

Presentation on survey findings for Greece, Malta and Cyprus

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Shortage of healthcare professionals contradicts the increasing demand for services

	EL	CY	MT
Hospital beds/100 000 inhabitants	421	340	449
Medical doctors/100 000 inhabitants	219	93	260
Nursing professionals and midwives/100 000 inhabitants		482	666
Healthcare expenditure (% GDP)	8,04	6,68	N/A

Source: Eurostat 2017 (MT/2018)

Similar interconnected challenges in all countries strengthen the need for EU level social dialogue:

- Shortage of professionals due to the cross-board mobility and low level of union density in the private sector in Cyprus;
- In Malta, social partners and government committed to addressing the increasing demand for the services and lack of staff
- Long-term trends in healthcare: ageing of the population, mass immigration; and the downgrading of the public health sector in Greece

Source: Eurofound 2011



Long-term challenges influenced the structure of the social partners

Cypriot division of social partners upon the line of private and public healthcare services and professions (doctor and nurses)

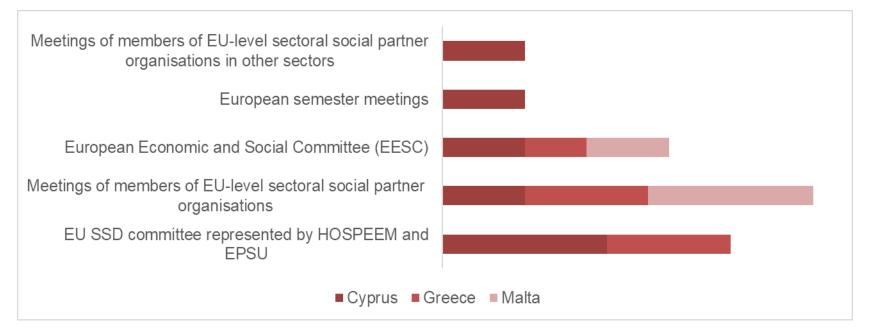
Several trade unions representing healthcare workers and one cross-sectoral employers' organisation covering mostly private sector in Malta

Multiple trade unions and employers' associations representing diverse healthcare professions in Greece

State playing the role of social partner in Cyprus, in Greece and Malta the state is relevant but not the main role in national social dialogue



Almost all trade unions are involved in EU level social dialogue



- Social partners in Cyprus involved directly in several committees of the EU sectoral social dialogue;
- Trade unions more involved in committees represented by EPSU than employers by HOSPEEM;
- Greek social partners not involved in EU level due to representativeness, low importance, finances and difficulties to understand the role of EU.



Involvement in the European Semester: The share of organisations informed is the same as those that do not want to be involved

- Half of Greek trade unions informed and even involved in European Semester, half not involved and not interested being part (negative experiences with reforms?)
- Employers in all countries except Greece more informed and involved than trade unions



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Common priorities across the states and type of social partners

	Trade unions	Employers' organisations
Cyprus	Lack of nursing staff and resources (especially in private hospitals) Health sector reform (general health system & greater autonomy of public hospitals) Reduced state budget for the healthcare	Sustainability of national health system Functional and financial autonomy of public hospitals Implementation of a common legal and regulatory framework for public and private health sector
Malta	Collective bargaining Private partnership Employee rights and burn out at work Reconciliation of work and family	Posting of workers Attractiveness of the sector for young workers
Greece	Lack of staff and labour issues Interference of primary structures with appropriate equipment Specialist doctors for the central structure-medical technological equipment Interconnection with similar structures abroad Recognition of skills at the national level most	Increasing the financing of the health system from 5% to 8% of GDP Equal treatment from the state of the private sector with the public Costing method (DRG'S, ICD 10), financing of investment in existing private hospitals, Minimum operating standards for providing safe health services, Minimizing bureaucracy



Most rated topics differ from Italy, Spain and Portugal

Reconciliation of work and family and continuing professional development and life-long learning are the most rated topics

Most social partners from Cyprus and Malta satisfied with the opportunities to address the priorities at the EU level sectoral social dialogue, Greece rather and very unsatisfied.

Reasons for dissatisfaction lie in no interaction with the EU level organisations, lack of personnel and financial recourses.



Expectations from the EU level social dialogue: Support in national bargaining and to make stronger impact

- To provide space for networking is expected at least and only by trade unions (relate to Spain, Italy and Portugal)
- Capacity building is the third most frequent expectation and evenly shared between employers and trade unions





Summary of the survey findings

Shortage of healthcare professionals contradicts the increasing demand for services in all countries

The economic crises and long-term challenges influenced the structure of the social partners

All employers and almost all trade unions are involved in EU level social dialogue structures

The share of organisations that are regularly informed about reforms recommended by the European Semester is the same as the share that does not want to be involved

Common priorities across the Member States and type of social partners have been revealed

Most rated topics differ from those of the previous countries

Support in national bargaining and to make a stronger impact are the most often expectations for the EU level sectoral social dialogue



Discussion

The preliminary findings show that one of the most rated priorities that you wish to communicate to the EU level social dialogue is the **reconciliation of family and work**.

- Would you say that this is related to most female employees in the healthcare sector with parental or other caring responsibilities, or are there other underlying factors present?
- What are the **measures** from the **EU level social dialogue** that could **support the reconciliation**?

The preliminary findings show that the expectations of the social partners from the EU level social dialogue in these three countries different from those discussed before. Social partners from Cyprus, Greece, and Malta **expect support to make a stronger impact** in their countries and **support in collective bargaining**

- Could you please elaborate on your meaning of impact in this regard?
- What concrete actions do you expect?



THANK YOU FOR YOUR ATTENTION!

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