

## Bargaining team seeks **3% IN WAGE-REOPENER**

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UNA NURSING SCHOLARSHIPS

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PRC best-practices workshops  
a province-wide success

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# The spring of 2019 will bring more than flowers: also bargaining, and an election

■ **SOON** it will be what Lucy Maud Montgomery called “the beautiful, capricious Canadian spring.” By which the author of *Anne of Green Gables* meant we’re in for plenty of chilly days yet, some of them downright cold, before the flowers bloom again. This may be even truer in Alberta than it is on Prince Edward Island!

On February 15, the United Nurses of Alberta bargaining team sat down with our members’ largest employers as both sides set out their opening positions in the wage reopener included in the third and final year of our Provincial Collective Agreement. In wage-reopener negotiations, wages are the only topic considered at the bargaining table.

UNA’s position was based on a bargaining survey of members conducted by a professional polling firm in mid-January, followed by a meeting of all UNA Local presidents in Calgary on January 31.

The wage position tabled by your bargaining committee on February 15 in Edmonton was based on that polling and the open discussion by almost 200 participants in the Presidents’ Meeting. In their discussions, the local presidents also considered increases in Alberta’s cost of living, the fact there were no wage increase in the contract’s previous two years and other economic factors is setting the union’s initial position.

As a result, UNA is seeking a pay increase of 3 per cent in the third and final year of the current Provincial Agreement. The initial bargaining position of Alberta Health Services, Covenant Health and the other employers in the Provincial Agreement is for no

change in current rates of pay. This is not a surprise.

As bargaining continues, we will be entering a provincial election campaign that has potentially extremely important implications for the Registered Nurses and Registered Psychiatric Nurses who make up the bulk of UNA’s membership, as well as all other health care workers and every Albertan, since we all need to access the health care system at times.

UNA is non-partisan in political matters, as our members demand, but we do urge you to study and pay attention to the positions taken by the parties contesting the election on the future of health care – as well as their track records.

I personally feel strongly Alberta has enjoyed a remarkable period of stability in health care in the past four years that is a vast improvement over the constant restructuring, dangerous experiments in privatization, and fits of austerity to which Albertans had become accustomed for many years.

I urge UNA members to visit the Next Alberta website at NextAlberta.org. This campaign – created by and for nurses, construction workers, firefighters, paramedics, bus drivers, retail workers, office workers, and many, many more – discusses the long-term economic future of Alberta, and how best we can continue to afford high-quality health care and other public services in our province.

In Solidarity,

Heather Smith  
President, United Nurses of Alberta

FRONT COVER PHOTO: Local 316 members Sophia Ocloo and Linda Wu at the 2018 UNA Annual General Meeting

# Wage reopener bargaining commences with UNA SEEKING 3% PAY INCREASE



David Harrigan



Heather Smith



■ **BARGAINING** teams for United Nurses of Alberta and its largest employer group exchanged initial positions in the current round of wage-reopener negotiations for the Provincial Collective Agreement on February 15.

The third-year wage reopener – in which wages are the only item considered by the bargaining teams while the rest of the contract remains in force – was a key part of the three-year agreement that came into effect on April 1, 2017.

UNA’s initial bargaining position was based on a survey of members conducted by a professional polling firm in mid-January, followed by a meeting of all UNA Local presidents in Calgary on January 31.

The wage position tabled by the UNA bargaining committee in Edmonton was voted on by the approximately 200 local presidents and other members at the Calgary meeting after consideration of the results of the bargaining survey by Viewpoints Research Ltd. In their

discussions, the local presidents also considered increases in Alberta’s cost of living, the fact there were no wage increase in the contract’s previous two years and other economic factors is setting the union’s initial position.

As a result, UNA is seeking a pay increase of 3 per cent in the third and final year of the current Provincial Agreement.

The initial bargaining position of Alberta Health Services, Covenant Health, Lamont Health Care and The Bethany Group (Canmore) was for no change in current rates of pay. This did not come as a surprise to the union bargaining committee, said UNA Labour Relations Director David Harrigan.

If a settlement cannot be reached in wage-reopener bargaining, UNA will consider the other options available to it, including binding arbitration. No further negotiating dates have been set and UNA expects interest arbitration to be scheduled later in the spring. 🍷

Local 211 President Jacki Capper and VP Yvonne Johnson at the January 21 Presidents’ Meeting in Calgary.



# Infrastructure, training and new staffing result from PRCs by Local 85

■ **UNITED** Nurses of Alberta Local 85 at the Sturgeon Community Hospital in St.

Albert continues to report successes through the Professional Responsibility Concern process that have resulted in increases full-time equivalent staffing in the facility's Emergency Room and its Labour, Delivery, Recovery and Post-partum (LDRP) department.

PRCs by the local also played a role in the employer's decision to add infrastructure at the hospital northwest of Edmonton to accommodate increased patient activity in the Neo-natal Intensive Care Unit (NICU), said Local 85 President Orissa Shima.

Nursing staff at the hospital, Shima said, was frustrated with the difficulty the hospital had dealing with the fact that volume of deliveries had doubled in 10 years without needed staff and supports.

But after the local made the decision in the spring of 2016 to advance their concerns to the Alberta Health Services CEO, as permitted by the PRC language in UNA's Provincial Collective Agreement, things began to change.

With the help of UNA's PRC advisors and the local's hard-working PRC team, Shima recalled, there are now several meaningful improvements to report. These include:

"Brave nurses came forward with PRCs and poured their hearts out in letters outlining the distress they were feeling on shifts where they felt very unsafe"

— Local 85 President  
Orissa Shima

- A full obstetrical review of the hospital that resulted in the addition of 4.2 FTE NICU-trained nurses
- One NICU-trained RN will be on shift at all times
- One full-time lactation nurse was added to the hospital's staff complement
- A change in the model of care for the hospital that resulted in the addition of post-partum beds
- The addition of 3.2 RN/Assistant Head Nurse FTE post-partum/case room trained staff
- Renewed commitment by the employer to staff education, including specialized C-section training
- Infrastructure commitments including a six-bed, Level 2 NICU and dedicated C-section space in the Operating Room, with completion expected late this year or early in 2020.

"These achievements are the result of the resilience, dedication and commitment to patient safety of the staff on LDRP at the Sturgeon Hospital," Shima said. "Brave nurses came forward with PRCs and poured their hearts out in letters outlining the distress they were feeling on shifts where they felt very unsafe." 🍷

# UNA and AHS launch joint PRC best practices info sessions

■ **WITH** presentations by United Nurses of Alberta President Heather Smith and Alberta Health Services Health Professions & Practice Vice-President Sean Chilton, the union and the provincial health care agency have been launching their jointly developed new resources for Professional Responsibility Concern Committees at worksites and union meetings throughout Alberta.

Smith and Chilton moderated 27 sessions attended by more than 1,000 union members and AHS managers throughout November and December 2018, highlighting best practices for each step in the PRC process for both UNA members and AHS managers.

Entitled *Best Practice in PRC: Creating a Better Future*, the workshops emphasized the shared commitment of UNA and AHS to reset the culture around PRC in workplaces throughout Alberta.

Among the principles agreed to by the partners is that joint problem solving should occur through collaboration in an environment of mutual respect with the goal of resolving issues as close to point of care as possible.

The approach – set out in Article 36, Professional Responsibility, of the UNA/AHS Provincial Collective Agreement – also recognizes that there must be full and consistent disclosure of available and relevant information. In addition, the parties agreed that every step of the PRC process should occur within a just culture and adhere to professional standards.

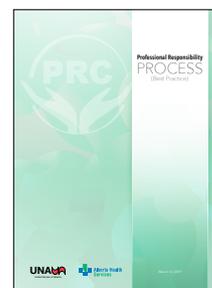


Alberta Health Services Health Professions & Practice Vice-President Sean Chilton and UNA President Heather Smith at one of the PRC workshops

UNA encouraged members working in health care facilities as well as Community, Cancer Care, Addictions and Mental Health to attend the presentations.

In addition to sessions at each of the union's District Meetings, in person presentations were held in Medicine Hat, Lethbridge, Calgary, Red Deer, Edmonton and Grande Prairie, and via videoconference at about 80 health care locals throughout the province.

The newly developed PRC Best Practice resources are available on AHS Insite as well as on the UNA Website and UNA App under PRC Resources. 🍷



For more information, UNA members may contact UNA Professional Responsibility Advisor Josh Bergman at [jbergman@una.ca](mailto:jbergman@una.ca) or 1-800-252-9394.



# Canadians are clear about pharmacare – will the government listen?



By Linda Silas  
President, Canadian  
Federation of Nurses Unions

Canadians  
overwhelmingly  
say the top  
priority should be  
ensuring access to  
quality care.

■ A new federal budget will be tabled in the coming weeks and it will be the last before next fall's federal election. The content of that budget will signal our government's intentions on key issues relating to the health and wellbeing of Canadians. Many will be watching closely for what could amount to an historic expansion of Canada's Medicare – the creation of a universal pharmacare program.

## Canadians want it, but will Canada deliver?

A new national poll confirms that Canadians want a national prescription drug program that favours people over industry, and they believe it is worthy of public investment.

The public discussion on this important issue was triggered last year when the Trudeau Government struck an advisory council to study the implementation of such a program. It was welcome news to those who have long felt universal drug coverage was the missing piece of Canada's public, universal health care system.

Nurses have been talking about the need for pharmacare for decades, because we witness it every day as we care for our

patients. We watch with frustration as patients struggle to access medications they need to stay healthy, in some cases ending up in hospital repeatedly as result of not filling prescriptions, or not taking their medications as prescribed because of the cost. Sadly, in some cases, they even lose their lives.

Nurses have consistently called for a universal program over the years, because the evidence is overwhelming and unequivocal that this is the best option, both economically and for ensuring equal access for our patients.

As decades of peer-reviewed evidence has demonstrated, only universal pharmacare will allow us to pool our buying power to negotiate better drug prices. Canada will save in the range of \$4 to \$11 billion every year. And only

 **TWO  
THIRDS OF  
CANADIANS**  
are worried about  
losing their existing  
prescription drug  
coverage if they  
change jobs or move



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universal pharmacare can transform our current patchwork system into seamless coverage for everyone.

Pharmaceutical and insurance companies have been leading an aggressive opposition to a bold pharmacare plan, arguing instead for a limited approach that simply “fills in the gaps” for those without existing coverage. The fact is, this will not ensure access, and will likely cost more, not less, than our current system.

This response is no surprise, since industry reaps significant profit from our current costly and inefficient system.

But Canadians haven't wavered in their support for universal pharmacare. The new national poll from Environics Research, commissioned by the Canadian Federation of Nurses Unions, shows that 88 per cent of Canadians prefer a simple, cost-effective prescription drug coverage program that covers everyone in the country rather than another patchwork plan. Only slightly fewer (84 per cent) believe prescription drugs should be covered as part of our public health care system, the same way that hospitals and doctors are covered. Moreover, they believe it is worth investing public money to do so.

This study also revealed that despite a majority of Canadians reporting they have some form of drug coverage,

two-thirds are worried about losing coverage if they change jobs or move. This puts the lie to the industry assertion that high levels of drug coverage mean Canadians are satisfied with the status quo or that they don't believe our drug coverage should be publicly administered.

When it comes to governments making decisions about our health care system, Canadians overwhelmingly say the top priority should be ensuring access to quality care. They are much less likely to list reducing government spending as their priority.

With the federal budget looming and a fall election on the horizon, Prime Minister Justin Trudeau has an important choice to make: will he listen to the interests of corporations that are concerned with their profit margins, or will he listen to Canadians?

It is no exaggeration to say this is a once-in-a-generation opportunity to complete Canada's public medicare system and improve the health of Canadians. The prime minister should do the right thing and listen to the evidence, which is decisive, and the views of Canadians, who are unwavering in their support.

Canadians want a pharmacare program that reflects the same values that underpin our medicare system, providing equal, universal access for all. 🍷

“Pharmaceutical and insurance companies have been leading an aggressive opposition to a bold pharmacare plan, arguing instead for a limited approach that simply ‘fills the gaps’ for those without existing coverage.”

– Linda Silas,  
President, CFNU

**92%**  **OF CANADIANS**  
say ensuring everyone has  
access to the best quality  
 health care available is  
**TOP PRIORITY**



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**88%** **OF CANADIANS**  
think it is better to have a  
**single pharmacare program**  
for all, than to have another  
patchwork plan





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# After the cold snap, thoughts turn to VACATIONS

## A CONTRACT QUIZ

We've just survived a cold snap in Alberta. Is there better time to think about vacation?

Fill in the blanks to see how well you understand the terminology surrounding your rights and entitlements under Article 17 of the Provincial Collective Agreement.

1. Every year, you earn paid vacation. This is your vacation \_\_\_\_\_.
2. On January 1, the Employer must post a single document called the vacation \_\_\_\_\_, which runs from May 1 to April 30.
3. On your 25th, 30th, 35th, 40th and 45th employment anniversary dates, you get 5 days of \_\_\_\_\_ vacation.
4. Vacation \_\_\_\_\_ are for vacation you haven't yet earned, but that you expect to earn in the coming year.
5. Your vacation \_\_\_\_\_ includes vacation you have earned this year, vacation you've carried forward from the past, and your supplementary vacation.
6. The employer uses a guidance number to determine how many employees can take vacation in a \_\_\_\_\_-hour period. The guidance number may vary from month to month, but it must be high enough to capture every RN's vacation liability for the year.
7. You must put at least \_\_\_\_\_ per cent of your vacation entitlement for the year on the vacation planner.
8. You should try to request vacation in \_\_\_\_\_. Don't make request based on your rotation, since your \_\_\_\_\_ could change.
9. When there are many requests for vacation over the same period, \_\_\_\_\_ is used to determine whose vacation requests are approved or denied.
10. Off-planner vacation requests are called \_\_\_\_\_ requests. These are made after March 15 and granted on a first come, first served basis.
11. You may \_\_\_\_\_ a portion of unused vacation to the next vacation year. You may also request for any vacation time exceeding 4 weeks to be paid out to you. These requests must be made in \_\_\_\_\_.
12. The Employer cannot \_\_\_\_\_ or reschedule your vacation unless there is a critical, unforeseen \_\_\_\_\_ and it did everything it could to resolve the issue by other means.

ANSWERS ARE FOUND ON PAGE 19.

# LAPP celebrated 'Independence Day' on March 1

■ **THE** Local Authorities Pension Plan of Alberta celebrated "Independence Day" on March 1.

LAPP, the pension plan for most UNA members, joined other large public sector pension plans across Canada on March 1 by becoming a jointly sponsored pension plan registered under the Employment Pension Plans Act of Alberta.

With assets of more than \$45 billion and more than 265,000 members, the seventh largest pension plan in Canada has effectively operated as a jointly trustee plan for years. But LAPP was created under a provincial statute that designated Alberta's minister of finance as the office trustee and administrator.

After more than 25 years of lobbying for independent status by employees and employers, the NDP Government passed enabling legislation in December that allowed a new LAPP Corporation jointly administered by employee and employer representatives to take over the plan. The plan will have bicameral system of governance that includes a representative Sponsor Board and a fiduciary Corporation Board.

Gil McGowan, president of the Alberta Federation of Labour and chair of the Sponsor Board, called March 1 "a great day for our members, who will now have a direct say in the future of the defined-benefit pension plan."

UNA President Heather Smith has been active in the 26-year effort to have the Alberta Government honour its commitment from the very beginning.

LAPP will continue to use the Alberta Investment Management Corporation, commonly known as AIMCo, as its investment manager, and the Alberta Pension Services Corporation as its benefit administrator. Both organizations

will remain Alberta Government Crown corporations.

As of its last valuation on December 31, 2017, LAPP was 104 per cent funded. It continues to provide all the same guaranteed pension benefits it has offered since its inception 56 years ago, including annual cost-of-living increases. 🍷



Gil McGowan  
AFL President

## Supplemental pension plan improved to include TFSAs



■ **THE** supplemental pension plan for United Nurses of Alberta members to which employers covered by the Provincial Collective Agreement have agreed to contribute has been improved to include tax-free savings accounts in addition to Registered Retirement Savings Plans.

UNA strongly recommends that all members who are regular employees act to take advantage of this provision if they have not already done so.

It is a significant benefit that UNA members cannot take advantage of without taking specific action to enroll. As a result, by not acting, employees are going without a 2-per-cent retirement income supplement that they are entitled to receive under the collective agreement.

By not enrolling in the employer's matching RRSP program, a regular, full-time Registered Nurse working at Step 9 of the Alberta Health Services pay scale and receiving both an education allowance and a long-service pay adjustment would be missing the chance to be paid an additional \$1,971.84 per year.

□ CONTINUED ON PAGE 18

# UNA awards NURSING EDUCATION SCHOLARSHIPS to Alberta Nursing students



■ **UNITED** Nurses of Alberta is proud to award scholarships to 10 Nursing students from across Alberta.

The scholarships of \$1,000 are awarded to full-time students in their first years of Nursing studies at approved post-secondary institutions in Alberta. Applicants must be related to a UNA member, have completed an application form and written a short essay answering the question, “How has the United Nurses of Alberta made a difference in the lives of Alberta Nurses?”

An additional \$1,000 award is sponsored by the Canadian Federation of Nursing Unions.

The scholarships are open to students who are related to a UNA member or associate member.

UNA awards Nursing Education Scholarships each year to assist nursing students enrolled in full-time studies at approved RN nursing programs at post-secondary institutions in Alberta.

Mount Royal University student **MADISON BREADNER** is the recipient of the Canadian Federation of Nurses Unions Nursing Education Scholarship. Madison’s scholarship application was sponsored by her mother, Heather Breadner from Local 121 (Rockyview General Hospital).

# UNA Nursing Scholarship Recipients



- A** **JESSICA AU DUONG** from MacEwan University. *Sponsored by Rebecca Au Duong from Local 301 (University Hospital, Stollery Children's Hospital, Mazankowski Alberta Heart Institute).*
- B** **JORDANA DILLABOUGH** from Medicine Hat College. *Sponsored by April Dillabough from Local 1 (Peter Lougheed Centre).*
- C** **DANTON DAVIS** from MacEwan University. *Sponsored by Amber Davis from Local 15 (St. Mary's Hospital – Camrose).*
- D** **KYLA GILCHRIST** from the University of Alberta. *Sponsored by Donna Gilchrist from Local 12 (Bethany Camrose/Bethany Meadows).*
- E** **AIBHERA GOMEZ** from the University of Calgary. *Sponsored by Asyncion Gomez from Local 415 (South Health Campus).*

- F** **EMILY MALO** from MacEwan University. *Sponsored by Kathryn Malo from Local 9 (Fort Saskatchewan Health Centre).*
- DANIKA POCHYNOK** from MacEwan University. *Sponsored by Shelley Pochynok from Local 304 (Stony Plain Community Health).*
- G** **JENNIFER SCHOTT** from MacEwan University. *Sponsored by Janice Schott from Local 413 (Edmonton Corrections).*
- H** **EMMA STEINER** from the University of Alberta. *Sponsored by Sarah Pollard from Local 70 (Medicine Hat Regional Hospital).*
- I** **CEILIDH STEWART** from the University of Alberta. *Sponsored by Sarah Dunphy from Local 33 (Royal Alexandra Hospital – Edmonton).* 🇨🇦

## Local 234 ratifies first collective agreement with Benevolence Care Centre Ltd.

■ **AFTER** months of negotiations, a first collective agreement has been ratified by members of United Nurses of Alberta Local 234 employed at Benevolence Care Centre Ltd. The nursing home located in west Edmonton is owned by the British Columbia-based Park Place Seniors Living Inc.

The members of the new local joined UNA in June 2018.

Some of the features of the new agreement, which will expire on December 21, 2019, include:

- Adoption of the UNA Provincial Rate of Pay at date of ratification
- Recognition of up to five years of previous experience
- 2 per cent adjustment to Rate of Pay upon reaching 20 years nursing service
- Night Shift Responsibility Pay of \$3 per hour

- RRSP contributions of 3 per cent at the date of ratification and 4 per cent as of December 20, 2019
- Two annual days for professional development

UNA would like to thank the local bargaining team for their patience and determination. 🍷

## Negotiations continue at smaller worksites

■ **AS** this edition of UNA NewsBulletin went to print, several UNA locals were in various stages of negotiations for new collective agreements.

In bargaining with Extendicare Canada Inc. in late January, the employer proposed numerous arbitrary and significant rollbacks to contract language and financial areas of the agreement. These completely unacceptable proposals included elimination of lump sum payments, reductions in sick-leave benefits, removal of time limits on the employer's ability to discipline employees, and longer probationary periods.

Other negotiations are currently under way with CareWest, which has not made such proposals. Dates have been set to commence negotiations with Revera Long Term Care, CapitalCare, and Bethany Care Society.

Negotiations have not started but are expected to begin soon between UNA and St. Michael's Long Term Care Centre, Salem Manor Society, Shepherd's Care Foundation, Chantelle Management Ltd., Venta Care Centre, Touchmark at Wedgewood, and Good Samaritan Society. 🍷



UNA members attending the South District Meeting in Lethbridge wore pink to mark Anti-Bullying Day in Canada. Across the country, many Canadians wore pink on February 27 to take a stand against bullying in workplaces, homes, schools and online



# Labour Board hearing into **UNA NURSE PRACTITIONER** representation application

■ **THE** Alberta Labour Relations Board hearing into United Nurses of Alberta's application seeking a determination that the union can represent Nurse Practitioners commenced on February 25. Hearing dates have been set for February 25-27 and April 8-9, 2019.

Applicants with UNA in the application for determination are Nurse Practitioners Jessica Wakeford and Rochelle Young.

The Board has agreed first to consider the constitutional arguments regarding UNA's position that the portions of the Alberta Labour Relations Code preventing Nurse Practitioners from being represented by a union violate the right to freedom of association guaranteed in the Canadian Charter of Rights and Freedoms.

The Board will then consider UNA's other arguments if the Labour Code is found to be unconstitutional in that regard.

UNA argues that since it holds a certificate with the ALRB for "all employees when employed in direct nursing care or nursing instruction" by Alberta Health Services, employees of AHS who are Nurse Practitioners doing direct nursing or nursing instruction are members of UNA's bargaining unit.

UNA's request for determination notes that in no other Canadian jurisdiction are Nurse Practitioners precluded from union membership under the provincial labour code or from participating in collective bargaining. The Alberta exclusion resulted from amendments to the Labour Code passed by the provincial Legislature in 2003

UNA also argues it has a strong community of interest with Nurse Practitioners because of its long history

of representing Registered Nurses and Registered Psychiatric Nurses, the similar educational requirements of RNs and NPs, the fact members of both medical professions must register with the same regulatory college, and because NPs must first be RNs.

In addition, UNA represented Nurse Practitioners in Alberta before they were excluded from union membership under the Labour Code. Outside Alberta, Nurse Practitioners in all Canadian provinces except British Columbia are represented by their provincial nurses' union

UNA's request for a determination arises from the concern that with union representation, Nurse Practitioners can safely raise issues with AHS about client care.

AHS employs more than 300 NPs in hospitals, home living, facility living, supportive living, palliative care and as members of Emergency Community Urgent Response Teams. 🍷

More information is found on UNA's Nurse Practitioners page. A link is found on the UNA home page - una.ca.



Members of UNA Local 416 representing Registered Nurses employed by the Blood Tribe Department of Health in Stand Off, near Cardston, and by Aakom Kiyii Health Services of the Piikani Nation at Brockton, met for their annual general meeting this past weekend. Also in attendance at the meeting was UNA South District representative Sharon Gurr, who is a member of UNA Local 131 at the Coaldale Health Centre.

# Union members recommit to ending gender-based violence

## UNA MARKS ANNIVERSARY OF DECEMBER 6 MASSACRE WITH SOLEMN OBSERVANCE

■ **ON** December 6 each year, United Nurses of Alberta remembers the 14 female engineering students murdered at l'École Polytechnique de Montréal in 1989 by an act of gender-based violence.

“UNA and its members recognize and mourn the anniversary of this national tragedy, and recommit ourselves to working for the end of gender-based violence in Canada and around the world,” UNA President Heather Smith told a solemn gathering on December 6, 2018, at the union’s Provincial Headquarters in Edmonton.

December 6 represents an opportunity for all Canadians to reflect on the impact of violence against women in our society, she said. “Communities and individuals need to speak out. All levels of government must take meaningful steps to prevent all forms of violence against

women and girls. Unions like UNA play an important role in this work.”

Working on the front lines of health care, Alberta’s nurses see the impact of violence against women, and sometimes experience it themselves, Smith observed. UNA is committed to creating safer workplaces for Alberta’s nurses, their patients and patients’ families.

The union’s 2018 International Nurses’ Week advertising campaign brought the issue and its impact on nurses to public attention, Smith noted.

UNA’s effort also continues through the Professional Responsibility Concern process, which gives nurses the opportunity to raise their concerns about patient safety and ensure employers respond to their concerns. UNA’s Occupational Health & Safety committees address health and safety in nurses’ workplaces.. 

Working on the front lines of health care, Alberta’s nurses see the impact of violence against women

Here are most of the UNA members who took part in the 2019 AFL-CLC winter labour school in Jasper (Photo: Dave Cournoyer).



## AHS, UNA reach deal to resolve Emergency Department staffing crisis at Red Deer Regional Hospital

■ **IN** mid-January, Alberta Health Services and United Nurses of Alberta reached an agreement to settle a union grievance involving a nursing staffing shortage at the Red Deer Regional Hospital Emergency Department.

The settlement – reached on January 11 – included designation of 11.7-full-time-equivalent Registered Nurse relief positions for use exclusively in the Emergency Department at the Central Alberta regional hospital. The agreement also included a provision that after two years, relief staffing levels would be reviewed on an annual basis by site management.

Continued collaboration between UNA and AHS was also part of the settlement agreement in areas such as the automated call out system for nurses, compliance

with the provincial health and safety regulations, and improved communication between parties when staffing shortages arise.

The agreement resolved the requirement for the grievance UNA filed in June 2018 to proceed to arbitration. An arbitration hearing scheduled for the week the agreement was reached was cancelled.

In a joint statement, both AHS and UNA acknowledged their appreciation for the unwavering dedication of Emergency Department staff during the staffing shortages at the facility. Their commitment to caring for patients saw them go above and beyond the call of duty during a challenging, stressful time and helped ensure the Emergency Department remained fully operational. 🍷

The agreement resolved the requirement for the grievance UNA filed in June 2018 to proceed to arbitration.



## UNA members sharpen skills at annual Jasper Labour School

■ **MORE** than 50 members of United Nurses of Alberta travelled to the mountain park community of Jasper in January to sharpen their skills at the annual Jasper Labour School.

The educational event organized by the Alberta Federation of Labour and the Canadian Labour Congress ran from January 13 to 18.

UNA members at the annual school were immersed in a wide-range of course topics, including occupational health and safety, labour history and law, collective

bargaining, mental health, facing management, a path to reconciliation, and communications for union activists.

Students at the school also heard from a range of guest speakers, including Alberta Deputy Premier Sarah Hoffman, Labour Minister Christina Gray and AFL President Gil McGowan.

UNA Labour Relations Officer Marie Dancsok and Communications Advisor Dave Cournoyer shared their professional expertise with students while acting as facilitators at the school. 🍷

# When workplace incidents aren't reported, employers can't act on our health and safety concerns

By Dewey Funk  
UNA, OH&S Advisor

- **LACK** of incident reporting is among the greatest barriers to resolving occupational health and safety concerns in our workplaces.

As UNA's OH&S Advisor, I often deal with employers who ask why staff members don't report incidents. Asked the same question, members often say that when they do report incidents, nothing changes. They also complain they hear nothing back after they complain, managers tell them not to report, they don't have enough time to make a report, and so on.

Some of these reasons are understandable, but when incidents are not reported, employers are not able to address the concerns raised by our members and their OH&S Committees. It's only through good reporting we're able to track trends that help us make changes required to ensure our workplaces are safe. When incidents are reported, as your union, UNA can raise your health and safety concerns with your employers.

That's why I'm reviewing these important points, which I have made before. These are all frequently asked questions about OH&S from UNA members, in particular those who work at Alberta Health Services worksites.

Report anything that potentially negatively impacts your health and safety.

## How do I report a health and safety concern?

AHS has an incident reporting procedure called *MySafetyNet* (MSN). MSN is an online reporting process found on Insite.

## What should I report on MySafetyNet

Report anything that potentially negatively impacts your health and safety. Examples are injuries or illness, equipment failures, and motor vehicle accidents or near misses that happen on the job. This is not an exclusive list.

## Reporting an incident for the first time, or having trouble reporting?

Once you log in to MSN, you will find an icon that allows you to view a demonstration of how to report. I suggest you review this demonstration. If you have difficulty processing your report, you can ask your manager for assistance. If your manager is unable to help, call your AHS Workplace Health and Safety (WHS) advisor for help.

## When should I report?

If there is an incident, you should report the concern during the shift on which it occurs if possible. If not, report it as soon as possible afterward. Remember, however, *there is no time limit in reporting an incident*. There is no 72-hour limit, and the employer is not fined if you don't report within a time limit.



### Reporting incidents of harassment

Harassment can be reported on MSN. However, the preferred way to report harassment or abuse is through *Document 1115, Workplace Violence: Prevention and Response*. I always recommend making a formal complaint when harassment or abuse takes place. If you use MSN, keep in mind that Option 6, for reporting co-worker related incidents of aggression, harassment or violence is submitted to Human Resources, not Workplace Health and Safety or your manager, for investigation. Filed this way, your complaint bypasses your manager in the event they are the person you are reporting. But it is important to ensure you follow-up with your manager directly in addition to filing your report on MSN. If you have concerns about this, contact HR. If you lodge a harassment or abuse concern, it is strongly recommended you contact your UNA Labour Relations Officer (LRO).

### Your employer is obligated to investigate and report back to you

If you file a complaint, your employer is required to investigate and report back to you. If you do not receive follow-up, ask your supervisor. You are entitled to ask your manager for a copy of the investigation report. Should the manager not give you a copy of the report, contact me and I will ensure you receive one.

### What if my supervisor discourages reporting incidents?

Report the incident regardless of direction from the supervisor. I have been told that direction given by AHS to senior management is to have employees report. I do hear of occasions when an employee is told a concern has already been reported, so they don't need to bother. However, you should report anyway. The more reports are filed regarding a concern, the more attention it gets. If you are discouraged to report, you should contact Local Union Representatives, your LRO, myself, or your WHS advisor at AHS and tell them what has happened. Only when issues are reported will there be an investigation that can lead to a resolution.

### What not to report

If an incident involves patient safety, report it in the *Reporting and Learning System* (RLS), not *MySafetyNet*.

### What if I am not satisfied with the resolution from the investigation report

When you receive an investigation report, you may not be satisfied with the corrective actions taken by the employer. You have options available in such cases for further discussion. 



UNA OH&S Advisor  
Dewey Funk

Contact your OH&S Committee representative to bring your concern to the attention of the OH&S Committee. You are also welcome to contact me directly, or your LRO.

□ CONTINUED FROM PAGE 9

Enrolling would raise the RN's gross annual salary of \$98,592 to \$100,563.84. A total of \$3,943.68, including the nurse's contribution, would be deposited to an RRSP or TFSA each year.

To receive this extra pay and savings, this employee would be required to contribute \$75.84 per bi-weekly paycheque.

Article 29.05 of the UNA Provincial Collective Agreement states:

(a) The Employer shall provide a supplemental pension plan in the form of a Registered Retirement Savings Plan (RRSP). Effective April 1, 2018 the Employer shall also provide a Tax-Free Savings Account (TFSA). Employees shall determine the allocation of contributions to either

the RRSP or the TFSA. Employees may change their allocation effective April 1st of each year.

- (b) Effective on the Employee's date of enrollment, a Regular Employee shall have the right to contribute up to 2% of regular earnings into either the RRSP or TFSA:
- i. Employees may contribute into the RRSP until December 30th of the year the Employee turns 71. The Employer shall match the Employee's contributions into the RRSP; or
  - ii. Employees may contribute into the TFSA. The Employer shall match the Employee's contributions into the TFSA.
- (c) Regular Employees who, by virtue of their age, no longer qualify under Article 29.05(b)(i), shall have the option of reallocating contributions to the TSFA as per Article 29.05(b)(ii) or receive an additional 2% of their regular earnings. Employees may change their allocation between participating in the TSFA and receiving 2% of regular earnings effective April 1<sup>st</sup> of each year.
- (d) "Earnings" as defined in Article 29.05(b) above, will include WCB earnings until such time that the Employee exhausts his or her sick leave credits and is deemed to be on sick leave without pay.

## UNA's Jane Sustrik appointed to Workers' Compensation Board

■ **UNITED** Nurses of Alberta First Vice-President Jane Sustrik has been appointed to the board of directors of the Workers' Compensation Board for a term to expire on January 21, 2022.

Sustrik is a Registered Nurse and worked at the University of Alberta Hospital until she was elected as a vice-president of UNA in 1999. The WCB appointment is a part-time role and Sustrik will continue in her elected position as UNA's First Vice-President.



The appointments were recommended by Minister of Labour Christina Gray and made official by the provincial cabinet on January 22, 2019.

WCB is the administrator of the Workers' Compensation Act and makes claim benefit decisions based on assessment of claim facts and application of legislation and policy.

The WCB provides no-fault disability insurance for workplace injuries and illnesses to more than 160,000 employers and more than two million workers. The program is 100 per cent employer funded and operates with oversight from a 10-member Board of Directors. 🍷

Remember, the agreement does require that employees contribute 2 per cent of their salary for the employer to match, and employees need to enroll in the program for the employer to contribute this money. No UNA member should go without funds for their retirement that their employer has agreed to contribute.

This supplemental pension is not available to temporary or casual employees. 🍷

# UNA outlines scheduling procedure to ensure payment of 2X premiums

■ **UNITED** Nurses of Alberta members who have been asked to work on their designated days of rest have found they are often denied the 2X premium pay to which they are entitled under Article 8.01 (a) of the Provincial Collective Agreement.

UNA has filed individual and policy grievances to address this violation of the Collective Agreement. Until the grievances are resolved, however, UNA recommends employees facing this situation respond in the following manner:

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## Vacation Period in Provincial Collective Agreement

**THE** final version of the Provincial Collective Agreement includes missing information in Article 17.01(b) related to the definition of a vacation year.

The vacation year is May 1 to April 30.

Employees should submit ad hoc vacation requests for April 1 to April 30, 2019, as such requests fall under the 2018/2019 vacation planner.

Article 17.01(b) should read:

(b) “vacation year” means the 12 month period commencing on the 1st day of May in each calendar year and concluding on the last day of April the following calendar year... 🍷

If you are asked to pick up shifts on your designated days of rest on Workforce ESP (Environment for Scheduling Personnel), you should:

- Only provide your availability within a 14-day period.
- If you are called by AHS, advise the caller that you do not agree to move your designated day of rest. If you are pressured, resist unless you wish to waive your 2X overtime premium.
- If you are not called, check your schedule from time to time to ensure the employer has not unilaterally moved your designated day of rest.
- If the employer has unilaterally moved your designated day of rest, call ESP to advise the employer of the error and state that you want the day of rest moved back.

If enough RNs follow this routine, you will regularly be called back to work at the 2X premium rate.

If you work in a rural area, UNA suggests that you do not use ESP. If you do not use ESP, staffing resources are limited enough that the employer will be forced to call you directly, which will ensure the proper 2X premium is applied if you are called in on your designated day of rest.

These suggestions are the result of a grievance arbitration that was dismissed. That decision will be appealed. UNA will publish an updated Spotlight for members when the appeal has been decided. 🍷

## KNOW your Rights



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

### □ CONTRACT QUIZ ON PAGE 8

## CONTRACT QUIZ ANSWERS:

1. entitlement
2. planner
3. supplementary
4. credits
5. liability
6. 24
7. 75
8. blocks; schedule
9. seniority
10. ad hoc
11. carry forward; writing
12. cancel; emergency

# Nurses advocate for your safety all year round.

**Nurses face some of the  
highest rates of workplace  
violence in Alberta.**

United Nurses of Alberta continues to press for protection for the more than 30,000 Registered Nurses, Registered Psychiatric Nurses, and allied health workers represented by our union - and for our patients, residents, clients and their families and friends.

**UNA**  
United Nurses of Alberta

