

# Mandatory work duty for students to tackle lack of healthcare staff: the Czech experience

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The second wave of COVID-19 has hit Czechia massively, especially between 6 October and 13 November 2020. The number of hospitalised patients reached 20 times the spring maximum. COVID-19 was spreading rapidly among healthcare professionals, and the government introduced mandatory work for some categories of students (mostly those studying health-related subjects) to tackle staff shortages. This situation, which was giving rise to growing criticism has just been stopped (from 16 December).

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## **Description**

The first (spring 2020) wave of the COVID-19 pandemic hit Czechia relatively mildly. Daily cases peaked at 373 at the end of March 2020. From the end of April until June, the number of new cases remained mostly below 80. The country had recorded 16,342 cases altogether (1,526 cases per 1 million population) as of 31 July; 381 patients had died. The impact of the second wave has been much worse. As of 26 November, there were 522,520 cases in total (47,729 cases/1M population, the eighth highest figure in the world and third highest in Europe); 7,779 patients had died (726 deaths/1M population). (Sources: Komenda et al. 2020; Worldmeter 2020)

The number of hospitalised patients peaked in the first week of November when it exceeded 8,200 - including 1,200 in intensive care units (ICUs). It then dropped significantly: on 25 November, the numbers were 5,210 and 757 persons respectively, and on 14 December 4,547 and 586 (Komenda et al. 2020).

COVID-19 was spreading rapidly among healthcare professionals. At the end of October, the number of COVID-19 positive physicians exceeded 2,500, and more than 6,000 nurses were infected (Vojíř, 2020). As of 11 November, 1,758 physicians, 5,125 nurses and 3,985 other health professionals were reported as being COVID-19 positive (UZIS 2020).

On 12 October, the government introduced mandatory work duty for

selected categories of full-time students (Resolution no. 409/2020 Coll.) to compensate for the staff shortages in public health offices, hospitals, emergency care, and residential social services. This measure empowered regional governments to call upon students who were permanent residents of the region and were attending higher education programmes in medicine, dentistry, pharmacy, psychology, and some other fields of study, as well as secondary healthcare schools. Medical students can only work in hospitals as nurses. Most of them take the nursing exam in their third year. Formally, they are only qualified nurses until the end of their studies, although they could also perform more advanced work. Universities and schools had to prepare lists of relevant students and keep them updated. The students called to work could only refuse for health reasons. They were entitled to reimbursement for work done, according to the Act on crisis management (Act. no. 240/2000 Coll.).

There were potentially thousands of students meeting the criteria. At the beginning of November, a total of 895 students from medical faculties were mobilised into service in hospitals. Another 2,106 medical students signed up to help voluntarily (ČTK 2020). During the first weeks of the second wave, regional offices also called upon students already working for hospitals of their own choice, mostly situated near their universities. At the beginning of November, regional governors and universities modified the procedure for calling up students, and students who

were already working were removed from the lists.

On 14 December, the government decided to stop this measure from 16 December.



Termination of the measure came rather unexpectedly. Even very recently, it was not clear when the government would stop measure. Despite a significant decrease in the number of hospitalised patients and although various restrictions had been eased (for example, shops restaurants have been reopened since 3 December), the government was insisting on the necessity of maintaining it.

This was giving rise to growing criticism from some public policy actors, including universities. For example, the rector of Masaryk University Martin Bareš declared:

"The state must allow students to study even at the highest levels of emergency. ... Students cannot replace the missina health workforce in the long run." (MUNI. 2020). Such a situation, where students had to work in medical facilities during the day and in parallel had to study and prepare for exams, could not continue for a long time. Universities had not been consulted on this mandatory work duty. In addition, representatives of medical faculties were pointing to the longterm shortage of physicians, and universities' responsibility for ensuring students gain that professional relevant qualifications.

Supporting and encouraging volunteering seems to be a promising alternative to the mandatory working duty. Previous experience from the COVID-19 pandemic has shown that there is a great deal of potential in this respect.

## **Further reading**

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