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## Message from CFNU President Linda Silas on the Mario Possamai report

A union's job is to protect its members. For health care unions, that means picking up the pieces after governments' failure. As the COVID-19 pandemic continues to scar the lungs of thousands of Canadians and health care workers, today is no exception. Since SARS, nurses and health care unions have been fighting to make worker safety a priority for policymakers and health officials by embedding the precautionary principle into all our advocacy, policies and practice.

In response to COVID-19, the Canadian Federation of Nurses Unions commissioned this independent report with the former senior advisor to the SARS Commission, Mario Possamai, hoping to set the record straight – a global pandemic need not be a Canadian tragedy. There is nothing inevitable about a coronavirus mutating a continent away and infecting well over a hundred thousand of our friends, family members and neighbours. There is nothing inevitable about our health care heroes, making up about one in five of all COVID-19 cases in Canada, nearly double the global average.

The only inevitability is that one day Canada will face another deadly global health crisis on its horizon. The decisions we make today, leading up to that day, and during those days, will determine whether it is a crisis at home or a crisis abroad. By investigating Canada's performance during COVID-19 with a focus on health worker safety, the independent report, A Time of Fear, aims to bolster the national discussion around what went wrong, what went right and, most importantly, where we go from here as we prepare for a potential second or even a third wave of COVID-19.

Sadly, this report details a litany of systemic failures by our public health and occupational health and safety systems, which have left thousands dead, including at least 16 health care workers.

There were failures to react swiftly when this virus was still just a news story around the world. Meaningful pandemic containment measures only began in early March – even after credible early warning systems raised the threat of COVID-19 on December 31, and emergency health monitoring by the federal government has been ongoing since January 15.

There were failures to stockpile enough personal protective equipment for a public health emergency. Up to two million N95 respirator masks were destroyed in May 2019, leaving only 100,000 in the national emergency stockpile at the start of the pandemic.

And there were failures to listen to health care workers, experts and scientists as they desperately pleaded that a surgical mask was insufficient when caring for patients with COVID-19 and that airborne precautions like N95 respirators were desperately needed.

In response to these spectacular failures, this report offers a roadmap to a more effective public health system and a safer health care sector for workers, residents and patients. At the core of this vision is a renewed commitment to institutional preparation and the precautionary principle. The precautionary principle, an approach which demands beginning with the highest level of precaution in the face of uncertain hazards, must be written into all levels of the health care system. Preparations, such as a renewed and integrated emergency medical equipment stockpile and strengthening the independence of chief medical officers of health, must begin immediately while public health issues remain on the agenda.

In the wake of the disaster of SARS, policymakers and public health officials responded with a frenzy of reviews and commissions, public health agencies were founded, and new public health legislation was written. Today, however, it feels like we are sleepwalking through the crisis.

Weekly case totals remain in the thousands, and yet more attention is being paid to cabinet reshuffles and election prospects than to solving our immediate public health situation. In our hasty return to normal, children are preparing to attend school in crowd-ed classrooms across the country – even as American universities have become COVID-19 hot spots and Israeli officials have admitted their early school re-opening was a major mistake.

This report should serve as a wake-up call. Over the previous months, ordinary Canadians have made enormous sacrifices to flatten the curve and to slow the transmission of the virus in order to buy policymakers time to come up with answers to this crisis.

Canadians are still waiting, and Canada's health care workers are tired of picking up the pieces.

Linda Silas President, Canadian Federation of Nurses Unions