

A proposal submitted for funding under budget heading 04.03.03.01 (Industrial Relations and Social Dialogue) by HOSPEEM

Detailed work programme and budget

“Strengthening Social Dialogue in the hospital sector in the new Member States and candidate countries”

1. Introduction

After several years of pre-social dialogue process led by the Joint Representative Taskforce¹, the Committee on social dialogue in the hospital sector (henceforward: the Committee) will soon be established. The Committee aims to improve the quality of employment and quality of services in the hospital sector by means of constructive social dialogue.

Adequate representativity of EPSU and HOSPEEM is an important condition for success. However, social partners from new Member States are not yet very well represented in the European Social Dialogue. Moreover, the situation and status of Social Dialogue within some of these Member States leaves much to be desired. A strong national dialogue is a *conditio sine qua non* for adequate representativity in Europe. In turn, a high level of representativity will make the sectoral dialogue more effective at the EU level. Hence, capacity-building in the new Member States is a major priority in the work programme of the Committee.

In this project HOSPEEM, EPSU and national social partners from Czech Republic, Slovakia and the Netherlands have joined forces to strengthen the Sectoral Social Dialogue in the EU 27 and to increase representativity in the Social Dialogue Committee. They wish to remove some of the main obstacles for constructive dialogue on national and EU level. They will combine theoretical and practical methods to tackle problems of a different character, thus optimising the final project result.

2. Link to the objectives and priorities of the budget heading

This project is the first major initiative of the Social Dialogue Committee for Hospitals after the formalisation in September 2006. This project will support the implementation of a major issue of the work programme of the Committee, i.e. strengthening Social Dialogue in the new Member States and candidate countries. It will also help to increase the representativity of social partners in the EU Social Dialogue, especially from the employers' side. Finally, the pilot activities will contribute to the development of the three major topics defined in the EPSU-

¹ The Joint representative task force in the hospital sector was founded in 2002 by members of EPSU and CEEP involved in an informal social dialogue since 1999.

HOSPEEM work programme 2006-2007 (ageing, recruitment and retention, skill needs).

Project partnership

The partnership will consist of the following parties: HOSPEEM, EPSU, Trade Union of the Health Service and Social Care of the Czech Republic (OSZSP CR), SOZPZASS Slovak Trade Union of Employees in Health and Social Services, the Association of Czech and Moravian Hospitals, the Association of Hospitals in Slovakia and the Organisation of Social Partners in Hospitals in the Netherlands (StAZ). Each partner will add specific networks, methods, knowledge and experience to achieve a more successful result.

HOSPEEM and EPSU are indeed the two European social partners that will gain from the project new ideas and guidelines to accomplish the work of the Committee and to fulfil their joint work programme.

The other partners will enrich the project with concrete experience and will gain from mutual learning and exchange.

Each national member of the partnership will indeed bring to the project some specificity. The Czech Trade Unions, for instance, have been involved in the informal social dialogue since the very beginning, even before the entering of the Czech Republic into the EU. Their specific contribution to the pilot activities project will have a boosting effect on the social dialogue both at national and European level. This is a process in which the employers' organisation participating in the project has entered quite recently.

As far as the Slovak partners are concerned, their participation to the European Social Dialogue is under construction and the project will represent a very concrete exercise from which to start their involvement.

As far as the Dutch social partners are concerned, their contribution to the formalisation of the hospital sector social dialogue has been very important, and the project will gain from their experience in enhancing a constructive social dialogue by building up networks of social partners in the hospital sector all over Europe.

A specific support will also be given by the UK (UNISON and National Health Services Employers) and German (Ver.di Vereinte Dienstleistungsgewerkschaft and VKA Vereinigung der Kommunalen Arbeitgeberverbände) social partners in the hospital sector. They will, together with the Dutch social partners, act as advisers during the seminars of the pilot activities project and the study visit.

The UK social partners have been a pillar of the informal social dialogue all over its process and the possibility of gaining from their expertise will bring added value especially to the action oriented part of the project. As far as the German social partners are concerned, the project will constitute a great opportunity to enhance their active participation to the sectoral dialogue at European level and to make the best out of the impetus that shall be brought in by the German presidency beginning in Spring 2007.

3. Project aims

Overall objectives

This project aims to remove high priority obstacles for development of national and European Social Dialogue in the hospital sector. The long term purpose of this project is capacity-building in the new Member States, i.e.:

- To improve the quality of social dialogue on the national level
- To increase representivity of social partners at European level.

Specific objectives

The specific aims of the pilot activities are:

- To acquire knowledge and skills from other social dialogue systems, to solve problems concerning infrastructure, content and ideological differences;
- To integrate national social dialogue further into European Sectoral Dialogue
- To collect input for new activities of the Committee in the field of ageing, recruitment and retention, skill needs.

4. Methodology

Background

The status quo of social dialogue in the new Member States and candidate countries are still a blind spot for the Committee. To increase representativity at EU level and to support the Social Dialogue effectively at national level, the Committee will first need specific knowledge about this situation. For some Member States, such as the Czech Republic, social partners maintain good relationships and are already involved in the Committee, but they still face major problems in their national dialogue. They need practical measures to overcome their obstacles.

As most new Member States and acceding countries do not have that much experience yet in operational social dialogue structures, it is also necessary to make the knowledge on social dialogue of the old Member States' social partners accessible to the employers' organisations and trade unions of the new Member States. Good and bad practices have to be highlighted and possible risks and opportunities related to the hospital sector collective bargaining should be identified. It is important that this examination will be related to general developments in the hospital sector as a whole.

The information from both the new (and future) and old Member States will be used to draft and implement guidelines, recommendations and action plans for the new Member States' and acceding countries' social dialogue. It will also serve the European social partner organisations by pointing out the opportunities for further capacity-building activities in the hospital sector in the new EU Member States and acceding countries.

Steering committee

The project will be overseen by a steering committee made up of 2 project coordinators and an administrator from HOSPEEM and EPSU, one representative from OSZSP CR, one from SOZPZASS and one from StAZ.

The Steering Committee will meet twice during the overall project: the first time for the inception meeting and the second one before the final conference.

Project phasing

The ultimate goal of this project requires a long term strategy. In this project phase the partners will deal with the most urgent and opportune issues. It will consist of

several elements: a research project about the social dialogue situation in the new Member States, practical pilot activities to tackle specific problems and a European conference. The results of the research project and the experience and general conclusions to be drawn from the pilot activities will be used as a basis for a new project, which will focus on the EU 27.

A. Research project

The Social Dialogue processes in some of the new EU Member States and acceding countries are still in their infancy. At this moment most social partners in these countries lack knowledge, experience and resources to engage in effective collective bargaining. The position of the hospital sector in these (future) Member States can be very complex and the role of different social partners are ambiguous. To strengthen the Social Dialogue processes in these countries, it is important that there is a clear picture of the status quo and the existing Social Dialogue structures of the hospital sector, so that possible opportunities and barriers for further development of the industrial relations in this area can be detected. Therefore, one of the main objectives of the research project is to draw an extensive analysis of this Social Dialogue situation in the hospital sector of the new Member States and acceding countries.

The project aims to realise the research in 3 key ways:

- Comparative studies in the countries listed below
- Background research
- Analysis of opportunities and obstacles

The target countries are: Bulgaria, Cyprus, Czech Republic, Estonia, Hungary, Latvia, Lithuania, Malta, Poland, Romania, Slovakia, Slovenia.

The purpose is to develop an extensive and detailed overview of the system, parties involved, problems, developments, topics etcetera of the Social Dialogue situation in the hospital sector in the target countries. EPSU and HOSPEEM will also use the research activities to contact social partners in countries that are not yet actively involved in the work of the Committee, in order to better inform them about the European dialogue in the hospital sector. The analysed research data will provide the Committee with recommendations for specific follow-up activities.

B. Pilot activities activities

Like in many other new Member States, social dialogue in the Czech Republic and Slovak Republic seems to be well organised on paper. In practice however, there are essential obstacles preventing a constructive and powerful dialogue. Historical and ideological differences dating back to the socialist era, interdependent relationships with political parties and lack of experience, of knowledge and of commitment from social partners both at national and hospital level are hampering industrial relations. Social partners often look upon themselves and their counterparts as adversaries, instead of partners working together.

This polarisation is one of the main obstacles in the present Czech and Slovak dialogue. In the pilot activities project, the Czech and Slovak partners will try to tackle the problems by learning from other countries and EU partners. At the same time, partners from old Member States will also learn and reflect upon their systems in their confrontation with these different situations. These synergies will be facilitated by the fact that social partners from the contributing old Member States (the

Nederland, the UK and Germany) will act as advisers during each of the national seminars as well as during the study visit.

Pilot activities activities

The pilot activities will include the following activities:

1. Preparatory meeting

- Aim: to take stock of situations, problems and stakeholders in the Czech and Slovak Sectoral Social Dialogue. The basic question that the project partners will try to answer in this pilot activities is: how to influence the hospital labour market and quality of labour successfully through social dialogue. The overall target is to move from polarisation between social partners towards constructive co-operation. In this first meeting the Czech and Slovak partners will give an account of the present situation, of their real motivation for negotiations (especially from the side of employers), of specific problems and targets. To complete this picture, representatives of stakeholders such as the Departments of Health and of Employment, regional authorities and health insurance companies will be invited to this meeting. Together with partners from old Member States, the social partners will define concrete issues to be addressed in the following seminars. To support the work programme of the Social Dialogue Committee, they will focus on the topics of recruitment and retention, skill needs and ageing. The result of this meeting is a detailed description of the starting point situation, the parties involved, issues to be addressed and contributions expected from old Member State experts.
- Participants: 16 Czech and Slovak trade union and employer representatives, 3 project coordinator, 1 external expert, 3 advisers
- Programme (1.5 days):
 - Plenary sessions: situation, structure and content of Czech and Slovak Sectoral Social Dialogue
 - Motivation of social partners
 - Analysis of national experts
 - Working groups divided per country
 - Plenary session: presentation of European Social Dialogue
 - Presentation of working group results and conclusion

2. First and second seminar of pilot activities activities

- Aim: to be trained in constructive social dialogue. The social partners will discuss specific issues concerning the sectoral labour market (as defined in the preparatory meeting), linking the national and the European level of Social Dialogue. An external facilitator with relevant experience and expertise in this area will lead the discussions. He or she will guide the participants towards concrete new visions and agreements for future co-operation. National experts will provide information on good practices, contribute to the discussions and analyse the results. The partners will also discuss points of view and possible actions for the Social Dialogue Committee in Brussels, from a new Member State perspective. After the guided plenary sessions, the Czech and Slovak partners will define general targets for future co-operation in separate working groups. The result of these seminars is an improved knowledge of constructive social dialogue, a strategic vision for future co-operation in the areas discussed and thematic input for the Social Dialogue Committee.

- Participants: 16 Czech and Slovak trade union and employer representatives, 3 project coordinator, 1 external expert, 3 advisers
- Programme (1.5 days):
 - Plenary session: presentations of different models of social dialogue systems in old Member States
 - Presentation of the issues to be addressed
 - Presentation of issues on European level
 - Workshops addressing separate issues
 - Plenary session: presentation of results
 - Discussion of results and recommendations
 - Conclusion

Activities in between sessions

In between the meetings, the Czech and Slovak partners will study and analyse the results together and implement them in their ongoing work. The project partners will collect relevant information before each session and write a report afterwards.

3. Study visit

- Aim: to acquire extensive practical information about social dialogue in old Member States. The visit will take place in the Netherlands. During the study visit the Czech and Slovak partners will visit institutions involved in the Dutch Social Dialogue and joint Social Dialogue meetings, to have first hand experience on how the dialogue is conducted in this country. National experts from other states will give presentations and workshops about their systems and practice. The Czech and Slovak partners will also use this visit to further develop their national co-operation plans. The result of the study visit is to obtain practical inside knowledge about several old member state systems.
- Participants: 12 Czech and Slovak representatives, 3 project coordinators, 1 external expert, 3 advisers.
- Programme (2.5 days): the exact programme will depend on the results of the previous seminars. The following elements will be included:
 - Visits to parties involved such as Dutch social partners, StAZ, ministries of Employment and Social Affairs, Health, SER (Social Economic Council), etcetera.
 - Visit to a hospital (meeting with management, HR department, Work Council)
 - Social Dialogue meeting between Dutch social partners
 - Presentations and workshops from UK and German experts
 - Plenary discussion about Czech and Slovak co-operation plans

4. Final seminar of pilot activities

Aim: to formulate national action plans for Sectoral Social Dialogue in the Czech Republic and Slovakia. The results of all previous meetings are combined and discussed in this seminar. In plenary sessions the results will be analysed; consequently Czech and Slovak partners will draw up their respective plans in separate workshops. The plans will include a vision for future co-operation between partners and relationships with third parties such as regional and national government and health insurance companies. It will also define concrete activities and targets for the next 2 years. These plans will be monitored by the Social Dialogue Committee in a follow up project. Finally, the project partners will evaluate

the pilot activities and define good and bad practices: what worked best and what did not work. They will translate these lessons into guidelines that can be followed by other new Member States in the follow up project.

- Participants: 16 Czech and Slovak trade union and employer representatives, 3 project coordinator, 1 external expert, 3 advisors .
- Programme (2 days):
 - Plenary session: presentation of results (including input for Social Dialogue Committee)
 - Analysis by national experts and discussion
 - Workshops to draw up national plans
 - Plenary session: presentation of the plans and discussion
 - Evaluation
 - Conclusion

C. European conference

The results of the research project and the pilot activities will be presented in a final conference in Prague. It is expected to host 60 participants coming from all over Europe. The participants will discuss how the experiences from the pilot activities project can be used in the various national situations described in the research project. This will represent the basis for discussing the following phase of the present project and will contribute to enriching activities already launched by the SDC in the hospital sector. In a longer term perspective, this should result in concrete input to the work programme of EPSU and HOSPEEM. The conference will bring together social partners from old and new Member States. It will especially grant an opportunity to new social partners involved in the research project, to meet with their European colleagues and to experience the practical benefit from the European Social Dialogue.

Distribution of results

Ongoing developments, information about best practices and the final reports of the project will be analysed and published through the websites of the respective project partners. The project partners will also initiate free publicity in between and during the meetings, such as a press conference and articles in relevant national and European newspapers and magazines. Moreover, the dissemination and publishing of project findings will be reinforced by the set up of a joint social partner website following the activities of the social dialogue committee in the hospital sector. HOSPEEM and EPSU intend indeed to substitute the already existing Eurocarenet website to promote the transition from the informal to the formal status of the sectoral social dialogue.

Follow up

The Committee realises that the target to strengthen the Sectoral Social Dialogue in the EU 27 is ambitious and requires a long term strategy. Therefore the Committee will use the results of this project, i.e. the research report, the pilot activities guidelines and the contacts gained from the research project and the conference, in

a follow up project. The latter will be action oriented, along the lines of the pilot activities project in the present application, and will target the EU 27. In this follow up project the Committee will also monitor the progress made in the Czech and Slovak action plans.

5. Output

The project aim, i.e. the improvement of quality of social dialogue in the EU 27 and increased representativity of social partners in European dialogue, is an ongoing process that will take several years. Nevertheless, at the end of this first project phase there will be several tangible results:

- Research report: an extensive description of the social dialogue situation in the new Member States and candidate countries, including key issues to be tackled in the next phase and concrete contacts in the hospital sectors of the respective countries;
- Methodology: guidelines for a general approach for the improvement of social dialogue in the EU 27, derived from lessons learned in the pilot activities project with Czech Republic and Slovakia. This methodology will be applied in the next project phase;
- Action plans Czech Republic and Slovakia: concrete targets, activities and timetables to remove specific obstacles in Czech and Slovak Sectoral Social Dialogue. The progress of these plans will be monitored in the next phase;
- Conference: European conference for sectoral social partners where the results of the research and pilot activities projects will be distributed;
- Website: presents information about best practices in social dialogue, capacity-building and thematic issues of the European social dialogue in the hospital sector.
- Social Dialogue Committee: input in the areas of recruitment and retention, ageing and skill needs from new Member States' perspective.

5. Schedule of meetings

The research and pilot activities projects will be carried out in 12 months (December 2006-December 2007). The final conference and presentation of the research and pilot activities reports will take place three months after the conclusion of the last pilot activities meeting (March 2008). The project will last 15 months in total.

DATE	ACTIVITY	DAYS
December 2006	Steering Committee	1
February 2007	Preparatory meeting pilot activities	1.5
April 2007	First seminar pilot activities	1.5
June 2007	Second seminar pilot activities	1.5
October 2007	Study visit	2.5
December 2007	Final seminar pilot activities	2
December 2007	Steering Committee	1
March 2008	Final Conference	2

