

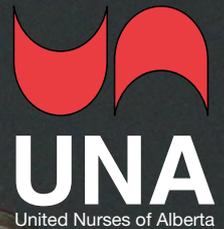
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News Bulletin

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WILL PROTECT
LAPP MEMBERS**

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It Matters! Advocacy matters in 2019, particularly as nurses face federal and provincial elections

AS I write this, the threat of snow is in the air. This reminds us that it will not be long before the holiday season is upon us, and then a New Year with the potential for big challenges for United Nurses of Alberta and its more than 32,000 members.

In late October, UNA held its 41st Annual General Meeting. The theme for this important meeting as we enter our union's 42nd year was "*It Matters!*"

In my remarks to the AGM's delegates and other participants in the meeting – more than 1,000 of them in the huge hall at the EXPO Centre in Edmonton – I asked them what they plan to do about the issues we are sure to face in 2019.

Because the threat of snow is not the only thing in the air. There's a hint of elections to come as well. There will likely be a provincial election next spring and a federal election next fall. So I asked delegates to the AGM what I believe may be the most important question of 2019: *Will we be bystanders or advocates?*

This is a serious question. UNA takes very seriously its tradition of being a non-partisan organization when it comes to politics. At the same time, from the platforms already emerging in both the provincial and federal jurisdictions, we know that some politicians are more likely to protect and enhance the things we believe in as an organization than others.

This includes Canada's great system of fair and efficient public health care – or perhaps I should say public *hospital* care. So it also includes the need for Canada to finally develop a similarly fair and

efficient public pharmacare program, so that Canadians can truly be said to have a public *health care* system.

Ultimately, these are political questions. That means while UNA must continue to be non-partisan, we cannot fail to recognize there are differences in the platforms of political parties, those differences matter to nurses – and therefore nurses deserve a balanced analysis of those policies.

So we recognize there are political aspects of the work to preserve health care, to extend it through pharmacare, and to protect our own members' pensions. Our nearly 30 year pension fight is a good example. It has finally come to fruition as the Alberta government moves to keep the promise made more than a quarter century ago to restructure our Local Authorities Pension Plan into an independent entity jointly governed by employees and employers, the people who contribute to it. Bill 27 is a key step toward protecting and preserving the quality pensions for which UNA members have fought to hard. This could not have happened without a tough *political* fight by all public sector unions and the Alberta Federation of Labour.

In my AGM remarks, I thanked UNA's many activists and advocates for their tireless efforts over the years. *Your willingness to be advocates in our workplaces truly matters.*

THE BEST OF THE SEASON
TO EVERY ONE OF YOU.

Heather Smith
Heather Smith
President, United Nurses of Alberta

FRONT COVER PHOTO: Samantha Prokopetz (left) and Kaylee Lanuke (right), members of UNA Local 65 at Oilfield General Hospital in Black Diamond

ALBERTA INTRODUCES LAW TO GIVE EMPLOYEES AND EMPLOYERS CONTROL OF THEIR PENSIONS



Important representatives of Alberta's public sector unions pressed the government to implement joint governance of public sector pensions. From left to right, at a reception after the introduction of Bill 27: Elisabeth Ballerman, former president, Health Sciences Association of Alberta; Mike Parker, HSAA President; Tom Fuller, retired AUPE pension advisor; Marle Roberts, CUPE Alberta President; Trudy Thomson, HSAA Vice-President; Siobhan Vipond, Alberta Federation of Labour Secretary-Treasurer; Christina Gray, Labour Minister; Joe Ceci, Finance Minister; Gil McGowan, AFL President; Heather Smith, UNA President; Richard West, UNA pension advisor; Craig MacDonald, Alberta Firefighters Association President; and Elizabeth Johannson, Non-Academic Staff Association President.

Historic legislation will take the politics out of pensions, finance minister says

■ **IN** an historic development preceded by decades of work by United Nurses of Alberta and other unions, the Government of Alberta has introduced legislation that will give control of Alberta's public sector pensions to employees and their employers.

"This takes the politics out of pensions," Finance Minister Joe Ceci told a news conference immediately after the *Joint Governance of Public Sector Pension Plans Act* was introduced in the Legislature on November 20.

The act proposes a joint governance structure like that in other provinces for three of Alberta's largest pension plans – the Local Authorities Pension Plan (LAPP), in which the majority of UNA

members are enrolled, the Public Service Pension Plan (PSPP), and the Special Forces Pension Plan (SFPP).

The action by the NDP Government to put the pensions under joint governance fulfills a promise made nearly 30 years ago by a previous government and brings Alberta into line with a best-practices approach to pension governance that is in the mainstream of Canadian pension governance.

By removing the government as the "sole trustee" of the plans, the change eliminates the temptation by governments to meddle with the money working Albertans in enrolled in the plans have saved for their retirements.



Karen Kuprys

The action by the NDP Government to put public sector pensions under joint governance fulfills a promise made nearly 30 years ago by a previous government.

□ CONTINUED ON PAGE 13



Election of president and secretary treasurer, speeches, and important union business marked **2018 AGM**

■ **MORE** than 1,000 Registered Nurse and Registered Psychiatric Nurse leaders, member observers, staff, and others attended United Nurses of Alberta's 41st Annual General Meeting in Edmonton on October 23, 24 and 25. The theme for 2018 was, "*It Matters!*"

Among the most important business of the annual gathering of UNA members was the election by acclamation of Heather Smith as president of the union – her 16th consecutive two-year term.

President Smith's 30th anniversary as UNA's leader was marked in a short video in which Labour Relations Director David Harrigan recalled the day 30 years ago, when still a member, he suggested to Smith she consider running for vice-president because he planned to run for president.

Things didn't work out quite as he expected, he remembered wryly, but it was the beginning of a successful three-decade professional collaboration

that has seen dramatic improvements in the contracts negotiated for UNA members.

Secretary Treasurer Karen Craik was re-elected to a fourth term in a contested election. Susan Fisk from Local 1 was acclaimed as the new South Central District representative.

In addition to reports from Smith, Craik and other UNA officials, the delegates heard speeches by Alberta Premier Rachel Notley, Health Minister Sarah Hoffman, Alberta Federation of Labour President Gil McGowan and Children's Services Minister Danielle Larivee – a Registered Nurse and former UNA Local president before her election in the 2015 Alberta general election.

After extended debate, elected delegates to the 2018 United Nurses of Alberta October 23-25 Annual General Meeting overwhelmingly passed a motion to implement an incremental increase of UNA union dues, from 1.3 per cent of gross earnings to 1.5 per cent. UNA's last previous dues increase was 17 years ago in 2001.

The increase will allow UNA to increase the size of its Collective Bargaining Fund and maintain services to members in response to such factors as growth in union membership, increasingly complex collective agreements, rising demand for member services, and significant legal changes such as the requirement to negotiate Essential Services Agreements in addition to Collective Bargaining Agreements. 🍷



President Heather Smith's remarks: DECISIONS MADE AT UNA AGM HAVE A SIGNIFICANT IMPACT



■ **“WILL** we be bystanders or active advocates?” That was the key question posed by UNA President Heather Smith as she opened the United Nurses of Alberta’s 41st annual general meeting in Edmonton on the morning of Tuesday, October 23.

“There will be a provincial election next spring and a federal election next fall,” she told the more than 1,000 delegates and others who gathered in Edmonton’s EXPO Centre convention hall. UNA’s members will need to be more than just bystanders.

Members need to recognize there are differences in the platforms of political parties, and those differences matter to nurses, she said. They will need to think about those differences when they vote.

Summarizing highlights of UNA’s previous year, Smith pointed to the push-back in 2018 by the union’s members “in

the face of overcapacity and inadequate resources” at their health care worksites.

She gave a shout-out to members of UNA Local 2 at Red Deer Regional Hospital and their Professional Responsibility Concern Committee “who have forced Alberta Health Services to be held accountable for the jeopardy they have created to patient safety.”

Across Alberta, she said, UNA has worked to ensure employers and managers respect and use the PRC process that is part of the Provincial Collective Agreement, and that they recognize it “as a valuable element of patient safety.”

Smith acknowledged the commitment of Covenant Health to the PRC process, and the real movement toward a similar commitment by AHS.

Alberta Health Minister Sarah Hoffman speaks with a UNA member at the 2018 AGM.

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**2018 ANNUAL
GENERAL MEETING:
IT MATTERS!**

Labour Relations Director David Harrigan outlines case file details for delegates



Director of Labour Relations David Harrigan delivers his annual report at the UNA AGM.

■ **UNITED** Nurses of Alberta dealt with significant numbers of grievances, arbitrations, regulatory college disciplinary actions, Occupational Health and Safety complaints, and Professional Responsibility Concerns from August 1, 2017, to July 31, 2018, UNA Labour Relations Director David Harrigan told delegates during the union's October 23 AGM.

Grievances

UNA filed 890 grievances in the period, Harrigan said. That compares with 967 grievances in the same period a year earlier.

He noted that UNA continued to work with Alberta Health Services to implement improvements to grievance processing, including drafting documents to assist union Labour Relations Officers and employer Human Resources staff to resolve conflicts.

UNA and AHS have been working together on this since 2017, when they implemented a successful

case-management process that has resulted in a streamlined dispute resolution with many settled in their early stages.

“While UNA will continue to work on improving the timeliness of resolutions and hearings, this progress is a solid foundation,” Harrigan said.

Recent grievances dealt with have involved the employer's obligation to provide CPR training to employees returning from disability and maternity leaves; blanket vacation denials in High Level, Fort Vermilion and La Crete; and disputes involving notice for employees returning from long-term disability.

Arbitrations

Harrigan noted there were seven grievance arbitration hearings in the period, compared with 10 the previous year. A total of 29 hearings were scheduled but were resolved before the hearing took place. That compared with 48 the previous year. Three arbitration awards were issued.

Arbitrated issues included termination, entitlement to retro pay for education allowances, pension entitlements at Shepherd's Care and Good Samaritan Society, and appropriate classification.

Regulatory College Discipline

Harrigan said the College and Association of Registered Nurses of Alberta (CARNA) made strides in 2017 toward an expedited complaints process under the leadership of a new complaints director.

UNA had noted an apparent move away from the Complaint Resolution Agreements (CRAs) early in 2018.

However, he said, CARNA now appears to have recommitted itself to the use of CRAs. “UNA will continue to monitor the timeliness and fairness of the CARNA process under new leadership,” he said.

UNA opened 142 complaints with nurses’ professional regulatory associations in the reporting period, compared to 193 in 2016-2017.

Professional Responsibility Concerns

The new Provincial Collective Agreement ratified in early 2018 included the most significant changes to the Professional Responsibility Article since the language was first introduced in the 1980s, Harrigan told delegates.

New steps include options to request voluntary mediation, refer unresolved issues to an external Independent Assessment Committee, and use the agreement’s grievance process to resolve breaches of written agreements.

The first two voluntary mediation PRC meetings were held in early October 2018.

UNA and Covenant Health continued to work together to develop new resources to help UNA members, staff and PRC Committees identify best practices for each step of the PRC process.

The new resources, launched at a series of joint information sessions at Covenant Health worksites in May, are available on UNA’s website and app. UNA and AHS hope to roll out joint PRC best practice guidelines this year.

Occupational Health and Safety

UNA received 222 Occupational Health and Safety complaints in 2018. That compared with 178 between the DMS

tracking system’s launch in May until end of July the prior year.

OH&S Officer Dewey Funk facilitated 12 days of workshops on Dealing with Abuse, OH&S Basic and OH&S Advanced, Harrigan noted, and made presentations at June’s UNA District Meetings on the new Alberta OH&S Act.

UNA made 15 OH&S presentations to the AHS CEO or designate, Harrigan noted, and Funk attended 37 local OH&S committee meetings.

“Dewey is also a presence at Provincial AHS Labour-Management OH&S Meetings, AHS co-chair teleconferences, security meetings, AHS Senior WHS Director meetings, Covenant Health OH&S Director meeting, CFNU National OH&S Committee, CFNU Violence in Health Care discussions, Alberta Federation of Labour OH&S Committee meetings, and Government of Alberta OH&S Policy and Compliance Directors meetings,” Harrigan said.

In one of the year’s OH&S highlights, UNA met with Deputy Premier and Health Minister Sarah Hoffman on April 4 to discuss the challenges of Form 10 patients being admitted to sites that are not Designated Sites under the Mental Health Act.

Other Files

UNA opened 73 disability benefits files in the reporting period, compared with 80 a year earlier. UNA has closed 70 of these 153 files.

UNA opened 43 Workers Compensation Board files in the period, compared with 36. The union has now closed 38 of 79.

UNA opened 188 accommodation files in the period, compared with 111 a year earlier, and has now closed 159 of the 299. 





Scenes from the
2018 UNA AGM.



□ CONTINUED FROM PAGE 5

“I am not naive, and I know that saying management will respect and encourage nurses to identify Professional Responsibility Concerns is not an end, it is a beginning,” she added. “Actually having ‘just culture’ in our workplaces, where speaking-up and Professional Responsibility is valued, will not happen overnight. But it will never happen unless we hold management accountable for the commitments they have made.”

Smith also spoke of UNA’s commitment to the momentum for a national pharamacare program – supported by a coalition of more than 70 national organizations that includes UNA and the Canadian Federation of Nurses Union.

And she praised Alberta Federation of Labour President Gil McGowan for his work to ensure the promise made nearly 30 years ago by a previous government to members of the Local Authorities Pension Plan, a group that includes most UNA members, to move the LAPP to

independent employee-employer joint trusteeship, a key step toward protecting and preserving quality pensions for UNA members.

Smith also acknowledged the personal contribution of UNA’s hundreds of member-advocates. “I know very well that for some of those advocates the personal toll on their health and well-being is much more than any resolution will ever compensate for,” she said. “It is an unacceptable price for doing what we must do – advocating for healthy workplaces and safe patient care.”

“Our willingness to be advocates in our workplaces does matter,” she concluded. “From the care provided today to our patients, residents and clients, to the environment, and the challenges of climate change. ... *Advocacy matters!*” 🍷

Nursing experience makes effective politicians, Children's Services Minister Danielle Larivee tells AGM



■ **INSTEAD** of a traditional speech, Children's Services Minister Danielle Larivee told delegates attending UNA's AGM the story of how she "made the leap from front-line nursing to being a minister in cabinet."

The transition to political life is in fact a natural one for Registered Nurses, Larivee argued, because not only do "politics matter very, very much to nurses," but "nursing prepares you pretty well for this job."

"You are an advocate for your patients and your residents," Larivee said. "Nurses also can do that at the political level."

Nursing taught her many skills, moreover, that have proved worthwhile in public life. "Listening skills learned way back in nursing school have been tremendously valuable to me in politics."

Nursing also teaches problem solving and critical thinking. "Whether you're making a decision at the bedside, or making a policy decision about a ministry, those problem-solving skills that you learned in nursing come back," she said, recalling at how political co-workers marvel at how calm she remains when problems appear larger than life.

Larivee noted that attention to detail, adaptability, confidence, stamina, time management, the desire to learn and patience are all skills taught by nursing – and all valuable in political life. And she described the inspiration she got from nursing leaders like UNA President Heather Smith and Canadian Federation



of Nurses Unions President Linda Silas, who also brought greetings to the AGM.

But she also emphasized her strong belief in her own party's policies – and why she chose to run for the NDP rather than another party as her involvement in UNA as an activist and local president grew. "I came into it with a framework and an understanding I was a nurse – always to stay focused on the fact that I was there to serve. I've been able to do things that matter to thousands of people."

"So, yes, politics matters," she said. But "it matters who is in political office," too.

The NDP's continued commitment, she said, "is to protect, sustain and advance a *public* health care system."

Regardless, though, she concluded, "the value of having a nurse at the cabinet table is that we bring the perspective of nursing to government." 🇨🇦

"I came into it with a framework and an understanding I was a nurse – always to stay focused on the fact that I was there to serve."

- Danielle Larivee

AFL PRESIDENT OFFERS ADVICE TO POLITICIANS: SUPPORT WORKING PEOPLE

■ **GIL** McGowan, president of the Alberta Federation of Labour, had some advice for politicians in his remarks to the United Nurses of Alberta AGM: “If you want support *from* working people, you should offer support *to* working people!”

McGowan summed up his concerns about the hints Albertans have heard about the policies the United Conservative Party would be likely to implement if it forms government next year – since not much actual policy has been outlined by the UCP and its leader, Jason Kenney.

Unions and their members don’t support the NDP government of Premier Rachel Notley “because we bleed orange or because someone is coercing us,” McGowan told the AGM delegates. “We support and vote for them because they

support and vote for the values and priorities we’ve embraced for years.”

“If you want our support, start supporting public health care and stop supporting cuts and privatization,” he said, rhetorically addressing Kenney. “Support pharmacare and stop opposing the extension of the medicare umbrella.”

After listing policies that tend to be favoured by conservative parties he argued would hurt working people, McGowan vowed that “we in the labour movement will continue advocating for laws and policies that are good for working people.

“And we’ll keep voting for candidates and parties who embrace and deliver those things,” he concluded. 🇺🇦

Scenes from the
2018 UNA AGM.
Top right: UNA pension
expert Richard West.



30 YEARS OF LEADERSHIP

by Heather Smith acknowledged



■ **ON** the final day of the 1988 United Nurses of Alberta Annual General Meeting, October 20 that year, delegates from throughout the province elected Heather Smith as president of the union.

At the 2018 AGM, First Vice-President Jane Sustrik briefly interrupted the proceedings for an impromptu tribute to the leadership of Smith, who has been president ever since.

“That length of service is uncommon, maybe even unheard of for the president of a union,” observed Sustrik. “Heck, it’s almost unheard of for the president of any company or organization.”

“Heather, I know you don’t like this kind of recognition, but too bad,” she said. “I have the chair and you deserve the acknowledgement.”

“We have been so fortunate. We have a strong, fierce leader who has guided us through some good times and some difficult times – the Klein years, massive cutbacks and layoffs, the ‘Third Way,’ the attack on pensions, downsizing, upsizing, decentralizing, workforce transformation, scheduling optimization, collaborative care, benchmarking, operational best practices, bending the cost curve ...” Really, Sustrik observed, the list of euphemisms to sugarcoat cutting corners to save money is pretty long.

The point is, despite those challenges, UNA has become a formidable force under Smith’s leadership, Sustrik said.

“You have been fearless, courageous, diplomatic, tough, quick-witted, and loyal to this membership and nurses across Alberta,” she concluded before business resumed. 🍷

“That length of service is uncommon, maybe even unheard of for the president of a union.”

Jane Sustrik

UNA President
Heather Smith.



Nurse's struggle to change pension regulations will help others with shortened life expectancy

■ **NOT** long before her untimely death on November 7, more than 1,000 nurses paused during United Nurses of Alberta's October annual general meeting to thank Colleen Kovaluk for her successful effort to allow Local Authorities Pension Plan members with shortened life expectancy to access their benefits while remaining members of the plan.

The necessary changes to the regulations governing the LAPP would never have happened without Kovaluk's effort, First Vice-President Jane Sustrik told the AGM. "She worked tirelessly to get that through."

Kovaluk, a Registered Nurse in Alberta for more than 30 years, was diagnosed in 2015 with Amyotrophic Lateral Sclerosis, an incurable disease that over time destroys the ability of its victims to walk, talk, eat, swallow and eventually breath. It was a week before her 60th birthday.

Colleen Kovaluk remembered.



As Kovaluk's condition worsened, her husband Peter Chan retired early to assist with her care. But the situation, Kovaluk wrote shortly before her death, began to take a heavy financial toll.

"Due to the fact I was diagnosed with a terminal illness and receiving long-term disability benefits, I was ineligible to collect my LAPP pension funds that I had put away throughout my nursing career," she wrote. "I thought, 'I cannot be the only terminally ill person that this has happened to.' That's when I began to contact people to help me figure out what could be done."

At first, explained Chan, the couple were told the answer was not much. "They just looked at us and said, 'Good luck.'" The LAPP Regulations would have to be amended, they were told, which would require the approval of the LAPP Board and the Finance Ministry.

But over time, a determined Kovaluk pressed on, arguing an exception needed to be made to accommodate plan members coping with a terminal illness who needed financial relief. She met with LAPP officials, Alberta Government officials, UNA, the ALS Society of Alberta, and Finance Minister Ceci.

In March 2017, Kovaluk received a letter from the executive director of the Alberta Pensions Services Corp. saying the LAPP Board had agreed in late 2016 to recommend to Ceci the LAPP Regulation be amended to permit pension plans to be unlocked for persons with considerably shortened life expectancy. The letter ended, however, by noting that the minister had not indicated if further action would be taken.

□ CONTINUED ON PAGE 27

Speaking to the news conference, UNA member Karen Kuprys, a Registered Nurse at the Youville Home in St. Albert and a member of Local 154, told the news conference that “it’s great the promise of joint trusteeship of our pension plan made by the government almost 30 years ago has finally been honoured.”

“As a nurse and a front-line health care worker, at times I have been concerned about my retirement security ... with attacks on our pension,” said Kuprys, who has been an RN in Alberta for 25 years and is enrolled in the LAPP.

“Four years ago, I was one of the thousands of Albertans who stood up for retirement security,” she said. “We wrote letters to the finance minister, called our MLAs, and rallied in minus-30-degree weather against changes the former government tried to impose that would have put our retirement security at risk.”

“This change now removes politics from the decision-making process,” Kuprys said. “The integrity of our pension plans is now something that we won’t have to worry about.”

“I want to be able to always focus on the wellbeing of my patients,” she said.

During UNA’s annual general meeting in October, Premier Rachel Notley tipped delegates and others that the legislation would be introduced during the fall session.

She reminded the AGM of the threat posed to UNA members’ pensions in

2014 by legislation brought forward by Conservative Premier Alison Redford’s government that would have undercut the retirement plans of many public employees.

Those changes were eventually stopped after weeks of protest by members of UNA and other public employees, the premier said, adding that the NDP wants “to ensure that you have joint governance of your pension plan because it is only right.

“You deserve your seat at the table, and you deserve an equal say on your pensions and your future,” Premier Notley said

Under joint governance, a Sponsor Board made up of nominees from employee and employer sponsor organizations will govern each plan and be responsible for plan design.

The legislation will also establish new LAPP, PSPP and SFPP corporations responsible for the overall operation of the plans, with a fiduciary responsibility to act in the interests of plan members.

The government anticipates transition to the new model of joint governance to take place on March 1, 2019.

Go to www.alberta.ca/joint-governance-pension-plans.aspx for background information on the Joint Governance of Public Sector Pension Plans Act from the Government of Alberta. 🍷

“The integrity of our pension plans is now something that we won’t have to worry about.”

-Karen Kuprys RN



UNA President Heather Smith, at left, and First Vice-President Jane Sustrik, at right, with Alberta Premier Rachel Notley.



Violence in health care is a global phenomenon; **it needs to stop!**



By Linda Silas
President, Canadian
Federation of Nurses Unions

■ **THE** story of Lori Dupont sends chills down the spines of even the most seasoned nurses and front-line health care workers. Lori was a nurse at a hospital in Windsor, Ont., in 2005 when she was stabbed to death by a physician in her workplace.

While this is an extreme outcome of violence in health care workplaces, the circumstances that led to Dupont murder are by no means unique.

Health care workers across Canada and around the world are grappling with everyday violence in multiple forms, violence made worse by belt-tightening measures that turn up the pressure on front-line workers to manage more and more patients.

This reality was clear during the recent proceedings of the Sixth International Conference on Violence in the Health Sector. Experts from around the world gathered in Toronto to share their successes in proactively preventing violence, while recognizing much more needs to

be done to address the everyday violence that makes workplaces dangerous for both caregivers and patients.

The conference, held every two years in locations around the world, was co-hosted this year by the Ontario Nurses' Association, the union that represented Dupont.

ONA President Vicki McKenna spoke about how Dupont's murder spurred ONA to pursue change relentlessly. That work eventually led to the Ontario government creating the Workplace Violence Prevention in Healthcare Leadership Table, which tabled its report last year.

Nurses' unions across Canada have been making similar gains through collaborative approaches to tackling violence by bringing governments, employers, police and their own members on side to change the culture of health care workplaces from top to bottom, recognizing the essential role of health care leaders in organizational transformation.

This groundbreaking work is happening at the local and provincial level, but there is also a vital role to be played in tackling this issue on a national stage. That's why the Canadian Federation of Nurses Unions has created an online Workplace Violence Toolkit, to share a range of resources for policy-makers, employers, unions or anyone seeking to create change.

The need for more concerted action to spread best practices and inspire change extends to the federal government, which has an opportunity to show much-needed leadership on this issue.



JUNE 2017

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Haze of uncertainty surrounds CANNABIS IN THE WORKPLACE

■ **AMONG** the public sentiments that accompanied the recent legalization of recreational cannabis in Canada was uncertainty among workers about workplace implications.

Workplace policies and procedures on impairment, accommodation, occupational health and safety, and training need to be reconsidered in light of the new legal terrain.

For better or worse, federal labour laws, which apply to federally regulated workplaces, provided no guidance. Workplace policies to date have been wildly inconsistent.

The policy released by the Department of National Defence, for example, prohibits the military from using cannabis within eight hours of duty, 24 hours for those handling weapons or involved in firefighting or medical response. RCMP officers in so-called “safety-sensitive” roles must abstain from non-medicinal cannabis a full 28 days before reporting to work.

For health care workplaces, the issues get messier as policies try to navigate the potential for patient and employee use of medical and recreational cannabis. In such a confusing haze (so to speak), how can workplaces strike a fair balance between the interests of public safety and the rights of employees?

The Canadian Federation of Nurses Unions (CFNU) has developed guiding recommendations about medical and

recreational cannabis that were released to coincide with legalization.

In general, the CFNU supports a public health approach to cannabis and recommends nurses “be provided with sufficient resources and training to acquire the necessary knowledge, skills and judgment to assist with the administration of medical cannabis, and to educate and respond to the public with respect to the health implications of recreational cannabis.”

Where nurses may be exposed to cannabis at work, they must have “appropriate training and have access to recommended personal protective equipment (PPE).” Furthermore, “the risk of exposure to smoked cannabis must be included in safety policies, which need to provide for a non-consumption period prior to nurses entering a patient’s residence or resident’s room.”

Nurses’ unions are strongly opposed to random drug testing, a position that is generally supported by existing case law. The CFNU recommends employees who use medical cannabis should be accommodated in a way that mirrors existing practices for employees taking prescribed medications “that have the potential to impact or impair their work.”

While more clarity will doubtless emerge in the months following legalization, the CFNU encourages health care workers confronting improper training, lack of access to PPE, unsafe working conditions or whose right to accommodation is not respected, to contact their union. 🍷



By Lauren Snowball
Canadian Federation
of Nurses Unions

For more information,
visit NursesUnions.ca
or contact UNA.

WE'LL NEVER END WORKPLACE VIOLENCE IN HEALTH CARE IF HEALTH WORKERS WON'T REPORT IT

By Dewey Funk
UNA, OH&S Advisor

■ **ENDING** violence in health care should be a simple task. After all, society doesn't tolerate physical or sexual assaults in any other occupation. And health care is a huge employer in Canada with many worksites – the Government of Alberta alone budgeted more than \$22 billion dollars for health care this year.

In 2017, the Canadian Federation of Nurses Unions put together a discussion paper called *"Enough is Enough: Putting a Stop to Violence in the Health Care Sector."* When it was released during the 2017 CFNU biennial convention in Calgary, President Linda Silas stated: *"Violence is not part of our job"*

Nevertheless, the Canadian Institute of Health Information (CIHI) surveyed 19,000 regulated nurses and found about a third of them had suffered physical abuse over the previous 12 months. In long-term care, the findings were worse,

with about 50 per cent reporting physical abuse by patients in the same period.

On April 28, observed annually as the International Day of Mourning for workers killed, injured or sickened on the job, United Nurses of Alberta President Heather Smith called on employers to ensure there is security in every active patient care facility across the province.

On June 1, Alberta's new Occupational Health and Safety Act became law. Part 27 of the Act, *Violence and Harassment*, was strengthened. Employers are now required to institute harassment and violence prevention policies. Domestic violence in the workplace is also finally recognized as a workplace hazard.

Despite these improvements, though, this legislation does not go far enough. There is still nothing in the law requiring employers to institute adequate training or ensure security is readily available for workers who face violence.

UNA OH&S Advisor
Dewey Funk



UNA ASKS ALRB TO SEND NURSE PRACTITIONER REPRESENTATION CASE TO SINGLE HEARING

■ **IN** late October, the Government of Alberta withdrew its intention to intervene on the constitutional issues raised by United Nurses of Alberta's application to the Alberta Labour Relations Board for a determination it can represent Nurse Practitioners employed by Alberta Health Services.

Recently I went to four rural UNA worksites in a single week. The complaints I heard most often were that the employers could not ensure availability of security on site when required. This left nurses in unsafe working conditions.

It is amazing to me that this remains the case in health care when so many industries hire security guards routinely to protect worksites from vandalism and theft. Oil companies regularly do this. Yet when we consider violence in health care, there are rural sites across the province with either limited security on site or none at all. Employees at these sites have to call the RCMP for support – if the Mounties are available.

I have been told in response to my concerns that AHS must consider its budget and get the best value for its limited resources, that security on site isn't always the best option. I have been told that while the presence of security employees may be a deterrent, just because there is security on-site doesn't mean violence will end. It always seems to boil down to the budgets.

Obviously, it's time for the government of Alberta to instruct health care employers to ensure that a greater portion of the \$22.1 billion we spend on health care is allocated to security at facilities to ensure health care workers are safe to do their jobs, and patients and their families are safe as well.

Please report all incidents of violence using MySafetyNet (MSN).

When you don't report these incidents, there is no record.

You have the right to ask for the MSN investigation report from your employer. If more employees asked for these investigation reports, I believe employers would be forced to act to end violence. Under pressure, they might come up with better solutions.

The employer uses MSN reports to determine if security is needed. If employees fail to report incidents of violence, the employer can claim there is no evidence. So, please, *start reporting!* 🍷



When you don't report these incidents, there is no record.

Health care workers have a right to a safe workplace!

In a letter to the ALRB sent on November 1, lawyers for UNA accordingly asked the Board to confirm the union's understanding this indicates no one is prepared to defend the constitutionality of the current exclusion of Nurse Practitioners in the Alberta Labour Relations Code.

If so, UNA requested that the Board reconsider its previous direction that the application be bifurcated, with one part dealing only with the constitutional matter, and direct the case proceed to a single hearing as earlier proposed by UNA.

In a separate letter, UNA's legal counsel asked the Board to add the name of a second Nurse Practitioner to its application, which was originally brought by the union and Nurse Practitioner Jessica Wakeford. Rochelle Young, a Nurse Practitioner for five years, asserted that the sections of the Code that prohibit Nurse Practitioners from bargaining collectively violate her right to freedom of association as protected by the Canadian Charter of Rights and Freedoms.

Copies of the letters are available in the Nurse Practitioners' application section of the UNA website, una.ab.ca. 🍷

Find more information at una.ab.ca/nursepractitioners



UNA'S FIRST VOLUNTARY PRC MEDIATION

yields partial success and hope for improvement

■ **UNITED** Nurses of Alberta has taken part in its first voluntary mediation to resolve a longstanding Professional Responsibility Concern under the process outlined in Article 36 of the union's new Provincial Collective Agreement.

UNA views the process involving Covenant Health's Community Geriatric Psychiatry Program as a partial success, said PRC Advisor Joshua Bergman. Five of seven specific union recommendations were agreed to during the October 4 mediation, and agreement was reached on how to deal with two others over a longer time frame, he explained.

The mediation stemmed from PRCs filed about problems in the program, which serves seniors throughout the Greater Edmonton area, beginning in 2013 when demand for seniors' community mental health services began to grow enough to require a wait list for the first time.

Nurses in UNA Local 11 in west Edmonton, where the CGP Program is based, first filed PRCs in June 2013, noting reduction of services, excessive case-loads, clients waiting up to five weeks for assessments, and technology concerns. Since then, as the wait list continued to grow, nurses were required to work at overcapacity.

An additional PRC was filed in 2014 and the process continued into 2015, when UNA requested a meeting with Covenant's CEO. That meeting took place, but many of Local 11's concerns remained unresolved.

As a result, in 2016 UNA requested a meeting with Covenant's governing board, which also failed to bring resolution. Last year, UNA President Heather Smith wrote Health Minister Sarah Hoffman outlining the unresolved concerns.

Hoffman responded in December 2017, explaining the government's priorities, and throughout 2018 there have been communications between UNA and Covenant on the status of the employer's ongoing review of the service.

In May 2018, UNA made the formal request for voluntary mediation under Article 36 of the new collective agreement.

At the end of the October 4 meeting, the parties had agreed to:

- Post and replace all vacant positions in the program in a timely manner, making efforts to ensure a two week overlap for orientation, and if possible, hiring casual staff to help cover illness or other leaves.
- The Employer will revisit the program providing post-hospital follow up to all Edmonton area hospitals with inpatient mental health units. Currently, the program only provides post-hospital follow up to patients discharged from Villa Caritas and the Glenrose.
- The parties will work together to provide a psychologically safe work environment for all staff.

UNA President Heather Smith wrote Health Minister Sarah Hoffman outlining the unresolved concerns.

□ CONTINUED ON PAGE 20

Floating hospital brought mercy, inspiration to Africa,

CALGARY NURSE RECALLS

■ **BACK** from a recent mission aboard the *Africa Mercy*, Registered Nurse Donna Maxell of United Nurses of Alberta Local 115 in Calgary describes the heart-break and inspiration she felt as a volunteer in Cameroon, a part of Africa where people usually cannot access Western standards of treatment and care.

Volunteering for most of April in the port of Douala aboard the hospital ship as a Post Anesthesia Care Unit nurse, Maxwell described *Africa Mercy's* mission as one of “bringing hope and healing to the forgotten poor.”

“To see the extent of damage and disability caused by diseases in developing countries, many of which cannot be imagined by the average Canadian, was heartbreaking,” Maxwell wrote in her report to UNA after receiving a \$1,000 humanitarian grant to assist her volunteer work. “But to witness the extraordinary work done on the ship was remarkable. I saw joy and beauty, rejoicing and radiance in the patients’ journey to recovery.”

Africa Mercy, a 150-metre former Danish ferry, has five Operating Rooms, an Intensive Care Unit, an isolation bed, and a 78-bed patient ward. It is operated by Mercy Ships, an international Christian medical charity founded in 1978.

Offering life-saving and life-changing surgeries, Mercy Ships provides free health care, community health education, plus community development and agricultural projects, Maxwell wrote.



Common procedures include ophthalmic, orthopedic, obstetric, plastics and maxillary facial surgeries, as well as dental care, often extractions.

“It was wonderful to be a part of such a devoted, selfless, cheerful, hardworking team,” Maxwell recalled. “At all levels they did their best to bring health and healing to Africa, always taking into consideration patients’ cultural beliefs with a goal of directing a patient’s journey to the best physical and emotional health possible.”

Maxwell traveled alone to her volunteer mission but was aware of nurses and other medical professionals from Alberta and Canada aboard this year. “At one point, I heard half the workers on the ship were Canadians.”

She concluded her letter of thanks to UNA: “Was there sadness? Yes, some. But so much more joy and a belief in a better day. It renewed my faith in the medical community and a belief that miracles do happen.” 🍷

More information on Mercy Ships International, a registered charity in Canada, is available at MercyShips.ca.



NEW Collective Agreement includes commitment for implementation of psychological safety plan

■ **ACCORDING** to the Canadian Mental Health Commission, in any given year, one in five people in Canada will experience a mental health problem or illness. The cost to the economy is estimated to be in excess of \$50 billion.

Accordingly, UNA's latest Provincial Collective Agreement contains an important addition: a commitment by employers and the union to implement a psychological health and safety plan consistent with the current Canadian Standards Association Psychological Health and Safety in the Workforce Standard.

"Aspects of this plan relevant to a particular workplace may be reviewed annually by the Occupational Health and Safety Committee," Article 34.05 of the agreement states.

The voluntary set of psychological health and safety guidelines, tools and resources published by the Canadian Standards Association in 2013 had the goal of

promoting employees' psychological health and preventing psychological harm at work, noted Marie Dancsok, a UNA Labour Relations Officer with expertise in psychological health and safety in the workplace.

Psychological safety in the workplace grew out of research into violence in the workplace and the effort to provide workplaces free from violence, Dancsok said.

The document – which is available online from the Canadian Standards Association – discusses in detail such topics as preventative and protective measures; education, awareness and communication standards, critical event preparedness; competence and training standards; reporting and inspection processes; monitoring and measurement; and prevention.

In laypersons' terms, Dancsok explained, a psychologically safe workplace is defined as one that permits no harm to employee mental health as a result of negligence, recklessness or intentional actions. 🍷

UNA Labour Relations Officer Marie Dancsok.



□ PRC SUCCESS CONTINUED FROM PAGE 18

- The Employer will endeavor to make staff assignments that allow allied health disciplines the ability to perform discipline specific consults.
- Implement an Employee-Management Advisory Committee (EMAC) to provide an ongoing mechanism to deal with outstanding and new concerns.
- On October 1, 2019, the union will revisit if it believes an increase of FTE is still necessary and if so, a new PRC may be filed.

Unfortunately, Covenant did not agree to adding more RN/RPN full-time

equivalents – as managers had indicated they would do during discussions in 2014 and 2015.

However, the parties agreed to continue to try to resolve those issues through the EMAC.

"We are hoping this will be a step toward a more collaborative relationship and that the soon-to-be-established EMAC will provide a fresh start for everyone," said Local 11 President Stephanie Taylor.

"The work is not done yet, but we would not have gotten this far without you," she said in a message to Local members. 🍷

CONTRACT QUIZ

UNA Labour Relations Officer Katie McGreer continues to create entertaining and educational puzzles for readers of UNA NewsBulletin. Here's her latest, a quiz about UNA's Provincial Collective Agreement that asks readers to find the statement that is false. Warning: There's one trick question, with two false answers.

TWO TRUTHS AND A LIE: GETTING TO KNOW YOUR COLLECTIVE AGREEMENT!

Two statements in each category are **true**. One is false. See if you can use your NEW collective agreement to figure out which is false before checking the answers. Answers are found on Page 26.

HOURS OF WORK	A	B	C
	If you request to work permanent nights you can revert back to a shift pattern with days, evenings and/or nights at any time.	If your manager asks you to be readily available for work during your lunch break, you will be paid at straight time.	If your manager changes your schedule but does not give you at least 14 days' notice, you will be paid 2X your basic rate of pay.
SENIORITY	A	B	C
	In-scope employees lose seniority if there is a six month break in their continuous employment.	RNs lose their seniority if they move from AHS to Covenant.	During line selection, a senior RN does not have priority on the unit for vacant lines of a different FTE.
VACANCIES, TRANSFERS & PROMOTIONS	A	B	C
	If there is a vacancy of 0.4 FTE or more on a unit, this FTE cannot be broken up and offered to RNs on the unit in order of seniority.	Seniority is the deciding factor in making promotions and transfers.	If an RN accepts a management position, the RN's vacancy will be posted as a temporary vacancy for up to 18 months.
LEAVES OF ABSENCE	A	B	C
	If one of your immediate family members dies, you may take a leave of absence. If you take the leave right away, you will not lose out on your pay.	Your Employer does not pay you wages while you are on parental leave.	You are entitled to one half day of leave with pay to attend a citizenship ceremony.
PROFESSIONAL DEVELOPMENT (PD)	A	B	C
	You are only entitled to three PD days annually.	If you are required to attend an education or in-service on your day off, you will be paid for a minimum of three hours at 2X your basic rate of pay.	If you must travel to attend compulsory staff development activities, the Employer will reimburse you for transportation, subsistence, course material and registration fees.

EVERYONE IN CANADA DESERVES FAIR DRUG COVERAGE:

More than 70 groups sign onto national pharmacare consensus

■ **ARGUING** that everyone in Canada should have the same pharmaceutical drug coverage without financial barriers and regardless of job, location, age or ability to pay, more than 70 national, provincial and territorial organizations from coast to coast announced consensus principles for national pharmacare in late September.

“For a program of national prescription drug coverage to be successful and effective, it must be a single-payer system that is universal, public, accessible, comprehensive in coverage and portable, according to the consensus,” said a statement by the Canadian Federation of Nurses Unions, which along with United Nurses of Alberta is among the growing list of groups signing the consensus document.

“When it comes to national pharmacare, the question is no longer if, but how the system will be built,” said CFNU President Linda Silas. “Today there is consensus among pharmacare advocates that our patchwork system does not need any more patches. Canada needs a single blanket of drug coverage for the whole country.”

The consensus is based on five principles:

1. **Universality** – covering all Canadians
2. **Public, single-payer administration** – integrated with public health care and leveraging single-payer purchasing to keep costs low
3. **Accessibility** – no financial or other barriers to medically necessary drugs
4. **Comprehensiveness** – covering all medications judges safe and effective by scientific evidence
5. **Portability** – providing continuous coverage no matter where residents move in Canada

The coalition also said in its statement it believes this can only be achieved with federal government leadership, including a substantial funding commitment.

Nurses do not support co-payments, deductibles or means testing, Silas added, because Canada’s tax system is already “means tested.”

The coalition argues that as drug spending is shifted from the private to public sector through comprehensive national pharmacare, Ottawa must ensure system-wide savings are distributed fairly to ensure provinces, patients and our health care system all benefit. 🍷

Trade unionists mark **LABOUR DAY** with community celebrations



■ **LOCAL** Labour Councils celebrated Labour Day 2018 with picnics and BBQs for members and the community residents. Many UNA members traditionally turn out at these events.

In Edmonton, the Edmonton and District Labour Council held its 29th annual Labour Day BBQ for the unemployed and underemployed in Giovanni Caboto Park in the inner-city McCauley neighbourhood.

Calgary's Labour Council celebrated its 10th anniversary Labour day BBQ 🍷

Scenes from
Labour Day
in Alberta

AFL's Next Alberta campaign leads to next provincial election with focus on economic future

■ **THE** price of oil is rising, at times dramatically, but many Albertans remain anxious about their future.

That entirely justified concern is the focus of the Alberta Federation of Labour's "Next Alberta" campaign, announced last spring and now actively engaging Albertans in a conversation about the province's economic future as next spring's anticipated provincial election grows closer.

"All Albertans understand that what we're facing is more than just another boom-bust cycle," says AFL President Gil McGowan, arguing that the real challenge facing the province and its economic managers is what he calls "a truly fundamental transformation of the global energy economy."

McGowan observes that while the Opposition United Conservative Party has been debating policy proposals that will allow for profit growth and tax cuts for the wealthy and their corporations, labour leaders and activists have been talking about how to prepare Alberta's economy for an uncertain future in ways that will benefit all Albertans.

"In this election, we can choose politicians who deny that change is happening and just want to bring back the 'good old days,'" said McGowan. "Or, we can choose politicians who see the challenge presented by the energy transformation and are willing to support Albertans and Alberta businesses so we come out the other side stronger."

Next Alberta is a project by and for the working people of Alberta – nurses, fire-fighters, construction workers, paramedics, bus drivers, retail workers, officer workers and many more.

"We believe that, together, we can choose our economic future and build the Next Alberta economy," McGowan said. 🍷

The campaign includes a 12-point plan for Alberta's future:

1. Provide strategic support for Alberta's oil and gas industry
2. Take on the "energy dinosaurs" who deny technological and climate change are real
3. Diversify the economy
4. Invest in public infrastructure
5. Invest in public services
6. Expand the Medicare umbrella
7. Launch a universal public child care program
8. Make tuition free and expand educational opportunities
9. Champion revenue reform
10. Revamp procurement policies
11. Enhance the bargaining power of working Albertans
12. Expand the pension umbrella

To learn more about these 12 points and participate in the campaign, visit NextAlberta.org.

NEXT ALBERTA

Representatives of U.S. nurses' union visit Alberta to see public health care in operation



Nurse and staff leaders from National Nurses United paid a visit to the University of Alberta Hospital and met with Registered Nurses from UNA Local 301 to discuss how public health care is delivered at large hospitals in Alberta.



■ A delegation of nine nurse and staff leaders from National Nurses United visited Alberta in late September to learn about Canadian single-payer health care as Registered Nurses across the United States fight for a Medicare for All system that will guarantee health care as a human right.

National Nurses United, the largest union of RNs in the United States with 150,000 members nationwide, has won landmark health and safety protections for nurses and patients in the areas of staffing, safe patient handling, infectious disease and workplace violence protection.

The Alberta visit – which included a meeting at UNA's Provincial Office in Edmonton with Alberta Health Minister Sarah Hoffman – was part of NNU's ongoing fight for a just and fair public health care system similar to Canada's that has been gaining momentum in the United States.

“As bedside nurses, we see how our patients are suffering from the U.S.'s profit-driven health care system,” said

NNU Co-President Deborah Burger, an RN for more than 30 years, shortly before the visit. “We talk to our patients who are often forced to choose between seeking medical care or paying their rent or electricity.”

She thanked United Nurses of Alberta for hosting the visit.

“We are very proud to live in a country with a universal health care system and are delighted to have the opportunity to discuss its strengths with our friends from the United States,” UNA President Heather Smith told the visitors.

“We are also pleased to have the opportunity to dispel some of the myths about Canadian health care that have been spread to citizens of the United States and to outline the improve care for patients and the lower cost to taxpayers a Canadian-style single-payer health care system would mean,” she said.

The visitors also toured the University of Alberta Hospital and met members of UNA Local 301. 🍷

Contract negotiations begin at smaller worksites across Alberta

■ **UNITED** Nurses of Alberta is focused on negotiating new contracts for members employed at smaller worksites throughout Alberta.

At the time this News Bulletin went to print, UNA is preparing for or is involved in various stages of bargaining for members employed by Canadian Blood Services, Carewest, CapitalCare, Extendicare Canada Inc., the Good Samaritan Society, and Revera Long Term Care.

Benevolence Care Centre Bargaining Committee members Tamyris Salloum (UNA member), Joe Ahrens (UNA Labour Relations Officer), and Ashley Teixeira (UNA member).



UNA representatives of nurses employed at Benevolence Care Centre in Edmonton are negotiating their first collective agreement with their employer, Park Place Seniors Living. The bargaining unit of 20 Registered Nurses was formed shortly after their application to join UNA was approved by the Alberta Labour Relations Board on June 22, 2018.

UNA members employed at Benevolence Care Centre have been allocated to Local 234.

UNA provides a wide range of services to its members. A key role is negotiating the excellent collective agreements that regulate salaries, benefits, schedules and working conditions of members. UNA also administers its agreements to resolve disputes, improve working conditions and protect nurses' workplace rights. 🍷

CONTRACT QUIZ ANSWER KEY

□ CONTRACT QUIZ ON PAGE 21

□ CONTINUED FROM PAGE 14

Hours of Work: (A) is false. If you request to work permanent nights, you must work nights for at least 12 months because you hold the right to revert back to a shift pattern with days.

Seniority: (B) is false. RNs will not lose their seniority if they move from AHS to Covenant Health because of reciprocal seniority provisions under the collective agreement (which say that continuous service within the bargaining unit includes service with any Employer with a bargaining relationship UNA as long as a reciprocal clause exists.)

Vacancies, Transfers and Promotions: (B) is false. Skill, knowledge, efficiency, experience and other relevant attributes are the deciding factors in making promotions and transfers. Seniority is the deciding factor—the tie-breaker—when those other factors are relatively equal.

Leaves of Absence: *Trick Question!* There are two false statements here—(A) and (C). First, under (A) you do not have to take bereavement leave right away. And for (C) you are entitled to one half day of leave without pay to attend a citizenship ceremony.

Professional Development: (A) is false. You are entitled to at least three PD days annually.

Nurses have launched a national petition, sponsored by former emergency room doctor and Manitoba MP Doug Eyolfson, calling on the federal Minister of Health “to develop a pan-Canadian prevention strategy to address growing incidents of violence against health care workers.”

Nurses are looking to the federal government to lead the way by creating a cohesive framework for moving forward with national measures to ensure that every province makes eliminating violence in health care a priority.

While workplace violence is a pervasive everyday reality, it is not inevitable. We have the tools and knowledge to act, and the time to do so is now. 🍷

How to apply for leaves of absence for union business under the new Collective Agreement

■ IT is not appropriate for United Nurses of Alberta members to do union work on employer time.

Because of this, the UNA Provincial Collective Agreement allows for UNA members to request Union Leaves of Absence (LOA) on days when union activity takes place.

Section 5.07(a) of the UNA Provincial Collective Agreement specifically allows for employees to request leaves of absences or time in lieu for union or local business. But it's important to note that this section has been modified in the new Provincial Collective Agreement, so members need to familiarize themselves with the new language.

Employees must make their request for Union LOA to their employer in writing with at least two weeks' advance notice, if possible. The Employer is also required to respond in writing.

It is not appropriate for the employer to ask the employee when the union activity is going to take place.

Section 5.07(a) states: *“The Employer shall not unreasonably withhold approval for leave(s) of absence for Employees elected or appointed to perform Union or Local business or for time in lieu of Union or Local business. Requests for leaves of absence shall be made in writing and the Employer’s reply shall be given in writing. Employees should make such requests with at least two weeks’ advance notice, if possible, in order to maximize the ability to accommodate the request.”* 🇺🇦

KNOW
your
Rights



Report from
Director of Labour Relations
David Harrigan

If you have any questions or concerns about Section 5.07(a) or any other matter pertaining to your collective agreement, please contact your UNA Local Executive or Labour Relations Officer at 1-800-252-9394.

□ COLLEEN KOVALUK REMEMBERED CONTINUED FROM PAGE 12

In April, however, Kovaluk received a call from Ceci. The minister told her Cabinet had voted to accept the change – a benefit to all LAPP plan members who find themselves in Kovaluk’s difficult circumstances.

“Colleen deserves the gratitude of all members of UNA for this accomplishment, which would have been no easy thing for anyone, let alone a person

who was seriously ill,” said Sustrik on November 8.

Kovaluk summed up her accomplishment in her note, written with the assistance of her husband: “I am happy to say that through hard work and determination changes can be made,” she said. “I hope that this change ... will help other people throughout Alberta in the same situation as me.” 🇺🇦

Nurses can be counted on to advocate for our safety ...

Can they count on us to advocate for theirs?

Nurses and other professionals who work on the front lines of health care, in Alberta and around the world, continue to face threats to their safety every day.

Let's never tire of our efforts to ensure they're safe from verbal, emotional and physical abuse on the job!

At your side. On your side.

UNA
United Nurses of Alberta

