

COVID-19 Questions and Answers

Current as of April 16, 2020

The following questions and answers are based upon current information and conditions, and are subject to change. The document will be updated as needed and posted at manitobanurses.ca/covid-19-questions-answers.

Your Rights at Work: Emergencies, Redeployments & More

Q: What is Article 10 – Emergency, Disaster, Fire Plans?

A: Article 10 is an employer tool for emergency management contained in [MNU Collective Agreements](#).

If Article 10 is invoked by an employer, nurses employed by that employer may be required to perform duties as assigned despite any contrary provision in the Collective Agreement. This means that if Article 10 is invoked by your employer, among other things, you may be seconded, your vacation may be cancelled, your shifts changed, or your hours of work extended.

Article 10 can only be invoked for emergency situations, wherein the safety or well-being of patients at the site/facility will be directly affected should the step not be taken. If your employer invokes Article 10, they must provide written confirmation to the President of your Local or Worksite. If the invocation of Article 10 relates to a major health alert, such as a possible pandemic occurrence, they must also notify the provincial office of the Manitoba Nurses Union.

Compensation for working conditions brought on by the invocation of Article 10 will be addressed in discussions between the employer and MNU at a later time.

Q: Does the province's declaration of a state of emergency automatically invoke Article 10 in MNU collective agreements?

A: No. The provincial declaration of a State of Emergency on March 20, 2020 does not automatically invoke Article 10. Article 10 must be invoked by individual employers and the union must be provided notification in writing. As of April 5, 2020, MNU has not been notified of an Article 10 invocation by any employer in the province.

The terms of the Collective Agreement continue to apply, as do the terms of the recently negotiated Memorandum of Agreement regarding redeployment of healthcare staff during COVID-19.

Q: MNU and the other unions agreed to a Memorandum of Agreement (MOA) for redeployment of staff within or between Employer Organizations. Why did they do that?

A: In the event an emergency is declared (meaning Article 10 of an MNU collective agreement is invoked by the employer), nurses and other health care workers would be required to perform duties notwithstanding any contrary provisions in the collective agreement. [The MOA](#) continues to apply even if Article 10 is invoked, and provides clear limits to what the Employer is able to require of nurses, and defines the processes.

As per item #2 in the MOA, transferred nurses remain covered by their current collective agreement. In addition, the MOA provides for compensation for work disruption and reimbursement for other expenses incurred as a result of redeployment for COVID-19 purposes.

The MOA states that before any nurses can be compelled to transfer, the employer must first seek and provide opportunity for qualified and available nurses to volunteer.

Q: I am an MNU nurse, but I work for a private agency/employer that is not included in the Regional bargaining certificate employer organization list. Does the MOA, in regards to deployment and transfer, apply to me?

A: No it does not. Your collective agreement terms and condition continue to apply, regardless of whether or not an emergency is declared (via Article 10) for the public health agencies as listed on the bargaining certificate. However, if you do hold a concurrent nursing position with a public health agency, the MOA could apply to you for the public health employment position.

Q: Can casual nurses be forced to temporarily transfer for COVID-19 related duties?

A: If they are on duty at the time, they can be transferred, or mandated for the duration of that period only. The MNU takes the position that casual nurses cannot be compelled to accept additional shifts, unless they have voluntarily signed up for those shifts. A casual nurse may volunteer for transfer as per item #1 in the MOA, in which case they would be governed by the terms of the MOA. If a casual nurse is

being compelled to work shifts or at non-employer locations, please contact your Union representative or Labour Relations Officer for assistance.

Health & Safety

COVID-19 SYMPTOMS OR EXPOSURE & OTHER HAZARDS

Q: I am not feeling well and have symptoms. What should I do?

A: Do not return to work. Contact your employer and inform them that you are symptomatic and await their instructions as to testing, screening, further notifications etc. Use your sick time, and if you do not have sick time you may ask the employer to use other banked time or seek to access EI, as the waiting period has been waived. [Contact EI directly to make a claim.](#)

If you're ineligible for EI, you may be able to apply for the Canada Emergency Response Benefit (CERB). This is temporary income support applicable to workers that have lost all their income for reasons related to COVID-19. [Learn more here.](#)

UPDATE: On April 14, 2020, the Manitoba government committed to providing 14-days of paid leave to *asymptomatic* health care workers required to self-isolate after being exposed to COVID-19 at work. MNU is working to confirm further details about this development. Unfortunately, this paid leave does not currently apply to symptomatic health care workers. MNU is calling for presumptive WCB coverage for all health care workers who are symptomatic. [Read MNU's full statement.](#)

If going off work and using sick leave or banked time, you will continue to have benefit payments deducted. If you do not have sufficient paid sick time and need to take an unpaid leave using EI benefits, you should pre-pay your extended health benefits to ensure you are covered.

If you are accepted onto WCB and you have sufficient time in your sick banks, remember to access your 10% top-up as per Article 2303 (b) to help defray the cost of your extended health benefits.

If it is difficult for you to make your HEB payments, please contact them at info@hebmanitoba.ca.

Q: I believe I have been exposed but I'm not symptomatic. What should I do?

A: If exposed while not at work, notify the employer immediately, and obtain further instructions. If exposed at work complete a WCB claim form, noting details. MNU has developed guidance for WCB claims related to COVID-19, [available here](#).

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Talk to your manager about accessing paid leave, and contact your LRO or Union Representative if you have any issues.

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Q: NEW: What if I am pregnant and concerned about potential risks to myself or my baby?

A: At present, there isn't enough evidence to predict whether COVID-19 will have an impact on pregnant health care workers. The WHO, PHAC, the U.S. CDC, and European CDC do not provide guidance on this question. Your ability to wear properly fitted personal protective equipment (PPE), becomes impacted with your changes in weight during pregnancy. In particular, the previous fit testing of an N-95 mask becomes unreliable.

Your safety, while providing care is our utmost concern. Therefore, we recommend you notify the employer and request an accommodation. During the COVID-19 pandemic the requirement for medical documentation for pregnant staff may be waived. Talk to your manager. Members being asked to provide documentation should contact their Labour Relations Office or Union Representative.

Have a discussion with your manager about your concerns to your health and your individual situation. An accommodation may include assignment to another area within the region/facility. Reassignment to an area that is less risky, wherever possible, is a reasonable alternative. If reassigned you are to be provided with the appropriate orientation to provide care safely.

For more information, see the CFNU Position Statement: [“Pregnant Health Care Workers Should Not Be Forced to Work in COVID-19 ‘Hot Zones.’”](#)

Q: I’m concerned about a health and safety hazard in my workplace. What should I do?

A: Nurses have a right to bring forward health and safety concerns in their workplace under the provincial *Workplace Safety and Health Act*.

Once you identify a health and safety hazard, there are three steps in investigating your concern:

Step 1: Involve your manager/supervisor. If they are unable to resolve the concern, proceed to step 2.

Step 2: Approach your Workplace Safety and Health Committee for discussion and recommendation. If they are unable to resolve the concern, proceed to step 3.

Step 3: Involve the Manitoba Workplace Safety and Health Division. A provincial Workplace Safety and Health Officer will conduct an inspection.

Remember, MNU is always here to help. If you have any problems during any of the steps above, contact your Union Representative or Labour Relations Officer for assistance.

For more information, check out our chart: <https://manitobanurses.ca/system/files/hazardchartpdf.pdf>.

Q: Employers are allowing some people that have recently travelled or been exposed to a confirmed case of COVID-19 to return to work before their 14 days are up. What is MNU’s position?

A: Our number one concern is the safety of nurses, their patients, and their colleagues. We believe slowing the transmission of the virus, and flattening the curve, is of vital importance. Given the possibility that even people who are asymptomatic could be shedding the virus, we believe every precaution must be taken.

Manitoba is already experiencing a nursing shortage, so putting the health and safety of care providers at risk at a time when COVID-19 cases are expected to escalate only risks placing more strain on the system’s capacity to respond to this public health crisis.

That's why we've advocated to have the 14-day isolation policy apply to all nurses who have been exposed or travelled, and we have been advocating on that issue.

On April 4, [Shared Health issued a memo](#) offering some clarification of the conditions required for employees to return to work. According to the memo:

"At facilities where universal PPE has already been implemented as approved by Infection Prevention & Control (IP&C) and Occupational and Environmental Safety and Health (OESH), those staff who have previously been sent home to self-isolate for 14 days may be recalled if the following conditions are satisfied:

- *Facility must have universal PPE in place*
- *Facility must have staff screening in place before the start of every shift*
- *OESH must conduct a risk assessment on asymptomatic staff who worked in a unit where a colleague or patient has tested positive for COVID-19*
- *Staff must be deemed to have not had close contact (within 6 feet of patient's head for over 10 minutes or within 6 feet of COVID-19 positive colleague for more than 10 minutes) while not wearing PPE*

"Situations that fulfill all requirements above may return a staff member to the workplace provided they continue to follow universal PPE protocols, practice social distancing, adhere to IP&C protocols and self-monitor for symptoms.

"Staff who develop ANY symptoms must leave work immediately, notify their manager, contact OESH and self-isolate."

For more information, consult [Shared Health's resources for health care providers](#).

Though this clarification on the process is welcome, MNU still believes this direction falls short in addressing our concerns. We continue to press government and employers on this issue.

UPDATE: On April 14, 2020, the Manitoba government committed to providing 14-days of paid leave to *asymptomatic* health care workers required to self-isolate after being exposed to COVID-19 at work. MNU is working to confirm further details about this development. [Read MNU's full statement](#).

Talk to your manager about accessing paid leave, and contact your LRO or Union Representative if you have any issues.

Q: I've been required to self-isolate due to exposure, or stay home because I'm unable to find child care. I don't think it's fair that I'm being asked to draw down my sick leave or other banked time, or go on EI. What's MNU doing about it?

A: [MNU has joined other unions and the Manitoba Federation of Labour](#) in calling for 14-days of paid COVID-19 leave for workers affected by the pandemic. No nurse or any other worker should be forced to choose between staying home or losing their income during this challenging time. We have repeatedly called on government to implement this measure to protect nurses and all workers, but unfortunately to date they have failed to take action. MNU will continue to advocate forcefully on this issue.

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PERSONAL PROTECTIVE EQUIPMENT & UNSAFE WORK

Q: Provincial guidelines require a surgical mask to be worn when in contact with presumed or confirmed COVID-19 patients. MNU has called for nurses to be provided with N95 masks in these instances. Why is there a difference in positions?

A: *"When it comes to worker safety in hospitals, we should not be driven by the scientific dogma of yesterday or even the scientific dogma of today. We should be driven by the precautionary principle that reasonable steps to reduce risk should not await scientific certainty."*

-Justice Campbell, Chair of the SARS Commission

The precautionary principle, outlined above, was born of the tragic aftermath of the 2003 SARS epidemic, where many health care workers became ill, and 2 nurses and a doctor lost their lives.

There is still much we don't know about COVID-19, and where scientific certainty doesn't exist, we must take every reasonable precaution to protect frontline health care workers.

MNU has adopted the [position of the Canadian Federation of Nurses Unions \(CFNU\)](#) which states that in the event of an outbreak of any new respiratory virus, the best respiratory protection for health care workers at risk is a fit-tested N95 or greater respirator. Further:

- At a minimum, all employees must also be equipped with PPE for contact and droplet precautions for suspected, presumed or confirmed cases of COVID-19, including gloves, eye protection (face shield and goggles), isolation gowns and surgical/procedural masks), for which they must be trained and drilled in safe use.
- Airborne precautions and the use of respirators N95 or higher must be mandated at all times in clinical areas considered aerosol-generating medical procedure ‘hot spots’, such as ICUs, ERs, ORs, post-anaesthetic care units and trauma centres that are managing COVID-19 patients.
- Point-of-Care Risk Assessments (PCRA) should be employed prior to any interaction with suspected, presumed or confirmed case of COVID-19. A PCRA is an activity that is based on the individual nurses’ professional judgment (i.e., knowledge, skills, reasoning and education). Underlying the PCRA is the principle that individual health care workers are best positioned to determine the appropriate personal protective equipment (PPE) required based on the situation and their interactions with an individual patient. [Learn more](#).

MNU has advocated forcefully to try to ensure that our members have the best available protection during the pandemic and we have called for the release of detailed information on Manitoba’s supply of PPE to ensure all stakeholders have the information they need.

We have raised our concerns with Shared Health, Manitoba’s Chief Public Health Officer, the Minister of Health, employers and other government officials multiple times over several weeks. We have advocated publicly in the media at every available opportunity. We have also joined CFNU and other nursing unions across the country in calling for greater protections for health care workers.

Though there has been some progress in limited areas, to date government has not addressed many of our concerns. But MNU will continue to press all levels of government on this issue. We will support letter-writing campaigns, file grievances, and continue to advocate on your behalf. The health and safety of nurses and patients is our number one priority, always.

Q: What if I am immunocompromised or cannot wear the recommended personal protective equipment (PPE)?

A: Notify the employer immediately and request an accommodation. Shared Health has advised MNU that the requirement for medical documentation for immunocompromised staff seeking accommodations will be waived. Members still being asked to provide documentation should contact their Labour Relations Office or Union Representative.

Such accommodation may include assignment to another area within the Region/Facility. Your safety, while providing care is our utmost concern. Reassignment to an area that is less risky, wherever possible, is a reasonable alternative. If reassigned you are to be provided with the appropriate orientation to provide care safely. If you cannot be accommodated you may be sent home and access sick time. If you do not have sick time you may ask the employer to use other banked time or seek to access EI, as the waiting period has been waived. [Contact EI directly to make a claim.](#)

If you're ineligible for EI, you may be able to apply for the Canada Emergency Response Benefit (CERB). This is temporary income support applicable to workers that have lost all their income for reasons related to Covid-19. [Learn more here.](#)

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If it is difficult for you to make your HEB payments, please contact them at info@hebmanitoba.ca.

Q: Do I have the right to refuse work I believe is unsafe?

A: Yes. If a nurse determines, based on their own individual judgement, that their health and safety is at significant risk, they may refuse what they consider to be unsafe work under Section 43 of the Manitoba *Workplace Safety and Health Act*.

While the right to refuse is being investigated, the employer or supervisor may temporarily assign a new task to a worker at no loss in pay.

It is important to note that the individual nurse owns their refusal. Though MNU will certainly offer any support we can, we cannot make representations on your behalf during this process. The decision to refuse must be made and carried out by the individual.

Refer to the following link for the steps required to refuse unsafe work:

<https://www.safemanitoba.com/topics/Pages/Right-to-Refuse.aspx>.

Contact your Union representative or Labour Relations Officer for further assistance.

Q: I believe I have the ability to work from home, but my employer is requiring me to attend work for the entire duration of my shift. Is any action being taken?

A: Yes. MNU has inquired on this issue, and Shared Health has advised that they will be looking at ways to make IT improvements to allow staff who are able to work from home to do so. However, we're advised the changes will take time. Members are encouraged to speak to their manager and advise your LRO or Union Representative of any updates.

Q: Nurses and other health care professionals working during the COVID-19 pandemic are being put at greater risk. Will unions negotiate hazard pay for those affected?

A: UPDATE: *As the COVID-19 situation evolves and concerns around health and safety provisions continue to escalate, the term "hazard pay" is becoming increasingly problematic. The term suggests nurses would be willing to accept greater risk to their own health and safety for further compensation. MNU's position is that safety is not negotiable, at any price. Instead we are calling for a COVID-19 premium for all nurses to recognize the additional, varying challenges nurses are facing during this unprecedented time. And further, we continue to lobby for a raise for all nurses, given the government's failure to negotiate a new contract for over 3 years now.*

Improving working conditions and compensation for nurses is something MNU continually pursues as an organization. We have brought a request for Hazard Pay forward repeatedly in recent weeks, but to date our requests have gone unanswered.

Unfortunately, the government's evasion comes as no surprise. For 3 years Manitoba's nurses have faced worsening working conditions due to cuts and consolidation while the Pallister government has refused to bargain a new collective agreement. They have repeatedly delayed negotiations,

implemented a de-facto wage freeze for all health care workers, and forced all health care unions through unnecessary union representation votes that have created significant complications.

Given these past challenges and the current situation, MNU believes that ALL NURSES in Manitoba deserve a raise.

Vacations & Leaves of Absence

Q: Will there be any effect on my vacation?

A: Until your employer declares an emergency by invoking Article 10, vacation can only be amended by mutual agreement of the employee and employer (see point #5 of the MOA). Should an emergency be declared and Article 10 is invoked, then the Employer has the ability to cancel vacation and other leaves, again refer to point #5 in the MOA.

Q: Why not give nurses the option to carry unused vacation into the next year?

A: During MOA negotiations, the employer did approach the signatory unions about automatically carrying over unused vacation into the next fiscal year, but no satisfactory terms could be reached.

One cause for disagreement centered around unused or carried over vacation being deployed for use in the event members could not find child/family care because the government-imposed school and daycare closures. The unions' position was that rather than create a ready bank of the members' own vacation time to use for child care, this government should provide child care for essential health care workers, which they have since announced.

The other was a concern on the part of the unions was that an automatic carry-over would simply result in delayed payout of members' banks by a full calendar year if the employer were unable to provide the additional vacation time prior to the end of the next fiscal year, which is possible given the pandemic situation.

Unfortunately, employers were unwilling to contemplate an optional carry-over for members. As such, no agreement could be reached on the issue, and normal practices remain in place.

Q: Can the Employer cancel my approved maternity leave, parental leave or medical leave?

A: No, these are protected leaves under the Human Rights Code. If the Employer seeks to do so, please contact your Union representative or Labour Relations Officer immediately for assistance.

Q: Can I cancel my approved leaves (vacation etc.), if my travel plans have been cancelled?

A: See response to question 4. Generally, cancellation/modification of approved leaves requires agreement of the employer.

Child Care

Q: What happens now with my child care as a result of school closures and/or daycare closures?

A: UPDATE: On March 20, the Manitoba Government announced a plan to provide child care for essential workers. Nurses deemed essential in need of child-care options should fill out the [Essential Services Worker Child Care Request Form](#). Parent fees continue to apply. Requests should be submitted by Wednesday, April 8. On Tuesday, April 14, the province opens up remaining spaces to all parents working in critical services.

Please note that there is an onus on the employee to make reasonable attempts to obtain child care. If adequate child care arrangements cannot be made, your priority is your family. The employer can require you to supply proof that you have made good faith attempts, and that the need for your children's care cannot be met in any other way other than for you to be at home with them.

Q: Will I be paid while home with my children if I cannot find child care?

A: You should discuss with your employer to determine access to banked time such as vacation, overtime or stat time. Employment Insurance may be available, but you should make inquiries directly with Employment Insurance.

UPDATE: [MNU has joined other unions and the Manitoba Federation of Labour](#) in calling for 14-days of paid COVID-19 leave for workers affected by the pandemic. No nurse or any other worker should be forced to choose between staying home or losing their income.

Q: Can I take sick time to care for my child/dependent family member?

A: Not unless they are actually ill. As per many MNU collective agreements, if you have sick time in your banks you can use it to be paid for time to care for an ill dependent child, parent or spouse. If you do not have sufficient time in your banks you should ask the employer if you can access your other banks including overtime, vacation or stat time.

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