





To David Sassoli, President of the European Parliament

To the Presidents of the EP political groups

To the Chair of the EMPL committee

To the Chair of the PETI committee

## <u>EU Parliament to use all its powers to investigate the tragic impact of the COVID-19</u> pandemic on long-term care across the European Union

Dear Mr Sassoli,

Distinguished Presidents,

We are addressing you on behalf of EPSU, the European Federation of Public Service Unions that organises more than 3 million workers in health and social services, AGE Platform Europe, the European network of organisations advocating for the rights of older people, and the European Disability Forum (EDF), the umbrella organisation representing 100 million persons with disabilities in Europe. We are writing regarding to the dire situation in long-term care across Europe, and in particular in residential care facilities, as a consequence of the COVID-19 pandemic. In the light of recent, dramatic developments, we call on the European Parliament to launch an investigation to assess the failures in addressing and managing the crisis in this sector. This would include taking into account what aspects of residential settings have made them so vulnerable to this pandemic.

There is mounting evidence from several countries that a large proportion of infections and deaths have occurred in residential services for older people, persons with disabilities and other social service facilities. The World Health Organisation indicated that half of the deaths related to COVID-19 in Europe have so far occurred in residential care and support services. However, this is likely to be just the tip of the iceberg: the idea that deaths in residential care services are somewhat "normal" or "unavoidable," plus the lacking of proper testing, have led to the refusal in many countries to include those who have died in these services as part of the official statistics on COVID. Nevertheless, death counts for the months of March - April 2020 are significantly higher compared to the average number of deaths from previous years. A number of Member

States have refused to consider the situation in long-term care facilities a priority, resulting in significant delays in responding to this crisis and neglect of the needs of workers and users in terms of protective equipment and safety protocols.

The appalling stories that are emerging draw an extremely worrying picture of both long-standing and contextual failures, revealing a serious lack of preparedness as well as a very poor and delayed management of the outbreak. This has contributed to thousands of preventable deaths and infections among those receiving care and workers. This sector has long been neglected and has had very low social and political consideration due to societies' discriminatory practices towards people in need of care and support. The shortages they face are now more visible than ever before. Workers on the frontline of the fight against COVID-19 have been left exposed by a lack of personal protective equipment, testing kits, training and safety protocols. The exposure of workers to the virus has left many residences critically understaffed, unable to meet basic needs and protect the rights of residents, which has only heightened the risk of fatalities.

To cite just a few examples, in Lombardy, the epicentre of the outbreak in Italy, EPSU's affiliates have encountered serious and worrying deficiencies in the management of the emergency in care for older people. This was due to lack of protocols and personal protective equipment. In some cases, even where protective equipment was available, staff were not allowed to use it because residents were not showing symptoms. Care staff working in residential care and support services and in home services feel as if they, and the people they care and support, are at the bottom of the list for PPE.

In addition, in many countries, despite the details on the number of doctors and other hospital staff that have fallen on duty, the numbers of care workers dead or infected because of COVD-19 are not gathered. Accurate data on the number of older persons and persons with disabilities living in residential care is almost absent in the EU. This makes the monitoring of their situation and accountability for their wellbeing in times of crisis even more difficult. All these elements combined contribute to an incomplete understanding of the situation.

The EU and all its Member States are committed to the UN Convention on the Rights of Persons with Disabilities (CRPD), which includes a commitment to a transition from institutionalised to community-based and independent living. EU funding regulations prohibit the EU from funding institutionalisation of persons with disabilities. Community based, person-centred services too have been critically affected by COVID 19. This has left many persons with disabilities without support, forcing them either to rely on family care, or to turn towards other forms of care in institutions, which have become hotbeds of infection.

Unions are working around the clock to support governments and institutions in providing social care workers with the equipment they need and to make sure they can access testing, and civil society organisations are playing a key role in pointing to the dramatic challenges facing older persons and persons with disabilities in this pandemic. But systemic responses are needed to address the challenges. Today's problems are not new: the care sector was already facing major problems in relation to breaches of human rights, understaffing and a lack of safety protocols before COVID-19. These were known and voiced by trade unions and NGOs long before the current crisis – and will need long-term responses as well.

## An inquiry into this situation is urgently needed

Political institutions need to address this failure: workers and users of care and support services are not second class citizens and it is imperative that an official European inquiry is launched into what has been happening in care services and what lessons we need to learn for the future. We owe it to those receiving care and to workers infected, as well as to the victims, to their families and to everyone in Europe.

European citizens expect of the European Parliament, their only direct representative at EU level, to show concern for what happens to them and to address this blatant and pan-European infringements of their rights. The evidence we put forward points to direct breaches of many of their fundamental Rights enshrined in the EU's Charter of Fundamental Rights – first and foremost their rights to life, dignity and health. For this reason we appeal to you to ensure that the European Parliament hears the voices and concerns of millions of citizens, workers and families: we need you to take a stand and make full use of the Parliament's powers. A European investigation, via an inquiry committee or a special committee with full investigative powers, would be able to independently verify and assess the preparedness plans and the management of the outbreak in the care sector while providing critical information for future decisions and measures to ensure that this will not happen again.

We are aware of the exceptional nature of these instruments but we think that when it comes to the respect of the right to life of people in Europe, the institution that represents European citizens and their voices needs to be at the forefront of this action, using all its power and taking any action needed, that would shed light over these breaches of human dignity.

We remain at your disposal to present you with further evidence and we suggest organising a meeting at your earliest convenience to discuss further this proposal.

## Yours sincerely,

Jan Willem Goudriaan General Secretary European Public Service Unions Maciej Kucharczyk Secretary-General AGE Platform Europe Yannis Vardakastanis President European Disability Forum