















Statement on Strengthening health emergency preparedness, response, and resilience: learning the lessons and building back better (agenda item 6)

Public Services International (PSI) and its European part, European Federation of Public Service Unions (EPSU), welcome the documents related to the agenda item 6.

We would like to make the following comment to the document: Towards a new strategy and action plan¹. In relation to lessons learnt present in the strategy we would like to underline the recommendations made by the Pan-European Commission on Health and Sustainable Development's report - Drawing light from the pandemic². The WHO recommendations reinforce our policies such as those in our report on resilience of the Long Term Care Sector³, where it is noted that particular attention is required to ensure inclusion of children, persons with disabilities, vulnerable, and/or elderly.

The Pan-European Commission's objective 4 - 'recommends to "(4.3) Reassess and strengthen the links between health and social care in light of the experiences during the pandemic, with the goal of increasing integration between them." To that end, the Commission recommends to 'undertake a reassessment of the links between these different elements of care [...] with a view to overcoming the systemic failures that were magnified during the pandemic.' We urge Member States to implement this important recommendation and include it in the new strategy. In 2020, EPSU, along with care-recipient organisations, called for establishing a committee⁴ at the European Union level to assess the failures of the long term

¹ https://apps.who.int/iris/bitstream/handle/10665/362086/72wd08e-Preparedness2.0-220651.pdf?sequence=1&isAllowed=y

² https://www.who.int/europe/publications/m/item/drawing-light-from-the-pandemic--a-new-strategy-for-health-and-sustainable-development

³ https://www.epsu.org/sites/default/files/article/files/Resilience report V6 web.pdf

⁴ https://www.epsu.org/article/epsu-calls-european-parliament-investigate-tragic-effects-covid-19-care-sector

care systems, which includes their failure to adequately integrate palliative care services. In response, the European Parliament set up the Special Committee on COVID -19⁵ Pandemic.

We suggest that to fully implement the recommendation of the Pan European Commission, the future work of WHO following the lessons learnt 'Invest in health care infrastructure and workforce' should be enlarged to 'investing in social care'.

Furthermore, 'investing in workforce' should include addressing workforce shortages, the health and care services being the most urgent. The pandemic exacerbated existing staff shortages, work overload, burnout and third-party violence⁶. Therefore, EPSU demands employers address staff shortages through social dialogue and collective bargaining (see for e.g., the updated Framework of Action on Recruitment and Retention⁷). However, governments have the crucial responsibility of securing and delivering the required funding to increase investment in recruitment and retention of health and care professionals as well as to improve needs-based staffing level. An example is the recent legislative proposal of the German government⁸. Many industrial actions⁹ are taking place to improve working conditions, like the Finnish nurses' plans for mass resignation, ¹⁰ to underline the urgency and need for action. Governments urgently need to prepare measures to make health and care professions attractive.

In terms of progress report on the operationalisation¹¹ of the recommendations made by the Pan-European Commission on Health and Sustainable Development we agree that safeguarding the health and social care budget is a priority and should be protected from austerity measures. We strongly disagree with establishing public and 'business partnerships to increase investment in healthy and prosperous communities, employment practices, and environments'. We have learnt from past experiences that businesses predominantly focus on profit maximisation at the expense of care recipients and the state. For instance, the largest multinational care company, ORPEA, was recently accused of embezzling public funds¹². Health is not a commodity and as such should be protected from any partnership with profit driven businesses.

Finally, we underline our position that intellectual property barriers to dealing with Covid-19, Monkey Pox and other related diseases should be suspended.

Co- signatories:

- 1. European Federation of Nurses
- 2. International Association for Hospice and Palliative Care
- 3. International Federation on Ageing
- 4. European Disability Forum
- 5. European Stroke Organisation
- 6. WEMOS
- 7. European Public Health Alliance

⁵ https://www.europarl.europa.eu/committees/en/covi/home/highlights

⁶ https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(22)01420-9/fulltext?mc phishing protection id=28048-cbhplfn0s0v8e5q3t9a0m

⁷ https://www.epsu.org/article/social-partners-hospital-and-healthcare-sign-framework-future-sector

⁸ https://gesundheit-soziales-bildung.verdi.de/mein-arbeitsplatz/krankenhaus/++co++026f3346-fde7-11ec-ab0e-001a4a160100

⁹ https://www.epsu.org/article/pay-and-staffing-six-months-action-health-and-social-care-unions

¹⁰ https://www.tehy.fi/en/node/17534

¹¹ https://apps.who.int/iris/bitstream/handle/10665/361292/72id01e-PR-PanEuroComm-220466.pdf?sequence=1&isAllowed=y

¹² https://www.lefigaro.fr/societes/orpea-accepte-de-rembourser-a-l-etat-25-7-millions-d-euros-sur-les-55-8-millions-reclames-par-les-pouvoirs-publics-20220830