

Join UNA's campaign to protect health care jobs

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UCP BUDGET:

'A tax on health care workers,' says president Heather Smith

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Nurses have no choice but to fight policies intended to undermine public health care

IN Alberta, we associate springtime with renewal of life, the return of birds and a feeling optimism for the future as the days grow longer.

Springtime 2021, sadly, seems more foreboding. We have just passed the one-year anniversary of the World Health Organization's declaration of a global pandemic, and while there is hope the end is in sight thanks to the availability of multiple vaccines, we still face a long slog. It will be some time before COVID-19 is no longer taking lives in our health care facilities, restricting our social activities, and allowing science deniers to sow discord in our communities.

More troubling, despite the crisis caused by COVID-19, Alberta's provincial government is pushing ahead with austerity and privatization measures with the potential to do grave harm to our public health care system and disrupt the lives of nurses and other health care workers.

The plan announced by the United Conservative Party on February 25 will drastically cut the budget for public health care workers' compensation while adding thousands of new health care jobs. The 2021 Budget tabled in the Legislature that day will cut about \$1.2 billion over two years from compensation for public health care workers. At the same time, the government plans to increase the number of jobs in the sector by nearly 3,000.

There's only one way that can happen, and it amounts to a tax on Alberta's front-line heroes. The government is basically asking health care workers to pay to hire more health care workers so it can keep low taxes for corporations and the wealthy! The massive rollbacks proposed by Alberta Health Services for our next collective agreement are part of this effort.

Talk about treating heroes like zeros!

This government plans extensive privatization of health care – a policy that will cost more, deliver less, and weaken the job security, compensation and retirement income of health care workers, especially those in occupations and professions where most are women

Nurses have no choice but to fight these terrible policies, but we must recognize this will not be easy. Right now, UNA is asking you to visit **NeedNurses.ca** and participate in the campaign to keep the UCP from Americanizing our health care system.

How appropriate for us in Alberta that the theme of this year's online convention of the Canadian Federation of Nurses Unions is "No Backing Down!" Registration for the convention on June 8 and 9 is free to all UNA members, and I urge you to register now at NursesUnions.ca/convention2021/.

Stay well, stay safe, stay strong!

In Solidarity,

President, United Nurses of Alberta

FRONT COVER PHOTO:
LAUREN SCOTT, LOCAL 301, SELFIE WITH PPE



plan to drastically cut the budget for public health care workers' compensation while adding thousands of new health care jobs amounts to a "tax" on Alberta's front-line heroes, United Nurses of Alberta President Heather Smith said on February 25.

The 2021 Budget tabled in the Legislature that day by Finance Minister Travis Toews will cut about \$1.2 billion over two years from compensation for public health care workers.

At the same time, budget documents indicate the government plans to increase the number of jobs in the sector by 2,940.

"While we haven't yet seen the details of how this government intends to implement these changes, there's only one way that can happen with this plan, and that's by drastically cutting the pay of the very front-line workers Mr. Toews was thanking today for their brave work in the COVID-19 pandemic," Smith said.

"It's pretty obvious that for the UCP, health care workers are heroes one minute and zeros the next," she said. "They're basically asking health care workers to pay to hire more health care workers so they can keep taxes on corporations and wealthy Albertans low."

"This amounts to a special tax on Alberta's front-line heroes."

Smith said that so far no one knows what jobs the 2,940 new workers referenced in the budget documents will be hired to fill, or who those workers will be.

Toews indicated in his Budget Speech that plans for cuts and savings at Alberta Health Services that UNA has been informed by the government would include the loss of about 750 Registered Nursing and Registered Psychiatric Nursing jobs are still on track to be implemented.

Minister of Finance Travis Toews tables Budget 2021 in the Alberta Legislature in Edmonton on February 25, 2021.

Agreement means casual employees and BECEs of Alberta Health Services may now bank overtime

■ EFFECTIVE March 1, casual employees and benefit eligible casual employees (BECEs) of Alberta Health Services will be permitted to bank overtime.

A Memorandum of Settlement signed by representatives of United Nurses of Alberta and AHS on February 12 ended the practice by AHS of denying casuals and BECEs the ability to bank overtime.

A full copy of the of the Memorandum of Settlement is available on UNA's website - una.ca. The settlement was reached after UNA filed a provincial grievance about the practice. The grievance dates back to 2016, when a similar grievance was filed on behalf of a single employee.

The settlement applies to all casual AHS employees as defined under Article 2.04 (b) of the Provincial Collective Agreement.

The settlement specifically includes BECEs as defined by *Letter of Understanding No. 7, Recruitment and Retention Initiatives*, which is attached to the collective agreement.

As a result, effective March 1, the employer's payroll system will be reconfigured to permit casual employees and BECEs to accumulate overtime.

The MoS also includes the following provisions:

- Overtime accumulated by regular and temporary employees shall be paid out on a transfer to casual status unless otherwise requested by the employee.
- Overtime accumulated by casual employees may only be taken as time off in lieu on days where the casual employee has not consented to work.
- Accumulated overtime shall be paid out at the request of the employee or by March 31 in any year in accordance with Article 8.01 (c) of the collective agreement.
- Employees requesting an overtime payout shall do so using ePeople.
- Overtime payout requests are subject to AHS payroll processes including cutoff dates and pay periods.

☐ PROVINCIAL BUDGET CONTINUED FROM PAGE 3

He also told the Legislature that significant job cuts are coming in other parts of the Alberta public sector, including jobs in post-secondary education and the public service.

While the government did not provide an estimate, the NDP Opposition calculated public-sector job losses that would result from the budget at about 15,000.

In his speech, the minister also outlined plans for privatized surgical and diagnostic imaging services that he described as a way to get health care "back on track." However, Smith said, such changes will have the long-term effect of making the

public health care system less efficient, less fair and no less expensive.

"The language is softer than we have heard in the past," she said. "There's no more mention of the 'fiscal reckoning' the government used to talk about, but the fiscal reckoning is obviously coming just the same."

Smith noted that UNA and others impacted by the budget have only had a short time to examine the numbers and determine what they mean. UNA will be studying the budget in more detail in the weeks ahead and will update members on the impact of the government's plans.

UNA, AHS sign agreement postponing bargaining until after March 31 as parties focus on response to COVID-19



ON January 18, negotiating committees for United Nurses of Alberta and Alberta Health Services signed an important Memorandum of Understanding on COVID-19 measures and bargaining.

In addition to acknowledging the pressure COVID-19 has placed on the health care system and agreeing to schedule no further bargaining for a new Provincial Collective Agreement until after March 31, 2021, the MoU also includes pay for employees who are required to self-isolate retroactive to July 6, 2020.

In addition, the parties agreed to continue job security provisions in the current collective agreement and the employer agreed to suspend "attendance awareness" programs until the same date.

The MoU includes significant additional supports and protections for UNA members and recognizes the unprecedented pressures on the system caused by increased demand for service and a decrease in available staffing due to quarantine and self-isolation requirements.

Paid leave provisions for employees will be as follows:

- Symptomatic employees without a confirmed workplace exposure are expected to take a COVID-19 test and will be paid sick leave for any regularly scheduled shifts for the duration of their illness or for the applicable isolation period, whichever is later. Employees who exhaust their sick leave bank will be able to apply for short-term disability or long-term disability, the normal elimination periods for which have been waived.
- Symptomatic employees with a confirmed workplace exposure who experience illness, whether regular or casual employees, will be able to apply for Workers Compensation under the provisions of the collective agreement.
- Asymptomatic employees under quarantine are also expected to take a COVID-19 test, and will be eligible to be paid the basic rate of pay for all regularly scheduled shifts for the duration of the 14-day quarantine period, retroactive to July 6, 2020. This provision does not apply for employees who are required to quarantine because of non-essential international travel.
- Asymptomatic employees impacted by work restrictions and orders by the Medical Officer of Health affecting their site, unit or office will be eligible for a number of measures to make up for missed regularly scheduled shifts or be compensated for them.

Members seeking payment or requesting reinstatement of previously coded sick leave retroactive to July 6, 2020, will need to submit a request to their manager. Requests must identify the specific shifts and are subject to validation.

Members
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Employees will be entitled to one day of paid leave and additional unpaid leave to meet family responsibilities to care for family members who are ill or required to self-isolate, or for children impacted by school or day care closings.

Other provisions include rules for redeployment of employees to other worksites, distribution of information about mental health supports available to employees, and a commitment by the employer to make all reasonable efforts to grant requests for time away from the workplace including *ad hoc* vacation and personal leave.

The parties also agreed non-essential travel is strongly discouraged while emergency measures and travel advisories remain in place.

Other provisions allow the employer to offer employees covered by the agreement to convert their status to benefit eligible casual employee (BECE), increases in

employee FTEs on a temporary basis, and temporarily vacant FTE to employees in the unit or office without the normal requirement to post.

During Phase Zero and One of the vaccination program, employees who attend a vaccine appointment outside regular work hours will be paid one hour at the applicable rate of pay.

The MoU covers all employees represented by UNA of AHS, Covenant Health, Lamont Health Care Centre and The Bethany Group (Camrose).

UNA members are encouraged to read the full MoU, a copy of which is posted on UNA's website, una.ca/. Employees who encounter problems related to provisions of this MoU should contact their Local Executive or UNA Labour Relations Officer.

The MoU has been ratified by UNA's Executive Board.

Manitoba Nurses Union signs deal with

COVID-19 PAY TOP-UPS

Union and its employer group signed a Memorandum of Agreement on pandemic responsiveness that included top-ups of \$5 to \$6 per hour including overtime for nurses working on or redeployed to intensive care units or units designated to be in a COVID-19 outbreak.

The December 1 MoA was signed after several weeks of intensive negotiations and addresses redeployment, shift disruptions and more, MNU President Darlene Jackson said.

"This new MoA enhances the premiums extended to nurses working in areas of critical need, who have had their schedules disrupted, or who have been redeployed," Jackson told her members at the time.

Highlights include:

Nurses working in or redeployed to a designated inpatient COVID unit, a unit with 50 per cent or more COVID patients, a unit designated as being in outbreak, or an ICU will be provided with an hourly top up of \$5 or \$6 per hour, including overtime.

- An hourly premium of \$6 per hour, including overtime for all nurses working in publicly controlled personal care home facilities.
- Changes to nurses' schedules including adjustments to shift start and end times greater than one hour, changes to days assigned, changes to shift lengths or patterns will result in a premium ranging from \$25 to \$50 per affected shift, depending on the extent of the change.

There were also provisions for a \$500 northern allowance every two weeks for nurses working north of the 53rd Parallel, plus travel allowances for nurses who are redeployed to other locations.



JANUARY 25, 1988:

The bitterly cold day 14,000 Alberta nurses walked off the job







Scenes from the January 25, 1988.

IT was bitterly cold the day in 1988 that 14,000 nurses at 133 hospitals and nursing homes across Alberta walked off the job.

It was January 25 and the United Nurses of Alberta members were dressed like Arctic explorers in parkas and scarves as they headed for the picket lines. It was the first province-wide nurses' strike in Alberta's history.

They were braced to spend a cold and desolate winter on the Prairies outdoors – or in jail, if necessary. Temperatures would hit minus 40 Celsius before the labour dispute would end.

But faced by employers demanding major concessions, they believed they had no choice.

For the next 19 days, the nurses fought an unreasonable employer and government determined to take big rollbacks and a brutal deep freeze for their right to a fair collective agreement.

SASKATCHEWAN UNION OF NURSES signs agreement with employers including pay increases

■ THE Saskatchewan Union of Nurses ratified a new collective agreement with the Saskatchewan Association of Health Organizations in late January.

SUN's six-year deal runs from April 1, 2018, to March 31, 2024, with no wage increases for the first two years, but a 1-per-cent hike this year followed by three consecutive increases of 2 per cent after that, the Saskatchewan Government said in a news release.

The new collective agreement is also one of the first in health care to recognize the calls to action of the Truth and Reconciliation Commission, the government press release stated.

When the two sides signed a tentative agreement last November, UNA President Heather Smith called on Alberta health care employers to negotiate a similar deal with their nurses with the goals of achieving labour peace and stabilizing the Alberta workforce so that everyone can focus on the response to the pandemic. The employers said no.

SUN represents more than 10,000 Registered Nurses, Registered Psychiatric Nurses and Nurse Practitioners across Saskatchewan.

□ CONTINUED FROM PAGE 7

The UNA members walked out 33 years ago in defiance of a 1983 Alberta law that put nurses in the same category of essential service workers as firefighters and police officers. They also defied a ruling by the Alberta Labour Relations Board, which had ruled it was even illegal for them to hold a strike vote.

ciation filed for contempt of court charges against UNA's leaders. Premier Don Getty cut short his winter vacation and flew home from Palm Springs. The employers' association and the government threatened to jail nurses.

The hospital employers' negotiating asso-

From left to right, Heather Smith, David Harrigan and Sandi Rentz, with the cheque for the huge fine UNA paid.



They "tried to intimidate us and it is not working," said UNA President Margaret Ethier at the time. "They can call in the army, but only a negotiated settlement will stop the strike."

On February 9, UNA paid a \$250,000 fine for criminal contempt of court. When the dust had settled, UNA would have paid \$425,000 in fines. At the time, it was the largest award against a union in Canadian history.

But UNA's members held firm. When a collective agreement was ratified on February 13, 1988, the employers had dropped their demands for concessions and rollbacks.

As President Heather Smith remembered in 2004: "the '88 strike was about not going backwards, and we did not go backwards. What the '88 strike did was launch us into the Nineties"

It set the stage for the next round of bargaining in 1990, which saw big gains in nurses' pay.



COVID-19 Coverage

Members of United Nurses of Alberta have access to many additional resources on working during the global coronavirus pandemic on UNA's website, una.ca.



GOVERNMENT ANNOUNCES MORE DETAILS OF VACCINATION PLAN; UNA calls for cautious approach to reopening

■ WITH the flow of COVID-19 vaccine supplies once again increasing after international distribution problems in early February, the Alberta government finally announced more details of its vaccine rollout.

At the same time, to the distress of health care workers and public health experts, the Kenney Government appeared once again to be in too much of a hurry to loosen restrictions in its effort to reopen economic activity throughout the province.

On February 16, the Alberta government advised health care workers eligible for the first phase of vaccination to rebook appointments that had been cancelled when supplies from abroad slowed earlier in the month.

On February 19, officials announced that starting on February 24, Alberta Health Services would offer the vaccine directly to many more health care workers, all residents in retirement centres, lodges, supportive living and other congregate living facilities with residents aged 75 or older, and then to all residents 75 and older no matter where they live.

Starting in April, vaccinations were to be expanded to Albertans aged 65 to 74, no matter where they live.

There was unhappiness among health care workers with the lack of clarity and priorities of the government's vaccination schedule, which can be found at www.alberta.ca/covid19-vaccine.aspx.

UNA continues to press for all personnel employed in the specialized units – including nurses, physicians, medical internists, clerks, aides, physical therapists and

cleaning staff – to have immediate access to vaccination.

Meanwhile, Alberta's nurses expressed concern with the government's decision to loosen restrictions on businesses, sport and social activities just as new variant coronavirus strains began to appear in Western Canada.

In a February 17 letter to Premier Jason Kenney, UNA President Heather Smith urged the premier to take a cautious approach to easing pandemic restrictions until sufficient numbers of Albertans have been vaccinated and COVID-19 is clearly trending downward.

Allowing more infectious and potentially lethal variants of the coronavirus to spread by being too quick to ease restrictions now could push the health care system to the brink and risk forcing Alberta back into more severe restrictions, she said.

"Our members are already exhausted and overwhelmed by what has happened to date," she wrote. "These front-line workers are the greatest asset our health care system has. We must protect them if we are to protect all Albertans."

Smith also asked Kenney not to rely solely on hospitalizations for deciding when to reopen. "Rates of hospitalization and ICU occupancy are lagging indicators," she cautioned. "All measures – including R-value, positivity rates and new cases – should be driving our decisions about how much and how quickly to return to normal business."

She encouraged Kenney to permit Albertans to use of the federal COVID-19 tracing app given the high percentage of cases in Alberta that have no known source.



major health care unions and employers release updated joint statement on PPE use during pandemic







UNA members' selfies illustrate their PPE.

Health have reached an important agreement with United Nurses of Alberta, the Health Sciences Association of Alberta and the Alberta Union of Provincial Employees on the safe and effective use of personal protective equipment during the COVID-19 pandemic.

In an updated joint statement published March 2 about their collective response to COVID-19, the unions and employers provided further clarity and support for health care workers about how to make decisions on the appropriate PPE based on risk assessments conducted for every patient interaction.

"This means health-care workers will have access to N95 respirators or equivalents, if they determine it is required based on their assessment," the statement said.

"Employers and unions share the common goal of protecting the health and safety of health care workers."

"Employers and unions share the common goal of protecting the health and safety of health care workers," the parties said in a public statement on the agreement. "Throughout the COVID-19 pandemic, PPE has been a key factor in protecting the health and safety of health care workers by helping to prevent exposure to and transmission of COVID-19 as they provide high-quality care to Albertans."

"As partners in the response to COVID-19, we trust our front-line health care teams to make appropriate decisions that support their physical and mental health," the statement said.

Several key changes in the updated statement are of particular concern to UNA members. These include:

RECOGNITION OF THE EVOLVING EVIDENCE ON TRANSMISSION AND THE PRECAUTIONARY PRINCIPLE

 This section incorporates and balances a number of perspectives including the precautionary principle and acknowledgement of new Infection, Prevention, & Control guidance and evolving evidence on transmission from the Public Health Agency of Canada.

NO HEALTH CARE WORKER WILL BE REQUIRED TO WORK WITH PPE CONTRARY TO THEIR PCRA

- These changes add clarity and emphasis that all health care workers, across the care continuum and in all clinical settings, who are within two metres of suspected, presumed, or confirmed COVID-19 patients shall have access to the PPE they request, including fit-tested N95 respirators, based on their Point of Care Risk Assessment (PCRA) and this will not be unreasonably denied by the employer.
- No health care worker will be required to work with PPE contrary to their

PCRA nor will they be redeployed if there is a dispute.

A process has been established in the Joint Statement Supporting Guide for staff and leaders to handle the extremely rare event of a dispute. This includes an expedited dispute resolution process that UNA's Provincial OHS Advisor can access.

SUBSTITUTION OF A PROCEDURE MASK FOR AN N95

At a minimum, contact and droplet precautions are still required when dealing with suspected or confirmed COVID patients, but health care workers may now replace their procedure mask with a fit-tested N95 respirator based on their PCRA, even in situations that do not involve aerosol generating medical procedures.

SUPPORTING GUIDE FOR STAFF AND LEADERS

A Supporting Guide for frontline leaders and staff was developed to provide further guidance on the intent of the joint statement and how it should be interpreted and applied.

All parties said they remained committed to continuing to work together to address issues and solve problems as they arise.

No health care worker will be required to work with PPE contrary to their Point of Care Risk Assessment





ALBERTA FINALLY MOVES TO

SPEND FEDERAL TOP-UP FUNDS FOR FRONT-LINE WORKERS



David Macdonald of the CCPA

ing political problems like sun-seeking MLAs during a pandemic, public anger about plans to create open-pit coal mines in southern Alberta, and a rebellion over COVID-19 restrictions in his government caucus, but Premier Jason Kenney finally moved to do something about the unused federal money for front-line workers that's been sitting on the table for months.

At a February 10 news conference, the premier and his labour minister, Jason Copping, announced a plan to distribute \$465 million to about 380,000 Alberta public and private sector employees that the government classified as "critical workers."

Most of the money was to come from the federal government.

It would come in the form of one-time \$1,200 pandemic top-up payment, which Kenney termed "bonus pay." Many health-care, social services and education support workers in the public sector would be eligible regardless of what they were paid, although subject in some cases to where they worked. Grocery store staff, food production workers, and other private-sector employees would be too, but only if they earn less than \$25 an hour.

To qualify, recipients will need to have worked at least 300 hours for a single employer between Oct. 12, 2020, and Jan. 31, 2021 – a determination that must be made by their employers at private-sector health care facilities and in retail stores, who will have to apply for the payments.

The payments will be automatic, however, for employees such as nurses employed by Alberta Health Services.

Full details of the program, which appeared to have been decided on hastily by the government without consultation with unions or employers, remained unclear at press time.

Whether or not the announcement distracted the public from anger at the government's problems, it did have the effect of reducing criticism that until then it had spent only \$12 million of \$335.8 million the federal government earmarked for topups for front-line workers in Alberta.

"Alberta has, by far, the highest amount left on the table as it accessed almost nothing from this program."

- David Macdonald

That figure came from a report in January by Canadian Centre for Policy Alternatives Senior Economist David Macdonald, which showed Alberta had accessed only \$12 million of the \$335.8 million in federal cash for Alberta front-line workers.

"Alberta has, by far, the highest amount left on the table as it accessed almost nothing from this program," Macdonald had said.

The Kenney Government did give owners of private seniors' care and continuing care facilities an additional \$68.5 million to cover the increased costs of preventing COVID-19 infections in their facilities.

Macdonald's report also showed Albertans now receive the highest level of per capita direct spending on COVID-19 compared to any other province, \$11,200 per person. "Federal supports amount to \$10,400 a person in Alberta, the highest per capita federal support level of any province by a fair margin," he said.

PRC Advisor confronts difficult and emotionally charged topic of 'the undignified body' in new scholarly work

■ AFTER a three-decade career as a Registered Nurse in leadership roles in all sectors of Alberta's health care system, Donna Lynn Smith continues her work to improve patient safety in health care as a Professional Responsibility Concern Advisor for United Nurses of Alberta.

The University of Alberta professor emerita joined UNA in 2012 as the first PRC advisor to continue her advocacy for patient safety and to develop programs to support professional advocacy. As this work continues, showing the successes highlighted quarterly in this column, so does Smith's scholarship.

Now she has taken on the difficult and emotionally charged topic of neglect in hospitals and nursing homes that results in basic hygienic care not being provided to residents and patients who are unable to go to the toilet independently.

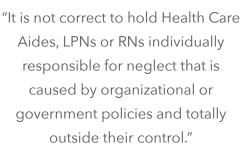
Working with three co-authors – U of A political science professor Dr. John Church, Athabasca University health policy instructor Amy Gerlock, and PhD student Megan Aiken – the chapter in a new book to be published this summer argues this form of neglect is a fundamental violation of basic human dignity causing greater anguish than hunger or fear of death.

Shockingly, such neglect is often rationalized by health care organizations as efficient and financially necessary in modern neoliberal economies, the authors argue. It has been documented in numerous inquiries, journalistic reports and research in Canadian provinces and other Western nations.

"Research shows that is organizational and government policies and not individuals that are responsible for neglect that is caused by organizational policies that emphasize efficiency and cost reduction at the expense of care," Smith said in a conversation about the chapter.

Two policies in particular are at fault, she stated: rationing staff time needed for hygienic care, and rationing diapers and locking them up. "The provinces will never fix this. They're too close to the operators."

"It is not correct to hold Health Care Aides, LPNs or RNs individually responsible for neglect that is caused by organizational or government policies and totally outside their control," she added.



- Donna Smith

The chapter argues federal legislative change to the Criminal Code can end discriminatory practices that deprive elderly and incapacitated people of their basic human dignity. Specifically, the law must be changed to allow corporations and their executives to be criminally prosecuted as is now the case in the U.K.

Smith hopes publication of the chapter – The Undignified Body: Excremental Assault in Canadian Nursing Homes – will encourage critical reflection about interests and ideas in society that rationalize and perpetuate such dehumanizing practices, as well as the prevalence of ageism in creation of government policy and media discourse.





Donna Smith



By Lauren Snowball Canadian Federation of Nurses Unions

The best time to have invested in health workforce planning was 10 years ago

THE NEXT BEST TIME IS NOW

ANYONE paying even cursory attention to the situation facing health care workers in Canada should clearly see a disturbing picture. The COVID-19 pandemic has further burdened a workforce already in crisis, with troubling implications for our entire system.

After years of documenting ever-increasing rates of nurse overtime, the Canadian Federation of Nurses Unions recently released a large-scale national study on nurses' working conditions. The study, conducted with expert Dr. Linda McGillis Hall, revealed the troubling status of nurses' work environments as we entered the first wave of COVID-19.

More than 66 per cent of nurses rated their work environment as only fair or poor. A staggering 60 per cent of nurses said they intended to leave their jobs within the next year. More than one quarter of these nurses wanted to leave the nursing profession altogether.

This, it must be emphasized, was before the pandemic.

Recent Statistics Canada numbers show that nurse job vacancies have soared to the highest rates of any sector amid the COVID-19 pandemic. Every day we hear troubling reports of health care staff who are overwhelmed, unsafe at work, and pushed to their breaking point.

This ought to be a wake-up call for policy-makers. Nurses are the anchor of Canada's health care system and, without them, it will cease to function. Yet, for

years, provincial and federal governments have ignored the need to invest in our nursing workforce. This is despite an aging Canadian population and a critical mass of nurses reaching retirement age in the coming years.

In a post-pandemic world, we must now contend with a very unappealing nurse work environment: crushing and unsafe workloads, difficult and dangerous conditions, and a lack of respect from employers and governments. You can forgive even the most dedicated among us if we aren't lining up to apply for the job.

CFNU has called on Canada's federal, provincial and territorial governments to act. We need to ensure safe working conditions by guaranteeing adequate supplies of PPE, including N95 respirators or a higher level of protection. We need to make rapid investments in the creation of full-time permanent nursing positions to bolster Canada's dwindling and overburdened health workforce.

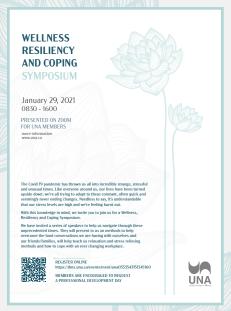
To address longer-term staffing needs, the federal government must reinstate the national Chief Nursing Office to lead a federal committee tasked with planning and securing Canada's health human resource needs for today and the future.

As health workforce expert Dr. Ivy Bourgeault put it on Twitter recently, the best time to have invested in health workforce planning was 10 years ago – but the next best time is now.

Wellness day helps members safeguard their wellbeing in a world turned upside down by COVID-19













THE COVID-19 pandemic may have thrown Albertans and health care workers into incredibly strange and stressful times, but UNA members are finding ways to safeguard their mental, physical and spiritual health in a world turned upside down.

On January 29, more than 600 UNA members took part in a live wellness event on Zoom that aimed to lower stress levels and help nurses adapt to the constant rapid change that's leaving many feeling burned out.

Organized by UNA's Membership Committee, the daylong event included speakers, health and diet information, relaxation skills, and hints on coping with an ever-changing workplace. There were also welcoming remarks by UNA President Heather Smith and Canadian Federation of Nurses Unions President Linda Silas, and, for those who wished to participate, yoga. "UNA members have endured exceptionally difficult circumstances and have risen to the challenges of the pandemic, often at the expense of their own personal wellbeing," said Second Vice-President Cameron Westhead. "I'm grateful to the UNA Executive Board for identifying the resulting need for a wellness event and to the Membership Committee for putting together an uplifting, inspiring and energizing event focused on caring for the caregivers and giving them more tools in their self-care toolbox."

Speakers included Barb Campbell, UNA member and addictions/recovery coach, RN Barb Bancroft, acclaimed national speaker on diet issues, and Kim Hyshka, who brings people together to create positive change.

The Wellness Day
Zoom video is
available on Zimbra,
UNA's new email and
discussion forum. The
video is "pinned" to
the top of the Zimbra
news forum.

AHS, COVENANT AGREE TO VACCINATE PREGNANT HEALTH CARE WORKERS, BUT RECOMMEND CONSULTATION WITH A PHYSICIAN FIRST

■ ALBERTA Health Services and Covenant Health say that while they recommend pregnant employees first consult their primary health care provider or obstetrician before being vaccinated, no pregnant worker will be denied a COVID-19 vaccination.

Individual employees who are pregnant may be vaccinated without consulting a physician following their acknowledgement they are aware there is an absence of evidence about the effects of COVID-19 vaccines on pregnant women.

AHS staff who provide the vaccinations can and will ask pregnant workers if they have consulted a clinician and provide information to the pregnant employee.

Vaccinators who are Registered Nurses have been encouraged to ask these questions because the science has not confirmed there is no harm but the employers recognize it is the pregnant worker's decision whether to receive the vaccination.

The AHS Position Statement on Pregnant Health Care Workers and COVID-19 states that "pregnant health care workers should have a discussion with their primary care or obstetrical provider about their individual decision to receive the vaccine and about concerns they may have."

The AHS position statement also notes that the National Advisory Committee on Immunization recommends that a complete series of COVID-19 vaccine may

be offered to pregnant women "if a risk assessment deems that the benefits outweigh the potential risks for the individual and the fetus, and informed consent includes discussion about the absence of evidence on the use of COVID-19 vaccine in pregnant women."

In December, the Canadian Federation of Nurses Unions noted that new data from the U.S. Centers for Disease Control indicated pregnant women are at increased risk for ICU admission and invasive ventilation compared to workers who are not pregnant.

Given the potential risks of severe illness among pregnant health care workers, CFNU urged employers to exercise the precautionary principle and err on the side of compassion to alleviate the anxiety of workers and any potential health risks to the mother and her fetus by assigning such employees to lower-risk work. CFNU recommends pregnant health care workers who are concerned about their health — especially those with co-morbidities — seek an accommodation from their employer if they are asked to care for presumed or confirmed COVID-19 patients.

"If physical changes due to pregnancy make it difficult for a health care worker to don and wear the required personal protective equipment in a safe manner, they should not be providing care for COVID-19 suspected or confirmed patients," CFNU said.

By Dewey Funk
UNA OHS Advisor



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The AHS position statement acknowledges this view. It says pregnant AHS employees required to wear an N95 respirator who have experienced significant weight gain because of pregnancy "must ensure that their N95 fit test is up to date."

Moreover, while pregnant women should be permitted to continue to work with the properly fitted PPE, the statement says, some pregnant women have difficulty breathing in late pregnancy and may find the use of N95 or similar respirators exacerbates such symptoms. "In circumstances where PPE cannot be adhered to, the pregnant health care worker should *not* provide care to patients with suspected or confirmed COVID-19 or any other patients where wearing of PPE is required."

"Pregnant health care workers should have a discussion with their primary care or obstetrical provider about their individual decision to receive the vaccine and about concerns they may have."

> AHS Position Statement on Pregnant Health Care Workers and COVID-19

In such circumstances, the position statements says, "the pregnant health care worker should speak with their supervisor or appropriate medical staff leader regarding the workplace accommodation process."

Please continue to voice your OHS concerns and report through proper channels with your employers.

Stay safe! You're worth it!





CITING LONG-TERM HEALTH IMPLICATIONS, UNA raises concerns about open-pit coal mining

ON January 28, United Nurses of Alberta expressed concern about provincial government plans to suspend environmental limits in open-pit coal mining on the Eastern Slopes of the Rockies implemented by Premier Peter Lougheed's government in 1976.

UNA said it "shares the concerns of many of its members in Southern Alberta" about the suspension of environmental safeguards for the Eastern Slopes and the government's efforts to encourage open-pit coal mining in the region.

UNA said coal mining, whether for steel production or electricity, is likely to harm the environment of the environmentally sensitive region, species that live within it, and the health of the planet, urging the province to fully restore the Lougheed Coal Policy and continue Alberta's traditional emphasis on watershed protection, recreation, tourism and a healthy population.

On February 8, responding to public pressure, Energy Minister Sonya Savage announced the government was restoring the Lougheed Coal Policy, although with exceptions of concern.

She pledged there would be no mountain-top removal, but didn't commit to a complete ban on open-pit coal mining or halt mine proposals already under way.



Canada's Nurses express outrage over **ALBERTA BILL TO UNDERMINE**

VOLUNTARY BLOOD DONATIONS

NURSES across Canada voiced strong opposition to the passage of Bill 204, the *Voluntary Blood Donation Repeal Act*, by the Alberta Legislature in mid-November.

The private member's bill introduced by UCP MLA Tany Yao repeals the NDP's 2017 ban on payment for the collection of blood in Alberta, including plasma.

While the legislation's supporters claimed it would address the sufficiency of the supply of plasma in Canada, "it will in fact do the exact opposite," said Linda Silas, president of the Canadian Federation of Nurses Unions.

"The large-scale commercial expansion of plasma collection without adequate controls is a major concern for the integrity of the publicly mandated system and the patients it serves."

- Canadian Blood Services CEO Dr. Graham Sher

"Plasma amassed from commercial plasma collectors is sold to the highest bidder on the international market," Silas explained. "Meanwhile, as our donors come to expect payment, our voluntary donor base for both blood and plasma will be jeopardized."

Ontario, Quebec, and British Columbia have prevented payment for blood and plasma collection to protect the security of the domestic supply through a voluntary donor system. Private, for-profit plasma collectors currently operate in Saskatchewan and New Brunswick, and the plasma they collect is sold on the global market.

"We need a secure supply of blood products in Canada, and a strong, voluntary, national supply system is the best way to achieve it," said UNA President Heather Smith. "This is just another example of the UCP scheme to inject a profit-motive into our public health care system. Donating blood should not be viewed as a business venture."

Blood and plasma are considered a public resource by Canadian Blood Services, a national organization mandated by Canadians to collect blood and plasma across the country through a voluntary donor system.

While testifying to Alberta MLAs earlier this year, CBS CEO Dr. Graham Sher stated that "the large-scale commercial expansion of plasma collection without adequate controls is a major concern for the integrity of the publicly mandated system and the patients it serves." Bill 204 does not provide any safeguards to protect Albertans from a paid plasma industry.

Canadian Blood Services will soon be opening plasma donation centres in Lethbridge and Kelowna, BC, after opening its first plasma donation centre in Sudbury, Ont., in August. As a result of Bill 204, the centre in Lethbridge will be forced to compete with for-profit plasma collection centres.

UNA HOLDS ZOOM MEETINGS WITH NURSE PRACTITIONERS TO DISCUSS UNIONIZATION

NURSE Practitioners employed by Alberta Health Services now have the right to union representation.

United Nurses of Alberta succeeded in its 2018 application to the Alberta Labour Relations Board in which the union challenged the constitutionality of denying Nurse Practitioners their right to freedom of association protected under the Canadian Charter of Rights and Freedoms.

Shortly after the LRB made that ruling in November 2019, however, the board gave the government one year to address the constitutional violation. During that time, the government passed a new Regulation requiring Nurse Practitioners to have their own distinct bargaining unit.

This decision did not preclude Nurse Practitioners from joining UNA but it meant NPs will not fall within the Direct Nursing Care bargaining unit. So if Nurse Practitioners do decide to unionize, they will have their own separate and distinct collective agreement, regardless of whom the bargaining agent is.

UNA has been approached by a number of NPs who would like the union to represent them. At the same time, the Nurse Practitioners Association of Alberta has formed a bargaining entity called the Nurse Practitioners Association of Alberta Union and will make a pitch to NPs.

UNA held Zoom discussions with interested Nurse Practitioners on February 10 and 25 to discuss the advantages of union membership as well as the steps needed for UNA to represent NPs.

UNA represented NPs until 2003, when legislation passed by the Alberta Legislature deprived members of the profession of their constitutional right to bargain collectively.

Nurse Practitioners are eligible for \$1,200 pandemic payment

AFTER seeking clarification from the Alberta government, UNA has been informed that Nurse Practitioners are eligible to receive the \$1,200 pandemic payment for front-line workers announced February 10.

NPs employed by Alberta Health Services should receive the payment automatically.

Since the payment must be applied for by other employers, UNA recommends that NPs not employed by AHS contact their employer to ensure the application is made on their behalf.

☐ CONTINUED FROM PAGE 13

The book will be used as a text in third or fourth level sociology, anthropology, political science and women's studies courses. As the information will come to readers from outside the nursing discipline, she hopes familiar claims of nursing bias and self-interest will be harder for anti-nursing interests to sustain.

This chapter follows publication of earlier research led by Church, which examined 18 health care catastrophes documented in public inquiries over a 30-year period in the U.K. and Canada, concluding they were all examples of accountability failure encouraged by neoliberal economics, which put profits before people.





UNA PROUDLY AWARDS SCHOLARSHIPS TO THE NEXT GENERATION OF ALBERTA NURSES

■ UNITED Nurses of Alberta has awarded its annual nursing scholarships of \$1,000 to nursing students from throughout Alberta, in addition to a \$1,000 Canadian Federation of Nursing Unions Scholarship.

The scholarships are awarded to full-time students in their first year of Nursing studies at approved post-secondary institutions in Alberta.

Applicants must be related to a UNA member or associate member, have completed an application form and written a short essay answering the paper, "Why is the PRC process important to Alberta Nurses?"

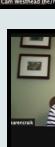
This year's scholarship recipients are:

Brent Belisario from the University of Alberta, who was sponsored by Leila Pagador-Belisario from Local 196 (Edmonton Zone Community)

Morgan Clowater from the University of Calgary, who was sponsored by Maria Clowater from Local 95 (Alberta Children's Hospital - Calgary)

Megan Cooper from the University of Alberta, who was sponsored by Tammy Cooper from Local 301 (University Hospital, Stollery Children's Hospital, Mazankowski Alberta Heart Institute) Ekaterina Danilova from the University of Alberta, who was sponsored by Troy Archie from UNA Locals 79 (Edmonton General Continuing Care Centre & Grey Nuns Community Hospital) and 301 (University Hospital, Stollery Children's Hospital, Mazankowski Alberta Heart Institute)

Nicole De Guzman from MacEwan University, who was sponsored by Nadeane De Guzman from Local 11 (Misericordia Community Hospital)







Nicole, Florabel and Nadeane deGuzman





Alyssa De Lara from MacEwan University, who was sponsored by Marie De Lara, 79 (Edmonton General Continuing Care Centre & Grey Nuns Community Hospital)

Thea Dobchuk from MacEwan University, who was sponsored by Glen Dobchuk from Local 196 (Edmonton Zone Community)

Ruby Mathai from the University of Alberta, who was sponsored by Jeny Mathai from UNA Locals 99 (St. Joseph's Hospital - Edmonton) and 219 (Millwoods Shepherd's Care Centre/Kensington Village/ Allen Gray)

Grace Scheel from the University of Alberta, who was sponsored by Amanda Scheel from Local 196 (Edmonton Zone Community)

MacEwan University student

Cate Noelck was the recipient
of the Canadian Federation of
Nurses Unions Nursing Education
Scholarship. Her scholarship
application was sponsored by
Cari Noelck from Local 33 (Royal
Alexandra Hospital)

APPLY FOR A UNA SCHOLARSHIP

Applications for this year's UNA Nursing Education Scholarship can be found at **una.ca** and will be accepted until **Oct. 15, 2021**.





If your employer has made an error in accounting for pensionable time, you are more likely to spot it if you check regularly.

MEMBERS REMINDED TO

CHECK PENSIONABLE TIME ANNUALLY

■ UNITED Nurses of Alberta members employed by Alberta Health Services, Covenant Health and other employers that contribute to the Local Authorities Pension Plan (LAPP) are reminded of the importance of checking their pensionable service as reported by their employer each year.

According to both AHS and Covenant Health policy, pensionable service includes shifts paid at regular time, vacation time, statutory holiday days off including banked stat days, paid time off in lieu of overtime, and paid leaves of absence including sick time, bereavement leave, paid education days, personal days, and shifts missed for court appearances.

If your employer has made an error in accounting for pensionable time, you are more likely to spot it if you check regularly. If you find a problem, it is wise to resolve it well before you are close to retirement.

A full-time nurse who has taken no unpaid leaves should be reported as having 1.0000 years of pensionable service.

If a full-time nurse took 10 days of unpaid leaves, the result would be reduction by .0405 to .9595 years of pensionable service. Since it is not uncommon for pensionable service for nurses to be coded incorrectly by employers, unexplained differences in the pensionable service should be pursued as soon as they are noticed.

For part-time employees, reviewing pensionable service is more challenging.

A part-time person working a .7 FTE, for example, may show more than .7 FTE service in a year because additional shifts worked at straight time are considered pensionable service. Identifying eligible service that has not been recognized by the employer requires careful counting of additional shifts worked at straight time in addition to the FTE, then looking for deficiencies.

If you require assistance, contact UNA's pensions advisor, Labour Relations Officer Richard West, at the Provincial Office in Edmonton.

DIRECTIONS FOR CHECKING YOUR PENSION HISTORY

- 1. Go the LAPP website lapp.ca
- 2. Sign in to "your pension profile."
- 3. Review your pension history, it is listed by employers and previous employers. Click on "Employer" to expand and view your yearly summary.





AFL and major unions condemn plan for Alberta to grab control of public sector pensions

■ THE presidents of the Alberta Federation of Labour, United Nurses of Alberta, and Alberta's other large public-sector unions condemned the Kenney Government's move to effectively seize control of the pension savings of hundreds of thousands of Albertans.

In addition to the teachers' pension savings, AFL president Gil McGowan said in January, "they're also going after the pensions of hundreds of thousands of Albertans working for Alberta Health Services, school boards, municipalities, the provincial government and universities and colleges."

He noted with concern the province is also eyeing a takeover of the Canada Pension Plan in Alberta.

The union leaders said the Ministerial Order issued on January 4 by Finance Minister Travis Toews appeared to be intended to finish the work the government started in the fall of 2019 with passage of

legislation stripping all Alberta public-sector pension boards of the power to choose who would manage their investments.

The government decreed that the Alberta Investment Management Corp., better known as AIMCo, will be the sole monopoly provider of investment services.

The more than \$100 billion in question belongs to the more than 400,000 Albertans who have been using Alberta's public plans to save for their retirements, not the government or AIMCo, the union presidents said.

The unions plan a legal challenge of the *Reform of Agencies, Boards and Commissions and Government Enterprises Act* and the Ministerial Orders, as well as a campaign to tell the government to keep its hands off members' retirement savings. They will join efforts to oppose the government's plan to pull Alberta out of the CPP.

UNA remains committed to action to prevent violence against women and girls

■ UNITED Nurses of Alberta marked the gender-based violence on December 6, 1989, that took the lives of 14 female engineering students at l'École Polytechnique de Montréal by renewing its call for measures to prevent violence against women and girls.

The anniversary of this national tragedy, known as the National Day of Remembrance and Action on Violence Against Women, represents an opportunity for all Canadians to reflect on the impact of violence against women in our society, the union said in a statement.

The need for communities and individuals to speak out to remind all levels of government of their responsibility is an important message during a global pandemic when many people do not have access to even limited resources to prevent violence.

Working on the front lines of health care, Alberta's nurses see the impact of violence against women, and sometimes experience it in their own workplaces and homes.



UNA rejects premise of 2020 LABOUR LAW CHANGE

IN a December submission to Labour Minister Jason Copping, United Nurses of Alberta entirely rejected the premise of the so-called "Restoring Balance in Alberta's Workplaces Act."

The submission was drafted in response to the provincial government's call in November for union comments on draft regulations based on provisions in the legislation concerning union dues and financial statements

The act, often referred to as Bill 32, needlessly duplicates UNA's democratic decision-making and financial disclosure processes and attempts to create a false dichotomy between core and non-core union functions, UNA said in its response.

Passed by the Legislature on July 28, the act "does the opposite of working toward 'restoring balance' in workplaces and is unconstitutional," the UNA submission, said. "As such, we urge the Government of Alberta to repeal the Act and avoid the costly and protracted legal battles that will surely follow should it be enacted."

In UNA's view, the act is an attempt to create red tape to undermine well-established democratic mechanisms for UNA

members to determine the dues they pay and how they are spent.

In addition, the legislation is clearly unconstitutional, "aimed at limiting our ability to represent our members," the submission says.

The Canadian Nurses Association Code of Ethics requires nurses to maintain an awareness of major health concerns, such as poverty, inadequate shelter, food insecurity and violence, while working for social justice and advocating for laws, policies and procedures that bring about equity.

This professional responsibility was reinforced by the 2020 decision of the Saskatchewan Court of Appeal in *Strom v. Saskatchewan Registered Nurses' Association*, which found criticism of the health care system — especially by those delivering the services — is manifestly in the public interest and can enhance confidence by demonstrating that those with the greatest knowledge are both prepared and permitted to speak.

Labour Minister Jason Copping requested the submissions from unions on November 20, timing that suggests the government was more interested in the appearance than genuine consultation.

UNA MARKS TRANSGENDER DAY OF REMEMBRANCE

UNA members marked the Transgender Day of Remembrance on November 20.

The occasion honours and remembers those who have been victims of violence and discrimination against transgender people. Transphobia, trans misogyny, and other forms of violence, including racism against Black, Indigenous, and racialized Trans people, have no place in Alberta.

Transgender Day of Remembrance was founded in 1999 to memorialize the murder of Rita Hester, a Black Trans woman, in Allston, Massachusetts.





ADD YOUR NAME AND JOIN OUR CALL TO STOP JASON KENNEY'S PLAN TO LAY OFF THOUSANDS OF HEALTH CARE WORKERS

ALBERTA'S front-line health care workers are in crisis.

The provincial government is turning its back on us and our health care system. As a result, 750 Registered Nurses' and Registered Psychiatric Nurses' jobs are slated to be cut as part of the United Conservative Party's plan to erode and Americanize our health care system.

On top of that, the nurses who will be spared face massive contract rollbacks that will worsen their working conditions and ability to advocate for safe patient care.

Recognizing this needlessly difficult reality, United Nurses of Alberta has launched a campaign in which nurses, other health care workers and members of the public can help prevent such damaging cuts by making their voices heard.

UNA has created a web site - **NeedNurses.ca** - where we can all add our names to an open letter demanding the provincial government not to cut the jobs of nurses and other health care workers.

"Every day, Alberta's nurses are there for the people of this province," the open letter says. "No matter the challenge, these front-line workers show up to save lives and protect the health of Albertans."

"So why is it that now, during the COVID-19 pandemic, your government is planning to eliminate 11,000 health care jobs, including 750 nurses, from the Alberta health care system?"

"These actions are not only reckless and irresponsible – they will cost lives."

"We need nurses now and always," the open letter says, asking the question, "Are mass layoffs the way you reward the workers who put their lives on the line for Alberta?"

The UNA campaign will be extensive, including newspaper, radio and online advertising, as well as videos of UNA members telling their own stories, but we still need your support.

Please add your name to this important message. Tell the Alberta government to treat nurses and other front-line health care workers like the heroes they are.



CFNU CONVENTION MOVED ONLINE BECAUSE OF COVID-19, WILL BE FREE TO ALL UNA MEMBERS

■ THE Canadian Federation of Nurses Unions is the national voice for nearly 200,000 nurses and student nurses across Canada. CFNU and its affiliated unions are relentless advocates for the health and safety of members and patients from coast to coast.

Because of travel restrictions associated with COVID-19, CFNU's biennial convention has been replaced this year by an online convention on June 8 and 9.

More information about the events of the convention will be available soon, but UNA members can register now for this

important, free event. To register, and to find more information as it is available, go to https://nursesunions.ca/convention2021/.

Join nurses from across Canada as we speak up for a stronger health care system and a better workplace for all nurses.

UNA moves member workshops online in response to COVID-19 pandemic

■ IN response to the COVID-19 pandemic, United Nurses of Alberta has shifted delivery of all union education from in-person to online.

UNA now offers live/real-time workshops hosted via Zoom and will soon have on-demand learning via an education website. The live workshops will be approximately two hours in length and will be offered at a variety of times and dates.

to "Events" for workshop details and to register.

The live wo two hours it variety of the workshops

Some of the material from our in-person workshops is being reworked for online delivery. For example, parts of the How to Run a Local – Finance workshop have been reorganized into a shorter Fiscal Planning workshop with a focus on budgeting and other financial matters. Some workshops may have supplementary activities or materials before or after class.

If you have any questions, please contact: events@una.ca

Please login to

ONLINE REAL-TIME WORKSHOPS OFFERED BY UNA:

For all UNA members:

- Self-care for Nurses
- Introduction to UNA

For Unit/Office Representatives:

- Unit/Office Rep Orientation
- Introduction to UNA
- Self-care
- Taking Action

For Local Executives:

- Investigation Meetings
- Introduction to UNA
- Self-care
- Taking Action

UNA's Taking Action workshops are organized in a four-part series. Please take each workshop in the correct order if possible.

- Part 1 Organized Locals
- Part 2 Having (Political) Conversations
- Part 3 Engaged Members
- Part 4 Collective Action

IMPORTANT NOTE

These UNA workshops are not provincially funded. UNA members enrolled in the workshops will require access to Zoom.

UNA members need to request to USE ACCUMULATED OVERTIME AND VACATION IMMEDIATELY



HERE'S WHY J

■ MEMBERS of United Nurses of Alberta are advised to make a request immediately to use their accumulated overtime and vacation.

Article 8.01 (c) of the UNA Provincial Collective Agreement states that "Overtime may be accumulated and taken in time off at a mutually acceptable time at the applicable premium rate. Time off not taken by March 31 in any given year shall be paid out unless otherwise mutually agreed. Such request to carry over lieu time shall be submitted by the Employee in writing prior to March 31, and shall not be unreasonably denied."

Article 17.03 (c) states that notwith-standing Article 17.03(a), which says all vacation accumulated in one year must be taken during the next year at a mutually agreeable time, "an Employee may be permitted to carry forward a portion of unused vacation to the next vacation year. Requests to carry forward vacation shall be made in writing and shall not be unreasonably denied."

Because of the pressures from COVID-19 facing all Alberta public health care employers, few UNA members have had the opportunity to use their accumulated overtime and vacation

Because of the same circumstances, UNA members who ask to use overtime or vacation days now may be denied their request.

So it is extremely important to apply to use vacation as soon as possible if employees hope in the event they cannot use their overtime or vacation time to have those carried over as allowed by Article 8.01 (c) and Article 17.03 (c).

UNA urges employees to speak with their manager immediately and give them a written request about using accumulated time as soon as possible. If an answer is not forthcoming from your manager, contact them and ask again.

Keep a record of your discussion with your manager and any response you receive. In the event of any dispute, this will help UNA assist you in ensuring you are able to carry forward this additional time. The employer cannot pay out vacation.



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.

Nurse Planner to return to old format in 2022

■ MOST UNA members should by now have received their 2021 Nurse Planner.

While changes to this year's planner were intended to save money for members without reducing the usefulness of the product, they have proved to be unpopular with many UNA members.

As a result, the design changes introduced for 2021 will be eliminated and the publication will return to the old format in 2022.

UNA is currently considering the best method to ensure members who want a planner can get one while not sending one to those who don't.



ONLINE WORKSHOPS

UP TO 2 HOURS EACH HELD VIA ZOOM

FOR ALL UNA MEMBERS:

- ▶ Introduction to UNA
- Self-Care

FOR UNIT/OFFICE REPRESENTATIVES:

- Unit/Office Rep Orientation
- Taking Action! (four-part series)
- Introduction to UNA
- Self-Care

FOR LOCAL EXECUTIVES:

- ▶ Investigation Meetings
- Taking Action! (four-part series)
- ▶ Introduction to UNA

Self-Care

REGISTER VIA DMS QUESTIONS? EMAIL EVENTS@UNA.CA FOR UNIT/OFFICE REPRESENTATIVES & LOCAL EXECUTIVES

TAKING ACTION!

FOUR-PART SERIES

Take in order if possible. Please attend all four sessions.

PART 1

Organized Locals

PART 2

Having (Political) Conversations

PART 3

Engaged Members

PART 4

Collective Action

This workshop series will assist local activists in

- Laying groundwork prior to taking action
- Having issue-based conversations
- Building a more engaged membership
- Identifying issues, demands, and goals
- Selecting an appropriate action

