



McLENNAN ROSS LLP
LEGAL COUNSEL

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PLEASE REPLY TO EDMONTON OFFICE

April 26, 2018

Alberta Labour Relations Board
#501, 10808 - 99 Avenue
Edmonton, AB T5K 0G5

Attention: Tannis Brown

Dear Madam:

Re: An application for determination brought by United Nurses of Alberta and Jessica Wakeford affecting Alberta Health Services, The Alberta Union of Provincial Employees and Health Sciences Association of Alberta - Board File No. GE-07762

As you know from prior correspondence, we represent Covenant Health (Covenant).

Covenant hereby requests that it be given full party status in this matter. Alternatively, Covenant seeks intervenor status.

Background

1. Covenant is the second largest acute health care provider in the province, after Alberta Health Services (AHS). It operates the following approved hospitals: Misericordia Community Hospital (Edmonton), Grey Nuns Community Hospital (Edmonton), Edmonton General Continuing Care Centre, Youville Home (St. Albert), St. Joseph's Auxiliary

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Hospital (Edmonton), St. Michael's Health Centre (Lethbridge), Banff Mineral Springs, Bonnyville Healthcare Centre, St. Mary's Hospital (Camrose), Our Lady of the Rosary Hospital (Castor), Killam Health Care Centre, St. Joseph's Home/Carmel Hospice, Mary Immaculate Care Centre (Mundare), St. Mary's Health Care Centre (Trochu), St. Joseph's General Hospital (Vegreville). It also operates St. Therese Villa (Lethbridge) which is a Designated Supportive Living facility.

2. United Nurses of Alberta (UNA) has a bargaining relationship with Covenant in respect of employees involved in direct nursing care at all of its acute care facilities. UNA, AHS and Covenant collectively bargain the basic terms of a common collective agreement relating to direct nursing care.

3. Covenant employs approximately 50 nurse practitioners at its facilities. Given that the scope of practice of nurse practitioners is contained in the *Registered Nurses Profession Regulation*, Covenant expects that the activities its nurse practitioners perform are largely the same as the activities performed by nurse practitioners in AHS facilities.

Covenant has a direct legal interest in the outcome of the proceedings

4. In its Information Bulletin 2, the Board says the following in respect of who is an affected party in proceedings:

An affected party includes any person or organization who has a **tangible and demonstrated direct legal interest in the outcome of the application**. A Board Officer may be able to assist a party with identifying affected parties. An affected party can include:

1. the applicant,
2. the respondent(s) named in the application,
3. the employees in the bargaining unit,
4. the employees in a proposed bargaining unit,
5. the registered employer's organization named in the registration certificate,
6. an employer's organization,
7. the bargaining agent,
8. **the parties to a collective agreement.**

5. If the Board agrees with the Applicant's submissions and grants its proposed remedies, Covenant fully expects that UNA will insist that AHS and Covenant engage in collective bargaining under the current collective agreement in order to settle terms of employment for their nurse practitioners. Those terms could be significantly different than the terms Covenant's nurse practitioners currently work under.

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6. We also note that the Health Sciences Association of Alberta (HSAA) and Alberta Union of Provincial Employees (AUPE) have applied for intervenor status. Covenant has bargaining relationships with these unions in respect of their standard bargaining units under the Board's Information Bulletin 10.

7. While AUPE's submissions on why it should be granted status are not clear to us, HSAA takes a position that nurse practitioners might be a part of its standard bargaining unit. If there is to be a consideration of which bargaining unit nurse practitioners should be in if the Board finds they should not be excluded, Covenant has a direct interest in the outcome of that issue because like AHS, it is bound to the standard bargaining units for acute care facilities.

8. For these reasons, Covenant has a tangible and demonstrated direct legal interest in the outcome of these proceedings, and should be granted full party status.

Alternatively, Covenant should be granted intervenor status

9. Should the Board find that Covenant does not have a direct legal interest in the outcome of these proceedings, then it certainly has an indirect interest and should be granted intervenor status.

10. The test for intervenor status is set out in *Dynacare Kasper*, [1997] Alta. L.R.B.R. LD-024:

1. The relationship to the application

Covenant's direct relationship is spelled out above. This application will determine whether nurse practitioners can be represented in collective bargaining and whether UNA has a right to represent those employees in collective bargaining. As an employer having a bargaining relationship with UNA, with the same collective agreement, and employing approximately 50 nurse practitioners, Covenant has the same relationship as AHS to the application.

2. Potential assistance to the Board

These proceedings will explore the roles of nurse practitioners in health care facilities and the reasoning and importance behind having them excluded from collective bargaining. We expect Covenant, as the second largest health care provider in the province, may have different evidence and thoughts on each of these issues, which will be helpful to the Board in making its decision.

3. The directness of the effect of any decision upon the intervenor

As stated, if the application succeeds UNA will undoubtedly insist that Covenant, along with AHS, bargain terms of employment for nurse practitioners. This is the most direct effect possible.

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4. Any other matters.

Covenant expects to be able to collaborate with AHS in respect of the evidence to be called in order to avoid unnecessary duplication. As a result, its participation in the proceedings will be conducted in an efficient manner and will not delay, prolong, or disrupt the application.

We look forward to hearing from the Board on this.

Yours truly,



CHRIS LANE, Q.C.

CJL/mrg

cc:

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Jessica Wakeford, c/o United Nurses of Alberta; Attn: Lee Coughlan
Alberta Health Services; Attn: Jacqueline Laviolette
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Health Sciences Association of Alberta; Attn: Laura Hureau
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