



ESCO

**Presentation on the European
Skills/Competences, qualifications and
Occupations (ESCO)**

Current situation and next steps – focus on

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1. ESCO

Skills/Competences, qualifications and Occupations (ESCO)

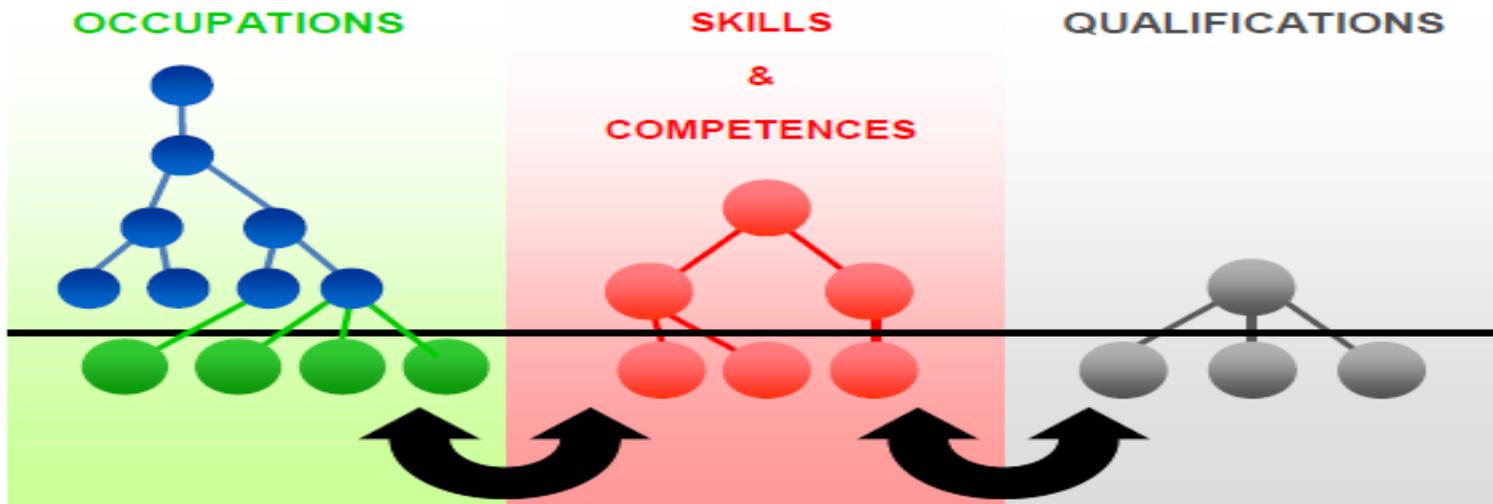


1.1 Index

- ESCO is the **multilingual classification of European Skills, Competences, Qualifications and Occupations** relevant for the **EU labour market and education and training**.
- ESCO is part of the **Europe 2020 strategy**.
- To help **job matching**
- Enabling **mobility**
- Facilitate dialogue between the labour market and education/training
- Linked to relevant **international classifications** and frameworks, such as NACE, ISCO and EQF



ESCO



- Legend:**
- ESCO Occupation
 - ESCO Skill/Competence
 - ESCO Qualification
 - ISCO Occupation group



1.2 Why? Europe 2020

An Agenda to new skills and jobs

"To **ensure** that the **competences required** to engage in further learning and the **labour market are acquired** and recognised throughout general, vocational, higher, and adult education and to **develop a common language and operational tool** for education / training and work: a European Skills Competences and Occupations framework (ESCO)"



1.2 Why?

Online job portals normally use one classification system and one language. It's difficult to exchange data between them, particularly when the systems are based in different countries. This makes it harder to find the right job abroad.



1.3 Who?

ESCO governance

DG Employment, Social Affairs and Inclusion and DG Education and Culture – supported by the European Centre for the Development of Vocational Training and by external stakeholders

Which bodies support the Commission in developing ESCO?

The Commission is supported by several bodies:

- ESCO Maintenance Committee;
- The Sectoral Reference Groups
- The Cross-Sector Reference Group



1.3 Who?

Who are the main stakeholders?

- employers' organisations
- trade unions
- employment services
- education institutions
- training organisations
- statistical organisations
- European and national sector skills councils and networks
- **European Umbrella organisations (i.e. ER-WCPT)**



1.3 Who benefits?

- Jobseekers
- Education/training institutions
- Employers
- Online job portals (first use for national employment agencies - under discussion to open for private agencies in the future)



1.4 How?

- By means of domain experts that come together through SREF
- 27 Sectoral groups – 11 established
- Review occupations, skills and qualifications for their sector
- Work is endorsed by the MAI – experts in classification systems
- Published for use



1.5 When?

ESCO v0

- Go live of ESCO & ESCO Portal
- Establish 9 new Reference Groups
- Stakeholder Conference

ESCO v0.1

- First sectors reviewed & released
- Mapping environment
- API, SPARQL

- Content review

- Content review

ESCO v1

- All sectors reviewed once
- All three pillars established

2013

2014

2015

2016

2017





In Brief: What can ESCO do?

- Allow **employment services** to exchange relevant labour market information across borders.
- **Facilitate geographical and occupational mobility** through semantic interoperability.
- Boost **online** and skill-based job-matching.
- Help employment services in the shift towards a skills and competences-oriented approach.
- Facilitate the dialogue between the labour market and the education/training sector.
- Help describe qualifications in terms of knowledge, skills and competences.
- Enable the development of innovative career guidance services.
- Ultimately: getting more people into jobs throughout Europe!



2. ESCO & Human Health Care & Social Services SREF



2.1 Structure of the SREF

- **Personal expertise, public / private sector, policy makers, national and European umbrella organizations (contacted for feedback)**
- **The SREF agreed to divide into two sub-groups in order to facilitate the work:**
 - **Human Health Care - Vice Chair Human Health Care – Dr Susanne Weiss – Austrian Federal Ministry of Health**
 - **Social Services - Vice Chair Social Services – Assoc. Prof. Dr. Jolanta Pivorienė – Faculty of Social Policy in Lithuania**

Chair: David Gorría – ER-WCPT



2.2 Importance of ESCO for Healthcare

- While the **labour market** reality is the **starting point for developing ESCO**, the **healthcare** and social work activities sector **is regulated to a higher degree than others at EU and national level**
→ This is reflected in our project!!!
- Our goal is to **match people/jobseekers only to jobs** that they are **permitted to practice** and also inform about the **requirements**
- One of the **concerns** of the Healthcare subgroup is to **avoid the “creation” of new health occupations and risk to patient safety**



2.2 Importance of ESCO for Healthcare

To create a European Tool that reflects reality and could be a real and added value for mobility

Linking the ESCO project and its three pillars with other EU initiatives, policies or directives, such as the Directive on the Recognition of Professional Qualifications, Skills panorama, Diploma supplement, CPD and LLL and also National Legislation.



2.2 It has been reflected; with an introduction explaining how the SREF is working and classifying (1):

*The list of occupations in this diagram **started by using ISCO 08** and was **then amended** based on the expertise of the group members. However, **because of the evolution of healthcare it may be updated and new occupations added in future revisions.***



2.2 (2):

*Health care professionals **may work in public or private sector; some of them may also work self-employed and also can have administrative or management, education or research occupations related to their core skills, (i.e. Hospital Manager Director).***

National implications** according to the various healthcare systems in place in each of the 28 EU Member States and EFTA countries may call **for specifications and requirements not covered below.



2.2 (3):

Regulation: For those looking for mobility or being offered a position in a healthcare occupation it is highly recommended to take into account, whether the profession is listed under the professions which are granted automatic recognition (Directive 2013/55/EU amending Directive 2005/36/EC), and observe the national requirements for recognition of diplomas and certificates as well as registration procedures for practice (requirements for scope of practice, recognition and Registration)



Specialisations: *The SREF agreed not to include a full list of specialisations for each occupation on the benefit of job seekers and because they are too different throughout the Member States.*

*There are only a **few health professions harmonized** (automatic recognition) by Directive 2013/55/EU amending Directive 2005/36/EC, namely: • Doctors of medicine • Dentists • Nurses responsible for general care • Midwives • Pharmacists.*

For other specialisations, *not mentioned above, they change country per country and you should **contact the national competent authority to verify requirements for practicing.***



2.3 (1st Pillar) Occupations (diagram, scope note and definition)

- The Group has developed a list of Occupations and grouped them in categories
- **Occupations are not the same as professions**
- The principles noted in the introduction has been taken into consideration
- **European Umbrella Organisations representing occupations not fully represented in the SREF have been contacted for feedback in the classification and in the occupations definitions**



Title

qualifications and Occupations

▼ Health care and Social Services

L ▶ social services

L ▼ human health care

L ▶ radiography

L ▶ psychotherapy

L ▶ psychology

L ▶ physiotherapy

L ▶ pharmacy

L ▶ paramedical practice

L ▶ orthoptics

L ▶ ophthalmology and optometry

L ▶ occupational therapy

L ▶ nursing care

L ▶ midwifery

L ▶ medical practice

L ▶ dietetics

L ▶ dentistry

L ▶ chiropractic

L ▶ biomedical science

L ▶ audiology and speech and language therapy

L ▶ art and music therapy in health services



↳ ▼ biomedical science

↳ biomedical scientist

↳ biomedical scientist specialist



2.4 (2nd Pillar) Skills/Competences/Knowledge & Scope Note

- **To identify the essential skills/competences and knowledge for each occupation listed and provide also a scope note for each skill, competence and knowledge provided.**



2.5 (3rd Pillar) Qualifications

- Qualifications awarded and/or recognised at European and or international level
- Identify relevant certificates and qualifications for direct inclusion into ESCO.
- The involvement of sectoral Reference Groups to this category of qualifications is consequently limited.



2.4 Skills/Competences

What does ESCO mean?

Skills is “*the ability to apply knowledge and use know-how to complete tasks and solve problems*”.

Competences is “*the proven ability to use knowledge, skills and personal, social and/or methodological abilities, in work or study situations and in professional and personal development*”.



2.4 Skills/Competences

SREF proposes

Level of skills /competences - only list the minimum required / core competences (not as a limitation!), and then refer for further information and compliance to individual national law regarding requirements for practice in each Member State – WE will decide the minimum expected competences by consensus which should not necessary be the lowest level available in any of the EU countries.

- Three types of skills/competences
 1. Transversal – common with other SREFs
 2. Common to all the occupations in the same SREF (Healthcare)
 3. Specific for each occupation

Transversal and cross sector skills / competences knowledge

Transversal skill	Cross-sector	Occupation-specific
measure	measure the size of objects	measure the furniture
broader		narrower



3.2 The classification for Biomedical Science related occupations:

Biomedical Scientist / Analyst

Biomedical Scientist Specialist

Biomedical Scientist Advanced (Remove?)



EPBS Response

- EPBS supports the agenda of ESCO to ensure that the knowledge, skills and competencies required for practice as a biomedical scientist are acquired and recognised in all EU states.**
- We would be happy to participate more fully in this important project. Biomedical Scientists in Europe are members of a regulated profession which, as yet, is not covered by automatic recognition**
- EPBS has indicated to the commission that we wish to avail of the professional card**
- Our response outlined the knowledge, skills and competencies of Biomedical Scientists**



Occupation Vs Profession

- Biomedical Science is a profession.**

- ISCO 08 outlines 4 skill levels.**
 - Level 4 follows a period of higher education of 3-6 years leading to the award of a first degree or higher qualification. Such formal qualification is an essential requirement for entry to the occupation**

- In reviewing the ISCO document we see that this profession is not classified correctly.**
 - Entry level for Biomedical Scientists in majority of EU countries is Bachelors, EQF level 6, with an education of a minimum of 180 ECTS but in some Countries it is 240 ECTS.**

- We would contend that the classification for Biomedical Scientists should appear in the same classification grouping as Physiotherapists, Audiologists, Dieticians and Optometrists**



3.2 – Biomedical Scientist / Analyst

Biomedical analysts perform all laboratory methods that are required as part of the medical examination, treatment and research service, particularly clinical-chemical, hematological, immuno-hematological, histological, cytological, microbiological, parasitological, mycological, serological and radiological tests, further more they participate in studies in the field of electro-neuro-functional diagnosis and cardio-pulmonary-function testing. (*AT MTD-Gesetz, BGBl. Nr. 460/1992, www.ris.bka.gv.at*)

A scientist educated in the field of biological science who, in supports to a specialist, carries out laboratory experiments and deals with analytical procedures for use in clinical diagnostics and medical research. (*IT*)



3.2 – Biomedical Scientist / Analyst

Biomedical scientists work in healthcare and carry out a range of laboratory tests and techniques on tissue samples and fluids to help clinicians diagnose diseases. They also evaluate the effectiveness of treatments. Their work is extremely important for many hospital departments and the functions they carry out are wide ranging. For example, they may work on medical conditions, such as cancer, diabetes, AIDS, malaria, food poisoning or anaemia, or carry out tests for emergency blood transfusions or to see if someone has had a heart attack. (UK www.prospects.ac.uk)



Biomedical Scientist: Analyst

- We agree with the statements made with the following clarification**

- Performance of the analysis with interpretation of the results in light of the clinical details provided**

- Participation in studies in the field of electro-neuro-functional diagnosis and cardio-pulmonary-function testing is not universal in all countries and may not generally define biomedical scientist**

- Education on Biological science does not necessarily ensure that the scientist has adequately studied all the biomedical science subjects. EPBS has a policy on education of Biomedical Scientists.**

- The role assigned in the presentation to specialist is one that we believe is well within the competence of Biomedical Scientist working autonomously in their profession and would be the level expected of any biomedical scientist with EQF level 6 qualification**



3.2 – Biomedical Scientist Specialist

A scientist educated in the field of biological science, who conducts research in a specific area of specialty with regards to basic, pre-clinical or translational research. *(IT)*

medical microbiology - identification of micro-organisms causing disease and their antibiotic treatment; clinical chemistry - analysis of body fluids and toxicology studies; transfusion science - determination of donor/recipient blood compatibility, ensuring blood banks are sufficient; haematology - form and functions of blood and related diseases; histopathology - microscopic examination of diseased tissue samples; cytology - best known for cervical smear screening, but also covers other cellular analysis; immunology - understanding the immune system and its role in combating disease; virology - identification of viruses, associated diseases and monitoring the effectiveness of vaccines. *(UK www.prospects.ac.uk)*



Biomedical Scientist: Specialist

- ❑ **A specialist Biomedical Scientist is one with a post graduate degree who is leading a department or specialist area, or has a recognised specific expertise.**
- ❑ **May have a specific role in management of disease or responsibility for entire process eg specialist in diabetes, haematological disorders, coagulation, molecular biology, genomics, management of point of care service.**
- ❑ **Such specialists may be working as a diagnostic partner with a clinical team or may be undertaking clinical research projects.**
- ❑ **The manager of Point of Care in an entire health care institution or in the community may also be a specialist.**
- ❑ **In some countries in Europe there are specific specialist qualifications.**



Biomedical Scientist: Advanced

- This should not be removed.**
- Many Biomedical Scientist work in areas of advanced translational research and as educators of their profession and other professionals**
- Many Biomedical Scientists are educated to PhD level and some hold Fellowship of College of Pathologists in the UK. They act as Directors of service and participate directly in clinical decisions. Some such scientists have a direct role in patient care in clinics**