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Alberta's nurses: there for everyone, every day, just as we were on Labour Day

By Heather Smith
President, United Nurses of Alberta

There's a breath of fall in the air now and the first leaves have started to turn, so we know it is time for the rituals of autumn – a new school year, new working arrangements, changing the tires on the car...

On Labour Day – the traditional divider between summertime and autumn – I reminded Albertans that while for most of us the last long weekend of the summer is a time for taking it easy, for Registered Nurses, Registered Psychiatric Nurses and the other health care professionals we work with, it's one of the busiest times of the year. I told them how, every year at this time, we see a surge of health issues and emergencies.

But thanks to you, the 30,000 members of UNA, I could also tell them that – just like every other weekend – Alberta's RNs and RPNs are there for them, in Emergency Rooms, health care facilities, long-term care centres, community care and everywhere nurses work for patients, residents, clients and their families.

We are there for them in other ways, as well. When unions like United Nurses of Alberta fight to preserve public health care and for the creation of new programs like a national pharmacare plan, we are working on behalf of all middle-class Canadian families.

When we fight for Professional Responsibility Concerns and Occupational Health & Safety in our workplaces, we

are not just fighting for members, but for the wellbeing of patients, residents, clients and their families as well.

When we enforce our contracts, to ensure all employees are treated equally within their bargaining units, we are fighting for women's rights, workers' rights and civil rights.

And when we struggled successfully over the past 15 months for a fair collective agreement in the face of strong efforts by some of our employers and political forces to roll back our wages and working conditions, we were supporting the rights of every working person.

I am so proud of your efforts – the many times you dressed in white as a sign of solidarity and professionalism – and the great success we achieved together with the signing and approval of the new Provincial Collective Agreement now coming into effect.

Your success in 2013 and 2014 is part of the vast legacy of rights won by unions for working people, and will benefit other working people and all Albertans as we move into fall, and into the future.

In solidarity,

Heather Smith, President, UNA

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Members overwhelmingly ratify new Provincial Collective Agreement

MEMBERS of United Nurses of Alberta covered by the union's Provincial Collective Agreement with Alberta's largest health care employers overwhelmingly ratified the mediator's recommended tentative agreement on August 6, with the totals tallied and revealed the next day.

It was a long and winding road from the start of bargaining 15 months earlier and its successful conclusion with a four-year agreement ratified by more than 98 per cent of the members eligible to vote.

Along the way, employers moved from demands for major rollbacks and changes in contract language affecting work assignments and scheduling that could have significantly reduced numbers of Registered Nurses to an agreement recommended by a Mediator that included fair pay increases and assurance of no overall reductions in nursing care provided to Albertans.

Provincially appointed Mediator David Jones recommended the settlement on July 8 and it was recommended for ratification by about 700 delegates at UNA's July 15 Reporting Meeting in Calgary.


"The very strong vote in favour of this agreement indicates how happy UNA's members are with the result of this round of bargaining," Vice-President Daphne Wallace the day after the ballots were counted.

"We've come a long way since these negotiations began, and we're very grateful to our UNA bargaining team for their patience, strength and wisdom through this long and difficult process." She also thanked the Mediator and employer bargaining representatives for their hard work.

Wallace also described the agreement, which covers RNs employed by Alberta Health Services, Covenant Health, Lamont Health Care and Bethany Group (Camrose), as "a new beginning."

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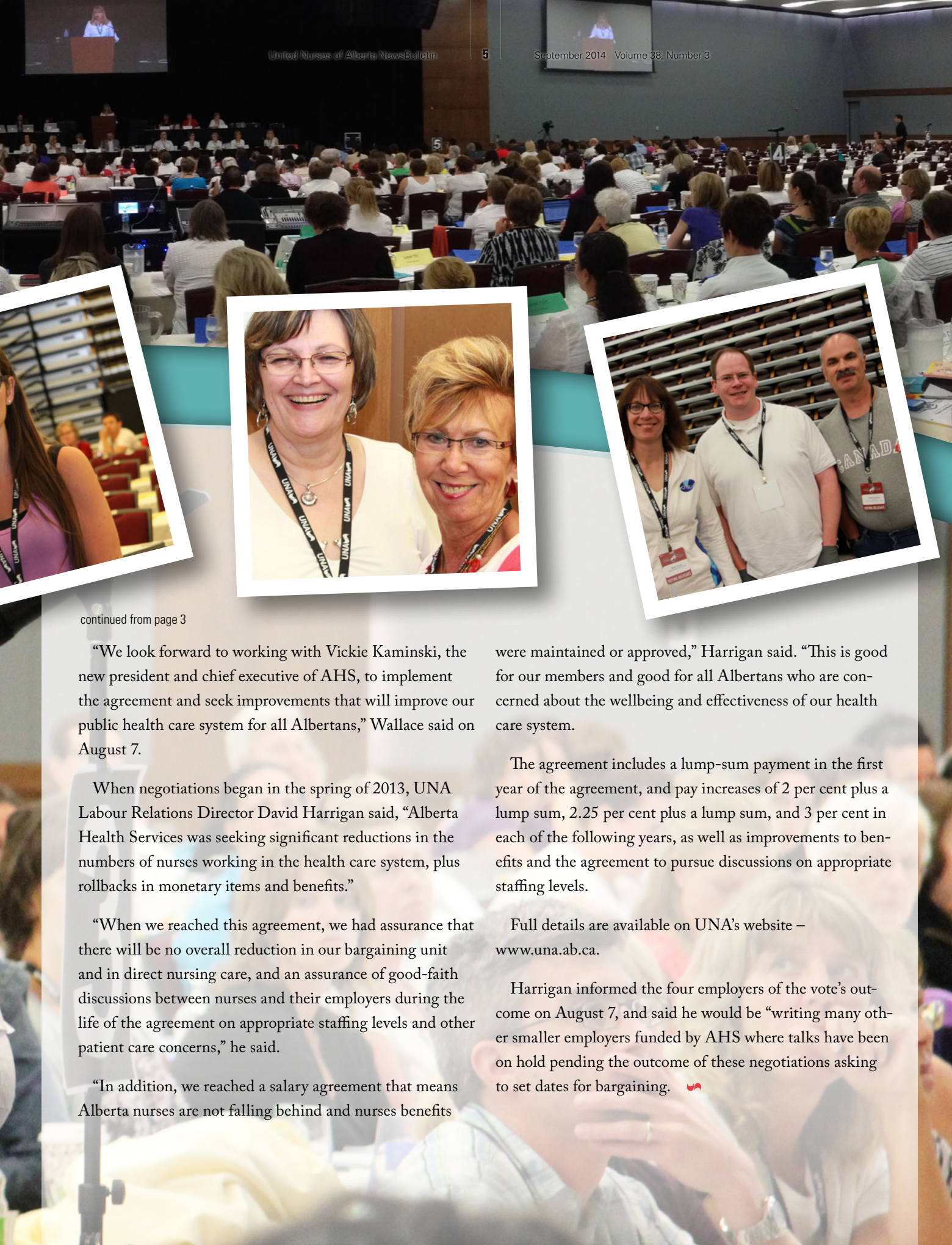


At the University of Alberta Hospital, members of UNA Local 301 cast their ballots in the ratification vote for a new Provincial Collective agreement. From left to right are local members Diane Woodward, Julie Cadrin, Nicole Van Dijk and Georgia Dewart.



Linda Silas,
CFNU President





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“We look forward to working with Vickie Kaminski, the new president and chief executive of AHS, to implement the agreement and seek improvements that will improve our public health care system for all Albertans,” Wallace said on August 7.

When negotiations began in the spring of 2013, UNA Labour Relations Director David Harrigan said, “Alberta Health Services was seeking significant reductions in the numbers of nurses working in the health care system, plus rollbacks in monetary items and benefits.”

“When we reached this agreement, we had assurance that there will be no overall reduction in our bargaining unit and in direct nursing care, and an assurance of good-faith discussions between nurses and their employers during the life of the agreement on appropriate staffing levels and other patient care concerns,” he said.

“In addition, we reached a salary agreement that means Alberta nurses are not falling behind and nurses benefits

were maintained or approved,” Harrigan said. “This is good for our members and good for all Albertans who are concerned about the wellbeing and effectiveness of our health care system.

The agreement includes a lump-sum payment in the first year of the agreement, and pay increases of 2 per cent plus a lump sum, 2.25 per cent plus a lump sum, and 3 per cent in each of the following years, as well as improvements to benefits and the agreement to pursue discussions on appropriate staffing levels.

Full details are available on UNA’s website – www.una.ab.ca.

Harrigan informed the four employers of the vote’s outcome on August 7, and said he would be “writing many other smaller employers funded by AHS where talks have been on hold pending the outcome of these negotiations asking to set dates for bargaining. 🇨🇦



UNA's 2014 Bargaining Team

UNA members share in successful 2014 bargaining outcome

IT was an incredibly difficult 15 months of bargaining.

From the start, Alberta Health Services and the Alberta Government spoke with one voice, and that voice said “No!” to almost every position taken by United Nurses of Alberta negotiators bargaining for a new Provincial Collective Agreement.

They had their own positions, too – demanding rollbacks on years of fair workplace rules and benefits won by generations of UNA members. What’s more, the government was quite prepared to use legislation to circumvent the bargaining process, and force UNA to take whatever it told us to take.

And yet, at the start of July, UNA and the bargaining team for AHS and the other parties to the Provincial Collective Agreement – Covenant Health, Lamont Health Care and Bethany Care Group (Canmore) – reached in mediation a fair collective agreement that all parties could live with.

How did that happen? “Solidarity, determination and a dose of good timing,” says UNA Labour Relations Director David Harrigan. “But the most important of these was solidarity.”

“Solidarity, determination and a dose of good timing,”

–David Harrigan

“The fact UNA RNs and RPNs stuck together and consistently showed support for their bargaining team had a huge impact on the successful outcome of these negotiations,” Harrigan said.

“It certainly didn’t hurt that the political crisis faced by the government resulted in pressure this summer on AHS and the other employers from the political level to bring the negotiations to a close,” he added. “But UNA members would not have been able to benefit from this if nurses hadn’t had the courage and determination to support their bargaining team’s consistent messages to the employers throughout collective bargaining and mediation.”

“In that sense, this agreement is a victory that most UNA members directly contributed to, as well as one that will benefit every single member of our union,” Harrigan concluded. 🍷





Two-week AHS benefits 'open period' in January offers UNA members opportunity to enroll in plans

UNITED Nurses of Alberta members employed by Alberta Health Services who have chosen in the past not to enroll in their workplace benefits plans will have the opportunity to do so between Monday, January 5, 2015, and Monday, January 19, 2015.

This "open period" for changing AHS employees' benefits coverage is a result of the ratification of a new Provincial Collective Agreement and will be the subject of reminders on UNA's website as the date nears.

One of the impacts of the just-completed round of bargaining was the agreement by UNA and AHS to move to a single benefit plan for all members instead of the confusing array of legacy plans left over from the days of nine health regions and before.

UNA's goal in bargaining, however, was to ensure that while a single plan was available to all members, superior benefits that had been won in some regions were maintained for all. The employer's preference would have been to pick a single plan, and move everyone to it.

The trouble with that would have been that what added up to a small difference for most members could have been a very big difference for a few. One example would be employees with family members who had specific health problems that were covered only in the district where


the member worked, explained UNA Labour Relations Director David Harrigan.

"So very minor differences had the potential to make a very big difference to some members, and in the end we were successful at protecting almost all of those benefits for our members while making some significant gains for others," he said. "We ensured that no one really lost anything."

Harrigan said the biggest gain was the elimination of the three-month benefits waiting period for new employees that existed in some parts of the province. Now benefits will start immediately upon employment for all UNA members covered by the Provincial Collective Agreement, he said.

Another important gain was the extension of out-of-country coverage to all employees in all AHS Zones, he said.

Under the new benefits plan, health, dental and out of country insurance will be covered by Blue Cross, short-term disability and long-term disability will be covered under Great West Life and other insurance covered by Alliance.

Harrigan said UNA members will be able to find complete details of their full benefits coverage in the 2015 edition of the UNA Nurses Planner, which will be distributed to members in the fall, as well as on UNA's website – www.una.ab.ca. Members seeking information about benefits may also call UNA's toll-free line at 1-800-252-9394. 

LAPP funded status improves just as Labour Coalition on Pensions predicted

THE Local Authorities Pension Plan website is now reporting that as of December 31, 2013, the funded status of the plan has reached 85 per cent, an improvement from 82 per cent in 2012.

This is consistent with what the Labour Coalition on Pensions has said in response to the Alberta Government's planned attacks announced last year on the LAPP and other public sector pensions, and shows that the plan put in place by the LAPP Board to eliminate the pension's unfunded liability is working well.

"Financially, 2013 was a successful year for LAPP, with the fund achieving an 11.3-per-cent return on investments, the second year of double-digit returns and the third year of improvements to the plan's funded ratio," said LAPP Stakeholder Relations VP Sherri Wright on www.lapp.com.

A link is provided from the website to the annual report of LAPP, the pension plan for most United Nurses of Alberta members.

But UNA President Heather Smith warned the union's members, as she did in May, that while public service

members deserve credit for the lobbying effort that led to the provincial government suspending its plans to gut public service pensions, the fight is not over.

"While the government referred the changes proposed last fall by the finance minister to an all-party committee, we need to remember that is not a final victory, even now, despite increasing support among politicians for our fight to protect our life savings," Smith said.

"So we still need to continue to remind the MLAs that represent us of the reasons why Bills 9 and 10, which would have allowed damage to both public and private sector pensions, are bad policy that is not needed in Alberta," she added.

On June 4, Smith did just that, telling the all-party Standing Committee on Alberta's Economic Future that "to say that front-line nurses are angry when they see the drastic changes that have been proposed for their pension probably underestimates the situation.

"This is especially true when they see concessions made to protect the pensions of male-dominated groups within their

UNA members speak clearly about proposed pension changes

Many UNA members spoke up clearly at hearings into Bills 9 and 10 held by the all-party Standing Committee on Alberta's Economic Future this summer. Here are a few of their comments:

"Bill 9 is broken promises, but more than that it's a boundary violation. We negotiated our salary, our benefits, which include our pension, and that's negotiated in good faith at the negotiating table. This is an attempt to subvert that process, and I think that it's a misuse of the law and misuse of the Legislature."

Sheila Hogan, RPN,
Edmonton, June 16, 2014

"Ten years ago my brother approached me and asked me to work in the oil field, where I could make way more money than I make at Alberta Health Services. I turned it down because my pension was important. I felt secure in it. I felt that it was worth investing in. Now, like I said, the Alberta government wants to change all the rules without consulting us."

Roxann Dreger, RN,
Grande Prairie, June 18, 2014

pension plan and of managers in the system who do not serve the sick, their families, and the province on the front lines of health care, as nurses, who are mostly women, do,” Smith stated during a public hearing in Edmonton.

The committee is expected to make a recommendation about the disposition of the bills in October. This could include dropping them, amending them or proceeding with them as planned by the government last year.

If passed, Bill 9, the Public Sector Pension Plans Amendment Act, 2014, would have allowed the Progressive Conservative government to gut the pensions of front-line public sector workers, including UNA members. The impact would have been most severe for younger workers entering the workforce, and would have particularly severely impacted professions and occupations like nursing care that are dominated by women.

Bill 10, the Employment Pension (Private Sector) Plans Amendment Act, 2014, would have allowed private companies to arbitrarily introduce changes to private sector plans similar to those envisioned for public employees in Bill 9. 🍷

“These pensions are not a gift. They’re not a golden parachute. They’re not a bundle of money at the end of a rainbow. They’re certainly not the generous severance packages given to senior bureaucrats or government officials when they leave service or even get fired. They are investments. They have been contributed to over the length of a career ... and behind me over the length of 300,000 careers. They are by no means a tax burden. In fact, pension plans are deferred income. They are money that we have already made.”

Larry Connell, RN,
Calgary, June 23, 2014.



CARNA flu immunization survey results expected in September

In late June, all members of the College and Association of Registered Nurses of Alberta were contacted by the regulatory body and asked to take part in a consultation on influenza vaccination policy.

United Nurses of Alberta encouraged UNA members to participate in the CARNA consultation.

The consultation, through an online survey form, ended on July 20 and CARNA now expects to publish the results of its questionnaire at its Provincial Council meeting Sept. 25 and 26 in Edmonton.

CARNA said the process had four steps:

- Inviting individual members to respond to open-ended questions about the issue
- Prioritizing the comments they provided
- Inviting the survey participants to review the prioritized comments and indicate the degree to which they agree or disagree
- Providing a report on the outcome of the consultation 🍷

Your employer may be 'creeping' your Facebook account!

By Dave Cournoyer
UNA Communications Advisor

MOST employers have strict guidelines regarding social media and some UNA locals have recently received emails from management regarding proper use of social media. Alberta Health Services has stated in their Social Media Policy that non-compliance with their policy may result in disciplinary action up to and including termination of employment.

A hearing tribunal of the College and Association of Registered Nurses of Alberta recently reprimanded an RN who posted inappropriate comments on social media that identified the nurse's profession and workplace. While the comments were intended to be humorous, the tribunal found they conveyed a lack of compassion for patients.

This stance is not unique to health care employers. In May 2014, the courts ruled in *Canada Post Corp.* and *Canadian Union of Postal Workers* that an employee's offensive or inappropriate Facebook posts about the workplace or employer could lead to their dismissal where it goes beyond acceptable criticism and is accessible to co-workers or the public.

UNA members should avoid breaching the privacy of their patients, co-workers, residents and clients when posting photos or comments about them online. Even by not using a name, the circumstances posted may identify the person.

In order to protect your privacy, it is recommended not to identify your workplace or profession on your social media account. If you have concerns about your workplace or employer and wish to discuss them with like-minded members, UNA members are invited to speak with their UNA local, login to UNA-Net or contact their UNA Labour Relations Advisor.

Because of increasing incidences of workplace issues arising from personal actions on the Internet, it is more important than ever for UNA members to understand privacy settings and employer guidelines around social media usage. If you are using Facebook, Twitter, Instagram or any other social network, it is important to understand your online responsibilities as a member of the nursing profession.

A document produced by the Canadian Nurses Protective Society about online responsibility is available on UNA's website. Please read it and become familiar with these recommendations around social media use.

UNA members should also ensure privacy settings on their social media accounts are set to appropriate levels. 🍷

On the United Nurses of Alberta website, you will find information about the UNA-Net. This system allows UNA members to access their own UNA email account, internal resources, and online discussion forums in a closed online environment. UNA can also be found on Facebook at [facebook.com/UnitedNurses](https://www.facebook.com/UnitedNurses) and on Twitter at twitter.com/UnitedNurses.

Dave Cournoyer, Communications Advisor, is UNA's social media specialist and frequently speaks to labour groups on effective social media communications.



UNA education provides opportunities for activists

ANY UNA member who wishes to become more active in their union can get a head start through a provincial education workshop.


Run by UNA educators, full-day workshops provide a wealth of information and hands-on experience. This year, workshops have been held in all districts – and will continue to be scheduled through to the end of the year.

Participants in provincial workshops must be UNA members. Once you have a valid membership card, set up your UNA-Net account. The Events tab provides a convenient way to register for workshops. Members are expected to register in the workshops.

This year's workshops, subject to per-requisites, include:

- Executive/Local Function (provincially funded)
- How to Run a Local – Administration (open to new Local Executive members)
- How to Run a Local – Member Engagement (open to new Local Executive members)
- Treasurers' Workshop (open to Local Executive members and District Reps)
- PRC workshop (open to PRC Committee members)
- Occupational Health & Safety Basic and Advanced workshops (open to OH&S Committee members)
- Grievance Workshop (open to Grievance Committee members)
- Unit/Office Rep Workshop (open to Unit/Office Representatives)
- Dealing with Abuse (open to all UNA members)
- Know Your Rights (open to new UNA members)
- Computer Education (not provincially-funded)

In addition, UNA educators offer mini-workshops on such topics as Duty to Accommodate, Generational Diversity, Human Rights, Workers' Compensation Board, and Contract Interpretation. Requests for mini-workshops may be made to UNA's Director of Labour Relations.

For more information on funding and salary replacement, course requirements and procedures for Local Executive members, as well as a detailed list of times and locations, contact: events@una.ab.ca or visit www.una.ab.ca/events. 

Changes coming to Nurses Planner in 2015 and beyond


AS usual, United Nurses of Alberta's Nurses' Planner will be available to members in the fall.

For 2015, in a change from recent past practice, the front section of the Planner will contain a complete list of benefits available to UNA members who are covered by the Provincial Collective Agreement.

After 2015, bigger changes are slated for the planner, which since 1994 has been produced in partnership with a private-sector company.



In the past two years, the company has exercised its right under the longstanding contract with UNA to sell advertisements, a change that has created some administrative problems and, in a few cases, has been controversial with members.

As a consequence, UNA has made the decision to produce the planner entirely on its own, with no advertisements, as soon as the contract allows. This may require changes in the format of the Planner after the 2016 edition. 

Second VP Daphne Wallace calls for new Edmonton hospital



Alberta NDP Health Critic David Eggen, centre, speaks as Health Sciences Association of Alberta Vice-President Mike Parker, Canadian Union of Public Employees Alberta President Marle Roberts, United Nurses of Alberta Second VP Daphne Wallace and Alberta Federation of Labour Secretary-Treasurer Siobhan Vipond look on.

UNITED Nurses of Alberta Second Vice-President Daphne Wallace joined leaders of other health care unions at a June 30 news conference at the Legislature to call for work to begin on a new hospital to replace the Misericordia Hospital in West Edmonton.

“The Misericordia Community Hospital has been there for a long time, and Covenant Health and the staff work very hard to maintain proper conditions,” Wallace told the news conference, which was organized by the provincial NDP. “But the city is growing, capacity is shrinking and the hospital is falling apart. We need a new Mis now!”

The physical state of the Misericordia hospital, which was opened at its present site in 1969, is well known. Wallace recounted some of the recent stories of flooding in heavy rain storms, non-functional elevators, holes in the floor of a delivery room that cause both health and safety hazards, and temperatures in some wards so high staff and patients have been reduced to tears.

In addition, she noted, like almost all hospitals in Alberta, the facility is regularly in a state of overcapacity, a problem that became particularly severe after the cut-backs to public health care by the Klein Government in the mid-1990s.

“We can no longer look at just putting Band-Aids on it,” she told a reporter, adding that both the age-caused physical problems with the building and its regular bouts of overcapacity put both patient and staff health at risk.

“We can no longer look at just putting Band-Aids on it.”


—Daphne Wallace

The New Democrats launched the public campaign calling for an immediate commitment from the provincial government to build a new hospital in the city’s west end. New Democrat Health Critic David Eggen noted at the news conference that between January 2013 and February 2014, the Misericordia hospital’s overcapacity protocol was triggered 576 times.

“The government needs to make a responsible decision and commit to building a fully functioning hospital that has enough space to accommodate our province’s growing population,” Eggen said.

“The Mis has served the community very well,” said Wallace. “It’s time now to plan for the future. And it’s important that as we progress with plans, there’s input from front-line workers like nurses.”

The campaign calls for the government to make a public commitment to building a new Edmonton Hospital in the area to replace the Misericordia, and to establish an expert planning committee now to start working on plans.

Albertans can make their voices heard by visiting www.newmisnow.ca and signing the petition for a new hospital in West Edmonton. 

UNA members at Royal Alex Hospital chalk up PRC successes



UNITED Nurses of Alberta members at locals throughout Alberta are successfully using the PRC process to push back against understaffing, both of Registered Nurses and other job classifications.

For example, more than 80 Medicine Unit Professional Responsibility Concerns were taken to the Board Level by Local 33 President Darlene Kulhawy and 2nd Vice-President Lonee Rousseau at the Royal Alexandra Hospital, resulting in an increase of 10.2 FTEs on these units.



UNA Local 33 President Darlene Kulhawy and Vice-President Lonee Rousseau

That's less than a third of the 35.36 FTEs the local asked for, said Kulhawy, but it is meaningful movement in the right direction. "We are still working on getting more of these FTEs, and we have also had increases in support staff by 10 FTEs for Health Care Aides and eight FTEs for Licenced Practical Nurses."

Kulhawy said the local also filed a separate site-wide PRC on overcapacity beds. As a result, there is a commitment to reopen a unit at the Royal Alex to accommodate overcapacity patients, rather than distributing them throughout other units and further overloading staff on those units.

"We feel this will be a significant improvement," said Kulhawy, with 15 new overcapacity beds available on this unit.

She said 39 neonatal intensive care PRCs were presented to the Chief Executive Officer of Alberta Health Services, all relating to unsafe staffing levels affecting infants, the most vulnerable patient population.

"We had asked for 28.17 FTEs for baseline staffing determined on the increased acuity of the babies on that unit of 66 beds," she said. "An additional 10 FTEs were requested

to ensure adequate staffing for calculated and projected vacations for this unit, so that casuals and extra hours worked would only be covering sick calls and special days off. Our total request was for 38.17 FTEs.

"We were also able to show that more than 66 beds were in use more than 50 per cent of the time, so we asked for additional beds to accommodate babies throughout the zone," Kulhawy said, noting that Alberta's economic and population booms suggest the surge in babies will likely continue – and with it the need for neonatal intensive care FTEs.

"In the end, after two meetings, we have achieved a total of 26.52 FTEs, as well as commitment by the employer to engage in detailed program planning to address the increased demand for neonatal services in the Edmonton Zone and the North Sector," Kulhawy noted.

She said the local worked with the site PRC Committee after members raised concerns they had been bullied for filing PRCs. They implemented a site-wide PRC teaching program.

The local PRC committee works with managers on each unit, who are required to be present at these staff meetings to support the process of teaching members why and when to write PRCs.

"We ask that members try to resolve issues first if possible, and, if they can't, to speak with a manager," Kulhawy said. "If the situation is not resolved then, they should file a PRC."

"Of course there is more work to be done before we resolve these PRCs in the different programs, but we are very pleased with our results so far," she concluded. 🍷



AFTER THE FLOODS: Thanks To High River's nurses, the community's in good hands

By Dewey Funk
UNA OH&S Advisor

High River Hospital, one year later ...

BARRICADES blocked the street and pumps were pouring water over black plastic sand bags. The rain was pouring and the river was high and rising. ... It was June 2014 and Claresholm was flooding.

The next day, I met with members of United Nurses of Alberta Local 80 at the High River Hospital. It just happened to be the day before the first anniversary of the massive floods that hit southern Alberta – with the community of High River hardest hit – when nurses and other health care workers became trapped inside the town's hospital.

In June 2013, when the water started to flow into the hospital, the nurses and health care workers stayed at their units, moving patients and medical equipment to higher floors.

Because of rising floodwaters, the next shift of nurses was unable to get to the hospital.

Among the nurses who remained in the hospital, there were mothers who could not get home to their children and did not know if their loved ones were safe. Phone lines were down, including the emergency line in the hospital. Only mobile networks were operational, and a single cell phone was passed around among the staff.

That night, several acute-care patients were evacuated by air. Nurses and other health care workers stayed to care for their patients and a rotation was drawn up along with patient assignments.

Issues quickly arose, such as where were the staff going to rest during their breaks. Patients and equipment were relocated to the second and third floors. Patients had restricted meals but staff had little to eat.

The nurses said a few doctors made it into work the next morning, including one who rode in on the front-end loader of a tractor, adding a whole new meaning to the concept of rural health care! Then the decision to evacuate all patients from the hospital was made.

Some nurses worked up to 36 hours straight when the floodwaters hit High River. As patients were moved out of the hospital, decisions were made among the staff that mothers with children would be the first to go home.

Because the hospital was closed, some nurses, firefighters and Emergency Medical Technicians organized a triage center at the High River fire station for residents who needed health care.

Nurses advise that Alberta Health Services managers made sure they were aware of what the managers knew. Nurses also acknowledge that time off was given to all health care workers who were directly affected by the flooding.

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High River Hospital



In the flood zone.

For their part, the nurses kept their colleagues informed of what was going on, when to report for work, and who needed help by setting a private Facebook Page. Ingenious! Debriefings were also offered in the fall.

Nurses who were not affected by the flood were dispersed to other sites where High River Patients had been dispatched.

I asked the nurses what could be learned by this experience.

They advised developing a better communication system so all health care workers could stay in touch with the outside world. There was also concern that higher levels of management were not communicating well with site management. One thought the answer was a satellite phone. Another suggested better use of social media, especially Twitter and Facebook.

Volunteers set up the triage station! But there should have been a plan in place about where to locate the triage station in the community if a disaster happens. Medical supplies also need to be allocated for this purpose.

Another question that needs to be answered: Who feeds the care-givers? They shouldn't have to get by on chocolate bars!

I asked if anyone who was dispersed to another site decided not to return to High River. The answer: Everyone came back. How could they not?

I asked how they were now. There was silence for a bit, this was about them, how they were, a tough question for a nurse to answer. After the pause the reply given was "Nurses are trained to care for others. It's hard to accept help"

I asked what they gained from this experience.

Responses varied: Deeper friendships, greater recognition of the value of community and family, and a deeper appreciation of High River.

I asked: Where do you see High River in five years?

The answers: High River will thrive. It will again be a vibrant community. There will be a younger demographic. And with families, the community will be even stronger. "You see we're all family now."

As I left High River, the river waters were still rising, but the rain was tapering off. It looked like this time everyone was going to be OK. With the positive attitudes of the nurses I met, High River is in good caring hands. 🍷

UNA to award 10 nursing scholarships plus one from CFNU

UNITED Nurses of Alberta will be awarding 10 nursing scholarships of \$1,000 each (sponsored by UNA), and one award of \$1,000 (sponsored by the Canadian Federation of Nurses Unions) this year, to assist students in their first year of studies in an approved nursing program in Alberta.

The students must be related to a UNA member in good standing, complete an application form and write a short essay on the topic: “How does the United Nurses of Alberta advocate for members?”

Visit UNA’s online Scholarship and Grants page – found on the UNA website, www.una.ab.ca – for more information regarding the scholarship as well as a printable copy of the application form.

Completed applications must be received at the UNA Provincial Office no later than 4:30 p.m. on October 15, 2014. Digital or faxed applications will not be accepted. Award recipients will be announced in early February 2015. 🍷

Alberta companies get green light to underpay TFWs: AFL

THE wages of Canadians continue to be undermined by the federal government’s Temporary Foreign Worker Program, documents obtained by the Alberta Federation of Labour indicate.

The internal documents show that Ottawa approved companies to underpay thousands of TFWs in 2013, and that the impact was “deliberate, pervasive and not limited to a few sectors of the Canadian economy.”

Acting behind closed doors, the federal government “knew the rules were being bent and broken, and they knew thousands of TFWs were being underpaid and used as pawns to drive down wages for all Albertans,” AFL

President Gil McGowan said at a news conference in Calgary on August 15.

In 2013, the AFL’s figures showed, the federal government approved the hiring of 3,718 TFWs across Canada in low-skill categories that could easily have been filled by Canadians. Of those approvals, the vast majority were in Alberta – 2,122 of them.

Among the job categories in which employers were allowed to pay TFWs less than Canadian citizens were health care workers, nursing aides, truck drivers, shipping personnel, metal fabrication labourers, service station attendants, desk clerks, delivery drivers, equipment operators, and other labourers. 🍷

AFL calls death of youth in Drumheller a tragic reminder

ALBERTA'S child, youth and adolescent labour laws are among the worst in Canada, the AFL said after the death of a 15-year-old youth in a July 19 industrial accident near Drumheller.

The boy, who was nearing his 16th birthday, died at a Drumheller gravel pit when an article of his clothing became entangled in the equipment he was operating, news reports at the time said.

“Alberta’s child labour laws are among the most lax in Canada,” said AFL Secretary-Treasurer Siobhan Vipond. “The AFL has repeatedly made recommendations to improve working conditions and safety standards, specifically for young workers. This tragic news is yet another reminder that much more needs to be done to keep Albertans safe at work.”

She noted that not long ago, the province launched a review of Alberta’s workplace laws. “But the first item up for review was a question about expanding child labour,” she observed. “Instead of rushing more young workers onto potentially unsafe work sites, we need to keep young workers

safe. Today, Alberta is one of the most unsafe places for young people to work.”


The AFL’s submission on April 11, 2014 to the Employment Standards contained several pages of recommendations on young workers.

The AFL has repeatedly made recommendations to improve working conditions and safety standards, specifically for young workers.

“Alberta needs targeted inspections of workplaces that employ 15-17 year olds, especially in construction and other comparatively dangerous occupations,” Vipond said.

A recent survey showed 49.7 per cent of 797 adolescents surveyed had experienced at least one workplace injury in the previous year. For 15-17 year olds, the research has shown young workers are particularly vulnerable to abuses in the workplace, such as illegal deductions, unsafe work, handling of hazardous materials and sexual harassment.

For that reason, the AFL continues to call for a program of targeted inspections and mandated health and safety instruction for employers who hire 15-17-year-old Albertans.

Alberta must also review whether some industrial activities such as forklift operation and construction work should be prohibited for adolescents, the AFL says. 



Actor and voice-over artist Janice Ryan records part of United Nurses of Alberta’s Labour Day radio advertisement in an Edmonton studio in August. The radio ads emphasizing the professionalism and knowledge of UNA members played throughout Alberta in the period around Labour Day.

New study shows Canada's need for national pharmacare program

A new study by a Carleton University School of Public Policy and Administration professor illustrates why Canada needs to develop a national pharmacare program.

Canada's current hybrid prescription drug system isn't working. Instead it's unfair, inequitable and wastes vast amounts of money, says the report by Dr. Marc-André Gagnon released by the Canadian Federation of Nurses Unions on August 20.

The study, called *A Roadmap to a Rational Pharmacare Policy in Canada*, shows that Canadians pay among the highest per capita costs for prescription drugs, when compared to other OECD countries.

As a result, one in 10 Canadians is unable to fill medical prescriptions because we pay among the highest costs for prescriptions, the report said. This places Canada among the countries with the most acute problem accessing prescription drugs.


The problem is that Canadian drug coverage is offered based on where a person works or lives, instead of accounting for their medical needs, the study shows.

Efforts to contain rising costs so far have only shifted costs elsewhere within the system, Dr. Gagnon's said.

The study highlights four practical, achievable reforms that would improve Canadians' access to prescription drugs:

1. Including prescription drugs in the public health care system
2. Establish a national "formulary" – an authoritative list of medications approved for prescribing
3. Systematic bulk purchasing of patented and generic drugs
4. National assessment of the safety and effectiveness of prescription drugs

Dr. Gagnon said a universal pharmacare program could generate savings of 10 to 41 per cent on prescription drugs for the Canadian public health care system, representing savings of up to \$11.4 billion per year, while simultaneously improving health outcomes.

A recent EKOS survey showed that 78 per cent of Canadians favour establishing a universal pharmacare program in Canada. 

Shirley Stickney remembered as mentor, activist, inspiration

By Karen Craik, UNA Secretary Treasurer

SHIRLEY Stickney was a union activist for many years, a mentor to young nurses and an inspiration to all of her co-workers at the Grace Hospital in Calgary.

Shirley served as Treasurer of Local 47 at the Grace from its time of certification in 1977 until her retirement in 1995, the year before the hospital was closed in the Klein Government's massive cutbacks to health care.


In her role as a mentor both as a Staff Nurse and a Local 47 member, I will always remember Shirley's



work ethic, her infectious laugh, her union activism ... and her petty cash box!

Born in Farran's Point, Ont., she graduated from the Cornwall General Hospital School of Nursing in eastern Ontario in 1955 before relocating to Alberta. Shirley took some time off to raise her family before returning to nursing in 1974 at the Grace.

Outside nursing, Shirley was an avid quilter, seamstress and doll maker. She loved to travel.

Shirley passed away on April 29, 2014, in Calgary. She is survived by five children and nine grandchildren. 

Easy to print receipts and permits: **CARNA**

Professional Associations **UPDATE**

PROFESSIONAL Associations

Update is a regular feature for UNA members on developments at the College and Association of Registered Nurses of Alberta, the professional association for Alberta RNs.

The College and Association of Registered Nurses of Alberta reminds new members and members who have renewed their applications that they will need proof they have paid their membership fees when they file their tax returns or submit a claim to their employer for reimbursement.

CARNA says these can be easily obtained from the organization’s MyCARNA service.

Members will receive an email notification from CARNA that their application has been approved. At that time, they may sign it at CARNA’s website – www.nurses.ab.ca – and click “My Receipts” at the top of the page.

CARNA warns that some employers may not accept the order confirmation you receive upon submitting your application, “so we encourage you to submit it the official tax receipt available once your application has been approved.”

If you have any further questions about the process of submitting your receipt for reimbursement from your employer, please contact UNA or your employer.

If you applied for a retired or associate CARNA membership, you can access a receipt of payment from MyCARNA. These are not official tax receipts, however, due to the type of membership. For more information, please check with the Canadian Revenue Agency or consult a tax professional.

CARNA renewal date

So far, more than 80 per cent of CARNA members responding to the association’s online poll rated their renewal experience this year as “good” or “very good,” and more than 85 per cent said the improvements addressed their concerns.

Improvements included faster processing times, redesigned forms, more renewal assistants and extended call-centre hours. “We know it’s not perfect and we’re already looking at ways to make your renewal experience even better next year,” CARNA said.

In future editions of NewsBulletin, UNA will be providing members with updates from CARNA and the College of Registered Psychiatric Nurses of Alberta (CRPNA). ❧

CARNA renewals by the numbers (as of August 7, 2014):

5,329

applications submitted in response to more than

Average renewal submissions submitted per day –

296

Average number of phone calls received per day by CARNA help centre –

130

Approximate number of emails received daily –

90

35,000

renewal notices sent

Average wait time to speak to a “renewal assistant” on the phone –

30
seconds

Percentage of members reporting no errors in their renewal applications –

65

* Source: CARNA

Canadian Nurses Association chooses new president-elect from Alberta

CALGARY Registered Nurse Barb Shellian was chosen as President-Elect of the Canadian Nurses Association at the group's annual meeting June 16 in Winnipeg.

In 2016, she will become president of the national organization, which describes itself as the professional voice of Registered Nurses throughout Canada with a mission to advance the practice and profession of nursing to improve health outcomes and strengthen Canada's publicly funded, not-for-profit health system.

Shellian is director of community and rural health for Alberta Health Services' Calgary-Bow Valley Zone and served as Alberta representative on the CNA's board from 1995 to 1997. She was also a member of the Canadian Network of Nursing Specialties from 2006 to 2008, her CNA biography says.

On her CNA bio, Shellian said she is "passionate about the role CNA plays at the national and international levels in supporting safe, competent and ethical nursing care. I believe that CNA is a relevant force for nursing, uniting nurses to act in the public interest."

She also expressed her optimism about the future of nursing in Canada "because of the people in the profession.


"The goal of nursing will not change – to assist people, families and communities to achieve optimal health, wellness and independence." 

Photo courtesy of Teckles Photography Inc.



Planning to retire?

PLEASE LET US KNOW!

ARE you a United Nurses of Alberta member who plans to retire in the next year?

If so, please let us know.

UNA would like to recognize your years of service by including your name in a slide showing list of retirees at its future Annual General Meetings. The 2014 AGM takes place Nov. 18-20 in Edmonton.

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If you are planning to retire in 2014 or 2015, please contact UNA Reception at 1-800-252-9394. 

National pharmacare program could save Canadians \$11.4 billion a year

By Anil Naidoo, Canadian Federation of Nurses Unions

SUMMER may be slow for politics, with most MPs back in their ridings, but one big event is the annual Council of the Federation, where Canada's premiers meet to discuss a broad range of issues facing provinces.

This year the Council will be held in Charlottetown, hosted by P.E.I. Premier Robert Ghiz. For the past two years progress has been made by provincial governments to reduce prescription drug costs. Provinces agreed to limited cooperation on a handful of commonly used drugs. This initial step resulted in savings of more than \$200 million per year.


The Canadian Federation of Nurses Unions encourages more such cooperation. CFNU has asked the federal government to support a pan-Canadian pharmacare program. The savings from such a comprehensive program could be as much as \$11.4 billion per year, according to research by Dr. Marc-Andre Gagnon of Carleton University. Canada is the only developed country with universal health care that does not have universal pharmacare. Adopting universal pharmacare would allow investments in our health care system to deal with an aging population.

According to research by Dr. Michael Rachlis for CFNU, if provinces reinvested the savings from lower prescription drug costs into home care, community health, long-term care and human resources, we could add 80 million more home visits each year, hire 28,000 more nurses, build 725 new community health centres and open 10,000 more long-term care beds. This would represent a major investment in the quality and timeliness of care for Canadians, requiring no additional funding.

While this has encouraged provinces to work together to reduce costs, without federal engagement, there will never be the cross-Canada pharmacare program we need.

CFNU will again be at the Council of the Federation working with provincial governments that seek to improve our public health care system. The federal government of Prime Minister Stephen Harper has cut transfers to provinces equivalent to a \$36-billion reduction over 10 years.

While this has encouraged provinces to work together to reduce costs, without federal engagement, there will never be the cross-Canada pharmacare program we need.

In the lead-up to the next federal election, Canadians must stand up for health care and stand with governments that are willing to take the steps needed to ensure our public health care system is there for Canadians, now and into the future. 



CANADIAN
FEDERATION
OF NURSES
UNIONS

WHEN KNOWLEDGE MEETS KNOW-HOW

green corner

Environmentally sensitive lawn care advice: go bagless!

Fall may be coming soon, but if you own a house with a lawn, you'll likely be mowing a few more times before the snow flies.

Going bagless – leaving grass clippings on your lawn – can be good for the environment and easier for you without sacrificing the health of your lawn, the City of Edmonton is advising residents.

The advantages of “grasscycling” include keeping lawn soil moist, adding a natural fertilizer, cutting water use and reducing your typical household contributions of greenhouse gas emissions by a quarter. Plus, you'll save yourself the work of hauling 50 to 60 bags of grass to the curb in a normal season, not to mention the cost of bags for the clippings.

This has the potential to reduce fertilizer use by 25 per cent, the city says. Plus, “if everyone in Edmonton grasscycled, the water saved from reduced lawn watering would fill 327 Olympic sized swimming pools.”

“If everyone in Edmonton grasscycled, the greenhouse gas emissions saved would be equivalent to taking 4,329 cars off the road,” says the city's web page on the topic – found at www.edmonton.ca/for_residents/composting_grasscycling/grasscycling-benefits.aspx. “Setting grass out for collection in Edmonton produces 10 times more greenhouse gas emissions than grasscycling.”

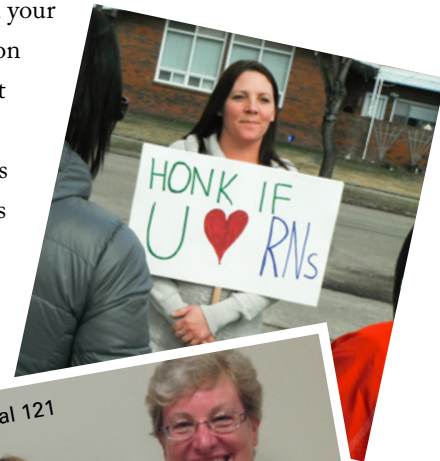
Green corner, on environmentally friendly topics likely to be of interest to UNA members, is brought to you by the Education, Communication and OH&S Committee.

Wearing white is still important

Don't forget to wear white on Wednesdays! UNA members are encouraged to wear white on the job to show support for their nursing profession.

By wearing white, or by wearing your Registered Nurse or Registered Psychiatric Nurse pin, your patients, residents, clients and their families will easily recognize when they are receiving care from the RNs and RPNs working on their unit.

Share photos of you and your colleagues wearing white on Wednesdays and we might include them in future editions of the UNA News Bulletin. Send your photos to dcournoyer@una.ab.ca or post them on UNA's Facebook Page. 🍷



Know your Rights

Report from Director of Labour Relations **David Harrigan**



UNA members who left work after 2013 may be eligible for lump sum payments and retro pay

UNITED Nurses of Alberta members whose employment has ended for any reason before the new Provincial Collective Agreement is signed are nevertheless eligible to receive retroactively any increases they would have been eligible for in the agreement if they'd remained on the job.

However, under Article 1.03 of the current agreement, which is unchanged in the new contract, they must make a written application to the employer within 90 calendar days of the signing of the agreement.

This means any Alberta Health Services, Covenant Health, Lamont Health Care or Bethany Group (Camrose) employee who worked in 2013 and has since left their employment is entitled to the 2013 lump-sum payment. If they also worked in 2014, they will in addition be eligible for retroactive pay.

The latest Provincial Agreement – which runs from April 1, 2013, to March 31, 2017 – had not yet been signed at press time. UNA expects the agreement to be signed in mid-September. Members will be reminded on UNA's website – www.una.ab.ca – of the need to submit their letter to the employer within 90 days of the signing when it happens.

In the case of Alberta Health Services, the employer has not yet named an official to whom these letters should be sent.

Until AHS makes that decision, eligible former AHS employees should send their letters informing the employer that they were eligible employees during 2013 and/or 2014 and are eligible to receive the lump-sum payment and retroactive pay by postal mail to the following AHS contacts, for whom an email address is also provided. Please also send a copy to UNA.

- Doris Stewart – Corporate Zone
Doris.Stewart@albertahealthservices.ca
- Rhonda Fletcher – South Zone
Rhonda.Fletcher@albertahealthservices.ca
- Deb Jacobsen – Calgary Zone and Cancer South
Deb.Jacobsen@albertahealthservices.ca
- Helen Olfert – Central Zone
Helen.Olfert@albertahealthservices.ca
- Reagan McKay – Edmonton Zone and Cancer North
Reagan.McKay@albertahealthservices.ca
- Courtney Mury/Adele Morrison – North Zone
Courtney.Mury@albertahealthservices.ca
- Jim Burger – Lamont Health Centre
Jim.Burger@albertahealthservices.ca

Former employees of Covenant Health should send in writing their request for retro pay to any Covenant Health Human Resources Office. Former employees of Bethany Care (Camrose) should send their letters to their respective CEOs.

UNA will continue to monitor this situation and if another official is appointed to handle these letters or a procedure different from that described is set up by the employers, UNA members will be informed as soon as possible on UNA's website and social media channels. This information will also be posted in the FirstClass "News" Conference.

UNA members who are aware of former employees who may qualify for these payments are encouraged to contact both UNA, 1-800-252-9394, with the name and their former co-worker with the information if possible. 🍷

United Nurses of Alberta presents the 16th Annual

Rainbow GALA

in support of The Rainbow Society of Alberta

SWEET RETREAT

Friday **OCTOBER 3** 2014

DOORS 5:00 PM
DINNER 6:30 PM
DANCE 9:00 PM

*Beverly Hills Ballroom
Fantasyland Hotel*

TICKETS

\$80 Each or
\$720 for Table of 10
To order tickets call
780-263-1613
or email rainbowgala@una.ab.ca



**The
Rainbow Society
of Alberta**

UNA
United Nurses of Alberta

JOHNSON



UNA
Local 301

The Rainbow Society of Alberta is a registered charity dedicated to fulfilling wishes for Alberta children diagnosed with a chronic or life-threatening illness. CRA #12998 8275 RR001