



national
union

report

**COVID-19
COMMUNITY SERVICE
WORKERS
CONFERENCE CALL**

April 24, 2020

The National Union of Public and General Employees (NUPGE) is a family of 11 Component and 3 affiliate unions. Taken together, we are one of the largest unions in Canada. Most of our 390,000 members work to deliver public services of every kind to the citizens of their home provinces. We also have a large and growing number of members who work for private businesses.

Larry Brown, President

Bert Blundon, Secretary-Treasurer

Community Service Workers in response to COVID-19 Conference Call
April 24, 2020
1:30 p.m. EDT

PARTICIPANTS

BCGEU/NUPGE	James Coccola Scott De Long Judy Fox McGuire Doug Kinna
HSABC/NUPGE	Nadia Santoro Katie Sharp
SGEU/NUPGE	Darryl Firth
MGEU/NUPGE	Michelle Gawronsky Marlene Hrechka
MAHCP	Chelsea Kaufmann Lee Manning Katrina Zado
OPSEU/NUPGE	Mirla Alvarado Kareen Marshall
NSGEU/NUPGE	Gina Boyd Karen Grandy
NUPGE	Len Bush, Managing Director (Office of the President) Jeryn Daly, National Representative Diane Fowles, Administrative Representative

1. Welcome and Introductions - Jeryn

Participants from 6 Components and 1 allied union joined the call, as well as, 3 NUPGE staff.

Jeryn Daly started out the meeting by welcoming everyone and thanking them for joining the call. Daly stated that Community Service Work, especially in dealing with homelessness, has been on NUPGE's radar for a while.

Roll call was taken and participants were asked to email jdaly@nupge.ca if they didn't receive the meeting details directly to make sure everyone was included on the attendance list.

2. Cross Country Reports

BCGEU/NUPGE

- PPE has been a chronic issue since the beginning.
- Government recently took over the supply. Some areas are getting a bit better but in general all PPE is prioritized to direct medical care.
- There's been an outbreak in the downtown east side at a chicken packing plant facility which is near to a number of public services that our members provide. Workers are quite concerned about outbreaks into that community.
- Staffing levels difficult. Where there used to be pages of casuals, now down to just a few people. Very high rate of attrition for members.
- Some agencies doing well by putting in overall plans working with other groups.
- Expecting the provincial government to make an announcement in regards to downtown east side thought today, but probably over weekend.
- One of highest risk groups that hasn't been addressed yet.
- Housing is an issue. Social distancing is impossible at a number of locations.
- Residents have been told to self-isolate, but the reason for self-isolation isn't being shared with workers. This is increasing anxiety and increasing staffing shortages because workers are deeming it unsafe work.
- Residents in isolation will leave rooms because they are forced to use shared washrooms. They go to the washroom, kitchen, or common area without masks or gloves even though they are provided.

- There are a large number of residents in the building to supervise. By the time staff realizes resident is out and not practicing social distancing or wearing PPE everyone is potentially at risk.
- Staff have no authority to enforce residents wearing PPE or staying in isolation.
- The exposure control plan developed by the employer looks good from 10000 ft but not so great on the ground when clients aren't cooperative or don't have the ability/functionality to follow. Causing major problems.
- A lot of mental health workers have been working with opioid crisis for 4-5 years. They were already stressed and adding COVID-19 into the mix has made things worse.
- They don't have the equipment to revive someone from an overdose. They have Narcan but do not have bag valve respirators and can't do mouth to mouth.
- Not doing proper risk assessments, staff not being trained properly.
- Members aren't considered first responders so if they get a psychological injury it is difficult for them to get compensation for that.

HSABC/NUPGE

- Areas that are in need of being addressed, identified by unions/frontline workers in community health and social services: fair wages, elimination of waiting periods to qualify for employment benefits, paid sick leave, clear guidelines on essential services, access to and proper use of appropriate PPE, inability to ensure physical distancing or hand hygiene, funding for additional hours of work to clean worksites.
- A number of mental health concerns were also identified: impact of distancing requirements on the relationship between clients and workers, anxiety over transmission risks to workers' own families, need for mental health supports.
- COVID-19 testing available widely however; on the frontlines (particularly the downtown eastside of Vancouver) not seeing an aggressive program for workers and clients in areas, which is something frontline workers are calling on.
- Housing for people without homes continues to be a pressing issue. On April 20th the Union of BC Indian Chiefs called for an emergency inter-jurisdictional meeting to address the housing crisis as part of COVID-19 response planning. Frontline workers have identified this as a key issue of safety for workers and clients.

- At the provincial/sectoral level, HSABC is part of the Community Social Service and Community Bargaining Association (CSSBA). CSSBA have highlighted that over 90,000 clients access community services across province. CSSBA also issued a [letter to the provincial health officer](#) over lack of PPE and PPE protocols.
- HSABC participates in Vancouver District & Labour Council (VDLC) which is a working group of affiliates representing community health and social workers in the downtown eastside. VDLC affiliates are calling for a common table between unions and city representatives to involve frontline workers in decision making process for a COVID-19 response planning on downtown eastside. There has been no response from the province yet.
- The city of Vancouver has identified a 20-30% attrition of workers at nonprofit agencies. This highlights the pressing need to ensure fair working conditions, fair pay for frontline workers, side-by-side with ensuring the health and safety of workers and residents of the DTES in COVID-19 response planning.
- Although there is an announcement coming from the province regarding COVID-19 response planning in the DTES, the VDLC affiliate working group has raised concerns that unions/frontline workers have been left out of decision making for the plan.—The VDLC has [issued a media advisory](#), and a set of urgent actions.

SGEU/NUPGE

- Homelessness needs are usually managed by 3 mobile units.
- The amount of cases is low compared to other locations around country but there's still concern about where clients will go if they test positive.
- Regina has seen a reduction in beds at the Salvation Army. They have stopped providing emergency beds and are just maintaining a few more permanent resident client beds.
- Rescue mission went down from 24 to 8 beds but are still reporting they weren't using as many beds as they could. Prior to the pandemic, they required photo ID to go in. Trying to get them to drop strict photo ID requirements to get more people in beds.
- The planning and rolling out of the partnership between Ministry of social services and hotel association has been a challenge.
- Originally hotels were asking for things that they couldn't provide. Hotels asked CSW to act as security to keep people in their rooms. Miscommunication from city and province that security was going to be provided.

- They're still working to get people into the hotels and have asked hotels to treat everyone as though they're COVID-19 positive. They're working to keep them isolated best as possible following their own policies. Hotels are still requiring security which is still a work in progress.
- Discovered there is no plan for youth in the province. Teens age out of the *Child and Family Services Act* at 16, but 16 & 17-year-olds have limited placements for them in province. One presumptive positive teen had to leave a shelter which identified the gap.
- Social services had planned to launch a 1-800 number for clients who were positive. Will eventually streamline calls and assessments to help house people.
- Haven't had many calls yet but potential that gaps in service could cause issues.

MGEU/NUPGE

- Biggest concern has been PPE. There are either not enough or given kit that doesn't include N95 masks.
- Trying to determine the travel history of clients with dementia and Alzheimer's is difficult.
- No social distancing recommendations with clients which poses a risk as one positive person can expose several workers.
- Some workers still work in multiple sites.
- Instead of handing out appropriate equipment the government has reduced the services to essential services only. As a result, a number of people are going without care and not receiving the services they require.
- A success in the province: They had a situation where group home workers were expected to work without PPE. There was a client who had been overseas and when they came back they hadn't placed him in quarantine nor were they doing social distancing. The workers exercised their right to refuse and were successful. Management recognized they had the right to be safe and sent the client home to their family for the 14 day period of quarantine as per the public health rules. Very minor but very huge at the same time in the province where the premier is putting the pandemic as second place in his priorities. Hoping this sets an example for rest of the province.

MAHCP

- There's concern with lack of patient education. Homeless individuals don't have access to media, social media, any news and it's been a struggle to keep them informed.
- Have been able to have a lot of people working from home and working on special projects to try to promote patient education which has helped.
- Lack of screening in access centers is a problem. It has improved somewhat, but one member was exposed to a client who was potential positive but wasn't screened for symptoms.
- Concern regarding potential layoffs in some of the community sites because of decrease in clients accessing services.
- Trying to leverage technology to do a lot of the intake and assessment but a lot of the homeless do not have access. Working to find balance between providing services clients need and keeping members safe.
- Crisis site not equipped to house people overnight but there has been an increase in demand for mental health clients to stay overnight.
- There's now stringent screening at community health sites but they have also reduced the number entrances which means clients aren't following social distancing and waiting a long time to get into building
- Staff who are still going into office are reporting a lack of regular cleaning, not a lot of access to good sanitization and lack of following social distancing.

OPSEU/NUPGE

- 3,000+ members within sector—12 shelters, 13 childcare centres, 31 community services, 12 legal clinics.
- Childcare centres have all been closed/workers laid off with the exception of 2 who have continued to pay employees and benefits.
- All legal clinics are all working remotely and continuing to provide services.
- Bulk of the problems in the sector are in the shelters. Main issues are: PPE not being provided, not able to promote social distancing, testing not being conducted.
- Intake hasn't been reduced but they continue to do daily screening.
- Have so far been unsuccessful with staggering of meal times.

- Some shelters continue to use the bunkbeds which contradicts public health directives re: hygiene and social distancing.
- Proper cleaning procedures not being implemented and there are some reports of looting of disinfecting supplies.
- No communication with locals and staff reps so employers are not collaborating with the union.
- 113 positive in the shelter system. Reached out to city of Toronto to alert them to avoid what happened in long-term care. A breakout in the shelter system can be avoided if they work with unions. Also reached out to the Minister of Labour to file complaints. Advocacy and lobbying groups also trying to reach out.
- Employers not putting education in place to teach the population. Other than notices that say wash your hands and maintain social distancing, they aren't doing anything.
- Have messages specifically for clients in the shelters that are read at meal time.
- Members service a vulnerable population and it's difficult to adhere to Public Health regulations. A lot of clients have mental health conditions or addictions issues.
- Want to see nurses onsite at every shelter doing regular testing. Lots of outbreaks are happening because there isn't enough testing. As a result, staff are becoming infected and there's a lot of fear and anxiety associated with going into work.
- It's an emotional topic as staff members are infected. It's overwhelming and hard to understand the fear and hurt from clients and staff.
- It would be extremely helpful if other stakeholders can help push for more in the shelter system.
- OPSEU has provided two resources: a tip sheet for shelter workers and suggestions for a shelter system task force. Both resources are attached to this report.

NSGEU/NUPGE

- Non-profit, community sector is inclusive support workers with at risk youth, at risk families with such as Canadian Mental Health Association, Laing House, community hospice help with networking, as well as, North End networking. Held a town hall meeting with group and asked what they wanted the National Union to know.

- There is significant worry and concern around food insecurity—not just by way of people using food banks. Because of isolation, many of the food options that were available to supplement what people had are not open now.
- Telecommunications via email, internet and phone access are a problem. The government donated 50 phones to people who would receive welfare to keep people engaged. The need for this is so much larger wouldn't begin to know who got them and how many more may be needed. Issue isn't always they can't afford a phone but that they can't afford the minutes and time to connect the phones.
- Universal income has come up again. If there has ever been an opportunity to lobby for universal income, our position is, the time to do it is now in a time where people are in dire need and in crisis. Universal income would give those at risk a better chance for a better outcome.
- Fighting to keep doors open and avoid layoffs. A majority of the services have gone to an online base, something not all are used to so figuring out how to work and how to connect with their clientele. A number have lost a significant amount of their clientele due to the inability for both to connect through online or phone services.
- In regards to homeless populations, the employer has actually been pretty great.
- There's lots of PPE for outreach.
- Scheduling appointments in clinic with nurse practitioners based on Public Health directives, infection control guidelines.
- However, the vulnerable population has become even more vulnerable.
- They are still servicing but they know they are not reaching everyone they probably could. Because they are small local community there is only so much reach they have.
- Continue to operate, no layoffs so far, just taking one day at a time.

3. Wrap-up and Next Meeting

Len Bush sent regrets from the President and Secretary-Treasurer. They really wanted to be on the call but calls are coming fast and furious and they are on other calls that came up last minute. They wanted to pass along their thanks to everyone on their work.

Daly reiterated the reminder for participants who didn't receive the call-in details directly to send an email to jdaly@nupge.ca to ensure everyone gets a copy of the report. She thanked everyone for attending and ended the call.

Follow-ups

Task	Responsibility	Completed
Send any relevant documents to Jeryn (jdaly@nupge.ca)	Participants	
If you didn't receive the meeting email directly from Jeryn, send an email to jdaly@nupge.ca to make sure you receive a copy of the notes from this meeting	Participants	
Compile notes + other materials and circulate	NUPGE	

DRAFT



NATIONAL UNION OF PUBLIC AND GENERAL EMPLOYEES

- B. C. Government and Service Employees' Union (BCGEU)
- Health Sciences Association of British Columbia (HSABC)
- Health Sciences Association of Alberta (HSAA)
- Saskatchewan Government and General Employees' Union (SGEU)
- Manitoba Government and General Employees' Union (MGEU)
- Ontario Public Service Employees Union (OPSEU)
- Canadian Union of Brewery and General Workers (CUBGW)
- New Brunswick Union of Public and Private Employees (NBU)
- Nova Scotia Government and General Employees Union (NSGEU)
- PEI Union of Public Sector Employees (PEI UPSE)
- Newfoundland & Labrador Association of Public and Private Employees (NAPE)

The National Union of Public and General Employees is an affiliate of the Canadian Labour Congress and a member of Public Services International.

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