

EPSU- HOSPEEM code of conduct and follow up on Ethical Cross-Border Recruitment and Retention in the Hospital Sector

Adopted on 7 April 2008

Introduction

HOSPEEM and EPSU recognize the inequalities and unnecessary burdens on healthcare systems, caused by unethical recruitment practices in the EU. The European social partners in the hospital sector want to address this situation and developed this code of conduct, the aim of which is to promote ethical and stop unethical practices in cross-border recruitment of health workers.

To achieve this, employers and workers must co-operate and work with governments, regulatory and professional bodies and other relevant stakeholders at local, regional and national level in order to protect the rights of workers, and ensure that employers get highly qualified staff. Those stakeholders should all work together to maintain accessible, high-quality and sustainable public health services, and make certain that transparency, justice and equity govern the way human resources are managed in the health care sector in Europe.

Healthcare services are an essential part of the European Social model and therefore all relevant actors must be committed to their fair and effective functioning. This implies a multifaceted strategy that has to take into account the various challenges different countries are experiencing in terms of healthcare shortages and the reasons why healthcare workers decide to migrate. Strategies which promote adequate workforce supply in all countries should be supported. EPSU and HOSPEEM therefore want to encourage, and as far as possible contribute to, the development and implementation of policies at local, national and European level with the purpose to enhance work force retention and promote accessible and high-quality health care in developed and developing countries.

On the other hand, the European social partners in the hospital sector acknowledge the possible mutual benefits of migration for workers and employers in sending and

receiving countries, deriving from the exchange of practices, knowledge and experience.

In order for cross-border recruitment to be successful and beneficial for employers and workers concerned, an appropriate framework to support ethical recruitment and retention practices should be in place. This framework needs to look against the background of the ILO-conventions and the existing legislation and the collective agreements at the issues mentioned in the principles and commitments below but also at subjects like registration and migration procedures. It has to involve different actors, such as regulatory bodies, national, regional and local public authorities. The social partners commit to work in partnership with those different actors, within their respective competencies, in order to make the process socially responsible and effective.

An important step is to establish in the European hospital sector social dialogue a full commitment to promote ethical recruitment practices at European, national, regional and local level through the present code of conduct.

Key principles and commitments:

1. High quality health care, accessible for all people in the EU

Access to health care is a fundamental human right. Everyone within the EU must have access to high quality health care, which is accessible, affordable and based on solidarity principles. National member states must be able to maintain a financially sustainable and effective healthcare system, which also depends on an adequate supply of well-trained and committed health workers.

2. Registration and data collection

To assess the impact of any policy on ethical recruitment, employers and trade unions need to have access to reliable and comparable data and information on migration and migrant health workers. The collection and analyses of these data is a shared responsibility of the national governments and social partners.

3. Workforce planning

Effective planning and human resources development strategies at local, regional and national level are necessary to ensure a balance between supply and demand of health care personnel while offering long-term prospects for employment to

healthcare workers.

4. Equal access to training and career development

In order to ensure patient safety, adapt to new, changing treatment regimes and technologies, and maintain high quality healthcare staff, it is crucial to invest across the EU in basic and post-basic educational programmes, life-long learning and continuing education of staff. Employers and workers should cooperate to facilitate skills and career development, based on qualifications, training, experiences, and skills requirements. Where appropriate, specific competence development like necessary language training needs to be put in place to enable new employees to discharge their duties.

5. Open and transparent information about hospital vacancies across the EU

Information on hospital vacancies and recruitment procedures should be available and accessible for instance by publication through internet channels, e.g. via EURES.

6. Fair and transparent contracting

Workers and employers need to be protected from false information, misleading claims and exploitation. Prior to appointment, employers need to provide accurate information on trial periods, status on termination of contract, job descriptions, required skills and qualifications, training opportunities, terms of employment (including the existence of collective agreements), pay, and workers' rights and obligations. Workers need to provide to employers correct information on their formal training and education, their qualifications and experience, their language skills, and give references when asked.

7. Registration, permits and recognition of qualifications

Information should be made available to the migrant health workers about the formal requirements to live and work in the host country prior to their arrival. Cooperation between social partners and regulatory bodies will be encouraged.

8. Proper Induction, Housing and standards of living

A sound and comprehensive induction policy developed by employers and workers must be in place for all internationally recruited workers to ensure that recruited

staff is able to settle into their new environment as quickly as possible. The policies should take into account the national, regional and local circumstances, and the specific background of recruited staff. The induction itself should at least include an in-house training on the work practices and relevant regulatory framework, but also information on local housing and community facilities.

9. Equal rights and non-discrimination

Migrant health workers have the right to fair treatment and a safe and healthy working environment, including the same employment and working conditions, social benefits and professional obligations as nationals of similar professional status and similar positions. This comprises an equal application of national legislation, collective agreements, health and safety standards and the principles as stated in the EU antidiscrimination directives (2000/43 EC 2000/78 EC) and the EU-Treaty like the right to equal pay. Migrant health workers also should enjoy within the country the same legal protection of employment.

10. Promoting ethical recruitment practices

Employers should commit to continuous promotion of ethical recruitment practices. When using the services of external agencies in this regard, only agencies with demonstrated ethical recruitment practices should be used for cross-border recruitment. In case exploitative practices occur, such as bringing workers into the country with false promises social partners need to offer the employed migrant health workers the necessary support and/or protection and take sanctions against these agencies such as removing them from agreed lists.

11. Freedom of association

Migrant hospital workers as all workers should have the right to affiliate to a trade union and/or a professional association in order to safeguard their rights as workers and professionals.

12. Implementation, Monitoring and Follow-up

Social partners have to act according to their commitments. The implementation, monitoring and follow-up procedure is of crucial importance for the effectiveness of the Code of Conduct. Therefore HOSPEEM and EPSU agree to effectively implement, through their respective members; the Code within a period of 3 years after

adoption. In this period, social partners in the hospital sector will monitor the situation and report at least once a year back to the Social Dialogue Committee about the progress made. By the end of the fourth year a report will be issued on the overall implementation.

Moreover, EPSU and HOSPEEM note that the current code of conduct is not addressing all challenges related to workforce retention in the hospital sector. They are therefore committed to develop further activities in the area of retention within their 2008-2010 work programme.

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