

UNASTAT

UNITED NURSES OF ALBERTA NEWS UPDATE FOR MEMBERS

January 11 vote on negotiation proposals

- Members from all Locals covered by the Provincial Collective Agreement will be voting on the in-going proposals on Thursday, January 11. The proposals come from motions passed at the provincial Demand Setting Meeting.

Locals have been holding information meetings to review the proposal packages with the members. The proposals are all confidential.

If the package is approved in the vote the UNA Negotiating Committee will present it to employer representatives on January 23.

That exchange of proposals kicks off the talks. UNA and Health Boards of Alberta Services (HBA Services) have already booked 29 meeting days over the next three months. The objective is to reach a settlement by the date the provincial contract expires March 31.

The contract had been a three-year term, beginning in April 2003, but nurses voted to extend it a further year. Contracts with many long-term care employers and the Alberta Cancer Board will also be expiring at the same time, and negotiations with these other groups will begin shortly as well.

Capital Health nurses voting on five separate proposals

- Also on January 11, Capital Health Region nurses will be voting on several other proposals, agreements that the Capital Health Bargaining Unit Committee (CH-BUC – all the Locals) have reached with the Region.

One is a proposal to donate a bit over \$42,000, money that came from de-mutualization of insurance plans, to the Alberta Council of Women's Shelters.

A second proposal is for a dues levy of \$1 per member per pay period for each of the Capital Health Region Locals.

A third proposal would standardize benefits, including insurance and supplementary health benefits for all nurses in the Region. That involves small "harmonizing" changes to the benefit plans.

A fourth proposal is a Letter of Understanding to offer up to \$4,000 for wages and costs for nurses to take critical care or emergency certificates. The nurse must agree to a "return of service commitment" to work in the Region for at least one year.

Finally, there is a question on how to handle money from Employment Insurance, which comes back to nurses because of short and long-term disability benefits. The question will be: "Do you agree that the EI premium reduction will be returned to the CHBUC for distribution to the Locals for the benefit of all employees that the reduced rate applies to?"

Detailed information on all these questions is available from all Capital Health Locals.

Shortage of nurses closing beds in Calgary

- News reports came out over the past few weeks that Calgary Health Region has closed up to 30 beds because of a lack of nurses and doctors. "The single most critical issue facing the CHR is the health-care workforce," said Calgary CEO Jack Davis. He is also reported as saying the short-term plan is to increase efforts in retention and recruitment of staff.

Calgary recruiting 50 international nurses

- The Calgary Health Region recently informed UNA it plans to recruit 50 international nurses. The recruitment initiative comes under a Letter of Understanding in the Collective Agreement that allows for "Extraordinary Temporary Positions for International Recruitment" (page 180 of the provincial agreement).

Aspen begins mentoring retention plan

- Aspen Health Region has announced a plan to mentor new nurses for three-months. The Region hopes the program for "newly qualified" nurses will help them over the new job bumps and help the Region retain their new recruits.

The program will team up experienced nurses, who get a special short mentoring orientation, with new graduates or refresher nurses coming back to the profession. The nurses will be new employees, in regular positions of 0.5 FTE or more. For the first three months of the position they will be partnered full-time with their mentor and will not be included in the regular staff count.

Not all vacant nursing positions can be mentored. Job competitions for mentored positions are labeled as "may be eligible for the Nursing Mentorship Program."

Aspen Health Region had met with UNA Local representatives from specific Aspen areas to create the program. The program is a response to the constant shortage of RNs the Region experiences.

LRB rules nurses in mental health are in HSAA

■ In December the Alberta Labour Relations Board finally ruled on which union the mental health nurses in the East Central Health Region belong to. After nearly two years since the issue was first raised, the Board ruled the nurses are in the Health Sciences Association of Alberta (HSAA).

Job descriptions for the mental health positions include the qualification of Registered Nurse, but the Board nonetheless ruled the nurses are in HSAA.

Sharon Goodman-Popowich, President of UNA Local #42 in Vegreville says the nurses are a great loss to the Local, where they were very active.

Hardisty wage re-opener talks continue

■ Nurses with Hardisty Long-term Care Centre in Edmonton are back in negotiations with a “wage re-opener” clause for the second year of their contract. Their two-year collective agreement runs until the end of 2007, but the wages for this second year are now being negotiated. An initial meeting in December was inconclusive but a further session is set for January.

Britain faces severe nurse shortage

■ Leaked government documents forecasting a glut of National Health Service (NHS) specialists and an acute shortage of nurses have created controversy in that country. A draft workforce strategy from the Department of Health said the NHS in England is forecasting shortages of 14,000 nurses, 1,200 GPs and 1,100 junior doctors, enough to cause serious disruption of services to patients. It also predicts a surplus of 3,200 specialists by March 2011 and there would also be 16,200 too many therapists, scientists and technicians.

Officials admit that government policies are contributing to huge swings in demand for staff. After a 2.7% cut in the workforce in the current financial year to eliminate NHS overspending, there will be a recruitment surge to prepare health services to meet a December 2008 deadline to reduce maximum waiting times to 18 weeks. Demand for nurses and doctors would then dip after the deadline passes.

The document proposed radical changes to doctors’ gradings, local bargaining to reduce nurses’ pay in low-wage areas and the deliberate use of unemployment to “create a downward pressure on wages”.

Stelmach puts priority on health workforce shortages

New Premier Ed Stelmach made some of his plans for health care public in December with his series of letters to his new cabinet ministers. Stelmach’s letter to new Health and Wellness Minister Dave Hancock asked him to:

- Implement health care productivity reforms and long-term sustainability initiatives in consultation with health care professionals and regional health authorities.
- Implement a comprehensive workforce strategy to secure and retain the health professionals needed over the next 10 years.
- Implement a new pharmaceutical strategy to improve the management of government drug expenditures to ensure that Albertans have access to sustainable government drug coverage.
- Strengthen public health services that promote wellness and injury and disease prevention and provide preparedness for public health emergencies.

Stelmach also had priorities for seniors, which included expanding long-term care and improving the standards of care.

Pneumonia cases break out in homeless communities

■ In December, the Calgary Health Region, working with agencies serving Calgary’s homeless population, began a targeted pneumococcal vaccination program in response to recent cases of a serious form of pneumonia. In addition to pneumonia, these cases involve bacterial infection of the blood, resulting in severe illness. This illness is similar to cases that have recently occurred in Vancouver, where the local health region has undertaken a similar vaccination initiative.

Parkland Institute: Whose boom is it anyways?

The Parkland Institute is hosting a special talk about who is really benefiting from the booming Alberta economy as part of a major conference in Edmonton early in February.

Parkland’s Research Director Diana Gibson is working with one of Canada’s best-known social policy researchers, Armine Yalnizyan to look at Alberta’s boom. It is unclear how much Alberta’s citizens have benefited, they say. In spite of strongly rising GDP, Alberta’s family incomes have not risen significantly in over 20 years.

Their talk is 7:30 pm, Wednesday, February 7 at the Lister Conference Centre at the University of Alberta in Edmonton.

The presentation is part of Forgotten Families: a conference on globalization and the health of Canadians. The February 6-8 conference brings together population health researchers from across the country. Their work will focus on how globalization affects social determinants of health for low-income families in Canada’s major cities.

For more information: www.ualberta.ca/PARKLAND/forgotten/index.html or call Parkland Institute at 780 492-8558.
