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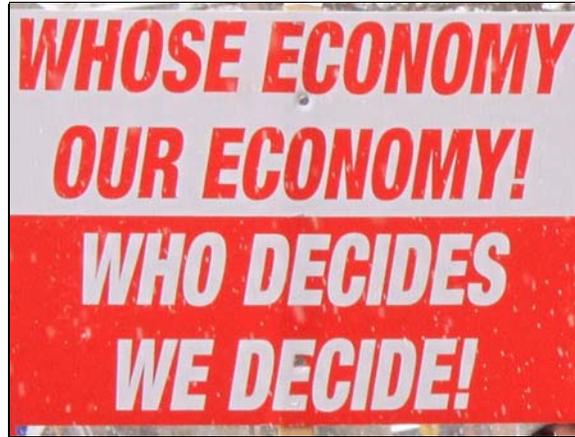
As 2021 Gets Underway

Impotence of the Ruling Elite Regarding Economic and Health Crises

The ruling elite in Canada are expressing dismay at their inability to even explain how to combat the twin economic and health crises, let alone propose anything concrete. Leaders of the cartel parties in Parliament and economists are said to be bewildered and feel helpless in the face of the

continuing crises and are reduced to saying how bad things are and attacking one another for not doing more.

Words expressing dismay at the continuing twin crises and attacking one another are of little use, as are appeals that the rulers should listen to the workers and respect them. The only meaningful action is to encourage the fighting contingents of the working class in workplaces across the country, as well working people in the communities and teachers and staff in the educational institutions to mobilize themselves directly to deal with the economy and the value it produces in the context of how the twin crises of the economy and the health care system can be solved for the common good.



Workers' Forum will continue to give space for demands and actions which favour the workers, including the demand to stop paying the rich, for not-for-profit health care, long-term care and seniors' homes and similar measures which benefit the people and help resolve the crises in their favour.

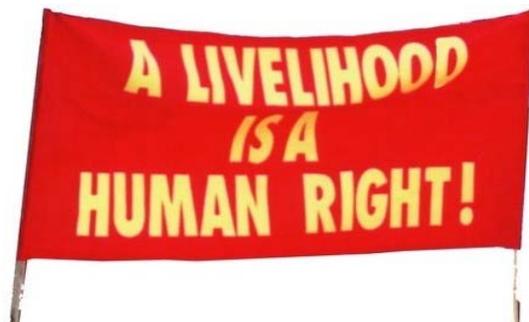


High Unemployment Reveals Depth of Crisis

As 2021 gets underway, the number of unemployed workers in Canada continues to soar.

Official unemployment of workers looking for work and unable to find a job rose to 1,755,800 persons in December 2020. This indicates 636,000 more unemployed workers compared with February 2020. Also 488,000 employed Canadians reported in December they were working less than half their usual weekly hours.

The number of Canadians 15-years old and over in December was 31,297,700. This number is considered the potential workforce. The actual workforce was 20,308,800 persons. Of these, 15,188,300 were employed full time, 3,364,700 employed part time and 1,755,800 were unemployed. The percentage of workers in the actual workforce yet underutilized either as unemployed or working less than half their usual hours was 17.1 per cent for December, affecting 3,472,805 workers.



The drop in the workforce participation rate plus the large number of unemployed and underemployed mean a loss of potential social value for the country. The workers not working in the socialized economy are not producing social wealth. The refusal of the ruling elite to organize universal free childcare and early learning for all children is a block to the economy meeting its potential.

The refusal of ruling elites to challenge monopoly right and its expropriation of the added-value workers produce drains needed social value from the economy and country that could be used for increased investments in social programs and public services.

The refusal to challenge monopoly right to realize (pay for) the social value they consume from educated and healthy workers as social reproduced-value but instead allow the oligarchy to expropriate it as private profit deprives public education, health care and other social programs of the funds they require to meet and guarantee the needs and rights of Canadians.



December Labour Force Survey

The December 2020 Labour Force Survey from Statistics Canada painted a grim picture as workers experienced a net loss of 63,000 jobs. Statscan said an additional 42,000 people dropped out of the workforce altogether with "core-aged women and male youth" being "largely responsible for the fall."

"The monthly drop in self-employment more than offset the increase seen over the previous two months and brought the number of self-employed workers to its lowest point since the onset of the COVID-19 pandemic, or 6.8 per cent (-198,000) lower than in February. In contrast, the number of private-sector employees was 4.1 per cent (-512,000) lower than in February while public sector employment was 1.9 per cent (+73,000) higher. On a year-over-year basis, self-employment was down by 192,000 (-6.6 per cent) in December, with the largest declines in construction; transportation and warehousing; and health care and social assistance (not seasonally adjusted). The bulk of the decline was among core-aged workers, mostly men (not seasonally adjusted)," Statscan reports.

"The number of active businesses in September was 7.2 per cent lower than in February 2020," it adds.

Of note is that total hours worked in December fell for the first time since April 2020, declining 0.3 per cent. Statscan says, "This decline was driven by losses in the accommodation and food services, and the 'other services' industries (which include personal and laundry services). Smaller declines were observed in business, building and other support services, and natural resources. [...] In December, total hours worked were 5.3 per cent below February levels, with hours lost by self-employed workers accounting for over two-fifths (44.3 per cent) of the overall decline."

(statcan.gc.ca)



Curbing the Spread of the COVID-19 Pandemic

Workers' Organizing for Solutions Remains Key

- Pierre Chénier -

As the spread of COVID-19 results in higher numbers of infections, hospitalizations and deaths, it has become clearer than ever that workers organizing to push forward their demands and solutions is key to curbing the spread and stabilizing the situation, especially in the health care system.

Workers speaking out and organizing to protect everybody, including themselves, as they deliver the services people need is essential in affirming social solidarity of all for the well-being of all. It is also only through this work and struggle that working people can force those in authority to take up their responsibility of protecting the people.

It is a tragic fact of life that after nearly 11 months of the pandemic, safe working conditions for

frontline workers have not yet been achieved. Workers' demands for such basic things as adequate personal protective equipment that they themselves determine is needed based on their experience and public health standards have not been universally met. Some health and safety measures are in place in some workplaces but not others, according to random criteria decided by unknown parties.

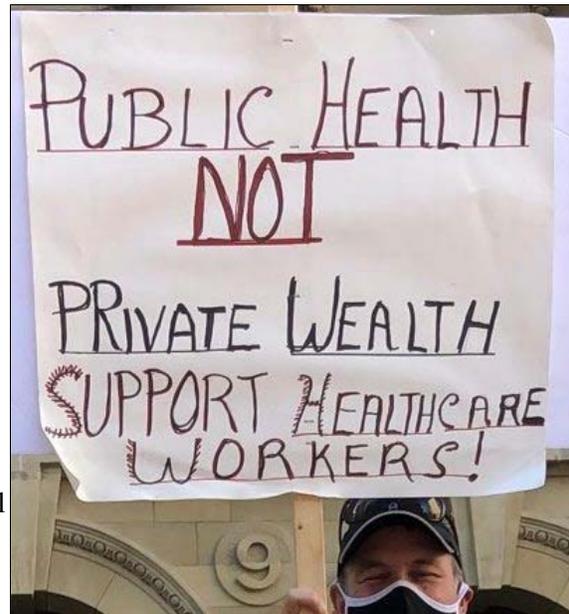


Governments and employers are looking for alternative sites where various health services that do not require full-fledged hospitals can be delivered. However, without adequate personnel and mobilization of the human factor to sort out the issues of safety, training, maintenance, and all issues related to the success of such projects, they will come up against the same problems they are already responsible for creating. Hoping that by mobilizing the armed forces to deliver vaccines will guarantee efficiency is pie in the sky given the lack of interest in putting human beings at the centre of social organization.

These projects can only be built with the pro-social aim of looking after the well-being of all. This is where the fight is the most acute. Workers are taking initiatives to lead the people in solving the crisis in a manner that benefits the people and society but matters are not under their control. Ruling elites continue to put forward schemes which they announce by decree such as curfews and fines no matter what violations of workers' rights they entail.

Only by the workers mobilizing themselves, starting with the organized collectives of workers, youth, women, Indigenous peoples, community organizations and so on, can they exercise some sort of control over what happens.

At this time there is discussion in Quebec about requisitioning private surgery rooms and their staff to integrate them into the public sector during the crisis so that they can do important surgeries that



are being postponed because of COVID-19, alleviating the situation in the hospitals. There is no doubt that marshalling resources to face the crisis has to be done but this requires the full mobilization of the workers and medical authorities and others to ensure that it is done safely. Health care workers told *Workers' Forum* that this is an avenue that could help alleviate the pressure on the health care system, provided that utmost care is taken to ensure that this is done safely and that it does not mean the expansion of private health care. They say this is intended as a temporary measure to address the crisis.

In Ontario and other provinces, governments are talking of plans to open up more hospital beds, temporary field hospitals, and other ways to expand the system. But without addressing the demands of the workers for increased staff and improved working conditions this will exacerbate, not solve, the health care crisis.



Addressing Matters of Serious Concern in the Health Care Sector



A matter of serious concern amongst health care workers in Quebec and elsewhere is to avoid implementation of what is called the prioritization protocol for access to intensive care if the system is overwhelmed. In Quebec, according to such a protocol designed by the Quebec government, if the shortage of resources in intensive care reaches a breaking point and measures such as the transfer of patients from one institution to another have become impossible, some patients would be refused life-saving ICU treatment to make room for others deemed more likely to survive. The protocol will be enacted when demand for ICU beds across the province reaches 200 per cent of normal capacity.

Health care workers told *Workers' Forum* that the lack of resources that would trigger such actions is the direct result of the slashing of services by successive governments for over 30 years. It has been made worse today by the untenable conditions imposed on health care workers which results in workers becoming sick and having to take leave, or resigning or opting for early retirement. The human productive force is being wrecked under the hoax of taming budgetary deficits and other anti-social pretexts so as to serve narrow private interests. The consequences of this wrecking is invoked to justify further wrecking.

Workers fight to affirm all human life and rights and do not agree with these desperate proposals which go against their conscience. It is like asking fire-fighters not to go all out to rescue everyone in a burning building but to choose who lives and who dies. The fight of workers for adequate and safe working conditions is directly linked with defeating this anti-social, inhuman, assault on society.



Ontario Extends "Stay at Home" Order

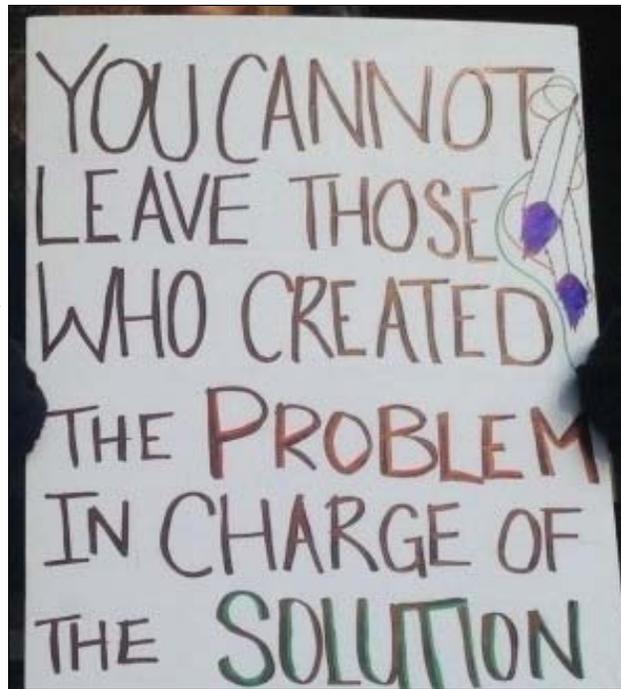
- Steve Rutchinski -

On January 25, the Ontario government extended the "state of emergency" first announced on January 12. The measures are aimed at keeping the contagion of the COVID pandemic in check so as to "flatten the curve" of infections before the public health system is completely overwhelmed. The "state of emergency" is now set to expire on February 9 unless extended again.

The concern is that the government is refusing to mobilize and bring to bear the strength and organization of the workers and people to flatten the curve. Marginalization of the people from being at the centre of providing solutions to the problems facing society is the reason why the situation is not brought under control. The Government of Ontario has refused to even consider the recommendations of education workers' unions and frontline health care unions, proposals that have been consistent with public health guidelines and medical scientific findings; proposals that would have minimized the risk of a second wave following the start up of schools, work and commerce.

Neo-liberal privatization of practically every aspect of the public health system has left Canada completely vulnerable when it comes to meeting public health requirements. The refusal to provide adequate personal protective equipment even for frontline health workers, let alone for society at large, shows that the agenda to make the rich richer is criminal and workers must call for a change in the direction of the economy.

The previous state of emergency declared in Ontario was used to override the collective agreements of frontline health care providers, imposing intolerable working conditions -- often without even adequate protective equipment. The neo-liberal agenda of public sector wage freezes, privatization and other pay-the-rich schemes exacerbates the crisis. It comes as no surprise that in the midst of this crisis society is facing the most severe health care staffing shortage yet.



Ontario responded to the first wave with legislation indemnifying for-profit long-term care (LTC) operators from criminal or civil liability for the hundreds of deaths in LTC homes. Private LTC operators also received tens of millions of dollars in grants, and while conditions for workers and residents remained largely unchanged, these corporations paid out huge dividends to owners.

Ontario education workers' unions developed serious protocol measures to ensure reopening schools would not be a disaster for society, only to be blocked no matter what avenue they tried to be heard. The fact is that the democratic institutions as they presently exist do not permit workers and their organizations to have any say whatsoever in decision-making to manage this pandemic.

Ontario's government blames the people for ignoring public health guidelines. It claims the state of emergency and stay-at-home order is necessary because people do not act responsibly.

In fact, the workers and people of Ontario have been and continue to take up their social

responsibility to the best of their ability, to keep themselves and their communities safe. However, their lack of control over the decision-making power must be addressed by getting rid of the system of cartel party government which claims that through their vote during an election they authorize others to speak and act in their name. It is a fraud. The cartel party system of government serves the rich. Such governments do not represent the people.

As it stands at present, Ontario workers have to step up their fight in defence of their rights so that the rights of all are protected and governments do not get away with their failure to do their duty as the people understand it.

Restrictions in Ontario

Ontario has been put under a stay-at-home order, which requires everyone to remain at home with exceptions for essential purposes, like going to the grocery store or pharmacy, accessing health care services, for exercise or for essential work.

There is no in-class instruction until February 10 at the earliest for the following public health units: Windsor-Essex, Peel Region, Toronto, York Region and Hamilton.

All businesses must ensure that any employee who can work from home does so.

Outdoor gatherings are restricted to five people, consistent with the first-wave lockdown rules.

Masks remain mandatory indoors at open businesses or organizations. Masks are also now recommended outdoors where physical distancing of more than two metres is not possible.

All non-essential retail is closed as of 8 pm and open no earlier than 7 am. These limits don't apply to stores that primarily sell food, gas stations, pharmacies, convenience stores or restaurants providing take-out or delivery.

Non-essential construction is further restricted, including below-grade construction, exempting survey.

There are no restrictions on the purchase of non-essential items.

(With files from Government of Ontario, CBC.)

Administrative Court Orders Nurses to Stay on the Job

- Pierre Soublière -

During the Christmas holidays, Quebec's Administrative Labour Tribunal (ALT) intervened to force nurses at the Gatineau Hospital to work the December 25-26 night shift. One of the nurses forced to stay at work had worked several 12-hour shifts as well as overtime during the week and was exhausted. The president of the Outaouais Health Professionals Union, Patrick Guay, explained that the same nurse had only requested two days off during the holidays, but was forced nevertheless to stay on the job and work overtime.

The ALT ruled that the "concerted" refusal to work overtime represented an "illegal pressure tactic," which could "jeopardize a service which belongs to the public by right." The judge thus ordered the nurses to work their regular workday and to do the extra required overtime.



This ALT ruling is yet another measure which increases the arsenal of what are called legal measures which are put at the employer's disposal to manage its staff without taking into account collective agreements, the right to refuse unsafe work, nor the most basic sense of and respect for health and security for the workers and the people they tend to. Ministerial orders were imposed in March by the Legault government which, among other things, allow health and social services centres to cancel planned holidays and force part-time employees to work full-time. The employer, the Integrated Health and Social Services Centre (CISSS), states that it is counting on nurses to show their "solidarity," since 40 per cent of Outaouais nurses are part-time. This call to a so-called "solidarity" is backed by fines which can go from \$1,000 to \$6,000.

What governments have always accused health workers of doing -- holding the population hostage when they undertake actions to defend the right to health and to humane working conditions -- is precisely what they themselves are doing. It is not fortuitous that workers have issued public distress calls that they are being held prisoner in their places of work!



Interviews

"We Are Not Giving Up on Anything -- Help Us to Help You!"

- Marjolaine Aubé -

Marjolaine Aubé is President of the Union of Workers at the Integrated Health and Social Services Centre of Laval (CISSS de Laval-CSN).

Workers' Forum: How would you describe the current situation regarding the fight against the pandemic at the CISSS of Laval?

Marjolaine Aubé: I would describe the situation as very critical and grim. During the first wave, COVID-19 infection was mainly in the residential and long-term care centres (CHSLDs) and seniors' residences. As for the situation at the hospital in Laval, there wasn't much going on, it was almost deserted. The second wave is expressing itself everywhere. Several establishments are affected, including the hospital where there are many outbreaks. It's going faster, it's not concentrated in the residential centres but everywhere, in all our facilities. We also have patients who have been transferred to the Laurentides and Lanaudière regions, because they are a little less affected, while Laval is once again being hit hard.

In addition, there is the whole issue of ventilation systems in our facilities. We have a concentration of patients who are infected with COVID-19. We have facilities that are very old and we also have facilities that are newer. Over the years, the facilities have been renovated on the

inside. Where we had one office, for example, it may have been rearranged into four offices, separated by partitions, but the ventilation system was not changed. The ventilation system is no longer optimal. A report has just been submitted by the National Institute of Public Health of Quebec (INSPQ) which makes many recommendations regarding ventilation systems and equipment, and proposes several measures. It is clearly stated in the document that if all the required measures are not put in place, it will not work, that the measures are complementary.

We have been asking for ventilation reports from the employer since July. The employer kept promising it would provide them but it never did. The nurses' union finally made an access to information application but given the delay, between July and now, which is too long, we filed 20 complaints about the ventilation systems of the Laval CISSS with the Labour Standards, Pay Equity and Workplace Health and Safety Board (CNESST). We now have an inspector on the file, who has started her inspections and has already found that many things are not working. She has given the employer 10 days to provide the necessary documentation for her to do her inspections. We're on hold as to what the inspection is going to yield.



The claim of the three unions at the CISSS has been the same since March. COVID-19 is airborne and we must have N95 masks. The INSPQ has just recognized that the disease is airborne. The World Health Organization has been saying this for a long time, as has Health Canada and other organizations. Many health experts are urging the provincial and federal governments to provide health care workers with adequate equipment, namely N95s. We are asking for N95s and we are doing it through the CNESST, we are asking for the assistance of the CNESST.

We filed another complaint concerning our workers at the emergency room of La Cité de la Santé Hospital. The emergency room operates in modules, depending on the type of illness and treatment. In these modules, they did not make green, yellow, or red zones, based on levels of COVID-19 infection. The patients are all mixed up together. A nurse goes from a red patient to red, another goes from yellow to yellow, another from green to green. The orderlies, on the other hand, are going indiscriminately from red to green to yellow, allegedly because they don't spend enough time with the patients to get infected.

We complained to management, who told us that they were following the standards for emergencies. We complained to CNESST and found the INSPQ documents that deal with how to organize an emergency during the COVID pandemic. According to INSPQ, in emergencies there must be defined red, yellow and green zones and there must be no mobility of personnel. In addition, in the guide for emergencies, patients must be two meters apart and there must be a separation between them.[1]

We do not yet have adequate working conditions to stop the spread of COVID-19 and protect workers and patients. There is still staff mobility, although it is not the same everywhere.

The government and employers are looking for non-traditional sites to house patients with COVID-19. But we are the same people, the same staff. Yes, there have been additions of orderlies but the rate of worker contamination continues non-stop. The main types of jobs where people are off work because of COVID-19 are the orderlies, the administrative clerks, who are the point of

entry to the clinics, local community service centres (CLSCs), etc., and housekeeping. We have noticed in Laval that often, if we have an infected patient, we have an infected employee. In some cases we have one for one, but many times there is one patient and two infected orderlies.

WF: Do you want to add something in conclusion?

MA: One of the key issues that needs to be addressed is the N95 mask. Until this is resolved, our situation is going to be very problematic, that's for sure. We are more than tired of always having to demand the N95. We want the INSPQ recommendations on the airborne character of COVID transmission to become compulsory for employers.

Certainly, containment is something difficult, but people have to imagine that we've been in combat since March and we still haven't seen the end of it. We're telling everyone, "Help us help you."

As far as we are concerned, our slogan is "We are not giving up on anything." The situation has forced us to become experts ourselves on all sorts of levels, in health and safety, masks and protective equipment, the mode of transmission of the disease, public health, etc. We have to be self-taught because it's not in the manuals that we find all this. For example, we learned with the pandemic that the precautionary principle contained in the *Occupational Health and Safety Act* no longer exists in reality, at least not in our CISSS.

This is why our slogan is "we're not giving up on anything."

Note

1. Following the interview the union reported a success in its complaint about the emergency room at the Cité de la Santé.

The union's Facebook page states:

"Subject: mobility of PABs [orderlies] in the different zones: from red to yellow to green etc.,

"Today was the meeting with the employer, a representative of CNESST and two emergency directors from the Ministry of Health and Social Services.

"We said NO to moving between zones and the decision was taken immediately by CNESST.

"The employer must, within a period not exceeding 10 days, put in place extraordinary measures to prevent any movement between the coloured zones. These measures include the presence of PCI [Infection Prevention and Control] coaches 24 hours a day, seven days a week, pending an adequate organization of work that does not require any mobility.

"Congratulations to the Health and Safety team!!

"Your union executive."

(Translated from original French by Workers' Forum.)



Demands of Ontario Frontline Workers

- Jason Fraser -

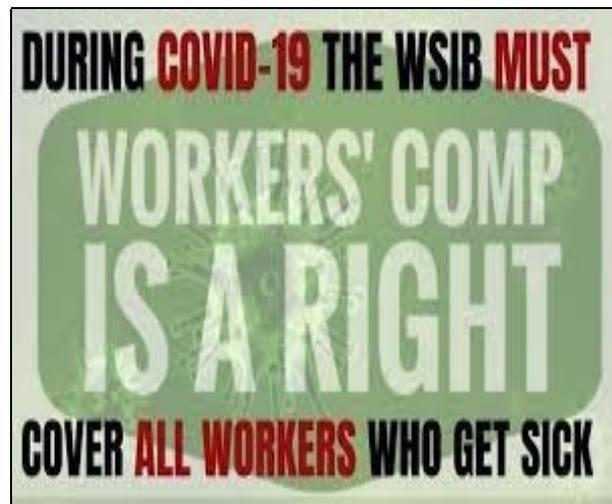
Jason Fraser is the Chair of the Canadian Union of Public Employees Ontario Ambulance Committee

Workers' Forum: A recent CUPE press release refers to paramedics' Workplace Safety and Insurance Board (WSIB) claims being denied when they have contracted COVID-19 in the course of their duties. Can you tell us more?

Jason Fraser: The situation was in Waterloo. We had paramedics who contracted COVID-19 in the course of their work. They had contact with a COVID-19 positive patient and they themselves became infected. When they put in their WSIB claim, their employer disputed the claim based on the fact that they were wearing full personal protective equipment (PPE) while they were working so they could not have contracted COVID-19 from the patient because, according to the employer, they were well protected.

The union's position is that while PPE is a great tool that helps to limit our exposure, it is definitely not a foolproof piece of equipment. PPE could fail, which could result in our becoming infected with COVID-19.

We are calling on the Ontario government to do a couple of things, not just for paramedics but for all essential workers. We believe that there should be presumptive legislation passed by the government that provides that if you are an essential worker and you get infected with COVID-19, it is presumed that you have contracted that virus through the work you do. Workers' compensation would automatically apply. We are also calling on the Ford government, and this is a broader CUPE call, to institute paid sick days for all workers. People should not have to make a choice between going to work when they are sick and doing the right thing by staying home and getting better.



This is one event that occurred. There are other instances throughout the province where paramedics and dispatchers have been required to self-isolate for a number of different reasons. It's a mixed bag as to how employers respond to situations. Some employers are providing payment and supporting their employees if they have to self-isolate under the direction of Public Health and others are not supporting their employees. They require the workers, if they are full-time and have access to sick time or vacation time to use that leave to be paid. Those who are part-time and don't have access to those leaves have to stay home without pay. This is happening right across the province. One of the Waterloo paramedics was a part-time paramedic with no access to paid sick day from their employer.

Paramedic services were allocated \$77 million back in the spring of 2020 to offset costs associated with COVID-19. We believe that some of those monies could be allocated towards covering pay for paramedics and dispatchers when they are required to self-isolate, to support them during these difficult times.

WF: The CUPE press release also opposes the Ontario government for the wide use of restrictions and punishment of individuals rather than holding employers accountable when workers contract COVID-19.

JF: Yes, the Ford government is blaming the citizens of Ontario, saying they are not following appropriate public health measures, including isolation and physical distancing, but it is not holding the employers accountable. If they held the employers accountable and ensured that they supported the workers, which would go a long way in protecting workers and controlling the virus as well.

We call upon the Ford government to support the frontline workers that are out there every day and do not have the option of working from home, to support them, to make sure they have paid sick days and make sure workers who are continuing to work are able to support their families.

(To access articles individually click on the black headline.)

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