RE: An application for determination brought by United Nurses of Alberta and Jessica Wakeford affecting Alberta Health Services - Board File No. GE-07762

- On the above captioned matter, the Board has received applications for intervenor status [1] from The Alberta Union of Provincial Employees ("AUPE"), Health Sciences Association of Alberta ("HSAA"), Covenant Health and Nurse Practitioners Association of Alberta ("NPAA"). Each of the four applications seeks application first as affected parties and in the alternative as intervenors that can provide assistance to the Board.
- Both United Nurses of Alberta ("UNA") and Alberta Health Services ("AHS") have no objection to the applications for intervenor status.
- The NPAA indicates it has "available by request of the Board signatures of members of the NPAA who have indicated the NPAA represents their interests in this matter".
- Based upon the above, the Board grants full intervenor status as affected parties to AUPE, HSAA, Covenant Health and NPAA upon the following conditions:
 - evidence in chief of the intervenors is to be introduced by affidavit evidence;
 - · the arguments of the intervenors are to be provided by written submission which written submissions may be supplemented by oral argument:
 - NPAA is to supply to the Board copies of the signed statements of its members indicating the NPAA represents their interests in this matter. Such signatures are to be kept confidential by the Board pursuant to sections 14(6)(c) of the Labour Relations Code: and
 - · the Board's scheduling of this matter will provide preference to the availability dates of the Board, UNA and AHS.
- [5] This order applies to both the Charter issue and the determination issue.
- Board Officer Dan Galdamez is to canvas for dates for a case management conference [6] call.

AHS has asked the Board to consider whether it is the most appropriate form to [7] determine the constitutional issue. The Board directs the remaining parties to provide their response to this request which request will be discussed at the case management conference call.

William J. Johnsh

Chair