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**Government Dereliction of Duty**

**Reopening Schools and Restarting  
the Economy Need Not Be a  
Disaster for Society**

- Steve Rutchinski -



- **Expert Opinion on How to Protect Against COVID-19 Transmission in Schools**

**Health Care Workers Step Up Their Fight for Their Rights**

- **Quebec Workers Block Bridges to Pressure Government to Negotiate**

**Report on Tragedy in Herron Long-Term Care Home in Dorval, Quebec**

- **An Untenable Status Quo - Pierre Soublière**

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**Reopening Schools and Restarting the Economy  
Need Not Be a Disaster for Society**

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It can be said beyond a shadow of a doubt that the resumption of school and restart of the economy did not have to be the disaster for society that is currently unfolding. Yet, with the start of the new school year and restart of the economy, Canada is experiencing a surge in infections, outbreaks,

hospitalizations and even deaths. The "option" before us was never unsafe resumption of classes in order to restart the economy or going back to total lockdown! It does not have to be this way! There are practical preventative measures that can and must be taken for as long as the pandemic is with us, which may be for some time to come.

Back in May, during the first wave, *The Marxist-Leninist Weekly* published an article entitled: "Why Should the Pandemic Shut Down the Economy?" [1] It stated: "The biggest problem remains the one of who sets the agenda for the country and decides what policies should be adopted. The people are simply on the receiving end of whatever is decided and have no say in setting their living and working conditions or how they can contribute to the well-being of all." That is all the more true today.



The agenda is set by the rich, the global oligarchs that own and control our economy. The measures that must be taken to ensure a safe start-up of the economy, including the reopening of schools, which is critical, are considered by the oligarchs to be an impediment to their profit making.

As a result, the new school year began and the economy was restarted with utter disregard for the conclusions science has drawn for preventing the spread of COVID-19 infection. This is not rocket science: physical distancing, hand hygiene, creating social bubbles to limit interactions, masking, avoidance of enclosed spaces for prolonged periods of time, etc.

As well, teachers, education workers, frontline health care providers, public transit workers and workers in all sectors of the economy are blocked from participating in setting the agenda for society. The many proposals they have brought forward have been based on scientific evidence but are ignored.

For example, had the recommendations of teachers and education workers to limit class size, cohort students, ensure adequate ventilation in all enclosed spaces, and ensure adequate distancing in school bus transportation, been followed this would certainly have slowed the surge of the second wave.



Yet, in every province the governing authorities, regardless of which cartel party forms the government, started up schools without adequate preparation or safety measures. They did so with utter disregard for their own public health advisories (on physical distancing and restricted social bubbles, for example) and against the advice of the medical and science experts. *Workers' Forum* is reprinting excerpts from the views of one such expert below.

With appropriate measures, schools can be both powerful institutions for socializing youth of all ages to be a force for safe conduct during the pandemic and essential institutions for a modern economy. However, without taking appropriate action, schools expose teachers, students and society as a whole to tremendous risk and super-spreader events.

The irrationality we are experiencing begs the question: Who Decides? This irrationality is calling for substantive changes based on democratic renewal. The decision-making power must be vested in

the people in a manner that makes sure those concerned with the decisions taken, no matter what they are, can make informed choices and take responsibility for their consequences. At this time, the only choice for working people is to keep fighting for rational measures to deal with the pandemic. As they do, the refusal of the ruling circles to acknowledge the right that belongs to everyone to participate in deciding what is to be done will surely strengthen the consciousness and conviction that workers must themselves become the decision-makers. To make this so, how to renew the political process to end all its anti-democratic tendencies which give rise to party governments which pay the rich is the crucial problem which must be taken up for solution.

## Note

1. "Why Should the Pandemic Shut Down the Economy, " *TML Weekly*, May 16, 2020.



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# Expert Opinion on How to Protect Against COVID-19 Transmission in Schools

Dr. David Fisman is a world renowned epidemiologist and expert on COVID-19 transmission. His expert opinion was included in the application to the Ontario Labour Relations Board (OLRB) by the four teachers' and education workers' unions seeking a province-wide remedy to the unsafe conditions under which schools have resumed. The OLRB rejected the application for "lack of jurisdiction," thus his opinion was never considered. *Workers' Forum* is reproducing excerpts from Dr. Fisman's expert opinion below.

## Credentials of Expert Witness

Dr. David Fisman: Tenured Professor at the Dalla Lana School of Public Health at the University of Toronto; former Head of the Division of Epidemiology, DLSPH; incoming head of Pandemic Readiness stream at the new University of Toronto Institute for Pandemics; Associate Medical Officer of Health with the City of Hamilton 2001-2003; author of over 200 publications including "15 papers related to the epidemiology of COVID-19" since February 2020; funded by the Canadian Institutes for Health Research (CIHR) for COVID-19 study; recently chaired an international symposium on COVID-19 transmission; and invited speaker at recent (August 4, 2020) World Health Organization symposium on COVID-19 transmission; and "a member of Ontario's Modelling Table and Science Table, both of which advise the Ontario Provincial Government on COVID-19."

## How COVID-19 Is Spread

12. "... early in the pandemic, fomite transmissions (i.e. infection that results from physical contact with a contaminated object) was believed to be an important route. ... However, evidence now shows that fomites are a far less significant driver of COVID-19 [than] originally thought."

13. "...aerosols are increasingly recognized as an important mode of transmission of COVID-19 ... This is likely to explain the propensity of COVID-19 to cause large clusters in 'closed, close, crowded' settings including long-term care facilities, food processing plants and homeless shelters."

15. "...Restaurants, bars and other indoor gathering places such as churches have featured prominently in the history of COVID-19 superspreader events."

16. "The fact that large outdoor gatherings ... have not appeared to have driven the spread of COVID is further evidence of the important role aerosols play."

17. "Aerosol transmission may be most likely during the pre-symptomatic phase of infection..."



18. "Asymptomatic infection appears common.... Children aged <10 were three times more likely to be asymptomatic than others."

19. "... children aged 10 and over are as likely as adults to be infected by COVID-19..."

21. "...viral loads in children are similar to, and perhaps higher, than viral loads in adults."

24. "... misconceptions about children and COVID-19 have been driven by the increased likelihood of asymptomatic infection in children (three-fold increased likelihood in Ontario data) ...

## Overview of Public Health Measures to Control the Spread of COVID-19

32. "...best practices globally show that it is possible to reduce COVID-19 transmission to low levels using a combination of distancing, masking, reduced gathering sizes, ventilation and other non-pharmaceutical measures."



36. "Masking is likely most effective as a means of source control: ... masks reduce the risk of both short and long-distance airborne COVID-19 transmission. ... Because it appears that individuals are most infective prior to the onset of symptoms, and many infective people are completely asymptomatic, it is important that masking be done on a universal basis in all indoor locations."

41. "...it has been notable in July and August 2020 that British Columbia has had a rising effective reproduction number... while Ontario and Quebec

have gone through a period of low [reproduction numbers] following mask mandates, notwithstanding substantial economic opening in those provinces. ... the relative risk reduction associated with masking orders in Ontario has likely been on the order of 38 per cent in the province as a whole, higher in the Greater Toronto Area ...

42. "... there is no reason to anticipate harms, physical or psychological, from mask wearing in children ..."

43. "...poorly ventilated indoor spaces, crowded places and close contact increase the likelihood that these aerosols infect secondary cases. ... the use of masks is one intervention that helps. ... Another mechanism is increased ventilation ... that is to say removing air inside an enclosed space and replacing it with air from outdoors ..."

45. "Distancing reduces the likelihood of transmission ... distancing is most effective at distances greater than 1.5 meters

46. "... none of these are substitutes for each other. Rather they must all be used simultaneously and consistently in order to effectively reduce the reproduction rate of COVID-19."

## Schools and COVID-19

57. "My opinion that unsafe reopening of schools is likely to result in surges in disease that will cause illness and deaths to rise in the community. ..."

58. "It is my opinion that a strong focus on reduced class sizes, improved school ventilation and mask use would help reduce school related surges in COVID-19 activity in Canada this fall.

## The Guide to Reopening Ontario's Schools

59. "I have reviewed the *Guide to Reopening Ontario's Schools (the Guide)*. ... The guide does not contain sufficient measures to adequately protect students, teachers and other adults working in schools, or the public more broadly."

60. "... there are at least five major failings in the *Guide*: the failure to require universal indoor masking at all age levels; the failure to require enhanced ventilation; failing to set out minimum standards for physical distancing; not requiring reduction in class sizes outside of designated secondary school boards; and serious flaws in its approach to cohorting.

64. "Ventilation of indoor spaces is not addressed by the *Guide* ... Due to the fact that classrooms are closed, close and crowded spaces ... adequate ventilation is key to reducing the risk of infection."

69. "... the *Guide* does not set out any minimum rules for distancing.

71. "...the *Guide* does not require schools to reduce class sizes ..."

72. "Reducing class sizes is one of the most effective tools in lowering the risk ... the SickKids *Updated Guidance for School Reopening* states that "smaller class sizes should be a priority strategy" in reopening of schools. Reducing class sizes produces four distinct forms of protection simultaneously

- ... reduces the probability that any member of a class is infected
- ... reduces the number of secondary cases that could result from a primary case
- ... allows for greater distancing
- ... reduces the overall production of finer aerosols within a fixed indoor space ...

78. "In my opinion, the total absence of class size limits in most classrooms is an unreasonable approach to school reopening from a public health perspective. ... class sizes in the 20s produce significantly higher predicated infection rates than classes half that size."

82. "Cohorting students to a single class, combined with lower class sizes, universal masking, distancing of at least 1.5 meters and adequate ventilation rates constitutes an effective means to ensure that schools do not become drivers of pandemic spread of COVID-19."

84. "...The *Guide* states that specialized teachers ... will still move from classroom to classroom to provide instruction. This increases the risk of infection to both the teacher, and to the students. We have already experienced a clear example of how this type of movement between cohorts can drive the pandemic in Ontario: the case of long-term care homes.

86. At the high school level, schools are directed ... to keep students to approximately 100 direct and indirect contacts per day and limiting them to two class cohorts. ... Public health guidance directs individuals to maintain social circles of 10, yet the *Guide* uses contacts ten times that size as a goal.



88. "... The other strategies that the *Guide* calls for [*hand hygiene, self-screening, goggles and face shields -- WF Ed. note.*] are not adequate substitutes for requiring universal masking, implementing physical distancing of 1.5 or more metres, reducing class sizes, requiring adequate ventilation and addressing the shortcomings of the *Guide's* cohort rules."

(Photos: WF, OSSTF)



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## Health Care Workers Step Up Their Fight for Their Rights

# Quebec Workers Block Bridges to Pressure Government to Negotiate



Jacques Cartier Bridge, Montreal, October 19, 2020



On Monday morning, October 19, members of the Interprofessional Health Care Federation of Quebec (FIQ) blocked traffic on the Jacques Cartier Bridge in Montreal and on the Quebec Bridge between Sainte-Foy and Lévis for about an hour. They organized these demonstrations as a means of informing everyone of their situation. These health care professionals need their negotiations with the Quebec government unblocked and they need government to respect and agree to their demands for immediate and serious improvements in their wages and working conditions. They are calling for a publicly televised debate with the Minister of Health.

"Both literally and figuratively, we are once again sending a distress signal to the Legault government. Over the past few days, we have been clear: the government will see care professionals where it is not used to seeing them. We no longer have any other choice. For too long, and in every forum, we have been repeating that burnout is taking its toll on health care professionals and pushing them towards illness, retirement or resignation. We have been at the bargaining table for months and our concrete proposals continue to be ignored. If our



words are not being effective, our actions will have to be. Today, we want all of Quebec to know that we have had enough, that our working conditions must change," said Nancy Bédard, FIQ President.

The FIQ has launched a public call to the Minister of Health and Social Services, Christian Dubé, to hold an open debate with the federation, broadcast by the media so everyone can see and hear, on the state of working conditions for healthcare professionals.

"How is it that we are still at the stage of convincing the government of the merits of our demands? I invite Mr. Dubé, through the medium of his choice, to engage in a frank discussion that will allow the public to judge for itself on the issue of overwork, mandatory overtime and the reorganization of full-time work schedules. It is now time for Minister Dubé's words to be translated into concrete action," said the FIQ President.

The federation has announced that it will take further action in the coming weeks to make its voice heard by everyone. On October 24 and 25, FIQ members will refuse mandatory overtime (MO). Workers will work their regular shift and will work overtime on a voluntary basis but will refuse MO.

## An Overview of FIQ's Demands

Among the main demands of the federation are the following:

- A reasonable and safe workload.
- Safe healthcare professional-to-patient ratios.
- Stabilization of the work teams.
- Elimination of the use of mandatory overtime as a management tool.
- Make full time positions more attractive. [*by eliminating the imposition of mandatory overtime and other abuses - WF Ed. Note.*]
- Guaranteed time off on negotiated statutory holidays.
- Workers' input in setting schedules.



In terms of wages, FIQ is demanding a wage increase of 12.4 per cent over three years, of which 7.4 per cent is a wage catch-up to compensate for the gap that has widened between health care workers and other public sector workers such as those at Hydro-Québec or universities. The Quebec government is sticking to a provocative "offer" of a 5 per cent increase over three years, essentially

no increase once inflation is taken into account. This wage offer has remained the same since May.

(Photos: FIQ)



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## Report on Tragedy in Herron Long-Term Care Home in Dorval, Quebec

# An Untenable Status Quo

- Pierre Soublière -



The "Investigative report on the events in the context of the COVID-19 pandemic in the Herron long-term care home" was mandated by the Quebec government following the deaths, between March 28 and April 10, of 31 seniors, residents of the Herron long-term care home. The author of the report goes back to 2017 to establish what factors in the course of these years could have led to such a tragedy. Here are some of the highlights of the report which was made public on September 23.

Various organizations had observed and noted a number of major problems as of 2017 in the care given at the Herron home. Among the organizations: the Quebec Certification Board, the Ministry of Health and Social Services, the Public Protector, the Quebec Order of Assistant Nurses, and the Quebec Order of Nurses. What were the main concerns raised by all of them? They were:

- inadequate infection control measures;
- high staff/resident ratio;
- high staff turnover, estimated at more than 20 per cent annually;
- inadequate staff training regarding psychological and behavioural symptoms of dementia.

The author of the report observes that, like many long-term care homes in Quebec, the Herron private home operated in a permanent state of shortage of personnel. He states: "This staff shortage meant many cases of absenteeism, of high nurse/resident ratios. Such situations led to extra workload for the staff in the home, exhaustion and departures."

At the organizational level, at the time of the pandemic outbreak, there was a lack of technical



supplies such as linen, incontinence pads and suitable basic medical equipment such as blood pressure monitoring devices and thermometers.

On April 8, with the emergency intervention led by the University Integrated Centre of Health and Social Services of the West Island of Montreal (CIUSSS ODIM), here are some of the numerous aspects of the care provided:

- sufficient personal protective equipment;
- the presence of specialized physicians in geriatrics and internal medicine;
- a team of pharmacists to ensure the safe handling of medications;
- the expertise of the CIUSSS ODIM team in hygiene and cleanliness, in particular for proper disinfection procedures;
- a team of professionals to treat malnutrition and dehydration among residents;
- work with the food service to ensure proper food texture, temperature and quality;
- testing of all residents for the coronavirus.



One thing that definitely stands out in light of the April 8 emergency intervention is that the level of care in the Herron home was totally inadequate, long before the pandemic. With regards to this, the author states: "Can private promoters succeed in meeting the overall needs required by people in conditions of a severe loss of autonomy? Do the workers' conditions contribute to stable, ongoing and quality care? The experience of the past three years at the Herron home suggests that the answer is no. In this context, is the status quo for this type of resource in 2020 still possible?"

In its statement upon publishing the report, the Quebec government states that it will "better take care of our seniors and our most vulnerable elderly communities in Quebec."

As long as the Quebec government refuses to increase investments in health, including in the workers who provide the care who are demanding conditions which will allow them to care for and protect the health of all to the best of their ability, the situation will not change.

*(Photos: FIQ, Unifor)*



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