an impact on the hospital sector, its financing, organisation, regulation and workforce, if appropriate and agreed.

Annex 1: Outcomes of the work programme 2011-2013

Joint HOSPEEM-EPSU Work Programme 2014-2016

THEMES	SUB-THEMES	OBJECTIVES	TIMELINE	DELIVERABLES*
Occupational health and	Follow-up to the project	Monitor the transposition and	By the end of	Yearly update on the implementation of
safety	"Promotion and Support of	impact that Directive	2014	Directive 2010/32/EU – for HOSPEEM and
	Implementation of Directive	2010/32/EU has on hospital		EPSU members and to be shared with the
	2010/32/EU on the prevention	staff in each member states.		EC, if appropriate.
	of sharps injuries in the hospital		By the end of	Mid-term evaluation (report) – for
	and health care sector"		2015	HOSPEEM and EPSU members and to be
			2013	shared with the EC, if appropriate.
	A sking and b solther a sing	Outline effective age	Do the and of	. , , ,
	Active and healthy ageing		By the end of 2013	Finalisation of Guidelines to address the
		management strategies, give	2013	challenges of an ageing workforce and
		guidance on key issues and give examples of existing good		mapping of good practice. N.B.: Guidelines and examples of good
		practice from across the		practice were signed at the PM 2013 SSDC
		European Union to keep staff		HS on 11.12.13
		productive and healthy		113 OH 11.12.13
	Third-party violence and	Monitor how the third-party	By the end of	Joint Implementation Report on the follow-
	harassment at work	violence agreement is	2013	up and implementation of the multi-
	marassment at work	followed-up and implemented	2013	sectoral guidelines to tackle work-related
		by HOSPEEM members and		third-party violence.
		EPSU affiliates and consider		N.B.: The report was adopted at the PM
		healthcare specific issues, also		2013 SSDC HS on 11.12.13
		based on the Joint		
		Implementation Report.		
	Occupational health and safety	Provide policy momentum for	By early 2014	Joint statement of HOSPEEM and EPSU on
	issues with regard to patient	a new EU health and safety in		the new EU Occupational Safety and Health
	safety and the quality of	the workplace strategy, with		Policy Framework and follow-up to it.
	services	particular focus on the		N.B.: The joint statement was adopted at
		challenges facing healthcare		the PM 2013 SSDC HS on 11.12.13
		workers and the healthcare		
		sector.		

THEMES	SUB-THEMES	OBJECTIVES	TIMELINE	DELIVERABLES*
	Identify how actions on occupational health and wellbeing contribute to improved health as well as retention within the healthcare sector	Keep staff both physically and mentally fit in their roles.	2014-2015	1) Identification of existing guidance/good practice by HOSPEEM members and EPSU affiliates on occupational health and safety concerning the topics tackling "psychosocial risks and stress at work" and "musculoskeletal disorders"; 2) Organisation of a technical seminar for the exchange of best practice i.e. regarding measures and risk assessment. On the basis of the outcomes resulting from it, evaluation of most effective follow-up and action in the context of this joint work-programme.
Recruitment and retention of healthcare workforce	Migration of healthcare workers within the EU Shortage of healthcare professionals/workers Follow-up to the Code of Conduct on Ethical Recruitment and Retention (2008) and to Framework of Actions (2010) ⁷	Develop concrete action to tackle staff shortages and qualification needs now and in the future.	2014	Joint HOSPEEM-EPSU inputs to influence the scope of the EC Action Plan for the EU Health Workforce and the Joint Action on European Health Workforce Planning and Forecasting (in particular by feeding joint contributions into Work Packages 4 and 6 of the Joint Action). Context: DG SANCO commissioned research and study on Effective Recruitment and Retention Strategies for Health Workers
	Traniework of Actions (2010)			Inputs from HOSPEEM and EPSU and their members on recruitment and retention practice and workforce planning

⁵ See EU-OSHA terminology: https://osha.europa.eu/en/topics/stress
⁶ See EU-OSHA terminology: https://osha.europa.eu/en/topics/msds

⁷ On this subject, HOSPEEM and EPSU will put a particular attention on cooperating with the World Health Organisation (WHO) with the aim of promoting the use of both the HOSPEEM-EPSU Code of Conduct on Ethical Recruitment and Retention (2008) and the WHO Global Code of Practice on the International Recruitment of Health Personnel (2010).

THEMES	SUB-THEMES	OBJECTIVES	TIMELINE	DELIVERABLES*
	Stating the importance of the role that Life-long Learning (LLL)/Continuing Professional Development (CPD) play in recruiting and retaining staff	Promote life-long learning (LLL)/Continuing Professional Development (CPD) for all healthcare staff by stimulating the creation of a learning environment in healthcare institutions both through formal and on-the-job training with the aim to improve and guarantee the quality of service. The precondition for this is a mutual commitment: for employers to ensure access to LLL/CPD to all healthcare staff and for health workers to actively engage in it.	2014-2015	strategies. 2) Involvement in drafting and assessing the criteria for success that will be produced to assess the effectiveness of the above practice and strategies. Action: Follow-up report on the use and implementation of the HOSPEEM-EPSU Framework of Actions on Recruitment and Retention (2010): Collating case studies/ model initiatives on issues mentioned in chapter 3 of the EPSU-HOSPEEM Framework of Actions "Recruitment and Retention", thereby feeding into the study mentioned above. Elaboration of a Common Statement on the importance of ensuring access to lifelong learning (LLL)/Continuing Professional Development (CPD) for all healthcare staff with the aim of improving the quality of service. This activity is intended to also support the implementation of the revised Professional Qualifications Directive.

THEMES	SUB-THEMES	OBJECTIVES	TIMELINE	DELIVERABLES*
	Employment and retention of	Identify the role that the social	2014-2016	Follow-up to the Framework of Actions on
	younger workers: The health	partners in the healthcare		Youth Employment signed by cross-
	care sector is an economic	sector can play, through EU		sectoral social partners by identifying
	sector with potential for future	initiatives or own activities, to		specific sectoral role and exchanging and
	employment growth. A lot is	provide solutions to the		collecting good practice on national
	being invested into the training	challenge of attracting and		initiatives aimed at creating opportunities
	of healthcare professionals and	retaining young (well-trained)		to tackle youth unemployment in the
	workers. In some countries, the	healthcare professionals and		healthcare sector.
	current situation of public	workers in their jobs.		Contribute to the implementation of the
	budgets often makes it			objectives and actions of the European
	problematic to offer good			Alliance for Apprenticeships.
	employment and career			
	prospects. Younger health			
	professionals/workers in several			
	EU Member States are facing			
	the risk of getting unemployed.			

Annex 1: European Sectoral Social Dialogue in the Hospital Sector Overview of outcomes of the work programme 2011-2013

The large majority of the thematic priorities agreed for the EPSU-HOSPEEM Work Programme 2011-2013 and of the projects listed there have been tackled and finalised between early 2011 and mid 2013. The two priorities that have not been directly covered are "Well-being of workforce" and "Diversity of workforce", even though some of the actions/activities carried out partially deal with it.

Thematic Priority	Activity	Planned timeline	Outcome	Actual timeline
Qualifications and skills	Exchange on priority issues and objectives for revision of Directive on the Recognition of Professional	Year: 2011 Months: 01-07	Regular update and discussion on priority issues and objectives for the revision of Directive 2005/36/EC within the HOSPEEM-EPSU Sectoral Social Dialogue Committee	2011 → 2013
	Qualifications 2005/36/EC and explore the possibility of joint HOSPEEM-EPSU contribution to the		HOSPEEM-EPSU Contribution to public consultation on the Directive on the Recognition of Professional Qualifications (2005/36/EC)	14-03-2011
	consultation		HOSPEEM-EPSU Response to the European Commission's Green Paper on reviewing the directive on the recognition of professional qualifications 2005/36/EC	20-09-2011
			HOSPEEM-EPSU Joint response on the proposal for a directive on the modernisation of the Directive 2005/36/EC on the recognition of professional qualifications	15-06-2012
	Collect and exchange good practice concerning the identification of skill needs (also related to technology/ICT/eHealth) and measures to address them; to be carried on		HOSPEEM-EPSU Joint participation in "Feasibility study on the establishment of a EU Sector Council on Employment & Skills for Nursing & Care Workforce" Presentation and discussion of project and work progress in three meetings of the SSDC HS in 2012	12-2011 → 12-2012

Thematic Priority	Activity	Planned timeline	Outcome	Actual timeline
	through 2011 and early 2012		Elaboration of criteria to assess deliverables and outcome of project, presented at SSDC HS of 10 December 2012	
Ageing workforce	Update of existing material (case studies and good practice and produce booklet)	Year: 2011 Months: 07-12	Technical Seminar "Managing the ageing workforce: challenges, opportunities and experiences"	27-04-2012
Well-being of workforce	Elaborate a HOSPEEM-EPSU agreement on the ageing health care work force; to be started in 2011 and continued in 2012 Identify effective solutions that exist and have been or are currently negotiated and jointly developed by social partners		Negotiations on "EPSU-HOSPEEM Guidelines and examples of good practice to address the challenges of an ageing workforce" and monitoring of EU initiatives on skills development and forecasting	12-2011 → 2013
Diversity of workforce	Collect and exchange good practice and assess policies and instruments	Year: 2012 Months: 07-12		

Follow up to documents adopted and implementation of agreements concluded between HOSPEEM and EPSU in the period 2008 to 2010:

Document	Activity/Deliverable	Planned timeline	Outcome	Actual timeline
EPSU-HOSPEEM	Collect information on	Year: 2011	Joint final report on the use and implementation of the	05-09-2012
Code of Conduct on	follow-up and		EPSU-HOSPEEM Code of Conduct	
Ethical Cross-border	implementation by	Months: 07-12	on Ethical Cross-Border Recruitment and Retention in	
Recruitment and	social partners to		the Hospital Sector	
Retention (2008)	prepare assessment			
	agreed upon for 2012			

Document	Activity/Deliverable	Planned timeline	Outcome	Actual timeline
	Explore to commission	Year: 2011/2012	Participation in EC Action Plan for the EU Health	09-2012 →
	a study to map		Workforce (participation in stakeholders working group	
	migration flows as	Months: 07-11/07-12	meetings, regular contacts with DG SANCO,	
	well as opportunities		involvement of DG SANCO representatives in	
	and challenges for		HOSPEEM-EPSU sectoral social dialogue working group	
	migrant workers, local		meetings)	
	health care workforce			
	and health care		Participation in Work-package 4 and 6 of Joint Action on	09-2012 →
	systems in receiving		European Health Wokrforce (HOSPEEM and EPSU are	
	and sending countries;		collaborating partners in this project, participation inn	
	focus is on putting		stakeholders working group meetings, regular contact	
	together, re-analysing		with DG SANCO, involvement of DG SANCO	
	and updating existing		representative in HOSPEEM-EPSU sectoral social	
	material; could		dialogue working group meetings	
	comprise enquiry to		Participation of DG SANCO in HOSPEEM-EPSU sectoral	Call for tenders
	affiliates		social dialogue working group meetings and exchange	published in April
			that resulted into the publication of the call for tenders	2013. Work to be
			"Study on Effective Recruitment and Retention	done in 2013/2014
			Strategies for Health Workers". According to the call for	
			proposals, the study should be carried out in close	
			cooperation with HOSPEEM and EPSU.	
Framework	Explore possibilities of	Year: 2011/2012	HOSPEEM-EPSU Joint project "Promotion and Support	$10-2012 \rightarrow 09-2013$
Agreement (2009)	setting up a project to		of Implementation of Directive 2010/32/EU on the	
and Directive	organise a series of	Months: 07-11/07-12	prevention of sharps injuries in the hospital and	
2010/32/EU on the	seminars in the sector		healthcare sector"	
prevention from	during 2012, co-			
sharp injuries in the	financed by DG EMPL			
hospital and health	(lead: EPSU)			
care sector (2010)				
Multi Sector	Participation in and	Year: 2011	Multi-sectoral project on the Implementation of the	2011
Guidelines to tackle	contribution to series		multi-sectoral guidance on third party violence and	
third party violence	of seminars	Months: 07-12	harassment related to work	

Document	Activity/Deliverable	Planned timeline	Outcome	Actual timeline
and harassment related to work (2010)			Gathering of information and drafting of DRAFT Report on the follow-up and implementation, based on a questionnaire addressed to EPSU and HOSPEEM affiliates (currently coordinated amongst the signatory parties; expected for 10/2013, to be discussed at the SSDC HS of 11 December 2013)	

Additional issues not included in the work programme:

Document Acti	tivity/Deliverable	Planned timeline	Outcome	Actual timeline
Workforce Planning and Fo	orecasting		Joint Statement of HOSPEEM and EPSU on the Action Plan for the EU Health Workforce	05/09/2012