

COVID 19, Winter Surge Resources

Protect Us, Respect Us, Pay Us:

The COVID-19 pandemic is raging through our country. Far too many care workers themselves have been infected, and far too many have died because their employers or state authorities failed to provide adequate personal protective equipment, testing, affordable healthcare and paid leave during the COVID-19 pandemic in the United States. More than 13.8 million people in the United States have been infected,¹ resulting in upwards of a quarter million deaths -- among which were more than 2,150 health care worker deaths.² The growing daily case counts and deaths from COVID-19 in the US make the situation in that sector much more dire. We urgently need to change the way health systems do business so we can protect patients and workers.

Worker and patient safety is predicated upon adequate staffing levels, fair wages and benefits, and access to proper personal protective equipment. We know that without adequate staffing levels and proper PPE, workers are unable to do their jobs safely. Workers' voices on the job and union protections result in better health outcomes for patients, and are key during patient surges brought on by the worsening pandemic.³ Overwhelmed hospital systems need to listen to frontline healthcare workers now more than ever. The demands below are the foundation of a healthcare system that can adequately address the current pandemic and future outbreaks while treating healthcare workers with the respect they deserve.

Our demands of employers and state and federal government are simple:

Pay us: Hazard pay and at least a \$15/hour minimum wage for every hospital worker

1. Health care workers across the United States have been called on to put in extra hours and to face enormous risks during the coronavirus crisis. They deserve hazard pay.
2. Health care workers do some of the most valuable work in society, and it's not reflected in their current pay. While nurses and doctors are crucial to health services, hospitals also rely on food service workers, radiology and laboratory technicians, secretaries, housekeepers, and many more to run effectively. But many of these workers earn less than \$15 an hour and cannot afford to take time off when they are sick and live paycheck to paycheck. They must be paid a living wage of at least \$15 an hour.

¹ Elflein, J. (n.d.). Topic: Coronavirus (COVID-19) in the U.S. Retrieved December 03, 2020, from <https://www.statista.com/topics/6084/coronavirus-covid-19-in-the-us/>

² Written by Heather Grey on October 11, 2020 — Fact checked by Michael Crescione. Healthline. "Hundreds of Healthcare Workers Have Died from COVID-19. Retrieved December 3, 2020. <https://www.healthline.com/health-news/hundreds-of-healthcare-workers-have-died-from-covid-19-this-doctor-is-honoring-them#Workers-of-color-at-higher-risk>

³ Arindrajit Dube, E. (n.d.). Nurse Unions and Patient Outcomes - Arindrajit Dube, Ethan Kaplan, Owen Thompson, 2016. Retrieved December 02, 2020, from <https://journals.sagepub.com/doi/abs/10.1177/0019793916644251>

3. When workers lack access to affordable health care and cannot rely on paid leave, they are forced to come to work sick or allow previous health conditions to worsen because they cannot afford care. Employers must offer fully-funded and accessible healthcare for every hospital employee including paid leave and 100%-paid testing and treatment for COVID-19, every worker must be covered by permanent, comprehensive paid leave policies. Employers must provide immediate access to 12 weeks' leave at full pay for all healthcare workers who are sick, mandated to stay home, or need to care for their loved ones. Workers who are on precautionary or medical removal must be paid and the leave should not count against their accrued leave.
4. Employers must provide easily accessed emergency child care funds, debt-relief, and housing assistance for healthcare workers whose economic stability has been disrupted by the pandemic.

5. Recommended Legislative Initiatives

Congress should pass a Covid-relief bill now that would provide the economic, health care, and social assistance people and small businesses in the United States need to stay at home until our infection rates are brought down to manageable levels. The legislation should include hazard pay for all essential workers and paid sick leave.

Respect Us: Every healthcare worker should have access to a union, employers should offer us fair contracts, and make a seat for workers at the table around health and safety protocol.

6. Every healthcare worker should be able to join a union without employer interference. Contracts between employers and workers should pay a living wage and offer affordable healthcare, paid leave and retirement benefits for every worker.
7. Employers should create a labor-management process to track the impact of changes in health care delivery related to COVID-19 and involve workers in changes to health and safety and infection control protocol to ensure that the changes reflect the workers experiences and frontline perspectives on workflow.
8. Employers must ensure full transparency of the supply and distribution of PPE. PPE supplies should be transparent to all workers and every worker should understand the process by which PPE is distributed within the hospital.

Protect Us: We must have adequate PPE, paid leave, free weekly COVID-19 testing on site and testing of all patients, and access to COVID vaccines. Employers must be transparent about PPE supplies and procurement, and provide timely information about onsite exposures and infections.

9. Employers should provide appropriate PPE, including face masks, respirators and gloves, hand sanitizer and other cleaning items as necessary. Employees should be allotted PPE that provides maximal safety and in the quantities that maximize employee protection. PPE that is made for single use must not be reused. Employees must be trained on safely and effectively putting on and taking off PPE.
10. Employers must provide paid sick leave that does not accrue against annual leave for any employee who becomes infected with or has symptoms of COVID-19 and must notify all workers when a colleague has tested positive. Every hospital employee must be tested weekly for COVID and every new patient should be tested before being admitted.

11. Recommended Executive Actions for the Incoming Biden Administration:

The Biden Administration should prioritize the following two executive actions that will maximize worker safety and help step the spread of COVID-19 in healthcare settings:

- **Defense Production Act:**

The Administration must immediately invoke the Defense Production Act to start producing PPE domestically in the quantities needed for health care and other essential workers. The administration should create a centralized and transparent process for distribution among the states.

- **Require OSHA release a permanent COVID-19 ETS on Aerosol Transmissible Disease (ATD) Standard**

Doctors, nurses, respiratory techs, and other healthcare professionals have been treating COVID-19 patients since the pandemic began without basic workplace protections, including adequate PPE, robust testing, and, most importantly, an Infectious Diseases Standard that would require employers to establish a comprehensive infection control program to protect frontline workers who are facing daily exposure. The Occupational Safety and Health Administration (OSHA) must move forward with rulemaking on an occupational aerosol transmissible disease (ATD) standard to protect healthcare workers from infectious diseases transmitted by contact, droplets, or air — like influenza, COVID-19, and Ebola. The ATD standard covers most healthcare workers, laboratory workers, as well as workers in nursing homes, correctional facilities, homeless shelters, and drug treatment programs. The ATD standard must incorporate both the Cal/OSHA ATD standard and the Centers for Disease Control and Prevention's (CDC's) 2007 guidelines on occupational exposure to infectious agents in healthcare settings.

BEST PRACTICES NEGOTIATED WITH EMPLOYERS DURING THE PANDEMIC:

A number of SEIU local unions have negotiated protections for health care workers in hospital settings that are best practices during the pandemic and can be models for other negotiations.

- **Kaiser Coalition of Unions (UHW, 1199NW, 49, 105)** negotiated childcare assistance grants, additional paid leave, and alternative shelter for workers with high risk family members, and employee safety measures including onsite food, respite and PPE.
- **1199NW won paid leave**, accommodations for high risk workers, reimbursement for child care and back-up child care access, enhanced communications between labor and management, and float premiums for hospital workers in Washington State.
- **SEIU 1199NW agreement with Multicare included: Quarantine leave** that doesn't count against accrual, accommodation for high risk workers, telework or alternate assignments, enhanced communication, protocol around float pool, float premiums and travel costs who have to float to new facilities.

- **SEIU UHW agreement with Kaiser Permanente** Workers eligible for a grant of \$300/week to pay for childcare. Kaiser agreed to help find temporary shelter for workers who tested positive for COVID 19, work a double shift, worked multiple 12 hour shifts, have fewer than 8 hours between shifts, or has a household member who either has COVID-19 or is in a vulnerable group. 80 hours of additional leave for employees who tested positive for COVID-19.
- **1199UHE** negotiated hazard pay and additional vacation time at some hospitals in the NYC area. Hazard Pay ranged from a \$2500 lump sum to additional hourly pay.

Statement about vaccines: COVID-19 vaccines are not a substitute for health and safety protections on the job. Every healthcare worker should have access to education and resources about the covid vaccines as well as to the vaccines themselves when they are available. **INCLUDE VACCINE TPS WHEN THEY ARE COMPLETE**