



CANADIAN FEDERATION
OF NURSES UNIONS
LA FÉDÉRATION CANADIENNE
DES SYNDICATS D'INFIRMIÈRES
ET INFIRMIERS

CFNU Position Statement
April 8, 2020

Pregnant Health Care Workers Should Not Be Forced to Work in COVID-19 'Hot Zones'



There isn't enough evidence to predict whether COVID-19 will have an impact on pregnant health care workers, or whether they are at greater risk of infection and severe morbidity, but with respect to pregnant workers employers should err on the side of compassion, and focus on alleviating the anxiety of workers and any potential health risks to the mother and her fetus.



We know that overall, according to the U.S. Centers for Disease Control and Prevention (CDC), pregnant women tend to have more severe viral illnesses when compared with the general population. The related coronavirus infections MERS and SARS were also known to cause adverse pregnancy outcomes. The CDC recommends that pregnant individuals be monitored.



Exercising precaution in the face of the unknown, the UK Royal College of Obstetricians and Gynecologists recommends that wherever possible, pregnant women avoid working in areas with suspected or confirmed COVID-19 patients. The Society of Obstetricians and Gynecologists of Canada concurs stating that, given the data on COVID-19 during pregnancy is in its infancy, where staffing allows, pregnant health care workers should consider avoiding unnecessary exposure to patients with suspected or known COVID-19. The Society further recommends that pregnant women with comorbidities, including cardiac disease, hypertension and pulmonary disease, may wish to contact their prenatal care provider with respect to their risk of COVID-19-related morbidity and may wish to modify their risk of exposure accordingly.



Given these recommendations above, the CFNU recommends that pregnant health care workers who are concerned about their health – especially those with co-morbidities – seek an accommodation from their employer if they are asked to care for presumed or confirmed COVID-19 patients in COVID-19 'hot zones' (such as intensive care units, emergency rooms, operating rooms, post-anaesthetic care units, negative pressure rooms, single-patient rooms used to isolate patients in absence of negative pressure rooms, and trauma centres), and accommodation be readily granted based on language in collective agreements and provincial human rights legislation.

Provincial human rights laws indicate that pregnancy is a category protected from discrimination, to the point of undue hardship on employers. Nurses, for their part, have an obligation to cooperate to find a suitable accommodation. If a nurse seeks an accommodation, a union representative should be consulted.

If physical changes due to pregnancy make it difficult for a pregnant health care worker to don and wear the required personal protective equipment in a safe manner, they should not be providing care for COVID-19 suspected or confirmed patients. The pregnant health care worker should seek an accommodation from their employer.