

Catastrophic situation at Berlin children's hospitals

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3 October 2022

The Berlin Children's Hospitals Initiative (IBK) has sent a second open letter to Federal Health Minister Karl Lauterbach (Social Democrats, SPD) as well as to Berlin Health Senator Ulrike Gote (Greens) and the management of Berlin's children's hospitals.

It draws attention to the devastating situation at children's hospitals and child emergency centres in the capital. The letter was signed by paediatricians from many hospitals, including Charité, Vivantes Neukölln and Friedrichshain, Helios Berlin-Buch and Emil-von-Behring, St. Joseph hospital, DRK-clinic Westend, Sana clinic Lichtenberg and Evangelisches Waldkrankenhaus Spandau.

Following the first open letter in January this year, no concrete measures were taken despite the precarious situation. Now the IBK sees the health of patients in "immediate danger."

In the past years the situation on children's wards, as well as in other hospital areas, was extremely precarious. With the coronavirus pandemic, this had become even worse. "Medical care" would not be "guaranteed in the next waves of infections" if "no drastic changes are implemented by the autumn," the letter states.

"The situation in children's hospitals is very serious," according to a spokeswoman for the IBK. "We are at the beginning of the RSV wave [respiratory syncytial virus, which causes acute respiratory illness and can be especially dangerous for those under age one]." This again threatens "unacceptable conditions for patients and staff," as was the case last year.

The already far too small number of nursing staff will be further reduced by the unfettered spread of the coronavirus: "Staffing levels are now so thin that patient care is at risk. This is further exacerbated by the novel coronavirus variants already emerging and resulting staff shortages." It is not uncommon for hospitals and other medical or nursing facilities to struggle with sick leave

rates of 10 to 20 percent. This is primarily due to the removal of any protective measures against the pandemic.

The understaffing of paediatric emergency departments with qualified personnel is so severe that the consequences are being felt directly. In the child emergency centres, the severity of an illness or injury determines the time frame in which treatment must be initiated. However, such an assessment can only be made by personnel qualified to do so.

According to the IBK, the designated time window for treatment is "regularly" exceeded due to the lack of personnel in non-life-threatening emergencies. Patients must sometimes wait up to six hours to receive treatment, which not only pushes children and parents to the limit, but also creates avoidable emergency situations, as reported by the Berlin Tagesspiegel.

That this is common practice was also shown in a Twitter post by Berlin state parliamentarian Orkan Özdemir from late September. During his three-hour wait in the emergency room at St. Joseph Children's Hospital, "not even a registration or initial assessment was made." "Absolute chaos and excessive demands," was his conclusion. The SPD deputy conceals the fact that it is his party, which has held the Berlin mayor's post for most of the past 20 years, that is largely responsible for these conditions. But what Özdemir describes is the experience of thousands of patients, doctors and nurses.

As *Ärzte Zeitung* (Doctors Newspaper) reported in 2020, the number of trained paediatric nurses nationwide dropped "from nearly 42,000" (in 1996) to "fewer than 38,000" (in 2017). That number has continued to drop dramatically since the pandemic began, after thousands of nurses could no longer tolerate conditions in hospitals and resigned or reduced their hours.

Current staffing requirements are often no longer being met, especially in intensive care units, *Ärzte Zeitung* notes. For Level 1 maternity hospitals, the nursing ratio of

one paediatric nurse per preterm infant requiring intensive therapy with a birth weight of less than 1,500 grams could be met in only 38.1 percent of centres. The nursing ratio of one paediatric nurse per two preterm infants requiring intensive monitoring with a birth weight of 1,500 grams was met by only 46.9 percent of the Level 1 centres.

Even after initial treatment, there is no guarantee of receiving a hospital bed if needed. In any case, the capital city has only 735 beds in paediatric wards, a fact that has long been criticized. But even these beds can not be occupied because many must remain vacant due to the extreme staffing shortage. Frequently, children and adolescents have to be transported to hospitals in Brandenburg, some of which are far away.

Nationwide, the number of beds in clinical departments for paediatric and adolescent medicine fell from 35,160 (1991) to 20,331 (2017), according to the Federal Statistical Office.

For this reason, the Berlin Children's Hospital Initiative calls for supra-regional bed coordination and modernization of the infrastructure as a whole. The IBK's central demands are for more medically qualified staff in paediatric emergency departments and a fixed doctor-patient ratio of 1:6 in paediatric wards.

The abolition of per-case charges, according to which hospitals and departments must charge for treatment, medicine and medical equipment, and time spent, is also among the IBK's demands.

As important and justified as these demands are, they are falling on deaf ears among those with political responsibility.

The emergency conditions in Berlin's children's hospitals reflect the deplorable situation of the entire hospital and health service. Staff shortages and miserable working conditions are the result of a policy that has been pursued for decades by governments of all stripes. In the process, the health care system has been underfunded and completely subordinated to the profit interests of the shareholders of the private providers. In particular, the profits-before-lives policies of the ruling class in response to the global pandemic have revealed how indifferent the political, business and financial elites are to the health and lives of the population.

Despite the growing number of cases requiring treatment, the federal government claims there is no threat of "a shortage of provisions for children and adolescents," according to *Ärzte Zeitung*, pointing instead to the lack of bed utilization.

Stefanie Stoff-Ahnis, from the board of directors of the

leading association of statutory health insurers, told *Tagesspiegel* that "rather fewer" hospitals were needed nationwide because of vacant beds, coupled with a lack of nursing staff and constantly rising costs.

Health Minister Karl Lauterbach, whose declared goal is to destroy the "abundant" supply of beds in hospitals, is singing from the same hymn sheet. At a September 27 press conference, he declared, "In Germany, it is striking that we have about 50 percent more bed capacity than in other European countries ... and a 50 percent above-average rate of full inpatient care."

His conclusions from this are not unknown. Two years ago, when the Bertelsmann Foundation called for the closing of one in two hospitals in Germany, Lauterbach explicitly supported it. Now the consequences of the pandemic and rising costs due to NATO's war against Russia are to be used to radically change public health care.

Rising costs, a lack of revenue due to a lack of staff and insufficient public financial support threatens to drive masses of hospitals into bankruptcy. Johannes Denckert, chairman of the Management Board of Berlin's Vivantes Kliniken, has already outlined in *Business Insider* "an uncontrolled death of hospitals throughout Germany."

Lauterbach's latest statements should also be understood against this background. As he announced, the DRGs (Diagnosis Related Groups) in children's wards and hospitals are to be dropped. In the future, he said, there should be a fixed budget outside the DRG system for the 350 children's clinics and departments in hospitals, through which the costs are to be settled.

It is patently clear this is not a departure from the free-market policy of flat rate charges per case. Rather, it is part of Lauterbach's efforts to push the sick away from hospitals and towards outpatient treatment on a grand scale in order to save costs and close hospitals. In the current federal budget, the health care budget is to be cut from €64 billion to €22 billion—and this amid the COVID-19 pandemic, which has already cost more than 150,000 lives in Germany alone.



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