

COVID-19 Frequently Asked Questions for United Nurses of Alberta members

Updated: March 18, 2020

***Disclaimer:** Because COVID-19 is evolving by the minute, we cannot guarantee that everything referenced on this page is up to date. We will strive to review and update daily including adding additional questions and answers.*

General

1. Where can I access more information on COVID-19?

- Alberta Health Services (AHS)/Covenant Health: <https://www.albertahealthservices.ca/topics/Page16944.aspx>
- AHS COVID-19 FAQ for Staff: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-ncov-2019-staff-faq.pdf>
- Canadian Federation of Nurses Unions (CFNU): <https://nursesunions.ca/position-statement-on-covid-19/>
- Government of Alberta: <https://www.alberta.ca/coronavirus-info-for-albertans.aspx>
- Public Health Agency of Canada (PHAC): <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html>

Personal Protective Equipment

2. Why does CFNU and UNA's recommendation on minimum PPE requirements for healthcare workers differ from those of AHS, Covenant Health, and PHAC?

At present, there is no consensus from leading public health and disease control institutions across the globe on modes of transmission for COVID-19 and minimum PPE requirements for front-line health care workers.

In light of this uncertainty, UNA believes that all front-line health care workers should have access to and at minimum be protected using a fit-tested NIOSH-approved N95



respirator when in contact with patients who are suspected or confirmed to have COVID-19.

UNA's recommendation on minimum PPE requirements is based on [CFNU's position statement](#) and is in line with other leading institutions, including both the U.S. Centers for Disease Control and Prevention and the European Centre for Disease Control in Prevention, which both recommend an N95 respirator for health care workers in contact with confirmed or suspected cases of COVID-19. We acknowledge that these recommendations differ from both the World Health Organization and Public Health Agency of Canada; however, because of the conflicting opinions on PPE from leading public health institutions and uncertainty around transmission, we must practice the precautionary principle and recommend the higher standard.

It appears the CDC in the US have recently softened their position on PPE because of supply chain issues; however, they recommend returning to the use of respirators once the supply chain is restored.

In its most recent update on COVID-19, the US CDC notes that the science remains uncertain on how the virus is transmitted: "Droplets can land in the mouths, noses, or eyes of people who are nearby or possibly be inhaled into the lungs of those within close proximity. The contribution of small respirable particles, sometimes called aerosols or droplet nuclei, to close-proximity transmission is currently uncertain."

On March 12, 2020 the European CDC also released updated guidelines for Infection prevention and control for COVID-19 in healthcare settings. In their guidelines they also raise uncertainty around transmission stating, "based on current knowledge on the transmission of COVID-19, in which respiratory droplets seem to play a major role (although airborne transmission cannot be ruled out at this stage)." They acknowledge that the suggested set of PPE for droplet, contact, and airborne transmission (gloves, goggles, gown and FFP2/FFP3 respirator) could be adapted for the clinical assessment of suspected cases", which may include use of a surgical mask in certain situations, because of supply chain concerns.

However, both the US CDC and European CDC both continue to recommend use of an N95 (or equivalent FFP2 or higher FFP3 respirator) as minimum PPE when collecting a NP swab from a suspected COVID-19 case.

In summary, the recent changes in both of these guidelines appear to be driven solely by supply chain concerns; however, both guidelines continue to imply that N95 (or equivalent FFP2 or higher FFP3) is the preferred PPE for healthcare workers in contact with confirmed or suspected cases of COVID-19 and are a must when collecting NP swabs from suspected cases.

In light of the supply chain considerations outlined in these guidelines, we have asked Alberta Health Services for information on their PPE and N95 stockpile and we have received the following response. "Because of the fluidity of the situation, we are not able to provide data on the stockpile. We do know that the pandemic stockpile have been carefully planned for and managed for several years. Our stockpile is one of the most secure in Canada, but this is an international issue. CPSM continues to meet with vendors daily to manage the needs for our supplies and equipment." At present, UNA does not have any specific information regarding supply chain issues here in Alberta.

Please see CFNU's position statement on this issue for more information.

3. What should I do if I can't access or I am denied using PPE?

- Have a discussion with your immediate supervisor/manager outlining your concerns.
- If you are still unable to access or are denied using the minimum PPE that is advised for suspected or confirmed cases of COVID-19, we strongly encourage you to consider exercising your right to refuse dangerous work. There are certain obligations you must meet to exercise this right, which can be reviewed here: <https://www.alberta.ca/refuse-dangerous-work.aspx#toc-1>
- UNA will support any member that chooses to exercise their right to refuse dangerous work.
- Please contact your Local or UNA Provincial Office (Phone: 1-800-252-9394; Email: ProvincialOffice@una.ca) for questions or support.

4. I need to be N95 fit tested, what do I do?

- Contact a Workplace/Occupational Health and Safety Advisor with your Employer. If you are unsure how to do that – reach out to your immediate Supervisor and/or contact your Local.
- Please contact your Local or UNA Provincial Office (Phone: 1-800-252-9394; Email: ProvincialOffice@una.ca) for questions or support.

5. Should the Employer be providing me with hospital supplied uniforms for IPC purposes?

For AHS::

- We have consulted with IPC on this issue. Effective and appropriate use of PPE should keep your uniform clean. However, it certainly may give people comfort to change before leaving and bring your soiled uniform home in a bag (not just during pandemic). Uniforms do not need any special handling in the laundry.

Time Coding and Sick Leave

6. How should my time be coded if I am off of work related to COVID-19?

For AHS:

- Full-time, part-time and casual staff who are asymptomatic and restricted from work for the self-isolation period as instructed by either Health Link, Workplace Health & Safety, or Medical Officers of Health will be provided with paid leave (AFD pay code) for all regularly scheduled shifts.
- For part-time and casual employees who have been pre-scheduled for additional picked up shifts during the 14 day self-isolation period, will also be provided with paid leave (AFD). This does not include shift premiums.
- If a part-time employee becomes symptomatic, they will be coded paid sick leave for any regularly scheduled shifts as per their position FTE to the extent of their income continuance bank.
- For any additional picked up shifts that either a part-time or casual employee was already pre-scheduled to work but is unable due to becoming symptomatic, they will not be paid for these shifts. In accordance with collective agreement provisions, part-time and casual employees are not entitled to sick leave for additional picked up shifts they were pre-scheduled to work but unable due to illness.

For Covenant Health:

- Full time and Part Time Employees who are restricted from work as instructed by Healthlink, Occupational Health Safety and Wellness or Medical Officers of Health and who are asymptomatic will be provided with paid leave for all regularly scheduled shifts during the 14-day quarantine period.
- Full Time or Part Time employees who become symptomatic will be coded paid sick leave for any regularly scheduled shifts per their position FTE to the extent of their income continuance bank.
- Pre-Scheduled additional shifts for part time and casual symptomatic employees – for any additional picked up shifts, they will not be paid for these shifts.

Note: If a person is symptomatic and there has been a suspected exposure at work they should make a WCB claim (See Question 8).

7. My child's school or daycare is closed, how do I balance my work and childcare responsibilities?

For AHS:

- An email to AHS Employees on March 15, 2020 stated:
 - Given the critical nature of health services, this is a time to have 'all hands on deck'. We encourage you to be creative when looking at immediate and longer-term childcare options to ensure that we can provide essential health services to Albertans. As outlined in the AHS guideline on Temporary Alternate Workplace Arrangements, staff may be given the opportunity to work from home to address critical childcare needs, where possible, with manager approval. It is expected those working at home will have appropriate arrangements for childcare. AHS will not provide alternatives to childcare in AHS facilities or offsite. If you are unable to attend work, please contact your unit and/or manager in accordance with normal absence protocols. We know this announcement has come suddenly and many of you will be trying to make appropriate arrangements for your children. AHS will be calling on those who can fill shifts on short notice to be available to work.

For Covenant Health:

- An email to Covenant Health Employees on March 15, 2020 stated:
 - Given the critical importance of our service to Albertans during this crisis, we need our staff to report to work. We ask that team members with children at home do everything possible to identify immediate and longer-term child care arrangements so that essential health care services are not compromised at this time. At the same time, Covenant leaders are working diligently to identify and reduce non-essential services and ensure we have staffing continuity over the next 48 hours and beyond. Wherever possible, staff will be given the opportunity to work from home to address childcare needs. If staff are unable to report to work, they will need to contact their supervisor in accordance with normal absence procedures. Missed time will be coded as per the collective agreement or terms and conditions of employment.

- Please contact your Local or UNA Provincial Office (Phone: 1-800-252-9394; Email: ProvincialOffice@una.ca) for questions or support.

8. What do I do if I think I may have contracted COVID-19 at work?

- If you become symptomatic and you think you have contracted COVID-19 through a work exposure, you should make a WCB claim.
- Worker Fact Sheet: <https://www.alberta.ca/assets/documents/wcb-covid-19-worker-fact-sheet.pdf>
- Note that casuals are entitled to WCB since pay is based on normal hours of work, not FTE. However, it's worth noting that Article 20 does not apply to casual employees, so the employee would be paid by WCB directly and not through the employer.
- Employer Fact Sheet: <https://www.alberta.ca/assets/documents/wcb-covid-19-employer-fact-sheet.pdf>
- Worker Fact Sheet: <https://www.alberta.ca/assets/documents/wcb-covid-19-worker-fact-sheet.pdf>

9. What if I am asked to self-isolate because of Travel or Symptoms and I don't have time in my sick bank?

- If you are asymptomatic and have been asked to self-isolate you will be provided with paid leave for all regularly scheduled shifts. This paid time will not come out of your sick bank.
- If you are self-isolating and symptomatic and don't have time in your sick bank, AHS has arranged with their insurance provider to waive the 14-day waiting period for STD and you do not have to provide medical documentation to claim STD benefits. You will have to complete a plan member confirmation of illness form. If the absence was expected to continue beyond the initial 14 day period, medical details would be required. We are still waiting to confirm this process for Covenant Health employees.
- This does not apply to casual Employees.
- Please contact your Local or UNA Provincial Office (Phone: 1-800-252-9394; Email: ProvincialOffice@una.ca) for questions or support.

Returning Travelers and Vacations

10. I am about to return to work after being outside of Canada, what should I do?

For AHS:

- <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-ncov-2019-traveller-guidance.pdf>

For Covenant Health:

- On March 12, 2020 the Alberta Government advised that travel outside Canada is not recommended at this time and that individuals returning to Canada will be required to self-isolate for a period of 14 days. Covenant Health expects staff will adhere to the recommendation to not travel outside of Canada.
- Government has also announced on March 13, upcoming changes to the Employment Standards Code to allow employees who are required to self-isolate or are caring for a loved one with COVID-19 to take 14 days of paid job protected leave to cover the self-isolation period. As Government provides more details on how these changes are to be administered, Covenant will assess any implications to how staff are compensated for the self-isolation period.

11. Can I cancel or reschedule my vacation?

This will need to be assessed on a case by case basis in discussion with your immediate Supervisor/Manager. Please contact your Local or UNA Provincial Office for questions or support.

For AHS:

- An email to AHS Employees on March 14, 2020, stated “Employees should speak to their leader directly for approval to delay or reschedule vacation time. We have asked AHS for more specific guidance on this and we are awaiting more information.

For Covenant Health:

- Awaiting more information.

12. Can the Employer cancel my vacation and mandate me to work?

Yes. Article 17.03(g) of the Provincial collective agreement states: “No Employee shall have vacation cancelled or rescheduled by the Employer unless it has been assessed to be a recognized critical unforeseen emergency and it can be demonstrated that a bona fide attempt was made to mobilize the appropriate, available resources to address and resolve the issues before activating these provisions. An Employee who has vacation cancelled by the Employer shall be paid 2X their Basic Rate of Pay for the Shift(s) worked during the period of vacation cancelled by the Employer. The Employer shall also reimburse all non-refundable costs related to the cancellation of the vacation.”

This is a world-wide pandemic and almost certainly qualifies as a recognized critical unforeseen emergency.

The employer also has the right to mandate regular staff to work greater than their FTE. For fulltime employees, this would mean overtime. For part time employees the collective agreement says where the Employer requires a part-time Employee to work without having volunteered or agreed to do so or on the Employee's scheduled day of rest, the Employee shall be paid 2X the applicable basic hourly rate for work performed. Casual Employees cannot be mandated to work.

No Employee shall be requested or permitted to work more than a total of 16 hours (inclusive of regular and overtime hours) in a 24-hour period beginning at the first hour the Employee reports to work.

The employer has an obligation to minimize the use of mandatory overtime, and if an Employee believes that the Employer is requesting the Employee to work more than a reasonable amount of overtime, then the Employee may decline to work the additional overtime, except in an emergency, without being subject to disciplinary action.

The Employer also has the right to declare that Emergency Circumstances exist. In this case, Employees from any site may be assigned to work at any site to provide assistance. The Employer will have to reimburse Employees for all reasonable, necessary and substantiated additional accommodation and transportation costs for traveling between sites including parking if not otherwise provided.

Locals should ask the Employer to notify the Local each time vacation is canceled or individuals are mandated to work.

13. Can the Employer order me back from a Leave, such as a Maternity Leave?

- No, there are no collective agreement provisions that would allow the Employer to take such action, even in the event of an Emergency.

14. If I am currently self-isolating because of recent travel or because of symptoms and my Manager is asking me to come back to work before my isolation period is over, what do I do?

- **Do not** return to work as you would be violating public health orders from Alberta's Chief Medical Officer of Health.
- Immediately email UNA's OHS Advisor, Dewey Funk (dewey.funk@una.ca), with your name, manager's name making the request, location, and unit and Dewey will forward to the Zone WHS Director for follow up.

Accommodations

15. Should I avoid caring for a patient with suspected or confirmed COVID-19, if I am pregnant, immunocompromised, or have an underlying medical condition?

- At present, the WHO, PHAC, the US CDC, and European CDC do not provide guidance on this question.
- If you have concerns regards to your own health in relation to caring for suspected or confirmed cases of COVID-19, we encourage you to have a discussion with your manager about such a concern.
- If your manager still asks you to care for suspected or confirmed cases, you need to assess your own comfort and risk in carrying out those activities.
- If you are still uncomfortable with carrying out that work, we would advise you to:
 - Go to your medical doctor to explore the possibility of seeking medical documentation you can provide to your Employer.
 - Consider your right to refuse dangerous work. There are certain obligations you must meet to exercise this right, which can be reviewed here: <https://www.alberta.ca/refuse-dangerous-work.aspx#toc-1>
 - UNA will support any member that chooses to exercise their right to refuse dangerous work.
 - Please contact your Local or UNA Provincial Office (Phone: 1-800-252-9394; Email: ProvincialOffice@una.ca) for questions or support.
- The AHS COVID-19 FAQ for staff states:
 - Staff and students (including those who are pregnant, immunocompromised, or have underlying medical conditions) do not need to be restricted from providing care to patients who are under investigation for COVID-19, or who have probable or confirmed COVID-19, so long as the staff member or student is able to demonstrate proper use and fit of personal protective equipment, including donning and doffing, and can competently adhere to the IPC recommendations for COVID-19.
 - Individuals who are unable to competently adhere to the IPC recommendations for COVID-19 (e.g. skin condition that precludes proper hand hygiene practices) should not provide care to patients who are under investigation for COVID-19, or who have probable or confirmed COVID-19.

Testing

16. How can I get tested for COVID-19?

- Testing is currently focused on individuals who have traveled outside Canada or had contact with someone diagnosed as having COVID-19, or have developed symptoms of COVID-19.
- Any decisions around Employee testing would be determined by your Employer's Workplace Health and Safety Department.
 - AHS: 1-855-450-3619
 - Covenant Health: 780-342-8070 (Edmonton area) 1-855-342-8070 (outside of Edmonton)
- The public can also determine their need for testing by completing the Online COVID-19 Self-Assessment: <https://myhealth.alberta.ca/Journey/COVID-19/Pages/COVID-Self-Assessment.aspx>
- AHS has informed us that they are in the process of setting up a separate mechanism to prioritize Employee testing, whether it is occupational or non-occupational exposure to COVID-19.
- We will provide updates as soon we receive them.

Workload/Practices Issues

17. What to do if you feel your safety is at risk?

- **Speak up** and discuss the concern with your immediate supervisor/manager in a timely manner.
- **Document** the concern through [MySafetyNet](#) (for AHS Employees) and on a UNA Occupational Health and Safety (OHS) Concern Form. You can fill out a paper OHS Form or you may fill out the OHS Form electronically on the UNA app and online at <https://dms.una.ca/forms/ohs>
- **Contact** your Local or UNA Provincial Office (Phone 1-800-252-9394; Email: ProvincialOffice@una.ca) and ask to speak to an OHS Advisor for advice.
- Consider your **Right to Refuse** dangerous work. There are certain obligations you must meet to exercise this right, which can be reviewed [here](#). UNA will support any member that chooses to exercise their right to refuse dangerous work.

18. Are there any legal considerations I should be aware of when nursing in a pandemic?

- The Canadian Protective Nurses Society (CNPS) does a great job of outlining some of the elements nurses should take into consideration when practicing during a pandemic:
- <https://www.cnps.ca/index.php?page=82>

19. What do I do if my CPR course has been cancelled and it is about to expire?

Response from AHS:

- In compliance with direction that any face-to-face staff training, not directly related to support of AHS' COVID-19 response, will be suspended until further notice, BLS courses are not being offered at this time.
- AHS employees who require BLS training will be permitted to continue to work in circumstances where individual CPR certification has expired.
- AHS will keep you informed when BLS training resumes and will continue to support employees to maintain their certification through full courses or the Prerequisite Challenge Exam.
- We are in conversations with The Canadian Heart and Stroke Foundation regarding a grace period on renewal. They will issue a new policy statement soon and we will update you.

For Covenant Health:

- Awaiting response.