# NUHW

# STAFFING, SAFETY AND RESPECT IN EVS

Workers report on conditions at Redwood Memorial & St. Joseph - Eureka

# APRIL 2021 — More than 52,000 healthcare workers in California contracted Covid-19 during the first eight months of the pandemic, according to state data.

While the work of nurses and doctors captured the public's attention, hospital Environmental Services staff were also thrust into the front lines of the pandemic, disinfecting COVID units and patient rooms while being denied the same level of PPE as higher-paid colleagues.

Even though Humboldt County has had relatively low rates of community spread of COVID-19, nearly one-third (31%) of the EVS staff at St. Joseph Eureka and Redwood Memorial Hospital have a family member who has contracted COVID-19. Six percent of surveyed workers report having been infected with COVID-19 themselves, compared with a 2.5% rate of confirmed cases in Humboldt County.<sup>1</sup> An exposure to COVID-19 at work not only threatens the safety of workers, but their families as well: half (50%) live with someone at high-risk for severe illness, should they contract the virus.

Before the pandemic, EVS workers already faced significant occupational risks, including exposure to hazardous chemicals, injuries from moving heavy equipment, and needle sticks. Covid-19 introduced a new threat of exposure and illness amidst PPE shortages and rationing, staffing shortages, and misguided federal policy. Already shortstaffed departments faced Covid-19 surges with skeletal infection control crews, as immunocompromised workers took leave to prevent severe illness, and others missed work to take care of family members, or to quarantine during their own Covid-19 infection.

#### ABOUT THIS REPORT

Shortly after California stopped tracking COVID-19 cases among healthcare workers, the National Union of Healthcare workers surveyed EVS workers it represents at six Providence hospitals in California.

The results show that many workers were put at unnecessary risk, ordered to disinfect hospitals during a pandemic without proper training, sufficient staff or support from their supervisors.

- Poor training: More than one-third (42 percent) of respondents said they had not received adequate training about how to properly clean COVID-19 rooms.
- Staffing crisis: About half said that their departments were short-staffed before the pandemic, and 58 percent say staffing has gotten worse in the last year.
- Hostile environment: Half (51 percent) of all EVS members reported experiencing or witnessing some form of intimidation or retaliation for raising concerns about safety.

At Redwood Memorial and St. Joseph Eureka, half (50%) EVS workers answered the survey. This report summarizes what they had to say.

# COVID-19 ASSIGNMENTS, SAFETY RISKS

EVS workers at St. Joseph report that the hospital has consistently withheld information about COVID-19 hazards, and treated workers' safety as an afterthought, making it even more difficult for people to protect themselves:

- For months after the pandemic began, the hospital failed to post proper signage on the rooms of suspected and positive COVID-19 patients, putting EVS workers at avoidable risk of exposure.
- While other hospital staff ceased regular in-person meetings to prevent the spread of COVID-19, EVS

managers continued to hold huddles in a poorly ventilated basement room throughout the pandemic.

• The hospital has repeatedly reorganized patient room assignments and ward designations--but has failed to adequately inform EVS workers of changing safety conditions, or respond to their questions. This creates a frightening and uncertain work environment, where workers cannot gauge when they are at risk of exposure to COVID-19, or what the appropriate cleaning protocols may be.  In one egregious instance, the County public health department told a worker to quarantine, but the hospital instructed them to remain at work while asymptomatic. This ultimately resulted in the exposure of additional workers, who were retaliated against for speaking out when the hospital failed to properly notify them. The hospital only began providing general exposure notifications after January 1st, when it became legally required by AB 685. The hospital also chose to disregard the California Department of Public Health's guidance that hospital workers be tested weekly, and has been less likely to offer testing to exposed EVS workers compared with other classifications.

 Although EVS workers have limited access to just one shared work computer, and some do not have email access outside work, the hospital relied on email to notify workers of possible exposures or vaccination opportunities. EVS workers learned about vaccine appointments after many other hospital staff, despite being eligible at the same time.

## INADEQUATE ACCESS TO COVID TESTING, PPE

EVS workers at St. Joseph and Redwood Memorial reported worse access to cleaning equipment and PPE, especially respirators, compared with EVS workers at the other five Providence hospitals.

- Nearly half (47%) report that they do not have the necessary equipment to clean COVID-19 rooms, compared with an average of 26% at all surveyed hospitals.
- EVS members in Humboldt report the most limited access to N-95s. Less than a third report having regular access to a new respirator when they need one, compared with an average of 59% at all surveyed hospitals. 38% of EVS workers report that they still do not have adequate access to PPE, in general, when they need it.
- Half (50%) feel that management still has not provided adequate training for cleaning of COVID-19 rooms.

## SHORT STAFFING, POOR INFECTION CONTROLS

50% report that their EVS departments were already short-staffed before the pandemic. Nearly three quarters (73%) say that staffing has gotten worse since the pandemic began--more than any of the other five hospitals surveyed, where the average was 58%.

However, the hospital's response has continued to miss the mark and fail workers. Relief, temporary and part-time workers have been assigned to work the equivalent of full-time hours, without being properly classified with the attendant benefits. Workers report that they are often reassigned to cover additional work areas, and are unable to finish their regular duties or clean thoroughly; this causes significant stress. Staffing is skeletal, leaving workers scrambling to adjust to changing schedules when someone calls out sick, and even being asked to do heavy lifting while on medically necessary light-duty assignment, to compensate for the hospital's poor staffing. Protecting patients and workers requires consistent and uniform infection control practices, and short-staffing is getting in the way. EVS workers report:

- More rooms or areas to clean than before the pandemic (65%), but the same or less time in which to do the work (85%).
- Difficulty completing work on-time on a weekly basis, due to short-staffing (89%), to the extent that infection control is compromised (85%).
- Unable to consistently take regular breaks (42%).
- 62% do not feel compensated fairly--a higher percentage than the average (50%) for all surveyed hospitals.

### INTIMIDATION, RETALIATION FROM MANAGEMENT

Many EVS workers surveyed at St. Joseph and Redwood Memorial said they have experienced or witnessed some form of intimidation or retaliation from management when they tried to bring up safety concerns with a manager.

In fact, more than one-third of respondents answered "yes" to one or more of the following statements:

I am afraid of retaliation from my supervisor and manager if I raise concerns of safety and respect on the job.

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I have felt intimidated by my manager or supervisor.

I have seen management intimidate my coworkers.

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NOTES 1. Humboldt County COVID-19 Dashboard. As of April 8, 2021.

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