CONVENTION 2014:
THE RESOLUTIONS THAT MATTER TO YOU
I AM DEEPLY HONOURED TO HAVE BEEN ELECTED YOUR PRESIDENT AT HSA’S 43RD CONVENTION IN APRIL.

I’ve been a member of this union for 31 years, and I’ve served at every level – as an activist, steward, a committee member, a director on the board, as vice-president and most recently as president, appointed under the constitution when Reid Johnson decided to move on last fall.

I believe this experience is valuable, but I know that members are looking for more. These are challenging times for health care and social services, for our unions, and for public employees in all professions. Members like you have a lot riding on the decisions made by your elected leaders, and I want you to know that in addition to my years of experience I share your passion for the patients and clients we serve and I remain connected to the daily struggles of members doing everything they can to deliver quality care despite tight budgets, insufficient staff, and employers who cut corners.

I want you to know that I am going to fight like hell for all of you. It seems I’ve already developed a reputation for always wanting to get right down to business, and so be it. You didn’t elect an entertainer. You elected someone with the experience and passion to make tough choices for the good of all members.

That’s why I’ve directed staff and the board of directors to develop a five-year strategic plan to chart our path forward, through the many challenges ahead of us. The strategic plan will touch on the changing role of labour relations, the opportunities and challenges of new technologies, the growing complexities of disability management, classifications, pensions, benefits, the threat of raids by other unions, the need to build on our efforts to increase our profile with the public and decision-makers in government, political attacks on labour unions, and legal threats to the future of public health care itself.

It’s about the future of our union, and the future of your professions. I’m asking every one of you to be a part of it. We’ll take the first steps by hearing from union activists at the regional meetings this fall.

I’m looking forward to the debates we will have, the experiences we will share, and the plan we will set to focus our finite resources on what we do best as a union – delivering quality services to our members and protecting the work you do so that we can improve our worksites, the services we deliver, and the communities we live in.

Now, let’s get down to business.

Val Avery
TABLE OF CONTENTS

PRESIDENT’S REPORT
Down to business 2

NEWS
Arbitrators rule on implementation of 37.5 hour work week 6
Public health defenders get a say in legal case 7
Nurses’ bargaining under way 8
CSS members ratify new contract 8
Sebastian joins board, while Hoyt re-elected 8
Stories shared at HSA’s mental health forum 9

MEMBERS
Convention 2014 10
Physiotherapist Val Avery elected president 13
Sapergia receives 2014 David Bland Award 14
HSA scholarships and bursaries awarded 15
Putting people first a great reason to run this fall 16
HSA RPNs address trauma at professional event 18
Pension Q&A: suffering from lost pensionable service? 19
Terri, transition house support worker 20
Constituency Liaisons take our message to the top 22
BC FED regional conferences 23
JANE KING, CHIEF STEWARD AT ABBOTSFORD REGIONAL HOSPITAL, IS JUSTIFIABLY PROUD OF THIS BOARD.

HOW ARE YOUR BOARDS?
A province-wide battle for the most-improved-bulletin-board erupted on Facebook this spring.

Members are busy. They are bombarded with email and social media. Sometimes, the best way to tell them about HSA is through the worksite bulletin boards. But what impression do your boards make?

Earlier this year, and fired up with competitive spirit, stewards in worksites around the province cleared out the outdated news releases, old logos and distracting clutter, and the results speak for themselves.
ARBITRATORS SAY ROLLOUT OF 37.5 HOUR WEEK WAS INCONSISTENT

EMPLOYERS WHO FAILED TO FOLLOW A FAIR AND NEGOTIATED PROCESS FOR A TRANSITION TO THE 37.5 HOUR WORK WEEK HAVE BEEN DIRECTED TO START OVER, THANKS TO AN APRIL DECISION BY ARBITRATORS VINCE READY AND CORINN BELL.

The ruling provided unions and employers with a 45 day window to review all the outstanding grievances and implementation processes respectively.

During this period, employers were asked to review their files, identify where they went wrong, and contact the union to discuss remedies for individual situations.

Unions that find they didn’t have the evidence to proceed on a particular grievance, or that the process had been done correctly per the arbitrators’ decision, were instructed to withdraw those grievances.

Originally set to expire May 22, the window was extended to June 12 to allow members to challenge the decision to withdraw grievances. As this issue goes to press, the remaining unresolved grievances are being handled in a process in which employers and HSA are working to categorize the grievances and participate in an expedited arbitration process consisting of short hearings.

Discussions aimed at resolving grievances are ongoing while the schedule for the mini-hearings is created.

This process is expected to conclude very shortly, and members are encouraged to check hsabc.org for the latest updates.

A feature of the 2012 – 2014 negotiated collective agreements covering health care workers, including health science professionals, was the extension of the work week to 37.5 hours from 36. Under a memorandum of understanding negotiated to guide implementation of the changes, employers were supposed to consult with staff and take into consideration local work site factors when changing schedules.

Many employers ignored the process, and HSA, working through the Health Science Professionals Bargaining Association (HSPBA), filed 1600 grievances were against employers who took arbitrary steps to change work schedules. In many of those cases, part time employees were targeted, and some suffered a loss in regular hours. In some cases, employers also failed to apply the principles of seniority.

Arbitrators Ready and Bell found the failure to consult employees constituted a violation of the process.

“...in any reduction of hours for part-time employees, it would have been incumbent on the Employer to implement such changes in a manner that minimizes the impact, and was done in accordance with all process requirements, including the requirement that the Employer consider and respond to proposals which part-time employees put forward once service delivery options were outlined by the Employer.”

The HSPBA had argued that any reduction in hours to part time employees constituted a lay off, and as such the process violated the collective agreement. The arbitrators disagreed.

In a separate ruling, the arbitrators set out the process to be used to resolve the grievances about the implementation of the 37.5 hour work week, which they found was intended to be done in a way that minimized the impact on individual employees, and which took into consideration proposals from employees.
PUBLIC HEALTH CARE DEFENDERS WIN RIGHT TO PRESENT EVIDENCE SUPPORTING MEDICARE

THE BC SUPREME COURT HAS RULED THAT A GROUP OF PUBLIC HEALTH CARE SUPPORTERS THAT INCLUDES THE BC HEALTH COALITION AND CANADIAN DOCTORS FOR MEDICARE, MAY SUBMIT EXPERT EVIDENCE IN A BC CASE THAT IS ATTEMPTING TO DESTROY CANADA’S MEDICARE SYSTEM.

Dr. Brian Day and his for-profit clinics began a legal attack on Medicare in 2009 that could turn Canada’s health care system into a US-style system. The case will go to court in September, 2014.

The clinics are trying to strike down provincial health care legislation that limits the for-profit delivery of medically necessary services, claiming that this violates the Canadian Charter of Rights and Freedoms.

HSA has played a key role in supporting the BC Health Coalition as they coordinate a group of public health care supporters who are intervening in the case. This intervenor group has now been granted the right to submit the following expert evidence:

- Marie-Claude Prémont, Professor of Law at the École Nationale d’Administration Publique will provide evidence on how restraints on Medicare after Quebec’s Chaoulli case undermined patient access to care; and
- Dr. David Himmelstein, Professor in the CUNY School of Public Health at Hunter College and visiting Professor of Medicine at Harvard Medical School, will provide evidence on the US health care system, including the negative impacts that for-profit health care and health insurance could have in Canada.

This is an important win for public health care, and HSA members can be proud of the role they have played in achieving it.

HSA PRESIDENT VAL AVERY PRESENTS BC HEALTH COALITION CO-CHAIR RACHEL TUTTE WITH A CHEQUE FOR $20,000 FROM THE NATIONAL UNION OF PUBLIC AND GENERAL EMPLOYEES. THE MONEY WILL HELP THE BCHC’S LEGAL DEFENCE OF CANADA’S PUBLIC HEALTH CARE SYSTEM, WHICH IS CURRENTLY FACING AN ATTACK FUNDED BY OWNERS OF FOR-PROFIT CLINICS.
NURSES’ BARGAINING UNDERWAY

HSA RETURNED TO THE BARGAINING TABLE MAY 15 TO REPRESENT REGISTERED PSYCHIATRIC NURSES AS THE NURSES BARGAINING ASSOCIATION KICKED OFF CONTRACT TALKS.

HSA is represented at the table by Larry Bryan, an RPN at Haro Park Centre and a member of the Provincial Occupational Health, Safety and Violence Prevention Committee, and the Provincial Violence Prevention Curriculum Working Group.

Also representing HSA RPNs is experienced negotiator Dani Demetlika, a senior labour relations officer at HSA.

Preliminary talks led by the Nurses’ Bargaining Association were held May 15-16. Bargaining is expected to resume in the fall.

“I want to congratulate the whole bargaining committee, and particularly HSA’s representatives on the bargaining team – Margaret Blair-Cook from the Central Okanagan Child Development Association, and Sharon Geoghegan, HSA Labour Relations Officer, for advocating so strenuously on behalf of HSA members covered by this collective agreement,” Avery said.

After a decade of declining wages, the agreement sees community social service workers significantly close the wage gap with other sectors. Three-quarters of workers who have comparability to community health will receive wage increases of up to 11.5 per cent by 2019.

Members without comparability to community health, such as Early Childhood Educators and Family Service Workers, will be eligible for a wage increase in line with the rest of the sector, subject to the results of a classification review.

CSS MEMBERS RATIFY AGREEMENT

AGREEMENT INCLUDES WAGE ADJUSTMENTS AND PAY INCREASES

Community social service workers have voted by 85 per cent in favour of ratifying a new collective agreement that includes wage adjustments and increases of up to 11.5 per cent over five years.

The new collective agreement will be in effect from April 1, 2014 until March 31, 2019.

Community Living workers ratified the tentative agreement by 83 per cent. General Services ratified by 91 per cent, and Aboriginal Services ratified by 63 per cent.

“Community social service workers help and support the most vulnerable members of our communities. This agreement delivers some long-deserved recognition and respect that reflects their contribution to BC,” said HSA President Val Avery.

JOSEPH SEBASTIAN ELECTED TO BOARD

DERRICK HOYT RE-ELECTED IN REGION 2

Joseph Sebastian has been elected as the Regional Director to represent members from Region 4 on the HSA Board of Directors. His two-year term began in April.

Sebastian is a medical radiation technologist at Vancouver General Hospital and has served as a general steward at Vancouver General Hospital for over 10 years.

Derrick Hoyt has been re-elected as the Regional Director to represent members from Region 2 on the HSA Board of Directors. Hoyt is a pathologist’s assistant at Royal Jubilee Hospital in Victoria. He has served in many roles as an active union member for the past 25 years, including as a Member at Large and Steward. He was first elected to the Board of Directors in a November 2013 byelection.
HSA MARKED THE RECENT EXPIRY OF THE CANADIAN HEALTH ACCORD WITH A PUBLIC FORUM ON MENTAL HEALTH SERVICES.

“For the past three years, Prime Minister Harper has refused to meet with the provinces to discuss the renewal of the health accord. That means already strained health care service in BC will suffer,” said HSA President Val Avery at the April 1 event.

Panelist Dan Bilsker, a psychologist with 25 years experience as a consulting psychologist in a hospital psychiatry unit, noted that the mental health system tends to devote intense resources to the population with the most severe needs, leaving little focus on people with moderate needs – where early intervention can make a big difference.

“It’s remarkable that we don’t routinely teach people psychological self care,” he said. “The challenge is to make it accessible.”

Ingrid Sochting, an HSA member and chief psychologist for Richmond mental health outpatient services, pointed to communications challenges in mental health care delivery as an area that can be improved. A siloed approach often means that work being done through in-patient service isn’t communicated to programs delivering out-patient service to the same individual.

“It is important to have better communication vertically. Decision makers could benefit tremendously if they actually consulted with front line workers who have a wealth of experience and truly are clinical experts,” she said. She added that front line workers should feel supported when they speak up about challenges they identify in the system.

Pam Owen, an HSA union activist and recreational therapist who works in mental health programs, joined the panel to tell her story – as a health care provider and as the parent of a child who struggles with mental health and addictions issues.

As a parent, she has spent the past several years advocating for support for her daughter, who started high school as a bright, athletic and involved student, but who quickly began to spiral out of control. In contact with the school, Owen did not find support. They concluded that her daughter just wasn’t trying hard enough. And that she wasn’t interested.

“The joy of supporting her with her sporting and music events had been replaced by police visits, psychiatrist visits, family counselling... She was in and out of emergency. Then she would be released. No assessment. No information. Without any support. And zero follow up.”

“There needs to be a cultural shift allowing direct care staff, family members and consumers to drive the services. They need to feel valued and know that they have a voice,” she said.
HSA President Val Avery welcomes a record number of new delegates on Day One.

CONVENTION 2014

Over 300 delegates from around the province gathered in April to vote overwhelmingly in favour of continuing the fight to defend public health care, the work of the Committee on Equality and Social Action, and to work to protect and improve services for patients and clients who count on the health care and community social services HSA members deliver.

“Time and again, members spoke about the need to speak up for those who don’t have a voice,” said HSA President Val Avery. “The resolutions, and the debate over each of them, all fundamentally addressed the need to back our words with concrete action.”

Delegates elected Avery president in a contest against one other candidate, Joe Sebastian. “Now it’s time to put the commitment of our delegates into action” she explained. “It starts with the development of a strategic plan for the future of our union, a plan that calls for the participation of all members.”
PRE-CONVENTION WORKSHOPS GAVE DELEGATES A CHANCE TO PICK UP PUBLIC SPEAKING SKILLS, LEARN MORE ABOUT CONTRACT INTERPRETATION, AND BUILD LEADERSHIP THROUGH WORKPLACE DIVERSITY. NEW DELEGATES WERE GIVEN TIPS FOR MAKING THE MOST OF THEIR CONVENTION EXPERIENCE.

And it begins with the regional conferences this fall.”

IN DEFENCE OF CESA
The activities of the Committee on Equality and Social Action inspired some of the most impassioned debate.

The HSA operations budget for 2014-15 had proposed temporarily suspending CESA funding to help make up for the increased cost of recent bargaining, the successful defense of RPN members against a raid by two other unions, and the increased complexity and volume of member servicing needs. Delegates were very concerned about this, and many spoke in support of a resolution to continue to fund CESA.

The debate touched on a number of important issues, exploring the HSA’s commitment to community advocacy and the many social action groups funded by CESA. Delegates considered raising dues on members to pay for CESA funding, and after much thoughtful debate, delegates chose overwhelmingly to support the resolution to fund CESA without raising member dues. The debate has sparked a valuable conversation about how the union can continue this work, a conversation that will continue in the committees and in the workplace.

ACTION TO STOP ATTACKS ON WORKING PEOPLE
Another key resolution spoke to the sustained and unprecedented attack on labour unions by several levels of government in Canada.

Responding specifically to so-called “right to work” laws which would permit dues evasion by members who want to benefit from union contracts without paying their share of dues, the resolution cited the experience of US states where such laws have resulted in lower wages, reduced benefits and gutted pensions for all working people, not just union members. Delegates voted in favour of the resolution to work with the National Union of Public and General Employees and the Canadian Labour Congress to protect labour rights and make the federal Conservative government’s attack on them a key issue in the 2015 election.

HSA plans to take action on this by supporting the All Together Now campaign to defend public services by NUPGE and the CLC’s Together Fairness Works campaign to raise awareness of how communities benefit from unionization. Later this summer, HSA will take part in NUPGE’s Fairness Express, a big green bus travelling across the country to get people talking and tweeting about income inequality.

WE DON’T RAID. WE ORGANIZE.
HSA has successfully defended RPN members against a well-funded and misleading raid campaign by the BC Nurses’
Union and the Union of Psychiatric Nurses, and it's expected they will try again this fall. As a result, delegates were enthusiastically supportive of a resolution reiterating that the practice of raiding undermines the labour movement’s objectives of building trust, co-operation and solidarity, that HSA does not condone raiding, and will vigorously defend against any attempt by another union to raid members of HSA.

SOMEONE HAS TO STAND UP FOR OUR HEALTH CARE

With public health care in Canada facing a serious legal challenge, the federal Conservative government’s refusal to enforce the Canada Health Act, set national standards for essential programs or even negotiate a new Health Accord with the provinces is especially concerning.

A resolution to work with allied organizations to make these issues a big part of the 2015 federal election pointed out that polling indicates that voters want the federal government to play a strong role in ensuring the quality of our health care. Delegates voted in favour, and HSA will continue to work with our national affiliates and groups like the BC Health Coalition to prevent the Harper government from destroying the health care system we all depend on.

ON LINE COVERAGE

HSA posted updates throughout convention on Facebook and Twitter (hashtag #HSA2014). For more information, including photos and quotes from guest speakers and committee presentations, see facebook.com/hsabc (you don’t need a Facebook account to view) or twitter.com/hsabc.

RESOLUTIONS REFERRED

Debate on many resolutions was vigorous, and time ran out before a number of resolutions could make it to the floor for debate. As per the HSA constitution, delegates referred these resolutions to the Board of Directors for consideration at their first regular meeting following convention. The directors met on May 15, considered the resolutions, and reported to all delegates and HSA stewards on the outcome of the deliberations. Contact your steward if you’d like to know all the details.

GUEST SPEAKERS

Guest speakers included Sarah Laslett from the Washington State Labor Education and Research Center; Larry Brown, Secretary Treasurer of the National Union of Public and General Employees; Jim Sinclair, President of the BC Federation of Labour; and Amber Hockin from the Pacific Region of the Canadian Labour Congress.
Delegates to HSA’s 43rd annual convention elected Val Avery as president. Avery first became president in September 2013, after the resignation of former president Reid Johnson.

In her report to delegates, Avery, a physiotherapist at Royal Jubilee Hospital in Victoria, said HSA members have an opportunity to regroup, build on the union’s capacity, and connect with members in their worksites.

“When I stepped up to the position in September, there was no easing into the work. We were into early bargaining at three tables, we were defending 1200 RPNs from a raid; we were fighting the province’s plans for mandatory flu vaccination; our staff was still working on essential services negotiations and 37.5 hour work week grievances.

“We hit the ground running on all these fronts: we rolled up our sleeves; we pushed back against employers trying to break agreements about the 37.5 hour work week, and an unprecedented team of volunteers stepped up to beat back the unions trying to steal our RPNs,” she said.

An HSA member for 31 years, Avery spoke of her experience not only as an activist in challenging times, but her years of work on the front lines of health care.

“This is my 23rd convention,” she said, “and although I’m excited to be standing on this stage to deliver the presidential address … I am first and always a health care worker.”
HSA established the David Bland Memorial Award in 2007 to celebrate our local activists in occupational health and safety. HSA member David Bland was a vocational counsellor who worked at Richmond Mental Health Services. At the end of an otherwise ordinary workday in January of 2005, as David left his workplace and walked to his car, a former client was waiting in the parking lot - and fatally stabbed David. The events of that day sent shock waves through the industry and exposed the reality of how our workplaces, while usually places of comfort and care, can also be violent.

To honour David Bland’s memory, the union established the David Bland Memorial Award in 2007 to celebrate our local activists in occupational health and safety. With this award, we honour the important work that members undertake as advocates for their colleagues in ensuring we all work in a safe environment.

This year, the award was presented to Heather Sapergia, a medical laboratory technologist at the University Hospital of Northern BC in Prince George, outgoing Region 10 Director, and member of the HSA occupational health and safety committee. Heather has been an HSA activist for many years and has played key roles in all levels of the union including time spent as a general steward, OHS steward, and chief steward. Heather has been active with many HSA committees, has served as a labour council delegate, a constituency liaison and since 2008 Heather has been the HSA Director for Region 10.

Her efforts in support of safer workplaces has helped maintain the HSA’s reputation as a leader in health and safety among healthcare unions in BC. Heather Sapergia has dedicated a large part of her life to making all of our workplaces safer and because of that commitment, HSA is honoured to recognize her with the 2014 David Bland award.
HSA SCHOLARSHIPS 2014

HSA provides members and their children with several scholarships and bursaries for education. Scholarships are adjudicated by the union’s education committee. Applications for 2014 will be accepted beginning in January 2015. Check hsabc.org for details.

SCHOLARSHIP AWARDS

Nirmal Rose Aniyan, child of Rosamma Varghese, RPN, Ridge Meadows Hospital
Paul Cseke, child of Wendy Cseke, pharmacist, Shuswap Health Services
Jessica Dalton, child of Cherie Dalton, family support worker, Campbell River Family Services
Kirsten Alyssa Eagle, child of Kim Perris, medical radiation technologist, Royal Inland Hospital
Corinne Foster, women’s support worker, Dixon Transition Society
Melissa Fung, child of Mayo Fung, pharmacist, BCCA – Vancouver Cancer Centre
Tara Tilana Leigh Paterson, child of Connie Paterson, dietitian, Kelowna General Hospital
Craig Roels, pharmacist, Langley Memorial Hospital
Jill Sukovieff, respiratory therapist, Royal Inland Hospital
Chaoran Zhang, child of Wei Zhang, BCCA – Vancouver Cancer Centre
First runner up: Crystal Karakochuk, dietitian, BC Children’s Hospital
Second runner up: Cara Paley, child of Karen Paley, physiotherapist, Eagle Ridge Hospital

FULL-TIME BURSARY AWARDS

Matthew Adams, music therapist, Langara
Pary-Naz Adamy, child of Ali Adamy, medical laboratory technologist, Ridge Meadows Hospital
Tasha Anderson, child of Karin Anderson, medical laboratory technologist, Abbotsford Regional Hospital
Kaeli Ayers, child of Mandi Ayers, medical laboratory technologist, Bulkley Valley District Hospital
Rene Xavier Bieberdorf, child of Doris Bieberdorf, occupational therapist, Victoria Arthritis Society
Kydree Jade Braybrook, child of Debbie Braybrook, RPN, Vernon Jubilee Hospital
Shayna Bursey, child of Shane Bursey, respiratory therapist, Royal Inland Hospital
Roy Yu-Wei Chen, medical laboratory technologist, Royal Columbian Hospital
Carmen Cheng, child of Helena Sau-Kuen Wan, medical laboratory technologist, UBC Hospital
Kelsey Cosgrove, child of Betty Cosgrove, cardiology technologist, St. Joseph’s General Hospital
Kayli Makenzie Dunk, child of Laura Dunk, medical radiation therapist, St. Mary’s Hospital
Lisa Marie Englehart, child of Geraldine Di Cicco, social worker, Burnaby Hospital
Anna Jayne Hewko, nuclear medicine technologist, Royal Jubilee Hospital
Clarissa Lester, child of Mary Lou Lester, pharmacist, Kelowna General Hospital

PART-TIME BURSARY AWARDS

Arlin Ablaza, medical radiation technologist, Victoria General Hospital
Nimrit Buttar, respiratory therapist, Victoria General Hospital
First runner up: Sandeep Atwal, medical radiation technologist, Surrey Memorial Hospital
Second runner up: Sterling Rae Winter King

ABORIGINAL BURSARY AWARDS

Jodi E. Jones
Phillip Allan Stephens
First runner up: Nicola M. Terbasket
Second runner up: Sterling Rae Winter King
LAURA DUPONT UNDERSTANDS THAT HER COMMUNITY OF PORT COQUITLAM IS ALL ABOUT PEOPLE AND FAMILIES, AND THIS IS MOTIVATING HER TO RUN FOR THE FIRST TIME IN THIS FALL’S MUNICIPAL ELECTION.

“Raising a family and spending over a decade volunteering with various groups in the community has kept me involved in my city, says Dupont. “People make up families and communities, and by making a conscious effort to put people first I feel confident I will make a good city councillor.”

For Dupont, a big part of putting people first is making sure that every family has the opportunities they need. “Being active in minor sports has given me the opportunity to consider the growing number of families who can no longer access such opportunities for their children due to the increasing costs. I feel inspired to work for greater equality so all of our children can have the same opportunities.”

Providing such opportunity has been an important part of Dupont’s work as an HSA member working as a Program Assistant at SHARE Family and Community Services, a community organization that provides support to vulnerable individuals and families in the Tri-Cities area.

Promoting sustainability in her community is another key goal for Dupont. “Port Coquitlam is a wonderful community, with more parks per capita than any other municipality in Metro Vancouver,” says Dupont. “It is a city surrounded by rivers and trails that provide wonderful
recreation opportunities, making it easy to live a healthy and active lifestyle. Port Coquitlam is getting it right and I want to get a seat on council to make sure we stay ‘on track’ and preserve what we have.”

STARTING EARLY KEY TO BEING “READY TO RUN”

“I started to bring together a group of people interested in making positive change in March 2013. A series of small fundraisers allowed me to start raising money and reach out to the community for support,” says Dupont. “Being organized early has helped to alleviate the typical barriers women face that include a shortage of time and money.”

“HSA has also been extremely supportive, providing me with the opportunity to gain valuable campaign experience in different roles within a local campaign during the last provincial election. Learning how to fundraise, canvass, get-out-the-vote and be ready for Election Day was an important experience that helped prepare me to organize my own campaign.”

HSA has also provided Political Action Fund support for Dupont to attend a special candidate training workshop at the Canadian Labour Congress Harrison Winter School, as well as a forum for progressive people serving in elected positions in local government. “Learning about progressive policy ideas and meeting so many people who share the same values was really inspiring. This event was a great chance to understand the ways other municipalities shape policy and build their communities.”

But in the end, for Dupont it all comes back to family and people. “I was hesitant to suggest running for council to my family because I knew we would all have to make sacrifices,” says Dupont. “I have been pleasantly surprised by how truly supportive they are and how incredibly helpful they have been. Though I didn’t expect it, my run for council has made my family stronger and inspired us all.”

“And with support from my family and my campaign team, I have already knocked on almost 1,000 doors to listen and learn about what matters to the people of Port Coquitlam.”

YOUR UNION CAN GIVE YOU A HEAD START

HSA members considering running for municipal, school board or regional district positions this year should make these decisions soon and start working on their campaigns early.

Members may apply for financial support from HSA’s Political Action Fund to attend training, to take paid time off work for their campaigns, and to help with campaign expenses. For more information, please contact Carol Riviere at criviere@hsabc.org.

Members running for election are also encouraged to apply for endorsement from their local labour council. Contact information for labour councils is available at http://www.canadianlabour.ca/pacific-region/labour-council-directory.
OCCUPATIONAL HEALTH AND SAFETY

HSA AND ITS MEMBERS PLAYED A BIG ROLE IN A RECENT EVENT HOSTED BY THE COLLEGE OF REGISTERED PSYCHIATRIC NURSES OF BC.

The CRPNBC’s annual education day, held in Coquitlam this year, focused on the various forms of trauma affecting psychiatric nurses and the people they care for.

Trauma is defined as “experiences that overwhelm an individual’s capacity to cope”, and many people entering psychiatric care have been exposed to trauma and violence. RPNs are also exposed to verbal and physical abuse from clients, aggression from peers, and harassment and bullying from often overwhelmed supervisors. The result can be burn-out, post-traumatic stress disorder, and reduced job satisfaction.

HSA members and staff were on hand to help promote the union’s work on occupational health and safety and other issues of importance to RPNs, and HSA RPN Larry Bryan presented on violence prevention. Bryan is a recipient of the David Bland Award, an honour bestowed on HSA members who show leadership on occupational health and safety issues. The award is named after a vocational rehabilitation counselor who was murdered at his workplace by a former client in 2005.

“I have seen too many colleagues who have been affected by being on the receiving end of a violent incident, either directly or as an observer,” says Bryan.

“As health care professionals we are all helpers. It is what we do. I think sometimes we take better care of those under our care, than ourselves. Sometimes we give ourselves secondary or tertiary importance and over time this drift occurs, and we are not aware of it until something happens. Please take care of yourselves and your co-workers.”

Bryan’s presentation reviewed current developments in violence prevention and emphasized the need to be informed about patients and clients, ask co-workers for help, document all incidents, join the joint occupational health and safety committee in your worksite, and review resources at WorkSafeBC.com.

HSA RPNS ADDRESS TRAUMA AT PROFESSIONAL EVENT

RPNS NICOLE MCINTOSH AND GENELLE SANDBERG WERE ON HAND TO PROMOTE HSA’S WORK

As health care professionals we are all helpers. It is what we do. I think sometimes we take better care of those under our care, than ourselves.
In reviewing my annual member benefit statement (MBS) from the Municipal Pension Plan (MPP), I notice a trend of being just short of a full year of pensionable service over the last few years. This seems odd because I work full-time and have had no absences from work other than my scheduled vacations. My pay slips confirm this. Why would I not get 12 months of pensionable service when I’ve worked the entire year?

A lot of folks are asking this question, partly because the boomers are beginning to retire or starting to pay more attention to their plans. Some are discovering their shift rotations fell short of the full-time equivalent hours in the year, resulting in a shortfall of service. This is particularly true for those who worked extended hours in return for earned days off. Those schedules accounted for statutory holiday pay (unworked) based on 7.2 hours of pay per the collective agreement. If not made up during the annual shift rotation, the ‘stat pay’ shortfall alone would result in nearly a nine-hour shortfall of pensionable service over each calendar year. Other anomalies in these schedules could contribute to a shortfall of service at the end of the calendar year. Members will again have an opportunity to review their current MBS when the 2013 mailing comes in June, or they can check on-line by registering on the ‘My Account’ feature on the MPP website (mpp.pensionsbc.ca).

When the extended work hour schedules were originally negotiated, there was supposed to be a way for staff to make up any shortfalls of hours by drawing from one of their time banks – like vacation or overtime – or working extra hours to compensate for the ‘lost’ hours in the rotation. Or they could simply take it as a leave of absence if they weren’t interested in making up the difference. Judging by the queries we’ve received on this topic, some departments allowed members the opportunity to accommodate the predictable shortfall of the schedule, while others did not. These shortfalls seem more prevalent as payroll and scheduling systems became more centralized, and the practices that accommodated the shortcomings of the extended schedules faded over time. At the time of this writing, your union is actively tracking the shortfall issue in a number of facilities.

Is there anything that I can do now about topping-up my pensionable service for those years?

Definitely. First off, as a full-time employee, you should ask for an explanation from payroll on why your pensionable service accruals were short of a full 12 months of service. While the MBS is prepared by the BC Pension Corporation, the data is collected and submitted by your employer and they are responsible for its accuracy. The MPP rules accommodate some shortfall situations where pay periods or shift schedules fall a certain way during the calendar year, resulting in a shortfall of service. In those cases the service would be ‘topped-up’. However, where there are known schedule deficiencies such as the ‘stat pay’ example described above, the shortfall periods would fall under purchase of service rules; which have a five-year time limit. Existing time banks can be drawn down to make up for ‘lost’ pensionable service up to the five-year limit. You may want to discuss your options with the payroll department once the shortfall of pensionable service has been accounted for.

You might be suffering from ‘lost’ pensionable service.

You can take action to top it up – but don’t wait too long.

If you have a question or concern about pensions, contact dblatchford@hsabc.org.
MEMBER PROFILE

TERRI
TRANSITION HOUSE SUPPORT WORKER

AS A FRONT LINE SUPPORT WORKER AT THE SALT SPRING TRANSITION HOUSE, TERRI IS CONFRONTED DAILY WITH THE GRIM REALITIES OF VIOLENCE – AND YET SHE FINDS HER WORK UPLIFTING.

The women who come to the transition house, which provides temporary shelter as well as advocacy and support for women and their children fleeing abusive situations, are hurt, scared and vulnerable. Some of them have been trapped in abusive situations for years. They have every reason to feel helpless.

“But then you see this change,” says Terri. “It’s like seeing a flower blossoming. She gains self confidence and self esteem, she is empowered to go out and do things on her own, get a job, get training, find a place to live. Even though sometimes this takes a long time, still, just the prospect of it is exciting – thinking about what these women can accomplish now that they are free.”

Professionals like Terri are dedicated to helping vulnerable women, and to help protect their privacy, and the safety of staff, we’re withholding Terri’s last name.

She loves the variety her job offers. “There are so many different things I do in a typical day. There’s a bit of paperwork, one-on-one client support, crisis calls, consulting with other professionals, attending house meetings...it’s very well-rounded.”

Terri started her education at North Island College, but moved back to Salt Spring Island before completing the final practicum for the community support worker stream at Camosum College. She completed her diploma through Vancouver Island University and returned to work as a home support worker, then moving into community support work before finding her way to the transition house, where she’s now worked for seven years.

She did her final practicum at Salt Spring Island Community Services, working in the mental health drop-in and youth drop-in centres to complete her diploma.

Terri is also the very first chief steward for her workplace. The staff at Salt Spring Transition House joined HSA last November after previously being a non-unionized site.

“Becoming chief steward wasn’t my intention,” she says. Indeed,
The women who come to the transition house are hurt, scared and vulnerable.

“But then you see this change,” says Terri. “It’s like seeing a flower blossoming.”

she seems to have a knack for falling into roles that are just right for her. “I was at the meeting and for some reason I put my name in the hat. And actually, I love it! I like roles that require effort. I gravitate to this sort of thing. When we talk about the issues, I’m immediately interested. And I feel I’m needed.”

The main benefit of joining HSA, she says, is knowing there is support for staff if needed. “We now have an excellent executive director and an equally great manager. But for a period of time there were a lot of shifts and changes where staff didn’t feel they had the right support. We also had positive experiences, but now we know we have the support we need in place.”

The Salt Spring house joins two other transition houses in HSA.

Terri says a health sciences-oriented union is a good fit for her workplace.

“We are supporting women in their health and well-being, and we are partners with doctors, nurses, psychiatrists, counselors and others. It is helpful to have a good understanding of post-traumatic stress disorder, depression and mental illness,” she explains.

The transition house is still in the midst of learning about and applying the collective agreement. Like any change, this one brings some challenges, says Terri. “One issue is that we want to encourage more permanent positions rather than casual ones, which affects us because we have a lot of relief staff. So we are looking at creating positions rather than keeping people in the relief pool, but then some relief workers are worried they’ll be out of a job. Luckily, our employer has a great attitude and wants to make this work smoothly for everyone.”

On a personal level, she says, she is thrilled with the HSA benefits package. “I have three dependents, and I have found the benefits package expensive. So I can see right away how joining HSA is helping me.”

Being in HSA ultimately means Terri and her colleagues can provide better service to their clients – and Terri can continue to see the flowers blooming.
ON MAY 1ST, A GROUP OF 20 HSA MEMBERS FROM AROUND THE PROVINCE AND FROM A RANGE OF PROFESSIONS SPENT THE DAY IN VICTORIA.

Meeting with key decision makers in the areas of health care, community social services, skills training, job creation and advanced education, they raised HSA’s profile and discussed issues of importance to members with cabinet ministers and opposition critics.

President Val Avery, and several regional directors and constituency liaisons, started the day by hosting a breakfast for MLAs. Members and their MLAs sat together in regional groups, getting to know each other, and discussing local issues.

Members then attended Question Period in the Legislature, where HSA was introduced by Minister of Health, Terry Lake. Several members were also introduced by their local MLAs.

Throughout the rest of the day, HSA members met in small groups with cabinet ministers, MLAs from all parties, and influential ministry and political staff, to discuss issues of concern to our members.

HSA’s main message was that BC has serious shortages in several health science professions that are contributing to longer wait lists, reduced quality of patient care, and increasing health care costs. HSA representatives outlined the need for more training and clinical practicum spaces, as well as for competitive wages and benefits to be able to recruit and retain these scarce professionals.

“The was our second full day of direct meetings with government and opposition members,” said HSA President Val Avery. “Our first was two years ago, and even though there are a lot of new members in this government, it was clear that these meetings, our advertising and other efforts are having an effect. Government members knew much more about HSA and the work of our members. They were pleased to meet with us, interested in our message, and while we didn’t agree on everything, the meetings helped establish a constructive relationship and a way forward.”

If you’d like to get involved in the Constituency Liaison program, contact Carol Riviere at criviere@hsabc.org.

NUCLEAR MEDICINE TECHNOLOGIST TONYA HARFORD (RIGHT), ONE OF HSA’S CONSTITUENCY LIAISONS, SPOKE WITH MLAS FROM ALL PARTIES, INCLUDING THE NDP’S JUDY D’ARCY (LEFT) AND SELINA ROBINSON.

TAKING YOUR MESSAGE TO VICTORIA
“WE NEED TO BE THE BC FEDERATION OF LABOUR – NOT THE DOWNTOWN VANCOUVER FEDERATION OF LABOUR.”

That’s how Jim Sinclair, BC Fed president, opened The fourth BC Federation of Labour Regional Conference was held June 6-7 in Kimberley. He was remembering the words of a delegate to the convention that saw the Federation move from annual to biannual conventions.

Chaired by Jackie Spain, president of the East Kootenay and District Labour Council and a member of HSA, the conference focused on the theme of “Good Jobs – Strong Communities.”

The first day of the conference, delegates learned about the region’s rich labour history and about the successes of a United Steelworkers Union local in the region that has been working to increase members’ engagement with their union by reaching out to members and connecting the dots about their union’s relevance to their work.

“We have to take the union meeting to our members, we can’t wait for them to come to us,” said Alex Hanson, president USW Local 9346

Delegates also heard from a panel about successful campaigns including the BCGEU’s Children and Risk campaign, the Together Fairness Works campaign led by the Canadian Labour Congress, work by Green Jobs BC to bring environmental and labour sectors together, the BCFED’s progress in electing progressive leadership at the municipal level and the BC New Democratic Party’s fight against ismantling of the Agricultural Land Reserve.

The second day of the conference, delegates worked on developing specific plans for activities in the region – including engaging members at their local worksites, planning for municipal elections, and organizing a Labour Day event.

Before participating in the conference, HSA President Val Avery and Vice President (and Region 9 board member) Janice Morrison spent an afternoon meeting with HSA members at East Kootenay Regional Hospital in Cranbrook, and heard about a number of issues related to health and safety and staff shortages.

REGIONAL CONFERENCE GIVES BCFED A PROVINCE-WIDE FOCUS

KIMBERLEY EVENT ATTRACTS 80 LOCAL DELEGATES
HSA’s Board of Directors is elected by members to run HSA between Annual Conventions. Members should feel free to contact them with any concerns.

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David Bieber

(from left) Anne Davis, Brendan Shields. Derrick Hoyt, Bruce MacDonald, Heather Sapergia, John Christopherson, Anita Bardal, Val Avery, Allen Peters, Marg Beddis Janice Morrison