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**Subject:** Collaborative Action to Prevent COVID-19 Transmission and Improve Health Equity by Increasing Access to Paid Sick Days

**Report to:** Public Health and Social Services Committee

**Report date:** Tuesday, February 16, 2021

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## Recommendations

1. That Regional Council **ENDORSE** the Decent Work and Health Network's report *Before it's too late: How to close the paid sick days gap during COVID-19 and beyond*<sup>i</sup> attached as Appendix A to Report PHD 1-2021;
2. That Regional Council **BE DIRECTED** to send the letter, attached as Appendix B to Report PHD 1-2021, to the provincial Minister of Health; Minister of Labour, Training and Skills Development; and the Premier, expressing its support for legislated paid sick days through the *Employment Standards Act*; and
3. That a copy of the letter and Report PHD 1-2021 **BE CIRCULATED** to local members of provincial parliament, local members of Parliament, and to the Association of Local Public Health Agencies for dissemination to all Ontario boards of health.

## Key Facts

- The purpose of this report is to seek Council's endorsement of the Decent Work and Health Network's report *Before it's too late: How to close the paid sick days gap during COVID-19 and beyond*<sup>i</sup> and to seek Council's support for legislated paid sick days through the Employment Standards Act.
- Currently no requirement for paid sick days exist through provincial employment standards.<sup>ii</sup>
- The gap in access to paid sick days is associated with transmission of infectious illnesses at workplaces<sup>iii</sup> including COVID-19, as many lower paid employees are compelled to work while sick and infectious so as to be able to earn the income they need to live.
- In *From Risk to resilience: An Equity approach to COVID-19*, Chief Public Health Officer of Canada, Dr. Theresa Tam, highlights the need to address the gap of access to paid sick days as an intervention effective in curbing the spread of COVID-19.<sup>iv</sup>

## **Financial Considerations**

There are no immediate financial considerations for Council to consider for this report.

Should the Government of Ontario legislate seven (7) paid sick days to be paid on day one of illness, there would be a financial impact on Niagara Region to pay current employees that do not normally have access to paid sick days on day one of illness – primarily part-time and casual staff. Using January 2021 staffing complement, the cost of providing seven (7) paid sick days to each of these staff is estimated at \$1.46 million, excluding other payroll related costs. The bulk of Regional staff working part time or casual are in the following classifications: paramedics, early childhood educators, personal support workers, recreationists, dietary aides, housekeeping & laundry aides, registered practical nurses, registered nurses (in long term care and public health), systems status controllers, students, for example. The local business community who employs staff without access to at least seven (7) paid sick days would have proportionate financial impact as well.

An estimated direct cost of absenteeism to the Canadian economy is \$16.6 billion. Universal paid sick leave would likely reduce these costs by keeping infectious illness out of workplaces, balancing out at least part of the increased costs of paid sick leave.

## **Analysis**

### **Disproportionate Impacts of COVID-19 & Access to Paid Sick Days**

The health of Canadians was inequitable prior to COVID-19. Differential access to factors such as housing, income and employment have long resulted in health disparities.<sup>iv</sup> More access to these social determinants of health is linked to better health. In Canada, both the risk of COVID-19 infection and the severity of illness, is disproportionately impacting populations with less access to affordable housing, income and employment.<sup>i</sup> [PHD 6-2020](#) previously described the inequitable impacts of COVID-19 and called upon the federal and provincial government to prioritize measures to reduce poverty and income inequality as a change that should be initiated by this pandemic.

As epidemiological study of COVID-19 has progressed, unpaid sick leave has been identified as key determinant of inequity in this pandemic.<sup>iv</sup> Staying home when sick is one of the most effective containment strategies for infectious disease, yet a benefit more accessible to some workers than others. The Decent Work and Health Network, is

an Ontario based group of health workers and trainees aimed at addressing working and employment conditions in Ontario. Their report, *Before it's Too Late: How to Close the Paid Sick Day Gap During COVID-19 and Beyond* synthesizes evidence that workers without paid sick days are more likely to go to work with contagious illness<sup>v</sup>; and it summarizes data on the number of workers without access to paid sick days and the disproportionate impacts of COVID-19. For instance, in Canada recent data indicates that more than half (58%) of Canadian workers do not have access to paid sick time. Over 70% of workers that make less than \$25,000 do not have access to paid sick days.<sup>vi</sup> Low-wage racialized workers, who are more likely to be denied paid sick days, have faced higher rates of COVID-19.<sup>i</sup> In Toronto, reported COVID-19 infection rate is higher for those identifying with racialized groups, 1372.0 cases per 100,000, than it is among those identifying as white, 396.6 cases per 100,000 people. COVID-19 infection rate among people in Toronto is also higher for low-income earning households, 808.0 cases per 100,000 people, compared to individuals not living in low-income households, 355.9 cases per 100,000 people.<sup>vii</sup>

In Ontario, there are no legislated paid sick days through employment standards.<sup>ii</sup> In the absence of legislated paid sick days, workers rely solely on workplace policies for access to paid sick days. Ultimately, workers without paid sick days are faced with a choice between sacrificing their financial security for public health or going to work sick to support themselves and their families. Workplaces with lack of paid sick leave are at greater risk of outbreaks. In Ontario, workplaces with precarious jobs and lack of paid sick leave have become hotspots for COVID-19 infection transmission, including outbreaks in long-term care homes, farms, meat-processing plants, grocery stores, and warehouses. In Niagara, as of January 21, 2021 18% of all COVID-19 cases were staff at a workplace associated with an outbreak. Of the total 1,261 staff associated with an outbreak; 751 were associated with a long-term care or retirement home, 239 with a community location, 207 with a hospital, and 64 with a communal/congregate living setting.

Through Public Health's contact tracing, there have been numerous examples found where the absence of paid sick leave likely contributed to infection spreading:

- Employees who continued to work with infection, thereby spreading illness to others and causing outbreaks
- Employees who are high risk contacts to someone infected with COVID-19; but who continued to work, eventually becoming infectious and harming co-workers

In many cases, these have been low paid employees of settings with vulnerable persons such as long-term care homes. In such settings, continuing to work while sick has likely lead to deaths that could be prevented.

Niagara's large tourism and hospitality industry is particularly at risk from the absence of paid sick leave. Many workers in this industry do not enjoy comprehensive benefits including paid sick leave. Therefore, as tourism resumes, this industry could pose a risk for resurgence of COVID-19 leading to increased infections in Niagara, tourists becoming ill, and Niagara's reputation as a premier tourist destination potentially harmed.

### **Current Public Policy on Paid Sick Leave**

During the COVID-19 pandemic, the Infectious Disease leave within Ontario's *Employment Standards Act* has provided only unpaid, temporary leave that is restricted to COVID-19 related reasons.<sup>viii</sup> Federally, the temporary Canada Sickness Recovery Benefit (CSRB) provides 10 days of income support for COVID-related leave for workers without paid sick days.<sup>vi</sup> However, this program requires workers to have lost at least 50% of their wages, apply for the benefit after that has happened, and endure a waiting period while they wait for their application to be approved and then funds to begin to flow.<sup>viii</sup> Legislated paid sick days would allow workers to receive full and uninterrupted income replacement without delay, which is a primary concern for workers in low-wage and precarious employment.

Canada lags behind other nations globally in guaranteeing workers access to adequate paid sick days for short-term illness. Canada is in the bottom quarter of countries worldwide that do not guarantee paid sick leave on the first day of illness, which is a crucial measure to enable workers to stay home at the first sign of symptoms of an illness. Many other Organisation for Economic Co-operation and Development (OECD) countries legislate employer provided paid sick days for short-term illness, with social insurance programs supplementing for longer term sick leaves.<sup>i</sup>

### **An Opportunity for Healthy Public Policy Measures through Provincial Legislation**

Advocacy efforts have been underway in the United States (US) and Canada to improve public policy related to paid sick days. In Canada, Chief Public Health Officer Dr. Theresa Tam's report, *From risk to resilience: An equity approach to COVID-19* points to paid sick days as an intervention that is essential to protect workers and mitigate the spread of COVID-19. The Decent Work and Health Network's report, *Before it's Too*

*Late: How to Close the Paid Sick Day Gap During COVID-19 and Beyond* cites research projects that have explored the relationship between paid sick days and infectious disease rates. In the US one study reported that cities with paid sick days saw a 40% reduction in influenza rates during flu waves compared to cities without.<sup>ix</sup> Recent efforts in the US have seen some states expanding employer-provided permanent paid sick days and brought in additional paid sick days for public health emergencies.<sup>x</sup>

Recent calls on the Government of Ontario to take action on paid sick leave include the following:

- November 27 2020, Ontario's Big City Mayors made up of Mayors from 29 cities across Ontario with a population of 100,000 or more, expressed their belief that paid sick leave is needed immediately as a measure to help stop the spread of COVID-19 and to protect workers, urging the Federal and Provincial government to implement paid sick leave
- December 8, Stay Home if You are Sick Act<sup>xi</sup>, a Private Member's Bill, was introduced in the Ontario Legislature, calling for permanent paid sick days for Ontario workers during the pandemic and beyond
- January 18, 2021, Toronto City Council requested the Government of Ontario to take immediate action to address rising rates of COVID-19 by requiring paid sick leave
- January 25, 2021 the Greater Toronto and Hamilton Area mayors and regional chairs renewed calls to both the Provincial and Federal Government for all workers to have access to paid sick days
- January 27, 2021 the Kingston, Frontenac, Lennox & Addington (KFL&A) health unit endorsed in principle, the Stay Home if You Are Sick Act<sup>xi</sup>; called on the Province of Ontario to amend Employment Standards Act to provide paid sick days; and called on the Ontario Government to provide fiscal relief and other supports to employers to provide this sick leave
- February 1, 2021 the city of St. Catharines endorsed legislated sick leave and calls on the government of Ontario to permanently legislate universal paid sick days for all workers in Ontario
- February 9, 2021 the Association of Local Public Health Agencies (aLPHa) express that under the Employment Standards Act, the Government of Ontario reinstate guaranteed paid sick leave to protect workers and reduce workplace outbreaks

Based on a jurisdictional scan of best practices and review of medical evidence, the Decent Work and Health Network has developed a criteria of five principles for effective paid sick days policy (further details in Appendix A):

- **Universal:** Available to all workers regardless of workplace size, type of work (including temporary, part time and independent contracts) or immigration status. Legislated, with no exemptions.
- **Paid:** Fully paid to ensure workers are not financially penalized for following public health advice.
- **Adequate:** At least seven paid sick days provided on a permanent basis, with an additional 14 paid sick days during public health emergencies.
- **Permanent:** Available during the COVID-19 pandemic and beyond.
- **Accessible:** No barriers to access. Prohibit employers from requiring sick notes; ensure no disruption of income or unnecessary applications; and provide sufficiently flexible leave that reflects the reality of workers' lives, healthcare needs, and caregiving responsibilities.

## **Alternatives Reviewed**

The alternative of taking no action on paid sick time was considered. However, not taking action will continue to place burden of responsibility on the individual to decide between getting paid and staying home if they are sick. Evidence indicates that this is resulting in the spread of infectious disease, including COVID-19.

## **Relationship to Council Strategic Priorities**

Paid sick days will help to lessen the disproportionate impact COVID-19 is having on workers that do not have access to paid sick leave. Additionally, paid sick leave will help to reduce transmission of COVID-19. This healthy public policy is linked to Council's Healthy and Vibrant Community strategic priority, in particular, the desire to improve health equity.

## **Other Pertinent Reports**

- [PHD 6-2020](#) - Basic Income for Income Security

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**Recommended by:**

Adrienne Jugley, MSW, RSW, CHE  
Commissioner, Community Services

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**Recommended by:**

M. Mustafa Hirji, MD, MPH, PCPC  
Medical Officer of Health &  
Commissioner (Acting)  
Public Health and Emergency Services

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**Submitted by:**

Ron Tripp, P.Eng.  
Acting Chief Administrative Officer

*This report was prepared by Lindsay Garofalo, Manager, Chronic Disease and Injury Prevention in consultation with Pam Abeyskara, Integrated Planning and Policy Advisory, and reviewed by David Lorenzo, Associate Director Chronic Disease & Injury Prevention.*

**Appendices**

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| Appendix A | Decent Work & Health Network. Before It's Too Late: How to Close the Paid Sick Day Gap During COVID-19 and Beyond |
| Appendix B | Advocacy Letter                                                                                                   |

## Sources

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- <sup>i</sup> Decent Work & Health Network. Before it's Too Late: How to Close the Paid Sick Day Gap During COVID-19 and Beyond. Published August 2020. Available from: (<https://www.decentworkandhealth.org/beforetoolate>)
- <sup>ii</sup> Ontario Employment Standards Act. Section 50. Available from: (<https://www.ontario.ca/laws/statute/00e41>)
- <sup>iii</sup> Drago R, Miller K. Sick at Work: infected employees in the workplace during H1N1 pandemic IWPR.org (2010). Available from: (<https://iwpr.org/iwpr-general/sick-at-work-infected-employees-in-the-workplace-during-the-h1n1-pandemic/>)
- <sup>iv</sup> From Risk to Resilience: An Equity Approach to COVID-19. The Chief Public Health Officer of Canada's Report on the State of Public Health in Canada 2020. Published October 2020. Available from: (<https://www.canada.ca/content/dam/phac-aspc/documents/corporate/publications/chief-public-health-officer-reports-state-public-health-canada/from-risk-resilience-equity-approach-covid-19/cpho-covid-report-eng.pdf>)
- <sup>v</sup> Estimates of Foodborne Illness in the United States (2020). Available from: (<https://www.cdc.gov/foodborneburden/2011-foodborne-estimates.html>)
- <sup>vi</sup> Yalnizyan A. After CERB: Paid Sick leave provisions in Canada (2020). Available from: (<https://atkinsonfoundation.ca/atkinson-fellows/posts/after-cerb-paid-sick-leave-provisions-in-canada/>)
- <sup>vii</sup> COVID-19: Status of Cases in Toronto. Available from: (<https://www.toronto.ca/home/covid-19/covid-19-latest-city-of-toronto-news/covid-19-status-of-cases-in-toronto/>)
- <sup>viii</sup> Canada Recovery Sickness Benefit. Government of Canada. Updated November 30, 2020. Available from: (<https://www.canada.ca/en/revenue-agency/services/benefits/recovery-sickness-benefit.html>)
- <sup>ix</sup> Pichler S, Ziebarth N. The pros and cons of sick pay schemes: Contagious presenteeism and concontagious absenteeism behaviour. Voxeu.org. Pichler S, Ziebarth N. (2016) Available from: (<https://www.nber.org/papers/w22530>)
- <sup>x</sup> New York State Passes Permanent Right to Paid Sick Leave. Available from: (<https://www.abetterbalance.org/new-york-state-passes-permanent-right-to-paid-sick-leave/>)

<sup>xi</sup> Stay Home if You are Sick Act, 2020. Available from:  
(<https://www.ola.org/en/legislative-business/bills/parliament-42/session-1/bill-239>)