

German union Verdi ends strike at university hospitals in North Rhine-Westphalia

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The longest labor dispute to date in the health care sector of North Rhine-Westphalia (NRW) has been shut down by the Verdi services union after almost 12 weeks. The negotiated collective agreement does not provide any real improvements for the nursing staff in Germany's most populous state. Rather, it serves to cement the intolerable working conditions in the clinics.

As of Wednesday, the nursing staff had struck for 77 days, protesting poor wages, intolerable working conditions, staff shortages and the associated deficiencies in patient care. Well over 10,000 operations have had to be postponed at six clinics since the beginning of May.

The labor dispute enjoyed huge popular support despite minimal coverage in the media. The pressure on nursing staff intensified enormously with the onset of the coronavirus pandemic two-and-a-half years ago. It is only thanks to the dedication of nurses, doctors and other staff in the clinics that the care system has not long ago collapsed.

The situation in hospitals is again becoming critical due to the brutal mass infection policies of federal and state governments. Rising infection rates are leading to increased hospital admissions and numbers of intensive care patients. Concurrently, staffing shortages are being exacerbated by the high number of nurses who themselves have fallen ill with COVID-19. It is not uncommon for 20 to 25 percent of hospital employees to be on sick leave or in quarantine.

Verdi, the responsible union, celebrated the collective bargaining agreement as a "victorious stage." Katharina Wesenick, Verdi state department head for health, social affairs, education and science, declared that the first collective agreement for the relief of hospitals had gone into force.

The employers were also visibly pleased with the agreement. Their first reaction was to announce that starting Wednesday significantly more patients could receive care at the university hospitals.

North Rhine-Westphalia's Health Minister Karl-Josef Laumann said he was pleased that social partners had found a solution to the wage dispute, adding that there was now a good result on the table that would lead to better working conditions and provide lasting relief.

While employers, politicians and the union are cheering the end of the strike, the employees themselves have nothing to celebrate. For them, the agreement is a slap in the face.

A previous agreement at the Charité and Vivantes hospitals in Berlin served as a model for the agreement in NRW. There, Verdi similarly choked off the strike for better working conditions after 50 days and agreed with the clinics and the coalition Senate on a collective bargaining agreement that wins no improvements for the employees and merely forces them to stay quiet.

According to the agreement, 700 additional employees are to be hired at Charité over the next three years. The original demand of 1,200 additional employees, which was already far too low, has thus been almost halved. Whether these new staff will actually be hired, however, is anyone's guess.

An elaborate point system for workloads was agreed upon, which in reality does not reduce caregivers' overload, rather legitimizes it. For every five shifts understaffed, there is one point that can be converted into eight hours of time off to compensate for the strain. So, if a nurse has covered an eight-hour shift for two people, he or she will not get even two of those hours compensated as time off.

However, there is to be a maximum of only five such days off per year, so no more than 40 shifts per year

will be compensated for understaffing. This means that it will continue to be extremely profitable for the hospitals to work understaffed.

The agreements reached for the university hospitals in NRW are even worse for the employees. The key points of the contract are an allegedly better staffing ratio and additional relief days, or financial compensation if these days go unused.

The collective agreement is not due to come into effect until the beginning of 2023. Although clinics are expected to face an overwhelming load in the coming months, workers can expect no improvement in working conditions during this time. Another year and a half will pass before the system of relief points takes effect. There is only a small, fixed number of additional days off available during the transition.

Various models have been agreed upon allowing the various hospital areas to define the alleged relief. For example, there are binding staff-patient ratios for normal and intensive care units. If these are undercut, the employee receives a point.

Only after a staggering seven points does he or she then receive a day off. In the first year, the number of possible relief days is also capped at 11. Once this number has been reached, the employee no longer receives any compensation despite the continued stress of the unimproved situation.

In addition, the staffing ratio has not yet even been defined, and it is unlikely that it will be appropriate.

In other areas, staff shortages are more egregious. For the service areas it was agreed that there would be 10 percent more staff compared to the current staffing target. The time frame for this is not yet known but given the massive understaffing in this area in recent years, it will be no more than a drop in the bucket.

In the patient management area, there will be only three additional days off. Since no further agreements have been made in this area, it is already clear that a constant number of employees will have to do the same work in less time.

For trainees and employees in other areas there are purely cosmetic changes that do not fundamentally alter the enormous workload.

The extremely long, five-year term of the contract was important to unions, hospital management and the state government. This is intended to ensure that there will be a no-strike obligation for the next few years,

thus preventing any protest.

The exact text is being formulated, to be followed by a full vote. By August 5, the affected Verdi members will be called upon to vote on whether to accept the collective agreement.

Certain voices are already calling for this model to be adopted in other German states in order to suppress resentment and anger about the catastrophic conditions there, too.

The agreement once again makes it clear that the unions are acting directly against the employees. The agreement must be rejected. The fight for real improvement can only be won if Verdi's negotiating mandate is withdrawn. Independent rank-and-file committees must be organized to unite these struggles across industries and national boundaries.



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