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**MEETING OF THE WORKING GROUP ON  
THE EUROPEAN HEALTH WORKFORCE (OF THE HIGH LEVEL GROUP  
ON HEALTH SERVICES AND MEDICAL CARE)**

**12 April 2013**

**DRAFT MINUTES**

**Chair: Katja Neubauer, DG SANCO, European Commission**

**1. Welcome, minutes of the last meeting and adoption of the agenda**

The Chair welcomed all participants. The draft agenda was adopted and the minutes of the previous meeting held in 10 May 2012 were approved. The Chair reminded participants of the meeting objective: to take stock of the Action Plan for EU health Workforce adopted on 18 April 2012 by the European Commission and to present recent findings on health professional mobility in a changing Europe and to inform on the Structural/Cohesion Funds 2014-2020.

Following a request from the Chair, no objections were raised to use visible email addresses for internal communication with the working group and to share contact details.

All presentations from the meeting will be made available on the Europa website:

[http://ec.europa.eu/health/workforce/events/ev\\_20130412\\_en.htm](http://ec.europa.eu/health/workforce/events/ev_20130412_en.htm)

**2. Introduction to the Action Plan for the EU health workforce – Taking Stock**

The Chair updated the working group on the implementation of the Action Plan for the EU health workforce, a year since its adoption in April 2012:

At political level, two ministerial discussions took place under the Cyprus Presidency: the Informal Health Council of July 2012 discussed job creation in the health sector and the need to explore innovative measures for recruitment and retention and, in October, the Social Affairs Council adopted Conclusions on a “job rich recovery and giving Europe’s youth a better chance” which highlighted the job potential of key sectors, including health.

The following initiatives were launched to foster European cooperation on health workforce:

- The Joint Action on health workforce planning and forecasting on 11 April 2013;
- The Commission Health Programme published calls for two studies on 9 April 2013 on the continuous professional development of health professionals and on innovative and effective strategies to recruit and retain health professionals<sup>1</sup>;

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<sup>1</sup> <http://ec.europa.eu/eahc/health/tenders2013.html>

- The first pilot sector skills alliance, funded under the Leonardo da Vinci programme on lifelong learning, led by a Finnish vocational training college will develop a European training module in the field of elderly care<sup>2</sup>;
- A final workshop of the pilot network of nurse educators and regulators took place to finalise its work on the the training and competences of healthcare assistants in 15 European countries;
- The feasibility study on the possible setting up of a sector skills council on nursing and care was finalised in December 2012;
- A two year OECD study to map the education and training of health professionals in the 35 OECD countries will kick off in the course of the year.

The Chair concluded that the first year of the Action Plan was to raise awareness on European cooperation on health workforce issues and to launch studies to research and gather better information on different aspects of health workforce.

### **3. On-going actions – State of Play**

#### **3.1. Joint action on health workforce planning and forecasting**

Michel Van Hoegaerden, Federal Ministry of Health (BE) and project manager of the Joint Action briefed the working group on the Joint Action which kicked off on 11 April. He summarised the main objectives of the Joint Action to improve workforce planning and forecasting and stressed that tangible outcomes are the main aim of this partnership between Member States and stakeholders.

#### **3.2. Skills Needs in the Healthcare Sector**

Caroline Hager, DG SANCO European Commission, introduced the various EU initiatives relating to health workforce skills:

- the European Skills Panorama to improve labour market intelligence on jobs and occupations in the EU, including data on the health and social care sector.
- the project on European Skills/Competences, Qualifications and Occupations (ESCO) led by DG Employment, European Commission, is developing a multilingual taxonomy of more than 3000 occupations, including the health and care sector.
- A European network for nurse educators and regulators is finalising its review of qualifications and training of healthcare assistants in the EU.
- The sector skills alliances, funded by the EU Leonardo da Vinci programme to support partnerships between vocational training providers, educators and employers across Member States in different sectors. Further calls will offer funding opportunities for other areas of healthcare.

The these initiatives were presented in greater detail:

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<sup>2</sup> <http://www.ecvetforec.eu/presentation.htm>

### ➤ **Pilot Network of Nurse Educators and Regulators**

Grit Braeseke, project manager at Contec GmbH, summarised the project which entered its final stage. She announced a stakeholder conference to take place in Brussels which will discuss the recommendations on health care assistants' education, skills and competences. More details on the project can be found on the referred website (<http://www.hca-network.eu/>).

In reply to questions, Ms Braeseke noted that the HCA project examined the legal basis of health care assistants and the required skills in 15 countries. So far there is no comprehensive data collected at EU level on numbers of health care assistants.

### ➤ **Sector Skills Alliances**

Felix Rohn, DG Education and Culture, European Commission, explained that the new programme "Erasmus Plus 2014-2020" is one of the main tools for investment in education and skills across the European Union. Under key action 2 "Co-operation for innovation and good practices", the Sector Skills Alliances are partnerships between education institutions, youth organisations, training institutions and other actors which support structured European large-scale cooperation to address the challenges of skills mismatches and shortages in an economic sector.

In reply to a question, Mr. Rohn noted that the first pilot project focuses on specific training modules to establish an ECVET (European Credit for Vocational Training) for elderly care workers and any links to the professional qualifications directive 2005/36/EC would need to be investigated further.

### ➤ **European Skills/Competences Qualifications and Occupations (ESCO)**

David Gorria, Chair of ESCO Reference Group Healthcare and Social Work Activities presented the ESCO project to develop a multilingual, structured, easy-to-use terminology of skills/competences, qualifications and occupations to help job matching and facilitate the dialogue between the labour market and education/training. Mr. Gorria highlighted the need for more involvement by other health professional organisations and to improve coordination between the various directorate-generals of the European Commission.

### **Sector Skills Council in the area of nursing and care**

Caroline Hager informed participants on the feasibility study of Sector Skills Council concluded in December 2012 and Commission will open a call for sector skills councils soon.

### **3.3. Promoting Good Practices in the EU**

Caroline Hager informed the working group on the recently published open calls under Health Programme 2013 to map and review of CPD approaches of health professionals in the EU and a second call to research innovative and effective recruitment and retention strategies of health professionals.

### **3.4. WHO Global Code of Practice: Update**

Galina Perfilieva, WHO Regional Office for Europe, presented an overview and a state of play on the implementation of the WHO Global Code of Practice on the International Recruitment of Health Personnel of May 2010 which promotes voluntary principles and practices for the ethical international recruitment of health personnel and aims to facilitate the strengthening of health systems.

In summary, Ms Perfilieva reported that 42 European countries have designated National Authorities and the WHO received 54 reports on implementation. 32 countries achieved valuable steps towards implementing the Code of which 8 good practices were promoted among recruitment agencies. Countries still have common challenges to implement<sup>3</sup> the Code such as: lack of coordinated and comprehensive data on health personal mobility, weak national capacity to deal with health workforce issues. She announced the WHO Policy Dialogue on International Health Workforce Mobility and Recruitment on 2-3 May 2013 in Amsterdam and the 3<sup>rd</sup> Global Forum on Human Resources of Health in Recife, Brazil in 10-13 November 2013.

During the discussion the following points were raised:

- Stakeholder involvement is key to the implementation of the Code. The EU funded “Health Worker for All” project is aimed at promoting stakeholder involvement in eight European countries. All comments are welcomed by WHO for the revision of the Code.
- Raising awareness on the implementation of the WHO Global Code is a priority under the Action Plan for Health Workforce;
- Certain Member States have reported bad experiences on retaining health professionals due to economic crises which leads short and also in long term sustainability issues in the MS’s health systems.

## **4. EU Research on Health Workforce**

The Chair stressed the importance of the EU 7<sup>th</sup> Framework Research Programme to fund EU research to support policy development on health workforce, for example the RN4cast, MoHProf, PROMeTHEUS projects. The next EU research programme called Horizon 2020 may provide further opportunities for funding on health workforce issues.

The working group were informed about the MUNROS research project which will research health professionals working in new roles and provide the first pan European evaluation of the impact of these new roles in terms of care delivery, outcomes and costs in a range of different healthcare settings (an information leaflet was made available in the meeting).

Gilles Dussault, Instituto de Higiene e Medicina Tropical Lisbon, presented recent findings of the Health Professional Mobility (Prometheus) on the impact of the economic crisis on health workforce mobility in the EU. Mr. Dussault concluded that:

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<sup>3</sup> <https://www.abdn.ac.uk/munros/about/university-of-aberdeen/>

- the crisis has not constrained overall net health workforce mobility;
- the crisis has not ended the need for effective policy responses to health workforce mobility; health worker mobility will continue to be directed by broader health system policies, and to be a factor that policy makers should understand in developing effective policies and planning;
- the crisis may increase health worker shortages in some EU countries in the midterm but does not change underlying trends of demography - an ageing workforce will lead to greater supply/ demand imbalance; increasing retirement age may delay this without giving a long term solution;
- shift to primary care needed but track record so far is quite poor and varied across EU;
- need to improve workforce planning capacity, not just about the technical aspects of planning, but also the conduction of the policy process;
- the short term impact of the crisis masks longer term health system and workforce challenges for Europe.

## **5. Health in the EU Structural/Cohesion Funds 2014-2020 Information from the European Commission**

Wolfgang Bücherl, DG SANCO European Commission, took a stock of the negotiations on the programming of 2014-2020 Structural and Cohesion Funds. He explained the objective to concentrate resources more because there are less resources in a larger EU. The Commission position paper outlining the Commission's priorities had been sent to Member States. Mr. Bücherl stressed the need for Member States' health ministries to plan for possible projects over the next programming period, including investments on health workforce.

A working group member pointed out the difficulties to influence Cohesion Fund programming in the Member States as there is no separate chapter on health which signals that health is not a priority for the Cohesion Funds. Guidance from the Commission could help focus where to propose health-related investment in the programme (the Commission has meanwhile adopted a guide to the Cohesion Funds [http://ec.europa.eu/regional\\_policy/information/guidelines/index\\_en.cfm](http://ec.europa.eu/regional_policy/information/guidelines/index_en.cfm))

### **6. Any other business**

The Chair announced that there was a vacancy for a seconded national expert in unit D.2. of DG SANCO.

### **7. Next meeting**

The Chair announced that the next meeting would be held in the first half of 2014 and thanked members for their attendance and input and closed the meeting.