

THE REPORT

HEALTH SCIENCES ASSOCIATION OF BRITISH COLUMBIA

NO. 2
VOL. 38
June 2017



HEALTH CARE IN THE BALANCE

Dramatic provincial election results put NDP's Horgan in charge, and create the opportunity for a new focus on public health care in BC

AN HISTORIC OPPORTUNITY

IT WASN'T EASY TO FIGURE OUT WHAT WAS GOING ON DURING ELECTION NIGHT, BUT IT WAS APPARENT RIGHT AWAY THAT BC HAD VOTED FOR CHANGE.

The unprecedented results left the province in a sort of limbo for several weeks and even now, as this issue goes to print, a lot of questions remain unanswered. But we do know that a solid majority of British Columbians voted against the incumbent BC Liberals, a message bolstered by voter turnout that was higher than in previous years. It's a message that has been answered by the unprecedented governing agreement between the NDP and the Green Party.

With just a single vote's advantage over the BC Liberals, this NDP-Green arrangement is potentially very fragile. An illness, a policy disagreement or even a missed flight could bring it all down, triggering new elections long before the customary four-year term is done.

Nevertheless it's an historic opportunity to deliver the change so many people voted for.

The NDP-Green agreement could deliver significant changes to the way politics is done in this province, changing the way we vote and finally modernizing the political fundraising rules to end abuses by big money players.

After 16 years of falling behind, the NDP-Green agreement could bring long-overdue increases to BC's minimum wage, income supports for the most vulnerable citizens, funding for public schools and finally address housing affordability.

After 16 years, there's a long list of problems to fix, and between the delicate balance of this arrangement and the many demands on a limited budget, the NDP and their Green Party partners face daunting pressures.

So it's heartening to note that both parties have placed a lot of emphasis on improving public health care in BC. With their shared commitment to establishing a ministry for mental health care, implementing a mental health strategy for youth, expanding community care, reducing the cost of prescription drugs and shortening wait times, I'm confident they are mindful of the need to make health care a priority

And if they don't, we'll be sure to remind them. Because while governments may change, HSA's commitment to holding them accountable does not.

And after a decade of wage austerity that's made shortages and wait lists worse, it's time for change. That means a return to reasonable, liveable wage increases for the public servants that keep our hospitals and community social services running.



“It’s heartening to note that both parties have placed a lot of emphasis on improving public health care in BC.”



**“The inclusiveness of HSA
warms my social worker heart.”**

“I was amazed to learn that over 100 different professions belong to HSA. Within that diversity there is camaraderie and recognition we are all stronger together. The voice of every profession belonging to HSA is supported and allowed the opportunity to shine. I feel it whenever I interact with stewards, labour relations officers and our president. I feel honoured to be part of the HSA family.”

CAROL, SOCIAL WORKER, ROYAL INLAND HOSPITAL



JAKI THORNHILL AND HER DIETITIAN COLLEAGUES TOOK FIRST PRIZE

DIETITIANS WIN MEMBER VIDEO CONTEST

VIDEOS SUBMITTED BY RESPIRATORY THERAPIST, PHARMACISTS WIN PRIZES; VIDEOS VIEWED OVER 40,000 TIMES ON FACEBOOK

WINNERS OF THE HSA MEMBER VIDEO CONTEST WERE ANNOUNCED AT CONVENTION IN APRIL.

Dietitian Jaki Thornhill, assisted by her colleagues, submitted a 30-second spot that showcased the importance and range of dietitian services, and earned the most likes on Facebook.

Respiratory therapist Greg Rolins took second prize for his video on respiratory therapy services in the Kootenays (top right).

Pharmacist Sean Spina won third prize for his video on the work of hospital pharmacists (lower right).

Winners were determined by the number of “likes” they could gather on Facebook. All were posted for exactly one week, in March, and entrants were encouraged to send as much traffic as they could.

All videos are available on Facebook or YouTube.





VAL AVERY



JAS GIDDHA

VAL AVERY RE-ELECTED HSA PRESIDENT

RADIATION TECHNOLOGIST JAS GIDDHA ELECTED REGION 7 DIRECTOR

Physiotherapist Val Avery was re-elected to serve as HSA president for another two years at the union's annual convention in Vancouver in early April. More than 300 delegates attended the convention.

"I've been active in the labour movement for over 30 years and let me tell you I have never once stopped being amazed at the skill, dedication and passion of our members," Avery told delegates.

"Every one of us comes into this union as an individual, often with a singular focus on the many challenges of our diverse and unique professions. But then something happens.

"We begin to see what binds us together, and what we can achieve when we are united. I am grateful you have given me your trust and confidence, and I pledge to earn it every day as we make the changes needed to build a stronger union in challenging times."

Following the convention, the

Board of Directors re-elected Janice Morrison, a physiotherapist at Kootenay Lake Hospital, to serve as vice president and Cheryl Greenhalgh, a medical radiology technologist at Royal Columbian Hospital, to serve as secretary-treasurer.

In Board of Director elections held earlier in the year, Jas Giddha was elected to serve a two-year term as a member of HSA's Board of Directors. He will be representing HSA members in Region 7 from several worksites, including Surrey Memorial, Peace Arch, Abbotsford, and Chilliwack Hospitals, and the Fraser Valley Centre for Child Development.

Giddha is a medical radiation technologist at Surrey Memorial and Peace Arch Hospital, and has been involved in the union since graduating from Thompson Rivers University and starting as a casual in 2012.

He acted as an assistant chief steward for the past three years, and is a Member-at-Large, serv-

ing on the union's Resolutions Committee.

He also acts as an HSA Constituency Liaison in Surrey-Panorama, explaining health care issues and lobbying for a better system with the local MLA. Outside HSA, he served as the student council president for Thompson Rivers University (TRU) and is a member of the board of directors of the British Columbia Association of Medical Radiation Technologists (BCAMRT).

John Christopherson was re-elected to serve a two-year term as a member of HSA's Board of Directors. Region 5 represents HSA members at several worksites, including Children's and Women's Hospital, Vancouver and Fraser Valley Cancer Centres, Sunny Hill Health Centre, Open Door Group, and the Centre for Ability.



HSA PRESIDENT VAL AVERY (CENTRE) WITH DON GIESBRECHT, CEO OF THE CANADIAN CHILD CARE FEDERATION, RANDI BALL, CERTIFIED EARLY CHILDHOOD EDUCATOR, EVE EDMONDS, EDITOR OF THE RICHMOND NEWS AND PANEL MODERATOR, AND ELAINE FERGUSON, CHAIR OF THE NOVA SCOTIA CHILD CARE ASSOCIATION.

SUPPORTING EARLY CHILDHOOD EDUCATION

HSA PRESIDENT VAL AVERY WAS INVITED TO SPEAK AS A SPECIAL GUEST AT THE EARLY CHILDHOOD EDUCATORS OF BC CONFERENCE IN MAY.

HSA served as a sponsor for the conference and Avery took part in a panel discussion on building professionalism.

“As a union, we are committed to working to advocate for the many professions we represent, including early childhood educators,” said Avery in her remarks.

“HSA has historically had an interest in supporting the ECE sector and the people who work in it. In 2011, HSA’s Board of Directors endorsed the Community Plan for a public System of Integrated Early Child Care and Learning, advanced by ECEBC and the Coalition of Child Care

Advocates of BC.”

An important element of that plan is the vision for building workforce capacity, with a Bachelor of Early Childhood Education as a new educational standard, a diploma as a minimum credential for providers, and support for existing ECEs and providers to upgrade their qualifications.”

Avery spoke of how the plan would create Early Years Centres that would provide the core of services delivered by the new public early care and learning system. These would be required to:

- cap parent fees at \$10 per day for full time and \$7 per day for part time
- meet improved staff education and wage levels at an average of \$20 an hour plus 20 per cent benefits

- welcome all children, including those with special needs
- address demonstrated community need
- offer play-based programs consistent with BC Early Learning Framework or Aboriginal frameworks.

The conference also saw HSA member Glenda Burrows acclaimed for a position on the ECEBC board of directors.

Burrows, a senior child care licensing officer at Central Community Health Centre, also serves as chief steward and as a constituency liaison. She is a strong supporter of early intervention services for children with special needs.

BC SUPREME COURT DEALS ANOTHER BLOW TO NURSES' UNION

DECISION UPHOLDS RULING THAT 2014 RAIDING TACTICS BY NURSES' UNION PUT RPNS AND PATIENTS AT RISK

IN EARLY MARCH THE SUPREME COURT OF BC DISMISSED AN APPLICATION FROM THE BC NURSES' UNION FOR JUDICIAL REVIEW RELATED TO THEIR FAILED RAID APPLICATION ON REGISTERED PSYCHIATRIC NURSES (RPNS) AT ROYAL INLAND HOSPITAL IN 2014.

In a judicial review, a Supreme Court judge reviews the decision that has been made by an administrative tribunal, in this case the Labour Relations Board (LRB).

The LRB ruled that the Nurses' Union had put patients and RPNs at risk by engaging in workplace raiding activity in direct violation of the Labour Relations Code when a professional BCNU staff organizer entered a locked psychiatric unit to engage in raiding activity.

The original LRB panel found that the presence of Nurses' Union organizers was evidence of unacceptable danger to vulnerable members of the public. The Supreme Court of BC, in dismissing this application, affirms the original decision.

In the court's March 3 decision, The Honourable Madam Justice Morellato wrote, "The key rationale underlying the Board's dismissal of BCNU's certification application was not punitive in nature but was based on the objectives of deterrence and the protection of the public."

HSA President Val Avery applauded the Supreme Court of BC's decision and dismissal of every Nurses' Union argument put before the court.

"HSA RPNs have been subject

to aggressive poaching activity from paid professional Nurses' Union organizers for five consecutive years now. The BC Labour Relations Board issued an unprecedented decision, by dismissing a Nurses' Union raid application, that prioritizes the safety of the most vulnerable members of the public and the

right to a safe workplace for our members."

HSA is committed to the principle of organizing the unorganized while continuing to defend our members and protect the rights of RPNs to have an independent union that recognizes and stands up for their unique specialization.

BC NURSES' UNION WITHDRAWS RAID APPLICATION ON VERNON JUBILEE MEMBERS

The BC Nurses' Union has withdrawn its application to raid registered psychiatric nurses working at Vernon Jubilee Hospital.

After RPN members of HSA had expressed a number of concerns about tactics being used by organizers from the Nurses' Union, HSA filed an unfair labour practice complaint with the BC Labour Relations Board. The LRB has ruled that the Nurses' Union is prohibited from making any further raid attempts at Vernon Jubilee Hospital for 22 months.

"We're very proud of the work done by local members, who worked hard to stop these raids," said HSA President Val Avery. "Raiding that divides nurses from

their colleagues, and puts care for the patients at risk, is just not acceptable. We hope the leadership of the Nurses' Union will come to realize that raiding only makes us all weaker, but until then HSA will continue to fight hard to defend our members and the patients they serve."

The BC Nurses' Union attempted to raid HSA RPNs at three worksites in 2016 and failed in all cases. In addition to suffering the ignominy of withdrawal at Vernon Jubilee Hospital, they were unable to gather enough supporters to hold votes at Phoenix Centre and Overlander Extended Care Hospital in Kamloops.

NEW JOINT BENEFITS TRUST NOW IN PLACE

NEW SYSTEM WILL PROVIDE GREATER PROTECTION FOR HSA MEMBER BENEFITS

APRIL 1, 2017 MARKED THE DAY THAT THE NEW JOINT HEALTH SCIENCE BENEFITS TRUST TOOK OVER STEWARDSHIP OF MEMBERS' HEALTH AND WELFARE BENEFITS, INCLUDING LONG TERM DISABILITY.

The move from an employer-controlled fund to a jointly trustee fund with equal representation from unions and employers was negotiated in 2014 Health Science Professionals contract bargaining.

While the change was seamless, members may notice a change to employer-issued paystubs. Prior to April 1, 2017 paystubs showed the contribution payment as "LTD." Starting the first pay period after April 1, paystubs showed the contribution payment as "JBT Benefit Cont." or "JBT Benefit Contribution."

The sample paystub below

shows the LTD line as no deductions taken in this pay period, but a year-to-date total of \$202.03, and the JBT Benefit Cont. deduction of \$35.03 in this pay period, with a year-to-date total of \$35.03. The deduction is not a new deduction, simply a change in name.

Since 2006, members covered by the Health Science Professionals Bargaining Association (HSPBA) contract have paid 30% of the LTD benefit premium, with the employer paying 70%. The LTD premium amount paid fluctuates slightly based on usage and cost of the plan.

With the transition to the Joint Health Science Benefits Trust (JHSBT), members' and employers' interests will be represented by an equal number of HSPBA and HEABC trustees. Once the JHSBT is fully operational, trustees will be looking for opportunities to further enhance and improve health benefits for members.

FRASER HEALTH PAYROLL SERVICE
330 EAST COLUMBIA STREET
NEW WESTMINSTER, BC V3L 3W7



STATEMENT OF EARNINGS AND DEDUCTIONS

PAY PERIOD END DATE: APR 06, 2017

DEDUCTIONS

EE
EI REGULATE
CPP
PENSION RPP
UNION DUES HSA
TAX
LTD
JBT BENEFIT CONT.

CURRENT PERIOD

YEAR TO DATE

75.00	292.40
4.00	16.00
245.00	1775.00
177.00	2791.17
80.75	473.34
2179.00	9000.00
0.00	202.03
35.03	35.03
2746.78	2478.94

TOTAL DEDUCTIONS

LOOK FOR A CHANGE ON YOUR PAYSTUB - THE SAMPLE ABOVE SHOWS A \$35 DEDUCTION FOR THE JOINT BENEFIT TRUST (JBT). IT'S NOT A NEW DEDUCTION, JUST A CHANGE IN NAME FROM THE LTD DEDUCTION, WHICH IS NOW \$0.



NDP LEADER JOHN HORGAN SPOKE TO DELEGATES AT HSA'S APRIL CONVENTION

WHAT DOES ELECTION MEAN FOR HSA?

NDP-GREEN GOVERNING AGREEMENT PLEDGES MAJOR IMPROVEMENTS FOR PUBLIC HEALTH CARE SYSTEM

NOBODY CAN REMEMBER A PROVINCIAL ELECTION LIKE THIS ONE.

Most election results can be called about an hour after the polls close on election day. This one left people guess for weeks.

And while the exceptionally close results mean it's hard to predict what will happen in the longer term, the governing agreement between the NDP and the Greens holds significant promise for health care and community social services in BC.

Both parties share a number of important goals. The NDP and the Greens have pledged to

make mental health treatment a priority by establishing a ministry responsible for mental health and addictions, and both have promised greater focus on early intervention services. Other shared goals include action on the opioid crisis, improvements to seniors care, expanded community care, reducing the cost of prescription drugs, reducing wait times and investing in early childhood education.

While the NDP-Green agreement aims for four years of government, they have but a single vote's advantage over the BC Liberals. That makes for a particularly fragile situation that could precipitate an election

well in advance of that.

HSA's strategy for government relations and contract negotiations will shift accordingly, and seek the best outcome for members and the people we care for – no matter what happens next.

A MEMBERSHIP MOSAIC

HSA DIVERSITY SURVEY REVEALS RANGE OF BACKGROUNDS, BARRIERS AND BELIEFS

RECOGNITION OF DIVERSITY IS NOW ESSENTIAL TO THE HEALTH OF OUR SOCIETY AND THE STRENGTH OF ORGANIZATIONS.

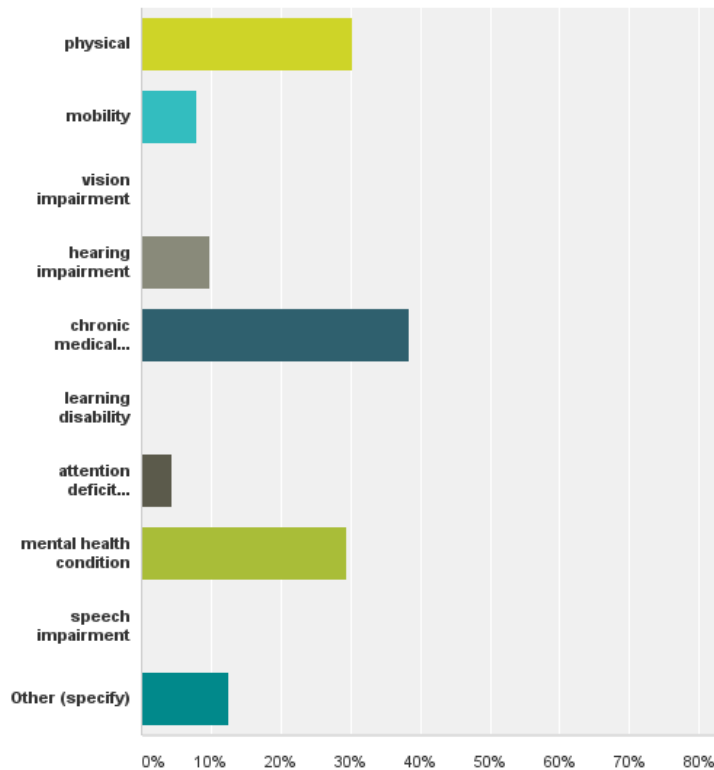
Today, leading institutions seek to understand the unique experience of their members in order to better represent and serve them.

HSA has long sought to understand and respect the diversity of our members, and in March, almost 800 HSA members voluntarily took part in the first-ever diversity survey. The results provide a fascinating snapshot of the HSA membership, and will be used to ensure HSA is inclusive and welcoming to all its members.

“HSA understands that our members are more than the work they do,” said President Val Avery. “We all come from different backgrounds, see the world in different ways, and have different dreams. By asking questions about this, we can be more inclusive, build stronger bonds, and ultimately be a stronger, more united union.”

Results show a few things that are to be expected - that our members come from a wide range of cultural and linguistic backgrounds - and a few things that would have been harder to guess - that age and body

Q9 What type of disability condition(s) do you consider yourself to have?



14 PER CENT OF RESPONDENTS INDICATED THEY HAVE A DISABILITY CONDITION THAT HAS AN IMPACT ON THEIR LIFE AT WORK

“WE ALL COME FROM DIFFERENT BACKGROUNDS, SEE THE WORLD IN DIFFERENT WAYS, AND HAVE DIFFERENT DREAMS. BY ASKING QUESTIONS ABOUT THIS, WE CAN BE MORE INCLUSIVE, BUILD STRONGER BONDS, AND ULTIMATELY BE A STRONGER, MORE UNITED UNION.”

image discrimination is almost as common as discrimination based on gender, or that members feel that being Canadian is more important to their sense of identity than the country they came from or the language they speak.

Members who responded also say they like to spend time with family, engage in outdoor activities, professional development, travel and hobbies.

SURVEY HIGHLIGHTS

GENDER: 83 per cent of respondents identify as a woman, and 16 per cent as a man – very close to the actual membership composition, and suggesting the survey results are reasonably accurate. About 1 per cent of the respondents identify themselves as transgender or gender fluid.

AGE: The largest group of members (43 per cent) is aged 50-59. 26 per cent are aged 40-49, 20 per cent are aged 30-29 and 12 per cent are older than 60. 8 per cent are under the age of 30.

CHILDREN: 66 per cent of respondents have no kids living at home, and of the 34 per cent who do, most have just one or two children.

LANGUAGE: HSA members speak over 40 different lan-

guages. In addition to English, members speak to friends and relatives in ASL, Afrikaans, Amharic, Arabic, Cantonese, Czech, Danish, Dutch, Farsi, Finnish, French, Gaelic, German, Gujarati, Greek, Hebrew, Hindi, Hokkien, Ibo, Italian, Japanese, Javanese, Katchi, Korean, Kutchi, Llocano, Malay, Mandarin, Norwegian, Pashto, Polish, Portuguese, Punjabi, Romanian, Russian, Serbian, Shona, Slovenian, Spanish, Swahili, Swedish, Tagalog, Toisan, Turkish, Ukrainian, Visayan, Welsh, and Yoruba. Cantonese and French are essentially tied as second most common language used by members.

SEXUALITY: 84 per cent of respondents identify themselves as heterosexual and 6 per cent identify as lesbian, gay or queer. 3 per cent identify as bisexual, 1 per cent as asexual, 5 per cent preferred not to answer.

DISABILITY: 14 per cent of respondents indicated they have a disability condition. Of those, 39 per cent suffer from a chronic medical condition, 30 per cent from a physical condition, 29 per cent from a mental health condition and 10 per cent from hearing impairment.

RELIGION: 50 per cent of member respondents identify with Christianity, and 37 per cent with no religion. The remaining 13 per cent of respondents identify with religions including

Baha'i, Buddhism, First Nations Spirituality, Hindu, Islam, Judaism, Paganism, Sikhism, and Taoism.

IDENTITY: When asked what is important to their own sense of identity, respondents were most likely to name their country of residence – being Canadian – as central to their sense of self. Second most important was their community of interest (see below), followed by their country of origin, gender, language, cultural background, sexual orientation, religion and disability.

DISCRIMINATION: Asked if they had ever experienced discrimination, 41 per cent of member respondents said they had been subject to gender discrimination. 31 per cent had experienced age discrimination, 27 per cent discrimination based on body image, and 26 per cent based on race or skin colour. Another 26 per cent said they had not experienced discrimination.

COMMUNITY OF INTEREST: When asked about their most important shared group activities, respondents were most likely to select activities with family and kids or outdoor/active lifestyle activities. This was followed by continuing education/professional development, travel, hobbies, public issues and neighbourhoods.



2017 CONVENTION



KEY RESOLUTIONS PASSED BY DELEGATES

Delegates debated resolutions on a number of issues calling for improved services for the patients and clients they serve as health care and community social services workers across the province, including support for a poverty reduction plan, improvements in mental health services, and action to prevent violence in health care and social services workplaces. BC NDP Leader John Horgan and Canadian Centre for Policy Alternatives Director Seth Klein spoke to delegates about the importance of investing in public services in British Columbia.

Delegates also supported a number of resolutions to set the direction for the union for the coming year, including directing the union to consider hiring additional labour relations officers to keep up with growing demand for services, and the continued development and expansion of education programs to support stewards working to represent members in protecting their collective agreement rights.

Delegates again debated and rejected the question of moving away from a system of representative democracy for the election of president, voting to keep the current system of electing the president at conventions every two years. Delegates also rejected a proposal to limit the terms of office for elected union representatives.

BC Federation of Labour President Irene Lanzinger and National Union of Public and General Employees Secretary-Treasurer Elisabeth Ballerman both addressed the convention, and reiterated their support for HSA's efforts to protect members from a raid led by the BC Nurses' Union.

TOP FIVE THINGS YOU MISSED BY NOT GOING TO CONVENTION

1. Charlie Demers, comedian
2. Edith MacHattie and Sarah Chapple brought cute kids
3. Super fun photo booth
4. All you can eat free apples, bananas
5. Catching up with colleagues while waiting 20 minutes for Hyatt elevator system



BC NDP LEADER HORGAN HUNG OUT WITH MEMBERS PRIOR TO HIS SPEECH TO DELEGATES.

“I’VE GOT YOUR BACK”

BC NDP LEADER JOHN HORGAN SPEAKS TO CONVENTION DELEGATES AT OUTSET OF PROVINCIAL ELECTION CAMPAIGN

BC NDP LEADER JOHN HORGAN PLEDGED TO FIGHT FOR PUBLIC SERVANTS DURING A SPEECH TO CONVENTION DELEGATES IN MAY.

“The people in this room, and the people outside this room, who work every day for a living, have not had someone watching their back,” said Horgan. “I will have your back, and I’ll be fighting for you every step of the way.”

Horgan also assured delegates that HSA members were not the only ones suffering from a decade of government-imposed wage austerity that is undermining public services and leaving individuals struggling to keep up with growing costs.

“Wages have been flat in British

Columbia for the last decade. You know that. You’re not getting significant increases. You’re not getting rewarded for the work that you do, you’re not being rewarded for your role in the economy, nor are other workers, private sector and public sector. Wages have been flat and costs have been going up. We need to have an economy that works for everyone.”

The BC NDP leader said his connection with HSA runs deep. he was first encouraged to run by an HSA member and former union board member who then worked on his first campaign in 2005.

“Bob Phillips instilled in me a genuine understanding of the diversity of HSA and all the work that you do in communities right across BC. It’s not just

“Wages have been flat and costs have been going up. We need to have an economy that works for everyone.”

in acute care of course, it’s in communities protecting people, helping them when they need that help.”

Horgan spoke to delegates just days before the election was formally called on April 11. The dramatic results of the election on May 9 still had not been finalized as this issue goes to print.



CT TECHNOLOGIST KAREN HAMILTON AND X-RAY TECHNOLOGIST BRENDA HAUCK RECEIVE THE 2017 DAVID BLAND AWARD FROM REGION 7 DIRECTOR MARG BEDDIS.

DAVID BLAND AWARD

BRENDA HAUCK, X RAY TECHNOLOGIST AT SAANICH PENINSULA HOSPITAL AND KAREN HAMILTON, CT TECHNOLOGIST AT SAANICH PENINSULA HOSPITAL, SHARED THE 2017 DAVID BLAND AWARD.

Hauck and Hamilton were recognized for their efforts to reduce injuries related to the transport of emergency patients.

"We work at a community hospital, near Sidney, in Medical Imaging," said Hauck. "Technologists were working on their own and were required to transport, transfer or otherwise assist emergency patients with no other staff support on evenings and weekends."

Concerned by the number of injuries caused by this, Hauck and Hamilton contacted HSA, who helped them tailor and deliver a

survey of affected members.

"This survey showed that two-thirds of us had workload related injuries. Not only had 100 per cent of us worked in pain, but 100 per cent of us also felt we did not have the support to carry out our work safely."

A working group was formed. But by July, three more technologists were off with workload related injuries.

"Now at a crisis level, we were unable to provide full services due to a lack of staff which directly affected patient care as some had to be transported to Victoria for CT scans after hours. Those of us who were relatively healthy felt the pressure to work additional hours.

In October a new process for patient preparation, patient transport and transferring patients was implemented. This also included direct technologist to nurse communication by

voice. More importantly, this led to the implementation of an island wide policy that stated two staff members are required to transfer immobile patients who are on a hovermatt.

"Prior to this, we had been directed to do this alone."

Although improvements have been made at the site, workload grievances have now been referred to arbitration.

"We and our co workers have been diligent in recording vast amounts of workload data which management seems to require. We would be happy to provide the template we created to record workload statistics to anyone who may be interested. And we must thank our co workers, who while overworked, took the time to record how overworked they were."



HSA Health Sciences Association of British Columbia
 Published by YK Staff [?] · Yesterday at 9:30am · 📍

The best part of Nursing Week is seeing these happy faces 😊 RPNs from St. Paul's Hospital, 8C. #pizzaparty #HSAnursesweek #NursingWeek2017

3,023 people reached Boost Post

👍 Like 💬 Comment ➦ Share HSA

👤 Nadia Santoro, Tamara Mihic and 24 others Chronological

1 share

Mary Hatlevik Great to see a group of RPN's affiliated with HSA. I'm a retired RPN and was a proud HSA member. Happy Nurses Week.
 Like · Reply · Message · 1 · Yesterday at 9:41am

Sharon Evans Me too! 🥰🥰🥰
 Like · Reply · Message · 1 · Yesterday at 12:05pm

Julie Sandhu Cute!
 Like · Reply · Message · 19 hrs

Dalyce Byette Awesome!! I had RPN Nicole from St. Paul's drive all the way to Kamloops to give me an hsa swag bag for nurses week!! I was stoked!! Happy nurses week 😊
 Like · Reply · Message · 1 · 16 hrs

Nicole McIntosh It was great to meet you today 😊
 Like · Reply · Message · 1 · 15 hrs

PROMOTING OUR PROFESSIONS

HSA IS DEFINED BY THE DIVERSITY OF THE PROFESSIONS WE REPRESENT.

So it's only natural that we're increasingly turning to a diverse crew of volunteers to tell our story to each other, and to the public.

In the past few months, laboratory technologist **Brooke Carter** (top left), dietitian **Whitney Hussain** (top, second from left), psychologist **Christine Korol** (top, second from right) and audiologist **Estephanie Sta. Maria** (top right), have – along with pharmacist **Sean Spina**, registered psychiatric nurses **Kiran Rama** and **Dennis Hernandez** and music therapists **Annie Yip** and **Angie Ji** – taken over the HSA Twitter feed, Instagram profile and Facebook newsfeed to celebrate professional recognition days or just pay tribute to the hard work that goes on, every day, in our health care and community social service worlds.

Often entertaining, always authentic, they've educated the public, the media and other professions with unique insight into their specialized and essential work. If you'd like to get involved and promote your profession, contact us at info@hsabc.org.



DIETITIANS AT VANCOUVER GENERAL HOSPITAL

LETTER TO THE EDITOR

On behalf of the Registered Dietitians from Vancouver Acute Services (Vancouver General Hospital, UBC Hospital, and GF Strong) and the Dietitians' Day Planning Committee, we would like to thank you for your contri-

bution towards our Dietitians' Day Celebration Luncheon that was held on March 10, 2017. We greatly appreciated your support in providing the swag for door prizes and the \$200 monetary contribution to our group.

There were approximately 50

Dietitians that attended the event. Thank you for helping to make our Dietitians' Day celebration a great success!

With appreciation,

Janet Dukowski, RD
Clinical Dietitian

REMINDER TO HSA RPNS: SUBMIT RECEIPTS FOR 2017 COLLEGE FEES

THE DEADLINE FOR SUBMISSION OF RECEIPTS IS JUNE 30, 2017

HSA's registered psychiatric nurses are reminded again that as a result of a settlement reached under the Nurses Bargaining Association, members may submit receipts for registration or renewal of their college fees as proof of eligibility for damages payment by the Nurses Bargaining Association.

The damages that are being put toward the fees paid to the CRPNBC arise out of compensation paid by the employer for failure to implement the 2012 safe staffing provisions.

To claim for your damages pay-

ment, pay your college fees to the CRPNBC and scan and send your receipt to collegefees@hsabc.org. Receipts may also be mailed to HSA c/o College Fees, Health Sciences Association of BC, 180 East Columbia Street, New Westminster, BC, V3L 0G7, or faxed to HSA at 604.515.8889 or 1.800.663.6119.

Please include your name, work-site, mailing address and current email address.

Please note this does not constitute reimbursement of your registration fees or CRPNBC fees. The money has been

awarded as damages, and the Nurses Bargaining Association takes the position that the payment is not wages, so will not issue T4 slips or deduct taxes. We recommend that you may want to seek the advice of a tax professional in complying with your legal obligation, having regard to your unique personal, employment, and financial circumstances.

The deadline for submission of receipts is June 30, 2017 and cheques will be processed following the deadline.

VIOLENCE IS PANDEMIC AMONG HSA MEMBERS

BY GERI GRIGG
HSA OCCUPATIONAL HEALTH
AND SAFETY OFFICER

ON MARCH 13, THE TORONTO STAR PRINTED AN ARTICLE CALLING THE INCIDENCE OF VIOLENCE TOWARD HEALTH AND SOCIAL SERVICES WORKERS AN EPIDEMIC.

HSA disagrees. The incidents of violence occurring in all HSA worksites, without a common cause is a pandemic.

An epidemic happens when a single cause of an outbreak is identified such as in an outbreak of salmonella traced to a single meal or CI. Difficile from a hospital. If the source is identified and the cases managed, the outbreak can be contained.

Violence in HSA worksites is a pandemic. Emergency departments, psychiatric units and residential care facilities are at high risk because of the patient population they serve. Patients may be less able to control their emotions, are under tremendous stress and are less cognisant of what they are doing that might contribute to a higher risk for workers.

High-risk patients and clients cross the paths of HSA members in all our worksites: transition houses, child development centres, outpatient clinics and community health centres as well as acute and residential care.

“Controlling a disease pandemic requires appropriate and sustained interventions. Controlling the violence pandemic requires the same.”

Controlling a disease pandemic requires appropriate and sustained interventions. Controlling the violence pandemic requires the same.

That is why HSA has successfully lobbied the Ministry of Health to create a Provincial Violence Prevention Strategy and why we have pressured the health authorities to complete the training of members in high-risk areas and continue to advocate for training of all healthcare workers. HSA has filed grievances and supported OHS Stewards to complete 21-day recommendations under the Occupational Health and Safety Regulation. And finally, that is why we have raised the issue of Violence Prevention with the Community Social Services Sector to ensure workers are trained in prevention and the facilities in which they work are not just functional, but also reduce the risk of violent attacks.

UPDATE ON PROVINCIAL VIOLENCE PREVENTION STRATEGY

The provincial government will shortly be releasing a new strategy to reduce violence against health care workers.

The strategy, crafted in consultation with HSA following HSA President Val Avery's 2015 call for a new approach to fight increased incidence of violence, is expected to be rolled out after the new provincial government is sworn in during the summer.

SAFETY IMPROVEMENTS AT ROYAL JUBILEE

Upgrades that have been under discussion for several months are now moving forward for Psychiatric Emergency Services at Royal Jubilee Hospital.

Renovations include a new nursing station with higher walls and improved sightlines, addition of a third secure room. The plan also includes staffing adjustments to add three additional nurses, one coordinator, one health care aide and one protection services officer.

The improvements are the result of a recent violence prevention risk assessment which involved several HSA members. Changes are expected to increase safety for staff but also improve service for patients and families.

If you have a question about occupational health and safety, contact ggrigg@hsabc.org.

SO WE HAVE A JOINT BENEFITS TRUST: NOW WHAT?

BY DENNIS BLATCHFORD
HSA PENSIONS AND BENEFITS
ADVOCATE

I received HSA's recent clarification on payroll changes and the reference to members' long-term disability contributions now being directed to the new Joint Health Sciences Benefit Trust (JHSBT). Since the JHSBT is now receiving benefit contributions, I'm wondering what members might expect now.

The new JHSBT did come into effect on April 1, 2017; precisely one year later than initially projected. There were numerous reasons for the delay – the slow pace of bargaining at other tables, a lack of transparency and disclosure etc. – but the final push from December on resulted in the parties agreeing to terms for the JHSBT. The agreement came without the assistance of a mediator, which is preferable when negotiating trust agreements given the long-term nature of these arrangements. This allowed the joint JHSBT board of trustees to commence their new governance role in late March in preparation for the revised April 2017 start date.

While the negotiation process took longer than expected, the extended time frame did provide for a more thorough and

meticulous approach to negotiating the all-important terms for the JHSBT going forward. After the ink is dry, changes to the trust agreement require consent of plan sponsors (Health Sciences Professionals Bargaining Association and Health Employers Association of BC); hence all the effort on the front end. What this means for members is that we've created a sufficiently robust funding model with important benefit plan features like risk-sharing and surplus accumulation. This approach allows for the JHSBT to acquire and accumulate surpluses previously not permitted under Canadian Revenue Agency rules, and get better tax treatment on investment income. In effect, we were able to create the best health and welfare trust arrangement allowable under current rules.

Modelled under recent benefit plan changes in the auto industry in Ontario, we believe that the JHSBT is the first of its kind in BC. So, after two years of hard work and due diligence we are happy to report that we have great confidence for the JHSBT going forward, and for the security and peace of mind that those important benefits deliver for members every day. As for changes, trustees will spend the foreseeable future working on policy development, reviewing service contracts, and other bricks and mortar priori-

ties for the JHSBT. Only when trustees get an opportunity to turn their minds to reviewing the current benefit program will any changes be contemplated. And as we are now under a joint administration framework for the JHSBT, changes will be by consensus going forward.

So for now, can we expect the status quo to continue?

Yes. Trustees have a lot of work ahead of them in the coming year. There is much to consider. The benefit industry is undergoing rapid change as new technologies challenge the traditional business model of benefit administration. As reported in past columns, we are very interested in finding efficiencies and using any savings for the benefit of members. As an example of this rapid change, it was recently reported that a claimant made a vision care claim via cell phone. The claim was checked for compliance, run through 21 fraud scenarios, approved for payment, and deposited in the claimant's bank account – in just over three seconds! This is the kind of efficiency we will be interested in for the operational side of the JHSBT, and the kind of speed and convenience we would like to see for members. Please stay tuned.

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



HINDLE FIRST CONTACTED THE UNION TO SOLVE A FEW WORKPLACE ISSUES, WOUND UP IMMERSSED IN ISSUES AS PART OF HSA'S ORGANIZING TEAM.

JOHN HINDLE

RESPIRATORY THERAPIST

WHEN RESPIRATORY THERAPIST JOHN HINDLE FIRST GOT INVOLVED IN HSA AS A SHOP STEWARD, HIS GOAL WAS FAIRLY MODEST.

"I just wanted to help resolve some problems at my workplace," says Hindle. But once he started learning about union issues, Hindle wanted more.

A year or so later, Hindle found himself fully immersed in HSA activity as a member of HSA's anti-raid team, an experience he describes a deep dive into the power and meaning of unions.

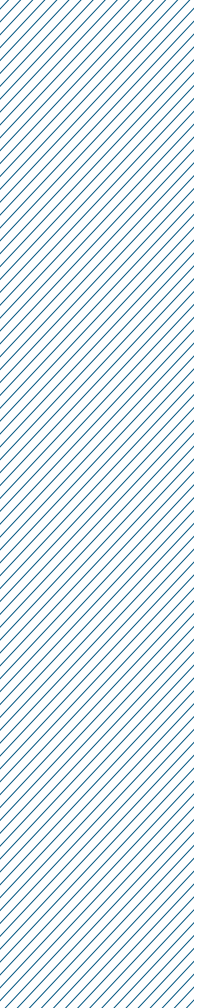
"I'm excited to be part of the labour movement. This work changes people's lives," he says.

Hindle's initial interest in HSA began soon after he started working at Surrey Memorial Hospital in 2014, after graduating with a diploma in Respiratory Therapy from Thompson Rivers University. He loves his job for many reasons: "It's fast-paced, acute and exciting. It's life or death. It's newborns to end stage. And I love being part of a multidisciplinary team."

But the workload and the 12-hour shifts tired him out, and he could see that there were ongo-

ing problems between management and workers. He became a steward in 2015. Intrigued by the deeper social justice elements of unions, he enrolled in HSA's local leadership training workshop, and in 2016 joined the anti-raid team.

"The team was originally created to combat raiding by the BC Nurses' Union," explains Hindle. "The raiding had been going on since 2009 and HSA organizers responded with limited resources. But in 2016, at convention, there was an emergency resolution to create and fund a multi-disciplinary task force."



“I’VE HAD CONVERSATIONS WITH PEOPLE WHO BROKE DOWN CRYING BECAUSE OF THE AMOUNT OF WORK THEY WERE EXPECTED TO DO.”

The anti-raid team, consisting of six staff organizers and four union members on full-time leave, started out by asking a key question: why were HSA members leaving the union?

“We found that at the core of the problem was a lack of engagement,” says Hindle. “So many people had workplace issues and weren’t letting HSA know. Members didn’t know what the union did. They said no one was visiting or reaching out to them. So then when another union comes and offers the stars and the moon, it sounds attractive. So the best defence against raiding was to increase engagement in our membership.”

The anti-raid team knew that workload was a huge challenge all over BC, and so chose that as a focus, launching a campaign that had the team travelling the province, visiting worksites and talking with thousands of members. Workload was the main topic but there was room to

discuss any issues on members’ minds.

“Once we said we were there to listen, it was amazing what we uncovered - bullying, dangerous workplaces, people burning out. People were internalizing these things. I’ve had conversations with people who broke down crying because of the amount of work they were expected to do, or because they blamed themselves and thought they weren’t good enough. I’ve talked to people working unpaid overtime because they are scared of losing their jobs if they reach out for help,” says Hindle.

By showing up to listen, Hindle and his team changed the dynamic and reignited trust in HSA. “It opened the floodgates to more grievances, giving us more to do, which is great,” he says.

As well, this campaign is contributing to a revitalization of HSA’s core values, says Hindle. “I’m excited because I’m getting

to see changes. HSA is moving in a progressive direction. There are a lot of awesome ideas around revival of the basic tenets of trade unions, around how to engage in different areas of people’s lives, and how to engage in a range of ethical and social justice issues.”

Hindle remains excited by union involvement and has many plans for an active future with HSA. “I put forward a resolution at convention to secure permanent funding for the Anti-Raid Team, and it passed. I plan to continue my work with the HSA Engagement Team as the role of the team evolves, I’ll continue to fight the raids by the BC Nurses’ Union as long as they practice such predatory behaviour, and I’m looking forward to opportunities to get further involved with HSA as part of the new Young Worker’s Initiative created at this year’s convention.”



REMEMBERING JACKIE HENWOOD, HSA PRESIDENT 1988-93

JACKIE HENWOOD, AN OCCUPATIONAL THERAPIST AT G.F. STRONG REHABILITATION CENTRE, SERVED AS PRESIDENT OF HSA FROM 1988 TO 1993.

Henwood is fondly remembered for the achievements of her tenure. The Report magazine archives note that “she was elected into the position of president in 1988 and faced the task of binding the fragmented Executive Council of that year into some semblance of unity.”

“It is impossible to forget or ignore the support and faith she put into that difficult job. It was the foundation of her five years as president and it was a robust and encouraging beginning on which she built a more confident Executive and developed a

more prominent position for the union – not only in the labour community of BC, but in a wider scope of health care on both the provincial and national levels.”

Then, as now, HSA was forced to grapple with seismic changes to health care funding. During her term, the federal government downloaded a significant portion of funding.

“This is how downloading works,” explained Henwood in an address to HSA members. “Ottawa passes legislation ending cash transfers to the provinces and creates a big hole where the money used to be. The provincial government passes a budget that fails to meet the shortfall and creates a big hole where adequate hospital funding used to be. The hospital board passes a mo-

tion to close beds and impose layoffs and creates a big hole where services and jobs used to be. That is downloading.”

In summing up her time as president, Henwood pointed to HSA’s increased ability to see the connection between protecting members at the bargaining table and protecting public services in the wider world. Agreements hard-won in the face of downloading and layoffs spurred by provincial health reform were, in her words, a “symbol of the increasing overlap between our interests as health care workers and those of the public in maintaining and protecting public services.”

Henwood retired in 2003. She passed away in March.



HSA STAFF PROFILE

HERE TO SERVE MEMBERS LIKE YOU

Name: Andrew Longhurst

Job title and department: Researcher and Policy Analyst, Communications

What you actually do, in your own words: Monitoring government policy, conducting and publishing hard-hitting policy research and analysis that supports HSA members and strengthens our public health care system. Developing progressive health care policy solutions with the Canadian Centre for Policy Alternatives, BC Health Coalition, fellow unions, advocacy and professional organizations.

Why this matters: Universal, high-quality public health care services need to be defended and expanded. It's important we know how government decisions affect our health care system and HSA members. Public-interest policy research, with a focus on evidence-based public solutions, is one of the most powerful tools in the fight against privatization.

Secret talent unrelated to job: Radio broadcaster and podcaster. And I make a mean fish taco!

Literary, TV or movie character most inspiring to you: Amy Goodman, host of the award-winning independent news program Democracy Now!, for her commitment to powerful storytelling through journalism.

Job before HSA: Researcher at the Hospital Employees' Union

Crappiest job you've ever held: Working minimum wage at a movie theatre. Okay, the free movies were great, but not the minimum wage.

Interesting thing you did to help a member in the last week: Analyzing survey responses to support HSA's Workload Campaign that will shed light on the detrimental effects that heavy workload, long waitlists, and program cuts have on patient care.

Scariest situation you found yourself in: I've had a number of close encounters biking in Vancouver, but thankfully, nothing serious.

Your perfect day looks like: A good cup of coffee, a sunny day, and reading a good book on the patio.

Currently binge-watching: House of Cards, again

Longest you've ever been awake: Red-eye flight from San Francisco to New York. I'll never take another red-eye!



“I feel privileged to be part of HSA.”

The staff not only advocate for workers' rights and safety but they go above and beyond advocating for issues that make a difference for members. They lobby the government regularly on the need to increase early intervention services for children with additional needs, and in the last few years they have trained CDC workers like me to meet with elected officials and advocate directly on issues that matter to child development centres in BC.”

**TERRI, SUPPORTED CHILD DEVELOPMENT CONSULTANT
STARBRIGHT CHILDREN'S DEVELOPMENT CENTRE, KELOWNA**