

A letter from a Canadian emergency call worker protesting unsafe working conditions amid COVID-19

**An anonymous 911 call taker in Canada
8 February 2021**

I'm a 911 (emergency) call taker, and I am writing to the WSWs today as I recently read a news article reporting that an ambulance call centre in Toronto had a COVID-19 outbreak among its workers. Twelve employees in that dispatch centre tested positive for the virus. Upon further research, I discovered that there have been several other instances of outbreaks in emergency call centres, not just here in Canada but globally. These, of course, are merely examples where the spreading of the virus has been made publicly known and reported on by the media.

I wanted to write to the WSWs because I believe there have been outbreaks within centres run by the company I work for that have not been made publicly known, and because I feel that the company is not protecting us workers properly.

The dispatch centre I work at has not officially had an employee test positive for the virus to date. The corporation that employs us, however, has larger facilities in other parts of the province in which we are situated. Despite the centres being located fair distances away from each other, an email notification is sent out to every employee, regardless of which building they work in, to notify us when a worker has tested positive for COVID-19.

Over the holiday season and into January, it seemed like I received an email once, sometimes twice a week stating that yet another worker had tested positive for the virus at the largest call centre.

The emails mostly consisted of long spiels laden with corporate jargon about how the company has our best interests at heart and that a professional cleaning team had been brought in to sanitize the operations floor (or at least the area the worker had primarily been stationed in). A brief note would be included about the date and time of the last shift that the employee worked, and then emphasis would be placed on the apparent fact that the infected worker "wore their mask at all times when not sat at their desk or in a closed meeting."

There are several things that concern me, both about the company's inadequate preventive actions and the way cases of COVID-19 are being responded to.

Here I must explain: there are four rotating teams in our call centres that work year-round in a 2-day shift, 2-night shift, 4-off rotation. These shifts are always 12 hours in length. This is typical of many dispatch centres all over the country.

Theoretically, one infected worker can spread the virus to the employees of three or even all four shifts in a twenty-four hour period. One of the employees who tested positive for the virus did work in a time frame during which they came into contact with all four shifts while infected.

My call centre, the smallest of all of the call centres in our province, sees an average of about six call takers, five dispatchers and one member of management working on the operations floor per shift. At the bigger facilities, there can be as many if not more than forty people on the floor on every shift.

Working Monday to Friday are two cleaners, several members of management, one human resource worker, two IT technicians, two trainers and one secretary; these employees are in the building with any and all of the four shift rotations that pass through in a given week. Again, the bigger call centre locations have a much larger staff than this.

Finally, there are auxiliary employees who do not have a full-time contract and are not assigned to any team in particular. They do not receive benefits, yet they usually work more than forty hours a week.

These employees can make up the bulk of operational call takers on a day to day basis, filling in staffing needs at random throughout the month. They are often in contact with workers from every single shift over the course of a very short period of time.

Auxiliary workers and full-time workers alike are encouraged, sometimes outright pressured, to work overtime shifts as much as possible.

When a worker tests positive for COVID-19, the company does not attempt to determine who last worked with that person, and how recently other workers may have been exposed. No shift of workers is ever sent home to isolate for two weeks or, for that matter, for any amount of time at all.

All of us operations workers share desks, which is sometimes known as "hot desking" (with the exception of members of management, who have their own offices). When you show up to your shift, you pick a desk on the operations floor at random and sit there for the duration of your twelve hours at work, until an employee from the next shift relieves you.

Each desk has a tub of wet wipes, which workers use to quickly wipe their keyboard, mouse, desk surface and the arms of their chair before the next employee sits down. This must be done very hastily as the shift change is not staggered, meaning the next employee must log in to the software programs very quickly or else 911 calls will be kept waiting on hold. In all likelihood, this does not result in adequate sanitation standards needed to kill virus particles.

There are no open windows on the operations floor; the air we breathe is recycled constantly. Employees do not wear face masks at their desks, which is understandable as communicating with distressed callers over the phone is difficult at the best of times, and every

advantage for a better audible connection between caller and call taker is needed. However, no steps have been taken to space out employees further on the floor or assign desks to specific workers, or even groups of workers, in any way at all.

Obviously, this makes our centres ripe for an outbreak of catastrophic proportions. Just because we take emergency calls does not mean we are magically exempt from the same high transmission rates of the virus as seen in call centres in other industries. The enclosed space, recycled air (potentially filled with virus particles spread by constant, unceasing chatter), hot desking and frequent inability to physically distance primes call centres for fast and easy virus transmission.

Workers are required to fill out and sign a symptom questionnaire every shift which states we are not to work if we have any symptoms. However, most people lie about exhibiting symptoms as we are given a very limited amount of sick days per year and cannot afford days off even in the name of being responsible for the health and well-being of our coworkers.

On several occasions, people have gone home ill mid-shift, at which point their desk is taped off and their keyboard removed. However, no cleaning above and beyond a basic wipedown with the standard wet wipe is actually performed, and within the shift the tape is removed, the keyboard returned and the desk free for a new employee to sit at none the wiser.

No temperature checks are ever carried out at our call centre. Employees who have gone home sick or who call in sick are advised to call the nurses' hotline and get tested for the virus if a nurse advises, but are not told to isolate in any way in the meantime and are free to return to work as soon as possible.

The city where I live has a severe shortage of family doctors, and in order to get an appointment at a public clinic one must queue up with sick strangers for hours before the clinic opens. Usually, all of the day's open spots with doctors are booked up within forty minutes of opening time. For people who must leave work sick halfway through the day, this usually means no doctor is ever seen, and the worker simply forces his/herself to get back to work as quickly as they can.

This is exacerbated by the fact that after two or more days off, most employers require a doctor's note, which usually has to be paid for and requires of the sick person the same time-consuming process to obtain as an in-person appointment with a doctor.

Many people in my community use telehealth services such as Babylon in place of visiting an actual doctor, as they have no way of seeing a practitioner in person when sick. However, when it comes to physical symptoms, speaking over the phone simply does not sufficiently ensure that workers are cleared to go back into their place of work safely.

What's more, parents I work with whose kids have gotten sick or been exposed to the virus at school have no additional sick days or time off to care for their children at home.

We have not received any additional emergency pay for the added risk of attending work throughout the pandemic, yet our union (CUPE, the Canadian Union of Public Employees) has not done anything to fight for that. Nor has CUPE done anything to have any further health measures put in place that would allow for a safer working environment.

I asked members of management why, when an employee tests positive for the virus, the company does not require even directly exposed coworkers to isolate, never mind those who may have been indirectly exposed. The feeble answer given is that we are part of the

emergency response sector, and while we do not work on the front lines, we are absolutely essential and the call centres "cannot afford to lose an entire shift of workers for two weeks."

This is infuriating to hear time and time again. The company could absolutely "afford" to send workers home to isolate—or better yet, limit virus transmission in the first place—with just a few basic changes!

Firstly, they could staff shifts amply with full-time workers, instead of signing hundreds of employees onto auxiliary contracts out of a refusal to pay for their benefits. This way, potential exposures would be limited, as there would not be a large chunk of our workforce hopping between different teams. For these same reasons, they should immediately stop pressuring workers to take overtime shifts.

The company could space our desks apart further, and stagger our shift start times so we can adequately clean our equipment and avoid physical contact with the incoming shift without causing 911 calls to be kept on hold due to delays.

They could assign a limited number of employees to each desk, or better yet invest some of their \$75 million annual budget in more space, desks and computers so that we could each have our own.

Most importantly, when a worker has tested positive for the virus, all potential exposures should be traced and those exposed forced to isolate for two weeks. Full pay during this time period should also be implemented, as well as ample paid sick days.

But even with 807,000 cases in Canada and more than 20,500 deaths, neither time nor money or effort will be spared by the company so that we might be better protected while doing our jobs.

Myself and my coworkers are tired of feeling scared about bringing the virus home to our families, tired of not being able to call in sick when we have symptoms, and tired of our union doing nothing to make things even marginally safer for us.

I would like to extend my gratitude to the WSWS for being the only publication that truly highlights the struggles of workers, gives us a voice and shines a light on the betrayals our unions continue to implement in corporatist collaboration with big business. Your support for workers who want to build rank-and-file safety committees in their workplaces is more critical now than ever before. The pandemic has shown so many more of us that the corporations we work for do not care if we die so long as they can rake in profits.

Sincerely,

An Anonymous 911 Call Taker from Canada



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