

UNA members attending the Winter Labour School in Jasper were joined by Calla, one of the Fairmont Jasper Park Lodge canine ambassadors.

# NEWS Bulletin UNA

United Nurses of Alberta



# RESPECT

In the spotlight for Nurses Week

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Editor: David Climenhaga

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#### Provincial Office

700-11150 Jasper Avenue NW  
Edmonton AB T5K 0C7  
780-425-1025/1-800-252-9394

#### Southern Alberta Regional Office

300-1941 Uxbridge Drive NW  
Calgary AB T2N 2V2  
403-237-2377/1-800-661-1802

*New Calgary location will not be open to visitors until May 2024.*

#### www.una.ca

nurses@una.ca

facebook.com/unitednurses

twitter.com/unitednurses

instagram.com/albertanurses

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UNITED NURSES OF ALBERTA  
700-11150 JASPER AVENUE NW  
EDMONTON AB T5K 0C7

#### PRESIDENT'S MESSAGE



# Fixing health care in Alberta requires more than Band-Aids!

■ **FIXING** health care in Alberta is going to require more than Band-Aids from our provincial government.

Spring is almost here, the days are getting longer, and soon the weather will be warmer too. But in 2024, among the first signs of spring were the government's repeated promises to fix the health care system and a provincial austerity budget that will have the opposite effect.

I wish I could say we haven't seen this movie before!

Our government says it recognizes that the worldwide shortage of nurses is having an impact in Alberta. It says it has plans to do something about it. At the same time, it's telling Registered Nurses and Registered Psychiatric Nurses employed in the public sector that they and other Albertans are going to have to tighten their belts to make up for the inability of past governments to save money.

With bargaining under way for a new Provincial Collective Agreement for most of Alberta's nurses who work in the public sector, this is a sign to Alberta's RNs and RPNs that the government and health care employers are not really taking their promises to fix health care seriously.

At last fall's meeting of UNA Local representatives in Edmonton to set bargaining proposals, delegates made it crystal clear that they demand to be treated with respect by employers and the government in 2024.

As I have said many times before, treating RNs and RPNs with respect

includes paying them appropriately for the crucial work they do.

A small opening wage offer is not respect, and it will not help retain nurses now working in Alberta or recruit nurses from other provinces – a problem that, as a story on page 13 in this edition of UNA NewsBulletin shows, at least one nearby province is taking seriously.

After the sacrifices and dangers of the pandemic, the abuse suffered by nurses, and years of pay that has not kept up with the sharp increases in the cost of living, Alberta health care employers face a shortage of nurses that is happening throughout Canada and around the world.

Governments that talk tough about economic reality need to show they understand the law of supply and demand.

Here are the details: There are not enough RNs and RPNs throughout the world (supply). Every jurisdiction is competing for their services (demand).

What always happens when supply is limited and demand is high? Costs must rise.

The problems in Alberta's health care system simply cannot be remedied without a meaningful wage offer, an effort to address the quality of life experienced by nurses, and contractual measures to ensure sufficient ratios of nurses to patients to ensure safe and high-quality care in our health care facilities.

No matter how you look at it, this is going to cost money.

□ CONTINUED ON PAGE 3

# New regulations eliminate all nursing care requirements for residents of continuing care homes in Alberta, UNA warns



■ **NEW** provincial continuing-care regulations set to come into effect on April 1 will result in there being no legal requirement to provide nursing care for residents living in Alberta continuing care facilities, United Nurses of Alberta warns.

The *Continuing Care Act* passed in May 2022 and not yet proclaimed into law eliminated language from previous legislation that identified a minimum number of hours of nursing care that had to be provided to patients in continuing care, UNA President Heather Smith explained in a statement published March 19.

In February, the province published a new *Continuing Care Regulation* that is supposed to take effect on April 1 and also includes no mention of a minimum number of required hours of nursing care.

“So the government is taking the care out of continuing care,” Smith stated.

The previous legislation required continuing care home operators to provide

1.9 hours of nursing and personal care per day, of which 22 per cent had to be provided by a Registered Nurse or Registered Psychiatric Nurse.

While that was clearly inadequate, at least there was a minimum legal standard, Smith said. “The government now plans to completely eliminate requiring even that meagre level of care.”

A report by the MNP consulting firm commissioned by the Alberta Government in 2021 recommended increasing the number of hours of care people received every day, Smith said. “But the new regulations do exactly the opposite,” she warned.

“We are moving to zero hours of care. This is extremely dangerous.”

“We have already read in the news about a case of a stroke patient sent to recover alone in a motel in Leduc,” Smith observed. “I fear that the change in regulations means this is only a harbinger of things to come.”

“The government is taking the care out of continuing care.”

- Heather Smith

□ CONTINUED ON PAGE 5

## □ PRESIDENT'S MESSAGE CONTINUED FROM PAGE 2

Making the changes that are needed now will provide the nurses that work here today or come here with the hope required for them to stay at work.

If there is no hope in Alberta, many will go elsewhere, where there is hope.

If the government won't offer that hope, its claims it will fix the system cannot be taken seriously.

This is why UNA is fighting for changes in the Provincial Collective Agreement that properly recognize the contribution made by nurses to health care, and that offer them the hope of a better future.

This is why you may be called upon to take action to ensure we are treated with respect at the bargaining table.

I urge nurses to pay attention to UNA's bargaining updates. Please take part in public expressions of support for your

union when asked. And wear red at public events to show your support for your union.

Wear a Band-Aid on your clothing to show the government you understand that Band-Aid solutions are not enough.

In Solidarity,

Heather Smith  
President,  
United Nurses of Alberta



UNA's Provincial Negotiations Committee

# EMPLOYERS' OPENING MONETARY PROPOSAL FAILS TO KEEP UP WITH INFLATION; would leave members significantly behind nurses in B.C. and Ontario

■ **THE** 2024 round of bargaining for a new collective agreement commenced on February 7 with a partial exchange of ingoing proposals that did not include the employers' monetary proposals.

A week later, on February 15, the employer tabled an ingoing monetary proposal for a four-year collective agreement running from 2024 to 2027: a 2-per-cent pay increase in the first year, followed by increases of 2 per cent, 1.75 per cent, and 1.75 per cent in each of the next three years.

The UNA bargaining team indicated to the employer side that the proposed increases would not keep pace with inflation and would leave Alberta nurses \$2 per hour behind their counterparts in Ontario and British Columbia.

"At last fall's meeting of UNA Local representatives in Edmonton to set bargaining proposals, delegates made

it crystal clear that they demand to be treated with respect by employers and the government in 2024," said President Heather Smith in her quarterly remarks to members, found on Page 2 of this edition of UNA NewsBulletin.

"As I have said many times before, treating RNs and RPNs with respect includes paying them appropriately for the crucial work they do," she said. "A small opening wage offer is not respect, and it will not retain nurses now working in Alberta or recruit nurses from other provinces."

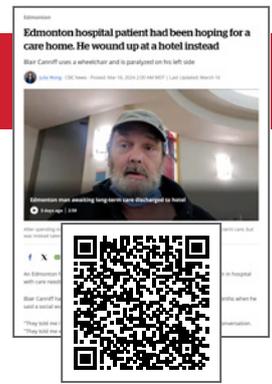
She said the health care employers that are party to the Provincial Collective Agreement – Alberta Health Services, Covenant Health, Lamont Health Care Centre, and the Bethany Group (Camrose) – along with the provincial government which sets their bargaining priorities, are going to have to do better.

□ CONTINUED ON PAGE 5



"As I have said many times before, treating RNs and RPNs with respect includes paying them appropriately for the crucial work they do."

- Heather Smith



CONTINUED FROM PAGE 3

By contrast, Smith noted, Ontario has just increased the requirement for care for each patient to four hours per day.

Smith said UNA is also concerned the new regulations allow broad exemptions to the watered-down rules governing continuing care facility operations without public transparency or meaningful oversight.

While the government clearly intends to significantly transform the province’s continuing care system, the new regulations are also confusing, and make reference to guidelines that have not been published anywhere. The three levels of continuing care established in the regulations published on February 24 also lack definitions in the current version of the document.

The report of Alberta’s Auditor General in February 2023 recommended implementing a system “to mitigate the risk that a facility is not providing residents with the number and type of care staff needed to ensure safe, quality resident care.”

Now, Smith said, the government appears to be trying to permit larger

numbers of workers without health care qualifications, or only very limited and targeted training, to work in continuing care.

And where the size and nature of staffing requirements of the *Continuing Care Act* are mentioned in the regulations, she added, they can be exempted without any mechanism of appeal or oversight by a single appointed “director of continuing care.”

The new regulations will allow operators to apply for exemptions behind closed doors, without input from stakeholders such as families, workers or unions.

“Everything about the regulations suggests the government’s policy emphasis is to allow home operators to be exempted from following the rules, not ensuring the rules are obeyed,” she said.

There is also no requirement for names of continuing care operators who apply for exemptions to be published anywhere. 🍷

“Everything about the regulations suggests the government’s policy emphasis is to allow home operators to be exempted from following the rules, not ensuring the rules are obeyed.”

- Heather Smith

CONTINUED FROM PAGE 4

The employers have made the identical ongoing wage offer to all public sector unions that are now beginning bargaining.

The next bargaining dates were set for Feb. 14 and 15 but were cancelled with UNA’s agreement because of unexpected personal need by members of the employer bargaining team.

Bargaining dates are scheduled for April 2-4, and April 16-18.

UNA will keep members up to date on the progress of bargaining with regular updates published on the UNA Website, [una.ca](http://una.ca), as well as in Zimbura Forums and on the union’s social media accounts. 🍷



# UNA TO MARK NATIONAL NURSES WEEK WITH A SPOTLIGHT ON RESPECT



By **Camelia Guthrie**

UNA Communications Advisor



■ **NATIONAL** Nurses Week 2024 runs from Monday, May 6, to Sunday, May 12, and this year United Nurses of Alberta will turn the spotlight on respect for nurses' dedication and advocacy.

Respect in the workplace and at the negotiating table is a minimum request for nurses and this year's celebration will underscore that fact.

To reinforce this message, UNA will be distributing red Band-Aids decorated with our respect logo as a symbolic gesture to address the deeper issues faced by nurses and the health care system. These Band-Aids represent a call to action.

"Health care needs more than a Band-Aid" – but wearing one serves as a tangible symbol of solidarity and support, reminding us of the ongoing need for change.

UNA members are also encouraged to wear red as a gesture of solidarity at public events in support of their bargaining team.

Additionally, UNA will air radio ads during Nurses Week and beyond, highlighting the importance of adequate staffing levels and amplifying the message that safe staffing saves lives.

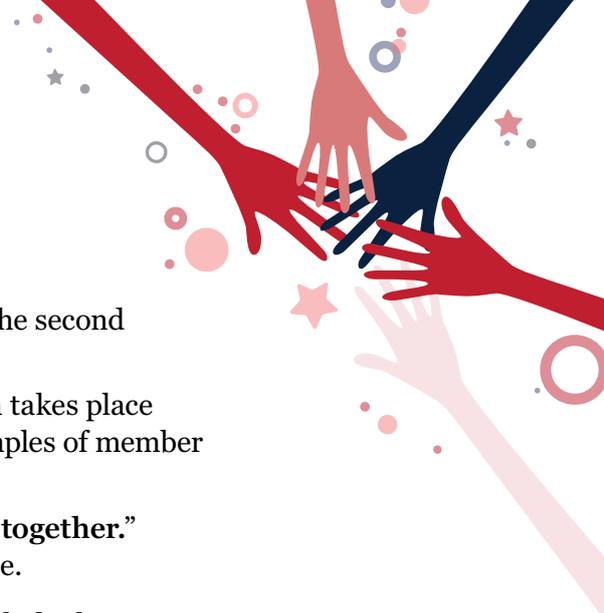
UNA will distribute a series of vinyl stickers with slogans such as "I ♥ Alberta's nurses" and "Safe staffing saves lives." The stickers can be applied to cups, water bottles, laptops, etc., and will serve as everyday reminders of the ongoing support for nurses and the urgent need for safe staffing practices.

As Nurses Week approaches, let us not only celebrate the incredible contributions of nurses but also commit to standing up for them, ensuring they receive the respect and support they deserve both at the table and in our workplaces. 🇺🇦



Images of stickers and bandages are examples and may not be produced exactly as shown

# UNA launches second annual NURSES WEEK ENGAGEMENT CHALLENGE



■ **UNITED** Nurses of Alberta is thrilled to announce the launch of the second annual Nurses Week Member Engagement Challenge.

To recognize the work of UNA Locals during Nurses Week, which takes place from May 6 to 12 this year, UNA is inviting locals to submit examples of member engagement efforts created and used during that week.

The theme of this year's challenge is "safe staffing and sticking together." Locals are encouraged to enter submissions that follow that theme.

Entries will be accepted from or on behalf of locals in five categories divided by local membership size:

## 1: BEST POSTER

- a) Fewer than 400 members
- b) More than 400 members

## 2: BEST PHOTO

- a) Fewer than 400 members
- b) More than 400 members

## 3: BEST ONLINE MEME

- a) Fewer than 400 members
- b) More than 400 members

## 4: BEST ONLINE VIDEO

- a) Fewer than 400 members
- b) More than 400 members

## 5: MOST CREATIVE ENGAGEMENT IDEA

- a) Fewer than 400 members
- b) More than 400 members

Submissions should include the name of the local, the names of the members involved in creating the submissions and a short description of how the submission was used to engage UNA members during Nurses Week. Something as simple as a photo posted on social media would qualify.

Locals may submit multiple submissions in each category.

Winners and individual members will be presented with a special award certificate and have their submissions shown at the UNA Annual General Meeting in October 2024.

Locals are encouraged to recognize the members who participated in the creation of their submissions. 🍷

Submissions must be sent to [nursesweek@una.ca](mailto:nursesweek@una.ca) by 23:59 on Friday, May 17. The winners will be announced after that.



United Nurses of Alberta's Provincial Negotiations Committee asked UNA members to wear red or a red ribbon on Valentine's Day, February 14, to show solidarity with their representatives as they head back to the bargaining table. UNA was also pleased to share digital Valentine's Day cards that members were encouraged to print, share with their co-workers, and post on social media.

# DESPITE COURT RULINGS, GOVERNMENT INTERFERENCE IN COLLECTIVE BARGAINING CONTINUES TO GROW

■ **AS** about 200,000 Alberta public-sector workers geared up for contract negotiations in 2024, a report from the Edmonton-based Parkland Institute released on February 21 illustrated unprecedented levels of government interference in Alberta's public-sector bargaining.

Authored by Jason Foster, Bob Barnetson and Susan Cake, *A Thumb on the Scale: Alberta Government Interference in Public-Sector Bargaining* examined how governments in Canada – and particularly Alberta – have steadily increased their interference in bargaining.

“Governments across Canada have been playing a game of cat and mouse with working people and their unions.”

- Jason Foster

“Governments across Canada have been playing a game of cat and mouse with working people and their unions,” said co-author Foster, a professor of labour studies at Athabasca University.

Governments are finding ways to comply with these rights in the most minimal ways possible to preserve their ability to achieve political goals, he said.

The report shows that despite Supreme Court decisions aimed at curtailing government interference in public-sector collective bargaining, the rate of interference has actually increased to a level almost triple that of the 1990s.

Governments have shifted their approach, moving away from imposing settlements to focusing on creating the conditions that help them get what they want, Foster explained.

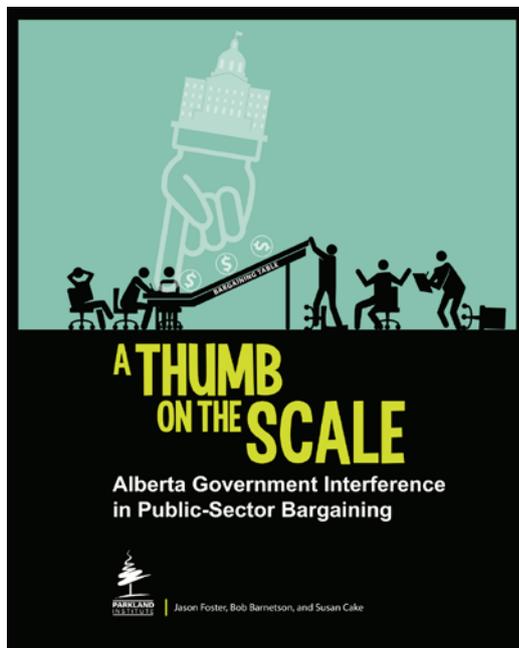
Nowhere is this clearer than the Government of Alberta's recent introduction of the “secret mandates” – directives given by the finance minister to public-sector employers that cannot be shared with unions or publicized in any way.

“This was a first in Canada,” Foster said, noting it's likely to be adopted elsewhere in the country.

Adopted for the first time in the bargaining round of 2020, the “secret mandate” strategy was a blow to the transparency of the bargaining process. By hindering unions from understanding the full scope and constraints of the employers' positions, they put them at a significant disadvantage.

As Alberta heads into another round of public-sector bargaining in 2024, government intervention is expected to evolve. Evidence includes the recent introduction of Bill 5, which amends the *Public Sector Employers Act* to allow for creation of bodies to facilitate employer co-ordination of bargaining across sectors. 🍷

**A THUMB ON THE  
SCALE: ALBERTA  
GOVERNMENT  
INTERFERENCE IN  
PUBLIC-SECTOR  
BARGAINING**



# OTTAWA PUBLISHES NURSING RETENTION TOOLKIT

■ **TO** help support and retain members of the nursing workforce, on March 4 the federal government released a toolkit intended to improve the working lives of Canadian nurses.

*Nursing Retention Toolkit: Improving the Working Lives of Nurses in Canada* focuses on eight core themes with corresponding initiatives that nursing employers can implement to help improve retention, federal Health Minister Mark Holland and Chief Nursing Officer of Canada Leigh Chapman said in a statement.

The eight core themes are: flexible and balanced ways of working; organizational mental health and wellness supports; professional development and mentorship; reduced administrative burden; strong management and communication; clinical governance and infrastructure; inspired leadership; and safe staffing practices.



Chief Nursing Officer of Canada Leigh Chapman

“This toolkit provides nursing leadership and health system administrators with an opportunity to contribute first-hand to making changes in our health care system, including improving mental health and wellness supports for nurses,” Chapman said. 🍷



UNA Local 301 member Carol Hryciw was on vacation in Oahu, Hawaii, in late January when she learned local nurses at the Kapiolani Medical Center for Women and Children were on strike, fighting for fair wages and safe nurse-patient ratios. “When I knew they would be on strike I told my vacationing people, two are retired RNs, that I had to go support these nurses on the picket line,” she recalls. “I told them who I was and that their issues were the same as our issues here at home.” The nurses are members of the Hawaii Nurses Association, Local 50 of the Office and Professional Employees International Union.

# AHS plan would cut overtime and agency staffing use by 10%

■ A memorandum from Alberta Health Services acting Chief Financial Officer Michael Lam in early January instructing senior leaders to reduce use of overtime and agency staffing by at least 10 per cent was “tantamount to lighting a match in a powder keg,” UNA warned.

In a letter to AHS Labour Relations Executive Director Leland McEwan, UNA Labour Relations Director David Harrigan urged AHS to “recognize the current delicate situation that exists in health care.”

“The impact of such an inflammatory policy will be more burn-out and sick time among front-line staff and will undermine efforts to retain and recruit front-line health care employees,” Harrigan wrote. “We would hope AHS

does not intend to pursue policies that are certain to have a serious impact on front-line service delivery, patient safety, and labour relations.”

In the memorandum, a copy of which was obtained by UNA, Lam informed AHS senior leaders that AHS is now “forecasting an operating deficit for the 2023/24 fiscal year. “This is largely due to increased vacancies and unplanned absences (e.g., sick leave) both of which result in increased costs and overtime,” it said.

Since that letter was sent, AHS and government officials including CEO Athana Mentzelopoulos and Health Minister Adriana LaGrange have refused to say how big the deficit will be. 🗨️

“We would hope AHS does not intend to pursue policies that are certain to have a serious impact on front-line service delivery, patient safety, and labour relations.”

- David Harrigan

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## December threat by AHS to reduce nursing positions won't help recruit and retain RNs

■ A threat by Alberta Health Services in December won't help retain nurses and recruit new ones, United Nurses of Alberta warned at the time.

The letter sent to UNA Labour Relations Director David Harrigan by AHS Executive Director of Labour Relations Lee McEwen at the start of December warned of “reductions in positions within UNA’s AHS bargaining unit flowing from the movement of functions outside the organization.”

The AHS letter and similar one from Covenant Health Senior Director of Labour Relations Monica Williams warned that organizational changes could include “changes to staff mix and service redesign, contracting

out, changes or repurposing of sites or relocating, reducing or ceasing the provision of services.”

This contradicted what Health Minister Adriana LaGrange had told UNA representatives in face-to-face meetings shortly before, said UNA President Heather Smith.

“This kind of mixed messaging only makes it more difficult to retain the nurses already working in dangerously understaffed workplaces and makes it even harder to recruit new nurses to work in Alberta,” Smith warned. “This is the opposite kind of signal that AHS should be sending to nurses and health care workers right now.” 🗨️

# B.C. sets nurse-patient ratios and devotes to \$237 million to nurse recruitment

■ **THE** British Columbia Nurses Union and the B.C. health ministry have agreed to nurse-to-patient ratios for six health-care settings in acute care facilities, the first of their kind in Canada.

Examples include most adult medical and surgical units, where the ratio will be one nurse to every four patients, and high-acuity units where it will be one nurse to two patients, the B.C. government said in a news release on March 2.

The ratios build on commitments made by the government in its April 2023 collective agreement with BCNU. In addition, \$237 million has been earmarked to help recruit nurses and retain the ones B.C. has now, the release said.

Of those funds, \$169.5 million will be devoted to province-wide rural nurse retention programs and \$68.1 million to funding and training for internationally educated nurse licensing and education as well as an LPN to RN bridging program.

“Minimum nurse-to-patient ratios are the single most-important policy solution available to address the staffing crisis in this province,” said BCNU interim CEO Jim Gould

The first phase of the ratio program will be followed by setting ratios for remaining hospital settings and non-hospital settings, such as long-term care and health authority community nursing. 🍷



Jim Gould



Alberta nurses and their co-workers rallied for safe staffing and safe patient care in Grande Prairie on March 12. Nurses sent the message that the government’s massive restructuring of Alberta Health Services will do nothing to fix the chronic understaffing and overwork caused by the shortage of nurses and health care staff.

# Alberta does little to recruit and retain student nurses educated in the province

■ **DESPITE** promises to address shortages of nurses in Alberta, not much is being done to encourage nursing students educated in Alberta to remain in the province to work. AHS needs to direct greater resources toward advertising and promoting this opportunity, says UNA President Heather Smith.

“It is imperative a robust recruitment strategy supporting entry to practice is created and implemented with the goal of retaining provincially educated nurses to remain and practice in Alberta,” said Smith in a January 8 letter to the chief executives of Alberta Health Services and Covenant Health.

There are 10 educational institutions offering nursing degrees in Alberta, and the University of Alberta’s program is recognized as the top nursing program in Canada, Smith reminded AHS

CEO Athana Mentzelopoulous and Covenant CEO Patrick Dumelie in the letter. Yet conversations with current nursing students reveal recruitment to employment opportunities for new graduates of nursing programs in Alberta is barely occurring.

Similarly, Smith added, the ability of students to obtain employment as Undergraduate Nursing Employees, known as UNEs, is extremely limited as well.

The robust recruiting strategy urged by UNA would also support Alberta Health Services’ written commitment to retention and recruitment initiatives included in a letter of understanding in the union’s current collective agreement with AHS and Covenant Health.

Letter of Understanding No. 7 states: “AHS has committed to sufficient numbers of regular and temporary positions greater than six months available to be able to hire at least 70 per cent of Alberta nursing student graduates.”

The letter of understanding also provides for a Transitional Graduate Nurses Program and outlines several ways to retain and recruit Registered Nurses and Registered Psychiatric Nurses, and to create at least 20 and up to 1,000 regular positions in each year of the current collective agreement. 🇨🇦

UNA First Vice-President Danielle Larivee and Secretary-Treasurer Christina Doktor attended the Canadian Nursing Students Association national conference in Edmonton, January 17-20. Nursing students from across Canada travelled to Alberta for the conference and were able to learn more about nursing in Alberta and how UNA supports new nurses in our province.

“The ability of students to obtain employment as Undergraduate Nursing Employees, known as UNEs, is extremely limited.”

- Heather Smith



UNA President Heather Smith, at right, was presented with the Queen Elizabeth II Platinum Jubilee Medal on December 8 by Edmonton-Riverview MLA Lori Sigurdson. Smith was awarded the medal in recognition of her many years of service fighting for better working conditions for Alberta's nurses and advocating for a stronger public health care system for Albertans.



## MORE THAN 650 MEMBERS ATTEND SIXTH WELLNESS DAY ON FINANCIAL HEALTH AND WELLNESS

■ **MORE** than 650 UNA members participated online in the union's sixth Wellness Day seminar on January 18.

The event, presented to members via Zoom, focused on financial health and wellness. The day's main feature was a workshop on Charting Your Course, facilitated by Retirement/Life Challenge Ltd.

That presentation provided members with an opportunity to set priorities and receive professional advice on retirement planning.

Topics covered included paying off your mortgage versus investing in the stock market, managing credit and debt, life insurance, finding a good financial

advisor, and protecting yourself from the cost of long-term illness.

Alberta Federation of Labour President Gil McGowan spoke on the importance to Albertans of continuing membership in the Canada Pension Plan, and there was a presentation on the Alberta Local Authorities Pension Plan by UNA Labour Relations Officers Richard West and Carolyn Olson.

UNA members can watch a video of the event in Zimbra Forums. Members will need to create UNANet Account in order to access the video and chat. 🍷



# APRIL 28:

Some thoughts to keep in mind for

## DAY OF MOURNING 2024



By Dewey Funk  
UNA OHS Advisor

■ **EACH** year on April 28, the National Day of Mourning, we remember workers who have died, been injured, or made ill from their jobs.

This is the reason Occupational Health and Safety is much more than just a boring meeting you don't want to be roped in to attending because nothing ever gets done there.

So let's think about some of the things we need to keep in mind on the Day of Mourning this year.

### Part 27 Labour Code review

Part 27 is one of the most important parts of the *Code* for health care workers.

The Alberta Government is currently reviewing Part 27 of the *Occupational Health and Safety Code*, which deals with violence and harassment.

Alberta MLAs haven't paid much attention to workers since Bill 47, the so-called *Ensuring Safety and Cutting Red Tape Act*, was passed in the Legislature at 3 a.m. on December 9, 2020.

But that doesn't mean the 2024 review is good news.

Part 27 is one of the most important parts of the *Code* for health care

workers. It says employers have an obligation to develop a plan, policy and procedure to mitigate violence and harassment in the workplace. They must also do a review when these types of incidents take place.

But very few employers have robust systems in place that include workers in the process. As a result of the current review, labour representatives fear the legislation will be watered down even more, with employer obligations reduced by making language open-ended and vague.

Remember, as the Ministry of Jobs, Economy and Northern Development goes into this review, cabinet has told it to deliver a 25-per-cent reduction in "red tape," supposedly a good thing for "job creators" – that is, employers.

But who is thinking about the workers who do the work, or the crippling impacts "red tape reduction" has on them?

Cutting safety regulations isn't going to make workers safer.

UNA members attended an Occupational Health & Safety workshop facilitated by UNA OHS Advisor Dewey Funk in February 2024.





## Open for Business - but at what cost?

When UNA members raise OHS concerns, the cost of fixing them is always lurking in the background.

Just think about the broken and worn-out equipment you work with daily, or the unsafe conditions for patients and nurses that are so common in our workplaces. From medication carts that seem to have square wheels, to beds parked in hallways, from call bells that don't work, to security personnel missing in action, health care workers face a host of safety issues daily.

Would this be allowed on a construction site? No way!

But in health care, nurses make do.

The result is often that health care workers suffer physical and psychological injuries that don't show up on their employers' balance sheets.

Would the unchecked threats and violence common in health care worksites be allowed at a sports facility? Not a chance!

You can't even bring a water bottle to an NHL game. But weapons – from

knives and brass knuckles to firearms are smuggled into hospitals all the time.

Yet employers won't even post signs saying No Abuse or No Weapons Permitted! Patients are asked by Protective Services to voluntarily put their weapons in a locker! Employers are so worried about offending some members of the public that about all they'll say is "Be Respectful"! Code Blacks are called – and no one is charged, even though the police know the perpetrator.

What's the real cost of this reluctance to protect health care workers?

Nurses go home with black eyes, bites, and worse – and yet they're discouraged from reporting such assaults to the police. They're ignored when they remind their employers that patients don't need weapons, they need safe nursing care.

If you weren't a nurse, could you imagine going to work in that environment every day?

## The real cost is paid by people, not institutions

Psychological trauma isn't just caused by violence.

What is the expectation of a nurse when a patient passes in the Emergency Room, or after a medical procedure? What happens when a long-term resident who may have become a friend dies? Usually, the answer is just to go and care for the next patient.

How much time as a health care worker does your employer give you to recover, to grieve? Are there breaks, or compassionate debriefs, in such situations? Likely not: Too often from employers' perspective, time is money. The cost is broken people, families, relationships, societies.

But dollars are not the only thing that belong on a balance sheet. April 28

is the official Day of Mourning when workers fight for the living *and* mourn for the dead.

As OHS advisors, we want to talk to you, not about you.

You are an important person. Your life impacts family, friends, co-workers, patients, residents who respect and value you.

Please make a commitment this year to work safe, stay healthy, and think of yourself as an important person. You matter. Take care of yourself on this Day of Mourning, and every day!

*Remember, you have the right to a safe and healthy workplace, which includes your psychological health and safety.* 🇺🇦

If you have any questions or concerns, please contact your UNA Local or Occupational Health and Safety Advisor at 1-800-252-9394.

# DONNA LORAIN CLARK

## longtime SNA and UNA leader, remembered

■ **DONNA** Loraine Clark, a longtime Staff Nurses Association and United Nurses of Alberta leader at the Calgary General Hospital and Peter Lougheed Centre, died peacefully in her sleep on February 8. She was 89.

“As a vice-president of UNA and as the chair of the 1980 bargaining team, Donna played a key role in achieving Professional Responsibility Committees in our collective agreement,” remembered President Heather Smith. “This was without question one of the most important accomplishments in the history of our union.”



Donna Loraine Clark

Donna worked for 40 years in orthopedics at the Calgary General Hospital.

A graduate of the Calgary General Hospital School of Nursing in 1957, Donna was deeply involved in the organization of UNA. When UNA and the Alberta Association of Registered Nurses agreed in 1977 to divide their roles into regulation and

collective bargaining, AARN named her vice-president of the first UNA executive committee. She served in that position until 1983.

During that time, her family obituary noted, “UNA went through three nursing strikes and fought to have nurses treated with the respect they worked for every day and deserved.”

In addition to the inclusion of PRC language in the 1980 agreement, there were 49 other significant improvements in the 1980 collective agreement, among them a dental plan, creation of a safety committee, and scheduled days of rest for part-time employees.

“While we may not have achieved everything we were looking for, Alberta’s nurses have won a contract we can be proud of,” Donna said at the time. “It is now up to each local and each member to see that the new rights and benefits are not diluted by any hospital over the life of the agreement. We must be prepared to enforce these rights.”

Donna remained at the Calgary General Hospital until “Ralph’s Implosion” on October 4, 1998, when the hospital was destroyed and its services were transferred to the PLC during the Klein Government’s deep cuts to Alberta’s health care system.

“There’s a reason Local 1 is Local 1,” Smith said. “Because that’s where Donna Clark was!” After the destruction of the Calgary General, its nurses went to the PLC, where they continue to be members of Local 1. Donna’s UNA membership card, Smith noted, was Number 62.

After that, Donna continued her career at the PLC until her retirement in 2001.

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UNA Members at the 2024 AFL-CLC Labour School.

# UNA nurses participate in annual AFL-CLC Labour School in Jasper

■ **UNITED** Nurses of Alberta members from across Alberta travelled to the mountain park community of Jasper in January to sharpen their skills at the Winter Labour School.

The annual educational event organized by the Alberta Federation of Labour and the Canadian Labour Congress took place from January 7 to 12, 2024.

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

law, collective bargaining, mental health, domestic violence, a path to reconciliation, digital organizing, and communications for union activists.

Students at the school also heard from speakers including AFL President Gil McGowan and Secretary-Treasurer Karen Kuprys, and CLC President Bea Bruske.

UNA District Representative Barbara Campbell, Labour Relations Officer Ivana Niblett, and Communications Advisor Dave Cournoyer shared their professional expertise with students by acting as facilitators at the school. 🍷

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However, the family obituary said, “something was missing. It wasn’t as much fun as it had been at her years at the General from 1954-1998.”

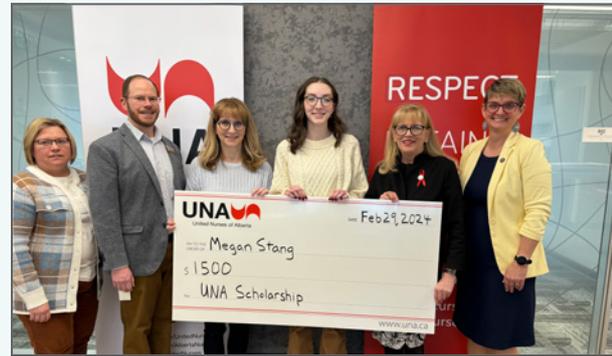
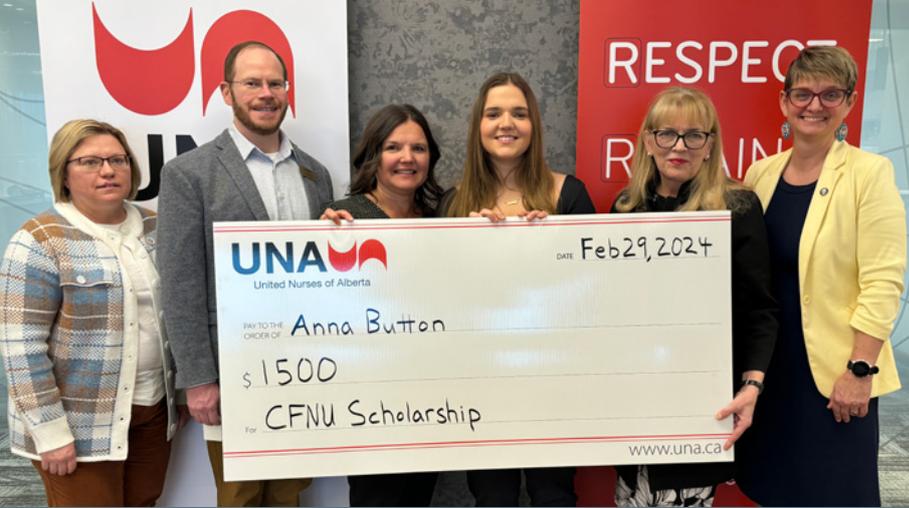
Donna Loraine, and her twin, Dianne Loretta, were born January 20, 1935, at the Grace Hospital in Calgary, and grew up in Calgary’s nearby Hillhurst neighbourhood with their parents and younger sister, Lillian Gail.

Donna wanted to attend Western Canada High School because of its home economics program. “She did

well in Languages, Writing and French; not so well in math, physics and her bugbear, Chemistry, which she had to retake twice so she could apply to what became her passion, nursing,” her family wrote.

A funeral service was held on March 16 at Calgary’s Grace Baptist Church.

Memorial donations may be made in Donna’s memory to the Calgary General Hospital Commemoration Project through the Parks Foundation Calgary at [parksfdn.com](https://parksfdn.com). 🍷



## UNA AWARDS 15 NURSING EDUCATION SCHOLARSHIPS PLUS ONE CFNU SCHOLARSHIP

■ **UNITED** Nurses of Alberta is proud to have awarded 15 annual scholarships of \$1,500 to nursing students from across Alberta as well as one Canadian Federation of Nurses Scholarship also worth \$1,500.

“UNA is proud to support these students as they start their nursing education at post-secondary institutions across the province,” said UNA President Heather Smith. “We are proud to support the future of nursing in Alberta.”

UNA’s scholarship program awards scholarships to applicants related to a UNA member who have completed an application form and written a short essay answering the question, “*Why is the PRC process important to Alberta Nurses?*”

### This year’s UNA Scholarship winners are:

- **Emma Aragon** from the University of Alberta, sponsored by Vanessa Aragon from UNA Local 79 (Edmonton General Continuing Care Centre & Grey Nuns Community Hospital)
- **Suraya Bourne** from the University of Alberta, sponsored

by Farin Bourne from UNA Local 301 (University Hospital, Stollery Children’s Hospital, Mazankowski Alberta Heart Institute)

- **Crystal Brown** from MacEwan University, sponsored by Chantelle Bourree from UNA Local 92 (WestView Health Centre)
- **Lillian Ferguson** from MacEwan University, sponsored by Blaine Ferguson from UNA Local 196 (Edmonton Community)
- **Grace George** from MacEwan University, sponsored by Jini George from UNA Local 301 (University Hospital, Stollery Children’s Hospital, Mazankowski Alberta Heart Institute)
- **Aleah Goertz** from Red Deer Polytechnic, sponsored by Leanne Goertz from UNA Local 196 (Edmonton Community)
- **Eden Huggins** from Lethbridge College, sponsored by Tammy Gamracy from UNA Local 89 (Chinook Health Authority - Community)
- **Seth Matatall** from Medicine Hat College, sponsored by Jennifer Matatall from UNA Local 307 (Regional Health Authority 5 - Community)



- **Julia Nisperos** from Mount Royal University, sponsored by Jo-Ann Nisperos from UNA Local 115 (Foothills Medical Centre)
- **Beckett Perrott** from the University of Alberta, sponsored by Brooklyn Grainger from UNA Local 9 (Fort Saskatchewan Community Hospital)
- **Katy Saby** from Red Deer Polytechnic, sponsored by Trudi Saby from UNA Local 43 (Olds Health Centre)
- **Jana Schuh** from Northwestern Polytechnic, sponsored by Bettina Schuh from UNA Local 37 (Grande Prairie Regional Hospital/Grande Prairie Care Centre)
- **Megan Stang** from the University of Alberta, sponsored by Kerri Stang from UNA Local 301 (University Hospital, Stollery Children's Hospital, Mazankowski Alberta Heart Institute)
- **Estelle Steffener** from MacEwan University, sponsored by Melanie Steffener from UNA Local 301 (University Hospital, Stollery Children's Hospital, Mazankowski Alberta Heart Institute)

- **Ashley Thomas** from Red Deer Polytechnic, sponsored by Denise Holman from UNA Local 412 (Rimbey Hospital and Care Centre)

**This year's Canadian Federation of Nurses Union Scholarship winner is:**

- **Anna Button** from the University of Alberta, sponsored by Allison Button from UNA Local 301 (University Hospital, Stollery Children's Hospital, Mazankowski Alberta Heart Institute)

Scholarship winners are shown with Executive Officers Heather Smith, Danielle Larivee, Christina Doktor, and Cameron Westhead, their sponsors and sometimes Local leaders.

## APPLY FOR A UNA EDUCATION SCHOLARSHIP

Online applications for the 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?”*

United Nurses of Alberta awards up to 15 nursing scholarships of \$1,500 each year and one award of \$1,500 sponsored by the Canadian Federation of Nurses Unions for students enrolled in first-year Registered Nurse or Registered Psychiatric Nurse track programs. This scholarship is not intended for postgraduate studies. 



# Local 119 PRC committee brings significant improvements to CANMORE GENERAL HOSPITAL EMERGENCY DEPARTMENT

■ **THE** Emergency Department at the Canmore General Hospital is the busiest rural emergency department in Alberta with an annual average of 14,500 visits over the five years leading up to 2023. As of July 2023, the number of visits had increased to 16,500.

Yet the hospital had staffing levels inadequate to ensure delivery of safe patient care.

As a result, on August 28, 2023, United Nurses of Alberta Local 119's Professional Responsibility Committee requested a meeting with Alberta Health Services senior leaders under Article 36 of the Provincial Collective Agreement to deal with numerous PRC submissions from nurses.

UNA had identified factors including a shortage of primary care providers within the community, the increase in residential population in Canmore, an increase in tourists visiting the Rocky Mountain community, and the impact of long wait times in nearby urban areas including Calgary resulting in more visitors to the Canmore ED as contributing to higher patient volumes and negative patient outcomes.

Despite those factors, the hospital had a night staffing baseline of only one Registered Nurse.

UNA requested data from the employer to support its case there was high need to increase baseline staffing at night in the Emergency Department.

That data supported UNA's call for the addition of one Registered Nurse full-time equivalent to increase the

RN baseline from one to two nurses between 11 p.m. and 7 a.m.

UNA had recommended regularly scheduling two RNs in the ED between those hours and ensuring that an RN trained in emergency medicine and obstetrics with Neonatal Resuscitation Program (NRP) and Advanced Cardiovascular Life Support (ACLS) certification was available during all nights.

As a result, the employer has committed to the following changes, which have been accepted by the Local:

- Hiring two full FTE starting at the beginning of March will allow for RN coverage four nights a week in the Emergency Department, with the remaining three nights augmented with casual staff as required.
- A commitment by the employer to train all on-call staff in NRP and ACLS if they will be required to work on on-call shifts.
- Completion of a \$4.6-million renovation to the ED to improve patient flow, care spaces, and triage privacy, and to improve sightlines within the department.
- Ongoing monitoring of the presence of security at the worksite and notification of staff when no security is in the building.

The Local 119 PRC Committee thanks Local President Kirsten Bartsch for her essential input to this process and her contribution to its successful resolution. 🍷

# Nominate an outstanding UNA member for the **BREAD & ROSES AWARD**

■ **UNITED** Nurses of Alberta members who demonstrate leadership, a true spirit of solidarity, unionism, and the advancement of social justice at the local, district or provincial level are now eligible to be nominated by their coworkers for UNA's Bread & Roses Award.

The deadline to submit nominations for the annual award is September 1, 2024.

Contact [nurses@una.ca](mailto:nurses@una.ca) for a nomination form.

The nomination form requires the nominee's name, local, current address, as well as the names of two nominators. All active members in good standing of UNA are eligible to be nominated.

Relevant accomplishments listed in the nomination form may include involvement by the nominee at the local,

district and provincial level, leadership in influencing the growth of UNA through policy development, decision making, public awareness, and work empowering members through mentorship and policy development.

The award recipient will be determined by members of the UNA Executive Board, who will review all submitted nominations after the September 1 deadline.

The award winner is chosen by secret ballot at the September meeting of the Executive Board and the announcement is normally made during the Annual General Meeting.

This year's award recipient will be announced at the UNA AGM being held on October 22, 23 and 24, 2024 in Edmonton. 🇺🇦

## Past Bread & Roses Award recipients:

**2020:**

**Karen Kuprys,**  
Local 154 (Youville Home)

**2021:**

**Marie Corns,**  
Local 80 (High River General Hospital)

**2022:**

**Orissa Shima,**  
Local 85 (Sturgeon Community Hospital)

**2023:**

**Diane Lantz,**  
Local 1 (Peter Lougheed Centre)

## 'Code Blue Christmas' keeps on making music

■ **THE** Christmas season has come and gone, but Local 307 member Whitney Ramsden Jensen's spirited social media rendition of "Code Blue Christmas," a parody of All I Want for Christmas, continues to attract listeners online.

The clip has been played more than 390,000 times on Facebook and about 44,000 times on Instagram. It can also be found on YouTube and is linked to from UNA's home page. The link can be found by searching "Code Blue Christmas."

In it, the community health Registered Nurse from Central Alberta tells what



Whitney Ramsden Jensen in studio



VIDEO ON YOUTUBE

nurses want for Christmas – and "it starts with our government, actually listening to our pleas," she sings.

Give it a listen! 🇺🇦



# UCP rejects participation in national pharmacare plan

■ **AS** soon as the federal Liberal and New Democratic parties said they'd reached an agreement to create a national pharmacare program on February 22, Alberta's United Conservative Party Government announced it would opt out.

their promise to expand coverage to include a comprehensive list of essential medications."

Back in Alberta, it was widely noted that Premier Danielle Smith and Health Minister Adriana LaGrange had rejected the agreement even before they knew the details.

"By pre-empting their decision on pharmacare even before the federal announcement is made, Danielle Smith's government has made it clear they would rather play politics than get things done to help Albertans," said Chris Gallaway, director of Alberta's Friends of Medicare.

Luanne Metz, the Opposition NDP's health critic and a Calgary physician, agreed, accusing the government of continuing "its schoolyard scrap with the federal government" and "bowing to pressure from lobbyists."

Beyond a statement to media, eventually published on social media by LaGrange, the government didn't say much.

"The vast majority of Albertans already have access to drug coverage," LaGrange said in the statement, claiming "Alberta already has a comprehensive pharmacare program for seniors, low-income Albertans and those who receive disabilities benefits such as AISH." Her statement included a list of medications covered by the government's partial plan.

"The province is willing to work and discuss ways that the federal government can invest in Alberta's pharmacare program to enhance the existing program that is comprehensive and currently available to Albertans," she added.



Chris Gallaway



Julia Hayter



Luanne Metz

So while Canadians celebrated the announcement and the hope that the introduction of pharmacare for diabetes and birth control medications would lead to a comprehensive national pharmaceutical drug program, Albertans were left to wonder what was next for them.

Meanwhile, proponents of the plan argued that the federal announcement was a good start, Canadians want and deserve the full dose – that is, a comprehensive, universal and public national pharmacare program as recommended by the federal government's own advisory council.

"This is a historic win, and access to these medications will change lives," said Canadian Federation of Nurses Unions President Linda Silas.

However, she added, "this isn't the full dose of pharmacare that Canadians need. Canada's nurses will be watching closely every step of the way to ensure our governments come through on

□ CONTINUED ON PAGE 23

# CPP KEEPS ALBERTANS' RETIREMENT SECURITY STRONG

By Dave Cournoyer  
UNA Communications Advisor

■ **RECOGNIZING** the importance of its members' retirement security, United Nurses of Alberta Labour Relations Officers presented education sessions about the Canada Pension Plan at UNA's district meetings in Calgary, Edmonton, Grande Prairie, Lethbridge, and Red Deer during March.

The purpose of the sessions was for UNA members to further educate themselves and their co-workers about the importance of Alberta workers remaining in a strong and stable national pension plan like the CPP.

Founded in 1966, the Canada Pension Plan provides a monthly benefit and replaces, on average, 25 per cent of average Canadian income for retired workers who pay into the national plan.

"CPP is not the only thing, but it is the foundation for your retirement," said LRO Carolyn Olson as she and fellow LRO Richard West explained the advantages of Alberta workers sticking with a national pension plan.

Full CPP payments in 2024 are \$1,364 per month plus cost-of-living adjustments and are portable across Canada and 60 other countries throughout the world.

The CPP Investment Board, created to manage the pension plan in 1997, was designed to protect Canadians' retirement funds from political interference. Since the creation of the CPP board, the plan maximized its returns and now ranks among the world's best with 10-year returns.

The flaws and uncertainties of the Alberta government's proposal to withdraw from the CPP and create an Alberta Pension Plan are well understood. With this policy, the government is threatening the retirement security of our members, and our members expect us to respond to that threat.

"The Alberta government will need to set up a whole new investment structure to make it happen," said West. "It's a fantasy land."

UNA believes strongly that it owes it to all current members, and all retired members including those who now live in other provinces, to fight hard to protect their retirement security, which is best ensured by participation in the CPP. 🍷



## MORE INFORMATION



"CPP is not the only thing, but it is the foundation for your retirement."

- LRO Carolyn Olson

## □ CONTINUED FROM PAGE 22

NDP Status of Women Critic and Calgary-Edgemont MLA Julia Hayter said "women are currently paying more than \$10,000 out-of-pocket for contraceptive products. In the midst of the worst affordability crisis we have faced in a generation, one that disproportionately impacts women, the UCP has dug in its heels on a program that would help."

Both the Edmonton and Calgary Chambers of Commerce also urged the government to reconsider. "With the ongoing labour shortage and need to attract talent, and the cost to employers for providing health-related benefits, along with the financial benefit of pooling resources across provinces, a national pharmacare program, if developed well, could benefit Alberta's economy," they said in a joint news release. 🍷



CANADIAN  
FEDERATION  
OF NURSES  
UNIONS

# From pharmacare to nurse-patient ratios, nurses are a powerful force for change



**By Linda Silas**  
President, Canadian  
Federation of Nurses Unions

**I know** the challenges facing you are daunting. Working excessively long hours, with little to no support, stretching yourself thin to care for your patients. I know it can feel draining, at the worst of times, even thankless.

I want you to know that you're not alone. People in Canada value what you do, and they have your back. A resounding 97 per cent of Canadians recognize the critical importance of nurses in our health care system, according to a recent poll by CFNU.

Canadians know the challenges you face – high workloads and stress, burnout and fatigue, insufficient staffing – and they care. More than 90 per cent are deeply concerned about the nursing shortage, while 71 per cent believe investing in publicly employed nurses is essential.

These are more than just numbers. This is a rallying cry of support for Canada's nurses. The message from Canadians is clear. They see the value you bring and the urgent need for change.

Together, we will not let our politicians off the hook.

Finally, provinces are finalizing their health funding agreements with the federal government.

Now that plans have been signed, we're fighting for accountability. We know this funding needs to translate into the respect and support you need on the front lines. We will fight to ensure you see the impact of these investments at the bedside. Working together, we

will ensure safe nurse-patient ratios become a reality in health care across the country.

Investing in our public health systems and the nurses who keep our systems running has never been more important.

As recent reports from *The Globe and Mail* revealed, overreliance on private for-profit nurse staffing agencies has led to skyrocketing costs, all but bankrupting our health care systems while shareholders' wallets get thicker and thicker.

We should not allow our taxpayer dollars to continue to be poured into for-profit companies, where spending is unaccounted for.

Together, we will fight for a better public health care system for everyone. Together, we fought for and won prescription coverage of two critical types of medication as a part of our universal health care system. Finally, we're on the road towards a fulsome, universal pharmacare program. In large part due to nurses' tireless advocacy.

Together, we are a powerful force for change. We are the largest movement of front-line nurses in North America – 250,000 strong – from British Columbia to Newfoundland and Labrador. Working together, we can ensure our public health system is strong and return nursing to one of the best jobs in our communities.

In unwavering solidarity,  
*Linda Silas,*  
CFNU President 🍷

Together, we  
will not let  
our politicians  
off the hook.

WHEN KNOWLEDGE MEETS KNOW-HOW

# Heart disease, drowsy driving and patient safety: NEW STUDY REVEALS GRIM IMPACT OF NURSE FATIGUE

■ **A REPORT** from the Canadian Federation of Nurses Unions sheds light on the serious impact of excessively long working hours on nurses and their patients.

Released on January 11, *Safe Hours Save Lives* reveals a critical need to address nurse fatigue and outlines key recommendations to mitigate fatigue-related risks.

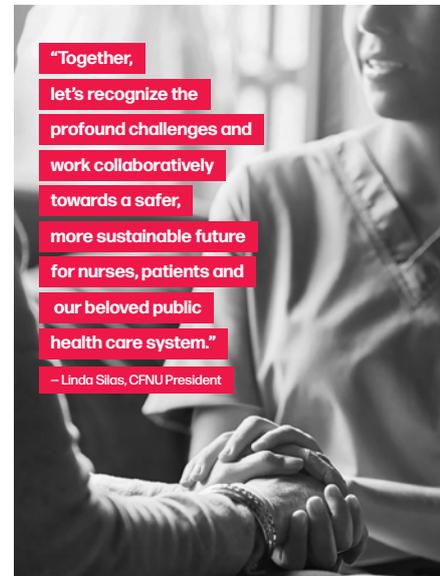
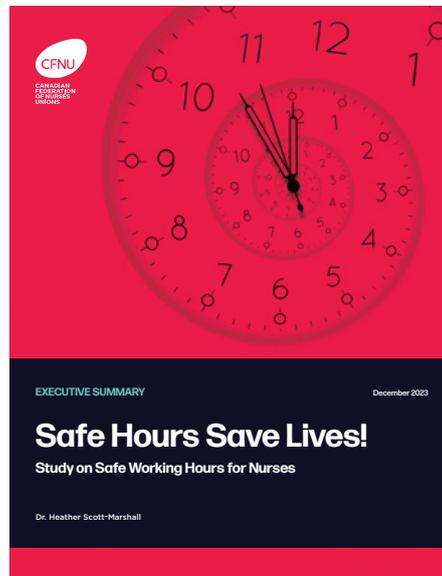
“Nurses are working more overtime than ever before, enduring shifts as long as 24 hours, as they try to meet the needs of their patients amidst a crisis-level staffing shortage,” said CFNU President Linda Silas. “This is the reality for many nurses, day in and day out.”

The findings of the study are clear, she said. “Excessive hours of continuous work have a profound impact on nurse fatigue, with consequences that extend far beyond the workplace.”

The report, authored by researcher Dr. Heather Scott-Marshall, examined three outcomes of occupational fatigue: risks associated with patient safety, risks of workplace conflicts and violence, and risks posed to nurses’ overall health and well-being.

“Fatigue is not only associated with long-term health risks such as heart disease and diabetes, research shows that the effects of fatigue are similar to those of alcohol intoxication,” explained Scott-Marshall.

“In safety-sensitive industries, this means that fatigue poses a significant safety risk,” she said. Pilots are subject to regulations that limit their on-duty



period to a maximum of 13 hours. No such safeguards exist for nurses in Canada.”

Fatigue is also linked to work-related injuries in nurses, costing our health care system nearly a billion dollars annually. Troublingly, there is a growing body of evidence linking fatigue to safety incidents in health care.

Safe Hours Save Lives outlines key recommendations to reduce fatigue-related risks, including:

- Stopping the practice of mandating nurses to work overtime
- Legislative and regulatory limits on consecutive work hours for nurses
- Adopting international standards for managing risks related to fatigue, including designated napping spaces, fresh food on extended or overnight shifts, and transportation home post-shift 🍷

“Nurses are working more overtime than ever before, enduring shifts as long as 24 hours, as they try to meet the needs of their patients amidst a crisis-level staffing shortage.”

- Linda Silas.

SAFE HOURS  
SAVE LIVES  
REPORT



UNA Local 37 member Margaret Nasedkin (second from the right) met with MP Chris Warkentin (centre) and supporters of the Canadian Health Coalition, including Friends of Medicare executive director Chris Gallaway (left).



■ **ALBERTA** nurses were in Ottawa in February to meet with MPs and Senators to discuss the critical need for investment in health care staffing and the expansion of universal pharmacare for Canadians. UNA members joined the Canadian Health Coalition annual lobby conference and met with politicians including Grande Prairie-Mackenzie MP Chris Warkentin and Crowfoot-Battle River MP Damien Kurek.



UNA Local 15 member Donica Geddes (left), MP Damien Kurek (second from the left) and supporters of the Canadian Health Coalition.



Canadian Health Coalition chairperson and Local 301 member Pauline Worsfold, UNA Secretary-Treasurer Christina Docktor, and UNA District Representatives Donica Geddes (Local 15), Margaret Nasedkin (Local 37), Jens Gunderman (Local 301) and Marie Corns (Local 80).

## UNA marks International Women's Day with call for worldwide action on gender equality

■ **ON** International Women's Day, March 8, United Nurses of Alberta called for action to achieve gender equality at home and around the world.

“Nurses are particularly conscious of the need to continue the effort to secure justice and equality for girls and women,” said UNA President Heather Smith.

But while awareness must be increased about discrimination elsewhere in the world, there remain serious issues in Canada and Alberta too, she added.

“The Alberta government's recent decision to opt out of a national pharmacare program that would cover the costs of contraception shows we still have a long way to go to achieve

equitable access to health care for women,” Smith said.

“While we celebrate women's achievement on International Women's Day, we must also continue to empower women and girls around the world to transform their lives, their families, and their communities,” she said. “Whether it is reproductive rights, trans rights, or fair pay, the struggle to achieve gender equality in Canada is far from over.”

### BREAD AND ROSES

International Women's Day has its roots in women's activism for better working conditions and the vote in the 19<sup>th</sup> and early 20<sup>th</sup> centuries. An international

women's day was first marked in 1911 in Austria, Denmark, Germany, and Switzerland.

The anthem of International Women's Day is Bread & Roses, associated with the strike in 1912 by more than 20,000 textile workers, women and immigrants, in Lawrence, Massachusetts.

It is now marked around the world on March 8 and the need remains great, and is again growing, to continue this struggle.

The symbols of International Women's Day are bread and roses – the bread representing women's struggle for economic equality and the roses their women's continuing efforts for a better quality of life. 🌹

## Apply for family benefit coverage as soon as possible after a dependent enters your life

■ **MOST** Employer benefit plans require employees to apply for family benefit coverage soon after they have a dependent.

Missing the deadline can lead to premium back-payments and the requirement for medical evidence for claims made for a dependent child, married spouse, or partner with whom the employee has cohabited for 12 months or more.

So it is important for all members to apply for benefit coverage with their benefit plan provider as soon as they have or adopt a child, get married, or have cohabited with a partner for more than 12 months.

Article 21 of the UNA Provincial Collective Agreement deals in detail with employee benefits.

Article 21.02 says benefits may be provided through administrative or insurance contracts obtained by the Employer, so dependent application deadlines may vary from one plan to another because “the administration of such plans shall be subject to and governed by the terms and conditions of the policies or contracts entered into with the underwriters of the plan.”

Article 21.04 requires Employers to make available to all employees brochures and other relevant information concerning the plan and changes to the plan.

This information should be provided to new employees when they are hired and to all employees whenever there is a change. 🍷



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

For more information, or if you have concerns about the coverage of dependents, reach out to your Employer benefit provider or your UNA Local executive or Labour Relations Officer. You can reach them by calling 1-800-252-9394.

## More UNA long-term care locals ratify agreements

■ **A GROWING** number of nurses at long-term care facilities represented by United Nurses of Alberta across the province have voted to ratify new collective agreements in recent months.

New agreements have been ratified by members represented by Local 219 at Eden House in Edmonton, Local 194 at Salem Manor in Leduc, Local 420 at Sunnyside/Haven of Rest

in Medicine Hat, and Locals 91, 173, 426, 503 and 504 employed by the Bethany Care Society in communities across the province.

Members represented by Locals 2, 117, 135, 143, 145, 168, 170, 189, 215 and 422 also recently accepted a Memorandum of Settlement with Extendicare, and members of Local 402 voted to accept a Letter of

Understanding with their employer, River Ridge, in Medicine Hat.

UNA congratulates and thanks the Local and bargaining team members for their hard work and solidarity during these negotiations. UNA recognizes the commitment of the members who stuck together and negotiated these agreements for their co-workers. 🍷



Zara

## Show your support with a '3Rs: Respect, Retain, Recruit' lawn sign

Insufficient staffing levels and high workloads resulting from the current staffing shortage are forcing nurses to leave the profession. Our health care system cannot survive without nurses.

Support Alberta's nurses by putting a "3Rs: Respect, Retain, Recruit" lawn sign on your lawn or in your window.



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

