

UK health workers' sick pay torn up as COVID-19 infections surge

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Guaranteed sick pay arrangements for workers in the National Health Service (NHS) who catch COVID-19 have been ended, along with leave entitlements for staff self-isolating due to household members testing positive. The Johnson government's criminal edict coincides with a surge of the pandemic that is overwhelming hospitals.

The Department for Health and Social Care (DHSC) withdrew its COVID-19 staff guidance on July 7, ending sick pay for new episodes of COVID-19 and access to special leave for self-isolation. The move places the lives of health workers and patients at increased risk and has been met with anger by nurses, doctors and other NHS staff.

Dr Alison Twycross, who founded the advocacy group Long Covid Nurses and Midwives UK, said the new rules are "a slap in the face". She told *Nursing in Practice*, "We are the ones on the front line nursing these patients and now we will be penalised for that. This government has got this wrong and is playing with our lives."

The COVID-19 staff guidance on sick pay and self-isolation was introduced at the start of the pandemic in March 2020. It ensured payment for absence due to COVID-19 illness or self-isolation for all NHS staff regardless of length of service. Any illness due to COVID-19 was not added to already accrued absences.

Under the new guidelines, staff with COVID-19 will only receive standard contractual sick pay, which is dependent on length of service. Newly employed nurses and other NHS staff will receive no sick pay if they become infected, and neither will many agency workers. Permanent staff who are off with Long-COVID will drop down to half-pay after six months.

Staff in their first year of service are currently entitled to one month's full pay and two months half pay for sickness annually. After completing five years of service, they are entitled to six months full pay and six months half pay.

Those staff currently off with long-term illness due to COVID-19 will have a one-to-one interview to look at "transition arrangements" through August, returning to contractual sick pay from September 1. For many, this will

mean a cut-off point of full pay at six months instead of twelve and dropping down to half pay. NHS Employers chief executive Danny Mortimer said, "This is a sensible step given where we are now in relation to the pandemic... as we learn to live with Covid over the long term..."

Learning to live with Covid has meant nearly one in ten infected workers being forced to return to work by their employers. A poll published by the Trades Union Congress (TUC) found 9 percent of employees displaying symptoms had been forced into workplaces, and, in the past 12 months, 10 percent have been asked to work alongside colleagues who had tested positive.

The *Observer* cited the case of Mandy Green (not her real name) who was told to work on a supermarket deli counter even though she was still testing positive. She refused and was threatened with disciplinary action when she returned to work 10 days later. "My manager called me on the third day and told me to come in because they were short [of staff]. But I was still testing positive—the line was still strong. I was really ill. I had to get an asthma pump because I couldn't breathe," she said. "I said no to them because we work with the public and older staff."

Some of her colleagues came in after falling ill with the virus. "A couple of people said they were positive but they had been told to come in," she said. "[The supermarket] was not bothered about our welfare... or Covid."

In the week that COVID-19 sick-pay for health workers was scrapped, cases of COVID-19 rose sharply, with 2,154,000 infections in England, 149,700 in Wales, and 312,800 in Scotland, according to the Office for National Statistics (ONS) for June 23-29. This was an increase of almost twenty percent in a single week. In England this equates to 3.95 percent of the population or 1 in 25 with COVID-19, 1 in 20 in Wales and 1 in 17 in Scotland.

Professor Tim Spector tweeted last week, "Omicron BA.5 is now past 395,000 per day setting new records for Scotland and Wales and due to smash UK records within a week."

Hospitalisations in England due to COVID-19 have reached nearly 12,000, an increase of 33 percent from the

week before. NHS Trusts are reporting that wards and bays in some hospitals are having to close due to high rates of infection and staff absence.

Admissions to hospital and intensive care units are at their highest since mid-April.

Many hospitals are reintroducing mandatory face masks for staff, patients and visitors. The Johnson government's scrapping of this measure in healthcare settings has been disastrous. Dr David Strain, senior clinical lecturer at the University of Exeter medical school told the *Guardian* that changes in policy around the testing of patients and mask wearing had contributed to rising infections. "This wave, which is driven by the highly transmissible BA.4 and BA.5 Omicron sub-variants, started to hit us at exactly the same time that there was a significant government pressure to stop wearing masks in hospital because of the way it appeared. And therefore, for a very brief period, there was a fair amount of in hospital transmission as well," he said.

There are ongoing discussions about extending the roll-out of the fourth booster jab from over 65s to over 50s and bringing this forward from the autumn.

The DHSC's updated staff guidance states that Covid and Long-COVID will now be treated like any other illness. It is a declaration that COVID-19 will continue to impact the livelihoods of thousands of nurses and other health staff who have worked on the frontline throughout the pandemic—only now they will be stripped of even minimal financial protections.

Karen, 60, a clinical support worker on the wards from Bedfordshire, told *PA News*, "Colleagues have caught Covid several times since the pandemic began. Now we are going to have to consider if we can even afford to be off sick when we catch it or suffer from long Covid."

In April, research by public services union Unison found healthcare staff with Long-COVID are returning to work early because they are afraid of losing their jobs. Of 1,916 healthcare workers who had Long-COVID, 68 percent said they were back in the workplace while still suffering with symptoms such as breathlessness, fatigue, brain fog and aching joints, while 8 percent said they had been too ill to return to work.

Julie Taylor, 43, a nurse from Yorkshire, who is now working from home due to Long-COVID told the *Yorkshire Post*, "Long Covid is a work-acquired injury for many of us. Nothing has changed – we have no effective treatment and no cure, so how are people with long Covid able to get back to work safely and effectively?"

An estimated two million people in the UK are currently suffering from Long-COVID, with the latest data showing women and those working in health and social care more likely to be affected.

At least 122,000 (or 3.6 percent) of healthcare workers are experiencing Long-COVID, according to self-reported data from the ONS as of April 2021—the highest rate among any occupational group. That figure excludes agency staff and those working in primary care but does include community nurses and midwives.

Dr Alison Twycross told *Nursing in Practice*, "People have been treated abominably. Union support can be patchy, managers don't always understand about long Covid, HR doesn't always understand and neither do colleagues."

RCN England director Patricia Marquis told the *Independent*, "NHS pay is barely enough to make ends meet at the best of times, and this will be another blow for some struggling with Covid-19 related health issues." But the RCN and other health unions have done nothing to mobilise their members against this fundamental attack on workplace health and safety.

As super spreader events continue to take place throughout the summer and with no restrictions in place, the likelihood is that the anniversary of "Freedom Day", July 19, when all public health measures to contain the virus were lifted, will see the highest number of cases ever.

Stephen Reicher, Wardlaw Professor of Psychology at the University of St Andrews and Vice-President of the Royal Society of Edinburgh tweeted Friday, "When the number of people with Covid is equivalent to the entire populations of Belfast and Cardiff and Edinburgh and Manchester and Birmingham combined, when any pub or train carriage or bus you enter is likely to have an infected person, shouldn't we be doing something?"



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