



CONGRESSIONAL TESTIMONY

STATEMENT FOR THE RECORD

AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES, AFL-CIO

PROVIDED TO THE

HOUSE COMMITTEE ON VETERANS' AFFAIRS

HEARING ON

“ASSESSING VA’S RESPONSE TO THE COVID-19 PANDEMIC: 90 DAYS LATER”

JUNE 11, 2020

Chairman Takano, Ranking Member Roe, and Members of the Committee, the American Federation of Government Employees, AFL-CIO (AFGE) and its National Veterans Affairs Council (NVAC) appreciate the opportunity to submit a statement for the record on today's hearing titled "Assessing VA's Response to the COVID-19 Pandemic: 90 Days Later." AFGE represents more than 700,000 federal and District of Columbia government employees, 260,000 of whom are proud, dedicated Department of Veterans Affairs (VA) employees. In our comments on needed improvements to the VA's response to the pandemic, we discuss how VA policies and practices have impacted the health and safety of the front-line workers who provide health care and other critical services to our nation's veterans. We hope that you find our recommendations constructive and reasonable, and we stand ready to work with the members of the Committee to improve the VA in the future.

Overview

Since the start of the COVID-19 pandemic, AFGE has received a tremendous number of urgent reports from panicked front-line health care workers facing unprecedented risks to themselves and their families while trying to care for veterans. Amidst the widespread chaos at almost every VA medical center, the only consistency appears to be inconsistency.

With few exceptions, management policies and practices for Personal Protective Equipment (PPE), leave, telework, testing, and hazard and incentive pay have been unpredictable, uneven, and arbitrary. Contrary to the public assurances made by the

Secretary of Veterans Affairs, Robert Wilkie, VA medical facilities still do not have adequate masks, respirators, gowns, hand sanitizers, testing, and other medical resources essential for the safe treatment of patients and necessary to control the spread of this deadly virus.

Based on reports from our members, we are also doubtful that the Department is prepared for facilities to reopen, despite that this process is already underway in many locations, that it is specifically ill prepared to communicate usable plans to workers and their representatives, and that it has sufficient PPE inventory, testing and contact tracing.

PPE Supply Chain and Inventory Management

The Secretary's admission to the House Appropriations Military Construction, Veterans Affairs and Related Agencies Subcommittee on May 28th that each VA facility only has a two-week stockpile of PPE was troubling, but not surprising. The VA's medical equipment supply chain has been severely weakened by the absence of coordination, transparency, national guidance, and consultation with front-line workers and their labor representatives. PPE acquisitions and distribution have been left largely to each medical center. These medical centers do not have sufficient guidance from the VA Central Office (VACO), recommendations from the Centers for Disease Control (CDC), or the extensive expertise and experience of VA contracting officers and front-line

employees who experience firsthand the risks of working during this pandemic without adequate protection.

As a result, local procurement officers are forced to compete for known PPE supplies instead of working together. At the same time, the VA's outdated inventory system does not allow for the accurate tracking of PPE inventory levels. There is no system in place for facilities to exchange information about best practices and good and bad suppliers, or to ensure reasonable pricing.

At the VA specifically, every VA employee who works at a medical facility needs adequate PPE; not just those who work in COVID units and "hot zones." Every employee can on short notice find himself or herself in a high risk situation even if his or her official duties are not within a "hot zone" because of a reassignment to a short staffed area, or an unexpected medical emergency involving a COVID-positive patient. Too often, the PPE needs of critical support personnel are overlooked. These include entrance screeners, medical support assistants who do patient check-ins, housekeepers cleaning COVID units, maintenance workers disposing of trash, food service and canteen workers interacting with large numbers of employees and veterans, and logistics warehouse workers frequently interacting with commercial companies making deliveries, all of whom are denied adequate PPE at many facilities or provided none at all.

While poor management decisions are a primary cause of dangerous PPE practices, the chronic shortages resulting from supply chain problems have also contributed a

great deal. We question why many medical facilities continue to ration PPE despite reported increased inventory and we are deeply troubled by reports that some managers hoard PPE or save PPE for colleagues who are not at risk, while forcing front-line employees to go without or plead for more protective PPE and replacements of worn out PPE.

PPE purchasing and distribution decisions at VA medical facilities are too often arbitrary. The shortages and uncertainty about future inventory resulting from supply chain weaknesses exacerbate the problem. The need for a well-functioning supply chain will become even greater as the technology for testing, vaccines, and pharmaceutical treatments for the virus advances.

For these reasons, AFGE supports legislation that will increase the supply and proper distribution of PPE and other medical equipment through fuller utilization of the Defense Production Act (DPA), combined with vastly increased oversight and transparency of DPA activities. The country urgently needs a comprehensive strategy for ensuring adequate production and distribution of PPE and other medical equipment necessary to fight COVID-19 for all workers who need them.

AFGE strongly urges lawmakers to enact the PPE provisions in H.R. 6800, the “HEROES Act” that enhance DPA authority, require the President to work with a team of federal agencies to carry out DPA activities, require extensive Congressional oversight through regular executive branch reports to Congress, and ensure transparency through public reporting requirements. More broadly, a strong federal supply chain is essential to ensuring that every federal and private sector worker who needs PPE and other

medical equipment and services receives what he or she needs to perform their duties safely.

Additionally, AFGE is pleased that provisions in S. 3627, the “Medical Supply Transparency and Delivery Act,” that similarly increase the effectiveness, accountability, and transparency of the DPA, were included in the “HEROES Act.”

Testing

The “HEROES Act” provisions strengthening the DPA will also assist with universal testing for COVID-19 that will finally allow us to fully assess the risk of transmission by knowing the extent of infection, and then take action to isolate those who have been in contact with infected individuals. Universal testing will help ensure the health and safety of VA employees and veterans as federal worksites reopen.

Equally important is access to COVID-19 testing. We have heard for over a month from senior VA leadership that any employee who wants a test can get a test, even though that is not what we have seen on the ground. Despite claiming tests are available for employees, last week Dr. Richard Stone, the Executive in Charge of the Veterans Health Administration, told the Senate Veterans’ Affairs Committee that the Department is “not there yet” and that testing is still limited.

Our members report that testing policies are still very inconsistent and unpredictable. Some have been told that they must get tests from their own outside providers in order to request leave to allow them to isolate themselves after exposure or when they exhibit virus symptoms. In some locations, it appears that testing of employees is far more limited than testing of patients, In addition, employees seeking testing due to exposure

to COVID-positive coworkers are finding it more difficult to get testing than those exposed to patients with the virus.

It is imperative that the VA provide access to testing to every employee who may have been exposed to the virus. Especially as restrictions begin to loosen and foot traffic returns to normal at each facility, access to testing will be an important tool for facility leadership to make prudent policy decisions. For testing and exposure tracing to be effective, it must be universal and nationwide at every VA. We ask that Congress ensure that ongoing testing is widely available at no cost to employees who are deemed essential and to those who are teleworking before and after they return to their duty station.

Testing of employees continues to be restricted across facilities. While some managers have promised to provide all employees testing upon request, it appears only to be a promise at this point. For example, it appears that in some locations employees are only tested if they work in Community Living Centers. In other locations, employees are only tested after exposure to COVID-positive patients, but not coworkers. AFGE members are also concerned about management's failure to notify them following an exposure of patient positive test results. Contact tracing does not appear to be in place or planned at any locations that provided reports.

Other needed workforce protections as VA facilities reopen

Presumption of Illness:

As we continue to navigate this crisis, it is important that front-line employees who risk daily exposure to COVID-19 receive adequate resources and protection. AFGE urges

Congress to amend the Federal Employees Compensation Act (FECA), the law that governs workers' compensation for federal employees, to provide an automatic presumption of workplace illness for employees who contract COVID-19 through the performance of their duties.

As VA employees are required to interact with the public, with individuals who are quarantined, and those who have been diagnosed with COVID-19, there should be a presumption that the employee contracted the virus at work. A workplace presumption of illness will allow federal employees who have contracted the virus in the performance of their duties to make a FECA claim without facing a potentially lengthy denial and appeals process, and help these workers receive the care and services they need.

Telework:

AFGE strongly supports to use of telework generally and fully supports all efforts to allow VA employees to telework whenever possible during the COVID-19 pandemic both for the safety of employees, veterans and the public. In the VA, the benefits of telework have already been demonstrated at the Veterans Benefits Administration (VBA), where claims are being processed at a higher rate since employees have been required to work at home compared to before the pandemic when the VBA put up restrictions making it more difficult for employees to be granted the ability to telework. In VHA, the use of telework has not been used to its maximum availability. This is particularly true for administrative work that does not require in person interaction with patients such as third-party collections and Office of Community Care consults.

AFGE commends the VA for expanding the use of telehealth and telemental health during the pandemic and urges it to continue to expand its telehealth capacity. It should continue its efforts to provide more tablets and other needed technology to veterans to allow remote access. Similarly, with regard to the current backlog of Compensation & Pension exams, as the recent Disability Assistance and Memorial Affairs Subcommittee (DAMA) Virtual Forum on Compensation and Pension (C&P) Exams revealed, more could be done to expand the types of exams performed by telemedicine--the VA changed its policy since the start of the COVID-19 pandemic to allow exams for 29 specific conditions to take place virtually.

Temporary OSHA Standard:

One of the simplest steps that the federal government could take to protect workers, including front-line VA healthcare providers, from the COVID-19 pandemic is to have the Occupational Safety and Health Administration (OSHA) issue an Emergency Temporary Standard (ETS). If the Secretary of Labor were to issue an ETS, all employers, including the federal government, would be required to meet a federally mandated and enforceable standard to protect employees from the COVID-19 pandemic. As the government has yet to implement an ETS despite the clear need, AFGE supports H.R. 6559, "The COVID-19 Every Worker Protection Act of 2020." This legislation would force the government to issue an ETS, as well as prevent employers from being able to retaliate against workers who report infection control problems in the workplace. AFGE thanks Chairman Takano, Subcommittee Chairwoman Brownley, Committee Vice-Chairman Lamb, and other Members of the committee for co-sponsoring H.R. 6559.

Labor Voice/Stakeholder Engagement:

In order to ensure adequate PPE, testing, commonsense leave policies and other policies that ensure safety for veterans and workers going forward, VA leadership should work with employee union representatives to accurately assess PPE and testing needs, identify and properly implement new safety practices and properly distribute staff to areas of need in order to serve both its core and fourth missions. AFGE also strongly supports the “HEROES Act” PPE provisions that require the President and coordinating agencies to engage stakeholders, including labor unions representing health care workers and public sector employees, in medical equipment needs assessments. Stakeholder engagement will also be enhanced by provisions in the bill that establish a stronger oversight role for the Comptroller General.

Every day, VA front-line employees and the veterans they serve feel the harsh effects of the Secretary’s insistence on silencing the voices of the VA workforce and their labor representatives. From the outset of this pandemic, AFGE and other unions representing VA front-line workers have been shut out of the agency’s response teams at both the national and local level. All our requests to help the VA effectively respond to COVID-19 have been rejected, despite direct pleas to the Secretary and the much-appreciated requests to the Secretary by Members of Congress. The Secretary’s unwillingness to listen to the front-line employees who deliver the care, and their representatives, is a stark departure from the labor-management partnerships that allowed the VA to fulfill all its missions during hurricanes, epidemics, and other past national crises. Sadly, rather than take the simple, cost saving and productive step of increasing dialogue, the Secretary continues to wage a war on our collective bargaining agreement by trying to

force a new contract on AFGE's VA Council that eliminates longstanding contract provisions that enhance workplace safety, staffing levels and recruitment and retention of in-demand medical professionals.

We stand ready to work with the Committee on all the steps needed to protect veterans and the VA workforce as the nation continues to cope with COVID-19 and proceed to new stages of reopening. Thank you.