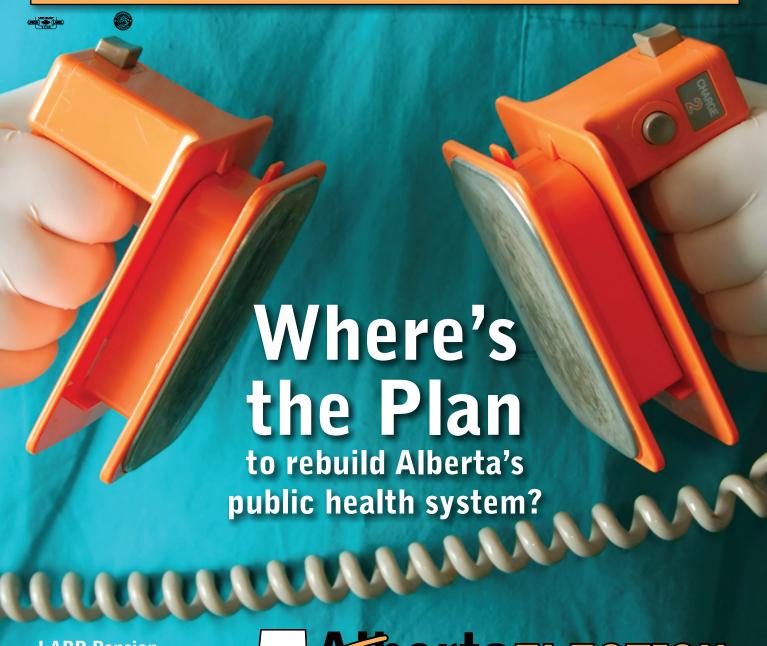


NewsBulletin



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With a difference

Published by the United Nurses of Alberta six times a year for our members

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Message from the President

Heather Smith



Alberta is going to the polls. Health regions struggle with deficit budgets. Edmonton invokes emergency staffing measures to deal with the shortage of nurses. Unions mount a campaign to overturn procedural decision-making imposed on the Local Authorities Pension Plan Board. 2008 is off to a really hot start, despite the frigid cold that swept the province the last week of January.

I encourage all members who participate in the Local Authorities Pension Plan (LAPP) to take a few minutes to call your MLA and Premier Ed Stelmach, information is included on page five. The message is simple "return to the old rules". Members who have called have been told, "don't worry, your pension benefits are not at risk".

Not at risk TODAY is the real truth. For fifteen years the LAPP operated under rules that protected the interests of employee representatives, which have minority representation on the Board. The changes in voting and quorum rules upset that balance. Government would have us dismissed as conspiracy theorists, but we are aware of benefit changes to at least one pension plan in Alberta and diminished benefits in Manitoba, which are proof that public sector benefit plans are vulnerable.

At LAPP Stakeholder meetings (Joint meetings of the LAPP Board, government, employer and employee representatives) that I have attended over the past two years, there have been repeated suggestions of changes to the retirement provisions. If you need workers, it seems an easy solution to discourage retirement (remember there are 5000 nurses eligible to retire right now). Raising the penalty for early retirement or increasing the magic number above 85 (in BC it is 90) are the primary targets. The changes to decision making have removed our longstanding protection against benefit erosion. The benefits won't change today, but what about tomorrow?

This NewsBulletin has election materials including questions for candidates. UNA is non-partisan, but we do encourage members to ask hard questions and to vote. Electing candidates who promise to address our issues and improve our quality of life is the first step, holding them accountable will be our collective job over the next four years.

Heather Smith President, UNA

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Government announcement falls short of needed nurses

nited Nurses of Alberta says the announcement of additional nurse recruitment on December 20 falls short of what is needed to stem the growing shortage.

The investment in attracting back former nurses and in facilitating the entry of "internationally educated nurses" is a small step. However, UNA says the recent announcements are not enough.

"Paying the costs for former RNs who want to come back to the profession and credentialing internationally educated nurses is a good step," says UNA President Heather Smith. "But it is only a short-term baby step."

"It's not really accurate to say the province only needs 1,400 more nurses," says Heather Smith. "There are likely 1,400 job vacancies open in our health system right now, that's just the immediate crisis."

The union points out that over one-third of the province's nurses are 50 years of age and over. The average age for nurses to retire is 55.

"If we have 10,000 nurses retiring over the next five years, we need to recruit everyone of the 1,300 new graduates each year, and even that will clearly not be enough," Heather Smith says.

"Lack of government planning in the 1990s left us with a huge workforce deficit that is now having a severe impact on our health care system," says Heather Smith. "We need a crisis plan to educate far more nurses more quickly here in the province."

The government says we will graduate 2000 RNs by 2012 and is graduating about 1400 this year.

"They need to get 600 more students into nursing programs in 2008 if they are going to graduate 2000 nurses four years from now," Heather Smith points out.

In 1990, Alberta's nursing programs graduated 898 RNs but that number had dropped to 440 in 1999. All the in-hospital nursing programs were closed and the educational institution nursing programs were not expanded enough to make up the difference.

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provincial election

ditorial writers took some time to look behind the delays in surgery, the hallway nursing and the strain on our health care system recently. Not surprisingly they hit upon the serious shortage of Registered nurses. Early in January, lead editorials in both the Calgary Herald and the Edmonton Journal wrestled directly with the shortage: "It's going to take more money, more classrooms and [Advanced Education Minister] Horner must be prepared to ante up." wrote the Edmonton Journal.

The Calgary Herald came to a similar conclusion: "It is completely unacceptable that people who want careers in nursing are turned away from schools year after year because the number of spaces has not expanded, despite the fact their services and skills are urgently needed."

UNA provided information to the newspapers in a response to December's announcement by the province of funding for refresher courses for nurses who had left the workforce and "credentialing" internationally-prepared nurses who live in the province.

The Calgary Herald quoted directly from UNA: "Figures from the United Nurses of Alberta show the extent of the nursing crisis – while thousands of nurses retire every year, only 1,400 new nurses graduate and enter the workforce to replace them..."

Negotiations continue for several UNA Locals

UNA's Extendicare negotiating committee and the Extendicare representatives agreed to ask for mediation after talks failed to reach an agreement. Mediation dates have been set for March.

Canadian Blood Services also continues in negotiations for renewing their contract, however Edmonton Victorian Order of Nurses successfully signed off a new agreement.

Hardisty Long-Term Care Centre gets parity in mediator's recommendations

Nurses at Hardisty Long-Term Care will for the first time achieve parity with many terms in the provincial agreement if the mediator's recommendations are ratified by both the Local the Employer. The members of Local #234 will be voting on recommendations from mediator Deborah Howes that would give them provincial salary rates for the first time. They also have achieved greatly improved overtime, and benefits. There are also gains in shift and weekend premiums and they also will be getting a size if care the contraction of the same than the same time of the same ti



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Left with a Workforce Deficit

"The 1990s, with nursing layoffs and an exodus to the U.S. and other provinces, has left us with a whole generation missing from our nursing workforce. The government fought what it called a fiscal deficit but has left us with a workforce deficit," Heather Smith says.

UNA has been working hard on the retention side of the equation – encouraging senior nurses to delay retiring.

"We need to encourage our senior nurses to stay in the workforce longer, partly to keep doing the work, and partly to mentor new nurses," Heather Smith says.

UNA and the Health Regions have begun implementing several pilot projects that can encourage nurses to postpone retirement. These include allowing nurses to reduce their hours, but maintain full pension contributions, and a plan to allow nurses nearing retirement to spend less time at the "bedside" and more time in leadership and mentoring roles.

UNA is the union of 26,000 Registered Nurses and Registered Psychiatric Nurses in the province. The most recent Collective Agreement for most nurses, those working for the province's Health Regions, was ratified in July of this year.

UNA puts on pressure over pension plan changes

Union members urged to turn up heat on Stelmach

Accoalition of Alberta unions including UNA is asking members and everyone involved with the Local Authorities Pension Plan (LAPP) to call their MLA and the Premier to reverse recent changes at the LAPP Board. Changes in the rules governing the LAPP Board put the pension rights of 125,000 Albertans – at risk, including rights to early retirement, cost of living allowances and workers' ability to retire when their age and years of service add up to 85.

"The change in Board rules could allow government and the employers to reduce the overall benefits, and their costs, for the pension plan," says UNA President Heather Smith. "UNA strongly supports the Labour Coalition on Pensions," she says. "This attempt to unbalance the longstanding stability of governance must be reversed."

The disputed new rules for the pension Board break a long-standing agreement which required union approval for all significant changes to the policies or governance of the Plan – opening the door for decisions which are against the interests of retirees and people in the plan.

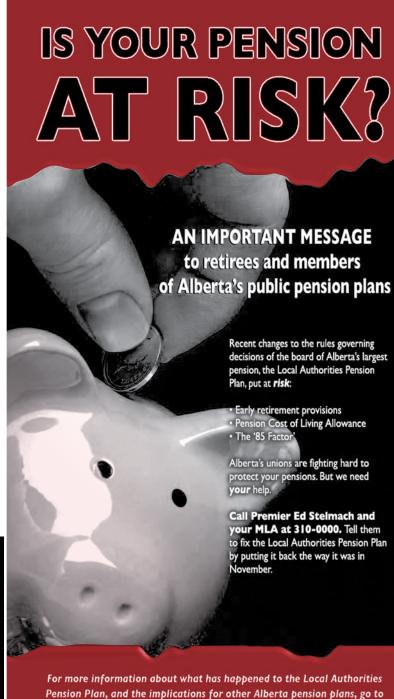
In January the Coalition bought full-page ads in daily newspapers calling on members and pensioners to telephone their MLAs and Premier Ed Stelmach to overturn the changes. The coalition's website — www.savemypension.ca — has detailed information on the situation, and on how to contact politicians.

"During the election period each of us can raise the issue with candidates and put more pressure on," Heather Smith says.

Call your MLA Call the Premier 310-000

(Toll free from anywhere in the province).

Tell them to reverse the changes in governance at LAPP and restore fair balance.



www.SaveMyPension.ca

Abertaelection with a difference



Badly managed health system

The problems we are seeing today did not come about because we have a universal and publicly run system. Study after study shows public delivery of health services is far more cost effective than private delivery. Alberta's public health care system has been badly managed by a government that was eager to bring in what it calls "innovation", privatization and profit.

Costs have gone up, and so have expectations. Our health system did not provide artificial hips, MRIs or so many of the advanced medical interventions, not so long ago. Advances cost money, there is no doubt, but good health care is a priority for Albertans.

And it's a priority that ALL Albertans whether rich or poor, have access to full health care services.

Short of "capacity"

Inadequate planning and preparation have left Alberta's system dreadfully short of "capacity". With people streaming into the province, the system is seriously inadequate in many areas. The number of hospital beds alone is a raw indicator of the seriousness of the problem. Just 20 years ago, in 1988, there were over 14,000 acute care hospital beds in the province, today there are only about 8,000. It's true that hospital stays are much shorter and many procedures that formerly requires hospital stays, or long stays, do not today. But the province's population has gone up by 45 percent as well and it's little wonder that hospitals are overcrowded.

Hospital infrastructure

In the 1990s, the province blew up the Calgary General Hospital and sold off two others. Ten years later, the province began scrambling to add hospital beds, but too late. It takes years to build a new hospital and the bed crunch is already on. The province needs to rebuild the infrastructure on an urgent basis.



Overcrowded emergencies:

When people don't have family physicians, or don't have anywhere else to seek urgent care, they end up in hospital Emergency Rooms. Many do not require the services of a full emergency department. The province needs to take the huge load off the ERs by moving fast to open more 24-hour community emergency clinics with health care teams, including doctors, nurses and others to provide speedy care without pain-filled long waits.

Nursing shortage:

Poor planning by the province has also put our health system in a severe human resource bind. While many people have trouble finding a family physician, hospitals and nursing homes are running with far less qualified nursing staff than they need. That results in huge overtime cost, and a huge human cost in a tired and eroding nursing workforce.

The end of health care premiums? It's a tax change not a health care change

Health care premiums are an unfair tax, hitting poorer people much harder. But dumping the premiums, a very good tax idea, is NOT a health policy, it's a taxation policy. Ending premiums is not a health reform that will improve Alberta's health system in any way. It would make the tax system a bit more fair, however.

Government promises capital funding but turns back on Regions' deficits

Just days before the election call, the Alberta government announced millions of dollars for building more hospital beds. The announcement of the beds and increasing long-term care capacity particularly, is very welcome. But Health Regions need operating budgets and staff to open all those beds as well. Just a week before the pre-election bed news, Health and Wellness Minister Dave Hancock said the government has no responsibility for Health Region budget deficits, an amount which the Calgary Herald estimated would exceed \$100 million.

Meanwhile Capital Health announced more surgery cancellations and that it had "officially given up" trying to re-open 33 beds that had to be closed last summer.

Overtime costs, especially for nursing, are a big part of the budget overrun. But opposition critics pointed out the government had underfunded the Regions in the provincial budget in the first place.





UNA Helps Launch the Alberta Federation of Labour's Campaign aimed at Union Voters

An election has been called in Alberta. It's shaping up to be an historic one – for our province, our union, and working families across Alberta.

This election is about the kind of Alberta we want for our future – an Alberta where we can all share in the benefits of the economic boom we are currently experiencing. But Ed Stelmach's government is out of energy and lacks a plan to ensure that Alberta realizes its potential well into the future.

We need a government with real, long-term plans – plans for our economy, our jobs, our environment, our health care, education and other important public services.

It's time for new ideas. It's time for plans that put people, families and communities at the centre of the equation. It's time for a change. Political change is necessary, it's healthy – and, for the first time in a very long time, it's now possible in Alberta.

The Alberta Federation of Labour and your union have developed the Show Us the Plan campaign so you can get answers to the questions that matter the most to working families.

Just visit www.showustheplan.ca. We've laid out our ideas for a better future for Alberta - along with summaries of the Conservative track record and explanations of the alternatives being offered by the Liberals and the NDP.

We're not telling people which party to vote for. But we do want to give working Albertans the tools and information they need to become well informed on the issues. Because after all, voters who think for themselves and who know their options make for a better, more accountable government.

Ask questions. Demand plans. Think and Vote!



SHOW US THE PLAN!

www.showustheplan.ca



Public Interest Alberta Democracy is a Dialogue: Your Voice - Our Future

Public Interest Alberta is working with numerous organizations to make sure this election is about issues that matter.

Democracy is a dialoque

Your voice.
Our future.

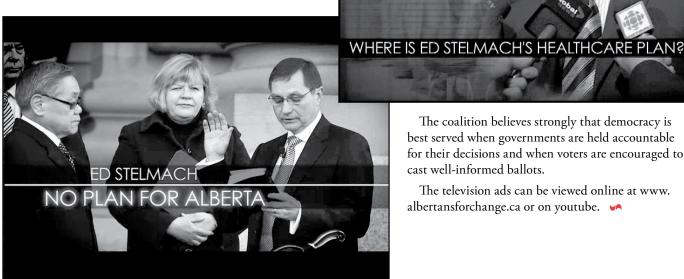


Hard-hitting TV ads raise questions in election

lbertans for Change rocked Alberta politics with a series of television ads running before an election call. The ads questioned Ed Stelmach's record and caused quite a stir. Albertans for Change is a coalition of the Alberta Building Trades Council and the Alberta Federation of Labour, which together represent nearly 200,000 working Albertans.

SPONSORED BY: ALBERTANS CHANGE www.albertansforchange.ca

www.albertansforchange.ca



The coalition believes strongly that democracy is best served when governments are held accountable for their decisions and when voters are encouraged to cast well-informed ballots.

The television ads can be viewed online at www. albertansforchange.ca or on youtube.

Democracy is a dialogue **Public Interest ELECTION FORUMS**

Democracy, Privatization & Environment Forums

- February 19 Calgary The Central Library (616 MacLeod Trail SE)
- February 20 Lethbridge Lethbridge Library (810 5 Avenue South)

Healthcare, Seniors & Social Services Forums

- February 21 Edmonton Royal Alberta Museum (12845 102 Avenue)
- February 25 Calgary The Central Library (616 MacLeod Trail SE)

Childcare, Education & **Post-Secondary Education Forums**

- February 26 Edmonton Royal Alberta Museum (12845 102 Avenue)
- February 28 Red Deer Red Deer College (56 Avenue & 32 Street)

Issues and Dialogue WEBSITE

www.democracyisadialogue.ca

- On-line survey of political parties on core public interest issues.
- Open on-line forum for individuals to express views, promote events or just talk

about the party's platforms or their favourite candidate.

• Links to other organizations' key information on the election.



The crisis in long-term care Groups raising LTC issues in election

n the run-up to the election, the government announced \$300 million for 600 new beds, including a large number of additional long-term care beds, to "ease pressure" on acute care hospitals.

The election goody announcement however, does not deal with the serious concerns raised about long-term care in the province and the crisis in staffing.

NOT for Sale

Promoting Public Solutions in Today's Alberta

April 4- 6, 2008

Coast Terrace Inn, Edmonton

Agenda

- Avi Lewis
- Allyson Pollock
 Selling the P3 myth –
 The British Experience
- Deb Brennan
 The Corporatization
 of Childcare The
 Australian Experience
 Plenary
- Maude Barlow –
- Heather-Jane Robertson

Workshops on:

- Childcare
- Democracy
- Education
- Post-Secondary Education
- Healthcare
- Seniors
- Environment
- Living Wage
- Cities

Public Interest Alberta780 420-0471 • www.pialberta.org

In 2005 the provincial Auditor General reported on problems with meeting standards in LTC and the staffing difficulties. The provincial government responded with new vague standards and the crisis continues.

A group of Alberta activists are documenting the crisis on ContinuingCareWatch.com. Quotes from their work illustrate some of the issues:

"Staffing in this facility is not at a level to provide the direct supervision that this resident needed."

"Registered nurses informed investigating members that they do not have time to check residents on a daily basis."

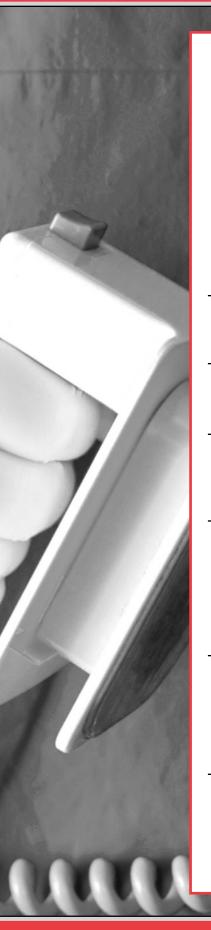
"The team leaders at the facility are personal support aides who only have a day and half of training in the administration of medications."

"Not making it to the bathroom in time and the humiliation and frustration that comes with that."

Consumer advocate Wendy Armstrong in her report Eldercare, notes that: "Alberta now has a high-priced LTC market with few real choices. Families of people requiring long term care face enormous stress, suffering, and potentially ruinous expense in the absence of appropriate and affordable care options."

Taskforce calls for affordable, quality care

Public Interest Alberta's Seniors' Task Force is calling for the province to ensure "quality, affordable and accessible facilities." Part of the problem, the Task Force points out is "the government is subsidizing private corporations to build more assisted living facilities, where residents are charged extra for nursing or personal care, over and above the accommodation and meal charges. The Task Force's leaflet is included with this NewsBulletin.



Questions for candidates

ealth care is the biggest concern for Albertans going in to the provincial election. Pinning the parties, and candidates, down on what they will actually do, however, is always a challenge. The following are some questions designed to force clear and concrete answers. They can come in handy if you attend a candidate forum or a candidate comes to your door.

What is your plan for improving our health care system and reducing the current capacity problems?

What will you do about the critical shortage of health care workers, doctors, nurses, pharmacists and others?

There has been a great deal of discussion about "innovation" in Alberta's health system and using more private, for-profit services. What is your position on private health care in Alberta?

After all the reports on nursing homes and long-term care problems in Alberta, the provincial government introduced new standards for long-term care that failed to specify measurable levels of nursing and personal care. Will you support a staffing standard that ensures a minimum of 3.5 hours of nursing and personal care every day for every long-term care resident?

The Alberta government has also created lower standards and levels of care for some long-term care residents, with new categories like assisted living and now even supportive living. Will you stand up for full and adequate care for all Albertans who require it?

Recent changes have upset a long-standing balance on the Board of the Local Authorities Pension Plan and elminated the power of Employees to protect benefits. Will you restore the fair balance in governance at the Local Authorities Pension Plan?

CONTRACTMOTES

UNA's innovative retention strategies

Several innovative new options geared to promoting retention of nurses, and nurses nearing retirement, were negotiated by UNA in the new provincial Collective Agreement. Details on how these will be implemented were recently released by the Joint Committee of UNA and HBA Services. The new Weekend Worker, Retirement Preparation Program, and Pilot Projects in the provincial contract are now ready to roll.

The Pilot Projects include: Flexible Part-time Positions, Seasonal Part-time Positions, and Benefit-Eligible Casual Employees.

Weekend Worker

The Employer and the Union must mutually agree to implement the Weekend Worker provisions. If either party is interested in implementing a Weekend Worker schedule, they should approach the other party and discuss the issue. The Weekend Worker concept can only be full-time, either 15 regular shifts in four weeks, or 16 extended shifts over a six-week period. See the full document for more details.

Pilot Projects:

Flexible Part-time Positions

These allow Employees to increase their FTE while providing flexibility on the scheduling of the additional shifts. Utilization of this project will allow for the creation of higher FTEs. An FPP is a part-time position, with a specified FTE of no less than 0.4 FTE. However, rather than applying the normal scheduling provisions of Articles 7 or 37 to the whole FTE, at least 50% of the shifts need to be scheduled 12 weeks in advance. The remainder of the shifts are scheduled based on the Employee's availability and where possible, scheduled by the Employer at least 24 hours in advance. An Employee may request an FPP to increase their existing FTE as an alternative to Article 14.15.

Seasonal Part-time Positions

The purpose of this project is to allow Employees to compress a specified annual FTE into smaller portion of a year (for example, an Employee could work a 0.5 FTE compressed into full-time hours over a six month period). During the remaining months (in the above example, the remaining six months), the Employee is not on a leave of absence and cannot be required to work.

This type of scheduling may work well for "snowbirds". An Employee may request that their current position be converted into a SPTP, or that a posted vacancy be converted to a SPTP.

Benefit-Eligible Casual Employee (BECE)

Different levels of work scheduling flexibility may be desirable as Employees transition through life stages. Casual Employees have maximum flexibility regarding scheduling but have no guarantee of shifts, no requirement to work specific shifts and no entitlement to benefits. A BECE is guaranteed a specified FTE (of no less than a 0.4 FTE) but with no specific hours per shifts or shifts per shift cycle. The actual work schedule will be determined by the Employer based on the availability of the BECE. The BECE will be obligated to work the specified FTE, and in exchange, will be eligible for sick leave, benefits and pension plans. A Casual Employee may request to become a BECE at a mutually agreed FTE, or the Employer may post for a BECE.

Retirement Preparation Program

This Program enables eligible Employees to maintain their current full-time equivalency (FTE) overall, but restructure the work assignment so that a portion of their FTE is spent performing project work rather than the Employee's regular clinical work assignment. The clinical portion of the Employee's FTE must remain at .6 FTE or higher. The maximum duration of the Program is four years.

The project work portion of the Employee's FTE must be mutually agreed between the Employer and the Employee, and may include but is not limited to research, leadership assignments or other types of special projects.

If the Employee is proposing implementing the Program to the Employer, the Employee should include ideas or suggestions for project work that they would be interested in doing as part of the Program and as much information as possible. The more detailed the proposal and the more the proposal identifies the potential benefits for the Employer, the more likely it is that the Employer will positively consider the proposal.

The Joint Statements are available on UNA's website: www.una.ab.ca and on UNA-Net, the UNA email and conferencing system. These statements include detailed "Questions and Answers" that outline how each new program can work.



Nurses help protect Medicare rights

anada's nurses and hospital workers ◆ have teamed up to launch a Know your Medicare Rights campaign. "Anywhere in Canada, medically necessary services, whether at a doctor's office, a hospital, a surgical centre or a diagnostic clinic, is 100% paid for by government," explained Linda Silas, president of the Canadian Federation of Nurses Unions (CFNU). "This right is protected under the Canada Health Act and under provincial legislation," she added.

"Despite the protections provided for by the Canada Health Act – we know that patients sometimes get charged for medically necessary care. This practise is both morally wrong and illegal," said Paul Moist, national president of the Canadian Union of Public Employees (CUPE).

The groups have launched a website www.yourmedicarerights.ca, and produced a pamphlet as part of the campaign to inform the public of their medicare rights.

"The Canada Health Act sets out the framework for Canada's medicare system. To qualify for federal funding under the Act, each province and territory must meet the following criteria - public administration, universality, comprehensiveness, accessibility, and portability," Silas added.

Know someone who paid a tray fee? Or paid for a quick appointment? They could get their money back if they file a complaint. Let them know. Or just tell all your friends about this campaign.

More information is available on the campaign website: www. yourmedicarerights.ca 🛰

Revitalizing our Union



June 11, 12, 13th 2008 **Red Deer College**

This year UNA will be putting on a Labour School for active members coming up in June in Red Deer. See your Local about being a representative at the school.

Some of the topics to be covered will include:

- When Worlds Collide: Bringing All Generations together in the Workplace
- Connecting with the New Graduate in all of us
- · Riding the Wave of Change
- Rekindle Your Care
- Diversity
- The Union when you are a new nurse
- Can you hear me now? Getting your message out
- Return to Work programs
- Addictions in the workplace
- The UNA*Net





Bestselling author, journalist and political commentator, Linda McQuaig, will be the keynote speaker at the 2008 Alberta Social Forum in Red Deer.

February 29 to March 2, 2008

Margaret Parsons Theatre Red Deer College

Contact Ken Collier (403) 342-7989 for sponsorship funding, displays and registration. www.albertasocialforum.ca.

Other Speakers at the Forum include:

- Bill Phipps on: Cause for Hope
- Lindsay Telfer on: The Alberta Water and Energy Story
- Jim Harding on: Nuclear Energy, Canada/Alberta
- Jim Anglin on: Citizen Organization for Vital Citizen Interests
- Jan Slomp on: Democracy, Trade and the Food System



Nurse practitioners open community clinic in Sudbury

The first nurse practitioner-led clinic opened recently in Sudbury, Ont. Nurse practitioners have legislative authority write prescriptions, order lab tests, X-rays and other diagnostic tests and treat many conditions and minor injuries. They leave conditions requiring acute care to doctors. Funding for the Sudbury district nurse practitioner clinics was announced by the Ontario government last November. The clinic currently employs four nurse practitioners, support staff and physician partners. It's the first clinic in Canada, whose board consists mainly of nurse practitioners, giving them full decisionmaking power.

BC gets violence prevention signs in health facilities

BC's senior health care officials have agreed to display signs in health care facilities across the province warning against acts of violence. The standard language on the signs declares: "Violence, foul language and abusive behaviours are not acceptable. Verbal threats or acts of violence will not be tolerated and may result in removal from this facility and/or prosecution."

Health care unions, including the BC Nurses Union, were pushing for violence control measures and the signs.

The signs – with black lettering on red background – will be posted in all acute care facilities. The signs are a first step in a drive to create public awareness about the growing problem of violence against health care workers.

Health care strike bans hurt, don't help

New studies released by the by the Canadian Centre for Policy Alternatives show that banning strikes in the health care sector may hurt more than it helps. The first report "A Tale of Two Provinces" compared Nova Scotia (where acute health care strikes are still legal) to Alberta (where they have been banned) over the past 24 years, and showed that Alberta had fifteen times as much strike activity. The reports' authors Judy and Larry Haiven, (associate professors at the Sobey School of Business at Saint Mary's University) say, "Strikes in health care are not the unacceptable events that government and employers portray them to be. In their most recent report, the Haivens say strikes have a useful role. According to Larry Haiven, "This study shows that the proposal to ban strikes in health care and community services could make matters worse in an already stretched system. Front-line workers know best when the system is being

pushed beyond tolerable limits and they can signal this by threatening a legal strike. If they don't have the strike option the rest of us may not find out about the strained system until it is too late." The reports are available online at www.policyalternatives.ca.

Capital Health putting educators at bedside in crunch

In January Capital Health announced it was asking nurse educators and clinical managers to volunteer for bedside roles because of a current bed crunch caused by the nursing shortage.

"Although they're not calling it a crisis, this is, in my view, the biggest staffing crisis the health regions have dealt with since regionalization was introduced in 1994," UNA President Heather Smith told the Edmonton Journal. "This is the most stretched the region has ever been."

Capital Health warned of surgery cancellations and continuing bed closures because of the nursing shortage.

Heather Smith said the province needs to educate more nurses as quickly as possible.

"The under-supply is certainly peaking in Alberta in a way that goes beyond what some of the other provinces are experiencing," she said.

Nurse shortage closes most beds in Athabasca

The Athabasca Healthcare Centre has been reduced from 27 to 10 beds because of the nursing shortage, news reports indicated recently. Administrators said because two nurses are off on sick leave beds had to be closed. One Athabasca doctor was reported as saying the situation has left them in a vulnerable state. Seven of the currently available 10 beds are taken by long-term care patients leaving little space for urgent cases.

A large number of nurses again attended this year's Alberta Federation of Labour/ Canadian Labour Congress Labour School held in January in Jasper.



Vegreville nurses decry staff cuts

St. Joseph's Hospital in Vegreville cut three positions in January: one daytime RN on the second floor, the four-hour RN in Outpatients' Department, and the four-hour Unit Clerk. The cuts were recommended in order to save money. Nurses from Local #22 have been raising concerns about the staff reductions with the Region.

"Reducing staff would undermine our successful efforts at infection prevention and control and thereby pose a risk to patient safety," the nurses explained in a letter to several Region officials. "The new Provincial Methicillin-Resistant Staphylococcus aureus (MRSA) Guidelines identify high patient – nurse ratios (i.e., low numbers of nurses) as a risk factor for MRSA transmission. We must not simply pay lip service to these guidelines; they must guide our practice in carrying out our responsibility to the patients we serve." The Region has refused to back down on the reduction.

Nurses discriminated against, in line for huge back pay

The Canadian Human Rights Tribunal has ruled that it is discriminatory to pay nurses who are "medical adjudicators" less than half of what doctors who are called "medical advisers" get. The ruling could result in nearly \$200 million in back pay for 430 Registered nurses who screen people applying for disability benefits under the Canada Pension Plan. The doctors, who performed essentially the same duties, also received retention bonuses, more holidays and more. About 95 per cent of the nurses are women; about 80 per cent of the doctors are men. The ruling says the nurses' "inferior working conditions are a function of the gender predominance of their occupational group."

The Great CEO Pay Race

If 2008 is like 2006, Canadians will work full-time all 2008 to earn an average wage of \$38,998. But by 10:33 a.m. January 2, the 100 best-paid CEOs of



UNA draw for members to attend CLC Convention

UNA is funding 7 members at large to attend the Canadian Labour Congress Convention in Toronto May 25 - 30, 2008. Members will be chosen by random draw. Those drawn will have costs covered including: salary replacement for LOAs, travel, accommodation and UNA meal allowance. If you are interested in attending the Convention please mail or fax the form below to the UNA Provincial office no later than 16:30 March 19, 2008.

Yes, I would like to be a part of the delegation representing UNA at the Canadian Labour Congress Convention in Toronto, May 25-30.

Name:		Local:
Address:		
City:		Postal Code:
Phone:	Email:	

PLEASE MAIL OR FAX THE TO THE UNA PROVINCIAL OFFICE NO LATER THAN 16:30 MARCH 19, 2008.

United Nurses of Alberta 900-10611 98 Avenue NW• Edmonton AB T5K 2P7 PH: (780) 425-1025 | 1-800-252-9394 • FX: (780) 426-2093

public companies in Canada will have already pocketed that average Canadian wage. And they will continue to earn the average Canadian wage every nine hours and 33 minutes for the rest of the year. By the end of the day on January 2, the average of the top 100 CEOs will have made more than \$65,000. That's what happens when you make an average of \$8,528,304 which is what Canada's 100 best paid CEOs made in 2006. The worst-paid CEO in that top 100 list received \$3,059,604. The best-paid CEO enjoyed \$54,709,465 in total compensation. On average, the best-paid 100 CEOs make more than 218 times as much as an average Canadian working full-time.

In 1998, the best-paid 100 CEOs earned 104 times more than the average Canadian earnings. In 2006, the best-paid 100 CEOs made 218 times as much.

This spectacular explosion in the size of CEO pay packages is not an aberration. It is a reflection of a dramatic trend in the gap between earnings at the top of the economic elite and those of the rest of us. In an important study released in September 2007, Statistics

Canada shows that most Canadians' real incomes did not increase from 1992 to 2004. That story changed in the highest-income 10% of Canadians. The bottom half of the top 10% maintained its share of total income: their income grew at the same pace as the average. But in the top 5%, the share of total income increased from 21% to 25%. More than 90% of that gain actually went to the top 1% — the richest of the rich. Read the full story at www.policyalternatives.ca.

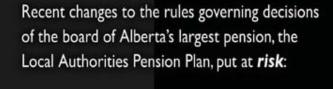
President Debbie Martin and Treasurer Karen McLeod at the Lethbridge and region Community Local AGM.



IS YOUR PENSION AT RISK?

AN IMPORTANT MESSAGE

to retirees and members of Alberta's public pension plans



- · Early retirement provisions
- · Pension Cost of Living Allowance
- · The '85 Factor'

Alberta's unions are fighting hard to protect your pensions. But we need **your** help.

Call Premier Ed Stelmach and your MLA at 310-0000. Tell them to fix the Local Authorities Pension Plan by putting it back the way it was before the changes were made in November.

For more information about what has happened to the Local Authorities Pension Plan, and the implications for other Alberta pension plans, go to

