

NEWS Bulletin UNA

United Nurses of Alberta

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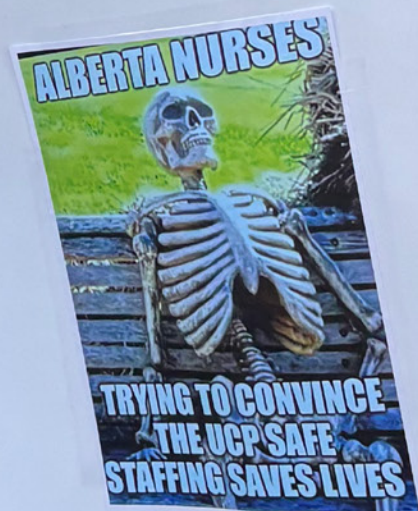
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UNA MEMBERS RATIFY NEW AGREEMENT

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**NURSES
AT YOUR
SIDE ON
YOUR SIDE**

UNA
United Nurses of Alberta



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PRESIDENT'S MESSAGE



Springtime in Alberta brings an agreement that offers hope, respect and recognition

■ **MARCH** 2025 brought a final blast of snow and a tentative agreement for more than 33,000 UNA members.

When it's springtime in Alberta, another storm can always come raging through. But even when the mercury's falling, our new collective agreement should provide warming hope.

After UNA members spoke clearly in October, rejecting the Mediator's Recommendation for a new collective agreement, I said what Alberta's Registered Nurses and Registered Psychiatric Nurses wanted and needed was a new collective agreement that offered hope after the pandemic, the surge of inflation that followed, the upheaval in health care, and the losses we all experienced.

Members clearly thought the Mediator's Recommendations did not show the respect they deserved and demanded.

Members of the Negotiating Committee listened and returned to the bargaining table reenergized. They delivered. They brought back the Provincial Collective Agreement you ratified on April 2.

This agreement would not have been possible in collective bargaining without the determination of UNA's members, and the exhausting work of our Negotiating Committee.

I believe it offers hope to all of us who have struggled through the past difficult years. Every UNA member can see that we are getting the respect and acknowledgement – tangible and intangible – that we deserve.

Throughout negotiations, we called for the government to commit to "Three Rs" – Respect, Retain, and Recruit. All are reflected in this agreement.

Respect required significant financial recognition, which the new agreement delivers.

We also achieved some of the tools we need to retain Alberta's nurses, and to recruit new members of the profession to work in Alberta.

Among the commitments by the employers and the government that we can celebrate is the requirement 1,000 new graduates are hired each year and provided a supportive entry into our profession and workplaces. This will begin to take one element of stress off our shoulders.

Another is success in our long fight to ensure that nurses – like other first responders – do not have to fight to have their psychological injuries and PTSD acknowledged by the Workers' Compensation Board as workplace injuries. The government has committed to ensuring presumptive coverage for such injuries.

What we have achieved is not perfect. No collective agreement is. But this one offers hope, respect and recognition of the vital role all of you, UNA's members, bring to your jobs every day.

Stay well! Stay safe! Stay strong! This agreement shows what we can achieve when we stand together!

Heather Smith
President, United Nurses of Alberta

Front Cover Photo: UNA Local 33 members Rochelle Walker and Evangeline Estrada show their support for nurses and the UNA Negotiating Committee during UNA's Day of Action in Edmonton on January 25, 2025.

PUBLICATIONS MAIL
AGREEMENT #40064422
RETURN UNDELIVERABLE
CANADIAN ADDRESSES TO:
UNITED NURSES OF ALBERTA
700-11150 JASPER AVENUE NW
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UNA MEMBERS OVERWHELMINGLY RATIFY 4-YEAR COLLECTIVE AGREEMENT

with pay increases of approximately 20% over the life of the contract

■ **MEMBERS** of United Nurses of Alberta have overwhelmingly ratified a new collective agreement with Alberta Health Services, Recovery Alberta, Primary Care Alberta, Covenant Health, Lamont Health Care Centre, and The Bethany Group (Camrose) that will again make Alberta nurses the highest paid in any Canadian province.

All affected members will receive pay increases of approximately 20 per cent over the life of the four-year Provincial Collective Agreement, plus significant increase in premium pay and other benefits.

The contract will also continue to cover nurses now working for AHS who are transferred in the weeks and months ahead to additional new public-sector agencies created as part of the Alberta Government's restructuring of the province's health care system.

"I am very pleased that the members agreed with the Negotiating Committee's recommendation and voted by 95.74 per cent to ratify the new agreement," said UNA President Heather Smith soon after the results of the April 2 membership ratification vote became known.



□ CONTINUED ON PAGE 4

APRIL 2 VOTE RESULTS

TOTAL VOTING LOCALS:

Yes: 100%
No: 0%

TOTAL VOTING MEMBERS:

Yes: 95.74%
No: 4.26%

TURNOUT:

100% of Locals
and 77.38% of
members voted. 🇺🇦

The United Nurses of
Alberta Negotiating
Committee.



MONETARY INCREASES

The changes to the Salary Appendix include the following:

3% retroactive payment to , 2024, based on the new revised grid, which rises 4% between each step.

Immediately upon ratification, all RNs and RPNs will advance to the rate of pay of the next step on the salary grid while the number of the step they are on does not change. This is an automatic increase of 4% (including Step 9) and all steps will see increases of 3% on April 1, 2024.

Members will maintain their anniversary date or hours toward the next increment.

Pay increases of 3% per year will be added to each step of the revised grid for the life of the agreement. 🍷

PREMIUM PAY INCREASE

On-call rate increases from \$3.30 per hour on regular work days and \$4.50 per hour on days of rest and named holidays to \$7.00 per hour.

Charge pay increases from \$2.00 to \$3.50 per hour.

Preceptor pay increases from \$0.65 to \$2.00 per hour.

Payment for employees required to use their own vehicles rises from \$130.00 per month to \$162.50 per month.

Coverage for massage therapy is amended to \$1,000 per member each benefit year with no per-visit limit. 🍷

SAFE STAFFING

A new Letter of Understanding explicitly commits Employers to “providing safe staffing for all patients, residents, and clients.” To achieve this, UNA and the Employers have agreed to meet and identify a standardized list of clinical and operational data that will form the basis of a new evidence-based safe staffing review.

In the event of disagreement, the union can take concerns about safe staffing to an expedited review by a Safe Staffing Taskforce, and, if necessary, to an outside Independent Assessment Committee.

Employers agreed to hire 1,000 new nursing graduates per year. These nursing graduates will be supernumerary and be assigned a Clinical Guide during their 3-6 month enhanced orientation who will be paid an additional \$2.00 per hour. 🍷

PRESUMPTIVE COVERAGE

A letter signed by Minister of Jobs, Economy and Trade Matt Jones states that a proposal will be taken to cabinet no later than June 30, 2025, to extend presumptive coverage by the Workers’ Compensation Board to RNs and RPNs for psychological injuries related to post-traumatic stress disorder and other traumatic mental health injuries. UNA has long advocated for this significant policy change. 🍷

“When UNA members voted against ratifying a settlement that had been recommended by a Mediator last October, they spoke clearly, and we listened.”

– Heather Smith

“This round of negotiations was about Respect, Retention and Recruitment,” Smith said. “When UNA members voted against ratifying a settlement that had been recommended by a Mediator last October, they spoke clearly, and we listened. The result was the agreement ratified on April 2.”

Smith described the new agreement – which retroactively takes effect from April 1, 2024, and will expire on April 1, 2028 – as “a meaningful step toward the recognition and respect Alberta’s nurses deserve and have been fighting for.”

“The Negotiating Committee believed it includes fair increases in compensation that will help to retain nurses now working in the health-care system and recruit new nurses to work in Alberta,” she said.

“It is an important acknowledgement of the value of Alberta’s nurses that they are once again the highest paid in any Canadian Province.”

– David Harrigan

“We believe this was an excellent agreement,” said David Harrigan, UNA’s director of labour relations and the union’s lead negotiator. “It is an important acknowledgement of the value of Alberta’s nurses that they are once again the highest paid in any Canadian province.”

The ratification vote was conducted using a secure Internet voting application throughout the day April 2 and results were calculated the next morning.

Ratification by the members of 124 affected UNA locals, whose members make up the bulk of the union’s more than 35,000 Registered Nurses and Registered Psychiatric Nurses, brings to a satisfactory end a particularly difficult round of bargaining, which included the rejection of the Mediator’s recommended terms of settlement in a membership vote on October 30.

LEAVE, COMMITTEES, AND PROFESSIONAL FEES

Members will now have five paid shifts for domestic violence leave.

Members will now be paid their applicable rate of pay to attend Occupational Health and Safety Committee meetings.

Employers will now reimburse employees who have accumulated 684.6 hours worked the full cost of professional fees to CRNA and CRPNA, as well as the cost of professional liability insurance. In 2026, members can combine hours worked at more than one Employer covered by this Collective Agreement to achieve the 684.6 hours.

Employees impacted by critical incidents may now request downtime during the shift without loss of pay. 🍷

JOB SECURITY

A Letter of Commitment signed by Minister of Health Adriana LaGrange assures the union that any job transfers of an RN or RPN due to the government's restructuring of public health care will be to a provincial agency or provincial health corporation, preserving affected members' seniority, rights to the terms and conditions of the Provincial Collective Agreement, and UNA representation. 🍷

RURAL RECRUITMENT

In a renewed Letter of Understanding, the government agreed to provide \$22.5 million per year for retention and recruitment of nurses in rural Alberta. This is an increase from the \$7.5 million per year in the previous agreement. UNA and Employers will mutually agree to use these funds to target initiatives in rural work sites, now also including those that fall within the Edmonton and Calgary Zones.

The North Zone Locum program, which provides incentives for staffing rural facilities and programs experiencing recruitment and retention challenges, will be renegotiated to include the South and Central Zones. 🍷

On March 25, more than 500 delegates to an all-day UNA Reporting Meeting voted overwhelmingly to recommend ratification of a Tentative Agreement by eligible members of all affected locals.

The new agreement includes:

- An immediate pay increase of up to 15 per cent
- An overall increase of approximately 20 per cent for all affected members
- Annual pay increases of 3 per cent in each year of the new agreement
- A revised annual pay grid with pay increases of 4 per cent between each step
- Pay increases retroactive to April 1, 2024
- Significant monetary increases for on-call, charge pay, and other premiums
- Full reimbursement of professional college and liability fees
- New measures to ensure safe staffing
- A commitment by the province to provide presumptive coverage for PTSD and psychological injuries
- Job security during health care restructuring
- Assistance for rural health care staffing 🍷

The United Nurses of Alberta Provincial Collective Agreement Negotiating Committee,

as seen on Page 3. Background: Rachel Schiller, Local 73; Kevin Champagne, Local 115; Trudi Bennett, Local 23; Kerrie Bradshaw, Local 37; Margie Emes, Co-Chair, Local 120; Bernadette Brocal, Local 121; Blair Bukmeier, Labour Relations Officer; Orissa Shima, Co-Chair, Local 85; Gail Pederson Todd, Local 38; Jan Robinson, Local 17. Foreground: Heather Smith, President; David Harrigan, Chief Negotiator. Missing: Tanya Beniuk, Local 28



New agreement includes commitment to include RNs and RPNs in PRESUMPTIVE WCB COVERAGE FOR PSYCHOLOGICAL INJURIES

■ **AS** a result of ratification of the new Provincial Collective Agreement, the Alberta Government has now committed to including Registered Nurses and Registered Psychiatric Nurses in presumptive coverage by the Workers' Compensation Board for psychological injuries related to post-traumatic stress disorder and other traumatic mental health injuries.

Included in the new collective agreement is a letter signed by Jobs, Economy and Trade Minister Matt Jones stating that as the minister responsible for the *Workers' Compensation Act* he will bring the necessary changes to Cabinet no later than June 30, 2025.

Jones said in the letter the agreement is "based on a review of credible scientific research."

He also promised his department will undertake the necessary research to determine the extent to which graduate nurses, undergraduate nurses and provisional permit holders should be covered.

Noting that the change must be approved by cabinet, Jones said the final wording of the regulation "will

be subject to legislative drafting in accordance with cabinet approval."

This is a significant policy change long advocated by UNA. This means that the Workers' Compensation Board will presume that a nurse's PTSD diagnosis was caused by the nurse's work, unless the contrary is proven. It also means that psychological injuries other than PTSD will be presumed to be caused by work when the nurse establishes that a traumatic event in the workplace took place, unless there is proof of a non-work cause. This coverage is already extended to other first responders such as police, firefighters, emergency medical workers, dispatchers, and corrections officers.

Like workers in those occupations, nurses through the nature of their work are routinely exposed to traumatic events in the workplace. The only obvious difference is that the professions that already have presumptive coverage are dominated by men, while in the nursing profession a majority of practitioners are women.

Accordingly, UNA believes nurses should not have been required to wait for – or been denied – access to Workers' Compensation benefits after experiencing traumatic events while on the job. 🍷

This is a significant policy change long advocated by UNA.



UNA Executive Board members and observers, in Edmonton for their regular board meeting, marked Pink Shirt Day on February 26. Pink Shirt Day is an annual event to oppose bullying held each year in Canada and New Zealand - on the last Wednesday of February in this country and the third Friday of May in New Zealand. The original event was organized in 2007 by two Grade 12 students in Berwick, Nova Scotia, who bought and distributed 50 pink shirts after a Grade 9 student was bullied for wearing a pink polo shirt during the first day of school.

Albertans rally across province for **SAFE STAFFING, SAFE PATIENT CARE, AND PUBLIC HEALTH CARE**

RED DEER



ST. ALBERT



EDMONTON



■ **UNITED** Nurses of Alberta members and many co-workers and supporters took part in more than a dozen Day of Action events held across the province on Saturday, January 25. The rallies were a key part of the process that led to the new Agreement UNA members ratified on April 2.

With UNA bargaining and mediation in mind, the Day of Action marked the anniversary of one of the most important milestones in our union's history – the start of the 1988 illegal province-wide nurses' strike.

That 19-day strike saw more than 14,000 nurses at hospitals across Alberta brave Arctic temperatures as they battled an unreasonable employer seeking wage rollbacks for their right to a fair collective agreement.

On Jan. 22 that year, UNA members were asked to vote on the question:

“Are you willing to go on strike for an improved offer?” Despite an attempted intervention by the employers, who persuaded the Alberta Labour Relations Board to charge the union with bargaining in bad faith and order a stop to the vote, UNA held the vote anyway. UNA members voted overwhelmingly in favour of strike action and walked off the job and into the cold at 7:30 a.m. on Jan. 25, 1988.

Nurses returned to work on February 12, 1988, with a negotiated collective agreement based on an improved employer offer. UNA paid \$426,750 in fines for striking in defiance of Alberta's unfair and unfairly applied labour legislation, but the strike set the stage for significant gains for nurses in the 1990 contract negotiations. It was the last province-wide strike by UNA members.

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WAINWRIGHT



CALGARY



SLAVE LAKE



EDMONTON





TWO HILLS



LETHBRIDGE



CAMROSE

□ CONTINUED FROM PAGE 8

At the January 25, 2025, Day of Action, UNA members held information pickets, rallies and winter-themed events outside their worksites and in their communities to show their support for safe staffing, safe patient care, and public health care and to call for respect for front-line health care workers.

Events and actions took place in Banff, Bonnyville, Calgary, Camrose, Edmonton, Fort McMurray, Lethbridge, Medicine Hat, Olds, Red Deer, St. Albert, Slave Lake, Two Hills, and Wainwright. 🇨🇦



OLDS



MEDICINE HAT



LETHBRIDGE



BANFF



CONTRACT AND PROCUREMENT ALLEGATIONS ABOUT AHS **require thorough public investigation**

■ **UNITED** Nurses of Alberta reacted in early February to public allegations Alberta's United Conservative Government fired the CEO of Alberta Health Services as she was about to meet the Auditor-General to seek a formal investigation into procurement activities and deals for private surgical facilities, calling for a thorough and transparent public inquiry.

A report published by *The Globe and Mail* on February 5 stated that then-CEO Athana Mentzelopoulos said in a statement of claim for a wrongful-dismissal lawsuit that she was fired on January 8 because she had launched an internal investigation and forensic audit of AHS's procurement processes and investigations.

The newspaper's report also suggested the AHS Board was fired by the government soon after it recommended to Mentzelopoulos that the RCMP be informed about activities she had uncovered.

The story caused an immediate uproar. "This story contains many deeply serious and troubling allegations that demand a timely and formal investigation with a comprehensive report that is open to the public," President Heather Smith said in the UNA statement.

"At a time of needless upheaval in Alberta's health care system that includes an aggressive program of privatizing activities such as surgical procedures that should remain in the public system, we need to consider the message this sends to front-line employees like UNA's members about the organization they work for and the government that is driving its agenda," she added.

All Albertans deserve to know what has happened, and why it has happened, Smith said. That should include the true cost of the Alberta Surgical initiative, the contract process and who is profiting from this policy.

Since then, the controversy has continued to roil the government, and journalists have published several more major stories questioning how health care and other contracts have been awarded in Alberta.

Critics called for the removal of both Health Minister Adriana LaGrange and AHS CEO and "official administrator" Andre Tremblay, the senior civil servant appointed by the premier to replace the AHS Board and CEO, both of whom were named in Mentzelopoulos's lawsuit. At the time of his appointment, Tremblay was also the deputy minister of health, the senior civil servant in the department.

On February 19, the premier announced she was removing Tremblay from his role as deputy minister while he continued to run AHS. She did not bow to calls to fire LaGrange. The government appointed Darren Hedley, an associate deputy minister of health, to replace Tremblay on an interim basis at Alberta Health.

Alberta Auditor-General Doug Wylie has said he is investigating procurement and contracts at AHS and Smith said the government will launch an investigation of its own by an "independent" person.

Throughout the controversy the government has blamed AHS for the problems in health care, an approach UNA believes sends an unfair message about front-line health care employees. 🍷

"This story contains many deeply serious and troubling allegations that demand a timely and formal investigation with a comprehensive report that is open to the public."

- Heather Smith



By Dewey Funk
UNA OHS Advisor

ON APRIL 28 THE DAY OF MOURNING

STAY SAFE AT WORK!

- “MOURN for the Dead, Fight for the Living” was the call of Mary “Mother” Jones, the Irish-American labour organizer who lived from the early 1830s to 1930.

“I belong to a class who have been robbed, exploited and plundered down through many long centuries,” Mother Jones famously said. “Because I belong to that class, I have an instinct to go and break the chains.”

Mother Jones



Mother Jones’s call is still being shouted out by workers. And that includes health care workers in Alberta, who are asking for change in the workplace.

Health care workers recognize that the controls employers are obligated to have in place to prevent deadly weapons being brought into our workplaces, illicit substances being used there, and verbal and physical abuse are clearly not working.

Likewise, Alberta nurses and other health care workers must regularly use broken equipment and listen to employers say it can’t be fixed because of budgetary concerns. If a nurse injures her back as a result, though, her WCB claim costs money too.

These conditions wouldn’t be as likely in a male-dominated workplace like a construction site, and we know why.

Mourn for the Dead,
Fight for the Living!

– Mary “Mother” Jones

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Consider these shocking 2023 statistics from Alberta:

- WCB Alberta accepted nearly 50,000 claims
- 10 per cent of them came from workers in health care services
- The government, education and health services sector continued to have the highest claim rate
- The leading occupation group for claims was nurse aides, orderlies and patient service associates (7 per cent)
- The claim rate for exposure to harmful substances was nearly four times as likely among core female workers (aged 25 to 64 years) than among core male workers
- The claim rate for assault, violence or harassment was double for core female workers what it was for core male workers

These are startling numbers. It's not acceptable that assault, violence and harassment rates for women should be double that of men. Yet instead of resolving to fix an obvious problem, the first question asked by employers and HR staff is often, "How did *you* approach the culprit?"

Behavioral Safety Program

Covenant Health has put in place the Behavioral Safety Program (BSP) at all sites. AHS is in the process of training all sites in the BSP.

This is a great system that needs to be made a mandatory part of the patient assessment process now. If made mandatory, it would prevent many injuries.

Yet employers have not made this program mandatory.

In 2014, an Alberta nurse was sexually assaulted while at work. UNA represented this member and as part of the resolution the Prevention of Violence Workgroup was formed and developed the purple dot program,

which requires alerts to be placed on patients' charts or rooms in the event there are behaviour issues staff need to be aware of to work safely in the area.

This was put in place because UNA argued that workers have a right to know when they face a risk of violence, as indicated by Part 27 of the *Occupational Health and Safety Code*.

UNA has continued to advocate for presumptive legislation for psychological injury for nurses.

UNA's advocacy for presumptive legislation for psychological injury for nurses has paid off.

For years, Alberta's government did not include nurses as first responders. From a common-sense perspective, this made no sense. After all, when a patient comes through the door of an emergency department, who looks after them? A nurse! When a patient's condition worsens, or the patient passes away, who is with them? A nurse.

Yet for years first responder legislation was applicable only in male dominated occupations.

The agreement ratified on April 2 includes a process that will see this situation quickly ratified, once and for all. **See the story on Page 7.**

On April 28 this year – Day of Mourning for workers killed or injured on the job – take the time to work safely and report all assaults and broken equipment. Don't do lifts that could injure you.

Your partner, your kids, your circle of friends and family will appreciate that you are safe, and able to get on with a healthy life.

On behalf of UNA's OHS Advisors, we wish you a safe and healthy 2025. 🍷

The agreement ratified on April 2 includes a process that will see this situation quickly ratified, once and for all.





CANADIAN
FEDERATION
OF NURSES
UNIONS



By Linda Silas
President, Canadian
Federation of Nurses Unions

WE NEED TO BE ALL IN FOR PUBLIC HEALTH CARE



■ **Canada's** public health care system was built on the promise that no one should be left behind. For generations, we have fought to ensure that every person – no matter their income, their job, or where they come from – can receive the care they need.

Right now, we're witnessing what happens when a system is stretched to its limits. Staffing shortages are forcing skilled professionals out the door and leaving patients with fewer appointments and longer wait times. We see it in overflowing emergency rooms, the availability of primary care, and in the ever-growing surgical backlogs. We feel it in the rising cost of prescription medications and inside run down, for-profit, long-term care facilities – places meant to safeguard the dignity of our seniors but too often failing due to corporate greed, underfunding and neglect.

These cracks in our public health care foundation create openings for private interests to slip in, not just through agencies that pull staff away from our public system, but also with private surgical clinics that can undermine the principle of accessible care for all. If we don't act now, these cracks will only widen, threatening the very core of what makes our public health care system fair, equitable, and universal.

The good news is that there's a solution: with a federal election looming, we must stand together and vote for real investment and real change. We must demand more funding to close the gaps in staffing and improve access to primary care, so that no one goes without primary care.

We need a federal Patient Bill of Rights – a guarantee that every Canadian will have safe, timely and affordable access to essential services. It's a pledge to rebuild our public health care system so it can meet the challenges of today and remain strong and resilient for the generations to come. A bill that would guarantee a minimum number of nurses and health care workers on the floors of the public health care system. And programs and supports to make working in the public health care system one of the best jobs you can find in the public health care system.

We have a choice: watch these cracks spread or join together to strengthen the pillars of our public health care system. We need our governments to invest in people and stand up for the public health care we cherish – so it's there for each of us, now and for the future.

We need a federal
Patient Bill of Rights
– a guarantee that
every Canadian will
have safe, timely and
affordable access to
essential services.

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WHEN KNOWLEDGE MEETS KNOW-HOW

NURSES WERE RIGHT ABOUT PATIENT SAFETY IN THE 1980S AND THEY'RE RIGHT TODAY

■ **WHEN** nurses stood on picket lines in the 1980s, they had their priorities straight.

Then as now, nurses understood that conditions of work are conditions of care.

Many experienced what the authors of a 2008 academic paper on error reporting and patient safety described as “the long-held tradition in health care – name you, blame you, shame you.”

Because the Alberta nurses of 1988 deeply understood their professional duty to speak up about conditions and hazards that put patients at risk, they risked censure and fines to make their conscientious objection clear. That was why they were willing to endure the Arctic cold on the picket line that winter to achieve collective agreement language that would shield them when they spoke up to protect patients from harm.

History and science have since proved them right.

Writing in *The Globe and Mail* in the summer of 2013, health reporter Andre Picard drew Canadians' attention to

the reports of five public inquiries into hundreds of needless deaths that took place at one British hospital between 2005 and 2008.

Insufficient staffing was identified as a significant factor in all five reports. Picard highlighted a vital fact observed time and again: “in the vast majority of cases, it is systems, procedures and work environment – not staff members *per se* – that create the problems.”

Another Picard column in December 2016 was published under the dramatic headline, “Our system suffers when health workers are muzzled.”

In 2019, the Canadian Patient Safety Institute's theme for Canadian Patient Safety Week was “speak out and conquer silence.” The goal was to raise awareness of how silence by patients and care providers contributes to the alarming statistic that one in three Canadians have been affected by unintended harm caused by medical care.

Decades of evidence now confirms that in situations where there are fewer nurses, more patient deaths and complications occur.

□ CONTINUED ON PAGE 16



By Donna Smith
UNA PRC Advisor

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United Nurses of Alberta has long been a champion of public health care, standing up when it matters the most. From the massive and moving province-wide strike of 1988 to the Day of Action you held this winter to support safe staffing, safe patient care, public health care for all, and most of all respect for front line health workers.

Now it's time we stand united from coast to coast to coast. Our governments need to know, the nurses are all in together, demanding the best for our public health care system. And we won't back down.

In unwavering solidarity,

Linda Silas, CFNU President 🍷

It is now widely recognized that organizations need to encourage patients, families and health care workers alike to speak up. This requires safe reporting systems within a just culture to ensure those who do speak up don't experience intimidation or retaliation.

Experts say internal reporting systems can protect front-line and middle managers when they have the courage to listen and hear – and when they try to ensure that those concerns are acted upon. Alas, in many “comfort seeking” workplace cultures, managers

In this context of scientific evidence and front-line realities, the Professional Responsibility Concern (PRC) process described in Article 36 of the UNA Provincial Collective Agreement is an example of patient-safety best practice.

Nurses were right in the 1980s and they are right today. Protection for nurses when they speak up is essential to protect patients from harm.

By doing so, they also protect managers and the reputations of the organizations in which they work. 🍷



A MESSAGE FROM UNITED NURSES OF ALBERTA

WHEN PROFIT COMES FIRST, people come last.



NURSES MAKE IT *better!* AND ALBERTA'S NURSES MADE IT *better!*

■ **THAT** nurses make it *better* is a fact widely acknowledged everywhere in the world.

And in 2025, nurses in Alberta made it better through collective bargaining with health care employers and the Government of Alberta.

Nurses Make It Better is UNA's theme for Nurses Week 2025, which this year runs from May 12 to 18.

UNA has produced a series of stickers and temporary tattoos on this theme. Contact your Local Executive for a sticker or temporary tattoo.

In addition, UNA will be holding its third annual Nurses Week Member Engagement

Challenge. To recognize the work of UNA Locals during Nurses Week, UNA is again inviting locals to submit examples of member engagement efforts created and used during that week. Locals are encouraged to enter submissions that follow that theme.

For more information on the Nurses Week Challenge, please visit UNA's website: <https://www.una.ca/1643/una-launches-3rd-annual-nurses-week-member-engagement-challenge> 🍁



www.una.ca/1643/una-launches-3rd-annual-nurses-week-member-engagement-challenge

UNA is committed to addressing WORKPLACE MENTAL HEALTH ISSUES



By Lee Coughlan
UNA Manager of Labour
Relations (Edmonton)

The increases
to Professional
Responsibility
Concern reports
identifying moral
distress and
workload between
2020 and 2022
were dramatic.

■ **NURSES** and other health care workers faced unprecedented mental health challenges during the years of the pandemic. As a result, mental health and psychological supports for UNA members and locals have become a hot topic.

At UNA's annual general meetings, Executive Board and District meetings, leaders and members have demanded action to address workplace mental health issues.

The increases in Professional Responsibility Concern reports identifying moral distress and workload between 2020 and 2022 were dramatic.

WCB claims for psychological injuries by Registered Nurses and Registered Psychiatric Nurses rose by 10 per cent from 2020 to 2021 and then by another 20 per cent from 2021 to 2022 before they leveled off.

The number of claims for short-term disability jumped 35 per cent in 2022 before returning to 2021 levels in 2023 and 2024. Long-term disability claims related to psychological illness spiked by 21.5 per cent from 2021 to 2022 and then rose another 5 per cent before a slight decline in 2024.

While the number of claims leveled off, this may be less an indicator of the prevalence of mental illness among health care workers than a consequence of better treatment at earlier stages of illness. The number of health care workers who accessed psychological services jumped by 30 per cent in 2022 then another 31 per cent in 2023 and 39 per cent in 2024.

This dramatic increase coincides with replacement of the per-treatment limit

with an annual cap on psychological services in the Provincial Collective Agreement.

UNA engages in advocacy and representation that promote healthy work environments conducive to good mental health and aim to prevent mental harm. We do this by advocating for systems that identify and control workplace factors that could lead to mental distress and injury.

What is clear, though, is that we do not always explain what services we provide and how we provide them.

As a result, this is the first in a series of articles in *UNA NewsBulletin* intended to provide our members with information necessary to access supports when they struggle with mental health in the workplace.

Future topics will include how UNA:

- Represents employees who require accommodation for restrictions related to mental illness
- Seeks out supports and resources to allow employees to remain in and return to the workplace
- Advocates for psychologically safe workspaces
- Assists members with WCB, short-term and long-term disability claims
- Negotiates benefits and terms and conditions of employment to promote safe and healthy workspaces
- Supports members who encounter and challenge abuse and harassment in the workplace

Ultimately, direct care for members' mental health and wellbeing is the responsibility of the health care system and the individual health care providers within that system.

□ CONTINUED ON PAGE 19

Canadian nurses mourn loss of Kathleen Connors, nursing advocate and former president of CFNU

■ **CANADIAN** nurses are mourning the passing of nursing advocate Kathleen Connors, former president of the Canadian Federation of Nurses Unions, on April 3 in St. John's, Newfoundland. She was 73.

"Kathleen blazed the path for nurses to have a loud voice on the national stage," CFNU President Linda Silas said in a statement. "Under her leadership over 20 years, the CFNU grew to 125,000 members strong. Today, with more than 250,000 members, the CFNU stands as the largest movement of unionized nurses in North America."

The daughter of a Manitoba farmer, Connors' tireless advocacy began after she graduated from nursing school in that province. She was a member of the first nursing class in Manitoba to pay tuition rather than paying in service to a hospital and living in a convent-like residence.

She first went to work in Thompson, Manitoba, where the first nursing union in the province was certified. "Believe it or not, we were the first

generation of nurses that was encouraged to ask questions, to speak up," she told *The Globe and Mail* on her retirement from CFNU in 2003.

In 1979, she helped draft the constitution of the National Federation of Nurses Unions and was a delegate at the 1981 convention that led to the founding of CFNU. "Over her nursing and advocacy career, Kathleen brought unionized nurses into the house of labour, where she leant her expertise to the Executive Council of the Canadian Labour Congress," Silas said.

Before UNA members voted to join CFNU in 1998, she had toured the province to persuade Alberta nurses of the benefits of joining the national federation.

"The way she challenged MPs is historic," said longtime UNA activist Pauline Worsfold, former chair of the Canadian Health Coalition and CFNU secretary-treasurer, recalling how Connors often observed, "politicians don't change their minds because they see the light, they change their minds because they feel the heat!"



"Kathleen inspired us to have bold voices as nurses, to stand up for our patients, our communities and public health care," Silas added. "Her legacy lives on in the strong voices of nurses and advocates across the country."

"On behalf of Canada's nurses, we offer our condolences to Kathleen's family and loved ones, and we promise to honour her legacy in our work each and every day."

After her retirement, Connors moved from Ottawa to Pouch Cove, Newfoundland. However, Silas noted, she continued to be a bold advocate beyond her retirement as chair of the Canadian Health Coalition. 🍷

□ LEE COUGHLAN - CONTINUED FROM PAGE 18

While UNA staff members and Local executives should not and cannot become a member's counsellor, we can be a support you can lean on in a myriad of ways. For more immediate information, we have a dedicated Mental Health Resources page on UNA's website that lists a number of resources available to members: <https://www.una.ca/memberresources/mentalhealth>

If you prefer, you can also reach out directly to UNA and speak with one of our staff members or a local executive and they will be happy to clarify how we might be able to help.

To contact UNA's Provincial Office in Edmonton, call (780) 425-1025 or 1-800-252-9394, or email ProvincialOffice@una.ca.



To contact the Southern Alberta Regional Office in Calgary, call (403) 237-2377 or 1-800-661-1802, or email CalgaryOffice@una.ca. 🍷



**COMMON
FRONT**

COMMON FRONT

targets provincial interference in bargaining

■ **IN JANUARY**, representatives of public and private sector Alberta unions gathered in Edmonton for a summit on collective responses to the provincial interference in negotiations between unions and their employers, especially in the public sector.

With more than 250,000 public sector workers bargaining or on picket lines at the time, the Alberta Federation of Labour organized the summit and a series of townhalls in February and March.

With more than 250,000 public sector workers bargaining or on picket lines at the time, the Alberta Federation of Labour organized the summit and a series of townhalls in February and March in Calgary, Edmonton, Lethbridge, Fort McMurray, Grande Prairie, Medicine Hat, Red Deer and Hinton.

Since then, UNA and striking CUPE education workers have reached and ratified new collective agreements. Concern about Alberta government wage suppression strategies has continued, though, leading to the “Solidarity Pact” signed by more than 20 unions in March.

In addition to United Nurses of Alberta and the AFL, the daylong January 21 meeting saw participation by the Health Sciences Association of Alberta, Alberta Union of Provincial Employees, United Food and Commercial Workers, Canadian Union of Public Employees, Unifor, Amalgamated Transit Union, Alberta Teachers Association, Canadian Union of Postal Workers, Public Service Alliance of Canada, Building Trades of Alberta, Laborers’ International Union of North America, and International Association of Machinists and Aerospace Workers. 🍷

Interested Albertans can sign up and find more information at afl.org/campaign/commonfront



afl.org/campaign/commonfront



UNA joins historic union 'SOLIDARITY PACT'



■ **UNITED** Nurses of Alberta joined more than 20 Alberta unions on March 26 in a “Solidarity Pact” uniting more than 300,000 workers in a strategy to defend each other against attacks on the rights of working people by governments, public agencies and private companies.

“The purpose of the Solidarity Pact is to let employers know that an attack on one union will be viewed as an attack on all unions and that Alberta unions will fight together—all for one, and one for all,” said Gil McGowan, president of the Alberta Federation of Labour. “Solidarity is our greatest strength.”

McGowan told a news conference in Edmonton that Alberta union leaders are concerned the economic uncertainty caused by Donald Trump’s trade war with Canada will be used by employers as an excuse to put the brakes on negotiating fair wage increases for Alberta workers. The Solidarity Pact is a demonstration of their refusal to accept such arguments.

“We will not allow employers and governments to use this moment of crisis as a pretext to put the screws to Canadian workers,” McGowan said. “If we’re all in this together, then we really have to be all in this together.”

Even before the uncertainty caused by the Trump tariff war hit, wages were stagnating in Alberta. Recent research by economist Jim Stanford shows that since 2013, when the average wage in Alberta was 17 per cent higher than the national average, by last year that gap had closed to 1.7 per cent.

The Solidarity Pact grew out of the Common Front group formed in January to counter Alberta government interference in public sector negotiations.

UNA President Heather Smith told the news conference that UNA’s agreement with major health care employers was a meaningful step toward the recognition and respect Alberta’s nurses deserve and have been fighting for. “We believe it will help to retain nurses now working in the health-care system and recruit new nurses to work in Alberta,” she said. “And we believe that all public sector health care workers need and deserve the same respect to be acknowledged in their collective agreements.”



Heather Smith, Gil McGowan and other labour leaders.

Smith said she hopes UNA’s participation in the Solidarity Pact will hasten the same recognition for other front-line health care workers.

Under the Solidarity Pact, the unions committed to supporting each other in the event of strikes, and to take coordinated action if the provincial or federal governments make moves to strip any workers of their constitutionally protected right to strike or otherwise eliminate worker bargaining power. 🍷

The Solidarity Pact grew out of the Common Front group formed in January to counter Alberta government interference in public sector negotiations.

CUPE ALBERTA STRIKES ENDED ON MARCH 21



UNA members joined CUPE picket lines throughout Alberta.

■ **THE** last of nine strikes by education support workers represented by the Canadian Union of Public Employees ended on March 21 when members of CUPE Local 5040 at the Foothills School District voted to accept a mediated settlement.

That marked the end of the largest strike in the history of CUPE Alberta. At one point in February about 6,500 CUPE education support workers were on strike throughout Alberta.

Strikes at Fort McMurray Public Schools (CUPE 2545), Fort McMurray Catholic Schools (CUPE 2559), Edmonton Public Schools (CUPE 3550), Sturgeon School Division (CUPE 4625), Parkland School Division (CUPE 5543), Black Gold School Division in the Leduc area (CUPE 3484), Calgary Catholic School District (CUPE 520),

and the Calgary Board of Education (CUPE 40) came to an end during the week of March 17.

Some of the CUPE members in Fort McMurray had been on strike for 17 weeks, braving temperatures on their picket lines that dipped below -40 Celsius, at the time they reached a settlement. They were often joined on the lines by UNA members, who supported CUPE throughout the strike.

On March 21, after the Foothills vote, CUPE Alberta published summaries of all nine agreements on its website.

Alberta has the lowest education funding of any province in Canada. The average school support worker in the province made only \$34,500 per year before the strike. 🍷

SUMMARY OF AGREEMENTS:



<https://alberta.cupe.ca/2025/03/21/cupe-releases-summaries-of-education-settlements/>

PRC PROCESS RESOLVES STAFFING CONCERNS IN Rockyview Interventional Radiology Department



■ **THANKS** to UNA's Professional Responsibility Concern process, eight PRCs have been successfully addressed in the Interventional Radiology Department at the Rockyview General Hospital in Calgary.

Concerns about inadequate staffing levels, increasing workloads and delayed patient care were filed between August 18, 2023, and March 24, 2024, by members of UNA Local 121. The issues were resolved in December 2024.

"The severity of the various concerns was taking a significant toll on the staff, leading to a decline in patient care and affecting the staff's ability to maintain their usual standards," said Local 121 PRC Representative Susan Smith.

As a result, the Local PRC Committee assisted by UNA PRC Advisor Nicole Scott met with senior leadership of the department April 22, 2024, to try to resolve the situation.

As a result of that meeting, the following actions have been taken by the employer:

- A unit clerk has been hired and that position will become permanent
- A temporary .5 RN line has been added and will become permanent
- Two additional .5 LPN positions have been added, and their roles will not overlap with RN jobs in the suite
- There is now department support to utilize overtime when the department is short an RN.

"We look forward to sharing how partnering with the employer can lead to such positive outcomes," Smith said.

Interventional Radiography is a sub-specialty of Diagnostic Imaging that uses image-guided procedures for therapeutic and diagnostic purposes. Interventional radiography can be done using X-ray, CT, Ultrasound or MRI images to diagnose and treat disease in almost every organ system. 🍷

"We look forward to sharing how partnering with the employer can lead to such positive outcomes"

- Susan Smith

Nurses at Carewest Garrison Green and Carewest George Boyack vote to join UNA

■ **UNITED** Nurses of Alberta has welcomed Registered Nurses employed at Carewest Garrison Green and Carewest George Boyack sites in Calgary to our union.

Nurses at the worksites voted to join UNA in December and the results of the votes were certified by the Alberta Labour Relations Board.

Negotiations for a first collective agreement for these nurses, who before the vote worked without representation by a union, are expected to commence

soon. UNA members at the two sites have not yet been assigned a UNA Local number.

UNA already represents Registered Nurses and Registered Psychiatric Nurses employed at Carewest Colonel Belcher, Carewest Rouleau Manor and Carewest Signal Pointe (Local 221), Carewest Sarcee and Carewest Beddington (Local 423), Carewest Glenmore Park (Local 424), and Carewest Dr. Vernon Fanning (Local 428). 🍷

UNA awards 2025 annual NURSING SCHOLARSHIPS

■ **EACH** year, United Nurses of Alberta awards up to 15 annual scholarship of \$1,500 to nursing students from across the province as well as one Canadian Federation of Nurses Scholarship also worth \$1,500.

Scholarship recipients must be in their first year of nursing studies in an approved Registered Nurse or Registered Psychiatric Nurse track program in Alberta and must also be related to a UNA member or associate member in good standing.

“UNA is always proud to support new students as they start their nursing education in post-secondary institutions across the province,” said

UNA President Heather Smith. “We always encourage recipients of the UNA Nursing Education Scholarship to remain in Alberta as they advance through their careers.”

Young nurses like those who receive the UNA scholarship are the reason UNA keeps up the fight for working conditions and incentives that are required to recruit and retain new generations of Alberta nurses, Smith added.

Each scholarship recipient must complete an application form and write a short essay answering the question, *“Why is the PRC process important to Alberta Nurses?”*

□ CONTINUED ON PAGE 25

UNA Executive Officers with scholarship winners and family members.





Ivie Osunde



Jordyn Reed



Suraya Said



Brielle Kit



Elise Magnus



Anna Scheetz



Duncan Kinney

□ CONTINUED FROM PAGE 24

This year's confirmed UNA Scholarship winners are:

RECIPIENT	UNA SPONSOR/RELATION TO RECIPIENT/LOCAL
Ivie Osunde	Sandra Osunde/mother/Local 196
Jhilianne Garces	Marie Garces/mother/Local 121
Evelyn Lippert	Melinda Lippert/mother/Local 95
Mia St. Amant	Miranda Richer/aunt/Local 196
Elise Magnus	Tannis Magnus/mother/Local 33
Brielle Kit	Nola Roder-Kit/mother/Local 116
Duncan Kinney	Ruth Heather/mother-in-law/Associate Member
Marissa Strickland	Wanda Strickland/mother/Local 96
Brielle Winchester	Shannon Winchester/mother/Local 196
Hillary Hinks	Kayla Thistle/mother/Local 96
Kendra Justice	Tracy Justice/mother/Local 196
Anna Scheetz	Sylvia Scheetz/mother/Local 196
Jordyn Reed	Megan Lachance/mother/Local 33

This year's Canadian Federation of Nurses Union Scholarship winner is Suraya Said, who was sponsored by her sister, Shukri Said, a member of Local 301. 🇨🇦

For more info
on applications



www.una.ca/memberresources/scholarships

University of Calgary introduces new admission process for BScN program

Photo credit: University of Calgary

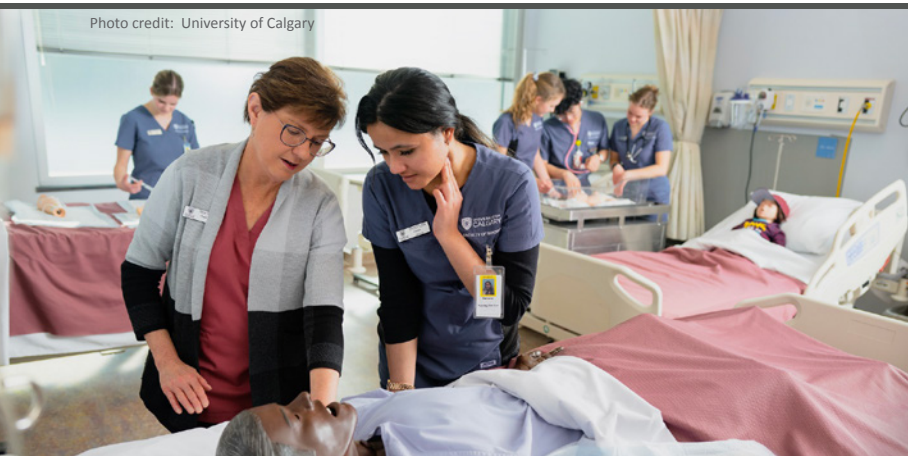
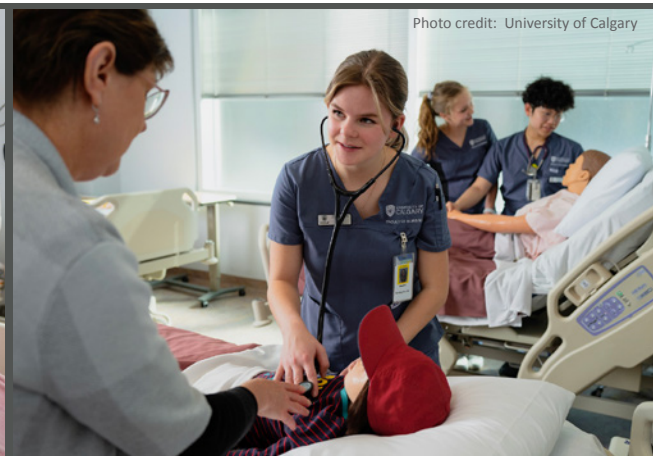


Photo credit: University of Calgary



■ **THE** University of Calgary is changing its Bachelor of Science in Nursing (BScN) admissions process to attract more candidates committed to becoming nurses and building long careers.

A study for the Canadian Nurses Association reported 37-57 per cent of new nurses leave the profession within the first two years of practice.

Nursing admission is highly competitive at the University of Calgary, where demand has driven the average achieved in required prerequisite courses above 90 per cent. The BScN is also a highly coveted degree, sometimes used as a pathway to other professions.

Given the need for nurses to remain in the field, however, the Faculty of Nursing is implementing a new approach to selecting qualified students for the program.

Effective for the Fall 2026 semester, the faculty will move to a lottery admission process where students with an overall average of 82 per cent and above in pre-requisite courses will be entered into the nursing admission lottery. A computerized system will randomly select applicants at various times in

the admission cycle until all seats are filled.

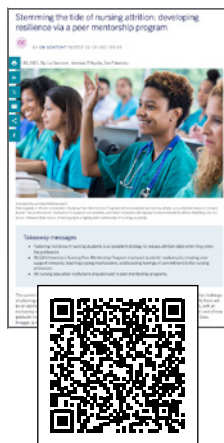
“Expanding the admission criteria will open the degree to a higher number of qualified, excellent applicants who may currently be self-selecting out given the unnecessarily high admission average we currently have,” explained interim dean Catherine Laing.

“The goal is to attract students who *want* to be nurses and will stay in the nursing profession, and we want to take some of the pressure off high school students focused only on grades,” she said. “Theoretical and clinical knowledge should be held in equal esteem in a practice profession like nursing and it really starts with the kind of student we admit.”

A successful nurse is resilient, caring, compassionate, empathetic and intelligent, and grades are not the only indicator of those qualities.

“UCalgary is committed to our role in providing highly qualified graduates for Alberta’s work force,” said U of C Provost Sandra Davidson. “We have a nursing shortage in Alberta and UCalgary is addressing this critical social need with a proactive, upstream solution.” 🍷

Stemming the tide of nursing attrition: developing resilience via a peer mentorship program



<https://www.cna-aiic.ca/blogs/content/2021/10/18/steaming-the-tide-of-nursing-attrition-developing>



<https://nursing.ucalgary.ca/future-students/undergraduate/new-bscn-admissions-process>

Persons in charge have authority to augment staff to ensure patient safety

ARTICLE 16, RESPONSIBILITY ALLOWANCE, TEMPORARY ASSIGNMENT AND IN CHARGE

KNOW
your
Rights



Report from
Director of Labour Relations
David Harrigan

■ **CHARGE** nurses are often told that they must get approval from management to augment staff to ensure patient safety. On many occasions, they are discouraged by managers from exercising their discretion or instructed to disregard clinically relevant precautions in favour of budgetary constraints.

If an on-call manager does not permit the augmentation in advance or at the time that the charge nurse calls for it, the charge nurse can submit an OHS and PRC concern. This aligns with the principle of work now, grieve later.

It is important to remember that Article 16, Responsibility Allowance, Temporary Assignment and In Charge, of the Provincial Collective Agreement

states that persons designated in charge shall have the authority to augment staff to ensure patient safety without seeking authorization.

ARTICLE 16.02(d) READS:

Persons designated in charge shall have the authority to augment staff (which may include authorization of overtime) to ensure patient safety considering the volume of patients on the unit and their acuity. In exercising this authority, Employees are expected to use their critical thinking skills, along with their professional and clinical judgment subject to any Employer-issued processes, tools or algorithms.” 🍷

For more information or assistance responding to a manager, contact your local executive or your UNA Labour Relations Officer at 1-800-252-9394.

UNA International Solidarity Grants support nurses' humanitarian assistance

■ **THE** next deadline to apply for UNA International Solidarity Grants is May 15 for travel between July 1 and December 31.

United Nurses of Alberta International Solidarity Grants assist members in their efforts to engage in missions abroad that provide humanitarian assistance of capacity-building to a host community. Offered twice each year, UNA provides a maximum of 10 grants of up to \$1,000 each.

Members must apply through UNA's Data Management System (DMS) and selected applicants will be contacted through their @una.ca email. Successful applicants must confirm receipt of that email by replying within 30 days of its receipt.

Applications must be received prior to travel and can be submitted through the DMS.

Funds are disbursed following the submission of a written report to UNA's second vice-president. The report must be submitted within 60 days of completion of the humanitarian work. Selection criteria include the strength of the application with preference given to first-time recipients.

For travel between January 1 and June 30, applications must be received prior to December 31 of the preceding year.

Applications are reviewed by UNA's Membership Committee at the first Executive Board Meeting following each deadline. 🍷

The next deadline to apply for UNA International Solidarity Grants is May 15 for travel between July 1 and December 31.



<https://dms.una.ca/forms/22>



Alberta's healthcare isn't broken, it's being dismantled

**We need to send a message loud and clear to
our leaders: it's time to rebuild Alberta's public
health care system.**

 RebuildOurHealthcare.ca

