



# April 8 update to HSA members in the Community Bargaining Association collective agreement

April 9, 2020

**To: All HSA members in the Community Bargaining Association (CBA) collective agreement**  
**From: HSA President Val Avery**  
**Date: April 8, 2020**

This is a difficult time for healthcare workers around the province and I wanted to take this opportunity to update members on what HSA and the Community Bargaining Association (CBA) have been doing on your behalf and clarify some common questions members have been raising.

## **CBA calls for premium pay**

We became aware last week that employees covered under the Nurses Bargaining Association (NBA) agreement were granted a blanket premium for all hours worked during the month of April. While we acknowledge that their collective agreement has a scheme for a premium to be paid for working in short staffing situations, this premium has been changed to apply to all nurses during the pandemic, leaving other front line healthcare workers feeling undervalued.

The Community Bargaining Association (CBA), which is led by the BCGEU and includes members represented by other unions, including HSA, called on the employer, HEABC, to consider premiums for the thousands of other front line healthcare workers fighting the COVID-19 pandemic and a meeting to discuss this important issue. You can see the CBA's letter to HEABC [here](#).

## **Non-clinical PPE**

HSA has hundreds of members who work in non-clinical environments such as shelters, SRO's, addictions facilities, and on the streets of the community.

Our advice to members in those environments is that if you are unable to maintain two meters of physical distance with co-workers, clients, or members of the community while performing your duties you should be wearing a medical mask and eye protection. This includes when your duties may require you to directly administer medication such as Naloxone or provide first aid.

If you are required to directly administer medication or first aid to a person who has been diagnosed - or is symptomatic - with COVID-19, PPE requirements should increase to a medical mask, eyewear, gloves, and gown.

HSA and the CBA have been in regular contact with WorkSafeBC in relation to COVID-19 issues and your employer is still obligated to meet their core Workers Compensation Act and their Occupational Health and Safety responsibilities during this outbreak.

If proper PPE is not available, is being denied to you, or if you have specific questions about COVID-19, please direct your inquiries to your union representative (your Joint Health and Safety Committee member or a steward). If you cannot reach one of these union representatives, please contact the HSA COVID-19 hotline at [covid19hotline@hsabc.org](mailto:covid19hotline@hsabc.org)

## **Single site**

We anticipate orders from the Provincial Health Officer (PHO) or individual health authorities via the local Chief Medical Health Officer (CMHO) restricting work to a single site. Our understanding is that this order will not apply to community health or your worksites. Instead it impacts only long-term care (LTC) facilities and

assisted living (AL) facilities which are largely facilities for seniors.

This means that if a co-worker or employer in community health says that you are restricted to working at one community health worksite/program they are misinformed. The only impact on workers covered under the CBA is if they have other employment in any (union or otherwise) LTC or AL. However, you are still able to work in community health, just not more than one LTC or AL.

If the outbreak becomes worse it is possible the PHO or the CHMO could make such an order to restrict you to working at a single site, but at this time we do not anticipate that happening.

### **Redeployment**

There is a potential redeployment of workers, particularly Community Health Workers (CHWs) involved in home support, to other parts of the health authority to assist other health care workers during the COVID-19 outbreak. At this time, it is unlikely employees from other bargaining units would be redeployed into community health.

Although we do not have details at this time, we will assert that any such transfer (outside of an order from the PHO or CHMO which we have no jurisdiction over) be consistent with the following principles:

- **The transfers are voluntary and by seniority.**
- **Employees should be paid the rate of pay under the agreement of the facility/worksites they are performing duties at if it is higher than their current wage rate.**
- **All hours worked and earned benefits should return with you so that no employee loses seniority, vacation, sick leave, pensionable earnings, etc.**
- **Those that do redeploy are guaranteed regular hours equal to or in excess of their current position or some other confirmed amount of minimum hours.**

These terms are subject to discussions between the CBA, HEABC and the other healthcare bargaining associations. We will update you when we have more certainty.

### **Timeline waiver**

The CBA (including HSA) has agreed to temporarily suspend timelines regarding grievances. Due to the COVID-19 outbreak there was general agreement that employers are currently unable to effectively meet timelines related to grievances and employees should not be adversely impacted by the crisis in terms of grievances and protecting/defending their agreement rights.

Therefore, the unions and employers agreed to temporarily (currently until April 30, 2020) suspend grievance and classification review timelines and all new grievances shall be filed directly at Step 2. Community Health Workers should still be submitting a filled out hours of investigation form with grievances filed directly at Step 2.

Thank you for all you are doing, and please know that we are continuing to work each day to represent you during this difficult time.

If you have any questions about your rights at work, please don't hesitate to contact the hotline at [covid19hotline@hsabc.org](mailto:covid19hotline@hsabc.org)

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