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FOR QUALITY! PROJECT

EUROPEAN PROJECT FOR QUALITY OF JOBS AND
SERVICES IN PERSONAL CARE AND HOUSEHOLD SERVICES

Regional Seminar Report.
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1. OBJECTIVES AND METHODOLOGY

The **FOR QUALITY! PROJECT** carries out research on **qualifications and quality of work and services in personal care and household services (PHS)**. It also supports a stakeholder **dialogue between organisations** active in personal care household services through a partnership **representative of the variety of workers, private service employers** in PHS and local public service providers. This dialogue aims to **promote quality of services and jobs** (working conditions and qualifications) in the services covered by the project. The project will contribute to making **employment in PHS** more attractive and creating **more quality jobs** and encourage the movement of workers from the black or grey economy to the **formal economy**, and better protecting vulnerable people.

The For Quality! project is implemented in the framework of the PROGRESS Programme, from November 2014 to April 2016.

The project partners are:

- European think & do tank Pour la Solidarité - *PLS* (project leader) (www.pourlasolidarite.eu)
- Office Européen de Recherches Sociales (*ORSEU*) (www.orseu.com)
- European Federation for Services to Individuals (*EFSl*) (www.efsi-europe.eu)
- Social Services Europe (*SSE*) (www.socialserviceseurope.eu)
- European Research and Development Service for the Social Economy (*DIESIS*) (www.diesis.coop)
- European Social Network (*ESN*) (www.esn-eu.org)
- European Regional Organisation of Union Network International (*UNIEUROPA*) (www.uniglobalunion.org)
- European Federation of Food, Agriculture and Tourism Trade Unions (*EFFAT*) (www.effat.org)
- European Federation of Public Service Unions (*EPSU*) (www.epsu.org)

The project addresses **5 related issues** and how they influence the quality of work and services: **working conditions, coordination of services** for person-centred care, **professional qualifications, quality of life** for services users and workers, **impact of the economic** and financial crisis on the quality of jobs and services. They are analysed for 2 types of PHS: personal care services (child care, elderly care, care for people with disabilities) and household services.

The activities are: **research in 11 EU countries** on working conditions, qualifications, coordination and the quality of services in household and personal care services; **3 regional seminars** with representatives of household and personal care services from the 11 States to identify qualifications, working conditions needs and quality of services, and share good practices; **a comparative report; recommendations for policy makers; a toolkit presenting good practices** and their transferability; **a website**; and **a European conference**.

The **national research** activities is carried out for **11 countries**, divided into **3 groups** for the regional seminars, according to the similarities of these countries PHS systems:

1: Italy, France, Belgium, Spain (Regional seminar n°1, Rome, 6 May 2015)

2: United Kingdom, Sweden, Netherlands, Finland (Regional seminar n°2, Brighton, 27 May 2015)

3: Czech Republic, Austria, Germany (Regional seminar n°3, Vienna, 22 September 2015)

These countries have been chosen to represent the **different contexts** in which personal care and household services evolve in Europe. The seminars are transnational: representatives from each group of country are invited, in order to address and compare the situation and challenges of quality of work and services in personal care and household services in their country.

The regional seminars gather about **50 stakeholders** in particular: national employers, trade unions, representatives of users, public authorities of each country of the group - any other relevant European or national stakeholder.

Its aims is to discuss the countries situations and to improve the national reports, to work on **policy recommendations**, and to collect good practices and their criteria of transferability across Europe.

2. GENERAL OVERVIEW

The 1st Regional Seminar of the For Quality! Project was held in Rome (Italy) on 6th of May 2015. This first seminar aimed to present the draft national reports realised by ORSEU and PLS for the following countries: **Italy, France, Belgium and Spain** and to collect feedbacks and comments from the participants to fill in gaps to and to make policy recommendations. 44 people attended the seminar and participated to the national workshops, representing several actors of this sector: trade unions, cooperatives, private employers, senior managers of social services in local authorities, etc.

The seminar was **structured** as followed:

1. Presentation of the national reports to the whole audience (by ORSEU and PLS)
2. National working groups/workshops to discuss:
 - The national reports (improvements, corrections)
 - Good practices and their transferability
 - Policy recommendations
 - Answer questions raised by the project (see below)
3. Restitution of the discussions in the working groups in front of the whole audience

During the first plenary ORSEU and PLS presented a summary of the national reports that each participant already had received before the meeting translated in their own language.

The discussion was developed in the second part of the seminar, during the national workshops. The 4 facilitators of the latter had to deal with several points:

1. To collect the **participants' comments and feedbacks** answering to the following questions:
 - *What is the level of the quality of job and services in the PHS sector in the countries at stake?*
 - *How can this situation be improved?*
What are the barriers? How to improve quality of social partnerships with the aim to improve the quality of jobs and services in the PHS sector?
2. To discuss about good practices proposed by one or more participants of the working group and the possibility of their transferability
3. Policy recommendations to elaborate at national and European level.

The following chapters describe the development of each national workshop as well as the good practices presented and the recommendations collected.

3. WORKSHOPS RESULTS

3.1 Remarks from participants to the workshop on the ‘quality of jobs and services in the PHS sector in France’

Facilitator: Marie LEPRÊTRE (PLS)

Participants: Francesco ALAMBI (Doubs Country Council), Alexia BELLEMIN (ESN), Isabelle DELAQUIS (Réseau handicap domicile), Cyril DESJEUX (Handeo), Frédéric FAVRAUD (FEC-FO), Robin HEGE (Fédération entraide protestante), Maryvonne NICOLLE (CFDT sante sociaux), Pierrette P. PEREZ (FEC-FO), Evelyne ROSSIGNOL (CGT), Clara SCHMID (CNSA), Eric SCHNEIDER(FESP)



A first positive feedback was given on the ‘content’ page of the report, where the different steps of the methodology were approved by some participants. However, most of the latter agree that the part focusing on the quality of services – and thus of the quality from **the point of view of the users – should be put more at the centre of the report**, in particular the fact that some users do not choose to have recourse to such services.

Participants would value the addition of elements on the **quality of the management/managing staff**, the implementation of services and the **controls** thereof.

They also identified a lack of focus on the various financial systems existing and their contributions to the different schemes promoting personal and household services in France.

The **disconnection between personal services and household services** also raises questions as the limit is sometimes very thin between health services and household services, i.e. between care services and strictly non-care services. In line with the recommendation of focusing more on the quality of services from the users’ point of view, a participant representing Handeo suggested an existing report on the accessibility to services for parents of disabled children, as they do not always get the possibility to access services when there is no dedicated funding (see Handeo’s observatory). It is also stated that the part on the **accessibility of services** is ‘deformed’ in the report when it comes to the description and analysis of the accreditation process. Besides, there are **evaluation labels** that have been put in place; they are worth mentioning when assessing the quality of services.

The law on “La Prestation de Compensation du Handicap” remains missing, especially considering that the “allocation personnalisée d'autonomie” (APA) is indeed addressed. As a matter of fact, the presentation given by Clara Schmid highlights the fact that the number of beneficiaries of the APA is expected to significantly increase in the coming years/decades.

From the perspective of an effective management, another point mentioned is the problem, in the PHS

sector, of having overqualified workers assigned to tasks requiring less qualification. In the Doubs area, organisations of the sector that are the most in deficit are those who regularly employ workers from the C category to execute work corresponding to the A category (higher qualifications/skills compared to the tasks to be executed). This results from the **difficulty to attract new workers**. One of the solutions found is to offer training to workers, which leads to the above-mentioned situation. There is thus a need **to increase the value** of the jobs in the PHS sector. As a matter of fact, the sentence “revenus faibles étant données les qualifications” (low income according to qualifications) from the report is criticized as it does not acknowledge the value of the work thus performed.

Regarding the **harshness of work**, participants add the following items: **lack of technical assistance**, the fact that there is a coordinator only in case of palliative care and that there is a ‘**glissement de tâches**’ - i.e., the fact that some workers are asked to do (care-related) tasks that do not fall within their responsibility. The harshness of work also finds its source in the **travelling needed to go from one home to another**. Whether such travels between missions are paid or not depends on the territories (départements); the territories which do not have ‘plans d’aides à la demi-heure’ do not finance such travels.

The question is also raised of the role of the search for quality and who should finance it. Indeed, the **crisis** has had an impact on the sector, with an increase on the number of **family caregivers** - by opposition to workers providing personal and/or household services. However, no data is available on this increase. The crisis has triggered other questions debated during the workshop, like the possibility to give priority to some beneficiaries for the access to financing PHS.

Another aspect that strikes significantly the PHS sector in France is a significant **turnover** phenomenon. Participants shall send data on this aspect. It is actually considered as a brake for investing in the qualification of personnel in the sector. Some participants shall also send data on **work accidents** per sector of activity, thus showing the situation for the PHS sector.

The report mentions the fact that the harshness of the job is an **obstacle towards full employment** of workers. Participants argue that this is not the only one: having to deal with more than one employer also increases the chance not to look for more hours of work. Of course, it is also accepted that for a part of workers, working part-time is actually a choice which finds its explanation in the family obligations a worker can have, especially in the case of workers being women with children. (Sometimes, the rationale behind such choice can also be the willingness not to lose benefits: poverty traps). Anyhow, considering that the multiplication of short-term contracts also contributes to the harshness of work, the employment relationship is an important component defining the willingness/possibility to work full time.

A point was also made on the necessity not to oppose the indispensability of offering PHS to that of collective structures that offer care to persons in the need (e.g. hospitals).

In terms of **bibliography**, Robin Hege recommends the works of Florence Wéber.

3.2 Remarks from participants to the workshop on the ‘quality of jobs and services in the PHS sector in Belgium’

Facilitator: Marie DUBOST (SSE)

Participants: Sandrine BOYALS (Alzheimer unit – Local authorities) , Guy CRIJNS (CSC), Bart LABEEUW (ACV voiding en diensten), Mathias MAUCHER (EPSU), Barbara MELARD (Social services and health – Local authorities), Angelique MONSEREZ (Femilie hulp), Johan NELISSEN (ACV voiding en diensten), Olivier NYSSSEN (CGSP ADMI), Denis STOKKINK (PLS), Joyce VANSTEEKISTE (Den achtkanter).



The main critique received about the report was that it highlighted only one **delivery mechanism for PHS**, and the stakeholders felt that this was overlooking the services organised at regional/local level, which tend to be **more specialised towards more vulnerable groups**, and are generally perceived to be of higher quality because of their specific orientation and the higher level of qualification of their staff.

While the Titre-Service (TS) system has facilitated **great progress in reducing undeclared work**, protecting both the recipient of the service and the workers; and as such, it was heavily (almost exclusively) featured in the Belgium country report. It was eventually agreed to amend the country report using submissions from the stakeholders to paint a more complete picture of other existing systems.

National / Regional / Local regulation in long-term care and household services

Although they have different missions, **both kinds of systems are complementary to one another**. For example service users that need workers with more specific knowledge, one of those systems will respond better than the first, which is available to any household and not really specialised.

However they are not coordinated and integrated enough for service users to be quickly re-oriented towards the most appropriate care for their evolving needs.

Quality of services

There is no uniform **regulation of quality of services in the PHS sector**. In the TS system, laws of offer and demand essentially regulate the market; whereas in the other regional systems, service providers are more likely to apply their own quality indicators and regulations. Additionally, when service providers respond to a tender for the delivery of PHS to a city or region, they will typically promise a certain level of quality in their offer, and that would be one of many criteria for the selection of the successful bidder..

Employment quality and opportunities for career development

The issue of **career development** and access to training for PHS workers was raised by multiple stakeholders around the table.

3.3 Remarks from participants to the workshop on the ‘quality of jobs and services in the PHS sector in Italy’

Facilitator: Dorotea Daniele (DIESIS)

Participants: Fabiano SPERA (Consorzio Meuccio Ruini), Marisa DA FORNO (Italia Lavoro); Elena VANELLI (CISL settore assistenza e colf/badanti); Gianluca RAIMONDO (Consorzio Pegaso); Anna HARVEY (Uni Europa); Francesca de RUGERIS (CGIL settore sanità); Silvia CANDIDA (CISL Funzione pubblica); Silvia POGI (Cooperative ARCA), Teresa INNOCENTI (Cooperative ARCA).



All the participants remarked that the report does not portray the **Italian situation**, which is much more **complex**. The report focuses on vouchers, which are not very important in the sector. In Italy, home assistance is public (normally managed by private organisations, such as social cooperatives) or private (families directly employ housemaids or caregivers).

In order to portray the Italian situation, it is necessary to consider the home assistance services addressed to elderly people, children, family and home services.

To better **define family services** the methodology proposed in the Italia Lavoro report on «white jobs» could be used. In fact, it is important to define who provides services and contracts among the parties. It is needed to define who provides the services, because there are different kinds of services and the boundary between assistance and social and healthcare services is evanescent and it is easy to cross them.

In Italy the **contractual status describes the professionals**. The labour contract is a good regulatory instrument which includes a precise description of the mansions. Once the services are defined, it is necessary to define the qualifications. Beyond the regional differences, it must be considered that, apart from the home assistant, other professionals have been introduced after the law 328/2000. The housemaids are framed in the housemaids' collective contract. The OS (*operatori sociali* – social workers) refer to different kinds of collective contracts, as the one of social cooperatives, the UNEBA contract, the one of Anaste and others. Presently, OS have a national regulation, which goes beyond the previous regulations. The problem is still the **training**, because the number of training hours is different at regional and national level. Training is important because the training level influences the contractual status and, as a consequence, the quality of the work.

In Italy a **minimum or medium wage does not exist**, because the wage is defined by the contract.

The group discusses some 'hot' issues, such as the question of financing the services since the non-self-sufficiency Fund has been only partly re-financed and the question of vouchers on which opinions are mixed. The voucher system could be dangerous because the supply side is very patchy. There may be private organisations that may not give all the necessary guarantees in terms of quality and respect of rules.



Experimentations are also useful but must be supervised. They tend to qualify the sector but also to show how evanescent the boundaries are. At the San Camillo hospital in Rome and in another hospital in Genova they are trying to reduce the impact of the hospitalization through some controlled interventions with home assistants. It is difficult to segment the divisions among professional qualifications without seeing what happens in the reality and how evanescent the boundaries are between social and health

assistance.

3.4 Remarks from participants to the workshop on the 'quality of jobs and services in the PHS sector in Spain'

Facilitator: Nicolas FARVAQUE (ORSEU)

Participants: Roberto MARTIN PÉREZ (Confesal), Alicia SANZ NOVALVOS (Spanish association of services to Individuals), Marisa ORTIZ ARUMI (Care service Barcelona Programme), Jesus Antonio FERNÁNDEZ BÉJAR (CC.OO), Paloma VAZQUEZ LASERNA (CC.OO), Carmen BRAVO SUESKUN, (CC.OO), Pilar NAVARRO BARRIO (UGT).

A first remark from all the members of the group was to **emphasize the clear difference between, social services defined by the dependency law and the Royal Decree regulating the work of domestic servants recruited at home**. Each corresponds to different models and it does not make sense to embed both these distinct sectors into the encompassing "PHS" sector.

On the one hand, the 2006 law of dependence and social services mainly covers the public sector (as well as public-private partnership). It promotes personal autonomy and care for people in situations of dependency. This Law was a major innovation in the regulatory landscape of social protection in Spain. As far as employment is concerned, there are collective agreements in this field, at national, provincial and regional levels. On the other hand, when it relates to the field of domestic employment, there is the regulation of Royal Decree 1620/2011 on the employment of special nature concerning domestic servants and domestic workers. It regulates the hiring within a relationship of private nature between individuals. Several improvements have been proposed to avoid confusing data in the report.

Another important element for the Spanish group has been to insist on the **context of crisis** which has put a brake on the development of the two sectors. With regard to the law of dependence, its development and implementation schedule has been delayed for several groups and it is waiting to be integrated in the system. With regard to the context of domestic workers, the crisis has been reflected in a lower number of hours contracted by individuals due to lower income. This has led to relapse of the underground economy.

Regarding this issue of professionalization, there are professional certificates which are necessary to obtain for public local social services to develop. The Dependency law stipulates the minimum requirements in terms of qualification depending on the intensity of care needed by the person. Ms Arumi from the Barcelona Provincial Council insisted on the challenges created by the high staff turnover: many employees who have received training are looking for better jobs in other sectors.

Concerning domestic workers, there is a certificate of professionalism, not being currently required for the exercise of the profession at the moment. It depends solely on the private will. The Royal Decree has provided several advantages to domestic employees who are not really recognized as “workers” and therefore benefit from real rights and duties as any other workers.

Regarding the **accessibility of services**, as regards the law of dependence, the issue is the differences detected concerning territorial equity (Co-payment, intensities... etc.).

4. POLICY RECOMMENDATIONS

France:

In terms of **recommendations**, alternatives to the home of users are suggested to be addressed.

Besides, participants suggest to insist more on the **informal provision of labour** - which has most certainly increased during the crisis – in particular concerning the plan Borloo and the interrogations some may have on its adequateness to tackle the problem of undeclared labour.

Participants all committed to send their feedback by using the track change on the report that the facilitator would send under the Word format after the workshop.

Belgium:

Stakeholders encourage governments to **make specialisation training more readily available and affordable** to PHS workers, using subsidised schemes, where appropriate.

Likewise, stakeholders encourage the governments to **facilitate bridges between PHS work at various levels, and related professions** (caring for specific patient groups, medical professions such as nursing, etc.), so that workers may have several options for their professional development, and make the profession a more valued and attractive one.

While some other care-related professions benefit from a clear labour **framework law regarding the benefits and professional development of employees**, including training access, most PHS workers do not have this advantage; this is another area for improvement.

Italy:

In terms of recommendations, it can be proposed the need to make the **training uniform** in order to have equality in all the Italian regions and to have the same **levels of social services provisions** on the national territory. The Italian group also recommend to introduce **family subsidies** and to **simplify the system of PHS**.

Spain:

In terms of **job quality**, the group has **emphasized the importance of training taking well into account the clear difference between the two sectors: social services and domestic work**. It is necessary to properly define the different jobs in the sector, avoiding therefore confusion about the skills, aptitudes, functions.

5. GOOD PRACTICES

During the seminar were collected several best practices, from the countries involved (Spain, Italy and France). In order to present them and their activities, the umbrella organisations are working on a common template. Later on it will be possible to find the best practices description on For Quality! Project website (www.forquality.eu).

Meanwhile it is possible to find more information about the organisations on their website. Below there is a list with the organisation name, the contact person and website.

France:

Doubs County Council, Mr Alampi, www2.doubs.fr

CNSA Caisse Nationale de Solidarité pour l'Autonomie, Ms Schmid, www.cnsa.fr

Spain:

Diputació de Barcelona Programa d'Atenció Domiciliaria, Mrs Arumi, www.diba.cat

Italy:

Pegaso Network, Gianluca Raimondo, www.pegasonet.net

Cooperativa Arca, Teresa Innocenti, www.arcacoop.org

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