



HEALTH HAZARD ALERT

SEVERE ACUTE RESPIRATORY SYNDROME (SARS)

Volume 1

Number 6, April 24, 2003

This Health Hazard Alert for OPSEU members is provided to supplement information from Public Health, Ministry of Health, and Health Canada, and explains your rights under the Occupational Health and Safety Act and the Workplace Safety and Insurance Act.

How many cases of SARS are there in Ontario now?

As of April 23, the Ministry of Health reported 136 probable and 131 suspect cases in Ontario. Sixteen people in the province have died of SARS. In the rest of Canada, there are 59 suspected cases and 4 probable cases. Health Canada and the Ministry of Health report daily on the number of cases. For the complete reports on cases, go to the Health Canada or Ministry of Health links at the end of this document.

Is there new information about what causes SARS and how the virus might be transmitted?

On April 16, the World Health Organization (WHO) said “a new pathogen, a member of the coronavirus family never before seen in humans, is the cause of Severe Acute Respiratory Syndrome (SARS).” Since then much attention has been focused on developing reliable tests to detect the virus in people suspected of having SARS.

However, during this time, scientists at Health Canada have said they are not entirely confident the new coronavirus is indeed the sole cause of the illness. They point out that in 60 per cent of people with probable or suspected SARS, laboratory tests are unable to identify the coronavirus. They also advise that they are able to identify coronavirus in people who are not sick. This has led to speculation that the coronavirus may not be the cause of SARS. While there may be valid scientific explanations for the difficulty in identifying the virus in sick people, these findings raise important questions.

Since the appearance of SARS, one critical question has been how long the virus can live outside a human body. Until recently, all the scientific experts advised that the virus responsible for SARS could probably survive a maximum of three hours on a surface.

Yet, on April 22, a number of Canadian newspapers reported that a new Centres for Disease Control (CDC) study had discovered that the virus could live up to 24 hours on surfaces. But later the same day, two CDC scientists speaking at a telebriefing session contradicted this report. There has been no CDC study that made the 24-hour finding. The scientists pointed to existing studies finding that coronaviruses can live up to three hours on a surface. One of the physicians said that there is one recent study suggesting a coronavirus may be able to live longer than three

hours in the environment. (The transcript of this telebriefing session can be found on the CDC's website listed at the end of this document.) A CDC document released the next day says a preliminary study in Hong Kong found the coronavirus survived as long as 24 hours in the environment. That study is being repeated.

Why has the World Health Organization advised people not travel to Toronto?

On April 23, the WHO added Toronto to the list of destinations that people should consider avoiding. The travel advice says: "WHO is now recommending as a measure of precaution, that persons planning to travel to these destinations consider postponing all but essential travel." The destinations are: Hong Kong; Guangdong Province, China; Beijing; Shanxi Province, China; and Toronto.

WHO's reason is that the SARS outbreak "has continued to grow in magnitude and has affected groups outside the initial risk groups of hospital workers, families, visitors and other close person-to-person contacts. In addition, a small number of persons with SARS, now in other countries in the world, appear to have acquired the infection while in Toronto." WHO will reassess the situation in three weeks.

The CDC, on the other hand, has not advised people against travel to Toronto. It has issued a "travel alert" for Toronto that recommends that travellers to the city observe precautions to safeguard their health.

Health Canada, the provincial government and the City of Toronto have objected strongly to the WHO designation and are requesting the WHO lift the advisory.

Does the WHO advisory mean the risks of catching SARS at work, or on the way to and from work, are greater?

There is no indication that the risks of catching SARS during regular activities such as riding public transit are any greater now than they were at the beginning of the outbreak in Toronto. Toronto Public Health, Health Canada, the Ontario Ministry of Health and the Provincial Operations Centre continue to advise that outside of the healthcare sector, workers and members of the general public are safe to continue their normal activities.

In particular, Health Canada reports that the majority of SARS cases can still be associated with specific transmission settings such as households, hospitals and specific community groups. Remaining cases are travellers who have returned from an affected area in Asia and their close contacts.

Should workers or members of the general public consider wearing masks or respirators now that the WHO has issued the Toronto travel advisory?

Health Canada still says the use of masks in settings other than health care environments is unnecessary. The CDC also recommends against the use of masks in public areas.

Two reasons are given for this advice. First, the majority of SARS cases in Toronto can be linked to contact within the hospital or household, so the risks of exposure in the community are still assessed to be very low. Secondly, for a mask to provide an effective barrier it must be "fit-

tested” and be worn, handled and stored properly. The use of a poorly fitted mask or a damaged mask may lead to a false sense of security. If the mask is leaking air in around the sides, it provides no more protection than no mask at all. Handling a used mask and then touching your mouth or eyes with unwashed hands may in fact lead to the spread in infection, rather than act as protection.

Should workers and employers implement any new precautions in the workplace?

Joint Health and Safety Committees should meet to review existing infection control precautions in their workplaces, make a determination of any risks of infection and request that their employers put any necessary measures in place.

All of the experts still say transmission takes place either during close and prolonged contact when a SARS-infected person coughs or sneezes on someone, or perhaps when a person touches a surface where the virus has landed after a cough or sneeze. It then may be transferred to the person’s hand and then on to the mouth or eye when the person touches their face. There is no evidence that the virus can be carried for long periods in the air independent of a droplet from a cough or sneeze.

Therefore, the emphasis is on avoiding close unprotected contact with SARS-infected people. Frequent, thorough **hand washing** is known to be the most effective way to stop the transmission of SARS. Each employer should make hand-washing facilities readily available.

In some areas of the OPS, the employer has implemented a screening protocol allowing workers to screen members of the public for SARS exposure and symptoms. Management Board Secretariat has developed a document, “Guidelines for OPS Employees who Work Directly with the Public” to assist workers to screen clients who appear ill. However, this guideline does not appear to be widely distributed or implemented.

In the Ministry of Public Safety and Security, new inmates are screened upon arrival at a jail. Staff is also screened as they enter the jails/detention centres in the Toronto area. In Probation and Parole offices screening procedures have also been implemented in some areas. In the Ministry of Transportation, workers at the Driver Examination Centres have been given a screening tool to apply to applicants. This tool and additional hygiene measures were won through negotiations between OPSEU, MTO and Management Board Secretariat.

In all areas where OPSEU members work with the public, Joint Health and Safety Committees (JHSCs) should meet to discuss possible risks of SARS exposure. If there is a risk of exposure to SARS, OPS members should demand the employer provide the MBS “Guidelines for OPS Employees Who Work Directly With Members of the Public” and the right to use the guideline. In non-OPS workplaces, workers who work with the public where there is a risk of exposure should have the same rights.

Where the Guideline has been implemented, workers are instructed only to ask the screening questions about possible exposure to SARS if an individual appears to be flushed, sweating, coughing, and short of breath. It is OPSEU’s position that in the Toronto area where the SARS

outbreak is currently centred, it may now be safer to ask all individuals the screening questions rather than relying on a worker's judgement about whether or not an individual client appears ill.

Do workers have the right to refuse unsafe work under the Occupational Health and Safety Act, when the hazard is a potential exposure to a communicable disease?

Healthcare workers

- Under Section 43 of the Occupational Health and Safety Act (OHSA), workers in healthcare facilities do not have the right to refuse unsafe work if the hazard is a normal part of their work or when their refusal directly endangers another person.
- Healthcare workers do have the right to refuse if their refusal does not directly endanger another person and the employer has not taken steps to address the hazards.
- It is your employer's responsibility to ensure workers at risk have all the appropriate Personal Protective Equipment (PPE) and understand how to use it to protect themselves. The employer must advise you of the risks, provide the correct respiratory protection (N95 masks), ensure you know how to test the face seal of the mask, provide you with gloves, gowns and eye protection when appropriate, and ensure you wear the equipment when needed. The employer must provide a written infection control policy and protocol.
- If you do not have the appropriate PPE or do not understand when or how to use it, you have the right to protect yourself under the OHSA and to exercise your Right to Refuse unsafe work. If you believe your employer is not taking every reasonable precaution to protect your health and safety, and you are considering a work refusal, contact your OPSEU Staff Representative or OPSEU Health and Safety Officer.

Non-Healthcare workers

- Your Right to Refuse unsafe work is unchanged by the SARS outbreak. All workers have the right under Section 43 of the Occupational Health and Safety Act to refuse work that they believe endangers their health and safety. For information on the Right to Refuse unsafe work, consult with your OPSEU steward or OPSEU Health and Safety representative. Also more information can be found on the Health and Safety page of the OPSEU website in the booklet, "A Worker's Guide to the Occupational Health and Safety Act."

How are health and safety issues being addressed in the Healthcare sector?

The Provincial Operations Centre (POC) continues to release Directives to all areas of the healthcare sector on infection control, screening and measures to protect the health and safety of workers in the sector. Links to the most recent Directives are at the end of this document.

As new Directives are released, they often contradict previous directives, or even have contradictions within them. In addition, some of the directions in the documents are vague, while in certain areas they are silent.

OPSEU continues to advise that JHSCs within the healthcare sector have frequent meetings as new directives are released to discuss and analyse them and to determine how to apply them to best protect the health and safety of workers. Committees must also consider if the Directives are protective enough for the risks in their facility.

OPSEU's position is that the most recent Acute Care Hospitals directives (April 14, April 20) are not protective enough in some areas. For example, workers who are screening staff, patients and others entering all hospitals are required only to wear an N95 mask and no other PPE. Yet once inside the hospital, workers may be required to wear all available PPE. OPSEU recommends that JHSCs discuss this issue and consider increasing protection to workers doing screening by requiring gloves, gowns and goggles be worn as well as the N95 mask.

Are there any other measures that can be taken to protect workers' health and safety in the healthcare sector?

The most recent Directive from the Provincial Operations Centre raises the issue of worker fatigue and suggests that shorter shifts, longer breaks and off-unit breaks be considered. All workers who are required to wear personal protective equipment, particularly respirators, for extended periods find the experience exhausting. Respirators such as the N95 make breathing difficult and may lead some workers to experience headaches and fatigue. As well as the fatigue from the masks, workers must be constantly attentive to infection control procedures and deal with the emotional toll of working in areas with an unknown highly infectious disease. For many healthcare workers this experience may be the most challenging of their working careers.

OPSEU highly recommends that JHSCs and Local Executives take advantage of the advice from the POC in its April 20 Directive. They should meet with the employer and request that measures be taken to reduce the stress on workers who are facing these physical and emotional demands. At the very least insist that all workers take their appropriate breaks and be allowed to leave the unit for them.

It is also critical that all workers in the sector understand how and why to use their PPE and all of the infection control procedures. It is not clear whether employers have spent enough time ensuring all workers in the sector fully understand how to protect themselves and others. It is the employer's duty to take all reasonable precautions to protect workers' health and safety. It is the role of the JHSC to make recommendations to the employer if this duty is not being fulfilled.

For more information, contact OPSEU's Health and Safety Unit: 1-800-268-7376, 416-443-8888, ext. 772. Check the OPSEU website at www.opseu.org for future updates.

Useful Links:

Health Canada for updates and Guidelines: www.hc-sc.gc.ca/pphb-dgspsp/sars-sras

Toronto Public Health updates: www.toronto.ca/health

Centres for Disease Control: www.cdc.gov/ncidod/sars/

World Health Organization for daily updates and guidelines: www.who.int/csr/sars/

Ministry of Health: www.health.gov.on.ca