

COVID-19 FAQ

for AHS General Support Services and Nursing Care Members



The COVID-19 pandemic has caused a lot of uncertainty and anxiety for Albertans, especially those working on the front lines of health care.

AUPE members working in AHS General Support Services and Nursing Care are holding that line every day. And while we ensure all Albertans receive the highest quality health care during this time, we must also do everything we can to protect ourselves.

Below is a FAQ list for members based on the best information we have at this time. Here you will find answers to your questions about redeployment, personal protective equipment, vacation, and more.

Stay informed, stay protected, and support each other. If you still have questions, contact the AUPE **Member Resource Centre**.

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Redeployment and Employment Standards

1. What is the process for redeployment?

Redeployment is the process of assigning staff to new task. Redeployment may happen if more employees are needed to help with the COVID-19 response. Ideally, redeployment would be voluntary and the most senior staff would be redeployed first. If there are not enough volunteers, the employer would use the volunteers first then redeploy by reverse order of seniority. However, under the emergency provisions, the Employer is able to redeploy and an Employee would be required to go.

2. Can I be redeployed outside of AHS?

No. The Employer has the ability to assign work, but only so long as the work is within the bargaining unit. There is no agreement in place to redeploy employees to a different employer

3. Does the Employer have to provide me with adequate orientation to the area I am being redeployed to?

Yes, employees need to be properly orientated and/or familiarized with the area and the work that will be required by them. Employees need to assess if they are safe to practice. If an employee assesses they are not safe to perform their duties, management needs to be made aware right away and to develop a plan to either provide more training/buddying or redeploy elsewhere.

4. During redeployment, are members moved to different units/sites temporarily and will they go back to their home unit when the pandemic is over?

While the "Emergency" provisions are engaged they are moved temporarily. When it is over Employees go back, unless exceptional circumstances exist to compel us to agree otherwise. The process to go back will likely take some time and we hope with a well thought out plan. Locals that may have people moved out should talk to the Employer about ensuring they talk to us about the moves out and know to talk to us about bringing them back.

5. Can casual staff refuse redeployment?

Yes, casuals still have the right to decline a shift.

6. Do the government's new changes to employment standards affect how my schedule can be changed?

No, your schedule is not affected by the changes to the Employment Standards Code. They can only be changed by the provisions of the collective agreement.

However, emergency provisions in your collective agreement allow for the employer to change your shift "in the event of an emergency or where unusual circumstances arise."

7. Can there be a mass layoff again due to the new employment standards without having consultation with the union?

No. There are negotiated provisions within the collective agreement that prohibits the employer from mass lay offs without consulting with the Union.

8. Will I take a pay decrease if I moved to a different classification?

No, not unless you applied for a different classification. If you are redeployed your salary will remain the same.

9. Does the employer have to disclose any COVID before I report to the new unit?

Yes, you should be advised if there is COVID on the unit you are being moved to.

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

Alberta Health Services (AHS)

<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>

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

1. What are the PPE requirements when caring for suspected, presumed, or confirmed COVID-19 cases?

Alberta Health Services, AUPE, Covenant Health, Health Sciences Association of Alberta, and United Nurses of Alberta (UNA) agreed to follow this [joint statement](#) outlining PPE standards for front-line health care workers in Alberta dealing with suspected, presumed, or confirmed COVID-19 patients.

2. Does the joint statement on PPE mean that every frontline health care employee gets or should use an N95 mask with every suspected, probable, or confirmed COVID-19 positive patient?

This agreement allows frontline health care employees to conduct a point of care risk assessment (PCRA) using their professional judgement to determine the level of PPE they need to care for the patient or perform their duties.

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We have a responsibility to ensure that we are using PPE appropriately (not excessively) to ensure that those caring for suspected, presumed or confirmed COVID-19 patients shall have access to the level of PPE they require.

3. What is a Point of Care Risk Assessment (PCRA)?

A Point of Care Risk Assessment (PCRA) is your first step in routine practices and is to be used with all patients for all care and all interactions. It involves assessing the patient, the activity, and the environment prior to each patient interaction. This assessment will help you decide what, if any, PPE you need to wear to protect and to prevent the spread of germs.

See the attached AHS PCRA poster:

<https://www.albertahealthservices.ca/ipc/hi-ipc-routine-practices-algorithm-cc.pdf>

Examples:

Patient: You assess that the COVID-19 positive patient is coughing and sneezing excessively with copious amounts of respiratory secretions. You have to provide direct care and you consider replacing your surgical mask with a N95 respirator.

Activity: You assess that AGMPs will be performed, frequent, or are probable (e.g. the patient's condition is unstable or deteriorating) for the COVID positive patient you are caring for and you don a N95 respirator.

Environment: You are asked to provide care to a COVID positive patient or group of patients in a non-traditional care area and you consider replacing your surgical/procedure mask with a N95 respirator.

4. What are the PPE recommendations for contact and droplet precautions?

- Contact and Droplet Personal Protective Equipment (PPE) Module for COVID-19:
https://ahamms01.https.internapcdn.net/ahamms01/Content/AHS_Website/modules/ipc/ipc-ppe-covid/story.html
- Contact & Droplet Precautions Info Sheet:
<https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-contact-and-droplet-precautions-info.pdf>
- PPE Checklist for Contact and Droplet Precautions:
<https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-chklst-contact-droplet-precautions.pdf>
- Poster - Donning:
<https://www.albertahealthservices.ca/assets/Infofor/hp/if-hp-ipc-donning-ppe-poster.pdf>
- Poster - Doffing:
<https://www.albertahealthservices.ca/assets/Infofor/hp/if-hp-ipc-doffing-ppe-poster.pdf>

5. What are the PPE recommendations for screening patients/staff/visitors entering facilities or clinics?

See the following AHS document titled Personal Protective Equipment (PPE) for Facility Screening Tasks:

<https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-ncov-ppe-facilty-scr-tasks-z0-res-topics-emerging-issues.pdf>

6. What are the PPE recommendations for Assessment Centres and ERs with Pre-Triage?

See the following AHS document titled AHS IPC Recommendations PPE Table for COVID-19 Assessment Centres & ERs with Pre-Triage:
<https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-assmt-cntrs-covid-ppe-matrix-res-topics-z0-emerging-issues.pdf>

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

- Have a discussion with your immediate supervisor/manager outlining your concerns.
- The agreed upon Joint Statement on PPE with AHS states the following: *If a health care worker determines on reasonable grounds that specific PPE is required, they shall have access to the appropriate PPE based on their PCRA, and this will not be unreasonably denied by their employer, or they shall be deployed to another area.*
- If the Manager denies your request for PPE and is not willing to deploy you to another area and you are still unable to access or are denied using PPE that you have requested, we 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>
- AUPE will support any member that chooses to exercise their right to refuse dangerous work.
- Please contact the AUPE Member Resource Centre (Phone: 1 800 232 7284 or Email: rc@aupe.org) for questions or support.

8. 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 the AUPE OH&S Representative Office (Phone: 1 800 232 7284).

Self-Isolation, Testing for COVID-19, and Return to Work

1. What do I do if I am having symptoms or think I have been exposed to COVID-19? How do I get tested for COVID-19?

If you are experiencing symptoms (fever, sore throat, cough, runny nose, shortness of breath), stay home and self-isolate. Do not go to an ER or a clinic.

If you need immediate medical attention, call 911 and inform them you may have COVID-19.

Take the online Health Care Worker Self-Assessment tool to determine next steps and find out if you require testing:
<https://myhealth.alberta.ca/Journey/COVID-19/Pages/HWAssessLanding.aspx>

This tool can be used by all front-line health care workers, regardless of their Employer.

The new online tool reflects the current testing requirements from Alberta Health and provides guidance to health care workers who may have been exposed to COVID-19 in the community, at work or from travel.

It outlines when to self-isolate, and when to call Health Link for a referral for COVID-19 testing, or Workplace Health and Safety (WHS) to address a potential workplace exposure.

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

Contact your Employer Workplace/Occupational Health and Safety Department immediately for further guidance.

- AHS Workplace Health and Safety: 1-855-450-3619

If you are symptomatic, you should also make a Workers Compensation Board claim.

- WCB Worker Fact Sheet:
https://www.wcb.ab.ca/assets/pdfs/workers/WFS_COVID-19.pdf

Note that casual employees are entitled to WCB since pay is based on normal hours of work, not Full Time Equivalent. However, it's worth noting that your collective agreement's Workers Compensation language (Article 30 for GSS, Article 26 for NC) does not apply to casual employees, so you would be paid by WCB directly and not through the employer.

3. What do I do if I am waiting for a return call from Health Link 811 or WHS?

AHS has created the following webpage to provide guidance if you are waiting for a return call from Health Link 811 or WHS:

<https://www.albertahealthservices.ca/topics/page17031.aspx>

4. Does WHS or Public Health have to clear me to return to work? How do I know when to return to work?

Yes, if you tested positive for COVID-19, you will need to self-isolate until you are cleared by either Public Health or WHS to return to work.

Otherwise, you do not necessarily need clearance from WHS or Public Health to return to work. AHS has created the following Return to Work Guide, which can help you and your manager confirm when it is appropriate to return to work if you've been self-isolating, had symptoms, or been tested:

<https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-return-to-work-guide-ahs-healthcare-worker.pdf>

5. Do I qualify for the AHS Expedited Return to Work?

Expedited returns to work will only be considered in exceptional circumstances (i.e. to address critical staffing needs), for asymptomatic Employees who are self-isolating, and must be discussed with your leader and approved by Zone Emergency Operations Centres (ZEOC).

The request is initiated by a manager, and not by staff themselves, and requires a completed Return to Work Approval form, which must be approved by the Zone Emergency Operations Centre, or ZEOC.

If your Manager has obtained approval for you through the expedited return to work process, we would advise that you request a copy of the approved RTW form.

6. What do I do if my Manager is asking me to come back to work, but I have not finished my self-isolation period or I still have symptoms?

If you are symptomatic, you cannot return to work under any circumstances.

If you are positive for COVID-19, you will need to self-isolate until you are cleared by either Public Health or WHS to return to work. Your Manager cannot clear you to return to work.

If you are self-isolating because of travel or because you were a contact to a confirmed COVID-19 case, you can only return to work before your self-isolation period is over if your Manager has obtained approval through the Expedited Return to Work process (see question 14).

There may be circumstances outside of these where you can return to work without clearance from WHS or Public Health and in discussion with your Manager. See the AHS Return to Work guide for details: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-19-return-to-work-guide-ahs-healthcare-worker.pdf>

If your Manager is asking you to come back to work that contradicts any of these guidelines, please email AUPE's OH&S Representative, Trevor Hansen (t.hansen@aupe.org) with your name, manager's name making the request, location, and unit and Trevor will forward to the Zone WHS Director for follow up.

Time Coding and Sick Leave

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

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, you 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.

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

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

You may be eligible for the provincial government's expanded child care for essential workers.

Visit <https://www.alberta.ca/essential-services.aspx> for more information, including which positions the government considers essential and a downloadable list of child care centres that are providing this service.

Please contact your Local or the AUPE Member Resource Centre (Phone: 1 800 232 7284; Email: rc@aupe.org) for questions or support.

3. 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 and Covenant Health have 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.

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This does not apply to casual Employees.

Please contact your Local or the AUPE Member Resource Centre (Phone: 1 800 232 7284; Email: rc@aupe.org) for questions or support.

4. How should I be coded if I am under mandatory self-isolation and my symptoms resolve during this time?

If you are symptomatic you will be coded as sick time. If your symptoms resolve before your mandatory isolation period is over, your coding will be changed to AFD (paid LOA), for the period that you would have otherwise returned to work if not for being in isolation. This will also apply to casual employees who were symptomatic, and symptoms resolved, who had pre-scheduled shifts during the isolation period.

5. What do I do if I don't feel my time is being coded appropriately related to me being off of work because of COVID-19?

Please contact your Local or the AUPE Member Resource Centre (Phone: 1 800 232 7284; Email: rc@aupe.org) for questions or support.

Vacations and Mandating to Work

1. 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 the AUPE Member Resource Centre (Phone: 1 800 232 7284; Email: rc@aupe.org) for questions or support.

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.

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

Yes. Your collective agreement states the following (Article 28.03(g) for GSS, Article 23.04(d) for NC): Once vacations are authorized by the Employer, they shall not be changed except in cases of emergency or by mutual agreement between the Employer and the Employee.

For AHS GSS, Article 28.04 states: Except when vacations are changed by mutual agreement when an Employee is required by the Employer to work during their vacation the Employee shall receive pay at two times (2X) Basic Rate of Pay. Hours worked while on vacation shall not be deducted from the Employee's vacation credits.

For AHS NC, Article 23.05 states: An Employee required by the Employer to return to work during their vacation will receive two times (2X) their Basic Rate of Pay for hours worked. In addition to receiving the premium pay, the time so worked will be rescheduled as vacation leave with pay.

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

The employer also has the right to request regular staff to work greater than their FTE. For full time employees, this would mean "two times (2X) their basic rate of pay for all overtime hours."

For AHS GSS part time employees, the collective agreement says:

Article 22.12

Regular Part-time Employees shall be paid overtime rates as provided in Clause 22.10 (two times [2X] their basic rate of pay) for:

(a) Any time worked in excess of seven and three-quarter (7 3/4) hours during any one (1) day; or

(b) Any time worked in excess of eight (8) hours per day for Power Engineers, Plant Operators or Maintenance Worker IV's who are scheduled to work a regular eight (8) hour shift in a Power Plant Operation; or

(c) Any time worked in excess of the daily hours for Employees who are scheduled to work a modified hours work day; or

(d) Any time worked in excess of the total hours of work assigned to a full-time position in each consecutive and non-inclusive fourteen (14) calendar day period [i.e. seventy-seven point five (77.5) hours or eighty (80) hours] averaged over one (1) complete cycle of the shift schedule.

For AHS NC part time employees, the collective agreement says:

Article 29C.02

(a) The overtime rate of two times (2X) shall be paid for work authorized by the Employer and performed by the Employee on days in excess of the work ratio referred to in Articles 29A.02 or 29B.02, as applicable. The Employer shall provide on each ward or unit overtime forms which are to be signed by the designated authorized person and a copy shall be given to the Employee at the time the overtime is worked.

(b)(i) Overtime may be accumulated and taken in time off at a mutually acceptable time at the applicable premium rate. Such accumulation shall not exceed thirty-eight and three-quarter (38 ¾) hours. Time off not taken by the last pay period end date in March in any given year shall be paid out unless otherwise mutually agreed. Such request to carry over lieu time shall be submitted by the Employee in writing prior to February 1st and shall not be unreasonably denied.

(ii) Where time off in lieu of overtime is granted in accordance with Article 13.05(a), the overtime worked shall be paid at the time it is worked at one times (1X) their Basic Rate of Pay and the equivalent

(c) The Employer shall designate an individual at the site who may authorize overtime. The Employer shall not unreasonably deny authorization after the fact for overtime worked where such overtime has arisen as a result of unforeseeable circumstances in which it is impossible to obtain prior authorization.

(d) An Employee who attends an overnight client recreational/therapeutic activity authorized by the Employer shall be paid, in addition to their basic rate for their normal shift, an allowance of forty dollars (\$40.00) for each day in attendance at such activity. Participation by an Employee in such activity shall be voluntary.

(e) In the event an Employee works a double shift, the Employee shall be provided with access to a meal and snacks during the second shift at no cost.

(f) An Employee who works in excess of four (4) hours of overtime immediately following a seven and three-quarter (7 ¾) hour shift shall be provided with access to a meal and snacks at no cost.

(g) Except in cases of emergency, no Employee shall be requested or permitted to work more than sixteen (16) hours (inclusive of regular hours and overtime hours) in a twenty-four (24) hour period beginning at the first (1st) hour the Employee reports for work.

(h)(i) Where an Employee works overtime immediately following their shift and there is not a minimum of seven and one-half (7 ½) consecutive hours off duty in the twelve (12) hours preceding the

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Employee's next shift, at the Employee's request, the Employee shall be entitled to seven and one-half (7 ½) consecutive hours of rest before commencing their next shift without loss of earnings.

- (ii) The Employee in the above situation will advise the Employee's supervisor, as far in advance as possible and in any event, not less than two (2) hours in advance of the next shift, that the Employee will not be reporting for duty at the scheduled time.

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 another 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 cancelled or individuals are mandated to work.

3. 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.

Accommodations

1. 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.

AHS has issued a statement regarding workers who are immunocompromised or have underlying medical conditions.

AHS has also issued a statement regarding workers who are pregnant.

These documents, as well as the AHS COVID-19 FAQ, can be found here: <https://www.albertahealthservices.ca/topics/Page16947.aspx>

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.

If you have concerns regarding 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>
- AUPE will support any member that chooses to exercise their right to refuse dangerous work.
- Please contact your Local or the AUPE Member Resource Centre (Phone: 1 800 232 7284; Email: rc@aupe.org) for questions or support.

Workload/Practices Issues

1. What do I do if I feel my 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). You should also report on the AUPE Occupational Health and Safety OHS Form.

<https://www.aupe.org/member-resources/forms/ohs-reporting-form>

Please contact your Local or the AUPE Member Resource Centre (Phone: 1 800 232 7284; Email: rc@aupe.org) for questions or support.

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>

AUPE will support any member that chooses to exercise their right to refuse dangerous work.

2. What do I do if I feel patient safety is at risk?

Speak up and discuss the concern with your immediate supervisor/manager in a timely manner.

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

Here is AHS' response to this question:

- 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