

STAFFING, SAFETY AND RESPECT IN EVS

Workers report on conditions at Santa Rosa Memorial Hospital

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.

As is the case at most California hospitals, the cleaning staff at Providence’s Santa Rosa Memorial Hospital is predominantly Latinx, immigrant women. Their communities have faced disproportionately high rates of COVID-19. Latinx residents account for 65% of Sonoma County’s COVID-19 infections, despite being 27% of the population. Over a quarter (26%) of the EVS staff at Memorial have a family member who has contracted COVID-19, and 21% report having been infected with COVID-19 themselves, compared with a 6% rate of confirmed cases in Sonoma County.¹

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. In the first ten months of the pandemic, Memorial reported one injury for every six EVS workers in the department.² Over half of surveyed workers (58%) have been injured on the job at some point.

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.

A supermajority of Memorial’s EVS workers — 69% — responded to the survey. This report summarizes what they had to say.

COVID-19 ASSIGNMENTS, SAFETY RISKS

Nearly a year into the pandemic, workers report unnecessarily risky assignments, without proper training. Workers have also been instructed to skip the daily department meeting in order to clean COVID-19 patient rooms, and they miss critical daily updates. Hospital management failed to notify workers across entire departments of two separate outbreaks, resulting in several workers becoming infected with COVID-19, including EVS workers. The hospital only began providing general exposure notifications after

January 1, 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. EVS workers reported:

- Almost half (47%) of EVS workers have been assigned to conduct daily cleaning of COVID-19 patient rooms while the patient is present. This

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COVID-19 ASSIGNMENTS, SAFETY RISKS

puts workers in close proximity to patients, in order to clean bed-rails, mop floors, and remove trash.

- 41% report being instructed to enter a patient's room for terminal cleaning before enough time has passed to ensure that the air is free from viral particles.
- 21% have been assigned to move between cleaning the rooms of COVID-19 patients and non-COVID-19 patients without changing PPE,

as required by Cal/OSHA. This creates a risk of cross-contamination between patient rooms. Workers have raised their concerns in labor-management meetings, and though management agreed to look into it, they have yet to do so.

- Around one-third (34%) feel that management has not provided adequate training for cleaning of COVID-19 rooms.

SHORT STAFFING, POOR INFECTION CONTROLS

61% report that staffing levels in Memorial's EVS department have worsened in the last year, 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.

The hospital's response has missed the mark and failed workers. NUHW has filed a grievance after the hospital continued to schedule temporary agency workers even after union workers, returning from COVID-19-related leaves of absence, were available for shifts. Agency workers weren't provided with training to clean COVID-19 rooms, but the hospital directed them to fill the EVS staffing shortage during the winter surge, including high-risk COVID-19 assignments. Agency workers were not given the pay or benefits that make it possible to stay home and get medical care if they were to be exposed to COVID-19. This puts agency

workers — and the staff, patients and community they come into contact with — at even greater risk. In December and January, while the hospital faced a surge of COVID-19 patients, Memorial had 11 vacant per diem and full-time EVS positions.

Protecting patients and workers requires consistent and uniform infection control practices, and short-staffing is getting in the way.

- Nearly half of EVS Workers have more rooms or areas to clean than before the pandemic (45%), and have difficulty completing work in time on a weekly basis (48%).
- Workload has increased since the pandemic began (45%), but time to do work has stayed the same or decreased (87%).
- Only 37% report that they're always able to take regular breaks.

INTIMIDATION, RETALIATION FROM MANAGEMENT

Many EVS workers surveyed at 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, nearly half (45%) 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.

I have felt intimidated by my manager or supervisor.

I have seen management intimidate my coworkers.

NOTES

1. "Sonoma County Cases by Race/Ethnicity." COVID-19 Case Data, Sonoma County. As of March 19, 2021.
2. Hospital OSHA 300 forms from 2020 and 2021, through January 31, 2021.