

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 1



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Invitation to

Public Info Day and Focus Group

Thursday, 4th April, 2013

Venue: Floreal Office, 4 rue Saint Jean - Brussels

Dear Sir or Madam,

In the framework of **Health Tourism project**, Diesis Coop and project partners would like to invite you to our Info Day and Focus group, which will be held in Brussels on the 4th of April 2013.

The project is an ECVET (European credit for vocational education and training) process to put in transparency and recognise across Europe the learning outcomes and the qualifications of the professional figures in the health tourism sector. The main aim of Health Tourism is to define and validate health tourism professionals competences through a system of credits recognised at first within the partnership countries (Belgium, Hungary, Italy, Romania and Slovak Republic) and eventually at EU level.

As one of the main factors of limitation to learning and work opportunities, and to mobility beyond VET systems, is identified in lacking definition and certification of their knowledge, skills and competences, the project intends apply EQF and ECVET to these professionals, defining the field of qualification, mapping it onto EQF via national qualifications frameworks and systems, allocate credits according to qualifications, with the aim to validate, transfer and recognise learning outcomes achieved in formal, informal and non formal contexts.

In occasion of the second meeting of the project, Diesis Coop as Belgian partner, organises an Info Day and Focus group with entrepreneurial association, public bodies for education training, professionals, media and awarding bodies that provide certification in the field of health tourism. The discussions will focus on an analysis of the professional figures (and their certification) in health tourism sector in Belgium.

After the meeting, we would be delighted if you could join us for lunch.

Please find attached a draft of the agenda.

Yours faithfully,

Gianluca Pastorelli
DIESIS COOP President

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.

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**.