

PESSIS2 Action 3
Outcome of Discussions of 4 Options at National Level
FRANCE

27 February 2014 and 1 April 2014
(Additional Telephone Conferences 19 May & 21 May 2014)

Action 2 of the PESSIS2 project focused on better understanding the interest of employers in the social services sector in 5 countries to participate in European Social Dialogue. One of the outcomes of this action was for each country to agree on a national Roadmap towards European Social Dialogue.

Action 2 was divided into 2 separate meetings. A first focus group was organised in each country to discuss the Strengths, Weaknesses, Opportunities and Threats of the Social Dialogue structures for their social services sector, as well as their interest in participating in European Social Dialogue. The focus group was followed by a second meeting, called Roundtable towards European Social Dialogue, which offered the opportunity to those present to discuss how their sector might be involved in European Social Dialogue, based on the following options:

- Joining the Sectoral Committee for Local and Regional Governments;
- Joining the Sectoral Committee for the Hospital and Healthcare sector;
- Creating an inter-sectoral Committee for the non-for-profit sector, including the social, health, cultural and education sectors;
- Creating a Sectoral Committee for the Social Services Sector.


In France, 15 social service employers' organisations were invited to participate to the project, of which seven attended meetings

The Focus Group was attended by **Thierry Mathieu (UNIFED)**, **Sylvie Amzaleg (FEHAP)**, **Sebastien Bosch (Fédération UNICANCER)**, **Claire Perraut (FNAAP/CSF)**, **Sylvain Renouvel (FEGAPEI)** as well as Elise Lay and Dominique Van de Sype (UNIPSO, BE as observers), Thomas Bignal (EASPD as Coordinator), Francois Daue (Researcher/Moderator) and Patricia Scherer (FEGAPEI, European Relations Coordinator).

The Roundtable was attended by **Bernadette Grosyeux (Centre de la Gabrielle/ FNMF)**, **Sylvie Amzaleg (FEHAP)**, **Vincent Vincentelli (UNA)**, **Guy Hagège & Sylvain Renouvel (FEGAPEI)**, as well as Nicole Maryvonne (CFDT Santé-sociaux), Elise Lay (UNIPSO, BE as observer), Thomas Bignal (EASPD as Coordinator), Francois Daue (Researcher/Moderator) and Patricia Scherer (FEGAPEI, European Relations Coordinator).

The additional telephone conferences were attended by:

19 May 2014

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Bernadette Grosyeux (Centre de la Gabrielle/ FNMF), Sylvain Renouvel (FEGAPEI), Claire Perraut (FNAAP/CSF) as well as Thomas Bignal (EASPD as Coordinator), and Patricia Scherer (FEGAPEI, European Relations Coordinator).

21 May 2014

Bernadette Grosyeux (Centre de la Gabrielle/ FNMF), Sophie Peltier (FNMF), Sylvain Renouvel (FEGAPEI), as well as Thomas Bignal (EASPD as Coordinator).

What was the Outcome of these discussions? Which option would you prefer to take?

A unanimous position could not be found between the 7 participating organisations. However four of them prefer Option 4. One of the organisations opting for option 4 clarified that the scope of representation should be open to representatives of the non-for-profit health sector.

Option 2 is preferred by one participant. Option 3 also seemed appealing to one participant, who is has also opted for 4. Two organisations did not answer.

Why this approach?

In general, Option 4 seems to be most adapted to the social services sector considering its specificity and a focus on a person-centred approach as well as user involvement.

However, option 2 is appealing as we would benefit from the expertise in participating in European social dialogue and the influence of an existing committee. In this case, HOSPEEM would however have to substantially enlarge its scope moving away from a focus on cure and care to a more person-centred and human-rights based approach of support.

Option 3 seems appealing as it would be very representative as it broadens the scope to social enterprises as such. UDES (Union des employeurs de l'économie sociale et solidaire) in France is such a representative organisation on the national level and has an increasing influence in national social dialogue.

It is important to note that this positioning remains theoretical and preferred options, rather than a conclusive decision.

What are the main issues with regard to participation in European Social Dialogue? What still needs to be tackled?

Although involvement in European social dialogue is considered as important, it remains rather abstract to the participants. In addition, the difficult process of arriving at a certain outcome reflects the scattered and conflictual situation amongst stakeholders in social dialogue in France. Some French employers unions in certain sectors of activity participate in negotiations, however they do not sign agreements and oppose their entry into force.

Participants felt that it is important to create a European social dialogue in the social sector, but noted that the definition of its scope will not be easy, particularly because of certain specificities in some countries. Similarly, defining its policy will undoubtedly be difficult.

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At the same time the social sector in France, and more broadly, the not-for-profit sector is seeing its representativity recognised and beginning to be better taken into account. Representation at the European level would support the recognition of employers in the social sector on a national level.

One of the topics that could be addressed specifically and is considered a priority, would be the adaptation of the working time directive to the specific ways of operation of the social sector (24/7, 365 per annum, night duty, etc..)

Below you may find a summary of the discussions we had in France, including the pros and cons of each option.

Joining the Sectoral Committee for Local and Regional Governments

Created in 2004

CEMR and EPSU are the two partners

Tackles topics such as public procurement, restructuring, recruitment and retention

Pros

- Detailed knowledge of local contexts
- This would allow to be as close as possible to decision-makers

Cons

- Differences in legal status (public bodies vs. not-for-profit private enterprises)
- Differences in sources of funding
- Target population very different
- Local territorial politics, which is not our angle of attack
- Difficulties in discussing on an equal footing with service providers, as local and regional authorities are also their contractors and financiers. What would our place be in this context?

Joining the Sectoral Committee for the Hospital and Healthcare sector

Created in 2006 after 6 years of negotiations

HOSPEEM and EPSU are the two partners

Tackles topics such as Occupational Health and Safety, and Recruitment and Retention

15 Full members in HOSPEEM, 14 active + 1 Observer (CEEP)

Pros

- The hospital sector has a common point with the social and medico-social sector, as they also put the person at the centre of their work and processes of care and recovery are taken into account.
- HOSPEEM does not consider itself as representing only employers in the hospital sector as defined in France; their representation is larger.

Cons

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- The core of the profession is different: health rather than support / curing is not part of the purpose of social services
- Paradigm change: the person with disabilities does not need to be cared for or cured / medical approach verses inclusion and support
- The person with disabilities is is neither ill nor old. He or she has the right to access to culture, to work, etc. and also to support. To promote inclusion in social life, the person with a disability must be "de-isolated"
- In order for the social sector to join HOSPEEM, it would need to revise its statutes and scope of intervention as well as change its name, for it would no longer be a federation of hospitals. It should be ensured that HOSPEEM is ready to do this.

Creating an inter-sectoral Committee for the non-for-profit sector, including the social, health, cultural and education sectors.

Pros

- This would have potentially a very broad representation.

Cons

- This area should be defined more clearly, because it seems too broad and vast.
- Social services would be lost in a sectoral representation that is too broad.
- If one follows the French definition of the Social and Solidarity Economy (ESS), or that of Social Enterprise by the European Commission, it is mainly the legal form (cooperative, health insurances, not-for-profit association) which is the common denominator of this group.
- Models are not necessarily comparable and the scope of work is too broad, as this committee would include cultural associations, organic farms, services supporting people with disabilities, etc.
- Agreements in this social dialogue committee would be based on the smallest common denominator. Fear of being misrepresented.

Creating a Sectoral Committee for the Social Services Sector;

Pros

- It would include charitable and non-for-profit support services for children, the elderly, and people with disabilities.
- It would include services that meets the needs of these groups, and also those needs that public services do not necessarily respond to.
- By creating a committee from scratch, we are in control of decision-making, without having to negotiate our place within an existing committee, thus benefitting from recognition and visibility for our very own sector*.

Cons

None discussed



* Addition added during the telephone conference on 19 May 2014.

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