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**PSI POLICY BRIEF: LOCAL PUBLIC SERVICES
AND TRADE UNIONS THROUGH THE COVID PANDEMIC**

THE CASE OF WELFARE CARE KEMPEN (BELGIUM)



**Public ownership
and social dialogue are
key to service resilience**

ABSTRACT

The Covid-19 pandemic has prompted local public service providers to rapidly adapt, review their processes and operations and re-deploy staff under duress. The case of Welfare Care Kempen (Belgium) showcases the vital role played by constructive social dialogue between local public service management and local and regional government (LRG) unions representing Welfare Care Kempen (WCK) workers. Besides, public ownership and direct management enabled the intermunicipal consortium to: (1) continue to bring care to the most vulnerable users; (2) protect workers even in the absence of clear directions by the authorities at the onset of the public health emergency; and (3) maintain a close relation with the local communities. Such features that characterize Welfare Care Kempen have safeguarded continued access to quality local public care and welfare services for the Kempen community, while protecting workers as they had to swiftly respond to an unprecedented public emergency.

This brief was written by Daria Cibrario (PSI) and Mai Nagata (University of Erfurt) between February-March 2022. It largely draws on the interviews conducted by PSI, UCLG and LSE Cities with Dries Goedertier (CGSP-ACOD Belgium Trade Union Confederation), Ken Zegers (CGSP-ACOD Belgium Local Government Trade Union Federation), Eric Nysmans (Welfare Care Kempen) and Gil Peeters (Welfare Care Kempen) for the publication of Policy Brief 5 “[Local Public Services in Crisis Mode: Adapting Governance Models to Exceptional Times](#)” of the UCLG/Metropolis/ LSE Cities “Emergency Governance for Cities and Regions” Research Serie PSI contributed to.

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INTRODUCTION

LOCAL PUBLIC CARE SERVICES UNDER COVID-19 PANDEMIC

The Covid-19 pandemic has highlighted the vital role that local public service providers play virtually anywhere. For over two years, medical staff, nurses, emergency responders, care workers, and scientific researchers - among others - have played a crucial role on the Covid frontlines saving and protecting lives. Beyond the public service workers immediately exposed to patients and vulnerable people, many more local public service workers have staffed the frontlines of the pandemic and ensured that other frontline workers could operate, protecting lives, supporting the most vulnerable overcome illness, social isolation and economic hardship, while ensuring that the economy and communities did not collapse.

Among them are water, sanitation and waste workers, funeral services, social and welfare care operators, urban transport workers, municipal police, public and social housing services, unemployment services, and municipal librarians among others. These public service professions have all continued essential service delivery through Covid, exposing themselves and their families to contagion, and had to adapt and operate within a context of unprecedented occupational safety and health and psychosocial risks. Even during lockdown, they continued to serve their communities and deliver vital services to users.

Local and regional governments (LRGs), sometimes without national guidelines for occupational safety and health (OSH) at workplace at time of national emergencies, have often had to take the lead to protect communities, service users and workers, while ensuring continued service delivery. The Covid-19 pandemic revealed the

unpreparedness in emergency responses of many public services worldwide, but also their dire underfunding and different performance between public and for-profit operators in terms of saving lives while keeping workers safe. Decades-long [austerity policies](#) and [privatization](#) have resulted into a limited preparedness and capacity under such emergencies. The public health crisis has also pushed forward the digitalization processes [reshaping public service employment](#) and service delivery with a forced quantum leap in required skills, job contents and employment relationships in the sector.

Regardless, where such challenges have been consistently backed by a consolidated practice of constructive social dialogue and were addressed involving from the start, workers and their unions, service operators, local authorities, as well as users and community groups, the public service response to the pandemic has proved particularly effective.

In a study about the role played by trade unions during the crisis, the International Labour Organisation (ILO) has estimated that [a wide majority of unions across all industrial sectors have engaged in tripartite consultations](#) demanding and negotiating safe working conditions for frontline workers. [Social dialogue also provides a much needed participatory platform](#) for workers to get their voice heard regarding their working conditions, including OSH. Workers' rights, social dialogue and collective bargaining must be surely upheld during normal times, and even more so at time of emergencies as they are cornerstones of public service preparedness, continuation and resilience through crises and can help better protect service users, communities and workers alike.

2.

ABOUT WELFARE CARE KEMPEN

[Welfare Care Kempen](#) (WCK) is an inter-municipal consortium providing public care welfare and care services to residents of the Flemish Region of Kempen (Belgium) reuniting 27 municipal Public Centre for Social Welfare (OCMW).¹ A representative of each of the 27 OCMWs sits on the Consortium's Board and individual municipalities' budgets are pooled together proportionally to the population size of each municipality, building economies of scale. The fact of pulling resources together enables WCK to provide a level of service quality that would be hard to achieve if each of its 27 municipalities acted alone.

The WCK mandate stems from Article 1 of the Belgian OCMW 1976 Act that states *“Every person has the right to social services. Its purpose is to enable everyone to live a life of human dignity.”* The public service mission of WCK is therefore to focus on the most vulnerable situations, actively addressing this target user group while providing WCK workers professional tools and support to ensure care service provision on the grounds of *“social justice and legal certainty”* says Eric Nysmans, WCK Director. The spirit of OCMWs is also well encapsulated by the description of Bart Van Ballaer, former head of social work OCMW Herentals: *“a model on which family care and our social workers work very closely together. The caregivers are professionals who spend a lot of time in the users' situations. With good situational management from social workers, this approach can ensure that such situations improve effectively. Of course, caregivers*

must also be trained and well supported to carry out this tough assignment”.²

WCK delivers home care services, meaning that its workers visit households and individual users in need to:

- Provide health and care services
- Run errands with/for them (e.g. shopping, medical visits, administrative matters, etc.)
- Assist in the daily domestic chores (e.g. cooking, housecleaning, looking after pets, etc.)
- Offer leisure and social contacts to residents requiring support, disabled or isolated (e.g. walking, pushing a wheelchair, going to the library etc.)
- Help residents facing financial hardship, debt, legal advice.

Through its regional network, WCK also connects residents to a wide variety of related and complementary services in care and health such as mental health and youth welfare services, acting as a local care public service hub for the territory. Most WCK users are elderly and disabled people, as well as families in social and/or financial distress. The role of local authorities is also key in the interpretation of social policies to tackle the challenges specific to their communities and territories and formulate appropriate responses. According to Eric Nysmans and Gil Peeters *“these cannot be reduced to a single denominator and are too valuable not to be fully elaborated at the local level. (...) We are increasingly offering a tailor-*



made service in which the local government is seen more as a gateway and as a partner. Some choose to focus on the elderly, others focus on multi-problem families” depending on predominant needs.³

Its 270 workers cover a population of 500,000 inhabitants. Most of them are women who have been in care services for many years and are trained and qualified as per Belgian care profession requirements. Indeed, WCK is a pool of decent employment for the Kempen region as it not only ensures quality welfare care services, but also provides stable jobs with vocational training and qualifications for the care sector. An increasing share of WCK workers have a migrant background and migrant workers are encouraged to apply.

While some OCMWs have outsourced large shares of their services to private or non-profit operators such as non-profit associations or cooperatives, WCK has kept direct, public control of its service maintaining a majority of its services and staff in-house. As a public service operator, it has retained the power to choose to set progressive policies such as user fee levels according to user household income. This approach aims to ensure maximum service access to all residents and to address social inequalities in the region.

1. Public Centres for Social Welfare – in Dutch ‘Openbaar centrum voor maatschappelijk welzijn’ (OCMW), in French ‘Centre public d’action sociale (CPAS)’ and in German ‘Öffentliches Sozialhilfezentrum (ÖSHZ)’ are public institution that exists in each of the 581 municipalities of Belgium. Source: Wikipedia.
2. Nysmans, E. and Peeters, G. (2022) “Welfare Care Kempen, A Network of Locally Embedded Public Family Care: The Ugly Duckling of Home Care Services”, Welfare Care Kempen website.
3. Nysmans, E. and Peeters, G. (2022) “Welfare Care Kempen, A Network of Locally Embedded Public Family Care: The Ugly Duckling of Home Care Services”, Welfare Care Kempen website.

3.

WELFARE CARE KEMPEN'S RESPONSE TO THE CHALLENGES POSED BY THE PANDEMIC

// *The Flemish care sector was just not prepared for this pandemic”* according to Dries Goedertier, Advisor for the CGSP-ACOD Belgium Trade Union Confederation. The sector has long been underfunded and understaffed for the past four decades, and commercial care providers made significant inroads. Besides, strategic stocks of protective medical masks were disposed of just a few years prior to the outbreak, *“a huge mistake which put care workers at risk”*. Despite the Belgian National Tripartite Social Dialogue Committee for the public sector demanded more substantial resources for the care sector during sectoral negotiation through the pandemic, the Flemish government refused to increase the budget or enhance staffing. It was only following trade union pressure at the early stages of the pandemic that the Flemish government decided to increase

the care sector budget and enhance staffing. However, the Flemish majority parties attempted, at the same time, to pass legislation aimed at the privatisation of the public care sector.

Although Belgium has solid workplace OSH measures, in the absence of proper Covid-specific OSH guidelines and personal protective equipment (PPE) Belgian workers were exposed to substantial risk. National health protocols and guidelines for workers facing Covid were missing at the onset of the outbreak. WCK welfare care workers were among the most exposed. *“At the beginning of the public emergency, the Belgian government had focused its attention on elderly care homes users and workers”* says Eric Nysmans. *“However, little thought was given to care services where workers go to users’ homes such as WCK”*. Workers’ unions and management sent joint letters to public authorities,



demanding a clear policy guidance and adequate Personal Protective Equipment (PPE), which at the time was prioritized for hospitals and residential care services and virtually unavailable to home care services. Due to the national social distancing protocols and to the fear of contagion, some users rejected WCK workers' visits, leading to workday gaps for some workers and fewer opportunities to reallocate them.

In the absence of national guidelines and in order to deal with the PPE shortage, WCK re-deployed some of the workers to produce masks in-house for their colleagues or assigned them to other services, departments or different OCMWs. While reliable information about the virus and OSH protocols were still lacking, WCK trade union representatives offered evidence-based information that helped the service carry on and kept workers and

users safe. *"Working together in dialogue [WCK management, trade unions and local authorities] we tackled the issues one at a time"* says Ken Zegers, General Secretary of the CGSP-ACOD Belgium Local Government Trade Union Federation, Kempen Branch. *"This way we could continue to provide home care services to our communities"* he adds.

WCK collectively explored options to continue deliver its mission at times of unprecedented crisis, choosing to keep complying with its public services ethos and mandate towards the community. The inter-municipal consortium also setup a so-called "Cohort Care Programme", where WCK workers would carefully review their pool of users and identify the most vulnerable. Then workers and management discussed together how to prioritise vulnerable users' needs while keeping users and workers safe.



4.

DIRECT PUBLIC MANAGEMENT AND A SOLID SOCIAL DIALOGUE PRACTICE ARE KEY TO SERVICE CONTINUATION AND RESILIENCE

This collaborative approach was especially possible because WCK is a publicly managed local service. For Eric Nysmans, “many private providers put service delivery on hold because of the pandemic”. “The review of users’ needs took a lot of time, as we looked at the cases one by one together. In our view, this process could not be automated or digitalised. It was necessary” says Gil Peeters, WCK Care Manager. “Other operators were concerned about undertaking such a time-consuming process and waited for solutions coming from the outside instead of taking their own initiatives”. Instead, “the service must be available even at times of crisis” adds Eric Nysmans.

Direct public control and management of services, constructive dialogue with workers and trade unions, and an approach rooted in the public service mission of the institution – not the bottom line – meant that WCK could place the human factor at the centre of local public care service delivery, looking after not only its users, but its workers, too. The collaborative staff redeployment process and flexibility through the Covid emergency that enabled workers and managers to adapt swiftly to

a rapidly changing context would not have been possible had the service been fragmented among different private operators with separate contracts mandating cost effectiveness imperatives. “It is our mandate to guarantee continued service access and reliable provision at all times” concludes Eric Nysmans.

Besides, a strong practice of trust-based social dialogue and collective bargaining between WCK management and trade unions was critical in ensuring service resilience. The presence of a works council at WCK where workplace and governance issues are regularly discussed with the staff representatives helped WCK management and unions identify a common approach to tackle the crisis and redeploy staff fast. “Good cooperation and coordination with the trade unions in ordinary times certainly pays off in times of crises” said Eric Nysmans. “We do not always agree with each other on everything, but that is not the purpose of our dialogue – management and unions have their own goals. But our ultimate goal is shared: it is to have employees in good conditions so that they can deliver quality home and day care services” he concludes.

5.



LESSONS LEARNT FROM THE PANDEMIC, LOOKING AT THE FUTURE

Despite its quality service, equitable policies, attention to vulnerable users and service resilience through Covid, WCK is currently facing a looming privatization threat as the [Flemish government's plans to privatise the welfare and care sector](#). Under this approach, already cash-strapped local governments would be expected to bridge the gap between political decision-making, private operator profit-making and the provision of adequate finance and staffing to ensure a rapid, effective service response during tough times.

This seems highly unviable. Unless the public underfunding issue in public services in Belgium is tackled, the [pressure to privatise and outsource public care services](#) to for-profit operators in Belgium will continue, including for WCK. Limited by contractual clauses and commitments to deliver shareholders' returns, it would be extremely hard for privatised public services to guarantee a rapid and coordinated response, and uphold the key guiding principles of equity, accessibility, and quality of service at all times. For Dries Goedertier, *"if the profit motive is introduced within the Flemish public care service, the public sector ethos is going to get pressured away and slide into the background. We expect that the prices people pay to access care services will gradually increase, without any guarantee that care quality*

will improve accordingly". To date, *"thanks to the trade unions' and civil society organisations' mobilisation we have so far been able to halt the legislative attempt to privatise local public care services"* he concludes.

In addition, the staffing and human aspect of public services [can no longer be overlooked](#). (Re) building a sustainable and universal public service goes hand in hand with long-term investment in public service workers as well as infrastructure. As for care workers' conditions, the pandemic has highlighted that much serious attention will have to be paid not only to workers' safety – including PPE access, vaccines and sound OSH protocols - but also to care workers' psychosocial risks and mental wellbeing. Adequate measures and protocols will have to be developed and made ready to ensure preparedness and service resilience for future emergencies.

Finally, the Covid pandemic offers some lessons on the importance of multi-level public service governance as it showed that inter-municipal/ regional collaboration can payoff and help uphold the key principle of continued service delivery and access, at the heart of the public service mandate.

REFERENCES

- Cibrario, D. (2021), “[Local and regional government workers bring public services to you](#)”, PSI website.
- ILO (2018). [Guidelines on decent work in public emergency services](#).
- ILO (2020). [COVID-19 and the Public Service](#).
- ILO. (2021). [COVID-19 and Recovery: The Role of Trade Unions in Building Forward Better Executive summary](#), International Journal of Labour Research 2021, Vol. 10, Issue 1–2.
- Maria Cecilia Trionfetti, Natalia Hirtz (2022) “[The privatisation of the care home sector in Belgium](#)”, ULB/ENCO, published in [CARING FOR PROFIT](#) (2021)
- Nysmans, E. and Peeters, G. (2022) “[Welfare Care Kempen, A Network of Locally Embedded Public Family Care: The Ugly Duckling of Home Care Services](#)”, Welfare Care Kempen website.
- Pavanelli, R. (2021), “[We must revalue care work, not sell it to the highest bidder](#)”, PSI website.
- PSI/ UCLG/LSE interview with Dries Goedertier (CGSP-ACOD Belgium Trade Union Confederation), Ken Zegers (CGSP-ACOD Belgium Local Government Trade Union Federation) 11 November 2021
- PSI/ UCLG/LSE interview with Eric Nysmans, Director, OCMW Kempen and with Gil Peeters, Manager of Home Care, OCMW Kempen, 12 November 2021
- UCLG/Metropolis/LSE Cities (2022) “Emergency Governance for Cities and Regions” Policy Brief 5 “[Local Public Services in Crisis Mode: Adapting Governance Models to Exceptional Times](#)”, “Emergency Governance for Cities and Regions” Serie.
- Voss, E. & Rego, R. (2019). [Digitalization and public services: a labour perspective](#), PSI.



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