



Final results on the Survey of EPSU-HOSPEEM Guidelines and examples of good practice to address the challenges of an ageing workforce in the healthcare sector

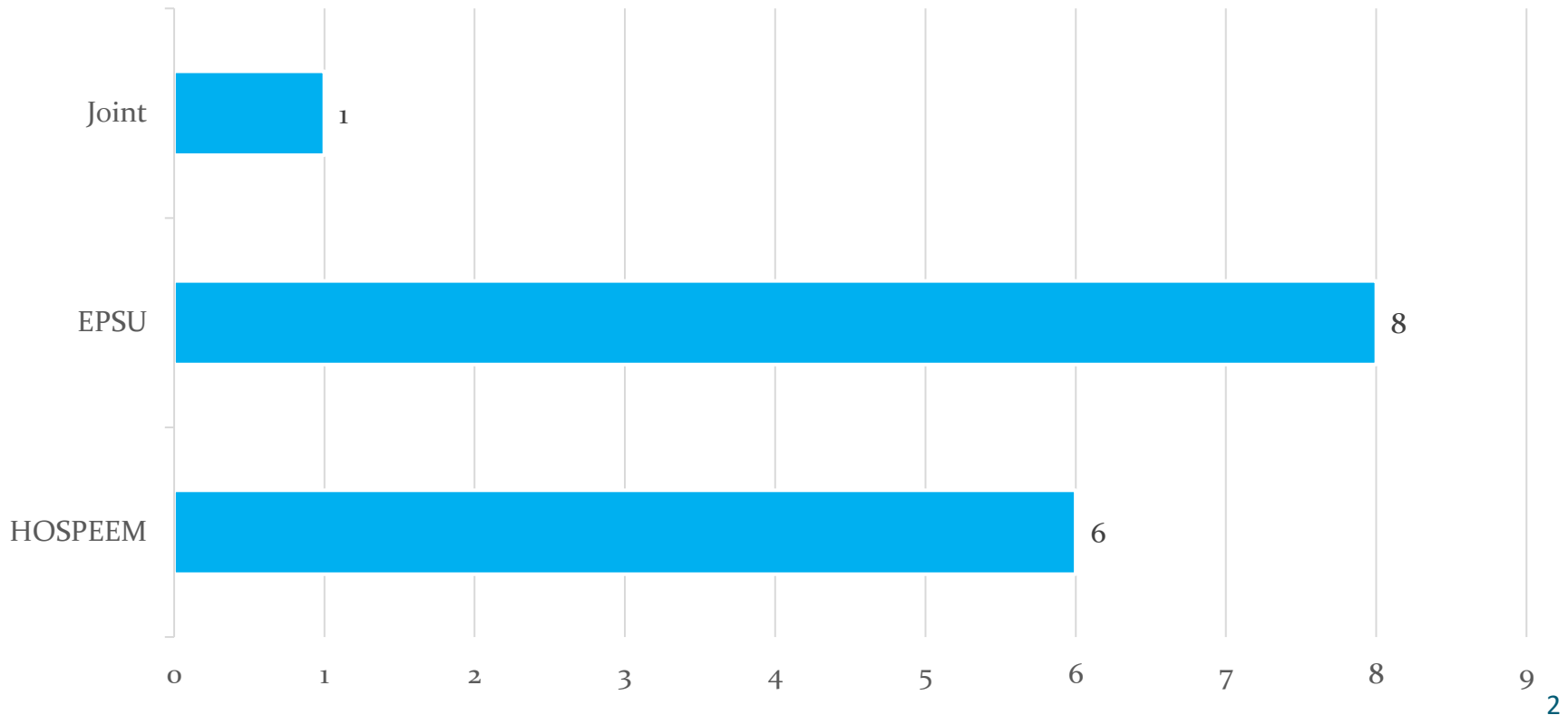
SSDC HS

Brussels, 31st May 2022

Number of Responses

The European Social Partners received 15 responses

Number of responses



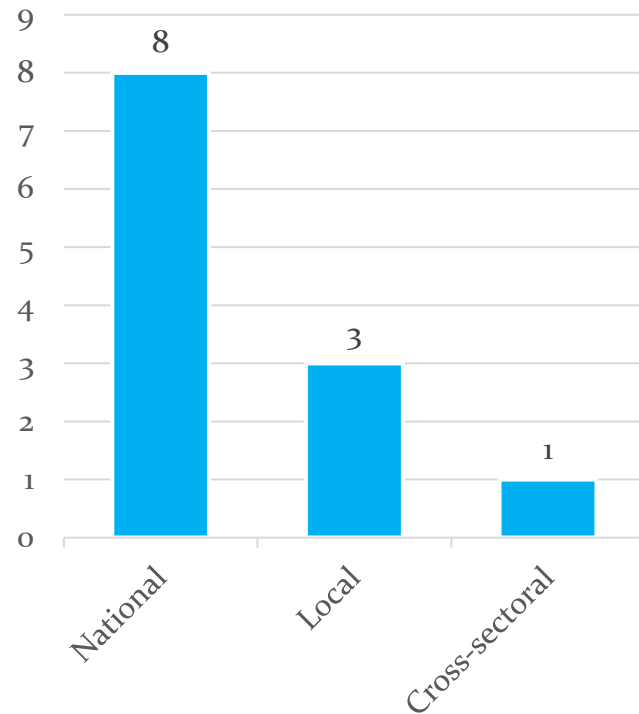
Responses by Country



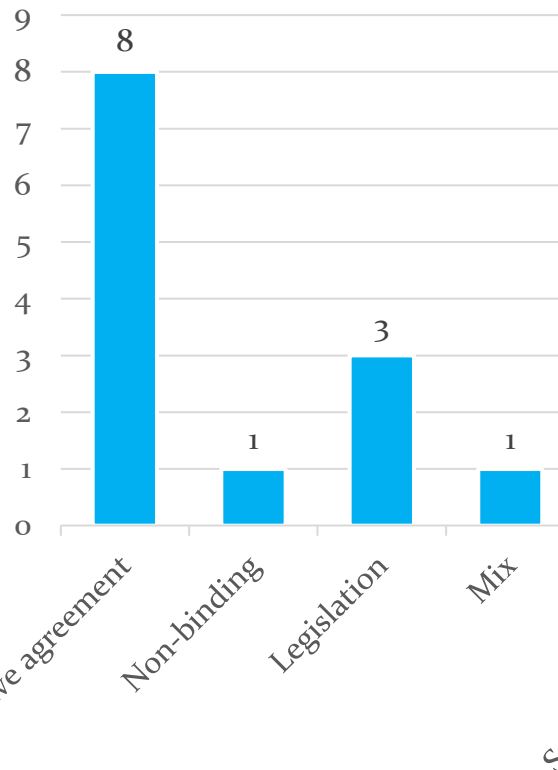
- Belgium
- Czech Republic
- Finland
- France
- Ireland
- Italy
- Netherlands
- Norway
- Romania
- Spain
- Sweden

If Guidelines have been used or were an inspiration ...

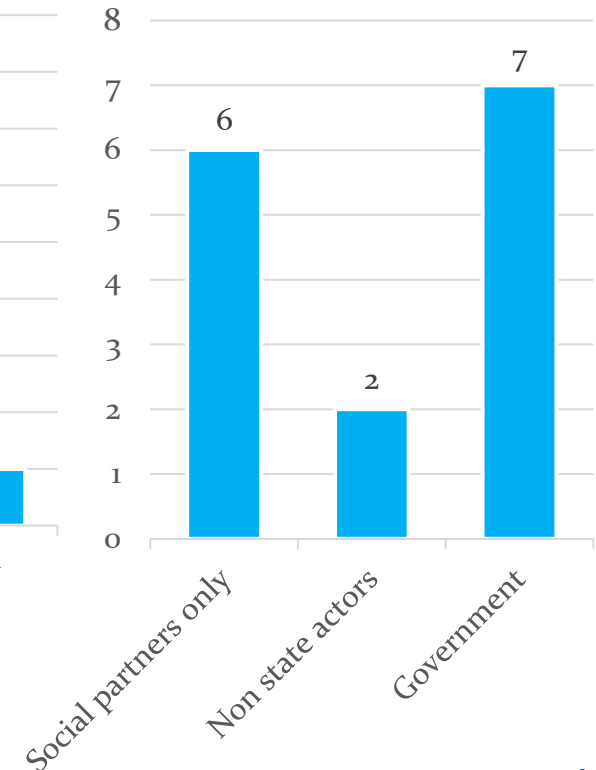
Adopted on which level



of what nature?

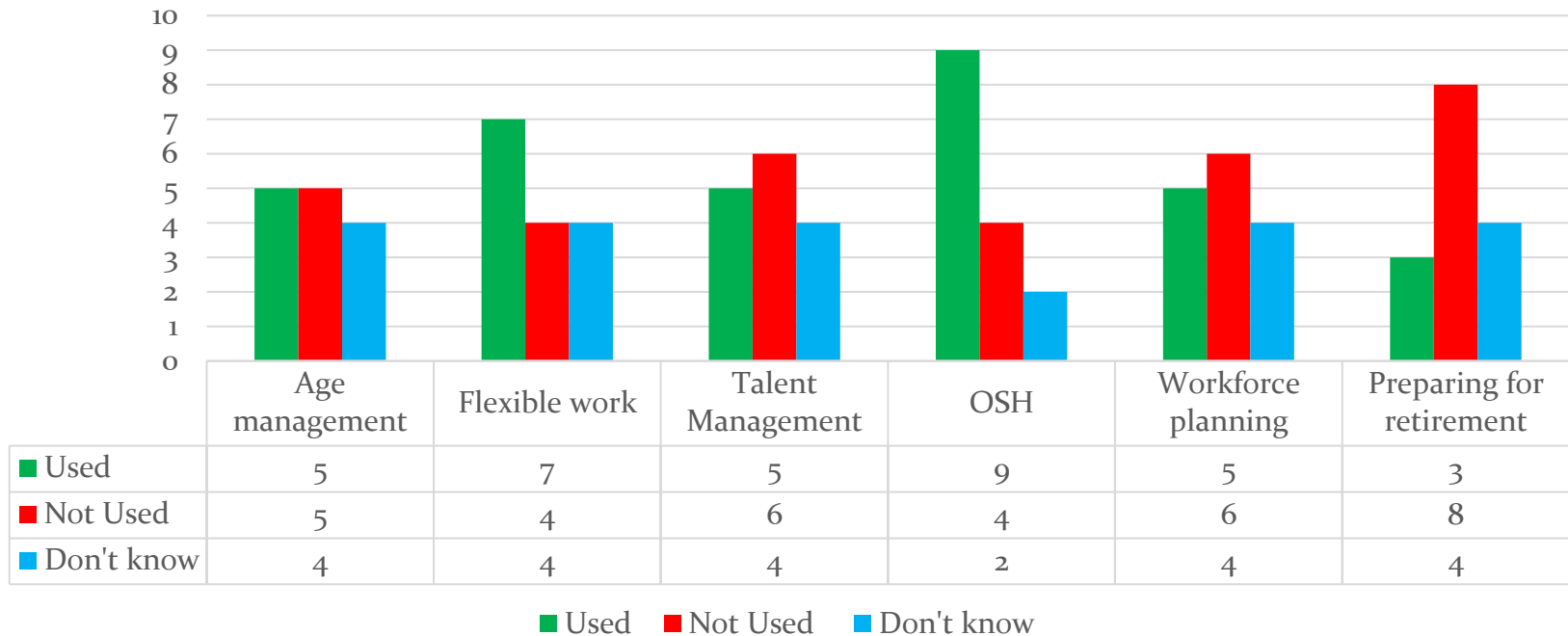


other actors involved

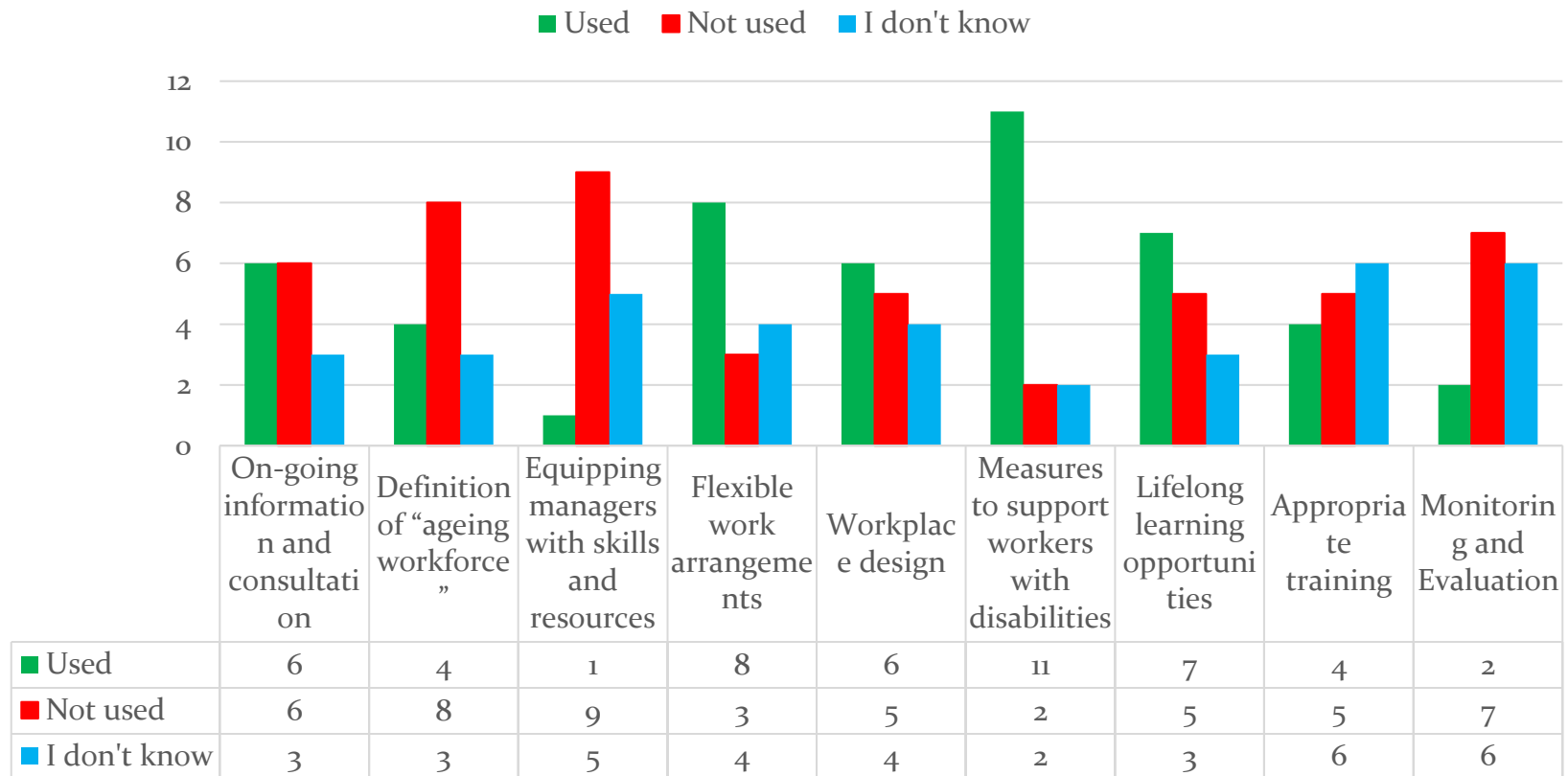


Trends related to the use of the Guidelines

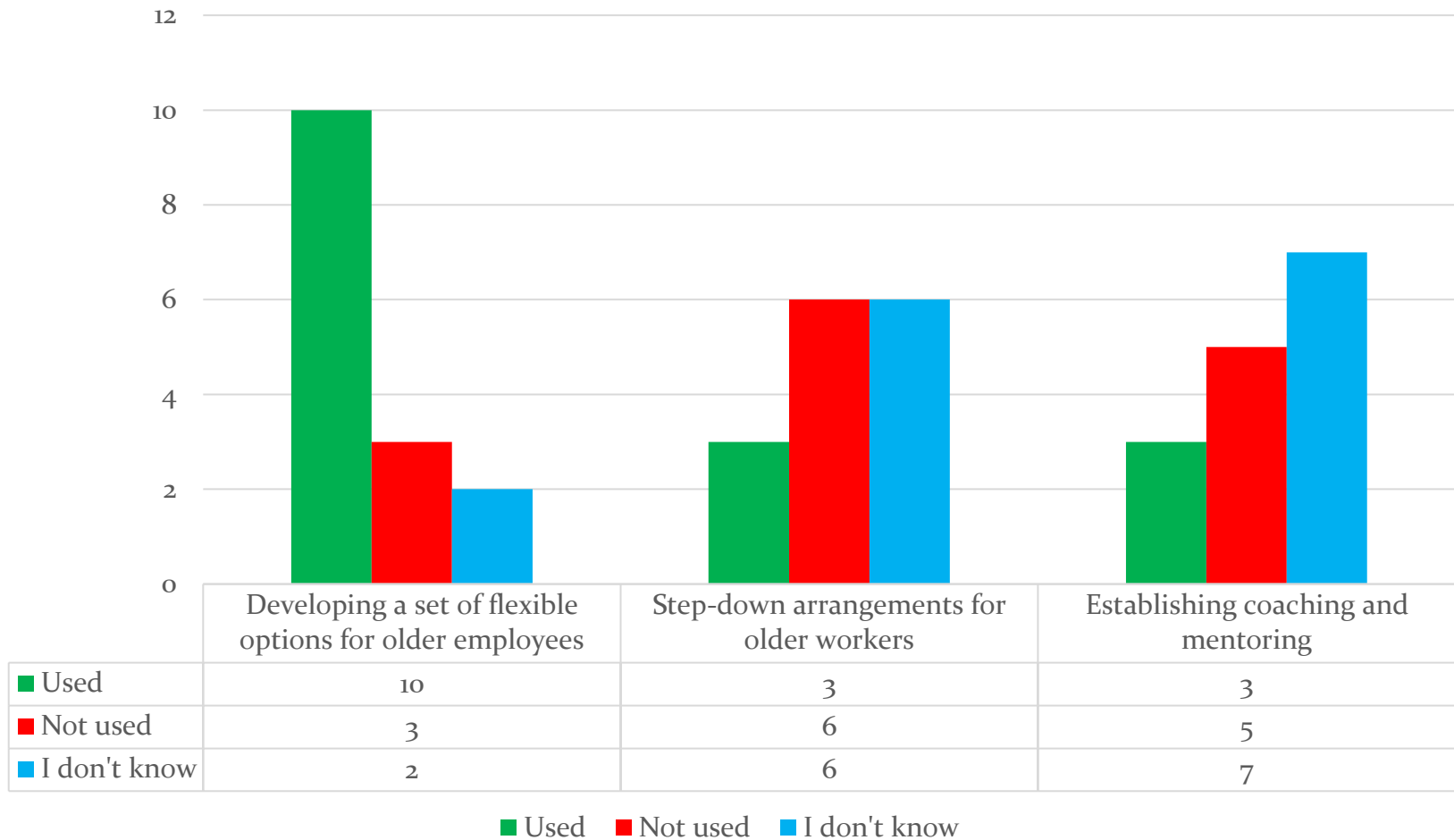
- Majority responded that policies were adopted on national level;
- Inspiration from guidelines were used in collective bargaining agreement.

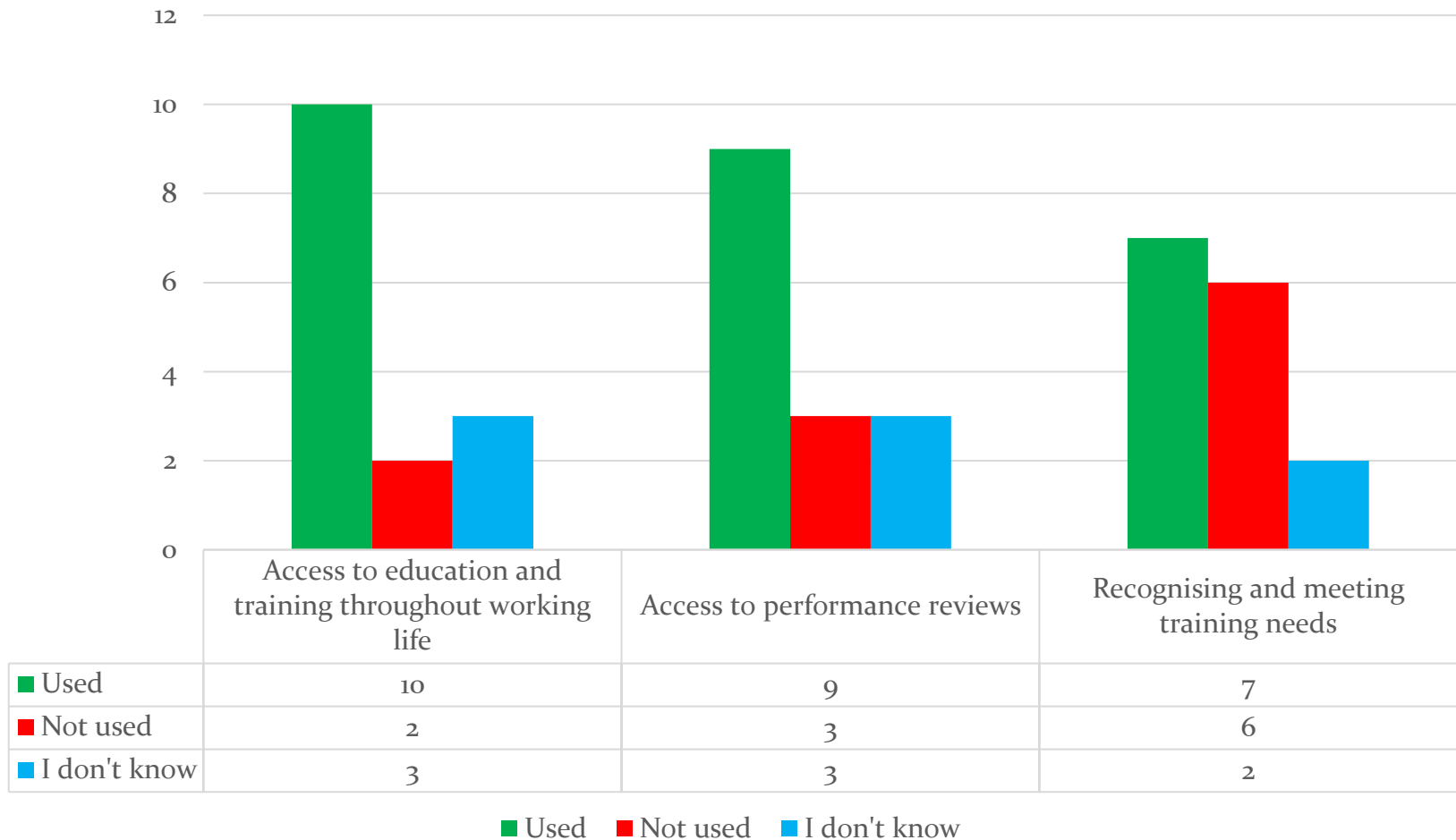


Trends related to the use of the Guidelines

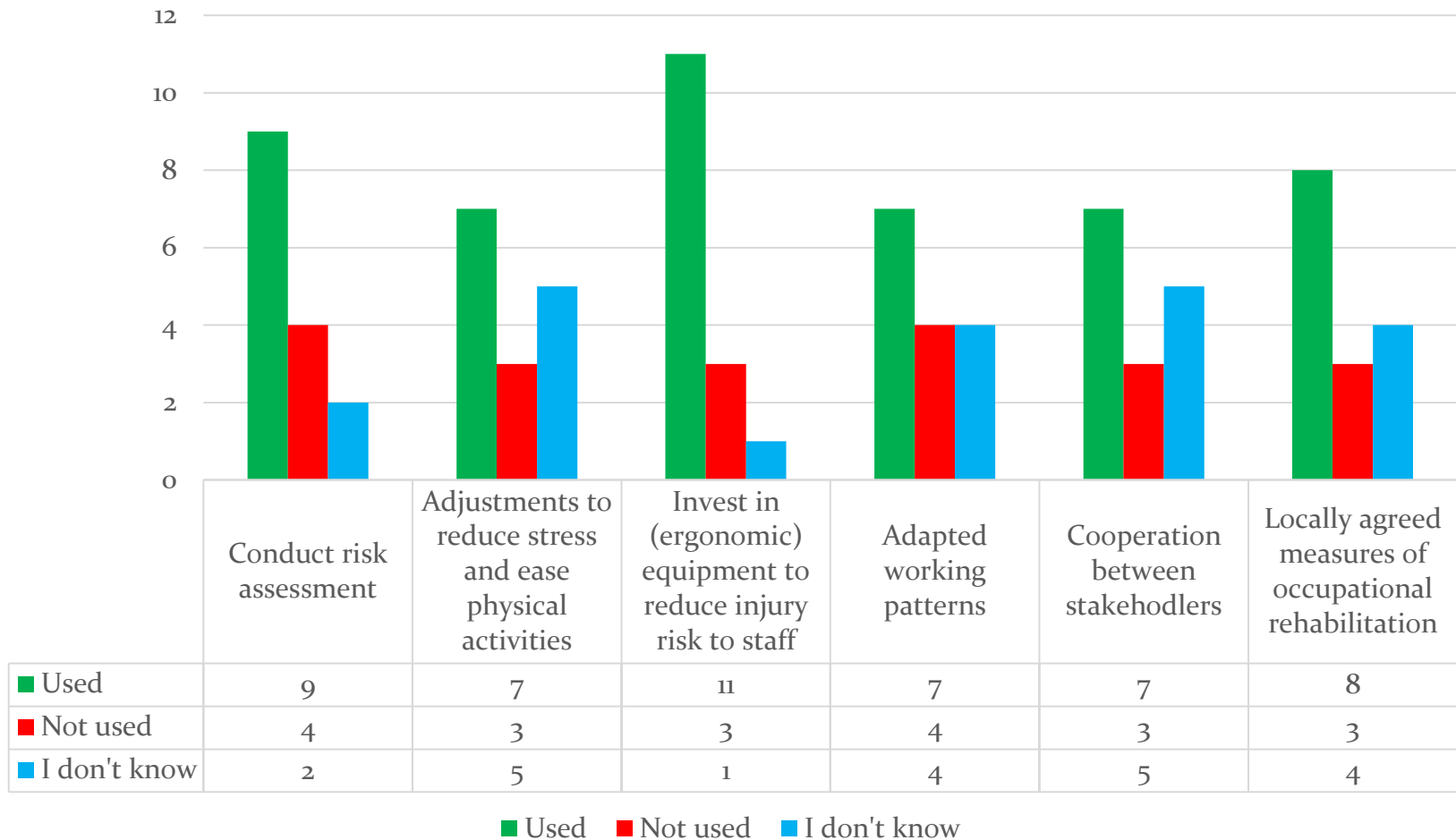


Flexible work

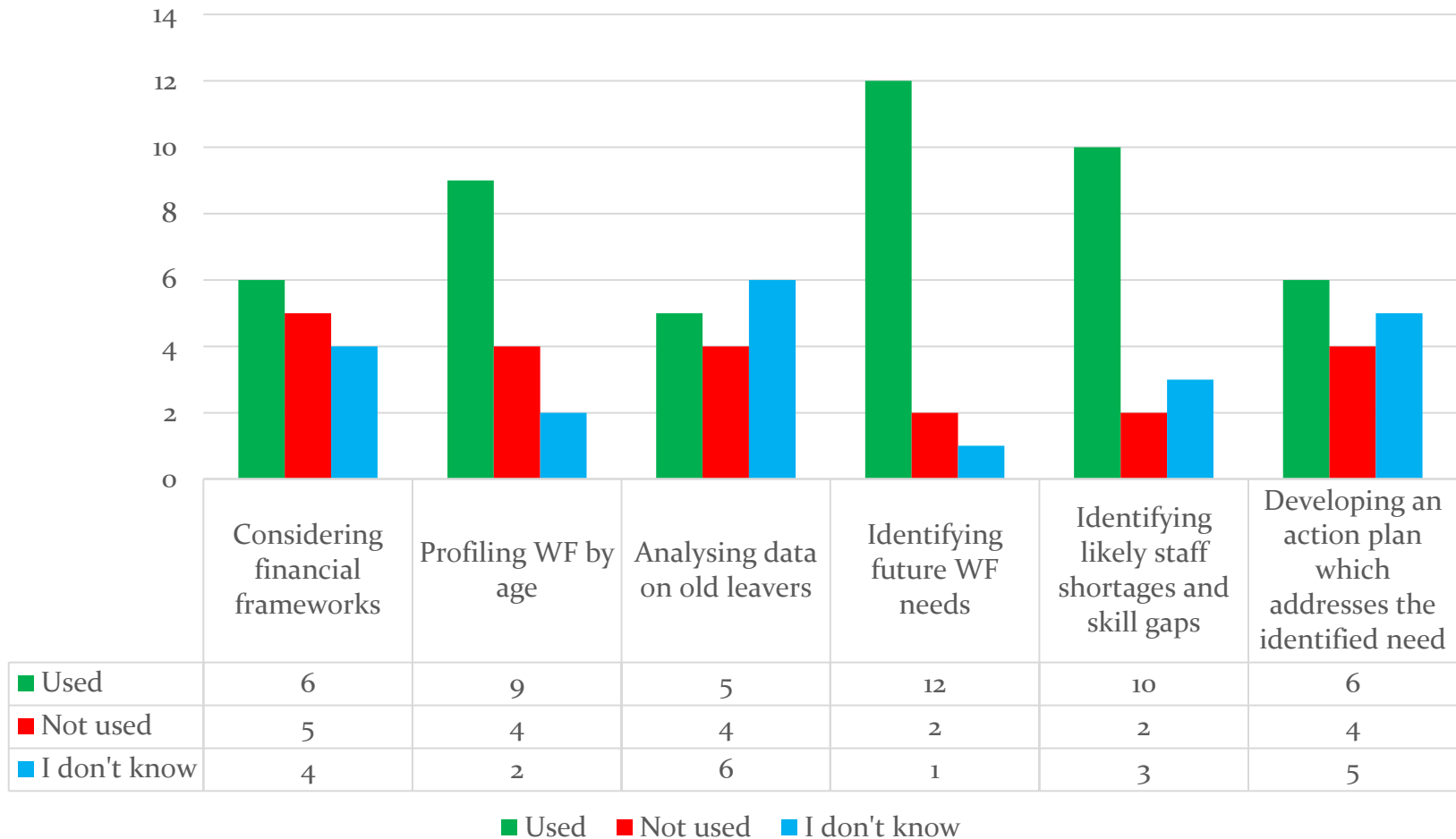




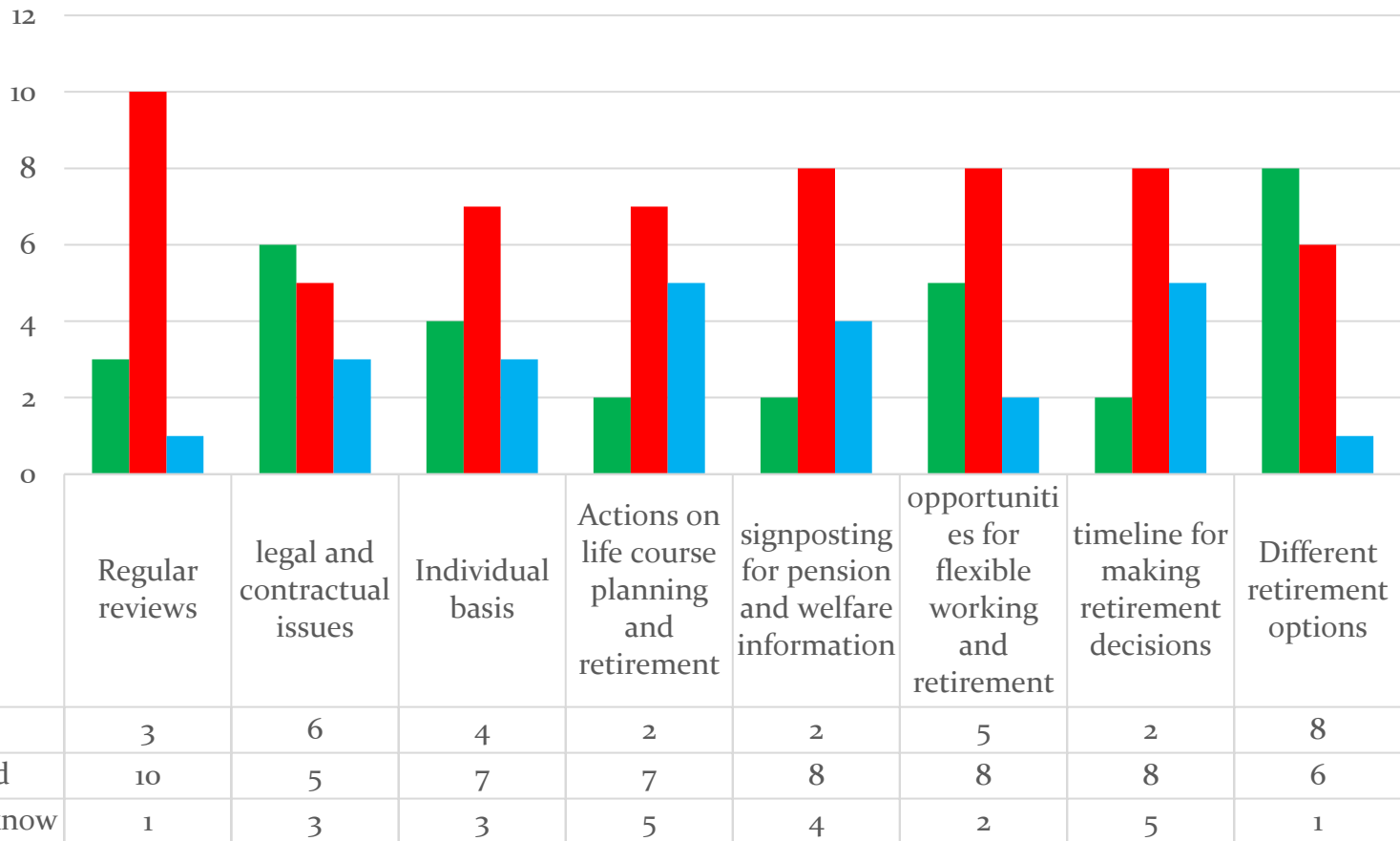
Health and Safety



Workforce planning



Preparing for retirement



■ Used ■ Not used ■ I don't know

What are the key issues and challenges for active ageing?

- Lack of universally accessible active ageing supported planning
- Adequate staff to allow flexible forms of work, shared jobs;
- Growing cost factor due to demographic shift;
- Conditions for access to partial retirement with a relief contract are tightened;
- Healthcare in the workplace is established in the occupational risk prevention law, but pays little attention to the elderly, and the technical standard that has been published is not mandatory.
- Lifelong learning seems essential, but not carried out properly.
- Managing and preventing load factors and supporting work capacity of aging workforce. Maintaining the attractiveness of the work in social and health care sector for as an interesting industry for young people
- Need to develop policy procedures

Do you have any suggestions on how to possibly improve Guidelines and related activities at European level?

- Directive on ageing would be important because the issue of active ageing of the health workforce crosses the theme of professional responsibility and therefore a risk that operators face;
- CPD time as a right. Compulsory Age related Risk assessment. Retirement preparation with continuing employment options and calculation of Pension entitlement well in advance with payment on date of retirement.
- Need to enhance the knowledge on how to enable workers to stay longer active on the labour market. It is a challenge to make it possible and interesting to stay longer active. That should be the main focus. Moreover, the guidelines should be inspiring: rather than defining more general principles, the focus should be on inspiring good practices. Knowing what should be done, is easy in theory. Putting it into practice is the real challenge.
- Review on good practices of member state on collective labour agreement policies.

Do you have any suggestions on how to possibly improve Guidelines and related activities at European level?

- Leaving work life progressively is a good measure if you begin to reduce the working day around the age of 60, and previously avoid, for example, night hours and shift work.
- Shifts and nightlife should be stopped well before around 50 years. This type of work entails damage to health that is not sufficiently taken into account, as well as stress, or anxiety, in caring for people with health problems. A progressive reduction in working hours would allow us to reach the end of our working life in better health conditions.
- A strategic document with background information about the European health workforce (statistics ect.) could be used as background material. Also guidelines or checklists about good practices or ways to support an active aging workforce planning could be more easily used.

Thank you for your attention!

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