

**Lifelong Learning Programme, Leonardo da Vinci**  
Transfer of Innovation

Project No.: 2012-1-HU1-LEO05-05823

**Project title: “Health Tourism: An ECVET process to put in transparency and recognise across Europe the learning outcomes and the qualifications of the professional figures in the health tourism sector”**

Project acronym: ECVET - HEALTH-TOURISM

## INFOPACK 2



# health tourism

SUBJECT : Leonardo da Vinci project *Health Tourism: An ECVET process to put in transparency and recognise across Europe the learning outcomes and the qualifications of the professional figures in the health tourism sector:*

**Involvement of relevant key actors.**

Dear Sir/Madam,

We are writing to you in connection with a Leonardo da Vinci Project that forms part of the EU's Lifelong Learning Programme 2007-2013, involving a multilateral intervention for the Transfer of Innovation focused on transparency and recognition of competences and qualifications of professionals operating in health tourism sector, applying the European tools and frameworks *European Qualification Framework - EQF* and the *European Credit System for Vocational Education and Training - ECVET*.

## **PROJECT SUMMARY**

### ***Project Partnership***

The partnership consists of the following organizations:

- P0: Várnai Oktatási és Könyvvizsgáló Kft. – Hungary
- P1: Aris Formazione e Ricerca Società Cooperativa – Italy
- P2: Diesis Coop – Belgium
- P3: COLEGIUL TEHNIC "TRAIAN VUIA – Romania
- P4: Stredná odborná škola s vyučovacím jazykom maďarským - Szakközépiskola – Slovakia
- P6: International Wellness Institute – Hungary
- P7: EFEB Üzleti Szakközépiskola – Hungary
- P8: MeMe – Hungary

The tourism constitutes one of the most important economic sectors in Hungary and Europe, with a very significant occupational relevance. Within the tourism sector and activities, a growing importance is more and more acquired by the segment of the health tourism.

The health tourism to satisfy the demand of services and products related to this kind of tourist fruition, it offers concrete and expanding job opportunities to a large number of people, in a very large and quite diversified range of activities and qualifications across the European countries and regions, often not clearly defined in terms of learning outcomes but also frequently regulated, in terms of access to the training and qualification opportunities, in a way that in fact is very limiting the mobility beyond the VET systems "borders" (confines of national/regional VET systems, barriers to the mobility within a particular VET system; obstacles to mobility outside the formal education).

Thus, the project partners (VET providers, enterprises and non-profit associations operating in the field of health tourism, having legislative competence on tourism and on VET at regional level), have

agreed that an intervention to put in transparency and recognise the learning outcomes characterising the health tourism professions, applying and implementing the European tools and frameworks EQF and ECVET, could have a very significant impact.

The major activities at this aim are focused on the MoU (Memorandum of Understanding) ECVET contents (definition of the professional field in terms of learning outcomes, mapping it onto the EQF via national qualifications frameworks and systems, designing qualifications in transferable units of learning outcomes with allocation of credit points), and on its enforcement (Learning Agreements, Credits Awarding, Transfer Validation and Accumulation, through related VET programmes with flexible devices for validation, transfer and recognition of learning outcomes achieved in formal, informal and non formal contexts), as well as on the mainstreaming and multiplication of these results.

It's expected that these activities will enhance the mobility of health tourism professionals, contributing to the emergence of generally accepted qualifications and training standards.

The foreseeable impact of the project on the target groups is significant, during the project (at least 50 health tourism professionals across Europe, of which 30 in Hungary and 10 in each of the other participating country) and also after the project is finish, through valorisation activities targeted on public and sectoral decision-makers and on end-users, at local, regional, national, and European level.

### ***Aims and objectives***

Since one of main factors of limitation to learning and work opportunities, and to mobility beyond VET systems, for health tourism professionals, is identified in lacking definition and certification, across Europe, of their knowledge, skills and competences, the project intends apply EQF and ECVET to these professionals, defining this field of qualification in terms of learning outcomes, mapping it onto EQF via national qualifications frameworks and systems, designing qualifications in learning outcomes transferable units with credit points allocation, designing related VET programmes with flexible devices to validate, transfer and recognise learning outcomes achieved in formal, informal and non formal contexts.

At these aims are foreseen the following objectives:

- analyse the health tourism professional figures in European VET systems of tourism sector, classifying them within EQF across participating Countries, and identifying a professional figure/s common perimeter;
- define an action plan to activate an ECVET process for these figures, starting from collection, analysis, adaptation of already realised best practices on transparency/recognition of competences/qualifications, and on ECVET process activation;
- define professional figure/s in terms of activities/tasks/competences/learning outcomes units/ECVET credits;
- define and formalise (partners and competent/interested organisations) a Memorandum of Understanding - MoU ECVET for the professional figures;
- define and formalise (by health tourism professionals, concerned enterprises, training agencies) ECVET Learning Agreements describing, in compliance with MoU, the training processes in formal/informal/non formal contexts, and related ECVET credits to be obtained;
- award to involved professionals, by concerned training agencies at training end, ECVET credits related to verified learning outcomes, utilising Europass;
- transfer, validate and accumulate the awarded ECVET credits in sectoral/ territorial VET systems involved in MoU.

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### ***European added value***

The proposal offers a significant European added value in terms of European mobility impact through its ECVET perspective. In fact, the main purpose of the implementation of the ECVET process is to allow an easier mobility of workers and learners not only beyond the system confines constituted by the barriers to the mobility within a particular educational system (i.e. the obstacles to both vertical and horizontal permeability between the parts of the system, and in particular between higher education and professional training in each European Country) and the obstacles to workers outside the educational system (taking into consideration also the results of informal education, including learning on the job, and thus it can guarantee that it be recognised, if it is regulated by national/regional laws), but also and in particular beyond the confines of national vocational education and training systems (the workers who have spent training periods in another European country must have the opportunity to have them recognized as part of their training also in their own country).

The ECVET perspective, needing an European-level approach, allow this possibility, not reachable only at Regional or National level.

The European cooperation enhanced by the project, with the significant participation of enterprises and non-profit associations operating in the field of health tourism across Europe, and also of public institutions having legislative competence on tourism and on VET and organisations specialised in VET matter with specific know how on transparency and recognition of competences and qualifications and in LLP projects too, will also give visible benefits in terms of effective generalisation / customisation of results at European level.

Thus, the project focuses on the integration of the planned technical work on qualification field design with planned process of providing information to key actors on quality, relevance and effectiveness of the project results, also to ensure that the successful project results will be transferred to the appropriate decision-makers in regulated local, regional, national and European systems, and that these results will be adopted and applied by individual end-users.

In other words, the **ECVET – Health Tourism project needs your engagement as a fundamental key actor**, to verify and qualify our work in progress and results, and to ensure the exploitation of results through the whole project life-cycle and also after its end.

In the light of the above, we gently **ask you to allow a meeting between our respective organisations** so that we are able to discuss the matter in more detail.

Yours sincerely,

**Lifelong Learning Programme, Leonardo da Vinci**

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**WP 2****REPORT ON ANALYSIS AND RESEARCH ON HEALTH TOURISM IN EUROPE**

ANALYSIS AND PREPARATORY RESEARCH OF PROFESSIONAL FIGURES IN THE  
FIELD OF HEALTH-TOURISM EDUCATION IN THE PARTICIPATING COUNTRIES  
OF THE PROJECT

Common tool for analysis

## 1. SUMMARY OF ANALYSIS AND PREPARATORY RESEARCH

The aim of the 2nd Work Package was analyzing and doing preparatory researches in the field of professional figures in health tourism. In the frame of the survey all five participant countries collected the Health Tourism educations in their own countries (probably from their VET system or other training system). After this phase, the consortium partners made analysis about the most typical educations/education topics. First part of the analysis contained description of the professions/profession groups. In the second and third part there were questions regarding the regulation of certain education, the competences and the EQF level of trainings.

The survey showed interesting results. The research was made by five countries on the basis of their own education system (Hungary, Slovakia, Romania, Italy and Belgium). According to the figures from the consortium partners, there was no Health Tourism education which can be found in all five countries. The most common education was the **fitness instructor / group fitness instructor** (in four countries from five). In all the four countries this education was on EQF level 3. This education could be found in Hungary, Slovakia, Romania and Italy, too. Belgium is the only partner who did not check this education.

Consistent educations were some kind of **receptionists**. This topic could be found in Hungary, Slovakia, and Romania as well as in Belgium, even though this was not standard due to the fact that in Romania it is called Hotel receptionist (EQF 2), as well as in Hungary but on a higher level. In Slovakia it is the Reception manager on EQF level 6. The situation is also different in Belgium; there is a course called Wellness receptionist on EQF level 1.

In Hungary, Slovakia, Romania and Italy there are **sport and leisure manager** education, but again, on different education levels in each country, even though belong to the same category. In Hungary it is called Sport Manager, in Romania Tourism activity manager and in Italy it is Manager of sport, fitness and wellness structures. Typical education was the **Spa manager**. Except Hungary and Romania it could be found in every participant country (Slovakia, Italy, Belgium), but it is not obvious on what level and in which country.

There was also conformity in three countries about the **masseur** and **sales manager in tourism** professions (Hungary, Romania, and Slovakia). The masseur was checked at EQF level 2-3 by every country. The masseur, recreational- or sport masseur were featured, too. The Sales manager in tourism was one of the most standard educations; it is on EQF level 5 in every place. The other conformities were between Hungary, Slovakia and Romania. In all three countries the following educations could be found in connection with Health Tourism: **animator** (In Hungary it is called Cultural event organization), **cosmetician/beautician**, **hairstylist**, **manicurist**, **personal trainer**, **physiotherapy nurse**, **swimming pool attendant**, **tour operator**, **tour guide**.

In order to start the common thinking about the WP3, the coordinator partner suggested to choose 3 educations according to the findings. It was practical to choose educations which came up in most of the researches and were at similar EQF level. The most popular education was the **fitness instructor / group fitness instructor** which had one of the most standard EQF level, too (according to the researches of the countries). So P0 suggested choosing this profession to be the base of the next themes. The receptionist and sport and leisure manager were also in lot places, but it was not easy to integrate them. The receptionist was at very different EQF levels: from EQF 1 to EQF 6. The sport and

leisure manager was checked by some countries, but its subtopics were very different. In Hungary it was mostly about sport, in Romania about tourism and in Italy mostly about fitness-wellness. The differences would have made it difficult to work with these educations. The situation was completely different by the **masseur**, which was also checked by three countries. It also had sub-themes, but they were similar to each other. The sport-, recreational and traditional masseurs have the same base, so our common work could be effective with this education. In the third place the coordinator partner suggested the **sales manager in tourism**, because it also appeared in more countries, and everywhere in EQF level 5.

On the second consortium meeting in Brussels the coordinator partner presented the results: the summary of the analysis and preparatory researches in the field of professional figures in health tourism, and so suggested the following three professions to work with:

- fitness instructor / group fitness instructor
- masseur
- sales manager in tourism

After the summary all partners discussed the results. After a long discussion they agreed that the sales manager in tourism should change a little bit, and the chosen profession passed into the **health tourism manager**. Also the fitness instructor / group fitness instructor was replaced by **fitness/wellness assistant**.

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## **WP 3**

### **PARTS FROM THE “ACTION PLAN FOR THE ECVET PROCESS”**

#### **ACTION PLAN FOR THE ECVET PROCESS TO BE ACTIVATED IN THE FIELD OF HEALTH TOURISM**

June 2013



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## OVERVIEW ON AIMS, ACTIVITIES AND PRODUCTS OF ECVET – HEALTH TOURISM WP 3

The ECVET – HEALTH TOURISM work package 3 includes the activities aimed to define a coherent plan of activities for activating the ECVET process to the perimeter of professional figures in health tourism, defined within the previous work package 2.

The definition of this ECVET action plan will be carried out through the collection, analysis and adaptation of experiences and best practices already realised on transparency and recognition of competences and qualifications, and on ECVET process activation.

Concerning the experiences and best practices already realised with the specific aim of the ECVET process activation, the project has a special focus on the ECVET process activated within the LdV ToI project “Highlight the Competences” ([www.highlightcompetences.eu](http://www.highlightcompetences.eu)), since allowing, though not in the tourism sector, the definition and signature of the first European ECVET MoU, formalised the 4th September 2009 in Athens.

Furthermore, the activity of best practices research and collection (mainly by desk analysis), has give a particular attention to the experiences aimed to transparency and recognition of qualifications and competences in the European VET systems of health tourism sector.

The action plan contains:

- a report on the research, analysis, and adaptation on experiences and best practices already realised on transparency and recognition of competences and qualifications, and on ECVET activation, both in health tourism sector and in the other EU VET sectoral context;
- the planning for the activation of the ECVET system in the field of professional figures in health tourism, defining strategies, activities and tools to be implemented by the partners to activate and develop the ECVET process.

This plan, defined on the basis of best practices collection and analysis, will focus on the involvement in this process, in each country, of competent public institutions, interested social partners and VET providers, and on methods to design qualifications in units of learning outcomes with allocation of ECVET points.

The definition by the partners of the ECVET action plan for professional figures in health tourism is started after the 2nd Consortium Meeting in Brussels (3rd and 4th April 2013), with the shared drafting of a common tool to be utilised by each partner for the activities of best practices research and collection across the participating countries.

The ECVET action plan has been elaborated till the 3rd Consortium Meeting in Perugia (Italy), held the 17th and 18th June 2013, through a common discussion, evaluation and validation, in the perspective of its effective implementation for the whole duration of the project, and also beyond it.

Within next pages are presented: the common tool utilised for the best practices research, the different best practices analysed in participating countries, and the shared resulting strategy, activities and tools of the ECVET action plan.

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## STRATEGY OF THE ECVET – HEALTH TOURISM ACTION PLAN FOR PROFESSIONAL FIGURES IN HEALTH TOURISM

The fundamental aim of ECVET – HEALTH TOURISM is constituted by the application of European tools and frameworks EQF and ECVET to people included in the European common professional perimeter of figures in health tourism, identified in a shared way by the partners across VET systems of participating countries during WP 2 activities and finalized on the 3<sup>rd</sup> Consortium meeting in Perugia (the perimeter was limited to the figures classified within the EQF level 5 and lower and, within them), to the figures of **Cosmetician, Health tourism manager** and **Fitness/wellness assistant** “themes” as transversal fields.

The major activities foreseen by the project at this aim are focused on the definition of the contents of the *Memorandum of Understanding - MoU ECVET* (designing qualifications in transferable units of learning outcomes with allocation of ECVET credit points), on its formalisation by relevant organisations (particularly, public institutions competent in VET and in health tourism, social partners of employers and workers, other interested associations, and VET providers of the concerned sector, at national and territorial level), and on its enforcement at individual level (through ECVET Learning Agreements, VET programmes with flexible devices for validation, transfer and recognition of learning outcomes achieved in formal, informal and non formal contexts, and ECVET Credits Awarding, Transfer, Validation and Accumulation, applying the national and regional rules), as well as on the mainstreaming and multiplication of these results, in the perspective of its effective implementation for the whole duration of the project, and also beyond.

Thus, the strategy (and also the activities and tools) of the ECVET process starting with the *Memorandum of Understanding - MoU* for professional figures in health tourism supported by the project, seems necessarily to be centered both on the **key actors involvement**, in each country (public institutions competent in VET and in health tourism, private sector, employers and workers, other interested associations, and VET providers of the concerned sector), and on methods for **professional figure designing** in units of learning outcomes with allocation of ECVET points, in order to enable the certification of learning outcomes gained by concerned professionals beyond the barriers among different VET systems.

Concerning the methods to design the professional figures in units of learning outcomes with allocation of credit points, based on ECVET technical specifications, the project specifies that, to activate and develop the ECVET process for health tourism professional figures, the partners will proceed defining the concerned and shared professional perimeter in terms of activities, tasks, knowledge, skills, competences, certification objectives, units of learning outcomes and related ECVET credit points, focusing on standard elements in all partner countries (vocational profile, skill specifications, certification objectives), on subsidiary factors (certification ways; formal, non-formal and informal learning validation; procedures, qualification bodies), and on ECVET credit points allocation to learning outcomes units.

Concerning the involvement, in each country, of public institutions competent in VET and in health tourism, private sector, employers and workers, other interested associations, and VET providers of the concerned sector, the project focuses on the integration of the planned technical work on qualification design with the planned process of providing information on quality, relevance and effectiveness of the project results to key actors, and also with planned process to ensure that the successful project results will be transferred to the appropriate decision-makers in regulated local, regional, national and European systems (mainstreaming

activities, targeted on targeted on public institutions competent in VET and in health tourism, and on health tourism private sector) and that these results will be adopted and applied by individual end- users (multiplication activities, targeted on workers and trainees, VET providers, and enterprises in the sector of health tourism). This continuing process, supported by the consortium partners also through Info-days and Focus Groups scheduled in each participating country, will be based on a clear and dynamic focus on user needs and ensuring shared responsibility across all partners and a continuous interaction between them and known and potential end users/beneficiaries, to ensure the exploitation of results through whole project life-cycle and also after its end.

Summarizing, the first aspect of this process to be highlighted, it seems constituted by the integration which should characterise, on the one hand, the definition of the MoU contents (and particularly, the design of health tourism professional figures), and on the other hand, the involvement of the key actors who are to be engaged to ensure the endorsement of MoU provisions at national and regional level, within the specific VET systems of health tourism sector across Europe. In other words, since the signing of the MoU and the related commitment by the key actors, particularly of those which has legislative territorial competence on professional qualification and certification (and also, in this case, of those having competence in health tourism), is the first step for an effective transposition of the qualification in the respective territories and then for the effective possibility for individuals to obtain the recognition and certification of related achieved learning outcomes, it seems necessary, to maximize the efficacy of this process, that these **key actors** are **engaged upfront**, or as soon as possible.

Secondly, considered the great differences existing, especially in terms of professional qualification and certification competences, rules and procedures, among European VET systems in the participating countries, it seems even more necessary to have a clear look around the **articulation** of competent and interested public and private **key actors** in each concerned relevant territorial context.

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## ACTIVITIES OF THE ECVET – HEALTH TOURISM ACTION PLAN

The activities foreseen by the ECVET – HEALTH TOURISM project to apply the European tools and frameworks EQF and ECVET to professionals operating in health tourism sector, start from and include principally the interventions aimed to define and formalise, with a participatory process, the *Memorandum of Understanding - MoU* for health tourism professional figures, to be enforced for the individuals during an experimentation phase within the project duration, and also and particularly beyond its end. More exactly, these activities entail:

- the preparation of a complete draft of the MoU, following the related best practices collected during the workpackage 3 (Highlight the Competences, TANDEM, QUALITOOL, TourBo meets Europe, ECVET TC NET, FOOD-ECVET and Implementing ECVET in the field of HeAlth aNd soCial carE for the promotion of PROfessional PERmeability and geographical mobility) and containing:
  - an introduction relating to background and general context of MoU, the existing provisions for MoU at European level, definitions, the general and specific objectives of MoU;
  - the form and content of MoU in terms of participants, purpose, ratification and effectiveness;
  - the qualifications, to be designed during workpackage 4, to establish the European correspondence for the assessment, transfer, and accumulation processes of learning outcomes achieved in formal, informal and non formal contexts (units, unit parts and related credits);
  - the mechanisms to implement the MoU and for dialogue and administrative co-operation, the regulations relating to nationality, the revision of agreement and notice of termination;
- the activities aimed to involve in the MoU, beyond the project partners, the public institutions competent in VET and in health tourism, private sector, employers and workers, other interested associations, and VET providers of the concerned sector, at national, regional and local level, to be realised within workpackage 5;
- the formalization, by the partners and by the competent/interested organizations already involved, of the MoU concerning the European health tourism professional figures (the official signature of the MoU will take place at the end of the workpackage 5, during the fifth project meeting in Slovakia).
- the enforcement of the MoU, starting from a pilot test to be realised within work package 6 involving 120 employees and trainees in the participating countries, to recognise and certificate the achieved related learning outcomes and ECVET credits in compliance with national and regional rules on certification ways and procedures, formal, non-formal and informal learning validation, qualification bodies, also utilising common models for Learning Agreements ECVET and Europass Certificate Supplement.

Considering the issues already highlighted for a strategic approach to the planning of this process (particularly, the opportunity of an earlier and effective engagement in it of key actors having

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competence or / and interest to its implementation, and the related implicit necessity to have a clear and complete awareness of these key actors in each participating country). It seems that the project consortium, in this phase of the project work, has to share and quickly implement **two specific additional tasks**, to be completed in each participating country, this is the **detection of all public and private key actors** at national, regional and sectoral level, and the **organisation and scheduling of a “get in touch” initiative addressed to them**.

As regards these tasks, beyond the significant differences among the VET systems of the countries represented within the consortium, it is possible also to evidence and define some common **criteria and tools**, easily adaptable and useable by the partners in each specific national context.

Concerning this criteria and tools, consortium partners firstly have to share the definition of a “Key actors detection grid”, which summarize the different typologies of key actors to be involved in the ECVET process. It has to be filled by each partner for the respective country, and secondly drafted a “sample letter” to be utilised to contact them about their wished involvement.