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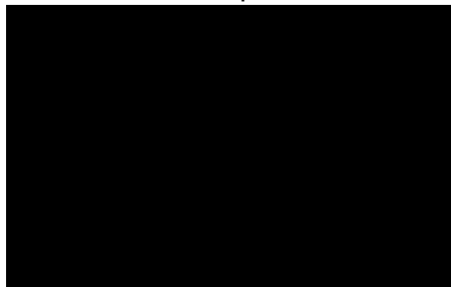
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ATTENTION: DAN GALDAMEZ LABOUR RELATIONS OFFICER and LABOUR RELATIONS BOARD.

Re: Application GE-07762

From: Kevin Huntley



GE-07762 013
04/20/18 BS

I am writing in response to the application from United Nurses of Alberta and Jessica Wakeford (GE-07762). I am employed by Alberta Health Services full time as a Nurse Practitioner (NP) at Foothills Medical Centre with the job title "Pulmonary Medicine Nurse Practitioner".

I work in a solitary NP practice in a collaborative model as a member of the Division of Respiriology at Foothills Medical Centre. I am also a Clinical Adjunct for the Faculty of Graduate studies at the University of Calgary. I take senior call for my section and have since I began my practice almost 15 years ago. I believe I fulfill 11 of the 13 criteria the labour board would use to determine if my position falls Section 1(l)(i) (manager responsibilities). I have a unique NP role in the province within AHS and I believe most if not all NP's in AHS would also fall within this exemption to the definition of "employee".

I am seeking intervener status on my own behalf in Application GE-07762. Due to my unique NP position in AHS, I am unable to be adequately represented by another representative such as Nurse Practitioner Association of Alberta (NPAA) and I cannot afford my own legal counsel to take on the enormous resources of UNA. I have not authorized anyone else to speak on my behalf or on the behalf of my practice and request to be heard by the board. I believe the impact of the decision in this application will have direct and potentially catastrophic effects on my practice and my future as an NP.

My background also brings a unique perspective as I am a prior 2-term board member for the College and Association of Registered Nurses (CARNA) which included service on the following board committees: Provincial executive committee (PEC), the finance audit and pension committee (FAP) and the appeals committee. Prior to becoming an NP, I was a UNA member and I began my NP career only weeks after bill 27 came into effect.

I have seen first-hand the impact unionization has had on the NP profession and understand the context of the dispute. I have been approached with other NP's by other unions in previous years to fight the legislation removing NP's from the union in the labour code. Until now NP's have chosen NOT to exercise this option and unfortunately ONE NP with previous union ties agreed to make this application not consulting her fellow NP's in practice.

The application has caught other parties off-guard in what I believe was intentional strategy to limit responses and create a confrontational climate giving little chance at the dispute resolution process and force the issue to a hearing. I believe the intention is legislation breaking and NP's are merely a small group being used as a tool to accomplish this goal. I also find the timing of this action interesting as it

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takes place while UNA's prior labour relations officer sits as Alberta's premier and immediately after a 3-year contract for UNA's membership has been signed.

You will hear from many NP's opposed to the outcome of unionization of our profession in Alberta because practicing under a union would greatly diminish our freedom and objectivity supporting management responsibilities and autonomous decision making. NP's have worked for years to reverse the damage to our profession from unionization in the past.

I understand there are pro's and con's surrounding unionizing a profession but the fact is that NP practice is now a much more evolved practice in a leadership role that is NOT "direct nursing care or nursing instruction". The argument against unionization for NPs is stronger than in the past as the profession has evolved. I would argue that the board should not consider arguments that NP's were previous members of a bargaining unit as there have been significant legislative, licensing and practice changes since 2003 and prior unionization is not relevant to current day practice.

I am not a labour lawyer and cannot argue to the possible charter breach but if the legislation is in breach for NP's then it is also a breach for others who are "not employees" in the code as defined by section 1(i)(ii) and section 1(i)(iv). The legislation whereby a breach is claimed (section 1(i)(iii)) has prevented individual NP's in practice from having to appeal to the labour board for individual decisions on which NP's may be considered employees. In fact I question if the board should even hear this or if it should go directly to judicial review as the board decision will have far reaching effects.

Most NP's could not function in Alberta Health Services in the same capacity or with the same efficiency and outcomes if categorized as "employees" and forced into union without exemption. My ability to optimize patient care would be compromised and the benefits of having an NP on my service would be nearly eliminated. Essentially the decision of the board puts Alberta at risk of ending a profession over union politics.

My NP practice requires autonomous decision making, supervision of employees, hiring and promotion, discipline and discharge, directing work, independence, supervising subordinate supervisors, evaluating employee performance and policy setting.

I argue in opposition of UNA's statements stating Nurse Practitioner Practice falls within the certificate 73-2013. Striking down the legislation and forcing NP's into a UNA which does not recognize our distinct and unique practice. A practice that I believe has obvious grounds for each and every NP position to request review from the board for determination if we meet section 1(1)(i) as I believe we are NOT "employees" under the ALRB definitions.

I believe Bill 27 (resulting in the changes to separately address NP's in the labour code) was put into place to protect the NP profession and the public. NP practice has grown substantially and UNA fails to recognize that NP's are not just RN's with a few extra responsibilities.

I argue that the determination application to be misleading based on generalist language and overlap of roles to capture all Nurse Practitioners in this application. Specifically claiming that "nurse practitioners provide direct nursing care or nursing instruction".

As per CARNA's (2017) scope of practice for Nurse Practitioner (see Addendum) and current legislation in Alberta, Nurse Practitioners in Alberta are licensed to:

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1. Prescribe a Schedule 1 drug within the meaning of the *Pharmaceutical Profession Act*
2. Prescribe blood products
3. Order and apply any form of ionizing radiation in medical radiography
4. Order any form of ionizing radiation in nuclear medicine
5. Order non-ionizing radiation in magnetic resonance imaging
6. Order or apply non-ionizing radiation in ultrasound imaging, including any application of ultrasound to a fetus
7. Prescribe diagnostic imaging contrast agents
8. Prescribe radiopharmaceuticals, radiolabelled substances, radioactive gases and radioaerosols
9. Prescribe parenteral nutrition.
10. Perform advanced health assessment
11. Provide diagnosis
12. Order and interpreting diagnostic tests
13. Perform treatment and advanced interventions
14. Perform consultations and write referrals as required
15. Monitor client outcomes
16. Follow-up care
17. Prescribe controlled drugs and substances (participants in triplicate prescription program TPP)

These activities are not defined as "direct nursing care or nursing instruction" and are not covered under Certificate 73-2013. UNA's current collective bargaining unit is not authorized, educated or licensed to perform the above activities.

The constitutional challenge raised is a reasonable question if simply asking if NP's freedom of association is violated per section 2(d) of the Canadian Charter of Rights and Freedoms however the application also speaks to Nurse Practitioners falling into UNA's bargaining unit under certificate 73-2013 which is an entirely separate question. I believe UNA blends these issues to serve to grow their bargaining unit which has unnecessarily complicated the decisions before you.

Nurse Practitioners (NPs) are also Registered Nurses and as such would be employed as RNs and fall within the certificate if "employed in direct nursing care or nursing instruction". Nurse Practitioners in AHS's job titles are not employed as RNs and do not fulfil the same duties. NP's have a separate license with a separate body of knowledge and distinct legislation (both provincial and federal) from the role of an RN. The NP job description is very different from that of an RN and every NP's specific practice is unique.

Please keep in mind that NP's are a small group working to grow the profession to benefit Albertans. We provide a cost effective, high quality outcome focused service and are able to do so because we are not

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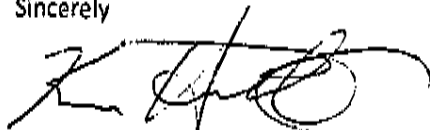
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in positions of conflict. Because of our small numbers mounting an effective legal response to a board decision is not a financially viable option and any decision made by the board will shape the direction of our profession. I sincerely hope the board is able to find a solution that allows NP's to continue to practice and steer their own profession rather than be swallowed without choice into a massive collective bargaining unit. In UNA's collective bargaining unit, NP's will be less than 1% of the unions voting population and as such will lose ALL effective control of our contracts. Making any changes after absorption into UNA simply will not be possible without rewriting legislation which could take years (if attempted at all).

While I could also bring my individual personal stories of where unionization would serve to block my ability to function in my role I do not feel it useful for the argument here. Should the board have any questions or want any further detail related to my circumstances, practice or motivation please do not hesitate to contact me.

Sincerely



Kevin Huntley MN NP

Pulmonary Medicine Nurse Practitioner

Alberta Health Services

Clinical Adjunct

University of Calgary.