

BULLETIN

Workload overload

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A recent reorganization in my department has compounded what was already an acute workload problem. My coworkers are all on the verge of burnout. What should we do?



As the demands on HSA members become greater due to staffing shortages and government cutbacks, the issue of workload has come to be a very prominent one for our members. What steps should you take if you feel your workload has become excessive?

As you may be aware, there are provisions covering workload in the **paramedical professional collective agreement**. These are contained at sections 14.09 and 38.05.

Section 38.05 outlines a process for addressing unsafe or excessive workloads. The first step in this procedure is for the HSA member to approach their immediate supervisor and discuss the problem. If this does not solve the problem, the HSA member may consult a steward to file a grievance. The grievance must then work its way through the grievance procedure. If the matter is not settled, it may be referred to a troubleshooter who can investigate the difference, define the issues and then make recommendations for settlement.

Article 22.3(a) of the new **community social services collective agreement** allows for the creation of joint health and safety committee which has as one item on its mandate the issue of workload. The joint committee has the stated aim of preventing and reducing risk of occupational illness or injury.

In the **community health and services support agreement**, article 22.2(c) contains a process to deal with safety related workload problems. Where you have such a problem, you must report that problem to the occupational health and safety committee. The committee then brings the problem before the employer. If the problem is not resolved, a troubleshooter may be used to make recommendations.

Some considerations for filing excessive workload grievances need to be taken into account. The first consideration is to follow the procedures and processes outlined in the collective agreement. Grievances where the collective agreement procedures and processes have not been followed are destined to fail. For instance, if you filed a grievance without first approaching the problem with your immediate supervisor or occupational health and safety committee, you may find your grievance rejected and be sent back to follow the procedure properly.

Secondly, you must remember that the evidentiary burden will be on the union should the matter go to a third-

party troubleshooter. This is established in the case of *St Paul's Hospital and HEU* (1994) by arbitrator Don Munroe. If the employer denies there is a workload problem, and the evidence does not establish sufficient proof on a balance of probabilities, the grievance will fail. This is why it is crucially important to document all instances of excessive workload. Even a worthy case will fail if the evidence, preferably in documentary form, is not there to prove the case. Furthermore, the evidence must be specific, not general or abstract.

Another consideration is the requested remedy. Workload issues can be systemic, where workload is chronically too high and has been for some time, or it may be periodic or incidental, where staff illness or vacations suddenly cause workload to rise excessively. In the Munroe case cited above, the grievor was credited with a certain number of hours to be paid out because of excessive work load for a limited period. For more chronic or institutionalized workload issues, more permanent remedies should be sought, such as the creation of a new position to be posted to deal with the problem. 

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