

## The safety and staffing challenges facing health and social services



**(18 March 2020) Trade unions across Europe are responding to government measures to tackle the spread of the COVID-19 coronavirus. Along with the health, social care and emergency service workers on the frontline, many other public service workers across prisons and migrant centres and in energy, waste and water providers are responding to the need to maintain services. Below are some of the latest developments focusing on the health and social care sectors.**

In **Italy**, the European country worst affected by the crisis, the three main trade union confederations have [written to the government](#) calling for urgent action to tackle staffing and protective equipment shortages in health and social care. Along with the chronic shortage of masks, the unions also warn about the poor quality of many being supplied which fail to ensure adequate protection. This is putting an additional burden on workers who are already overstretched as they worry that they

are properly protected.

The confederations have also strongly criticised the government for the rules on quarantining which mean that health care workers are only suspended from work if they test positive for COVID-19 or are asymptomatic. The unions argue that this increases the risk of spreading the contagion both inside health facilities and among family members.

The confederations are calling for immediate and detailed feedback on the supply of protective equipment in terms of both quantity and quality; cancellation of the rules on quarantining health staff; and convening of regular meetings between the health ministry and trade unions.

In **France** health and social care trade unions, including [CGT](#), [CFDT](#), [FO](#) and [UNSA](#) have been involved in a long-running campaign to address increasing problems with the provision of health and social care. They have been calling for action on recruitment, pay and conditions and for a stop to all closures of health care facilities. The COVID-19 crisis has made these demands all the more acute and the unions have stressed the importance of ensuring that they are fully involved in discussions on the emergency measures needed.

In **Spain**, the Sanidad-CCOO and FeSP-UGT health federations have raised major concerns in particular about the situation facing the predominantly female workforce in [residential](#) and [home care](#) services. The unions have been campaigning for better pay and conditions for workers and are extremely critical of the private companies that dominate the sector for not doing enough to ensure that workers are properly protected against infection or from the risk of potentially spreading the corona virus among the very vulnerable elderly population.

The [FNV](#) trade union in the Netherlands has called on the government and employers to address the challenges facing the health care sector. The union wants a coherent plan to try to balance out the excessive demands on intensive care staff with support from other health workers who are being sent home because of the decision to cancel routine operations. The FNV also wants additional and free childcare provided for health workers who are being affected by the closure of schools.

In order to ease the supply of health personnel, the ministry of health has temporarily changed the rules relating to the BIG register of health professionals.

Any worker whose registration lapsed after 1 January 2018 can return to work in the health service bearing in mind measures to assure their competence and skills while those currently registered will not have to re-register while the temporary rules are in place. Other countries are taking steps to encourage retired and former health workers to help tackle staffing shortages, with Norway, for example, clarifying that pensions won't be affected if people.

In **Lithuania**, four health service trade unions [wrote to the government](#) on 13 March with a series of demands on health workers' pay and conditions, health and safety and other measures. The government has confirmed it will categorise COVID-19 as an extremely hazardous disease which means that staff treating infected patients will be entitled to a 15% bonus. The unions also want to see 100% sick pay for infected staff and guarantees on testing and quarantining. Our affiliates, LSADPS, already reports problems with the supply of personal protective equipment.

In **Germany**, safe staffing levels in hospitals has been a major collective bargaining issue for the ver.di trade union which has negotiated a number of agreements across the country that include additional jobs and measures to tackle excessive workloads. The latest [agreement on jobs and reduction of workloads](#) was negotiated with the University Hospital of Schleswig-Holstein based in the cities of Kiel and Lübeck. The union sees this as a major success with 430 additional jobs to tackle the excessive workloads faced by health care staff. The agreement was negotiated over several months and ver.di believes it should lead to a major improvement in working conditions.

Austerity measures after the economic and financial crisis hit many countries and their effects are still being felt. In **Ireland** the health ministry imposed restrictions on recruitment across the public services including health care. However, the SIPTU trade union has welcomed the decision by the health ministry to lift all restrictions on the [recruitment of health workers](#) and take action to speed up the process of recruitment.

**The ETUC has contacted all its affiliates to ask them to share information on any social partner agreements on measures to tackle the COVID-19 crisis. It has been uploading these onto a dedicated page on its [website](#) . EPSU has already had 16 responses from nine countries following its request for information from affiliates sent out on 18 March. This will be uploaded to the website as soon as possible.**

[!\[\]\(a03a7eb2f4046e1d3c76772003e549ea\_img.jpg\) France](#) [!\[\]\(844169987a590ed8c7e31d5d18950e8d\_img.jpg\) Germany](#) [!\[\]\(2af34e678d9364b2f32b7174f4964d2c\_img.jpg\) Ireland](#) [!\[\]\(70453908cab6780413d48bd2b8b15c53\_img.jpg\) Italy](#) [!\[\]\(00c909e82d9243e04b2a707a76cc895d\_img.jpg\) Lithuania](#) [!\[\]\(e49f830eafafbbbc437c61baa192c426\_img.jpg\) Netherlands](#) [!\[\]\(529cb0ec52d92e2fd30d962a18f59cc7\_img.jpg\) Norway](#)

 [Spain](#)

- [Log in](#) to post comments

- [Printer-friendly version](#)

Policies

[Health](#)

[Health and Safety](#)

[Staffing levels](#)

Sectors

[Health and Social Services](#)