

GRANSKI SINDIKAT UPRAVE, PRAVOSUĐA, ODBRANE I POLICIJE

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NATIONAL REPORT - COVID 19 - SERBIA

Respected,

the state of emergency in the Republic of Serbia was introduced on March 15, with the aim of preventing the spread of COVID19, and lasted until May 6.

Members of the army were engaged in suppressing the spread of the virus from the very beginning of the declaration of the epidemic, and it was immediately clear that they would be literally on the front line of the fight against the virus and that, in addition to health workers, they would be most exposed to the virus.

The soldiers were engaged in guarding hospitals, temporary COVID19 hospitals, homes for the elderly, camps for people in quarantine, but they also performed work to prevent the migrant crisis on the southern borders of Serbia, as well as in collective centers for migrants throughout the country.

In terms of protection of members of the army who belong to high-risk and specific groups (chronic, heart and lung patients, single parents and parents of children with special needs as well as those under 12), a decision was made to redirect their work to work from home, on paid leave which further reduced operational capacity in terms of human resources.

Unfortunately, the commanders of certain formations did not have the capacity to cope with the new situation, so a number of members of the army were denied the rights prescribed to them during the state of emergency, and in a few cases the actions of the command staff directly contributed to the spread of infection.

In addition, after the initial ambiguities and lack of protective equipment in the new situation, both employees and employers began to function well, and the experience from previous crisis situations (civil war, catastrophic floods, migrant crisis) was not negligible.

Due to the high level of exposure to the virus, the number of deaths of members of the army was not large (3 people died from the virus), but it is noticeable that a large number of people were sent to quarantine and self-isolation (in some cases entire units), numerous omissions in the first two weeks since the outbreak.

All members of the army had the right to health care during the epidemic (possibility of paid leave for chronically ill patients, automatic extension of leave due to illness, medical examinations due to health problems not directly related to the virus,...) but in reduced capacity because some from the largest health institutions redirected to the care and treatment of patients suffering from the virus. Also, for the needs of quarantine for members of the army, designated facilities were designated (mainly hospitals and hotels in spas throughout the country) where they did not have access to or treat patients from the civilian sector. In this unusual situation, we were able to identify potential health risks for members of the military because they were directly affected by the virus and in situations where it was not possible to protect themselves despite the use of standard protective equipment. There is also a need to form special units within the army that will be in charge of monitoring the development of potential viruses and that will be supplied with a certain contingent of protective equipment at all times. In addition, members of the army in this situation must, in case of infection, be treated separately from other constructions (as was the case in Serbia at a later stage of the epidemic).

Our country is not a member of the EU and therefore has no obligation to implement EU pandemic laws in its legislation. Certainly, we have informed the competent institutions about the recommendations that you referred to us during the video conference on COVID 19, and it is a great success that the MoD and the Armed Forces included the concept of a pandemic in the Draft of the new Law on the Armed Forces. We are now fighting for the consequences of recognizing the work of members of the army in the law to be certain rights and financial compensation for members of the army (the right to 15 days of paid leave as recovery from physical and mental stress, the right to double service while performing virus prevention work, salary of 30% ...).



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