Basic information

2017/2277(INI) INI - Own-initiative procedure	Procedure completed
Pathways for the reintegration of workers recovering from injury and illness into quality employment **Subject** 4.15.15 Health and safety at work, occupational medicine	

Key players

European Parliament

Committee responsible	Rapporteur	Appointed
EMPL Employment and Social Affairs	ŽITŇANSKÁ Jana (ECR)	12/10/2017
	Shadow rapporteur BACH Georges (PPE) PALMER Rory (S&D) SELIMOVIC Jasenko (ALDE) LÓPEZ BERMEJO Paloma (GUE/NGL) LAMBERT Jean (Verts/ALE) AGEA Laura (EFDD) MÉLIN Joëlle (ENF)	

European Commission

Commission DG	Commissioner
Employment, Social Affairs and Inclusion	THYSSEN Marianne

Key events

Date	Event	Reference	Summary
18/01/2018	Committee referral announced in Parliament		
07/06/2018	Vote in committee		
12/06/2018	Committee report tabled for plenary	A8-0208/2018	Summary
10/09/2018	Debate in Parliament		
11/09/2018	Decision by Parliament	T8-0325/2018	Summary
11/09/2018	Results of vote in Parliament		

11/09/2018	End of procedure in Parliament		

Technical information	
Procedure reference	2017/2277(INI)
Procedure type	INI - Own-initiative procedure
Procedure subtype	Initiative
Legal basis	Rules of Procedure EP 55
Other legal basis	Rules of Procedure EP 165
Stage reached in procedure	Procedure completed
Committee dossier	EMPL/8/11437

Documentation gateway

European Parliament

Document type	Committee	Reference	Date	Summary
Committee draft report		PE616.839	05/02/2018	
Amendments tabled in committee		PE618.153	01/03/2018	
Committee report tabled for plenary, single reading		A8-0208/2018	12/06/2018	Summary
Text adopted by Parliament, single reading		T8-0325/2018	11/09/2018	Summary

European Commission

Document type	Reference	Date	Summary
Commission response to text adopted in plenary	SP(2018)829	11/03/2019	

Pathways for the reintegration of workers recovering from injury and illness into quality employment

2017/2277(INI) - 11/09/2018 - Text adopted by Parliament, single reading

The European Parliament adopted by 626 votes to 31, with 26 abstentions, a resolution on pathways for the reintegration of workers recovering from injury and illness into quality employment.

An ageing European workforce is accompanied by a higher risk of developing chronic mental and physical health problems, including disabilities and illnesses, which make prevention, reintegration and rehabilitation important policies to keep workplaces as well as pension and social security systems sustainable.

In this context, Members called for measures to **facilitate the reintegration of workers into the labour market** after an injury or illness. In their view, the EU can add value by helping Member States in three ways:

(**1) Prevention and early intervention**: the resolution stressed the importance of investing more in risk prevention policies and promoting a culture of prevention.

Parliament has called for **better management of sickness absence** in Member States and for workplaces to be more adaptable to chronic diseases and disabilities, by tackling discrimination through better enforcement of Directive 2000/78/EC on equal treatment in employment and occupation.

The Commission should **encourage integration and rehabilitation measures** and support Member States in their efforts to identify and exchange good practice in workplace accommodation. Eurofound should analyse the employment opportunities and employability levels of people with chronic diseases.

The forthcoming **EU strategic framework** on health and safety at work post 2020 should further prioritise investments, through EU funds, aimed at prolonging and promoting healthier lives and working lives, and individualised working arrangements, and at supporting recruitment and well-adapted return to work, where desired and where medical conditions allow.

Among other things, the resolution stressed the need to:

- develop and implement a programme for **systematically monitoring, managing and supporting** workers affected by psychosocial risks, including stress, depression and burnout, in order to, inter alia, draw up effective recommendations and guidelines for combating these risks. Mental health problems and learning disabilities should be de-stigmatised;
- implement effective policies on **healthy diets, on alcohol and tobacco consumption and on air quality**, and to promote such policies at the workplace;
- provide workers with **adequate access to healthcare** to ensure early detection of the onset of physical and mental illness and facilitate the reintegration process;
- provide targeted additional benefits for **people with disabilities or chronic diseases** covering extra costs in connection with, among other things personal support and assistance, the use of specific facilities and medical and social care.

The Commission is invited to submit without delay a legal act on **musculoskeletal disorders** (MSDs).

(2) Return to work: the integration of long-term unemployed individuals into employment through individually tailored measures is a key factor in fighting poverty and social exclusion. Return-to-work and reintegration policies should form part of a **broader holistic approach** to healthy working lives, aimed at ensuring a physically and mentally safe and healthy working environment throughout people's working life and active and healthy ageing for all workers.

Parliament stressed the need to:

- take action in cooperation with the Commission and relevant EU agencies, to **counter the negative effects of long-term work absence**, such as isolation, psychosocial difficulties, socioeconomic consequences and decreased employability;
- take a **positive and work oriented approach** to workers with disabilities, older workers and those who have suffered a mental or physical illness or injury, including people diagnosed with terminal illness, focusing on early evaluation of the individual's remaining capacity and readiness to work, and organising psychological, social and employment counselling at an early stage and the adaptation of the workplace ;
- develop and provide **guidelines on best practices** and coaching, support and advice to employers on how to develop and implement reintegration plans while ensuring a continued dialogue between the social partners;
- introduce **active labour market policies** and policy incentives for employers in order to support the employment of persons with disabilities and chronic illnesses, including by making suitable adaptations to, and breaking down barriers in, the workplace such as telework, flexitime, adapted equipment and reduced working hours or workload.

Early and/or gradual return to work (if medical conditions allow) could be accompanied by **partial sickness benefits** to ensure that the individuals concerned do not suffer loss of income from returning to work, while maintaining financial incentives for businesses.

(**3) Changing attitudes towards the reintegration of workers**: Parliament stressed that raising awareness about occupational rehabilitation and return-to-work policies and programmes, and **improved company culture**, are critical success factors in the return-to-work process and in fighting negative attitudes and tackling prejudices and discrimination.

Members called on the Commission and the Member States, in cooperation with the social partners, to ensure – in their communications, guidelines and policies – that employers see the reintegration process as an opportunity to benefit from workers' skills, competences and experience.

Parliament stressed the importance of **campaigns fighting discrimination** based on workers' age, promoting prevention and health and safety at work measures. It also encouraged employers to maintain as much dialogue as possible with employees who have received a terminal diagnosis, to ensure that all necessary and possible adaptations can be made to allow the employee to carry on working if he or she so wishes.

Pathways for the reintegration of workers recovering from injury and illness into quality employment

2017/2277(INI) - 12/06/2018 - Committee report tabled for plenary, single reading

The Committee on Employment and Social Affairs adopted an own-initiative report by Jana ŽITŇANSKÁ (ECR, SK) on pathways for the reintegration of workers recovering from injury and illness into quality employment.

In the context of an **ageing European workforce**, the report suggested an approach that will help identify the policy options needed to shape our labour markets in order to become: (i) more inclusive and responsive to the needs of ageing and ailing society and (ii) less prone to the loss of skills a result of inactivity in the labour market.

Members believe that the EU can add value by helping Member States in three ways:

(1) Prevention and early intervention: arguing that the quality of preventive services is essential to support businesses, the report stressed the importance of investing more in risk prevention policies and promoting a culture of prevention.

Members called on Member States to put in place functioning legislation with effective overview to ensure that employers **make workplaces more inclusive** for those suffering from chronic conditions and disabilities.

The Commission should encourage integration and rehabilitation measures and support Member States in their efforts to identify and **exchange good practice** in workplace accommodation. Eurofound should analyse the employment opportunities and employability levels of people with chronic diseases.

The **forthcoming EU strategic framework on health and safety at work post 2020** should further prioritise investments, through EU funds, aimed at prolonging and promoting healthier lives and working lives, and individualised working arrangements, and at supporting recruitment and well-adapted return to work, where desired and where medical conditions allow.

Among other things, the report stressed the need to:

- develop and implement a programme for **systematically monitoring, managing and supporting workers** affected by psychosocial risks, including stress, depression and burnout, in order to, *inter alia*, draw up effective recommendations and guidelines for combating these risks. Mental health problems and learning disabilities should be de-stigmatised;
- implement effective policies on **healthy diets, on alcohol and tobacco consumption and on air quality**, and to promote such policies at the workplace;
- provide workers with **adequate access to healthcare** to ensure early detection of the onset of physical and mental illness and facilitate the reintegration process;
- provide targeted additional benefits for **people with disabilities or chronic diseases** covering extra costs in connection with, among other things personal support and assistance, the use of specific facilities and medical and social care.

(2) Return to work: Members considered that return-to-work and reintegration policies should form part of a **broader holistic approach** to healthy working lives, aimed at ensuring a physically and mentally safe and healthy working environment throughout people's working life and active and healthy ageing for all workers.

The report stressed the need to:

- take action in cooperation with the Commission and relevant EU agencies, to counter the **negative effects of long-term work absence**, such as isolation, psychosocial difficulties, socioeconomic consequences and decreased employability;
- take a **positive and work oriented approach** to workers with disabilities, older workers and those who have suffered a mental or physical illness or injury, including people diagnosed with terminal illness, focusing on early evaluation of the individual's remaining capacity and readiness to work, and organising psychological, social and employment counselling at an early stage and the adaptation of the workplace ;
- develop and provide **guidelines on best practices** and coaching, support and advice to employers on how to develop and implement reintegration plans while ensuring a continued dialogue between the social partners;
- introduce **active labour market policies and policy incentives** for employers in order to support the employment of persons with disabilities and chronic illnesses, including by making suitable adaptations to, and breaking down barriers in, the workplace such as telework, flexitime, adapted equipment and reduced working hours or workload.

Early and/or gradual return to work (if medical conditions allow) could be accompanied by **partial sickness benefits** to ensure that the individuals concerned do not suffer loss of income from returning to work, while maintaining financial incentives for businesses.

(3) Changing attitudes towards the reintegration of workers: the report stressed that raising awareness about occupational rehabilitation and return-to-work policies and programmes, and **improved company culture**, are critical success factors in the return-to-work process and in fighting negative attitudes and tackling prejudices and discrimination.

Members called on the Commission and the Member States, in cooperation with the social partners, to ensure – in their communications, guidelines and policies – that employers see the reintegration process as an opportunity to benefit from workers' skills, competences and experience.

The report stressed the importance of **campaigns fighting discrimination** based on workers' age, promoting prevention and health and safety at work measures. It also encouraged employers to maintain as much dialogue as possible with employees who have received a terminal diagnosis, to ensure that all necessary and possible adaptations can be made to allow the employee to carry on working if he or she so wishes.