



FALL 2022 VOLUME 46, NUMBER 3

NEWS Bulletin

AHS agrees National Day of Truth & Reconciliation is Named Holiday **PAGE 8**

**FEDERAL HEALTH MINISTER
Hears From UNA Members**

PAGE 6

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PRESIDENT'S MESSAGE

Back together face-to-face at last, what lies ahead?

■ **PARADOXICALLY**, this autumn we find ourselves at a moment in the history of our union that is both a time of celebration and a period of crisis and grave concern.

For the first time in three years, UNA will hold an in-person Annual General Meeting in mid-October.

After the long crisis caused by the global COVID-19 pandemic, this alone is cause for rejoicing.

During the pandemic, we negotiated a collective agreement that proved once again that nurses move forward, we don't go back. This too is cause for celebration.

At the same time, we face the potential of a renewed attack on our public health care system by a government steeped in market ideology. We are in the midst of a grave staffing crisis made worse by the pandemic, but in the works through years of neglect, underfunding and harmful dangerous staffing policies.

By the time you read this, a new premier will have been chosen by members of the United Conservative Party.

There is a significant chance the winner will be one of the candidates who have spent the campaign talking about decentralizing Alberta Health Services – after more than a decade of centralizing the system and two and a half years of pandemic.

I fear this very dangerous idea could be the straw that breaks the camel's back and sends Alberta's struggling, but still excellent, health care service into a tailspin.

The governing party and all its leadership candidates also remain determined to implement what they call "private surgical initiatives" to reduce surgery wait times – a dangerous policy zombie that never dies.

The government touts Saskatchewan's private surgery experiment in 2010 as if it were a success. The reality: It succeeded briefly and then made things worse.

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UNA'S FIRST IN-PERSON AGM SINCE 2019

■ **UNITED** Nurses of Alberta's first in-person annual general meeting since the start of the pandemic will commence a 9 a.m. on Tuesday, October 18, at the EXPO Centre in Edmonton.

The theme of the 2022 AGM is *Strong Together!*

President Heather Smith, who along with Second Vice-President Cam Westhead was acclaimed to another two-year term after the nomination deadline passed on August 19, will address the AGM after land acknowledgments, singing of the national anthem, and other routine opening business has taken place.

Most elected positions were filled by acclamation this year, so the only elections will be for North Central District representatives.

Business on Tuesday will include reports by Labour Relations Director, Finance and Administration Director, and Information Systems Director, as well as a budget overview by Secretary-Treasurer Karen Craik.

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STRONG

TOGETHER AGM 2022

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Wait times in Saskatchewan are now longer than ever. All the program did was burn through hundreds of millions of public dollars used to subsidize more expensive private clinics, whose owners skim profit margins as high as 20 per cent off the top, while taking medical professionals out of the public system.

The inevitable result of this approach is higher costs and longer wait times.

As I've said many times before, if you only have one nurse and one surgeon and you pull them out of the public system to staff a private clinic, that isn't going to do anything to improve access.

And it makes no sense to pay the private sector to do a job that public facilities do better for less. That is a formula for us to get only 80 or 90 cents of value for every public dollar we spend on health care.

Add to that inadequate public accountability and the need for massive bailouts whenever there is a business failure by one of these private health care providers, and the potential for disaster grows.

Meeting the challenges we have will be difficult enough. Having our government take actions that intentionally destabilize

the health care system introduces uncertainty that will make the problems we face significantly worse.

We can't ignore this. We have our work cut out for us – for our patients, residents and clients, and for our public health care system – in the weeks and months ahead.

The one bright light in this difficult situation is that we know we are stronger together!

Our strength together, which Canada's nurses demonstrated throughout the hard years of the COVID-19 pandemic, is powerfully illustrated on the cover of this edition of UNA NewsBulletin with the reproduction of artist Kris Knight's powerful oil painting of two nurses embracing. The painting was commissioned this year by the Canadian Federation of Nurses Unions. CFNU plans to donate the work to a public collection to be seen and preserved as an important piece of Canadian history.

In Solidarity. Stay well, stay safe, stay strong!

Heather Smith
President, United Nurses of Alberta



FRONT COVER: "Embrace," oil on canvas by Ottawa artist Kris Knight, was commissioned by the Canadian Federation of Nurses Unions in 2022 to commemorate the herculean effort by nurses throughout the COVID-19 pandemic. More information about Knight and this work is found at www.nursesunions.ca/embrace



TO START ON OCTOBER 18

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After lunch, high-profile journalist Andrew Nikiforuk will address the approximately 1,000 delegates, elected officers, staff members and observers about the lessons of COVID-19 and what the future may hold.

On Wednesday, October 19, in addition to routine business, delegates will hear from Canadian Federation of Nurses Unions President Linda Silas and comedian Susan Stewart.

On Thursday, October 20, the final day of the AGM, activities will include reports from union committees, and a speech on the future of Alberta politics as the

2023 election nears by political columnist Graham Thomson.

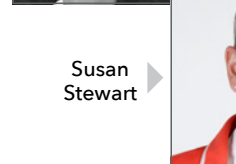
Registration commences prior to the start of the meeting. Members must have their current 2022 UNA membership card ready for registration.

Members attending the meeting should know if they are voting delegates or observers, and whether they are provincially or locally funded. Both delegates and observers must be elected by their Locals.

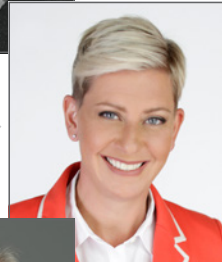
Be sure to bring your membership cards and reusable cups for water, tea or coffee. ☺



Andrew Nikiforuk



Susan Stewart



Graham Thomson





TRADITIONAL EDMONTON LABOUR COUNCIL BBQ RETURNS TO EDMONTON

■ **HALTED** for two years by the pandemic, traditional Labour Day BBQs by local labour councils are starting to make a comeback in Alberta.

The Edmonton and District Labour Council's BBQ in the McCauley neighbourhood, in the heart of the city, returned after a two-year hiatus on Sept. 5, with volunteers from UNA and many other

unions serving lunch for four hours to a smaller crowd than in past years.

A particular mission of the Edmonton event is to serve a good lunch and provide other necessities such as socks and personal items to unemployed and underemployed residents of the inner-city neighbourhood.

This year, music was provided by Edmonton singer-songwriter Ann Vriend, who lives nearby. 🍷

Shelley Lavalee of CUPE Local 3550, UNA Local 196 First Vice-President Sandi Johnson, UNA President Heather Smith, and Alberta Federation of Labour Secretary-Treasurer Karen Kuprys, RN, volunteered at the Edmonton and District Labour Council's 2022 Labour Day BBQ.



NDP Health Critic David Shepherd with Edmonton singer-songwriter Ann Vriend, who performed her music during the BBQ.



Apply for a UNA Nursing Education Scholarship!

■ **ONLINE** applications for UNA Nursing Education Scholarships are open and must be completed and submitted by 4:30 p.m. on October 15.

The scholarships are awarded annually to students in their first year of nursing studies in an approved nursing program in Alberta and who are related to a UNA member or associate member in good standing.

To complete the application for the scholarships, applicants must fill out the application form and submit a short essay that

answers the question: *“Why is the PRC process important to Alberta Nurses?”*

UNA awards up to 15 nursing scholarships of \$1,500 each year.

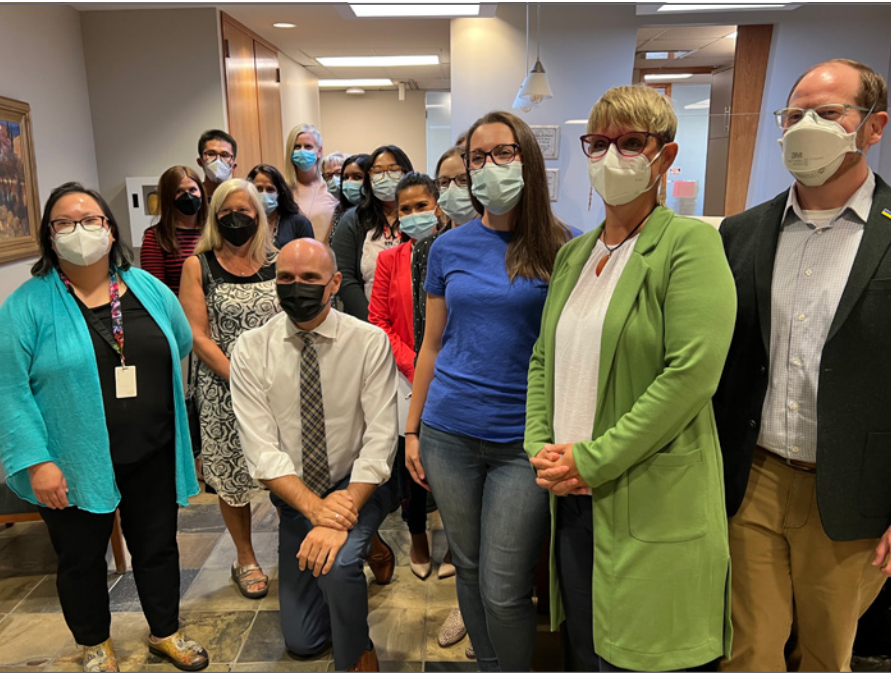
In addition, UNA is responsible for choosing a recipient for one award of \$1,500 sponsored by the Canadian Federation of Nurses Unions.

Successful applicants must be students enrolled in first-year Registered Nurse- or Registered Psychiatric Nurse-track programs. This scholarship is not intended for postgraduate studies. 🍷

An application form can be found at una.ca



Federal health minister listens to front-line nurses at Calgary meeting with UNA members



Some of the nurses who met with federal Health Minister Jean-Yves Duclos in Calgary on August 24. UNA VPs Danielle Larivee and Cameron Westhead are at right. Top right: Local 95 member Claire Galoska speaks with Minister Duclos. Bottom right: Minister Duclos outdoors, without his mask.

By David Climenhaga
NewsBulletin Editor

■ **AS** part of an effort to speak with front-line nurses across Canada about the impact of the COVID-19 pandemic and the nurse staffing shortage afflicting all parts of the country, federal Health Minister Jean-Yves Duclos met with a group of UNA members in Calgary on August 24.

The 13 front-line Registered Nurses from health care facilities throughout the Calgary area were articulate and passionate about the challenges they faced during the pandemic and continue to experience.

Many urged Duclos to ensure funds given to provinces come “with strings attached” so that they cannot simply be used by provincial governments to replace already inadequate funding levels or to finance private facilities.

Duclos responded by assuring the nurses that, “yes, we will send more money, but we will work with the provinces and territories so that they understand they need to put this to help front-line workers.”

While the provinces “don’t like the accountability piece,” he added, Ottawa is aware that “if those dollars are used to back up the private system and weaken the public system, it’s just going to go to make the system worse.”

The 13 UNA members plus vice presidents Danielle Larivee and Cameron Westhead told Duclos that pressure for privatization remains a problem in Alberta and described how some recent Alberta Government policies have driven physicians and nurses out of the province while making many others consider leaving or retiring.

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Canada names Chief Nursing Officer in response to health care crisis

■ **THE** federal government has named Leigh Chapman as chief nursing officer of Canada with special responsibility to provide strategic advice from a nursing perspective to Health Canada on priority policy and program areas.

Federal Health Minister Jean-Yves Duclos said on August 23 that the appointment of Dr. Chapman, a Registered Nurse who holds a Ph.D. from the University of Toronto's Lawrence S. Bloomberg Faculty of Nursing, will ensure "the perspective of nurses is included at the national level, helping to shape the overall health policy work of Health Canada."

"Improving our health care system includes addressing the shortages in health human resources we are seeing across the country," Duclos said.

Chapman's career has included work in all domains of nursing, including practice, education, research, administration, policy, and advocacy, Health Canada said in a news release.

She will be asked to provide strategic advice on health workforce planning and stability, long-term care, home care, palliative care, mental health, alcohol and drug use, models of care, and scope of practice and competencies, the news release said.

She will play a convening role with provincial and territorial governments and a broad range of nursing stakeholders, including regulatory bodies and educators, on key nursing issues.

The reinstatement of the CNO position is clearly a response to the nurse shortage that has reached crisis proportions during the COVID-19 pandemic.

Canada's first CNO, then known as the Principal Nursing Officer, was appointed in 1968 by the Liberal government of the day. The position was eliminated in 1994 and reintroduced in 1999 under Prime Minister Jean Chretien, a Liberal, and abolished in 2012 by the Conservative government of Prime Minister Stephen Harper. 🍷



photo by Jenna Muirhead

Leigh Chapman
Chief Nursing Officer
of Canada

□ CONTINUED FROM PAGE 6

The minister also heard graphic descriptions of just how understaffed Alberta's hospitals now are, and how this crisis is impacting patient care, as well as their difficulty scheduling getting time off, vacations, personal days, and training.

"All we do right now is Band-Aids," said one frustrated nurse, describing the impact of closing supervised consumption sites on ambulance availability, the rolling closings of health care facilities throughout the province, and how dependence on Travel Nurses is harming the ability of the system to treat Albertans.

Other members called for quicker accreditation for foreign nurses and the need for more public facilities in long-term care.

"Yes, we will send more money, but we will work with the provinces and territories so that they understand they need to put this to help front-line workers."

- Federal Health Minister Jean-Yves Duclos

"Short-term fixes that come with more costly care and less equitable care will eat up the public health care system, make it more fragile," Duclos said. "We don't want that."

When the numbers of health care professionals are limited, he said, privatization offers no solutions. "You can't magically create workers."

He said that the crisis in health care "is really systemic across the country. It's something that you see, and we feel, is different from past years." 🍷

UNA reaches agreement with AHS and Covenant Health to recognize National Day for Truth and Reconciliation

Under the agreement reached by UNA and AHS, the employer will recognize the NDTR as a named holiday retroactive to September 30, 2021, and thereafter starting on September 30, 2022.

- **UNITED** Nurses of Alberta and Alberta Health Services reached an agreement in July to recognize the National Day for Truth and Reconciliation (NDTR) as a named holiday for full-time employees.

The federal statutory holiday, first marked last year, was created so that Canadians had an opportunity to honour the lost children and survivors of residential schools, their families, and communities.

However, while the NDTR applied to all federal employees and workers in federally regulated workplaces, the Government of Alberta refused to recognize the holiday for employees of provincially regulated industries, leaving it to individual employers to decide.

Despite language in UNA's Provincial Collective Agreement stating that any holiday recognized by the Government of Canada will apply for its employees, AHS initially refused to recognize the statutory holiday, although some long-term care operators agreed to recognize it.


UNA filed a grievance with the employer to resolve this issue.

Under the agreement reached by UNA and AHS, the employer will recognize the NDTR as a named holiday retroactive to September 30, 2021, and thereafter starting on September 30, 2022.

Full-time employees who were eligible to receive the alternate day in lieu of the NDTR will see a lieu day added to their named holiday banks on September 7, 2022.

Under the agreement, former members who ended their employment before September 30, 2021, are not eligible for retroactive pay.

Employees who terminated their employment after September 30, 2021, may have been eligible to receive the applicable premium for hours they worked on September 30, 2021, and a payout of the lieu day. Details of how former employees could submit a request for a retroactive payment were published on UNA's website.

UNA members and former members who did not receive payments or have any questions should contact the union. 

UNA marked National Indigenous People's Day on **JUNE 21**

■ **UNITED** Nurses of Alberta members marked National Indigenous People's Day on June 21, honouring the contribution of First Nations, Inuit and Métis peoples to our union, our province and Canada.

UNA is proud to represent many nurses of Indigenous heritage, including those employed by the Blood Tribe Department of Health in Stand Off, near Cardston, and by Aakom-Kiyii Health Services of the Piikani Nation, at Brocket.

In co-operation with Indigenous organizations, the Government of Canada chose June 21, the summer solstice, for National Aboriginal Day, now known as National Indigenous Peoples Day.

For generations, many Indigenous peoples and communities celebrated their culture and heritage on or near this day because of the significance of the summer solstice as the longest day of the year.

National Aboriginal Day was proclaimed by then governor general Romeo Leblanc in 1996 and was renamed National Indigenous Peoples Day in 2017.

The Canadian Constitution recognizes three distinct groups of Indigenous peoples with unique histories, languages, cultural practices and spiritual beliefs: First Nations (still referred to in federal legislation as Indians), Inuit, and Métis.

National Indigenous Peoples Day provides an opportunity for all Canadians to learn more about Indigenous people and show their respect for their vast contribution to Canada.

National Indigenous People's Day is a statutory holiday in Yukon and the Northwest Territories. It is an observance in Nunavut and the 10 provinces. 🍷

National Aboriginal Day was proclaimed by then governor general Romeo Leblanc in 1996 and was renamed National Indigenous Peoples Day in 2017.

UNA responds to AHS refusal to recognize September 19 as Named Holiday

■ **UNITED** Nurses of Alberta has filed a grievance in response to a decision by Alberta Health Services to not recognize Monday, September 19, as a Named Holiday.

The federal government declared it a national holiday to mourn the death of Queen Elizabeth.

Article 18.01 (a)(ii) of UNA's Provincial Collective Agreement states that Named Holidays include any day proclaimed to be a holiday by the Government of Canada.



Queen Elizabeth II

Joel Rouse/ Ministry of Defence, OGL 3, via Wikimedia Commons

UNA believes that this wording classified September 19, 2022, as a Named Holiday under the Provincial Collective Agreement. UNA is assessing all Collective Agreements for the applicable language.

Employees who worked on Monday, September 19, and were not paid the Named Holiday rate should contact their UNA Local Executive or Labour Relations Officer and we will file grievances, assuming the applicable language is in place. 🍷

UNA urges use of northern locums to ease pressure on rural health sites until Rural Capacity Investment Fund Committee is up to speed

■ **WORK** by the Rural Capacity Investment Fund Committee made up of representatives of United Nurses of Alberta, Alberta Health Services, and the three other signatory employers to the Provincial Collective Agreement is getting under way.

The fund will allocate \$7.5 million per year throughout the life of the collective agreement to support recruitment and retention initiatives that will increase capacity and nursing staff at rural sites and sustain the health care workforce over the long term throughout the north, central, and south zones.

A total of \$5 million will be devoted each year to recruitment activities, and \$2.5 million for relocation assistance.

UNA and the employers each have five representatives on the committee.

Although the committee has not yet developed specific criteria for submissions, UNA locals are encouraged to consider initiatives that could serve the specific needs in their regions.

In the meantime, UNA is also seeking ways to use the successful northern travel nursing agreement first signed in 2012 to ease staffing pressures at rural sites in Northern Alberta.

Travel nursing assignments – named after the term “*locum tenens*,” Latin for “temporary substitute” – enable Registered Nurses and Registered Psychiatric Nurses working elsewhere to pick a temporary assignment for a set period and be paid a salary premium and other additional benefits.

Participating nurses who are members of UNA have the right to return to their previous jobs or casual status after their northern assignment ends. 🇨🇦

A total of \$5 million will be devoted each year to recruitment activities, and \$2.5 million for relocation assistance.

Alberta RNs and NPs now need to obtain Professional Liability Protection

■ **PROFESSIONAL** Liability Protection is no longer automatically included in College of Registered Nurses of Alberta (CRNA) registration

United Nurses of Alberta reminded members in June that they needed to be aware Professional Liability Protection (PLP) was no longer automatic when Registered Nurses and Nurse Practitioners renew their registration this year.

This meant that in order to renew their registration RNs and NPs had to register for Canadian Nurses Protective Society

(CNPS) PLP through the CNPS or the new Alberta Association of Nurses (AAN).

The change came about after of the College and Association of Registered Nurses of Alberta (known as CARNA) was restructured into the AAN and the CRNA.

The change did not impact Registered Psychiatric Nurses who are members of UNA, as they are employed by employers with sufficient insurance plans recognized by the College of Registered Psychiatric Nurses of Alberta.

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UNA nets three communications awards from national organization

■ **UNA'S** Communications department netted three awards from the Canadian Association of Labour Media during the group's conference and annual general meeting June 10 and 11 in Calgary.

UNA took home CALM's award for the best provincial or national campaign for the *Alberta Needs Nurses* campaign introduced in 2021.

In addition, UNA's video, *Rebels With a Cause 2021*, created by staff videographer Jeremy Rittwage and independent video producer Don Bouzek, won the national organization's award for best narrative video as well as the Cliff Scotton Prize for narrative video, audio or visual that reflects the history, traditions and culture of the labour movement.

"*Rebels With a Cause* powerfully weaves in original, one-on-one interviews with RNs through the years, archival footage of strikes, rallies, and text to tell the

remarkable history of activism and strike action from Alberta's nurses to protest cuts, demand fairer treatment, and preserve job security," the judges wrote. "The gold is in the interviews, all original journalism – brimming with personality, insight, history, and passion – and they help make this a remarkably well-told part of Alberta nurses' history of rallying for their rights." 🍷

UNA Communications Advisors Dave Cournoyer, left, and David Climenhaga, right, were presented with UNA's latest Canadian Association of Labour Media Awards by CALM President Taisia Brown and CALM Editor Nora Loreto, during the organization's annual meeting in Calgary in June.



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Under Alberta's Health Professions Act, RNs and NPs are required to maintain their registration through membership in CRNA.

RNs and NPs are also required under the Act to maintain Professional Liability Protection on top of any employer liability coverage.

For many years, PLP was included in CARNA registration costs and was provided by CNPS. But CRNA now requires RNs and NPs to obtain PLP through CNPS in order to renew their registration each year.

The annual cost of PLP on September 1 when registration was required this year was \$88. Nurses who joined the AAN could take advantage of the CNPS group rate of \$68. The annual fee for AAN membership, which is voluntary, is \$50.

Additional information can be found on the CNPS website – at cnps.ca/crna-registrants/.

Annual CRNA and CNPS PLP fees are tax deductible as they are required by legislation. AAN fees are not tax deductible.

One other impact of the change is that membership in the Canadian Nurses Association (CNA) is no longer automatic with registration through CRNA. RNs and NPs who wish to continue their membership in the CNA must join directly through the CNA website – can-aiic.ca.

The CRNA continues to be the regulatory college for RNs and NPs. AAN, officially launched on May 9, is a professional association and advocacy entity for RNs, NPs, RPNs and Licensed Practical Nurses in Alberta. 🍷

RNs and NPs are also required under the Act to maintain Professional Liability Protection on top of any employer liability coverage.



cnps.ca/crna-registrants

Nurse2Nurse Peer Support

SEEKS WAYS TO OFFER NEW ROUTES TO TREATMENT OF WORKPLACE STRESS INJURIES



■ **IN** the wake of the global pandemic, with health care systems everywhere underfunded, under-resourced and understaffed, there was bound to be an epidemic of occupational stress injuries among nurses and other health-care workers, says Katrina Stephenson.

To make matters worse, according to the Edmonton Registered Nurse, who is on disability leave due to work-related post-traumatic stress disorder injuries in her work in addictions harm-reduction, many who suffer from PTSD, burnout, anxiety and other forms of OSI do not trust their employers to act in their best interest.

“They feel they have no choice but to endure the stresses of their work with quiet endurance,” she said. “There are nurses who will not access anything from their employers.”

This became the inspiration for Nurse2Nurse Peer Support, she explained, a group she co-founded with nurses Sarah Bohachyk and Fola Vickers to find ways for other nurses to help them reduce the barriers to the services and support their colleagues need.

Barriers can include employers themselves, provincial legislation, nurses’ organizations, employee and family assistance programs, and accessibility to services.

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Katrina Stephenson
Founder and CEO



Sarah Bohachyk
Co-Founder and Advocacy
& Education Director



Fola Vickers
Co-founder and Peer
Support Director



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“It’s time to end the stigma around health care providers and their mental health,” Stephenson said. One way to do that, the non-profit organization believes, is to serve as “a confidential bridge between what’s happening with the employer and nurses’ healing.”

“Nurses with lived experience can take their mental health skills and training and apply them to helping other nurses,” she recently explained. “Peer support focuses on health and recovery, rather than illness and disability.”

N2NPS organizes bi-weekly peer-support circles and one-to-one peer support. It is

developing peer navigation tools that can be used by individuals and organizations.

But it must seek financial support from employers, unions, regulatory bodies, and all levels of governments to expand its work, Stephenson added. “We need collaboration among employers, unions, regulatory bodies, nurses with lived experience, and all levels of government to make workplaces safer and treatment for workplace injuries more accessible.”

More information on the organization is found at N2NPS.com. 🍷





PRC LEADS TO MORE STAFF AT MEDICINE HAT NICU

By Dave Cournoyer
UNA Communications Advisor

■ **MEMBERS** of United Nurses of Alberta Local 70 who work in the Neonatal Intensive Care Unit at the Medicine Hat Regional Hospital have achieved staff increases through the Professional Responsibility provisions of the Provincial Collective Agreement.

Since February 2020, UNA members filed more than 12 PRC forms and three grievances in response to inappropriate job postings for the unit, including temporary postings that should have been permanent.

UNA members know how important patient safety is, especially in the NICU, so the nurses kept advocating to have three Registered Nurses on all shifts. The employer claimed that, due to Operational Best Practices, they were unable to post the positions and did not feel they needed three RNs at all times.

Because of the short staffing, there were several occasions the unit needed to be shut down and had to refer patients to the NICU at the Chinook Regional Hospital in Lethbridge. Members working on the unit were exhausted and felt the impacts on their own physical and mental health.

The PRCs were escalated to AHS senior leadership by PRC Advisor Joshua Bergman, who presented a compelling argument that brought attention to the seriousness of the situation at the Medicine Hat NICU.

The grievances were unsuccessfully pursued through a Dispute Resolution Advisory Committee and were advanced to arbitration. Shortly after the PRC escalation meeting, UNA had scheduled a meeting of the Provincial Ad Hoc Resolution Committee for the temporary positions.

Prior to the meeting, the employer agreed to resolve the three outstanding grievances, and declared that by not posting the vacant positions, and not posting them as permanent, there was violation of the Collective Agreement.

UNA would like to thank each Registered Nurse on this unit who completed a PRC, because the persistence of members on this unit is what forced the employer to agree to staff the NICU at the Medicine Hat Regional Hospital with three RNs on all shifts at all times, resulting in an additional 2.69 FTE. 🍷

Medicine Hat Regional Hospital



UNA introduced improved PRC form in July

■ **A NEW** online Professional Responsibility Concern Form (PRCF) has now been introduced for use by UNA members.

The new form, now available on UNA's website, was the result of a year-long project that resulted in updated fields to assist reporting and capture important information to help managers and PRC Committees discuss and resolve concerns.

The update was based on a scan of other Canadian nursing unions' professional responsibility, staff and workload reporting forms, a review of technical literature on nursing workload and quality-of-care indicators, and a quality review of UNA's existing PRC data.

In addition, focus groups made up of UNA local members engaged in the PRC process in all parts of Alberta contributed to the design.

Currently, around two-thirds of UNA's PRCs are reported electronically by UNA members, and UNA hopes to increase the percentage with the launch of the new form.

The PRC update is being rolled out in stages, first via UNA's website and later through the UNA App.

For now, members need to use a web browser on their phone, tablet, or desktop computer to go to the www.una.ca website to complete a PRC electronically. At present, if they try to report through the app, it will direct them to the website.

UNA members can complete the PRCF online at dms.una.ca/forms/prc or by going to UNA's main webpage at una.ca and

selecting the *Professional Responsibility* button on the right hand side of the home page.

If you are unable to complete the form online for any reason, you can still access a printable PDF version of the PRCF at una.ca/document/prcf. The completed paper form can be submitted to your manager and local.

UNA members are encouraged to review the updated Reporting a Checklist document found at una.ca/document/reportingaprc to answer questions about how to complete a PRCF.

Reporting a Professional Responsibility Concern is a constructive action that can protect patients, clients, and residents and alleviate the moral distress nurses sometimes experience when they are unable to provide care as required by the standards of professional licensing bodies. 🍷



dms.una.ca/forms/prc



www.una.ca/document/reportingaprc



www.una.ca/document/prcf



Josh Bergman joins Dewey Funk as full-time OHS Advisor

By Dewey Funk
UNA OHS Advisor



■ **CHANGES** are occurring in the OHS assignments in UNA.

Joshua Bergman has joined me as a full-time Occupational Health and Safety Advisor.

A list of the locals they represent was sent to Local Executives of August 22. Should you not know who represents your local, you can email both of us and we will advise you.

UNA has completed development of basic and advanced Occupational Health and Safety workshops. Workshops using the new materials have already been facilitated and participation has been great! Basic and advanced workshops may now be booked on DMS.

We are now in the process of rewriting the Dealing with Abuse workshop and will be facilitating this workshop starting in October or November.

We are progressing with our discussions with the Alberta Health Services Bilateral Complaint Resolution Working Group in relation to worker-to-worker (physician abuse) complaints. Meetings are planned with AHS after which an update of commitments and timeline will be provided.

We are also in discussion with AHS on the Terms of Reference for all Joint Worksite Health and Safety Committees.

The employer has looked at Bill 47, the new *OHS Act*, which reduces worker rights and creates restrictions on participation and limits to access to information.

□ CONTINUED ON PAGE 17



Josh Bergman

AHS Attendance Awareness Program remains on hold, subject to review, senior managers say

■ **ALBERTA** Health Services' approach to attendance awareness issues is unchanged and the employer's Attendance Awareness Program remains on hold, the health agency's directors of labour relations and ability management said in a June 24 letter to United Nurses of Alberta President Heather Smith.

"We can confirm that there has been no recent change to our approach to attendance awareness," said Ability Management Director Lindsey Simpson and Labour Relations Director Krystie Watson Boyd.

"Our ongoing advice to our managers remains that the formal Attendance Awareness Program is on pause and that they should continue to work with their staff at a local level to support them in staying healthy to attend work," the letter said.

Simpson and Watson Boyd were writing in response to the June 21 letter from Smith that noted the union has heard increased discussion about the use of attendance management by AHS and noting that

while UNA understands that the employer is facing significant human resources challenges, "health care workers in general and Registered Nurses and Registered Psychiatric Nurses in particular, face unprecedented levels of health concerns."

Smith's letter said that when nurses request reduced hours, transfers, employment status changes, vacation or special leave, their requests are often denied or otherwise thwarted by managers. "In the absence of these options, sick leave is their last resort," she wrote. "It is our conclusion that implementing an attendance management program at this time will place our members' health at risk."

In their response, Simpson and Watson Boyd acknowledged that AHS "needs to focus on wellness as a key metric" and restated the employer's commitment to employee health and well-being.

A review of the program is planned, and UNA will be included as a key stakeholder, they said. 🍷

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UNA has taken the position that as the largest health care employer in Canada AHS must take into consideration the fact health care workers have just come through COVID and are experiencing short staffing while suffering the psychological effects of a pandemic.

AHS needs to lead the country in setting fair and participatory language in the Terms of Reference for OHS and not change them every time there is an election.

We have set and had initial conversations with both AHS and Covenant Health to

discuss Article 34.05, which addresses the commitment to implement a Psychological Health and Safety Plan that is consistent with the CSA Standard. As our discussions progress, we will provide updates.

We both look forward to supporting UNA membership in occupational health and safety into the future. The main message we want to convey is your health and safety is always front and centre, so that when you go to work you return home safely at the end of the day.

Work Safe! 🍷



CANADIAN
FEDERATION
OF NURSES
UNIONS

A global perspective of the NURSING SHORTAGE

■ **AS** the nursing shortage grows, the demand for nurses grows. Nurses, meanwhile, are left to shoulder ever-increasing workloads while government support for nurses continues to stagnate.

Even before the COVID-19 pandemic, nurses have long borne the brunt of a chronically underfunded health care system. The strain of the pandemic only served to highlight and worsen the impact that years of government neglect have had on health care workers: high prevalence of burnout, unsustainable hours, and patients lashing out in frustration.

Indeed, recent Statistics Canada data echoes what nurses have been saying: nurses are working more overtime than ever before, and they are working more overtime than any other profession. Even in the years leading up to the pandemic, nurses were consistently working six to seven extra hours per week to make up for chronic understaffing.

The strength and resilience of nurses should always be commended, but it cannot continue to be the Band-Aid solution to a health care system in crisis. Nurses, working themselves ragged, cannot continue to be collateral damage of chronic government neglect.

The nurse staffing shortage is a crisis unlike anything we've seen before. This crisis crosses borders, impacting health care workers and patients in every province and territory. Nor is Canada the only country facing a critical nursing shortage.

The global scope of this crisis is staggering. A recent report by the International Council of Nurses suggests that, in the aftermath of the COVID-19, an acceleration in the exodus of nurses could see the global nursing shortage balloon to 13 million nurses. In 2020, the World

Health Organization had estimated the global nursing shortfall at 5.9 million. Alarming, low and middle-income countries were especially impacted, accounting for 89 per cent of these shortages.

The International Council of Nurses has dubbed the global health workforce shortage the greatest threat to global health.

In September, 15,000 Minnesota nurses walked off the job, striking to demand a solution to short-staffing and the protection of patient care. In Australia, Spain, New Zealand, Mexico, Uganda, Finland, and Denmark, nurses have taken action to demand improved working conditions and an end to short staffing.

With many countries grappling with a nursing shortage, an international bidding war on nurses could widen global health disparities as more nurses are recruited away from the developing nations they call home. As they battle domestic shortages, wealthier countries must be careful not to create nursing deficits abroad.

While governments may look to internationally educated nurses as a relatively quick way to mitigate acute staffing shortages, these nurses cannot be the singular solution. The global perspective demonstrates the need for solutions that get to the root of the issue: chronic government underfunding.

The right to the highest standard of health is an internationally recognized human right. To meet this obligation, governments must ensure that their citizens are able to access the care they need in a timely manner and without barriers. Increasingly, as nursing shortages grind health care services to a halt, governments are finally waking up to nurses' indispensable role and the current tenuousness of an understaffed health care system.

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By Linda Silas
President, Canadian
Federation of Nurses Unions

WHEN KNOWLEDGE MEETS KNOW-HOW

BOOK TELLS NURSES' STORIES FROM MOST CHALLENGING MOMENTS OF THE PANDEMIC

■ **AUTHORED** by a team of journalists from Rabble.ca and published by the Canadian Federation of Nurses Unions, *Nurses' Voices, Stories of courage and determination in the face of COVID-19* provides an inside look at how the most challenging moments of the pandemic impacted those on the front lines.

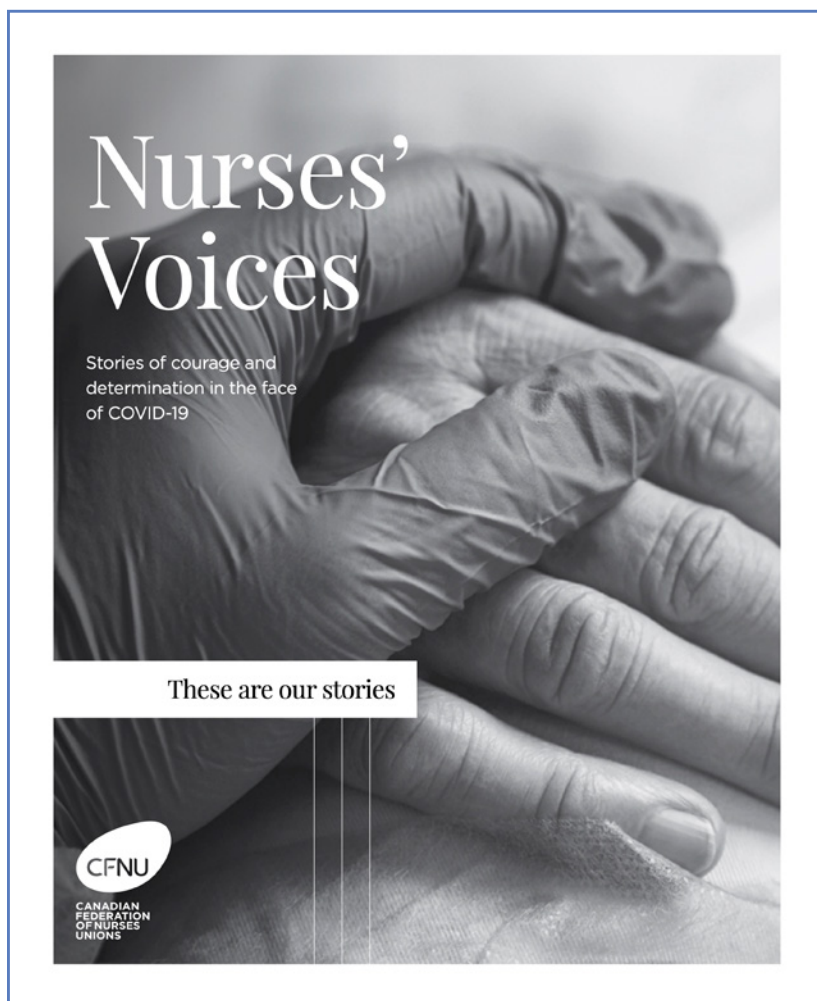
The book – digital copies of which are available free online via the CFNU's website – puts the sacrifice of Canada's nurses into sharp focus.

"Nurses have shouldered a tremendous burden over the past two years," said CFNU President Linda Silas after the book's publication in late June. "These stories show just to what extent the pandemic upended nurses' lives, but also how, despite it all, nurses' commitment to their patients, residents and clients was unwavering."


Canada's nurses worked gruelling hours and grappled with the heartache of seeing patient after patient succumb to the virus. Fearing they might bring the virus home, many chose to isolate themselves from their families at a time when their loved ones' support and care were desperately needed.

While COVID-19 has helped shine a light on Canada's health care system, there is no understating the impact of a decades-long nursing shortage that continues to grow unabated, Silas said.

When the pandemic hit, our health care system was already in crisis, she



explained. Pre-pandemic research revealed a high prevalence of burnout symptoms among nurses.

Now, with the added pressures of the pandemic, nearly half of nurses are suffering from severe burnout symptoms. "Governments must address the longstanding issues plaguing our health care system – issues that, sadly, are pushing more and more nurses out of the profession." 

A digital copy of Nurses Voices can be downloaded at: nursesunions.ca



CANADIAN FEDERATION OF NURSES UNIONS demands dismissal of Canada Blood Services board

■ **ARGUING** that “blood is a critical public medical necessity, not a commodity,” the Canadian Federation of Nurses Unions has condemned the decision by Canadian Blood Services to introduce payment for plasma donations through a deal with Grifols SA, an international pharmaceutical company based in Spain.

After signalling for weeks it was considering, for the first time in its history, working with private companies that pay for the donation of blood plasma, on September 7 CBS signed the deal with Grifols.

In a news release the next day, CFNU warned that the decision could potentially threaten the sustainability of Canada’s public blood supply system.

“In coming to this agreement, Canadian Blood Services is abandoning its mandate

to operate a voluntary public blood supply system and opening the door to unchecked privatization of a critical resource on which so many in Canada rely,” warned CFNU Secretary Treasurer Pauline Worsfold.

CBS is responsible for most of the plasma collected within Canada, but the deal with Grifols would allow Grifols to set up private clinics to collect and process plasma, and ultimately sell it back to CBS at a profit, CFNU said.

Without clear limits to protect the sustainability of the public system from large-scale commercialization, introducing payment for plasma will jeopardize voluntary blood collection across the country – in direct contravention of CBS’s mandate to operate a voluntary supply of blood and plasma products.

Furthermore, the deal officially puts an end to any efforts by CBS to improve voluntary plasma self-sufficiency as successfully done by other jurisdictions, including Quebec, which doubled self-sufficiency from 15 to 30 per cent between 2016 and 2021. By contrast, CBS remained at 15 per cent during the same time period.

“It is deeply troubling that this decision was made without public oversight or accountability, thereby undermining trust in Canadian Blood Services itself,” Worsfold said.

CFNU called on federal, provincial and territorial health ministers to commit once again to the voluntary public mandate of CBS by immediately replacing the organization’s current CEO and board as a necessary step in restoring public trust in CBS and Canada’s voluntary blood supply.

The Canadian Health Coalition and BloodWatch.org also denounced the decision and called for the dismissal of the CEO and board of CBS. 🍷



Pauline Worsfold

UNA expects no change in members' dues deducted by employers

■ **IN** accordance with the requirements of the *Restoring Balance in Alberta's Workplaces Act*, United Nurses of Alberta has undertaken a thorough review of all expenditures and consulted legal counsel about the various entities to which we provide money as well as all sources of income, including sources other than union dues.

The Act, often referred to as Bill 32, requires Alberta unions to report periodically to their dues-payers on the percentage of dues spent on core and "non-core" activities.

Under the legislation, after August 1, 2022, employers may only deduct and remit to the union that portion of dues to be spent on core union activities unless the dues payer has provided an authorization for the employer to deduct dues for non-core activities as defined by the Act.

After carefully assessing all financial information and legal obligations, UNA has determined that all of its members' union dues are spent on core activities.

As a result, no action is required. As of August 1, 2022, UNA expects its members' employers to continue to deduct and remit dues in the same amount as have been deducted and remitted to this point.

UNA has always been transparent with members about budgets and spending. Copies of the complete annual budget continue to be available to any member who requests one.

Elected delegates vote on an annual provincial budget each year at UNA's Annual General Meeting and local members have the opportunity to vote to ratify Local budgets at their Local's AGM.

UNA's annual audited statements are approved by the Executive Board and presented for information at each UNA annual general meeting. UNA's audited financial statements are a consolidated review of our financial records inclusive of the locals as well as the provincial organization.

A copy of the of UNA's latest annual audited financial statements are found at UNA.ca. 🐣

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Health Canada approved vaccine targeting Omicron variant

■ **HEALTH** Canada formally approved Moderna's updated COVID-19 vaccine targeting the Omicron variant on September 1.

The vaccine was approved for use in adults 18 and older and was the first COVID-19 vaccine available in Canada that targets the Omicron variant in addition to the original strain of the coronavirus.

While the updated vaccine was developed to target the Omicron BA.1 variant, Health Canada said clinical trials suggested the new vaccine still elicits a "stronger

immune response" against the more recent mutations of Omicron — BA.4 and BA.5 — that are now dominant.

An initial shipment of 780,000 doses of the updated vaccine arrived in Canada on September 3. Deliveries to the provinces and territories were set to begin the next week.

Appointment bookings for the vaccine opened to Albertans on September 21.

(Source: CBC) 🐣

New collective agreements reached at various UNA worksites

■ **IN** mid-August, members of United Nurses of Alberta Local 425 working at the Chinook Care Centre in Calgary ratified a first collective agreement with their employer, Intercare Alberta Corporate Group Inc.

The first agreement for members at the southwest Calgary worksite set salary at parity to the UNA Provincial Collective Agreement and included a 1.25-per-cent salary increase in the first pay period following September 1, 2022, and a 2-per-cent increase in the first pay period following April 1, 2023.

Highlights of the agreement include improved premium overtime provisions, solidification of seniority based on the employee's date of hire, portability of seniority to other worksites represented by UNA, and introduction of personal leave and professional fee reimbursement.

In addition, the agreement ties vacation accruals to years, not hours, worked.

The new contract, which was reached using enhanced mediation through the Alberta Labour Relations Board, also adds the National Day for Truth and Reconciliation as a named holiday starting in 2023.

Meanwhile, in June, UNA members at several other worksites ratified new collective

agreements or letters of understanding with their employers.

Newly organized members at Prince of Peace Manor & Harbour in East Calgary voted 100 per cent in favour of ratifying a first collective agreement with their employer, Verve Senior Living. Members at this worksite are currently represented by Local 504, a provincially administrated unit of UNA.

New collective agreements were ratified by members of Locals 37 and 172 employed by Chantelle Management in Grande Prairie and Lethbridge, Local 194 employed by the Salem Manor Nursing Home in Leduc, Local 226 employed by Venta Care Centre Ltd. in Edmonton, and Local 416 employed by the Blood Tribe Department of Health Inc. in Stand Off.

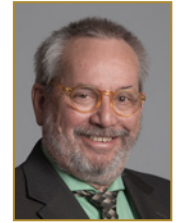
Members of UNA Local 154 employed at Foyer Lacombe in St. Albert voted in favour of salary adjustments included in a new Letter of Understanding with their employer, Covenant Care.

In addition, a tentative agreement was reached on June 28 by members of UNA Local 416 employed by Aakom-Kiyii Health Services at the Piikani Nation in Brocket. Details will be released when the agreement has been ratified by the employer. 🍷

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Unfortunately, there is no single solution to the nursing shortage. Whether in Canada or New Zealand, the fundamentals of the solutions are the same: investing in nurses and health care workers. Tackling the nursing shortage requires robust, evidence-based health human resources planning and multi-pronged approaches that prioritize retention, return and recruitment.

The solutions to this systemic crisis may not be simple but they exist. By respecting, supporting, and investing in health care workers, governments can turn the tide on the nursing shortage. With the United Nurses of Alberta at the decision-making table, we can build safer, healthier working environments where workers have the support they need to offer their patients the best care possible. 🍷



Report from
Director of Labour Relations
David Harrigan

If you have any questions or concerns, please contact your UNA local executive or Labour Relations Officer at 1-800-252-9394

What to know about attending **COMPULSORY IN-SERVICES**

■ **EMPLOYEES** required to attend compulsory in-services need to be aware of Articles 10 and 35 of the UNA Provincial Collective Agreement.

Article 35.02 (a) states that Employees attending a compulsory in-service on a day they are not regularly scheduled to work must be paid at the overtime rate of 2X their regular salary.

Because the sessions are compulsory, it is the equivalent of mandatory overtime.

But Employees offered choices of attending a compulsory in-service on a day they are normally working cannot choose

instead to attend on a non-working day in order to collect the overtime rate.

Articles 10.07 (a) and 10.07 (c) state that Employees required to travel to compulsory in-services shall be reimbursed transportation costs if the in-service is located more than 20 kilometres further than their usual travel route to their normal worksite.

For example, an Employee working at the Leduc General Hospital who is required to take the Connect Care Training at the University of Alberta Hospital shall be paid time to travel and mileage to the U of A Hospital, providing that the trip is more than 20 kilometres farther than their usual travel to the Leduc Hospital. 🇺🇦

UNA members urged to bring union representation to employer meetings

■ **UNITED** Nurses of Alberta members are reminded always to bring a union representative with them when called to employer meetings that could lead to disciplinary action – even when employer representatives suggest they don't need the union there.

According to Article 23.06 of the UNA Provincial Collective Agreement, employees are entitled to have a union representative present for any meetings being held with the employer that have the potential to result to disciplinary action.

When an employer calls an employee into such a meeting, the employer is required to inform the employee of their right to union representation.

The article also states that employees need to be provided a reasonable advance notice of the meeting, which, if circumstances permit, shall not be less than 24 hours.

Employers have been known to tell employees that union representation is not necessary.

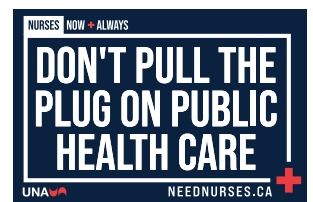
UNA, however, strongly encourages employees always to take a union representative with them to provide support, take notes and provide assistance following the meeting. 🇺🇦

I ♥ ALBERTA NURSES

UNA 



Show your support with a
'Don't Pull the Plug on Public
Health Care' lawn sign



■ **ALBERTA** nurses are on the front lines of health care, dealing with understaffing, an under-funded and badly frayed system, and the lingering impact of the COVID-19 pandemic as they do their utmost to bring the best quality care to Albertans.

Nurses can show their concern by putting a DON'T PULL THE PLUG ON PUBLIC HEALTH CARE/I LOVE ALBERTA NURSES sign on their lawn or in their window.

In addition, Alberta's nurses hope members of the public will help send a clear signal to the provincial government: that Albertans are grateful for our health care heroes, and we have their backs.

Anyone can order a lawn sign by going to: <https://neednurses.ca/action/request-a-lawn-sign/> 