



Sectoral Social Dialogue in Europe

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Godfrey PERERA
Secretary General/Chief Executive
HOSPEEM

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What is European Social Dialogue?



The **Social Dialogue** is the general system of dialogue and negotiations between representatives of employers & workers

The **EU Social Dialogue** is the structured process of bipartite and tripartite social dialogue at the EU level

Different forms of social dialogue



Bipartite Social Dialogue

- Cross-sectoral
- sectoral

Tripartite dialogue (with the EU Institutions)

e.g. Tripartite Summit for Growth and Employment

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What is European Social Dialogue?



- What is it NOT
 - Collective bargaining on wages and terms and conditions (pay explicitly falls outside EU competence)
- What it IS
 - Decision making instrument with legal basis (Articles 137-139 EU Treaty)
 - Tool for joint working on issues of common concern
- Takes place at cross industry level and in 36 sectors

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Sectoral Social Dialogue



• Commission Decision of 20 May 1998: creation of the **Sectoral Dialogue Committees**. The sectoral social dialogue is established.

- Before 1998:
 - Joint Committees, appointed by the Commission;
 - Informal Working Parties, organised in response to a Joint request from the social partners.

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European Sectoral Social Partners



The European organizations representing employers and workers must meet a number of criteria:

- relate to specific sectors or categories, and be organised at European level
- consist of organisations which are themselves an integral and recognised part of Member State's social partner structures, and have the capacity to negotiate agreements, and which are representative of several Member States
- have adequate structures to ensure their effective participation in the work of the committees

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Sectoral Social Dialogue Committees



- Max 54 representatives of the social partners, between employers and trade unions.
- Every Committee adopts its own rules of procedure and holds at least one plenary meeting per year.

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Possible outcomes of negotiation



- Framework Agreements (e.g. Sharps Agreement 2009);
- Process orientated texts:
 - Framework of action (Gender Equality, 2005);
 - Guidelines and Code of conducts;
- Joint Opinions and Tools: exchange of information, declaration tools such as joint websites, toolkits etc;
- Follow-up Reports.

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Hospital and Healthcare sector



- The sectoral social dialogue in the hospital sector was established on 20 September 2006.
- Sectoral Social Partners:
 - HOSPEEM European hospital and healthcare employers' association;
 - EPSU European Federation of Public Service Unions.

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How is hospital sector social dialogue funded



- HOSPEEM and ESPU secretariats are financed by members;
- The European Commission finances meetings, arranges venues and pays travels and subsistence for:
 - 2 plenary meetings of the hospital sectoral social dialogue committee;
 - The sub-committees meetings which is currently Retention and Recruitment;
- Social Partners can also apply for funding for special projects. HOSPEEM has applied for funding for project for improving social dialogue in the Baltic States.

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Dimension of the hospital sector in Europe



- In Europe the Healthcare sector is one of the largest employers, according to Eurostat it employed the 8.8% of citizens in the EU-15 and the 9.3% in the EU-25 in 2003.
- the output of the healthcare sector accounts for about 7% of GDP in the EU-15, larger than the approximately 5% accounted for the financial or retail sectors.

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HOSPEEM and the Hospital Social Dialogue (1)



- The benefits of getting involved in HOSPEEM and in the Hospital Sector Social Dialogue:
- with the existence of a formalised hospital sector social dialogue, the European Commission has a legal duty, to consult all relative parties on any draft proposals affecting the hospital sector;
 - members of HOSPEEM gain early sight of the draft proposals from the Commission;
 - we are able to adopt social partner agreements which have often proved more flexible than legislation;
 - the Sectoral Social Dialogue Committee provides a structured and regular platform for the exchange of information, the opportunity to learn from European solutions and experiences, and to agree joint positions, not solely under the form of framework agreements;

HOSPEEM and the Hospital Social Dialogue (2)



- full membership of HOSPEEM gives the right to take an active role in negotiations and any of the discussions on issues important to the hospital sector across Europe;
- both the European Commission and the European Parliament tend to be more sympathetic to the views of health employers than to governments;
- to exercise political pressure and to have the right to participate in negotiations at the European level increase the lobbying pressure and the influence of each full member of HOSPEEM at national level;
- as HOSPEEM is also a member of CEEP - European Centre of Employers and Enterprises providing Public services, it is one of the 4 cross-sectoral social partners involved in the social dialogue - it give us additional opportunity to gather information and in lobbying in the cross sectoral Social Dialogue.

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Content of the Social Dialogue Work Programme



Work Programme 2009-2010 (1):

- enhance the representativeness of their organisations in the hospital and health care sector throughout the European Union and its candidate-members;
- support the development and the strengthening of European, national and local social dialogue structures in the hospital sector;
- promote an interactive exchange of knowledge and experience in the fields of health sector and social policies between different national social partner organisations and their representatives;
- monitor, and where appropriate react, to European Commission social and health policy initiatives which will have an impact on the hospital sector work force and organisation;

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Content of the Social Dialogue Work Programme (3)



Work Programme 2009-2010 (2):

- maintain an active working relationship with the relevant cross-sectoral partners and complement their work where suitable;
- develop policies and instruments to support a social and sustainable workforce management within the hospital sector in the European Union;
- promote quality hospital services based on the shared principles as agreed in the joint EPSU-HOSPEEM Declaration on Health services of December 2007;
- promote the application of equality principles and legislation;
- further explore how the organisation of healthcare systems influences work organisation in the hospital sector.

Current priorities / the challenges



- Working group on Retention and Recruitment: Negotiation of a Framework of Action by the end of 2010.
- Tackling third party violence at the work place: Multisectoral initiative (5 sectors involved), negotiation of guidelines by the end of 2010.
- Strengthen Social Dialogue structures in order to build capacity in Social Dialogue: project «Strengthening social dialogue in the hospital sector in the Baltic countries»;

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... but also



- Revision of European Working Time Directive
- Patients' Rights
- Implementation of Directive on Sharps' Injuries
- Parental leave and other forms of leave
- Electro-Magnetic Fields Directive

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Hospital Social Dialogue successes



Joint Declaration on Health Services

- Signed 7 December 2007;
- In reaction to European Commission-plans for Health services directive;
- Underlines public responsibilities on basis of subsidiarity and autonomy;
- Reconfirms role of social partners in debate;
- Calls for forward-looking and long-term investments;
- Encourages cooperation and not choice-based competition between hospitals.

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Hospital Social Dialogue successes



Code of Conduct and Follow-up on Ethical Cross border recruitment and retention

- Signed 7 April 2008 (World Health Day)
- To be followed-up and implemented by HOSPEEM and EPSU Members within 3 years
- Includes principles and commitments to promote ethical cross-border recruitment and retention
- Based on solidarity and equal rights
- Committed to workforce planning and cooperation
- Committed to transparency and fair contracting (both sides)
- Addresses the role of external agencies

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Hospital Social Dialogue successes



Joint Project Strengthening Social Dialogue in new EU Member States

- With support of: NHS, UNISON, Ver.di, VKA, Joint Dutch Social Partners and the Czech and Slovak social partners
- Three parts:
 - Research into Social Dialogue in the different EU Member States (conducted by GHK)
 - Pilot Project with national and local social partners in Czech Republic and Slovakia
 - Final Conference in Prague on 14-15 April 2008

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Hospital Social Dialogue successes



Project RESPECT – Effective approaches to tackling third party violence in the work place

- Social Partners met on 16 June 2008 to follow up issues raised in the technical seminar and agree that further research is needed before further action can be considered;
- European Commission agrees to fund further research - to be undertaken separately by the Social Partners;
- Research completed and working party met on 1 July 2009 and 11th September 2009 to finalise arrangements for a conference;
- Final Conference on 22nd October 2009.

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Agreement on prevention from sharps Injuries (this agreement will become European Directive in 2010)



- Background: European Parliament debate and Resolution;
- 2006-2007 1st stage Consultation social partners;
- Replies express divergent views – but willingness to jointly explore;
- Technical Seminar – 7 February 2008
Presentation of case-studies –
Insight in complexities of problem;
- 2007-2008 2nd stage Consultation;
- HOSPEEM asks EPSU (European Public Sector Unions) whether they are willing to negotiate;
- Despite internal differences, EPSU agrees to negotiate an agreement on sharps.

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Agreement on prevention from sharps Injuries



- Secretary Generals of HOSPEEM and EPSU meet Commissioner Špidla from DG Employment on 19th January 2009;
- European Commission agrees to drop their proposal to issue a directive on needlesticks;
- Commissioner Špidla agrees to allow the social partners to negotiate an agreement on sharps, with a 9 month deadline to conclude negotiations;
- HOSPEEM, CEEP and EPSU invited to appear before the European parliament to explain the reasons why the social partners have taken on a subject, which the Parliament has been working on for a number of years.

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Agreement on prevention from sharps Injuries



- Negotiations start on 26th January 2009;
 - Negotiations completed on 2nd June 2009;
 - 17th July 2009: Official signing of the sharps agreement by the social partners, the first of its kind in Health Sector Social Dialogue;
 - Commission announces that the agreement will be transposed into a Directive;
 - 8 March 2010: The Council adopts the directive.
- The agreement between HOSPEEM and EPSU becomes law. The Member States have three years to implement the requirements set out by the directive.

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Agreement on prevention from sharps Injuries



The aim of the agreement

- to achieve the safe working environment
- to prevent workers injuries with all medical sharps (including needlesticks)
- to protect workers at risk
- to set up an integrated approach establishing policies in risk assessment, risk prevention, training, information, awareness raising and monitoring
- to put in place response and follow-up procedures
- to avoid the use of costly safety equipment where its use would not be proportionate to the risk.

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Conclusion / Priorities for HOSPEEM



- During a period of economic turmoil ensuring that the hospital and healthcare sector continue to be properly funded;
- action taken to protect workers and patients;
- The voice of healthcare continues to be heard at the highest levels of the European Union.

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Thank you for your attention!

For more information:

www.hospeem.eu

or

hospeem@hospeem.eu

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