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DRAFT REPORT

on pathways for the reintegration of workers recovering from injury and illness
into quality employment
(2017/2277(INI))

Committee on Employment and Social Affairs

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MOTION FOR A EUROPEAN PARLIAMENT RESOLUTION

on pathways for the reintegration of workers recovering from injury and illness into quality employment (2017/2277(INI))

The European Parliament,

- having regard to its recent pilot project on health and safety of older workers carried out by the European Agency for Safety and Health at Work (hereafter ‘EU-OSHA’),
 - having regard to the EU-OSHA 2016 report entitled ‘Rehabilitation and return to work: Analysis report on EU and Member States policies, strategies and programmes’,
 - having regard to the European Foundation for the Improvement of Living and Working Conditions’ (Eurofound) 2014 report on ‘Employment opportunities for people with chronic diseases’,
 - having regard to Business Europe’s 2012 paper on ‘Employers’ practices for Active Ageing’,
 - having regard to Rule 52 of its Rules of Procedure,
 - having regard to the report of the Committee on Employment and Social Affairs (A8-0000/2018),
- A. whereas the proportion of older workers in the total working-age population is rapidly increasing and is expected to reach 21 % in 2020; whereas ageing increases the risk of chronic mental and physical health disorders, illnesses and problems;
- B. whereas ageing is one of the main European social challenges; whereas there is thus a need for policies to foster active ageing and promote employability, employment and enabling people to stay active for longer;
- C. whereas the reintegration of workers into labour markets is also deeply interconnected with the rising incidence of chronic diseases, disabilities and mental health disorders, as well as injuries and illnesses;
- D. whereas good occupational safety and health practices are crucial for a productive and motivated workforce, which helps companies remain competitive and innovative and helps to maintain valuable skills and work experience, reduce staff turnover and prevent exclusion;
- E. whereas the improved health and reintegration of workers increases the overall wellbeing of society, has economic benefits to Member States, employees and employers and helps to retain skills that would otherwise be lost;

Prevention and early intervention

1. Considers that there is a strong case for improving the management of sickness absence in the Member States as well as for making workplaces more adaptable to chronic

conditions and disabilities;

2. Takes the view that the forthcoming EU Strategic Framework on Health and Safety at Work post 2020 should further prioritise investments through EU funds aimed at prolonging healthier working lives and supporting recruitment and return to work;
3. Encourages Member States to engage fully in the forthcoming 2020-2022 EU-wide campaign on the prevention of work-related musculoskeletal disorders (MSDs) and to find innovative non-legislative solutions; calls for the active involvement of the Member States in the dissemination of information provided by the EU-OSHA;
4. Takes the view that implementing measures for psychosocial risk prevention in a systematic way should be a crucial feature of modern workplaces; calls on the Member States to provide support to businesses in managing these risks;
5. Points to the fact that early intervention is a critical success factor in occupational rehabilitation;

Return to work

6. Recognises that the integration of long-term unemployed individuals into employment through individually tailored measures is a key factor for fighting poverty and social exclusion and also has other preventative psychosocial benefits; stresses that integrating persons returning to work after illness has a double effect: benefiting the individual as well as supporting the economy;
7. Takes the view that the Member States should take a positive and work-oriented approach to workers with disabilities, older workers and those who have suffered an illness, focusing on early evaluation of the individual's remaining capabilities and the adaptation of the workplace, taking into account the person's occupational profile and socio-economic situation; encourages Member States to improve provisions in their social security systems that would favour the system of return to work;
8. Encourages in this regard the use of the World Health Organisation's (WHO) International Classification of Functioning, Disability and Health (ICF) across all relevant measures and policies; shares the view that disability is a health experience that occurs in a context; takes the view that ICF is best suited for EU-wide statistical comparison;
9. Calls on the Commission and the Member States to develop and provide guidelines on best practices and coaching to employers on how to develop and implement reintegration plans;
10. Calls on the Member States to provide external support to ensure guidance and technical support for small and micro-enterprises with limited experience in occupational rehabilitation and return-to-work measures;
11. Takes note of the success of the case-management approach of various programmes enabling workers to return to work and stresses the need for individualised support from social workers or designated counsellors tailored to the individual's situation;

12. Stresses the key importance of communication and a multidisciplinary and cooperative approach between all stakeholders (workers, medical doctors, social services, employers) for the successful physical and occupational rehabilitation of workers; lauds the success of the non-bureaucratic and practical approach of the Austrian fit2work programme with its emphasis on easy communication accessible to all workers (such as the use of simplified language);
13. Believes that financial incentives should be in place to keep people with reduced working capacity in employment; if medical conditions allow, strongly encourages the integration of workers through re-training and upskilling into the open labour market;
14. Calls on Member States to introduce policy frameworks including incentives for employers and active labour market policies to support the employment of persons with disabilities and chronic illnesses, including the breaking down of barriers in the workplace;
15. Recognises in this regard that flexible working arrangements, such as telework, flexitime and reduced working hours, play an important role in returning to work; stresses the importance of encouraging early return to work (if medical conditions allow) through flexible working arrangements and reduced working time arrangements, which could be accompanied by partial sickness benefit;

Changing attitudes towards the reintegration of workers

16. Calls on the Commission and the Member States to ensure in their communications, guidelines and policies that employers see the reintegration process as an opportunity to recover workers' skills, competences and experience; takes the view that employers are full participants in the return-to-work process from the start and are part of the decision-making process;
17. Stresses that raising awareness of occupational rehabilitation and return-to-work policies and improved company culture are critical success factors in the return-to-work process and fighting negative attitudes;
18. Commends enterprises that have initiatives to support people with health problems or reduced working capacity such as comprehensive preventative programmes, modification of tasks, training and re-training; strongly encourages more enterprises to get involved;
19. Calls for better understanding of challenges leading to fewer opportunities for people with health problems, such as a lack of understanding of the health problem, perceived low productivity levels and social stigma;
20. Takes the view that EU-wide campaigns play an important role in shifting popular opinion;

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21. Instructs its President to forward this resolution to the Council and the Commission.

EXPLANATORY STATEMENT

Life expectancy in the EU is changing the age pyramid. In 2015, life expectancy at birth in the EU-28 stood at 83.3 years for women and 77.9 years for men. However, healthy life years free from the limitations tend to be shorter, particularly in some Member States. Longer life expectancy combined with the increasing average age of retirement leaves Europe and Member States with significant challenges not only for our health systems but also for our labour markets. The rapporteur seeks to find an approach that will help identify the policy options needed to shape our labour markets in order to become a) more inclusive and responsive to the needs of ageing and ailing society and b) less prone to the loss of skills a result of inactivity in the labour market. The Rapporteur has attempted to do this by proposing measures to help streamline the reintegration of workers after an injury or illness back into the labour market.

The rapporteur shares the view that the rehabilitation of workers consists of three different aspects: first medical, secondly vocational (or occupational) and thirdly social. The report mainly focuses on the occupational rehabilitation and the complexities faced by both employers and employees seeking to return to work (procedures and initiatives to facilitate the workplace reintegration). At the same time the report seeks to highlight the fact that that successful rehabilitation and return to work encompasses all three aspects.

The report also gives recommendations to encourage Member States to learn from examples of good practices and approaches, and at the same time tries to identify areas where the EU can bring added value and know-how to further promote policies that will ultimately help Member States promote the reintegration of workers into the labour market.

The rapporteur believes that the EU can add value by helping Member States develop:

- preventive measures
- comprehensive policy responses in the Member States including early intervention, institutional cooperation of all relevant stakeholders, individualised approach
- a cultural shift: the conscious awareness of the need to care for these workers, cultivating the positive perception of these workers in the society and actions towards workers' lifelong psychosocial wellbeing.

Additionally, the report examines the strong economic case for the need for policies to help workers return to the open labour market. For example, organisations with more age balanced teams experience less staff turnover and can be more productive as they draw from a larger pool of skills and experiences. According to Business Europe, staff surveys tend to prove that older workers show a greater commitment to their workplace and can exceed the performance of younger workers in relation to problem solving and leadership qualities. Positive effects hold true not only for age but also in diversity. The return to work is thus both about self-realization and an independent life but it also demonstrates a positive economic impact on society and resulting is lower level of dependence on Member States social systems. As ILO¹ research confirms, people with disabilities make dependable employees with comparable productivity, lower accident rates and higher job retention compared to company's general workforce. They represent an untapped source of skills and talent, including technical skills if they have access

¹ http://www.ilo.org/wcmsp5/groups/public/---ed_emp/---ifp_skills/documents/publication/wcms_167204.pdf

to training and transferable problem-solving skills developed in daily life. People who become disabled while working often have valuable experiences in addition to their formal skills qualifications.

As pointed out by EU-OSHA in its work, returning to work can be a complicated process for businesses, involving not only budget considerations but also know-how. For smaller companies, the process can become particularly difficult. External technical and financial support can help employers to develop individual measures and establish reintegration pathways for people returning to work following a sickness absence. Well deployed financial support from the EU funds could play a significant role in supporting the change. Any support, however, needs to go hand in hand with genuine change in the organisational culture on the side of the businesses.

The EU has a significant role to play in supporting and encouraging national labour market reforms, sharing innovative ideas and helping to create successful policy frameworks. The rapporteur shares the view encompassed in the EU Occupational Safety and Health Strategic Framework that legislation has proven its value in providing the EU with high level of protection for workers as well as common body of definitions, standards, methods and preventive tools in the area of OSH. However, given the diversity of models, Member States should also use benchmarking, identification and exchange of good practices, awareness-raising, voluntary norms and user-friendly IT tools to make a difference.

Finally the rapporteur also wishes to draw attention to the prevalence of psychosocial risks in the workplaces and takes the view that interventions are needed to tackle these risks as well as the need to continuously fight the negative stigma associated with such dysfunctions.