

Presentation to Standing Committee on Justice Policy

May 15 2006

Bill 56 (Emergency Management Act)

Good Afternoon,

Thank you for this opportunity to present our position on Bill 56 on behalf of the Ontario Public Services Employees Union and our Local 106 from Victoria Hospital, University Hospital and South Street Hospital of the London Health Sciences Centre, St. Joseph's Healthcare Centre of London and Alexandra Hospital in Ingersoll.

I am Mary Ing; I am a member of the Executive Board of OPSEU, representing our membership in Southwestern Ontario and I am a Healthcare Professional. I have been a Medical Laboratory Technologist at London Health Sciences Centre (LHSC) for over 20 years.

With me today is Sandi Blancher. Sandi is the Vice President of OPSEU Local 106 and also a Medical Lab Technologist for 31 years. There are over 700 OPSEU members who work on the front lines of healthcare at the London area hospitals. LHSC is one of Canada's largest teaching hospitals dedicated to excellence in patient care. With a staff of over 8,000 compassionate professionals, we care for over 650,000 patients each year and we are a referral centre for over 35 hospitals in the province.

Last week, the Committee received OPSEU's central brief and recommendations on this legislation. Patty Rout, my Board colleague at OPSEU, outlined for you the scope of the Healthcare and Emergency Service workers that we speak for. Whatever future health or safety threat the province may face, OPSEU members will be involved.

We wish to remark on certain aspects of the current Reading of the Bill in the hope of seeing it significantly improved before it becomes law.

Although SARS was a major crisis in the lives of the people of Ontario, it was merely a test run.

The Minister of Labour dealt with the SARS crisis as if it was a hospital problem and was not recognized as a Health and Safety issue. Ministry of Labour Inspectors were egregiously absent from our workplaces and in fact were not sent to deal with hospital complaints.

It is our view that there should not be compromises in Ministry of Labour procedures regardless of the emergency. The Ministry of Labour should be responding as they normally would, to infectious diseases, concerns and all complaints. Ministry Inspectors should be working where the workers are.

We are frontline hospital workers and we deal with any emergency that comes our way regardless of the threat to our own lives and the possible threat to our own families. Acts and regulations should be respected and enforced because Healthcare workers need and deserve the protection of provincial legislation, the same as any other workplace.

As a response to the SARS crisis, the Ministry of Health directives limited the movement of staff. In a multi site hospital such as LHSC this meant the cancellation of all meetings and, most unfortunately, this included meetings of the Joint Health and Safety Committee. Can you believe that?

In the height of a crisis, Health and Safety Committee meetings were cancelled. This was a blatant contravention of the Occupation Health and Safety Act, indicating that although the province was in

the midst of an emotional and traumatic crisis in the lives of healthcare workers, the very legislation that provides for safe workplaces was being violated. Any Emergency legislation should require that both parties in the workplace and the Ministry of Labour satisfy their obligations under the Occupation Health and Safety Act.

For Bill 56 to be successful it will also need to ensure that there is respect for the workplaces rules and this means our Collective Agreements. We do not believe the safety of Ontario's resident's can withstand a repeat of what occurred during the SARS crisis. At that time the rights of committed frontline workers to reasonable protection under the law and as bargained with our employers were simply pushed aside.

OPSEU represents over 30,000 healthcare workers and thousands of others in critical services who will be called on during an emergency. We are all relying on this Bill to get it right so that they do not have to face the chaos and an inappropriate level of risk again. We do our jobs to protect workers and the public and unless this legislation actually sets out to protect all workers and the public we will have precious little chance of avoiding the pandemonium that was SARS.

In a pandemic, health care workers will be on the front line, but the focus of much of the planning is not on protecting the front line. This bill needs to identify workplaces that could be affected by an emergency order and direct the planning and negotiations to the provisions of a collective agreement. The legislation needs to support this direction.

Here is what we have heard from our members:

That there are many areas that are currently ill prepared for another SARS situation, pandemic or other major catastrophe. Our members are concerned and frightened that the government has not learned from previous mistakes.

No one seemed to be in control. There was confusion from management and therefore on the frontlines as to who was setting the direction to protect the public and healthcare workers.

The Joint Health and Safety Committees that did meet and which had action committees were often left wondering who was in control of the situation.

Healthcare workers are often in a situation where they must make a choice to protect their own health and safety as well as their own families or save the life of patient. If resuscitation is required and the patient has a suspicious illness, there is often a need to hesitate, to consider the need to protect themselves.

One of our members said “I don’t want to die. By the time I put on that suit, the patient could be dead...but I would go in to resuscitate that mom to save her unborn child”.

Workers have to make this choice and then not only have to deal with the emotion of making it but the possibility of having to defend their actions as well as losing their livelihood or possibly losing their own lives. Employees acting in an emergency should not be faced with the risk that their actions may involve them in a costly law suit.

These decisions are even more complicated and difficult in the face of chronic understaffing, contracting out, unfilled vacancies and increases in the use of part time workers. This exasperating

situation clearly demonstrates the need for extensive training and planning.

We experienced fear and uncertainty because proper precautions were not in place.

The provincial government has provided funds to purchase some special supplies and equipment such as hazmat suits for chemical, biohazard and nuclear radiation containment but training and the continued readiness is up to the hospital. But these same hospitals are chronically under funded and understaffed.

Among the military, police and firefighters, training is done to the extent that preparations happen without thinking and second-guessing. Those sections of our public service are trained and trained and trained some more.

We wouldn't think of sending troops into battle, SWAT teams into a rioting jail or firefighters into a burning building untrained or without the proper equipment. Yet we all expect this of healthcare workers. Advanced planning and coordination with employees needs to be enshrined in this Bill.

All we have between us and the next SARS or pandemic is a sign on the door and Universal Precautions.

This government, as it was campaigning for our votes, said that they respected and valued our work and wanted to work with us to provide better services to our public. We take our role in serving and protecting the public very seriously. We take our role as a trade union very seriously. In the latter capacity, it is our duty to see that workplace rules are followed, especially when lives are at stake.

To avoid chaos during the next provincial or local emergency, we must see changes that ensure employers respect our rights. That's what allows us to have confidence in one another. Employer to employee and union to government.

Our experience tells us that serious emergencies are the time to be guided by the rules of work which are carefully negotiated in organized workplaces. A crisis condition is not the time to experiment. We need to be prepared. For the Ontario public and for your healthcare employees, there is far too much at stake to do otherwise.