Public service union Verdi ends 50-day strike by Berlin health workers

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After sabotaging and ending the strike by nursing staff at the state-owned hospital Vivantes and at Europe's biggest university hospital, the Charité in Berlin, the German public service union Verdi has now called off the strike by workers at Vivante subsidiaries.

The strike was aimed at improving wages for the beleaguered health workers. Now the existing, miserable rates of pay will continue for at least four more years.

The approximately 2,000 workers are employed in outsourced subsidiaries in areas such as cleaning, transport and catering. Their demand was for an increase in wages to bring them into line with the official public sector contract (TVöD). Based on their existing contract, the vast majority of Vivantes subsidiary workers receive up to 800 euros less per month than other public sector workers.

On 29 October, the union and hospital management presented a document regarded as the basis for a contract to come into force at the beginning of next year. Verdi had already suspended the strike at the subsidiaries a week earlier. The core of the agreement is the promise that salaries will gradually "converge" to the level of the TVöD by 2025.

According to the union, two of the five affected subsidiaries will receive a 2.5 percent wage increase retroactive to 1 July. All employees will also receive a coronavirus special payment of 1,500 euros. According to the paper presenting the key points, employees at Vivantes rehab facilities and technical and construction staff will receive 96 percent of the TVöD pay scale at the end of 2025, with 91 percent for the three other subsidiaries.

Describing the agreement, Verdi negotiator Ivo Garbe declared, "The result is a compromise. In parts a good compromise, in parts a very painful one."

In reality, the result is a blow to the workers. The central demand of the state government, hospital management and business representatives--namely, no alignment with TVöD levels--has been met. Vivantes explained that most of the contract would come into effect only at the end of the four-year term and it was therefore highly satisfied with the result.

An increase of just 2.5 percent this year means a real wage cut based on the inflation rate of 4.5 percent in October. The extremely long period of four years is meant to ensure that low rates of pay are locked in for the long term, and during that period, in accordance with German labour law, workers are not permitted to go on strike.

The new incoming Berlin state government, most likely a continuation of the coalition of the Social Democratic Party (SPD), Greens and Left Party, expressed relief at the ending of the industrial action. "We are pleased at this major step," declared Bettina Jarasch (Greens), following a meeting of the "red-green-red" coalition to negotiate terms for the new administration.

Berlin SPD leader Franziska Giffey expressed special thanks to her party colleague and former SPD leader and state premier Matthias Platzeck, who had mediated the wage dispute. His efforts had played a major role in finding a solution despite a hardening of fronts, Giffey said. Platzeck had played the same role in ending the industrial action by health workers at the Charité.

Nursing staff at Vivantes clinics and the Charité had also been on strike for four weeks, beginning in early September. They had demanded more staff and an end to unbearable overwork. Thousands of treatments were postponed or cancelled at all eight Vivantes and three Charité sites during the strike, which enjoyed huge support among workers and the population as a whole.

Verdi's top priority was to limit the strike and end it as quickly as possible. In close coordination with management and the state government, it first ended the strike at Charité, and a few days later called off the strike by nursing staff at Vivantes. In both cases, the union agreed to a vaguely formulated "key point" paper as the basis for a contract to be negotiated in the next few weeks.

For the nursing staff at the Charité, the key point paper included a so-called "relief contract" calling for the hiring of 700 additional staff over the next three years. This was far below the strikers' original demand for 1,200 new staff. No details were released on how the allocation of jobs was to

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take place.

Another key point referred to so-called “stress points.” Health workers working five understaffed shifts are to receive one point that can be converted into eight hours of free time to compensate for the additional workload. A maximum of five days off per year was stipulated, however, thereby codifying the permanent overworking of the nursing staff rather than reducing it.

A similar system has been agreed for Vivantes. Accordingly, a nurse who has worked on an understaffed ward for one shift receives a “Vivantes time off” point. For nine accumulated points, the worker is to receive one shift of compensatory time off, or alternatively 150 euros.

In 2023, this “bonus” will apply after seven points, but it still remains highly profitable for the clinic to plan understaffed shifts, especially since the number of possible days off is capped, as at the Charité. Other details of the paper, which are to be incorporated into a contract agreement for 1 January next year, are largely cosmetic in nature.

Verdi also called off the strikes in Berlin because it is seeking to isolate and suppress further struggles that will inevitably develop given the conditions prevailing in Germany’s clinics. In the state of Brandenburg, 1,300 non-medical workers in the Asklepios clinics are on strike again this week. Work stoppages will start on Thursday in Brandenburg an der Havel, Teupitz and Lübben.

Since April, Verdi has been negotiating with the private hospital operator on behalf of 1,450 employees. Asklepios, one of the three largest hospital groups in the country, has categorically refused to raise wages even to the level of the TVöD.

Here, too, Verdi is working overtime to isolate and quickly end the industrial action. On 5 October, workers voted by almost 91 percent for an indefinite strike, after 10 days of warning strikes since June. Verdi ignored the vote and called a six-day strike.

Only after Asklepios presented a provocative offer did Verdi feel compelled to call another strike. The company’s latest offer is a salary increase of between 4.1 and 8.5 percent. In addition, workers would receive a one-time coronavirus special payment of 1,200 euros instead of a wage increase for one year. In addition, Asklepios publicly threatened to close clinics.

Despite this provocative behavior, Verdi is limiting the strike to 10 November and has refused to call out on strike the approximately 150 medical staff employed by the company.

The deliberate sabotaging of strikes by the unions underlines that need for workers to take the struggle into their own hands. Health workers must organise themselves into independent action committees to expand their strikes and successfully wage the struggle for higher wages and better working conditions. This is the only way to prevent an even greater disaster and a collapse of the health system in the midst of the pandemic.

A number of doctors’ representatives and intensive care specialists are currently warning of a critical strain on hospitals. The president of the German Interdisciplinary Association for Intensive and Emergency Medicine (DIVI), Gernot Marx, told the MDR Aktuell program a week ago that although there are currently fewer COVID-19 patients in German intensive care units than last autumn, there are also 4,000 fewer intensive care beds available compared to the beginning of the year.

The main reason is that many nurses have quit their jobs or reduced their working hours due to the massive workload. The director of the Jena hospital, Michael Bauer, confirmed the decrease in staffing levels in intensive care units. He told MDR that in the course of the pandemic, about 10 to 20 percent of nursing staff had quit intensive care units.

The consequences of this development are dramatic. Already, in some regions non-essential operations have been postponed. As a result of the official “profits before lives” policy and the de facto termination of all protective measures, the number of COVID cases and hospitalisations is skyrocketing, with disastrous consequences.

“We have the problem that nursing staff in the intensive care units are weary… It is an enormous burden,” warned intensive care physician Prof. Dr. Uwe Janssens on the ARD morning news programme. “We have increasing numbers. And when I… see the incidence levels, that’s already dramatic. It’s almost like last year. And we will see even higher numbers.”

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