

## Bridging the care gap: supporting employment in the health and care sector through training exemptions

### Belgium

GENERAL INFORMATION	
<b>Name of the organisation</b>	National Employment Office (ONEM)
<b>Type of organisation</b>	Social Security Organisation
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<b>Topic of the good practice</b>	Labour and skills shortages in the health and care sector
<b>Geographical focus</b>	<p>Nation-wide</p> <p>The practice is national in scope, as it is embedded in the federal unemployment insurance framework managed by the National Employment Office (ONEM/RVA). At the same time, it has a strong regional implementation component: the four Public Employment Services (VDAB, Forem, Actiris, ADG) are responsible for granting exemptions and linking beneficiaries to eligible training pathways. This dual structure means that while the legal and financial basis is national, the measure stimulates better strategic alignment between regional PES and national labour market priorities. In particular, the focus on the health and care sector has encouraged regional services to align more closely on training supply and workforce planning for this sector where shortages are acute across all Belgian regions.</p>
<b>Duration</b>	2022 - ongoing
<b>Summary of the good practice</b>	In response to acute and persistent labour shortages in the health and care sector, this good practice introduces and evaluates a policy of exemption from job-seeking

obligations for unemployed individuals undertaking relevant training or education. Established under the jurisdiction of the Belgian regional employment services (VDAB, Forem, Actiris, ADG), this exemption enables jobseekers to pursue full-time or part-time vocational training or academic studies without the requirement to actively seek work, while continuing to receive unemployment benefits. The core objective is to strengthen the pipeline into critical care professions such as nursing, elderly care, and other health services by encouraging career transitions into these high-need sectors. The exemption targets training leading to occupations officially recognised as shortage professions. The practice is grounded in robust federal data analysis conducted by the National Employment Office (ONEM) and has demonstrated clear, measurable outcomes. Between 2021 and 2022, over 4,000 jobseekers who benefited from this exemption were employed in the health and care sector. On average, these individuals worked 40 days more annually compared to other jobseekers, indicating better employment integration and job sustainability. Notably, an estimated 1.4% of all work performed in the care sector is carried out by individuals who exited the exemption measure within the past year, illustrating the systemic relevance of the initiative. These results are published in the *Revue belge de sécurité sociale*, vol. 66/1 and further substantiated through ONEM evaluation studies. The innovative nature of the initiative lies in its integrated, cross-level governance and its use of social security instruments as levers for proactive workforce development. Rather than creating a new system from scratch, the practice retools existing unemployment frameworks to deliver training outcomes in priority sectors. Moreover, it aligns diverse regional training ecosystems under a shared strategic objective, while preserving flexibility at the local level. The value of the measure was further confirmed during Belgium's 2025 unemployment benefit reform, in which the exemption for training in the health and care sector was the only one fully maintained, underlining its proven effectiveness and long-term policy relevance. Moreover, the practice is cost-effective: instead of additional subsidies or costly public programmes, it leverages existing unemployment schemes to incentivise skill acquisition in sectors with high

	<p>societal value. Its decentralised, region-specific implementation ensures adaptability to local labour market needs, while maintaining national consistency through federal coordination. Importantly, this initiative is sustainable both socially and economically. By promoting access to quality jobs in healthcare, it supports the inclusion of underrepresented groups; especially women, who represent nearly 80% of successful entrants into the care sector via this pathway. The initiative also addresses demographic challenges by replenishing a workforce that is ageing rapidly, with many care professions seeing over a third of their workers over 50. Transferability potential is high. The mechanism can be replicated in other EU Member States with regionalised employment services or where targeted exemptions from conditionalities can encourage reskilling towards shortage sectors. It provides a model for how unemployment benefit systems can be mobilised to address systemic labour mismatches, without requiring fundamental legal overhaul. Digitalisation plays a critical role in both monitoring and evaluation. Through the Dopflux system, a centralised administrative data infrastructure, ONEM can continuously track the socio-economic outcomes of exemption beneficiaries, including employment entry, job duration, and sectoral destination. The Dopflux data infrastructure itself has been highlighted as an international good practice by the International Social Security Association and has been frequently showcased in European peer learning forums as a model for integrated social data monitoring. This digital backbone allows for detailed, real-time insights into the effectiveness of the policy, and supports data-driven decision-making at both federal and regional levels. In the face of growing healthcare demands and workforce scarcity, this practice stands out as an effective, inclusive and data-driven measure to close the labour gap in the care economy.</p>
<p><b>OBJECTIVES AND ACTIVITIES</b></p>	
<p><b>Background/context</b></p> <p>What challenge, need or gap were you trying to solve or respond to?</p> <p>Why was this issue relevant or urgent in your context (sector, region, country)?</p>	<p>Belgium, like many EU countries, is facing acute and persistent labour and skills shortages in the health and care sector. Even before the COVID-19 crisis, structural demographic trends such as an ageing population and rising care needs, were creating strong demand for nurses, care assistants, and other health professionals.</p>

	<p>The pandemic further aggravated these shortages, with estimates showing a deficit of around 25,000 nursing staff alone. In 2023, health-related occupations were consistently ranked among the most critical shortage professions across all three Belgian regions. At the same time, many unemployed individuals struggle to re-enter the labour market, in part because strict job-seeking requirements limit their ability to pursue longer training pathways that could lead to sustainable employment in shortage sectors. In a way, this creates a systemic gap: while employers face severe recruitment difficulties in these essential services, jobseekers have few structured incentives or opportunities to retrain into these professions. The exemption measure directly responded to this challenge by enabling unemployed persons to follow vocational training or academic studies in shortage occupations while retaining unemployment benefits and being temporarily released from active job-seeking obligations.</p>
<p><b>Objectives</b></p> <p>What were the main goals of this practice (e.g. better compliance, faster processing, improved worker protection)? (Please limit to three)</p> <p>Who or what were these goals intended to help or change? (Please limit to three)</p>	<p>► The main goals of this practice are:</p> <ul style="list-style-type: none"> <li>• Address structural labour and skills shortages in the health and care sector by channelling new qualified workers into these professions where demand is highest.</li> <li>• Facilitate re-skilling of unemployed persons by removing barriers that prevented them from pursuing longer vocational training or academic studies for these shortage occupations.</li> <li>• Promote sustainable labour market integration by supporting access to stable and socially valuable employment rather than short-term or precarious jobs.</li> </ul>

<p><b>Main activities</b></p> <p>What were the main steps or actions you carried out to put the practice into effect?</p> <p>Were any tools, materials, partnerships, or processes created?</p>	<p>The exemption measure has existed in Belgium since the 1980s as part of the unemployment insurance framework. Its basic mechanism is remarkably simple: unemployed individuals are allowed to pursue training or studies in shortage occupations, while retaining benefits and being temporarily released from job seeking obligations. In practice, it requires little more than a cooperation partnership between the regional Public Employment Services (PES) and the National Employment Office (ONEM/RVA), so that the exemption can be seamlessly integrated into existing benefit payment processes. This simplicity has avoided the need for developing new tools or processes. An important step change occurred from 2022 onwards, when ONEM complemented the practice with a monitoring process using the Dopflux data infrastructure. This turned a long-standing policy tool into a data-driven practice, enabling precise follow-up of employment outcomes and producing solid evidence on the impact of the exemption in addressing labour shortages in the health and care sector. This monitoring process did require the creation of the Dopflux statistical tool, which is nourished with information by other administration through an agreement with the Belgian Cross-roads Bank for Social Security, a Belgian Social Security Institution which has data exchange as a core business. During the review of this practice by ELA, Belgium embarked on a major unemployment benefit reform under the new government, introducing a maximum entitlement period of two years. In this reform, the exemption for vocational training for the health care sector stood out: it was the only exemption measure fully maintained, explicitly preserved because the monitoring evidence demonstrated its effectiveness and value for the sector. This institutional recognition confirms why we consider the monitoring component an integral part of the good practice itself.</p>
<p><b>Funding/organisational resources</b></p>	<p>The practice is implemented within the existing framework of Belgium’s unemployment insurance and therefore requires no additional funding streams, infrastructure, or large-scale investments. Its administration relies on the ordinary</p>

cooperation between the regional Public Employment Services (granting exemptions) and the National Employment Office (ensuring the continuation of benefits). From an organisational point of view, the only significant addition was the integration of monitoring via the Dopflux data system, which itself builds on the existing Cross-roads Bank for Social Security’s well-established data exchange network and is a broadly used instrument for the National Employment Office’s policy evaluation and monitoring activities. There is, however, a modest financial cost associated with the measure: individuals following a full training pathway remain on unemployment benefits for a longer period, which increases short-term expenditure. Research by ONEM/RVA has shown that these costs are minimal in scale, particularly when compared to the clear benefits of the measure. The exemption substantially improves the chances of beneficiaries securing stable and durable employment in the health and care sector, which in turn generates fiscal and social returns.

## **PARTICIPATION**

### **Stakeholders involved**

Organisations or entities actively contributing to the design, implementation, monitoring, or support of the good practice (e.g. labour inspectorates, social security institutions, trade unions, employers’ associations, or other).

The good practice relies on the following set of stakeholders, each contributing within their institutional mandate:

- National Employment Office (ONEM/RVA): central authority responsible for the overall management of the exemption within the unemployment insurance framework, and for monitoring outcomes via the Dopflux system.
- Regional Public Employment Services (PES): VDAB (Flanders), Forem (Wallonia), Actiris (Brussels), and ADG (German-speaking Community) – responsible for granting exemptions to unemployed persons and linking them to training programmes in shortage occupations.
- Payment bodies (“organismes de paiement” / “uitbetalingsinstellingen”): carry out the actual disbursement of unemployment benefits to

	<p>jobseekers whose entitlement is extended under the exemption.</p> <ul style="list-style-type: none"> <li>• Cross-roads Bank for Social Security (Banque Carrefour de la Sécurité Sociale / Kruispuntbank van de Sociale Zekerheid): provides the data exchange infrastructure that feeds the Dopflux monitoring tool with relevant administrative information.</li> </ul> <p>▶ Training providers and educational institutions: deliver the vocational training or academic programmes for the health care sector that participants attend.</p>
<p><b>Target groups</b></p> <p>Main groups or categories that the practice is directly aimed at, who should receive its services or who engage with it (e.g. employers, mobile or posted workers, labour inspectors and social security officers, or other).</p>	<p>▶ The practice is directly aimed at two main categories:</p> <ul style="list-style-type: none"> <li>• Unemployed individuals who wish to retrain for professions in shortage occupations in the health care sector. They are the direct recipients of the exemption, as it allows them to engage in full-time or part-time vocational training or academic studies while maintaining their benefit entitlement.</li> </ul> <p>▶ Employers and institutions in the health care sector, who are in urgent need of qualified staff. By creating a structured pathway for jobseekers to enter these professions, the measure provides them with access to a pool of new workers trained for their specific labour market needs.</p>
<p><b>Final beneficiaries</b></p> <p>Individuals or groups that ultimately benefit from the outcomes of the practice, even if they are not the direct target or user (e.g. mobile or posted workers, vulnerable workers at risk of exploitation, employers benefiting from clearer rules or reduced admin burdens, or other).</p>	<p>▶ The outcomes of the exemption measure generate benefits that extend well beyond the immediate target groups:</p> <ul style="list-style-type: none"> <li>• Jobseekers and trainees: who not only gain access to training but also achieve higher rates of stable and sustainable employment, improving their long-term economic security and career prospects.</li> <li>• Workers in the health and care sector: who benefit from reduced pressure and workloads as additional qualified staff enter the workforce, helping to mitigate burnout and improve working conditions.</li> <li>• Employers and institutions in health and care: who gain access to a broader pool of qualified</li> </ul>

	<p>candidates, allowing them to fill critical vacancies and ensure continuity of essential services.</p> <ul style="list-style-type: none"> <li>• Patients and care recipients: who ultimately experience higher quality, safer, and more accessible care thanks to a better-staffed system.</li> <li>• The social security system and the wider labour market: which benefit from reduced long-term dependency on unemployment benefits as participants integrate sustainably into the labour market, which in turn strengthens resilience against structural shortages.</li> </ul> <p>► In this way, the good practice has a multilayered positive impact: it strengthens individual careers, alleviates institutional shortages, reduces systemic costs, and enhances societal wellbeing for society at large.</p>
<b>GOOD PRACTICE CRITERIA</b>	
<p><b>Achievements and outcomes</b></p> <p>What specific results did the practice achieve? (e.g. How many workers or employers were reached, number of publications created? What processes became faster?)</p> <p>What kind of broader benefits did it bring? (e.g. Did it improve understanding of rights and obligations, enhance cooperation between authorities, or reduce legal uncertainty and inconsistent application of rules?)</p>	<p>The exemption measure has demonstrated clear and measurable achievements:</p> <ul style="list-style-type: none"> <li>• Large-scale reach: Between 2021 and 2022, more than 4,000 jobseekers who benefited from the exemption were employed in the health and care sector within one year after training. In total, nearly 1/10 of this targeted group in 2022 entered the health and care workforce.</li> <li>• Higher employment intensity: Exempted beneficiaries in the health and care sector worked on average 40 days more per year than other jobseekers who exited from unemployment, a strong indicator of improved job stability and sustainability.</li> <li>• Structural labour market contribution: An estimated 1.4% of all work performed in the Belgian health and care sector is carried out by individuals who exited the exemption measure in the past year.</li> </ul>

	<p>This demonstrates the systemic impact of the policy in sustaining these essential services.</p> <ul style="list-style-type: none"> <li>• Evidence-based recognition: Results have been published in the Revue belge de sécurité sociale (RBSS, vol. 66/1) and further ONEM/RVA studies, making the outcomes accessible to policymakers, social partners, and researchers. In turn, this transparent monitoring has directly influenced the largest unemployment benefit reform in decades.</li> </ul> <p>Beyond these direct results, the practice has produced the following broader benefits:</p> <ul style="list-style-type: none"> <li>▶ Patients and care recipients ultimately gain access to safer, higher-quality, and more accessible care as staffing gaps are reduced. This contributes directly to improved population health outcomes, helping to improve general health and alleviate pressures on hospitals, long-term care institutions, and emergency services.</li> <li>▶ The social security system and the wider labour market profit from a strong return on investment: results in terms of durable employment integration, reduces long-term dependency on benefits, and leads to higher contribution revenues. In this way, the measure enhances both the financial sustainability of unemployment insurance and the resilience of the labour market against structural shortages.</li> </ul>
<p><b>Cost effectiveness</b></p> <p>How did you keep costs low while still achieving results? (e.g. Did you reuse existing tools, automate processes, or share resources across teams?)</p> <p>Can you show that the outcomes were worth the investment? (e.g. Did small changes lead to big improvements, or were expensive tools avoided?)</p>	<ul style="list-style-type: none"> <li>▶ The practice is cost-efficient because it is fully embedded in the existing unemployment insurance framework. No parallel schemes, subsidies, or digital platforms had to be created. Its operation depends only on standard cooperation between regional PES, ONEM/RVA, and the established payment bodies. The only significant addition was the follow-up through the Dopflux monitoring tool, which itself was an existing statistical tool/procedure which builds on Belgium's</li> </ul>

	<p>existing Cross-roads Bank for Social Security infrastructure.</p> <ul style="list-style-type: none"> <li>▶ It is difficult to measure the precise return on investment in strict monetary terms, since the benefits unfold over several years and cover domains beyond the labour market (such as public health). Nevertheless, there are some obvious sources of positive return: <ul style="list-style-type: none"> <li>• Durable employment integration: individuals exiting the measure to take up jobs in the care sector work on average 40 days more annually than comparable jobseekers. This translates into higher contributions, reduced benefit dependency, and greater fiscal sustainability.</li> <li>• Systemic contribution to staffing: 1.4% of all work performed in the Belgian healthcare sector is carried out by individuals exiting the measure each year. This serves as a direct and structural boost to service provision in the sector.</li> <li>• Retention effects for existing staff: By alleviating shortages and spreading workloads in a sector that's infamous for its increased risks of burnout and outflow among current workers, the measure indirectly safeguards further employment and reduces costly turnover.</li> <li>• Improved public health outcomes: With a better-staffed workforce, patients and care recipients experience safer, more accessible, and higher-quality care. These improvements have tangible long-term social and economic payoffs, including fewer delays in treatment and reduced strain on emergency services.</li> </ul> </li> <li>▶ While the return on investment is not easy to calculate exactly in monetary terms, it's so well-recognised that it's the only exemption that was entirely safeguarded during the 2025 unemployment reform.</li> </ul>
<b>Transferability</b>	<ul style="list-style-type: none"> <li>▶ Key features that make the practice work well;</li> </ul>

<p>What are the key features that make this practice work well? (e.g. a digital platform, clear guidelines, a joint inspection process, or strong coordination)</p> <p>What would another country or organisation need to make this work for them? (e.g. certain laws, IT systems, or staff training)</p>	<ul style="list-style-type: none"> <li>• <b>Simplicity of design:</b> the exemption is integrated into existing unemployment benefit rules, requiring minimal new tools or procedures, only a targeted strategic focus on the health care sector.</li> <li>• <b>Data-driven monitoring:</b> the Dopflux system provides clear evidence on employment outcomes, turning a long-standing exemption into a modern, accountable, and policy-relevant tool. The enhanced transparency affected strategic decisions in terms of employment strategies for policy makers and PES administrations alike.</li> <li>• <b>Institutional anchoring:</b> the measure has been preserved during a major reform of unemployment benefits, showing that its design is resilient and its impact well-recognised.</li> </ul> <p>▶ What another country or organisation would need:</p> <ul style="list-style-type: none"> <li>• <b>Legal framework:</b> unemployment or social security legislation must allow conditionality to be adapted, i.e. jobseekers should be exempted from active job search when pursuing approved training.</li> <li>• <b>Coordination between stakeholders that play a role in eligibility criteria and payout:</b> strong cooperation is essential so that exemptions granted are seamlessly reflected in benefit payments.</li> </ul> <p>▶ <b>Reliable data exchange:</b> access to integrated administrative data (e.g. through a cross-agency system such as NEO's Dopflux) enables monitoring of outcomes and strengthens political and social legitimacy.</p>
<p><b>Sustainability</b></p> <p>How is the practice sustainable from a social, financial or environmental perspective?</p> <p>What makes this practice able to continue over time? (e.g. It is now part of regular work or has been built into law or procedures?) and how are you</p>	<p>▶ The practice directly contributes to the long-term resilience of the healthcare sector by ensuring a continuous inflow of qualified staff, while increasing employability of jobseekers. The transparency of its positive outcomes created broad social support for the scheme, which resulted in it being the only exemption</p>

<p>making sure it lasts beyond the pilot or project phase?</p>	<p>scheme being entirely maintained during the 2025 unemployment benefit reform.</p> <ul style="list-style-type: none"> <li>▶ The measure generates only modest additional short-term costs, linked to longer benefit entitlements during training. These are offset by strong return effects: durable labour market integration, reduced long-term benefit dependency, increased contribution revenues, and fewer costs related to staff turnover in the care sector. The Dopflux monitoring tool makes these returns visible, thereby reinforcing confidence in the financial soundness of the measure, which in consequence is considered to be self-evident by policy makers.</li> <li>▶ Since the practice evolved organically from existing processes that trace back to employment strategies of the 1980's, it is firmly built into existing procedures and law, allowing it to continue even through significant legal and procedural reforms.</li> <li>▶ Finally, the practice doesn't seem linked to any direct environmental impact.</li> </ul>
<p><b>Innovativeness</b></p> <p>What makes this practice new or different in your field or country? (e.g. Is it the first of its kind, or does it combine actors who don't usually work together, or activities not performed before?)</p> <p>How does it improve older or less effective approaches? (e.g. By reaching more people, using data better, or simplifying complex procedures)</p>	<ul style="list-style-type: none"> <li>▶ The exemption for training as such is not new: it was first introduced in the 1980s. What makes this practice innovative today is how the integration of systematic monitoring has fundamentally changed both its use and its policy significance. Monitoring via Dopflux provided, for the first time, robust and transparent evidence on the labour market outcomes of beneficiaries. This evidence allowed policymakers and regional Public Employment Services (PES) to move beyond generic exemptions towards a data-driven strategic and socially supported focus on the healthcare sector. As a result, during the 2025 unemployment reform, the measure was not only preserved but also redefined to apply exclusively to this sector, precisely because the monitoring demonstrated its proven impact there.</li> </ul>
<p><b>Digitalisation</b></p> <p>What kind of digital tools or platforms were used in this practice? (e.g. online</p>	<ul style="list-style-type: none"> <li>▶ The practice makes use of Dopflux, a centralised digital data infrastructure developed by the National Employment Office (ONEM/RVA). Dopflux integrates</li> </ul>

portals, automated case tracking, data sharing, digital databases or other)

How did these tools help in reaching your goals? (e.g. Did they save time, facilitate access to data in real time, reduce errors, help detect fraud, or improve coordination between authorities?)

information from multiple administrative sources through the Belgian Cross-roads Bank for Social Security, whose core mandate is to manage secure and efficient data exchange across institutions. In addition, the Belgian unemployment insurance system already operates with automated processes to apply exemptions within benefit entitlements. Once a regional Public Employment Service (PES) grants an exemption, this decision flows digitally to ONEM/RVA and to the payment bodies (“uitbetalingsinstellingen/organismes de paiement”). The information is processed automatically in the benefits system, ensuring that jobseekers continue to receive the correct payments without administrative delays or manual intervention.

- ▶ Together, these digital components enable seamless administration (in itself intended to reduce errors and fraud, save time, and avoid unnecessary paperwork for both institutions and beneficiaries), as well as a level of transparency and accountability that turned the training exemption into a focused strategic instrument aimed directly at the high return on investment both in terms of alleviating health care shortages and increasing employability of jobseekers.