

COVID-19 OCCUPATIONAL HEALTH AND SAFETY OFFICERS CONFERENCE CALL

May 28, 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

Occupational Health and Safety Officers Conference Call May 28, 2020 1:00 p.m. EDT

PARTICIPANTS

BCGEU/NUPGE Patrick Coghlan

Megan Scott

- HSABC/NUPGE Michael Wisla
- HSAA/NUPGE Ray Geldreich

HSAS Bill Fischer

MGEU/NUPGE

OPSEU/NUPGE Terri Szymanski

NSGEU/NUPGE Paul Cormier Sandra Mullen

NAPE/NUPGE

Bernie Coffey Sobol

Michelle Gawronsky Blaine Duncan

NUPGE

Len Bush, Managing Director Jeryn Daly, National Representative Anil Naidoo, National Representative Diane Fowles, Administrative Representative

1. Welcome and Introductions

Anil Naidoo, NUPGE:

Welcomed everyone to the call. Encouraged everyone to share documents on the chat. We will pull all the documents off and include them in the notes.

5th call. Moved from general check in, to more focus on challenges and solutions

Possibility of having a more in-depth discussion on the opening of workplaces or other topics moving forward

2. Cross Country check in

OPSEU/NUPGE

Terri Szymanski:

Shared thoughts on format and having more focused discussions:

OPSEU right now there are two big issues we are working on and looking across the country to see what resources are out there:

- Reopening the health and safety of reopening. Reopening workplaces from an H & S standpoint. Toolkits on this (BC 6 steps from WorkSafe, lawyers charts, own drafts). Wondering if anyone has documents to share
- PPE issue Canada federally has a couple of lists of acceptable manufacturers and an exceptions list. Ontario and the other provinces have their own lists. We have caught a couple of companies from China selling masks on the internet directly to facilities. We have checked the lists and the companies are not on them. Asking federal government whether provinces have to comply with federal list. ON doesn't do much checking on who is on the supply list. They just created a list for convenience of the companies. Can just apply and get your name on the list without anyone checking on the quality of the product. Had workers taking blood samples with masks so thin they don't even last an hour. Supplier wasn't on federal or provincial list so called in the regulator who said we have to go to Health Canada. Regulator wrote order that employer had to write instructions and train on how to don/doff the masks, but don't feel the masks are adequate

If anyone has any resources, or if you like the idea if someone has a good resource, maybe on the next call we could hear about it

Who governs what companies are on these lists? Are you having problems with fake, substandard PPEs?

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<u>Anil</u>:

To the PPE issue, will be on a call later with the Public Health Agency, and can bring up some of these issues

Good to have more focused discussions on some of these issues if someone can lead the discussion and kick off the issue. PPE, opening of offices, WCB cases, are all good issues to discuss further. Others?

Michael Wisla:

One of the non-standard N95 (not 3M N95) has been shown to be non MRI compliant. Can't be used around the instruments because they contain metal and proven to cause burns to patients wearing these masks

We do have the WorkSafe guidelines that have been put out for the restart. Like them, WorkSafe did approach all the unions, and industry for help in putting together the guidelines.

Issue now is we don't have just one document. Every health authority is jockeying to have their own document, their own guidelines, and stuff for infection control. It will be information overload with checklists, etc.

<u>Anil</u>:

Share documents, if you have them. What are the documents you are using? We can start to pressure provinces who don't have good standards or where there are gaps. If you do, please share or if you have a question, also good to share.

Provincial/federal jurisdiction will always be an issue with healthcare. We have to make sure that the standards are met and that things aren't falling through the cracks. Regional health authorities or provinces must not follow their own guidelines and use equipment that hasn't been approved or tested.

MGEU/NUPGE

Blaine Duncan:

PPE, cleaning disinfectants, etc., we have had some issues as well in MB

Brought this to the attention of the Workplace Safety and Health branch here who are following up for us

Have come across cleaning products in particular. There is an emerging list of approved products Health Canada has identified

Some of the things being used now aren't necessarily on those lists but they may be on some other jurisdiction's list of approval. They are showing up in the workplaces without necessarily the proper approvals. Letting the WSH branch know of issues

Still have issues with the use of the materials used in corrections we previously reported. WSH branch is still going back and forth on that regarding its use. Pulled back on using in occupied spaces or individuals but still using on single use gowns to disinfect and as hand sanitizer

Not many issues with respirators

Lucky our WSH group, as well as, physician from Occupational Health Centre in MB have representation on the groups that look at PPE. Close group looking at the respirators coming into the province so no issues other than when respirator should be used

MB has low count of positive cases, no one in hospital settings, 14 cases in recovery

Province moving to 2nd phase of reopening on June 1

Getting questions from those groups whose workers have been working remotely on what the return to work will look like

Using the *Shared Health Manitoba* protocols for various settings. Workplace Safety Health and Medical officer of Health are involved in developing the protocols so using these as guidance for members with questions

One group in particular with concerns. Schools can reopen June 1, particularly for special needs students or students falling behind. Will be some in-person teaching going on during June

Have educational assistants with concerns about their return

<u>Anil</u>:

Thanks for sending doc from Shared Health. What about previous issues, such as inspections and enforcement?

<u>Blaine</u>:

Interesting development since last meeting, that the Workplace health officers have been given authority to enforce Public Health orders

Have not received training yet on how to do this

Training was supposed to be today but now postponed until June 2

However, second phase reopening is June 1, so still far behind as we should have had the training and the information available for the officers before the 2nd phase reopening

Federation of Labour will be doing some media on this, particularly the Workplace Health Branch representing our membership

HSAA/NUPGE

Ray Geldreich:

Big issue right now is the main supplier of hand sanitizer had to move away temporarily from pharmaceutical grade alcohol product and go to a commercial grade

Health Canada has some labelling policies and requirements for the use of nonpharmaceutical grade alcohol products—not recommended for use by pregnant women, potential as a carcinogen, etc.

Alberta Health Services has resisted that labelling and the requirements of Health Canada as they don't see the validity of these claims

Had some conflict with that. There is Health Canada documents on the differences between the two and potential hazards

Has anyone else had the issue with the hand sanitizer?

<u>Terry</u>:

We had experience where there has been a substitution to an industrial grade ingredient

We know it exists in 4 hospitals for sure. In each time, when H&S reps brought it up, hospital changed to a different product and we put out a hazard alert

<u>Ray</u>:

Getting access to Hazard Alert would be helpful because it is a system widely issued.

Is it possible that more places aren't aware of this? It is Microsan which is used by everyone.

If there are batches of Microsan going out, Health Canada says it should be labelled, but employers are pushing back on labeling.

Suggest it is more widespread than many are aware of and members may not know about

<u>Anil</u>:

There has been a rush to produce products and the standards may not be the same so we need to stay on top of that.

If it is happening in one or two places, it is probably happening elsewhere but may not be getting attention yet.

HSAS

Bill Fischer:

Biggest thing in PPE that we have been able to get resolved is, we have finalized and signed a joint understanding with the Ministry of Health and Saskatchewan Health Authority to have joint representation going forward to deal with PPE.

Haven't had much of a problem here with lack of PPE as had a couple of warehouses after SARS which had been stockpiled

One of the problems was the appropriateness of it for different people and was it disposable

Have the Special PPE Advisory Group now, which going forward, will have full input into how PPE is accessed, testing of it

Recently were able to force the health authority to test a number of N95s brought in and found some didn't pass or the filtration didn't pass, so they were sent back

In Phase 2 of opening now and scheduled for Phase 3

What they did here is, they in some cases, overreacted and shut down emergency department in 15 rural hospitals

Intent was to take people waiting for long-term beds in acute beds in major centres (which were designated as COVID hospitals), ship them out to the rural hospitals, and ship any COVID related cases to the major centres

Haven't had a need for this yet but now in the position where the hospitals are shut down (able to shut down and redeploy the doctors in a week) but will now take to mid-July to reopen those Emergency Departments

Causing a lot of issues in the province as they are reopening everything. A lot of the smaller hospitals are in the rural recreational areas near lakes. So they don't have a lot of traffic but when they do, it can be significant, especially with the distances in the province.

Phase 3 opens on June 8

Dental has problem getting PPE. Dental college is administering this for them. Each dentist and assistant are rationed to one N95 per day for all their procedures

Even though allowed to open, not many going back even in the retail

Health inspectors - not only just going into the care homes but now expected to enforce the Public Health orders regarding gatherings of over 15 people

If someone calls 911, police are calling the inspectors to go out and shut these down. Have told the inspectors to say that they will go out with the police and write the ticket but won't try to enforce themselves

<u>Terry</u>:

Working on the document, as on the joint health and safety committee. This is why I was reviewing all of the resources. Once I get it completed I will share it.

<u>Anil</u>:

Will share the NBU document

Terry:

Clumping a lot of things under themes:

- Remote work/face-to-face
- Screening and entry
- Maintaining social distance (how far apart desks are, cubicles, etc.)
- Communication
- Cleaning and hand washing

HSABC/NUPGE

Michael Wisla:

WorkSafe documents and health authority documents - some are starting to conflict with the other documents e.g., infection control says one thing but not quite the same as what WorkSafe

Whole bureaucracy being created around this. One health authority now has a vicepresident in charge of the restart. Bureaucracy is building more and more.

Still waiting for a meeting with the WorkSafe board about this, with not being able to build compliance with the Health and Safety regulations

Investigations - statistics are being published by WorkSafe health with different numbers affected community wise and not all reflected together

If a worker in a facility contracted COVID-19 through community means, not recorded as work, so not investigated through regular processes. Setting meeting to straighten this out

WorkSafe is considering this presumptive but that doesn't take effect for 6 months so hopefully won't be an issue in the 2nd wave

BCGEU/NUPGE

Megan Scott:

Re: presumption - meeting with MCE, stakeholder meeting, have draft language to put into our schedule - this will go out for public consultation next week for two week turnaround

Tight language that presumption only applies during state of emergency and workers have to have significantly greater risk than the general public to have presumption apply

Voiced concern to the board but they don't seem interested in adjusting language ahead of the public consultation

Board will put this in Schedule 1

Have adopted language that is not COVID specific - it is if you contract a communicable viral pathogen, so it covers COVID-19 and future pandemics, so won't have to add to the language in the future

Very limited - if a worker gets it 2 days before state of emergency or 2 days after, will be an issue - will propose some language around this

Board said other jurisdictions and provinces have been asking what they are doing on this. Don't think other province have engaged in this yet. Jurisdictions in the US and Europe have taken various steps

In BC dealing with the reopening so have a new wave of activity and questions

Have gone through a number of consultations with WCB in posting the guidance documents and generally helpful

Board has pushed for the emphasis on involving joint committees and worker representatives. Some joint committees are scrambling to participate in risk assessments and trying to support them through that

Some employers just going ahead, workers not getting training

A lot of the usual concerns and challenges of H&S with employers when new procedures implemented

Other usual workload still happening at the same time so interesting dynamic

WCB has emerged with public campaign of "Do Your Part." "Workers have the right to refuse unsafe work," now being heard on radio, etc.

One issue is exposure control plans - board's interpretation on who has to do what and who doesn't, is more general

Exposure control plan language shows specialized person required but this not being applied to all workplaces

Disagreement with board on what the requirements actually are

Patrick Coghlan:

WorkSafe mandating every employer implement return to work COVID-19 safety plans

A lot of employees returning to work have concerns and have seen an uptick in members contacting us with return to work concerns they have

<u>Anil</u>:

Has the right to refuse played out anywhere specifically around COVID?

<u>Terry</u>:

Article in the Toronto Star saying that out of 200 work refusals in Hamilton alone there were 0 upheld

<u>Anil</u>:

That is troubling and points to something we will need to look at in terms of how COVID is being dealt with, needing to be dealt with, and are systems robust enough to deal with COVID? Will need to continue to monitor

BC in general on the presumptive issue BC is ahead on this but troubling to hear starting to limit this with a beginning and end date in a specific window

Presumptive issue will continue to play out as we move forward

NSGEU/NUPGE

Sandra Mullen:

As Jason eluded to yesterday on a bigger call, there are some issues in our own building to reopen. Have been running a skeleton crew there

Have a spacious facility, so fortunate in many ways but by mid to end of June, it will be more active there

Province announced they won't open in stages, they will just open everything by June 5 including hair salons, in-room dining in restaurants, etc.

Believe it is too quick. Many workers now facing return to work

Province opens on June 5 but daycares June 15. Connections in the day care world show they are just scrambling right now

Rural areas in the province, it doesn't look like there is a pandemic

Dentists, physiotherapy, etc. can all also open June 5. Schools on the other hand are officially done June 5

Paul Cormier:

Concerns of the membership as big gap on how to manage and honour the controls. H&S at the bottom of the hierarchy of control.

Require significant amount of supervision but members find there is no level of oversight to ensure people are doing what they are supposed to do to mitigate risk

See concerns around the policies of Public Health guidelines but also concern about a lack of oversight making sure they are doing what they are supposed to for their own members, managers, clients

<u>Anil</u>:

In this phase we have flattened it out but need to be ready and prepared flu season and COVID resurgence potentially, second wave is a concern

Workers being put back out into workplaces and forced to deal with the unknowns

You will probably be asked to look at your own components and offices and how to take the best steps

Next call will be June 11 but will leave it open past that on whether or not there is another one as heading into traditional summer breaks

Around the format for the next meeting, on particular topics, do you want to do more indepth rather than just Q&A, deeper dive into one of the issues?

Will follow up with Terry on general or specific reopening question

PPE will always be an issue but it waxes and wanes

Inspectors, WCB will come up

Exposure control issue - do places have those plans in place before they open up? What do they look like?

Enforcement of new policies will be an ongoing issue

Are employers staffing to deal with additional workload?

<u>Megan</u>:

Taking on one topic may be a good idea

One thing that comes to mind is mental health. Seeing that people are stressed and tired. Our employers (Heath authorities in particular) are offering counselling services and some tertiary support

A discussion about some of the strategies each component is taking on to support members

Some of the work ordinarily done in terms of H&S is supporting members' mental health. More to talk about and ideas there

<u>Anil</u>:

That is something that is ramping up. It is kind of the second wave, there was the acute health care and impacts on people's livelihood which will impact mental health as well, and the stress of increased workload and fears around new time we live in

Ray shared mental health commission webinar on mental health

Happy to have discussion on next call and will include this on call out. Megan will you be the lead on this to kick it off?

Terry will want a discussion on opening up and protocols

<u>Ray</u>:

Working on draft re-entry right now

Could we set up a google drive or other means to share these?

For this to be useful, would be best to have a spot to put these documents and share before next meeting

<u>Anil</u>:

Will send the documents out with report and look forward to meeting again in a few weeks

Links Shared In Chat

- Work Safe BC: https://www.worksafebc.com/en/about-us/covid-19-updates/covid-19returning-safe-operation ·
- Manitoba Phase 2 Reopening: https://www.gov.mb.ca/covid19/restoring/phase-two.html
- Manitoba COVID-19 Updates: https://www.gov.mb.ca/covid19/updates/index.html#current ·
- Right to refuse in Ontario: https://www.stcatharinesstandard.ca/news-story/9964226many-ontario-workers-are-trying-to-refuse-work-due-to-covid-19-fears-but-thegovernment-isn-t-letting-them/

Documents from Chat - attached

- Terry Approved manufacturers for masks
- BCGEU report
- Ontario Opening Up cautiously and safely
- OPSEU hazard alert re: hand sanitizer
- PPE failure: warning to MRI technologists
- Return to NBE offices



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- 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)
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- Nova Scotia Government and General Employees Union (NSGEU)
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