FEMS Position Paper on Arduous Medical Work

Health Impacts, Policy Needs and Proposals

WHY?

- long shifts
- sleepless nights
- continuous exposure to stress factors *related both to clinical complexity and organizational challenges*
- heavy and unique responsibilities
- increasing administrative burden
- chronic understaffing – deregulation from EWTD
- aggressive work environments
- high emotional pressure *confrontation with suffering and death*

WHAT?

No clear-cut definition

***ETUC et al** : "Occupations involving the exposure of the worker over a period of time to one or several factors leading to professional situations susceptible to leave long-lasting and irreversible effects on his/her health; these factors are related to physical constraints, psychosocial risks, an aggressive physical environment, working organisation and working rhythms, including shift work"*

Common Features about arduous professions across Europe:
organizational factors (long hours, night shifts), physical factors (noisy environments), biological or chemical elements that cause physical and/or mental hardships, leading to one or more consequences

Risk Factor: The Doctor's Job

- **Impact on Physicians' Life Expectancy** – *more demanding fields of activity could have an impact on life expectancy while retiring earlier (GP) is a factor possibly contributing to a longer life expectancy by reducing stress and cardiovascular risk*
- **Impact on Physicians' Physical Health** – *metabolic syndrome, cardiovascular diseases, hormones release impairment, higher risk of cancer* ***(breast cancer)***
- **Impact on Physicians' Mental Health-** *Stress, Burn-out, Sleep Disorders, Fatigue (Annex 2)*

EUROPEAN LEGISLATION AND NATIONAL FRAMEWORKS (FEMS Country) about ARDUOUS and HAZARDOUS Jobs and Medical PROFESSION

European Framework

There is no specific legislation or policy at the European level on the issue of arduous work

- The Charter of Fundamental Rights (Article 31) on fair and just working conditions
- The International Labour Organization (ILO) Invalidity, Old-Age and Survivors' Benefits Convention, 1967 (No. 128)
- European Parliament Resolution of 12 December 2023 on mental health
- The European Trade Union Confederation (ETUC) et al. adopted a RESOLUTION on the relationship between "arduous occupations" and "early retirement schemes
- The European Working Time Directive (2003/88/EC)
- Council Directive 89/391/EEC

SOMETHING MAY CHANGE..

Raffaele Topo (S&D), Alessandra Moretti (S&D), Elisabetta Gualmini (S&D), Brando Benifei (S&D), Pina Picierno (S&D), Pierfrancesco Maran (S&D), Stefano Bonaccini (S&D), Antonio Decaro (S&D), Giuseppe Lupo (S&D), Romana Jerković (S&D), Estelle Ceulemans (S&D), Dario Tamburrano (The Left), Kateřina Konečná (NI), Branislav Ondruš (NI), Diana Iovanovici Şoşoacă (NI), Flavio Tosi (PPE), Sebastian Everding (The Left), Aurelijus Veryga (ECR)

In a report published in 2016, the European Commission defined arduous work as follows:
“Occupations involving the exposure of the worker over a period of time to one or several factors leading to professional situations susceptible to leave long-lasting and irreversible effects on his/her health; these factors are related to physical constraints, psychosocial risks, an aggressive physical environment, working organisation and working rhythms, including shift work.”
According to a recent study conducted by the European Federation of Salaried Doctors (FEMS), the working conditions of doctors meet all these criteria, particularly in the more demanding medical specialisations. Furthermore, the current shortage of doctors has further deteriorated their working conditions, increasing the physical and psychological demands of their profession.
In light of the above:
1 Does the European Commission intend to promote a European initiative to define common criteria for fair remuneration, safe working hours, and the recognition of the physical and psychological risks faced by doctors as arduous or hazardous work?
2 Does the European Commission plan to initiate a dialogue with Member States and social partners with a view to harmonising the implementation of national legislative standards on this issue?

National Framework - *Information from some countries is still missing*

The provision of benefits to certain categories of physicians across European Countries confirms recognition of potential health risks

Special Conditions in ROMANIA, BULGARIA, AUSTRIA, ITALY

AUSTRIA: ***work carried out for the professional care of sick or disabled people with special treatments or care needs*** **– also in hospital settings?**

Other Countries: an arduous or hazardous occupation is compensated by granting additional days of leave - *Annex I*

THOSE BENEFITS ARE NEITHER SYSTEMATIC NOR CONSISTENTLY APPLIED, AND OFTEN REMAIN THEORETICAL IN THE FACE OF SEVERE STAFFING SHORTAGES

WHY FOCUS ON DOCTORS?

Physicians bear the moral and legal responsibility for therapeutic decisions and for the act of care itself

Politically Sensitive Topic – need for discussion

PROTECTING AND ENHANCING Physicians' Health in Arduous Occupations:
FEMS PROPOSALS

For discussion - working group
For approval – General assembly

TARGET: to prevent or mitigate the negative impact of medical practice on health and life expectancy, to compensate for the inevitable harm accumulated throughout a professional career

1- Raising Risk Awareness Among Doctors
2- Reduced Working Hours Without Pay Cuts
3- Age-Based Workload Reduction
4- Job Reassignment and Free Retraining
5- Salary Increase as Compensatory Tool
6- Enhanced Pension Contributions
7- Lower Retirement Age Without Pension Penalty
8- Tailored Welfare and Insurance Plans
9- Family-Friendly and Work–Life Integration Policies
10- Comprehensive Legal and Malpractice Support
11- Protected Non-Clinical Time for Research, Teaching, and Professional Development

SIDE EFFECTS: impact on workforce organization and on the allocation of financial resources within healthcare systems—particularly those allocated to medical staff

CONCLUSIONS

For discussion - Working Group
For approval - GA

FEMS Policy Recommendations

The current socio-health context makes health workforce crisis even more critical. The increasing ageing of the general population and the growing demand for healthcare – also driven by a new perception of disease and well-being – clearly indicate that ***pressure*** *on European healthcare systems* ***will not decrease*** *in the short or medium term. In this scenario, shift and night work will remain a structural and unmodifiable characteristic of healthcare professions.*

1. Formal recognition of employed medical work as arduous
2. Establish early retirement options for doctors working under arduous conditions
3. Go beyond working hours: recognise the complexity and intensity of medical work
4 Protect doctors' health across the career span
5 Support smoother end-of-career transitions
6. Strengthen digital and organisational support
7. Enhance the attractiveness and sustainability of the medical profession
8. **Involve trade unions and professional associations in decision-making**

Which other tools are available to us?

Data from FEMS Survey
« Shaping the Future of Doctors' Health»