

June 30, 2005

Mr. Justice Archie Campbell
Commissioner
SARS Commission
180 Dundas Street West, 22nd Floor
Toronto, ON M5G 1Z8

Dear Mr. Justice Campbell:

On behalf of the members of the Ontario Nurses' Association and the Ontario Public Service Employees Union, we are writing to commend the SARS Commission for the Commission's Second Interim Report. It is a most insightful and comprehensive document. As you may note, we have put links to the Report on our websites.

We particularly endorse the Commission's recommendations to devote additional funding and resources to the public health system and to strike a balance in the *Emergency Management Act* between providing the relevant authorities with the powers necessary to address a public health emergency and guarding against government overreaction. In this regard, we share the Commission's concern about any proposed powers which would allow health care authorities to override provincial statutes – including the *Human Rights Code* – and perhaps, collective agreements. We look forward to the results of the Attorney General's review of these issues and, indeed, we intend to communicate our views directly to the Attorney General.

The Commission's recommendations for whistleblower protections address an important issue. We do endorse most of the Commission's discussion of the issue, and would note that the recommended protection is long overdue. At the same time, we would like to raise two concerns. Our first concern is the Commission's recommendation that whistleblowing legislation only protect employees who "blow the whistle" in good faith. Justifiable whistleblowing should be protected regardless of the motive of the whistleblower. Whistleblowers who report improprieties in bad faith may, despite improper motives, still raise important and legitimate public health issues and their actions may help to prevent public health emergencies. It is notable that there is no "good faith" prerequisite to the exercise of common law whistle blowing rights, or to the existing statutory protections in provincial acts.

Our second concern relates to the Commission's recommendation that whistleblowers be required to report to the local medical officer of health or to

the Chief Medical Officer of Health instead of ultimately being able to make the concern public. This will discourage whistleblowing where the local medical officer of health or the Chief Medical Officer of Health are implicated. This is of particular concern given the Commission's recommendations that increased powers be granted to public health authorities. If necessary, whistleblowers should be able to advise the public about any dangerous shortcoming in the work of medical officers of health.

We eagerly await the release of the Commission's final report, and especially its discussion of occupational health and safety for health care workers and the recounting of the experiences of health care workers during the SARS crisis.

Thank you very much for your continued attention to these matters.

Yours truly,

The image shows two handwritten signatures in black ink. The signature on the left is 'Linda Haslam-Stroud' and the signature on the right is 'Leah Casselman'. Both signatures are written in a cursive, flowing style.

Linda Haslam-Stroud
President
ONA

Leah Casselman
President
OPSEU