

## Green Paper on the European Workforce for Health

### Summary

In this opinion the Commission's Green Paper on the European Workforce for Health (COM(2008) 725) is examined.

The Green Paper aims to describe as precisely as possible the challenges faced by the EU health workforce which are common to all Member States. A further objective is to launch a debate on these issues within the EU.

This opinion also includes a reasoned objection (raised by representatives of the Social Democratic Party, the Left Party and the Green Party).

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## The Committee's proposal for a Parliament decision

### **Opinion on the Commission's Green Paper on the European Workforce for Health**

Parliament presents opinion 2008/09:SoU18 for discussion.

*Objection (Social Democratic Party, Left Party, Green Party) — reasoning*

Stockholm, 26 February 2009

For the Committee on Health and Welfare

*Kenneth Johansson*

The following members have been involved in taking this decision: Kenneth Johansson (Centre Party), Ylva Johansson (Social Democratic Party), Cecilia Widegren (Moderate Party), Magdalena Andersson (Moderate Party), Christer Engelhardt (Social Democratic Party), Lars U Granberg (Social Democratic Party), Tobias Krantz (Liberal Party), Jan R Andersson (Moderate Party), Lennart Axelsson (Social Democratic Party), Margareta B Kjellin (Moderate Party), Elina Linna (Left Party), Catharina Bråkenhielm (Social Democratic Party), Maria Kornevik Jakobsson (Centre Party), Thomas Nihlén (Green Party), Per Svedberg (Social Democratic Party), Mikael Cederbratt (Moderate Party) and Rosita Runegrund (Christian Democratic Party).

## Overview of the matter

### The matter and its handling

On 14 January 2009, the Chamber referred the European Commission's Green Paper on the European Workforce for Health (COM(2008) 725) to the Committee on Health and Welfare. The Government's explanatory memorandum on the Green Paper on the European Workforce for Health (2008/09:FPM62) was referred to the Committee on Health and Welfare on 20 January 2009.

The European Commission has called on all interested organisations to submit responses to the issues raised in the Green Paper no later than 31 March 2009.

## Main contents of the Green Paper

### Background

The background to the Green Paper is to be found in the European Commission's health strategy adopted in October 2007 and published in the White Paper 'Together for Health'. In the White Paper, a new approach was put forward for how the EU should tackle challenges such as health threats, pandemics, the burden of lifestyle-related diseases, inequalities and climate change in an enlarged EU of 27 Member States<sup>1</sup>. The strategy aims to foster good health in an ageing Europe by promoting good health throughout the lifespan, by protecting citizens from health threats and by supporting dynamic health systems and new technologies.

The Green Paper aims to describe as precisely as possible the common challenges faced by the EU health workforce. Some of the examples given are the demography issue (ageing global population and ageing health workforce), the weak attractiveness of jobs in healthcare and public health to the younger generation, and the unequal mobility within the EU. A further objective of the Green Paper is to identify where the Commission believes that further action can be undertaken and to launch a debate on it.

### Factors influencing the workforce for health in the EU

The Green Paper deals with various factors influencing the workforce for health and the main issues to be addressed.

In particular, the following fields are highlighted in the Green Paper:

- demography and the promotion of a sustainable health workforce;
- public health capacity;
- training;
- mobility of health workers within the EU;
- global migration of health workers.

The Commission proposes a range of possible areas for action under each section, including:

- assessing levels of expenditure on the health workforce;
- ensuring better working conditions for health workers;
- providing for a more effective deployment of the available health workforce;
- strengthening capacity for screening, health promotion and disease prevention;
- focusing on health professionals' continuous professional development (CPD);
- providing management training for health professionals;
- fostering bilateral agreements between Member States to take advantage of any surpluses of doctors and nurses;
- supporting the World Health Organisation (WHO) in its work to develop a global code of conduct for ethical recruitment.

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<sup>1</sup> Cf. Opinion 2007/08:SoU10 of the Committee on Health and Welfare on the Community health strategy for the period 2008–2013.

### **The impact of new technology**

In the Green Paper it is stated that progress in healthcare depends upon scientific and technological advances. New technology affects what can be achieved and how healthcare is organised and provided. The introduction of new technology requires that health workers are properly trained.

The possible action proposed by the Commission includes ensuring suitable training to enable health professionals to make the best use of new technologies and encouraging the use of new information technologies.

### **The role of health professional entrepreneurs in the workforce**

Some health professionals, such as physicians, psychologists, dentists, podiatrists, physiotherapists and occupational therapists, work as entrepreneurs running their own practices or medical centres and employing staff. In the Green Paper it is stated that the Commission's policies to improve the business environment in Europe and to support and encourage entrepreneurship have an impact on these activities.

The possible action proposed by the Commission includes encouraging more entrepreneurs to enter the health sector in order to improve planning of healthcare provision and to create new jobs and examining the barriers that exist to entrepreneurial activity in the health sector.

### **Cohesion Policy**

Development of the EU health workforce is also linked to Cohesion Policy. Under the current legal framework it is possible to use the Structural Funds to develop the health workforce. The Community Strategic Guidelines for Cohesion, which define the priorities for the Structural Funds for the 2007–2013 period, contain a section describing the aim to 'help maintain a healthy labour force'. The possible action proposed by the Commission includes making more use of the support offered by the Structural Funds to train and re-skill health professionals and enhancing the use of the Structural Funds for infrastructures to improve working conditions.

## Examination by the Committee

### **Explanatory memorandum**

The Government has drawn up an explanatory memorandum (2008/09:FPM62) concerning the Green Paper.

In that explanatory memorandum, the Government welcomes the Commission's public consultation in this field and states its view that an intra-Community discussion on how the challenges referred to in the Green Paper can and should be tackled is likely to be valuable.

### **Principle of subsidiarity**

According to the Government's explanatory memorandum, there is at this juncture no reason to be concerned about the principles of subsidiarity and proportionality since the Green Paper only refers to collecting the views of interested parties on the ideas put forward for possible areas for action. The Committee shares this view.

### **The Committee's position**

The European Commission has presented a Green Paper on the European Workforce for Health. The Green Paper aims to describe as precisely as possible the challenges faced by the EU health workforce which are common to all Member States. The reason for the presentation of the Green Paper is to provide a better basis for considering what could be done at EU level to help those responsible for providing healthcare to address these future problems. A further objective is to launch a debate on these issues within the EU.

The Committee is of the opinion that cooperation at EU level in the field of healthcare is positive, on condition that it takes place having due regard to the principle of subsidiarity and the national responsibility to provide and organise health services. Initiatives should only be taken at EU level on cross-border issues contributing to a positive exchange of good practices.

A range of challenges and proposals for action are put forward in the Green Paper. The Committee welcomes the initiative for a discussion in this field. The Committee would in particular like to emphasise the issue of the mobility of health workers within the EU and the right of citizens to access healthcare in other Member States. The proposed Directive on the application of patients' rights in cross-border healthcare is an important part of this work (cf. COM(2008) 414 and explanatory memorandum 2007/08:FPM134). The Directive is expected to make it easier for individuals seeking healthcare in another Member State, in that the rules will be clearer and patients will be given more information and advice on the conditions applicable to cross-border healthcare. In this way, the position of patients and their opportunities to enforce their rights under the EC Treaty will be reinforced. Increased opportunities for patients to have access to healthcare may also make the conditions more conducive to the operations of individual service providers, which could contribute to the development of this important part of the Swedish and European service sector. The Committee notes that this issue has been prioritised by the current Czech Presidency of the EU.

The Committee also believes that, as part of the ongoing work in this area, it would be worthwhile examining which barriers exist to entrepreneurial activity in the health sector.



## Objection

The Committee's proposal for a Parliament decision and the position it has taken has given rise to the following objections. The point in the Committee's proposal for a Parliament decision to which this section refers is indicated in the heading.

### **Opinion on the Commission's Green Paper on the European Workforce for Health — reasoning (Social Democratic Party, Left Party, Green Party)**

by Ylva Johansson (Social Democratic Party), Christer Engelhardt (Social Democratic Party), Lars U Granberg (Social Democratic Party), Lennart Axelsson (Social Democratic Party), Elina Linna (Left Party), Catharina Bråkenhielm (Social Democratic Party), Thomas Nihlén (Green Party) and Per Svedberg (Social Democratic Party).

#### *Position*

We are of the opinion that cooperation at EU level on various healthcare-related issues is positive, on condition that it takes place having due regard to the principle of subsidiarity and the national responsibility to provide and organise health services.

The Green Paper deals with a range of common challenges to the European workforce for health. We would like to emphasise the importance of three of these in the ongoing work in this area.

- The challenges relating to demography and the promotion of a sustainable health workforce. The position of women in the labour market — which is stressed in the Lisbon Strategy and the Roadmap for Equality — is of importance here.
- The challenges relating to public health. In our view, it is important to tackle health inequalities and address the needs of vulnerable groups. In this context, work relating to the Social Agenda, which promotes the social dimension of the Lisbon Strategy, is of importance.
- The challenges relating to the mobility of health workers within the EU, including the training and recruitment of health workers.

ANNEX

List of proposals discussed

The European Commission's Green Paper on the European Workforce for Health (COM(2008) 725).

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