

March 3, 2022

Dewey Funk Occupational Health and Safety Director UNA

Dear Dewey:

This is in follow up to your email of January 19, 2022 where it was agreed UNA would hold in abeyance escalations pursuant to article 34.02 (a) of the AHS/UNA collective agreement pending a presentation of UNA's concerns to representatives of the AHS Bilateral Complaint Resolution Working Group, and a written response from the employer.

This presentation occurred on February 17, 2022 and the employer is appreciative of the opportunity to have had this meeting. Your presentation provided a comprehensive and people-centric insight into the concerns UNA members have raised through their involvement in worker-to-worker (Type III) harassment and violence complaints against medical staff.

The subgroup that attended the presentation heard and acknowledges the concerns UNA have. Recognizing that interim measures are required to address UNA's concerns, as the bilateral work continues, AHS will commit to the following interim measures effective immediately:

- 1. Cease providing "AHS Medical Staff Harassment & Conduct Concerns" presentations until the bilateral work is completed.
- 2. Where AHS people or groups request information on the complaint process where the respondent is a member of the medical staff, they will be directed to the applicable HR and Medical Staff Concerns Consultants for the area or matter to provide information and answer particular questions.
- 3. HRBP and Medical Staff Concerns Consultants will partner on all worker-to-worker Type III harassment matters that involve a Practitioner*.
 - a. All Type III harassment complaints (MSNs and any other reports or disclosures) will be routed to a central point of contact within HR who will perform the preliminary review/initial assessment, determination of next steps, and engage the single point of contact for Medical Affairs, the applicable HRBP Advisor and any other stakeholders.
 - b. The single point of contact for Medical Affairs will be the Senior Provincial Medical Concerns Consultant or designate. A Medical Staff Concerns Consultant will be assigned to each file.
 - c. HR and the assigned Medical Staff Concerns Consultant will partner on completing, informal resolution or investigation planning, resolution/investigation processes, findings determination, and outcome communication.

- d. Any communications or meetings with employee complainants on the details of the complaints process (including those pursuant to Bylaws section 6.1.4.2) will be conducted with the involvement of HRBP.
- e. Any complaints with an employee complainant will have HRBP on the investigation panel.
- 4. Ensure complainants are always interviewed as part of an investigative process and are offered union representation for all meetings or proceedings.
- 5. Deliver recommendations and implementation plan for bilateral work by June 30, 2022.

*Practitioner means a Physician, Dentist, Oral & Maxillofacial Surgeon; Podiatrist, or a Scientist Leader, who has an AHS Medical Staff Appointment.

We trust the above interim measures will address UNA's concerns while the bilateral work continues.

Please advise if UNA is agreeable to leave these matters in abeyance or if further information or discussion is required from UNA's perspective.

Mona Sikal or Erin Feist are available to assist with any questions, concerns or information needs.

Thank you again for the opportunity to engage in meaningful discussion on these important matters. We remain committed to delivering the full recommendations and implementation plan of the Bilateral Complaints Resolution Working Group by June 30, 2022.

Dr. Sharron Spicer and Mona Sikal

Co-Chairs

Bilateral Complaint Resolution Working Group

Sharrow Spicer M/1/UR

Alberta Health Services

