

# DEVCובה

Developing Collective Bargaining in the Care Sector

## WP5 Policy Recommendations SLOVAKIA

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Recommendation 1 (ECEC sector)**1. Title of the recommendation**

Parity in ECEC Service Funding

**2. Problems/needs addressed**

- Lack of transparent information on the real unit costs of services across public and private ECEC providers, which makes it difficult for unions and providers to argue for fairer financing or demonstrate efficiency
- Unequal treatment of different types of providers (public, NGO, community, Roma-led initiatives) in access to state funding, despite the fact that they often deliver equivalent or compensatory services where the public system fails
- Structural workforce shortages and its high turnover, driven in part by low and unstable financing that prevents competitive wages, adequate staffing levels, and decent working conditions
- Weak bargaining position of trade unions and worker representatives, who currently lack robust comparative cost data as well as the support of the private providers to argue for efficient and sustainable support by public funds across all providers

**3. Recommendation**

Public authorities should introduce a systematic cost-per-service calculation framework for all social service providers, allowing for transparent comparison of the unit costs of publicly and privately provided services. On the basis of these comparable unit costs, the state should assess whether public and private providers deliver services at similar or different levels of efficiency and adjust funding rules accordingly to prevent unequal treatment. Where analyses show that private providers achieve comparable or better cost-effectiveness, legislation and financing schemes should be revised to ensure equal access to state funding for all providers offering equivalent, quality-assured services.

**4. Target Actors** Trade unions Employer organisations/care providers Bipartite bodies Tripartite institutions Government**5. Rationale and supporting evidence**

The policy rests on a simple rationale: if unit costs are measured transparently across providers, funding can be linked to real efficiency and quality instead of the type of ownership. This enables trade unions and providers to argue that where private services deliver comparable or better value than public ones, they should receive equal access to state financing, which in turn supports better wages, staffing and stability for workers across the whole sector. Comparable approaches exist in

several European systems - for example, the Netherlands, that calculate “economically justified costs” or standard unit prices to guide financing of both public and private social service providers.

## 6. Expected impact

- Unequal state funding of public and private providers offering equivalent services, reducing arbitrary disparities in financing
- More transparent and evidence-based debates on care financing
- Improved wage levels and working conditions over time, as parity-based financing gives employers more fiscal space to raise pay and stabilise staffing

## Recommendation 2 (LTC sector)

### 1. Title of the recommendation

LTC Sector Professionalisation Framework

### 2. Problems/needs addressed

- High turnover and rapid exits by new hires unable to cope with complex client needs, as the sector's demands are not socially recognised
- Wage stagnation tied to outdated public pay tables that undervalue qualifications and experience
- Labour shortages exacerbated by a lack of talent attraction, with ageing workforces and an increasing number of clients due to demographic development
- Weak union bargaining position, lacking formal evidence of skill value to demand systemic pay reform beyond symbolic one-off bonuses

### 3. Recommendation

The policy seeks to elevate the status of care workers in the LTC sector by establishing formal mechanisms for professional recognition, countering the widespread perception that care work is low-skilled or merely “natural” labour. It would involve a multi-level approach: national awareness campaigns highlighting the expertise required for complex client needs (e.g., dementia care, autism support); creation of professional chambers or registers that certify qualifications and experience; and embedding care occupations in national HR strategies with defined career paths and skill standards.

### 4. Target Actors

Trade unions

Employer organisations/care providers

Bipartite bodies

Tripartite institutions

### 5. Rationale and supporting evidence

Formal professional recognition counters the devaluation of care work as "anyone can do it" or low-skill, which undermines morale, retention, and bargaining power despite workers' handling of complex needs like dementia, autism, and psychiatric cases. By affirming skills through campaigns, registers, and HR integration, the policy boosts prestige, attracts talent, and justifies better pay, directly addressing the exhaustion-to-exit trajectories in interviews.

### 6. Expected impact

- Boost workers' morale and retention by affirming professional identity
- Enhanced attractiveness of LTC jobs that facilitates the problem of understaffing in the sector and reduces the turnover (where new hires leave due to unrecognised complexity)
- Strengthening of the union bargaining position by providing evidence of skill value, aligning with calls for systemic pay reform beyond one-off bonuses