2020 ANNUAL REPORT





ON THE COVER (L-R):
Jessica Azmand, Family Support Worker
Anita Zangeneh, Family Support Worker
Nadia Contreras, Supervisor
Jacquelyn Currie, Family Support Worker
Julianna Hunt, Counsellor

SHARE Family and Community Services Society

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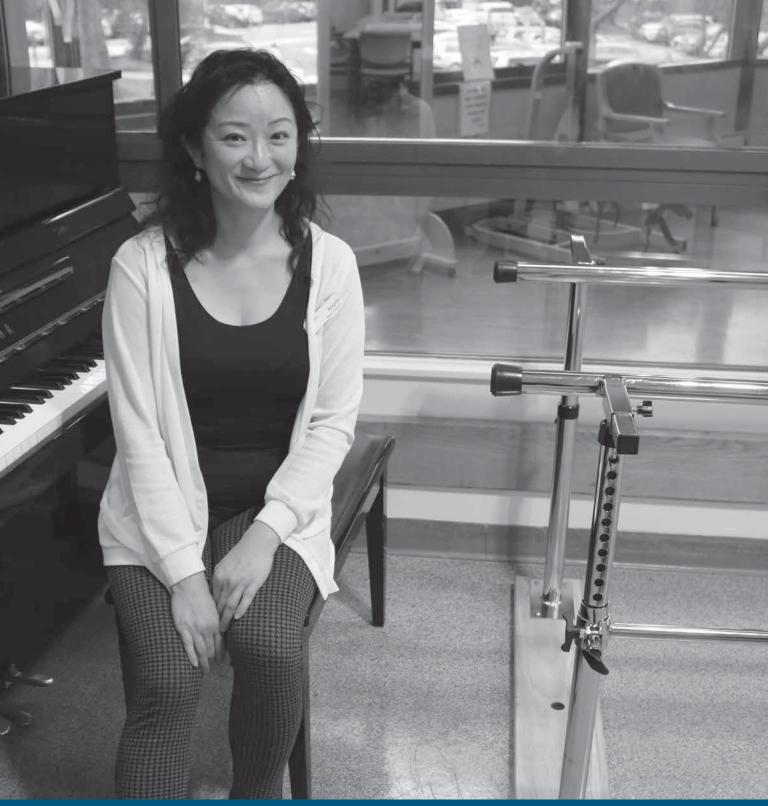
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Angela Wan Music Therapist, St. Vincent's Hospital

EXECUTIVE REPORTS

REPORT OF THE PRESIDENT

We can't do good work if we aren't healthy.

HSA members have been clear that issues with shortages and workload have taken a toll on their mental health, and we have spent much of our time since our last convention working to ensure our members' psychological health and safety at work.

This work has taken many forms, from member-powered campaigns on presumptive coverage to working with government to secure funding for new facilities and more training seats.

We've also started looking to the future, drafting a new strategic plan and starting the conversations about the impact of climate change on population health.

I'm proud of what we've accomplished over the past year, and I look forward to our discussions at HSA's 2020 Convention.

LOBBYING

Our previous campaigns on workload and shortages, along with this year's presumptive coverage campaign, all share a focus on the potential impacts of work on our mental health. HSA members' mental health is as important as our physical health, and I'm encouraged by the progress we are making on these issues.

Change takes so long, but we are seeing movement. We are working with a government that has, in the space of two and a half years, done an amazing amount of work. We are starting to see the benefits: capital projects that will lead to better working facilities; an increase in training seats for occupational therapy, physiotherapy, diagnostic sonography, and cardiovascular perfusion; and a new method for addressing workload. This government also under-

stands where we are coming from when we talk to them about presumptive coverage, and we're working to make sure we are included.

Over the past year, I've been impressed by HSA members' ability and willingness to advocate for themselves and their colleagues. Hundreds of members took time from their busy lives to take part in the presumptive coverage campaign, and as a result we are making real progress on the issues of psychological health and safety and mental health. Thank you to all those who participated.

I want to single out three members who were so gracious in sharing their stories about mental health in our advertising campaign to promote presumptive coverage. Anne Davis, a transition house coordinator on Vancouver Island, Emmanuel Samson, a respiratory therapist in the Lower Mainland, and Easter Tocol, a social worker from the Lower Mainland, helped make a real difference in delivering the message to government – both through our advertising campaign and in direct lobbying meetings with the Ministers of Health and Labour.

We are also excited about the Occupational Health and Safety Organization that came out of the last round of bargaining. HSA has been an active participant as this group picks up where the former agency OHSAH left off before being dismantled under the previous government. The new organization is tasked with:

- Establishing institutional systems for implementing OHS objectives, including, sharing information, data and experience across the sector;
- Promoting a safe and healthy work environment and organizational safety culture through prevention of injury initiatives, safe workloads, safe work practices and healthy workforces, including pilot and demonstration programs; and

Over the past year, I've been impressed by HSA members' ability and willingness to advocate for themselves and their colleagues. Hundreds of members took time from their busy lives to take part in the presumptive coverage campaign.

 Preventing and reducing the incidence of injuries (physical and psychological) and occupational diseases.

LOOKING TOWARD THE FUTURE

HSA is the union of choice for health science and community social service professionals, and we want to ensure that we continue to provide our members with the best possible service. To help us achieve our goals, we will spend time in 2020 reviewing and renewing the union's strategic plan, and have already started the preliminary work with a survey of our members earlier this year.

Research staff at HSA are engaged in two important research projects that will be completed in 2020, and will help inform our planning for the coming years. The preliminary findings from our rehabilitation services research confirm that shortages in these professions, and decades of a privatization agenda, have taken a toll on the services British Columbians need. Our research into the experiences of racialized workers in health care and community social services continues. This research will help the union develop useful resources for challenging racism at work, in its subtle and more overt forms. We still have a long way to go to make workplaces across BC safer, healthier, and more equitable for all.

We also expect to see our union continue to grow as new construction at hospitals including Surrey, St.



Val Avery

Paul's, Royal Columbian, Cowichan and other locations will drive demand for more health care services, including the services delivered by HSA members. The union is also growing thanks to the work of our organizing team and successful certification drives that recently resulted in staff at two Canadian Mental Health Association worksites voting unanimously to join HSA.

As we look to the future, we see that our membership is getting younger, with 30% of members now aged thirty-five and under. As part of ensuring there are opportunities for young workers in our union, we've struck a Young Workers' Advisory Group to ensure the voices of young workers in HSA are heard. This year we also offered a "What's Age Got to Do with It?" workshop that looked at how we work cross-generationally on our shared values and goals.

It is also important for us to engage in the discussion around climate change. We know that climate change affects population health; just look at the effects of recent wildfires here in BC, as well as in Alberta and Australia. We have reached out to our sister union, HSA Alberta, to discuss how to support our members when they are impacted by wildfires in the communities where they live and work.

As part of this climate work, our board has approved a resolution calling for a climate change lens to be applied to decision-making at all levels of government. There is a role for our union to play in ensuring decision-makers are aware of the mental health impacts of climate change, and I am looking forward to a panel focused on climate change at our upcoming convention to spark discussion about the role HSA members, individually and collectively, play in moving the dial on climate change.

NATIONWIDE

At NUPGE's triennial convention, held in Winnipeg last June, HSA brought forward resolutions regarding a ban on all paid blood product donations, increasing the length of medical E.I. benefit coverage, medically supervised drug consumption sites, and affordable accessible childcare. We were excited to have the opportunity to promote our Period Promise campaign and get unions from across the country engaged on the issue of period poverty. The convention was held on the centennial of the Winnipeg General Strike, and our delegates had the opportunity to learn about this time in Canadian labour history and to participate in events around the 100th anniversary.

As the new co-chair of NUPGE's Canadian Health Professionals Secretariat, which works to raise the profile of health science professionals across the country, I am working with my colleagues across the country to revitalize the work of the committee, as there is a need for increased lobbying on behalf of health science professionals at the national level.

HSA and NUPGE, along with the Canadian Labour Congress, continue to push for a national Pharmacare program. HSA members travelled to Ottawa to participate in the CLC Pharmacare lobby day in February, and Pharmacare was also the subject for member engagement during October's federal election.

As we look to the future, we see that our membership is getting younger, with 30% of members now aged thirty-five and under. As part of ensuring there are opportunities for young workers in our union, we've struck a Young Workers' Advisory Group to ensure the voices of young workers in HSA are heard.

PROFESSIONAL DEVELOPMENT

This has been a fantastic year for professional development. Building on last year's success of attracting a \$3 million professional development fund for health science professionals from the Ministry of Health, in bargaining we were able to secure a continuing \$400,000 annual education fund to ensure health science professionals can continue to improve their skills. This is in addition to a \$115,000 professional development fund specific to RPNs.

Professional development and continuing education are important for our members to stay current with best practices in their professions in an evolving health care system. As reported by Executive Director Jeanne Meyers in her report to members, the professional development funds have been fully disbursed to members. Demand remains high and staff are working diligently to process applications and disburse funding.

PUBLIC HEALTHCARE

As a leading health care union, HSA continues to defend our public health care system. We are active

members of the BC Health Coalition, which does vital work to strengthen public health care for all British Columbians, and we are proud of HSA member Edith MacHattie who has been co-chair of the Coalition since 2014.

We have been watching the Dr. Brian Day case closely, and supporting the work of the legal team with funding and strategic advice, including the publishing of an op-ed in The Tyee, which received national exposure. The CEO of the for-profit Cambie Surgeries Corporation is challenging the constitutionality of key provisions of the Medicare Protection Act, which protects our universal health care system. The trial has gone on for a very long time, and closing arguments were completed in February.

As we look forward to HSA's 50th anniversary as a union, which is coming up in 2021, we will be reflecting on where we have come from and where we are going. We can be proud of our accomplishments over the past half-century and confident in planning the path ahead. I look forward to working with you, our Board of Directors, and our allies to create a bright future for our members.

Respectfully submitted,

Val Avery HSA President

PRESIDENT'S ADDENDUM

As this Annual Report, focused on the work of the Health Sciences Association in 2019 and early 2020, was about to go to press for publication and distribution at the union's 49th annual convention, the COVID-19 pandemic turned the world on its head.

We were weeks away from bringing together more than 350 health care and community social services workers to an in-person convention as news of the spread of the virus continued around the world and in British Columbia.

March 11, HSA's Board of Directors postponed indefinitely the union's annual convention, slated for April 1-3, 2020 at the Hyatt Regency Hotel in Vancouver. In the following days BC's Provincial Health Officer Dr. Bonnie Henry introduced orders restricting gatherings, and BC, Canada, and the rest of the world entered a period unprecedented in our lifetimes. Today, physical distancing measures continue, the second wave of the pandemic is upon us, and we are heading into influenza season, which annually sees an increase in illness and hospitalizations. While work continues on vaccine development, measures remain in place world-wide to try to limit the spread of the virus.

Throughout the spring and summer, the union's Board of Directors met frequently to keep apace of the impact the pandemic had on HSA members working on front lines of health care and community social services.

The union redirected staff efforts to support members. Staff with labour relations expertise from the classifications and education departments were reassigned to support members with workplace issues and to staff a COVID-19 phone and email hotline seven days a week. Occupational health and safety was a top priority, and we increased staffing from one to two OHS advocates.

We maintained a thorough and detailed "frequently asked questions" resource on the union's website,

and our organizers reached out to Chief Stewards or primary contact at each of the union's chapters to ensure they knew they had access to the resources and supports we put in place.

Much of the rest of the union's business was put on hold. Grievances and arbitrations were suspended as employers and the Labour Relations Board restricted labour relations business to the bare minimum – addressing only the most serious of issues; the union's extensive education programming was suspended; and local chapters restricted in-person meetings.

While I know I will miss the feeling of solidarity and camaraderie our inperson conventions always bring, I know that we will be stronger for the focus we will bring to the issues important to HSA members.

As the months passed and Dr. Henry's leadership helped the province navigate through the first wave of the pandemic, and a gradual reopening of the province, HSA, too, began to resume operations in our new normal.

Our education staff undertook the massive challenge of moving the union's education programming from in-person to online. Our OHS staff completely revamped the biannual OHS Stewards Conference to deliver an online conference with a focus on CO-VID-19, the lessons learned, and the challenges to come.

Classifications staff resumed the work on the overhaul of the HSPBA classification system negotiated in the last collective agreement, and labour relations, disability management and legal staff resumed the work on grievances and arbitrations that had been put on hold.

By the Labour Day weekend, as a province we were resuming our regular activities – albeit in new and uncharted ways. And the union's Board of Directors rescheduled the postponed 2020 convention on November 16 and 17.

Our convention this year will be like none before it.

We are working hard to hold a convention that meets our constitutional requirements and gives delegates opportunities to provide direction for the coming months.

It will be a new experience for us all. An online meeting will not replicate an in-person convention. The technology we are all adapting for use in our everyday work and personal lives is no substitute for face-to-face interaction. We will have a pared-down agenda that focuses on debating and deciding on the resolutions that set the course of work for the union in the coming months.

I thank our Resolutions Committee in advance for the work they will be doing to ensure the important business of the union – contained in the 80-plus resolutions submitted by chapters for debate at our 49th Annual Convention -- is conducted as expeditiously, smoothly, and as thoroughly as possible in these circumstances.

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REPORT OF THE EXECUTIVE DIRECTOR OF LEGAL SERVICES AND LABOUR RELATIONS

This was a year in which we delivered a collective agreement for health science professionals with significant gains. In all bargaining units where HSA holds certifications, we were able to maximize our gains available under the Public Sector Employers' Council (PSEC) mandate, introducing improvements to address parity concerns and begin the necessary process of upward wage adjustment. We anticipate that this work will be ongoing over the next collective bargaining cycle.

2019 was a year of stability in the legal, labour relations, classifications and disability management departments. Steadily increasing membership was matched by increased resources available throughout the union.

DELIVERING FOR MEMBERS THROUGH A STRONG LABOUR RELATIONS APPROACH

We are very pleased to welcome Norah Miner as Membership Services Coordinator moving up from her previous role as Assistant Membership Services Coordinator (AMSC). She is supported by AMSCs Alyson Warner and Colette Barker. The coordinators supervise a team consisting of 14 full-time labour relations officers (LROs) and 5 admin assistants.

Sheila Vataiki provides support to the team as Labour Relations Coordinator and has taken a central position in the Recruitment and Retention Committee and the Workload Committee.

In collaboration with HSA stewards, labour relations officers (LROs) have continued their excellent hard work, handling nearly 1,510 grievance files over the course of the year, opening 1,040 new grievance files and closing 738. Of those closed files, most concluded with a win, negotiated settlement or split win with the employer – a remarkable success rate that resulted in gaining \$609,729 for our members.

In addition to all the various grievance files, our

LROs in servicing handle a large number of member issue files (MAFs), which pertain to daily member matters that require attention. These include general enquiries, schedule changes, restructuring and reorganization issues, respectful workplace issues, harassment investigations, chapter meetings, steward meetings, and education sessions.

LROs also worked with our stewards and members to ratify and implement the provisions of the revised collective agreements. Ongoing issues have involved scheduling, restructuring, discipline and discharge, professional conduct, and respectful workplace matters, as well as systemic problems such as workload and jurisdiction. Leave-related grievances continue to be prevalent, including education, special, and vacation denials.

Over the past year, we have had significant movement surrounding the workload policy grievances filed as a result of the workload campaign.

Grievances regarding workload, scheduling, discipline, and appropriate rates of pay for overtime were also frequently filed throughout the province in 2019. We have also seen an unfortunate uptick in the number of serious OH&S grievances requiring prioritization. These cases involved workplace assaults as well as serious chemical exposure issues, such as formalin (in a lab) as well as diesel (in an annexed building).

Advancing improvements to member workload

While we continue to have a large number of out-



Jeanne Meyers

standing workload grievances across the province, we believe the volume of these grievances contributed positively to the newly negotiated language in the Health Science Professionals Bargaining Association (HSPBA) surrounding workload.

Over the past year, we have had significant movement surrounding the workload policy grievances filed as a result of the workload campaign. We continue to push towards local settlement agreements using the new language in the collective agreement for our many outstanding policy grievances filed as a result of the workload campaign. And we continue to complete the individual workload grievances with resolves tailored to individual circumstances.

We are very close to having a new workload tool ready for implementation, and we will update members by bulletins as we approach a resolution of the workload grievances.

Development of the Steward Portal

One very exciting area of development is the case

management system the HSA Steward Portal. Use of the portal is increasing as stewards and labour relations staff develop familiarity with its features. Issues with privacy were identified during the initial rollout and protocols have been established to safeguard personal information.

2019 was a bridge year as the portal launched using a prototype program. Looking ahead to 2020, the servicing department has set a goal for all new labour relations files to be opened in the portal system with the aim to phase out the older database.

SUCCESSES FROM HSA'S LEGAL DEPARTMENT

The HSA Legal Department consists of six full-time lawyers, one full-time paralegal, and two legal administrative assistants, under the direction of Membership Services Coordinator Tonie Beharrell. We are fortunate to have such experience and expertise in our department.

Legal files

In 2019, 117 new arbitration/member advocacy files and ten Labour Relations Board files were assigned to the legal department. We closed 200 case files. The monetary value of the resolved cases in 2019 exceeded \$185,000 in wages and benefits being paid to members.

We continue to have excellent success in resolving education and special leave grievances prior to arbitration. Of the 70 special leave grievances filed in 2017 with Providence Health Care, all but one have been successfully resolved with the employer allowing the special leave request.

Important victories at the Labour Relations Board

This year our legal team assisted the organizing department in winning three successful union drives, expanding the HSA HSP bargaining unit to include HSP members working at the Canadian Mental Health Association (CMHA) BC Division, the Community Action Initiative, and most recently, CMHA Victoria Office.

In the case of CMHA Victoria, we welcome an additional 19 members into the HSPBA bargaining unit. The legal department settled objections to bargaining unit composition. And these expansions of the bargaining unit followed the long-running labour board hearing to organize the initial HSP unit at CMHA BC Division.

The Legal Department also assisted with victories at the labour board that brought new members from the CMHA BC Division into the Community Bargaining Association (CBA).

Significant wins at arbitration

We have enjoyed many successes this year but one stand out. In a case with important classification implications, HSA recently won an important decision involving the restructuring of Pharmacy Services in the Interior Health Authority (IHA). The grievance arose when IHA reorganized its pharmacy services by creating a new level of regional management between the chief pharmacists and the director of pharmacy, and removing the chief pharmacists' supervisory

responsibilities of the support staff. As a result, the chiefs, overall, lost about 60 per cent of the full-time equivalent (FTE) supervision numbers and suffered a consequential loss of income.

HSA argued that it is the chief pharmacist who is responsible for the department, not a regional manager, and by removing the chief's supervisory responsibility for support staff, the chief was no longer responsible for the department. The arbitrator allowed the grievance in its entirety. The employer was ordered to reinstate the chiefs' supervisory responsibilities for all support staff in the pharmacy departments and ordered that the employer make whole all of the chiefs who lost income as a result of the restructuring. This was a very important decision for HSA.

ADDRESSING CLASSIFICATION ISSUES

The HSA Classifications Department in 2019 consisted of three full-time labour relations officers and 1.5 full-time equivalent (FTE) administrative support staff. Derek Wong heads the department as the Membership Services Coordinator.

The year saw an unprecedented increase in active matters in HSA classifications. The Classifications Department closed 200 files in 2019, which saw HSA members receiving lump sum and/or retroactive salary adjustment payments totalling over \$438,000. The pay rate increases achieved result in an ongoing value of over \$219,000 per annum.

April 2019 also saw the first-year implementation of the classification improvements achieved in bargaining in three of HSA's provincial collective agreements.

Low wage redress (LWR) in the Community Social Services Bargaining Association (CSSBA)

HSA sits on the provincial classifications working committee for the community social services (CSS) sector. The joint union and employer committee has, as per the 2019-2022 collective agreement, allocated the distribution of negotiated 2019 LWR comparability wage funding.

This resulted in LWR pay increases of between 3.3 and 7.4 per cent over and above the April 2019 two per cent general wage increases. The LWR increases will occur again in 2020 and 2021 to continue mov-

This year our legal team assisted the organizing department in winning three successful union drives.

ing CSS pay rates towards parity with similar jobs in the health community subsector and health science professionals sector.

LWR in the CBA

HSA is part of the provincial classifications working committee of the health community subsector. Community health in 2019-2022 also has LWR comparability wage funding. This resulted in the April 2019 renumbering of the wage grids to facilitate more direct comparisons to similar work in the health facilities subsector.

Moreover, LWR pay increases over and above the April 2019 general wage increases resulted in almost every job in the subsector moving to within 98 per cent parity with the pre-existing rates of their comparator jobs in the facilities subsector. Further, LWR increases will occur again in 2020 and 2021 to continue moving these jobs towards parity target rates.

Classification redesign for the HSPBA

In the health sciences professionals sector, improvements totalling \$10 million were applied in April 2019 to address pre-existing inequities in several job categories. Most notably, sole charge pay and student supervision pay was introduced for staff level classifications in all the professions that have previously not had such entitlement.

HSA, as the lead union in the HSPBA, continued to move forward the work of the HEABC/HSPBA Classification Redesign Committee throughout the year. In accordance with the classification appendices of the collective agreement, the mandate of the joint committee is to complete the development of the future new profile-based classification system that will provide consistent and objective job classification

criteria across all professions within the scope of the HSPBA bargaining unit.

DISABILITY MANAGEMENT

The Disability Management Department continues its excellent work for HSA members from all bargaining units. The department is staffed by nine LROs/advocates and four administrative assistants under the direction of Membership Services Coordinator Alison Hietanen and Assistant Membership Services Coordinator Helga Wainwright.

Workers' Compensation Board (WCB) claims

The overall number of claim files handled by HSA's WCB appeal representatives during 2019 was 128. In order to ensure we pursue all potential benefits available to members under their claim, our WCB advocates undertake an in-depth, multifaceted review of an appeal file, applying their extensive knowledge of both the Workers Compensation Act (WCA) and the appeal guidelines, while taking into account the member's individual circumstances.

We have recently achieved some notable wins under the new bullying and harassment language in the WCA, which represents a significant victory considering the high evidentiary threshold that must be met. In 2019, we resolved 68 WCB appeal files with an overall success rate of 82 per cent. This represented a monetary value of \$2,733,029 for our members.

Long-term disability (LTD) claims

In 2019, a total of 120 claim appeal files were handled by the department. Our LTD advocates have continued their dedicated good work on behalf of our members and that diligence has resulted in the successful resolution of 22 appeal files, representing a success rate of 88 per cent and an overall monetary benefit to HSA members of \$7,419,228.

Duty to accommodate (DTA) files

There has been a substantial surge in the numbers of new files managed in the DTA area. At present, our DTA LROs are managing 333 active case files and this number increases daily. This reflects both an overall boost in the number of members seeking accommodations and a boost in referrals to head office of complex files that originate under the Enhance Disability Management Program (EDMP). In 2019, DTA LROs successfully resolved 11 grievance files, with a monetary value of \$13,855 to our members.

An ongoing challenge experienced is the delay by employers in responding to accommodation and return to work communications and plan development. In response, we are actively applying the new collective agreement language, which stipulates that employers must respond to submitted medical documentation within four weeks, or commence paying employees at their pre-disability rate of pay and FTE.

The Enhanced Disability Management Program (EDMP)

EDMP is an employee-centered program for members in the health science professionals' collective agreement, the Nurses Bargaining Association agreement and the community health subsector collective agreement who have occupational and non-occupational illnesses and injuries.

Pursuant to the EDMP Regional Representative FTE increase negotiated into the current HSPBA collective agreement, we have recently appointed an additional 0.5 FTE regional representative. Our EDMP reps continue to act as a valuable resource for our members by providing assistance, guidance, support and a union connection to those who have been struggling to stay at work, or have been out of the workplace due to injury or illness.

The demand for EDMP services continues to gradually increase. Currently, we have 990 active EDMP files.



The Early Intervention Program (EIP)

In July 2019, responsibility for supporting HSA members covered by the EIP under the CSSBA collective agreement (CSSEIP) was moved under the Disability Management Department umbrella. Since that time, we have been in the process of actively engaging with the CSSEIP Working Group to ensure we receive timely notifications when our members are out of the workplace, so we can ensure that they have prompt access to the services and support of this program. Currently, we have 15 active files under the CSSEIP.

ALLOCATING PROFESSIONAL DEVELOPMENT FUNDS

The provincial bargaining structure results in some inequalities in wages and benefits for HSA members. This is marked, in one way, in access to professional development monies. As the lead union in the HSPBA, we were able to secure funds for professional development and training that our colleagues in the CBA and CSSBA were not able to negotiate. Although a minority constituent union, HSA will continue to make every effort to work within the CBA and CSSBA to enhance access to professional development and training opportunities.

Health science professionals

Although it created unanticipated administrative needs at the office, we were pleased to be able to distribute our pro-rated share of the \$3 million grant provided to the HSPBA by the Ministry of Health for professional development. HSA's share of this fund was \$2,536,946. HSA fully allocated those monies to approved applications prior to Dec. 31, 2019.

In total, the ministry's fund enabled 1416 HSA health science professionals to take training within the funding eligibility guidelines. The categorization of that training is as follows:

1. To retrain for health science professions where there are shortages.

279 HSA HSPs were funded for training under this category. Allocations under this category totaled \$863,805.

2. To enhance professional development opportunities for HSPs working in rural or remote areas of BC.

306 HSA HSPs were funded for training under this category. Allocations under this category totaled \$550.652.

3. To assist HSPs throughout the province to meet their ongoing requirements for professional development.

831 HSA HSPs were funded for training under this category. Allocations under this category totaled \$1,122,489.

We are now turning our attention to applications for professional development monies of \$400,000 annually, won in the collective agreement. In order to facilitate distribution to as many members as possible, we have instated a \$1000 limit per member.

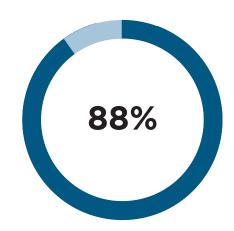
Registered Psychiatric Nurses (RPNs)

We should soon be in a position to distribute reimbursement to RPNS from HSA's pro-rated share of the \$750,000 available pursuant to the NBA agreement. Those monies are to be available with an effective date of April 1, 2020. We have arranged to receive the monies directly from HEABC when they are released.

DEVELOPMENT OF A NEW PROVINCIAL OCCUPA-TIONAL HEALTH AND SAFETY AGENCY

The working group has been meeting regularly since ratification to put the Occupational Health and Safety Agency in place. Deliverables for the organization will be coordination/information sharing, reduced duplication of initiatives, and increased partnerships across the health sector. Stakeholders will provide the organization with information on any proposed projects supported by OHS memorandums of agreements, WorkSafeBC, and employer-specific initiatives.

Three subcommittees (the provincial working group, and two psychological health and safety committees) are continuing with organizational planning. The provincial working group is meeting regularly to coordinate the work of the subcommittees and to as-



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sess methodology for establishing provincial/sectoral standards for measuring psychological injury.

A logistical subcommittee is working with consultants on the structural features of the agency and developing a work plan for the organization. An inventory subcommittee is compiling a list of all OHS-related activity to determine which OHS activities fall within the purview of the agency. There is also a subcommittee meeting to determine the structural features of the resource center and the scope of its work.

HSA representatives are active participants on all committees and the working group.

JOINT HEALTH SCIENCES BENEFITS TRUST

On Jan. 1 2020, the JHSBT launched their website: www.jhsbt.ca.

The JHSBT website gives members information on the governance and operations of the JHSBT. Through the website, members can obtain access to annual reports and financial statements, and learn about the JHSBT's structure and policies. Members may provide feedback, comments or questions regarding the trust to the JHSBT through questions@jhsbt.ca.

The JHSBT trustees will be considering benefit redesign in the future. We will receive your suggestions specifically regarding benefits through our email info@jshbt.ca for future consideration. The JHSBT will design a survey for completion in 2021 to solicit member feedback on benefits.

LOOKING FORWARD TO THE YEAR AHEAD

HSA accomplished a great deal for its members in 2019. With the Steward Portal launched and our departments fully staffed, we look forward to an equally productive year in 2020.

ADDENDUM

I am pleased to provide the following update to the Annual Report covering Labour Relations, Classifications, Disability Management and Legal Services which outlines some of the files managed in Labour Relations and Legal Services throughout 2020

Labour Relations Servicing

Sheila Vataiki remains in the position of Labour Relations Coordinator and has taken a central position in the Recruitment and Retention Committee, matters arising from Single Site Transition and the Workload Committee. We have been dealing with chronic shortages in various disciplines and Sheila understands the need for an integrated team to deliver the best health care possible under difficult circumstance.

Norah Miner is our Membership Services Coordinator. Many of you have worked with Norah and will have seen firsthand her labour relations expertise. In addition, she brings very practical leadership strategies and a long term servicing vision for this busy department. Norah has also spent the last decade providing staff support at multiple rounds of HSPBA bargaining. Norah is supported by Colette Barker and Alyson Warner as Assistant Membership Service Coordinators and the team of 14 labour relations officers (LROs).

Despite the challenges of transitioning to a virtual platforms the Labour Relatios - Servicing department, like all of HSA's division and departments, has continued to provide all services to members. Current to September 15, 2020, we have 1709 open grievance files. To date we have recovered approximately \$239,000 for our members.

Legal

The HSA legal department consists of six fulltime lawyers under the direction of Membership Services Coordinator Tonie Beharrell, one full time paralegal and two legal administrative assistants. In 2020 thus far we have recovered \$440,000 for members. We continue to have excellent success in resolving education and special leave grievances prior to arbitration.

In addition to receiving grievances and member advocacy files from the servicing department, the HSA legal department works very closely with our talented and resourceful staff in both the organizing and classification departments.

Classifications

The HSA classifications department in 2019 consisted of 3.0 FTE labour relations officers, and 1.5 FTE administrative support staff. Derek Wong heads the department as the Membership Services Coordinator - Classifications.

The year saw an unprecedented increase in active matters in HSA classifications. The HSPBA/HEABC Classification Redesign Committee ("CRC") re-

convened in middle of June. In the week of August 24-28, the parties met regarding certain outstanding classification redesign issues utilizing the assistance of John Kinzie as facilitator.

On August 13, the HSPBA Appendix A working group began surveying union members to inform the implementation of the negotiated Year 2 and 3 classification improvements. The increases will address anomalies flowing from the transition of certain professions transitioning from being covered by Memorandum of Understaning classifications to their new Industry Wide Miscellaneous Rates classifications, and will implement new pay provisions for working without general supervision for over 30 professions. There remains a great deal of work to do to redesign the HSPBA classification system. The implementation of the new system and the attendant costs will be on the bargaining table in 2022.

As at July 31, 2020, the Classifications Department is in conduct of 628 active grievances across all its bargaining units and agreements as our LROs continue to apply the existing provisions of the collective agreement in a time of structural change.

Disability Management

The Disability Management department continues its excellent work for HSA members from all bargaining units. The department is staffed by nine LROs/advocates and four administrative assistants under the direction of Membership Services Coordinator Alison Hietanen and Assistant Membership Services Coordinator, Helga Wainwright.

To date in 2020 the Workers Compensation (WCB)/ Long Term Disability (LTD) Advocacy department has 151 active appeal files. In the past year, we have successfully overturned 26 LTD claim denials on reconsideration, and had three successful claims review hearings, recovering over six million dollars for our members.

441 complex EDMP files were referred up to the Disability Management department from Enhanced Disability Management Program (EDMP) Regional Representatives for management of multi-faceted medical issues and accommodations. Current to September 15, 2020, LROs specializing in duty to accommodate are managing 312 active case files under all the collective agreements.

Joint Health Science Benefit Trust (JHSBT)

On January 1st 2020, the JHSBT launched the JHSBT website www.jhsbt.ca. The JHSBT website is designed to give members information on the JHSBT; its structures, policies, annual reports, and financial statements, in accordance to the JHSBT trust agreement. The website also lists the JHSBT service providers who assist the Board in managing the operation of the Trust, along with links to claims paying agents, Pacific Blue Cross and Great West Life, and third party administrator HBT.

The JHSBT trustees will be considering benefit redesign in the future. There will be two routes to communicate your suggestions. While there is no specific timeline for any prospective redesign suggestions are welcome by email at info@jshbt.ca for future consideration. The JHSBT will design a survey for completion in 2021 to assist the trustees' consideration of member suggestions.

HSA is facing challenges which arise from structural changes being introduced in health care. These changes are partially due to policy decisions intended to improve delivery and extend primary care to as many British Columbians as possibly. The pandemic has also occasioned unplanned and rapid change which needs to be managed with speed and flexibility as we move to address your needs both as health/social service workers and health care consumers.



Jason Cheung Assistive Technologist, G.F. Strong Rehabilitation Centre

FINANCES

REPORT OF THE FINANCE COMMITTEE



(L-R) Cheryl Greenhalgh (Chair, Secretary-Treasurer, Region 3 Director), Becky Packer (Region 1), Cathy Davidson (staff), and Nancy Hay (Region 6 Director).

The Finance Committee is tasked with providing oversight and leadership in matters pertaining to the finances of the union.

We work to ensure that policies and procedures are developed and followed to keep us responsible and prudent in utilizing our resources. As well, the committee must develop an organizational budget that supports HSA's Strategic Plan goals.

Improving service, enhancing member engagement, defending the collective agreement, managing our essential relationships and matching organizational

needs with resources are the five priorities of our strategic plan. Ensuring that precious resources are deployed to fulfill these commitments is our mandate.

We ended 2019 in a strong financial position. Our union continues to grow. Factoring out amounts from the receipts and expenses attributed to the PD Fund, revenue for 2019 was above projected values by \$254,000 and total expenditures were below budgeted projections by approximately \$633,000. We ended our budget year with almost \$1.4 million in excess receipts over expenditures but after adjust-

ing for amortization of our major assets (building and contents) and the increase in market value of our investment portfolio, our final reported excess of receipts over expenditures was \$945,438.

The audited statements include over \$2 million in professional development funds paid directly to HSPBA Members. These funds were paid from a separate ledger, and were in accordance with the parameters established by the Ministry of Health. These funds were negotiated and received in 2018 and amounted to \$2.5 million. \$494,663 remained and was disbursed in early 2020.

The new annual \$400,000 HSPBA Professional Development Fund, per the 2019-2022 collective agreement was received, and is also held in a separate ledger and is ready for disbursement in 2020.

Most of our budget areas ended the year with final expenditures close to the budgeted amounts. We see some overall increase in staffing costs as this was the first year with the new Employer Health Tax, as well some increased staffing was approved. We underspent the overall budgeted amount in the Strategic Communications and Member Development budget area by almost \$400,000 with several different line items being underspent (public relations, mobilizing, committee support and a fellowship grant).

GENERAL FUND

The General Fund is used to pay for the day-to-day operations of HSA. This fund is allocated 95% of dues and is maintained with a combination of investments and a cash safeguard to cover approximately three months of regular and ongoing costs and expenditures. The General Fund recorded a surplus of \$862,500 and the fund balance at the end of the year was almost \$5.5 million.

BARGAINING FUND

The Bargaining Fund is used for negotiating collective agreements, organizing new members, retaining existing members and other bargaining-related activities. This fund is allocated 2.5% of dues and additionally received \$41,415 of investment income. There was some modest bargaining related expenditures in 2019 but the excess of receipts over expenses in this fund was \$292,243.

At the end of 2019, this Fund had a balance of almost \$1.5 million. Given that we now have until 2022 to replenish for the next round of bargaining, we leave bargaining in a strong financial position.

DEFENCE FUND

The Defense Fund provides resources to be used in the event of job action and holds title to the union's land and building. It is this asset that we use for collateral in the event we have to draw on our line of credit, currently unused.

This fund is also allocated 2.5% of dues and additionally received \$33,537 of investment income. Any expenses related to the union property and building are expensed from this fund. In 2019, the net book value (not to be confused with market value) of the land and building is \$17,868,124 and the mortgage owing is \$7,878,678 million.

INVESTMENT PORTFOLIO AND CASH POSITION

The markets did well in 2019. Our investment portfolio finished 2019 with a fair market value of \$3,240,799. Our annualized portfolio gain was 14% over the previous 12 months and 7.5% over 4 years.

BUDGET 2020

The 2020 budget builds on prior year budgets to address the five priorities in our strategic plan. This budget projects a \$246 thousand surplus on a \$21.2 million dollar budget.

In 2020, member engagement and education will continue to be our focus and increased resources will be directed at member servicing through staffing increases in the LRO Servicing area and at upgrading our computer and telecommunications infrastructure.

I would like to acknowledge and thank Finance Committee members Nancy Hay (Region 6 Director) and Becky Packer (Region 1 Director) for their commitment to HSA and for their work this past year. You each have brought great insight to this committee. I would also like to thank Cathy Davidson and the accounting department staff for their continued dedication and support to the Finance Committee and to the members of this union.

Respectfully submitted,

Cheryl Greenhalgh Chair

For the year ended December 31, 2019

Health Sciences Association of British Columbia Contents

For the year ended December 31, 2019

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Report of the Independent Auditor's on the Summarized Financial Statements

To the Members of Health Sciences Association of British Columbia:

The accompanying summarized financial statements, which comprise the summarized statement of financial position as at December 31, 2019, and the summarized statements of operations and changes in fund balances and cash flows for the year then ended, and the related notes, are derived from the audited financial statements of Health Sciences Association of British Columbia for the year ended December 31, 2019. We expressed an unmodified audit opinion on those financial statements in our report dated March 3, 2020.

The summarized financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations applied in the preparation of the audited financial statements of Health Sciences Association of British Columbia. Reading the summarized financial statements, therefore, is not a substitute for reading the audited financial statements of the Health Sciences Association of British Columbia.

Management's Responsibility for the Summarized Financial Statements

Management is responsible for the fair summarization of the complete audited financial statements of the Health Sciences Association of British Columbia.

Auditor's Responsibility

Our responsibility is to express an opinion on the summarized financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standards (CAS) 810 "Engagements to Report on Summary Financial Statements."

Opinion

In our opinion, the summarized financial statements derived from the audited financial statements of the Health Sciences Association of British Columbia for the year ended December 31, 2019 are a fair summary of those financial statements.

Port Moody, British Columbia

March 3, 2020

MWP LLP
Chartered Professional Accountants



(Note 4) 7 8 9 9 9 11 \$ 11 \$ 12 \$ 12	General Fund 2,499,550 \$ 868,903 1,600,436 110,977 170,321 5,250,187 488,244 422,682 6,161,113 \$	Bargaining Fund Fund 7,126 \$ 1,325,276 42,117 - 1,374,519 - 1,374,519 \$ 1,374,	\$ 9,001 1,046,619 42,117 1,212,988 1,212,988 1,212,988 1,212,988 1,212,988 1,212,988 1,212,988	\$ 2,515,677 \$ 3,240,798 11,684,670 110,977 285,572 7,837,694 488,244	2018 Total 1,035,337 2,891,585 1,862,118 1,06,499 395,341 6,290,880 2,495,006 2,495,006 2,495,006 2,495,700
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9 10 \$ ote 6) 11 \$	422,682 6,161,113				18,709,813 27,495,700
d Fund Balances ayable and accruals (Note 6) 11 \$ yable (Note 7) 12	6,161,113			18,290,806	27,495,700
es and Fund Balances nts payable and accruals (Note 6) 11 12				\$ 26,616,744 \$	
nts payable and accruals (<i>Note 6</i>) 11					
12	1.646.087 \$	1	\$ 3.358	\$ 1.649,445 \$	955,184
	1,267,816	ı			1,144,937
Current portion of long-term debt (Note 9)		•	375,900	375,900	371,800
14	2,913,903		379,258	3,293,161	2,471,921
Interfund balances	(4,160,699)	(121,793)	4,282,492	,	1
Employee future benefits (Note 8)	1,695,442	` 1	1	1,695,442	1,752,587
Deferred contributions (Note 4)	891,110	•	•	891,110	2,476,043
Long-term debt (Note 9)	•	1	7,878,678	7,878,678	8,257,233
19	(1,574,147)	(121,793)	12,161,170	10,465,230	12,485,863
Fund Balances (Note 10)					
Invested in capital assets	422,682	•	5,331,053	5,753,735	6,412,305
Internally restricted	343,379	1,496,312	1,209,631	3,049,322	2,223,569
	4,055,296	1		4,055,296	3,902,042
73	4,821,357	1,496,312	6,540,684	12,858,353	12,537,916
Total Liabilities and Fund Balances	6,161,113 \$	1,374,519	\$ 19,081,112	\$ 26,616,744 \$	27,495,700

Val Avery, President

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Cheryl Greenhalgh, Secretary Treasurer

			Summar	Health ized Statem	Sciences A ent of Operat For	SSOCiatior ions and Ch r the Year E	Health Sciences Association of British Columbia Summarized Statement of Operations and Changes in Fund Balances For the Year Ended December 31, 2019	Columbia d Balances er 31, 2019
		General	Bargaining	Defense	2019	2019	2020	2018
	#	Fund	Fund	Fund	Actual	Budget	Budget	Actual
Receipts Dues	1	\$ 19,146,250	\$ 503,847	\$ 503,847	\$ 20,153,944	\$ 19,900,000	\$ 21,000,000	\$ 19,037,819
Initiation fees	7	31,669	•		31,669	24,000	28,000	
Investments	ო	46,273	41,415	33,537	121,225	76,000	132,550	139,981
Other Income Recognition of deferred contributions	4 ιο	2,704			2,704 2,026,248	100,000	75,000	12,468 66,552
	9	21,253,144	545,262	537,384	22,335,790	20,100,000	21,235,550	19,285,693
Expenditures								
General Fund Executive	_	1.421.843	•	•	1,421,843	1,409,068	1,451,524	1,335,417
Union governance	00	1,848,586	•	1	1,848,586	1,158,096	1,212,713	1,084,911
Affiliations	6	2,841,582	•		2,841,582	841,200	1,003,800	894,787
Legal services and labour relations	10	7,727,936	1	1	7,727,936	7,673,141	7,994,782	7,115,704
Strategic communications	;	0			000	0	7000	7 7 0
and member development	11	3,568,784	•	'	3,568,784	3,950,264	4,082,791	3,551,963
Operations	12	2,772,250	•	•	2,772,250	2,890,207	3,139,238	2,563,146
Human Resources	7 7	41,454	1	1	41,454	80,500	193,353	114,871
	- 4 4 n	200,020	- 000 000	•	200,000	500,1069	944,539	011,730
Dafgaiiiig Defense	16		- 20,600	490,459	490,459	533,225	589,000	530,441
	17	20,749,417	339,936	490,459	21,579,812	19,569,996	20,800,760	18,667,228
Excess of receipts over expenditures,								
before other items	18	503,727	205,326	46,925	755,978	530,004	434,790	618,465
Other Items								
Amortization expense	19	(323,203)	- 26.047	(324,883)	(648,086)	(291,077)	(188,899)	(721,965)
Excess (deficiency) of receipts	3							(212)
over expenditures for the period	21	237,510	292,243	(209,316)	320,437	238,927	245,891	(306,129)
Fund balances, beginning of year	22	4,583,847	1,204,069	6,750,000	12,537,916	•		12,844,045

\$ 12,537,916

23 \$ 4,821,357 \$ 1,496,312 \$ 6,540,684 \$ 12,858,353

Fund balances, end of year (Note 10)

See Accompanying Report of the Independent Auditor on the Summarized Financial Statements

Health Sciences Association of British Columbia Summarized Statement of Cash Flows For the Year Ended December 31, 2019

		2019	2018
Operating activities			
Excess (deficiency) of receipts over expenditures for the year	\$	320,437 \$	(306,129)
Items not involving cash:	•	,	(000,100)
Loss on sale of capital assets		2.020	618
Gain on sale of marketable securities		(40,564)	(68,562)
Building amortization		324,883	324,883
Computer amortization		136,633	211,678
Furniture and equipment amortization		185,435	184,362
Telephony amortization		1,136	1,041
Unrealized loss (gain) on marketable securities		(212,545)	202,629
Operating cash flow		717,436	550,520
Changes in non-cash working capital		•	•
Dues receivable		177,449	(174,995)
Accounts receivable		988	817,363
Prepaid expenses and deposits		109,770	(35,289)
Accounts payable and accruals		712,200	(206,944)
Salaries payable		(38,559)	(31,100)
Cash provided by operating activities		1,679,283	919,557
Investing activities		•	•
HSPBA Professional Development Fund		2,006,762	(2,495,006)
Disposal of Investment - Working Enterprises Ltd.		1	-
Purchase of marketable securities, net of proceeds on disposal		(96,105)	(666,487)
Purchase of capital assets, net of proceeds on disposal		(231,100)	(235,063)
Cash used in investing activities		1,679,559	(3,396,556)
Financing activities			
Increase in severance payable		104,032	68,888
Repayment of long-term debt		(378,665)	(352,362)
Increase (decrease) in deferred contributions		(1,603,869)	2,491,849
Cash provided by (used in) financing activities		(1,878,502)	2,208,376
Cook inflam (antilam) for the man		4 400 240	(200,022)
Cash inflow (outflow) for the year		1,480,340	(268,623)
Cash and term deposits, beginning of year		1,035,337	1,303,960
Cash and term deposits, end of year	\$	2,515,677 \$	1,035,337
Represented by			
Cash		1,613,536	684,591
Term deposits		902,141	350,746
Tomi doposito	\$	2,515,677 \$	1,035,337

For the year ended December 31, 2019

1. Association

Health Sciences Association of British Columbia (the "Association") is a trade union providing services on behalf of members in the health care profession and other related occupations in British Columbia. As a trade union, the Association is exempt from income taxes under Section 149 (1)(k) of the Income Tax Act.

2. Significant accounting policies

The summarized financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations set out in Part III of the CPA Canada Handbook - Accounting, as issued by the Accounting Standards Board in Canada, which are part of Canadian generally accepted accounting principles, and include the following significant policies:

Fund accounting

The Association follows the restricted fund method of accounting for contributions, and maintains three funds: the General, Bargaining and Defense Funds.

The General Fund reports the Association's unrestricted resources to be used for on-going operations and reports amounts invested in operating capital assets.

The Bargaining Fund reports internally restricted resources to be used for organizing new members and negotiation of collective agreements.

The Defense Fund reports internally restricted resources to be used in the event of job action and amounts invested in real estate assets.

Cash and term deposits

Cash and term deposits include cash held at financial institutions and term deposits, net of interest, of \$900,000 (2018 - \$350,747) bearing interest at rates between 1.55% and 2.55% (2018 - 1.9%) maturing between November 19, 2020 and November 24, 2024.

Capital assets

Capital assets are recorded at cost. Amortization is provided using the straight-line method at rates intended to amortize the cost of assets over their estimated useful lives.

Rate

Building	50 years
Computer equipment	4 years
Furniture and equipment	5 years
Telephony equipment	5 years

Revenue recognition

The Association's major source of revenue is member dues. These dues are recognized rateably over the membership period in the year received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

The Association uses the restricted fund method of accounting for revenue. Restricted contributions for the purpose of organizing new members and negotiation of collective agreements are recognized as revenue of the Bargaining Fund. Restricted contributions for the purpose of use in the event of job action and investment in real estate assets are recognized as revenue of the Defense Fund. Unrestricted contributions recognized as revenue of the General Fund. Unrestricted investment income is recognized as revenue in the General Fund when earned.

Investment income includes dividend and interest income and realized gains and losses on marketable securities.

For the year ended December 31, 2019

2. Significant accounting policies (Continued from previous page)

Financial instruments

The Association recognizes its financial instruments when the Association becomes party to the contractual provisions of the financial instrument. All financial instruments are initially recorded at their fair value, including financial assets and liabilities originated and issued in a related party transaction with management.

At initial recognition, the Association may irrevocably elect to subsequently measure any financial instrument at its fair value. The Association has not made such an election during the year.

The Association subsequently measures investments in equity instruments quoted in an active market at fair value. Fair value is determined by quoted market prices. Investments in equity instruments not quoted in an active market are subsequently measured at cost less impairment. All other financial assets and liabilities are subsequently measured at amortized cost or cost.

Transaction costs and financing fees directly attributable to the origination, acquisition, issuance or assumption of financial instruments subsequently measured at fair value are immediately recognized in the excess (deficiency) of receipts over expenditures for the current period. Conversely, transaction costs and financing fees are added to the carrying amount for those financial instruments subsequently measured at amortized cost or cost.

Financial asset impairment

The Association assesses impairment of all of its financial assets measured at cost or amortized cost. The Association groups assets for impairment testing when available information is not sufficient to permit identification of each individually impaired financial asset in the group; there are numerous assets affected by the same factors; no asset is individually significant, etc. Management considers whether the issuer is having significant financial difficulty; whether there has been a breach in contract, such as a default or delinquency in interest or principal payments; etc. in determining whether objective evidence of impairment exists. When there is an indication of impairment, the Association determines whether it has resulted in a significant adverse change in the expected timing or amount of future cash flows during the year. If so, the Association reduces the carrying amount of any impaired financial assets to the highest of: the present value of cash flows expected to be generated by holding the assets; the amount that could be realized by selling the assets; and the amount expected to be realized by exercising any rights to collateral held against those assets. Any impairment, which is not considered temporary, is included in current year excess of receipts over expenditures.

The Association reverses impairment losses on financial assets when there is a decrease in impairment and the decrease can be objectively related to an event occurring after the impairment loss was recognized. The amount of the reversal is recognized in the excess (deficiency) of receipts over expenditures in the year the reversal occurs.

Employee future benefits

Employee future benefits that do not accumulate or vest are accrued and expensed when the decision is made to terminate the employee. Severance benefits that do accumulate or vest are accrued and expensed when the benefit is probable and the amount can be reasonably estimated.

The Association recognizes a liability and expense for contractual severance and termination benefits based on fair value when the benefit is probable and the amount can be reasonably estimated. This occurs when management approves and commits the Association to the obligation; management's plan specifically identifies all significant actions to be taken; actions required to fulfill management's plan are expected to begin as soon as possible; and significant changes to the plan are not likely.

For the year ended December 31, 2019

2. Significant accounting policies (Continued from previous page)

Measurement uncertainty

The preparation of the financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period.

Dues receivable and accounts receivable are stated after evaluation as to their collectability and an appropriate allowance for doubtful accounts is provided where considered necessary. Amortization is based on the estimated useful lives of capital assets. Employee future benefits are based on estimated payments owing to employees upon retirement or termination.

These estimates and assumptions are reviewed periodically and, as adjustments become necessary they are reported in excess (deficiency) of receipts over expenditures in the periods in which they become known.

Foreign currency translation

Transaction amounts denominated in foreign currencies are translated into their Canadian dollar equivalents at exchange rates prevailing at the transaction dates. Carrying values of monetary assets and monetary liabilities reflect the exchange rates at the statement of financial position date. Gains and losses on translation or settlement are included in the determination of excess of revenues over expenses for the current period.

3. Marketable securities

	2019 Market Value	2019 Cost	2018 Market Value	2018 Cost
Canadian equities	1,023,180	709,512	850,616	672,546
Government and corporate bonds	1,439,474	1,406,207	1,366,507	1,389,605
US equities, stated in Canadian funds	198,972	179,666	171,044	173,216
Other investments including mutual funds and T-bills	579,173	584,296	503,418	507,491
	3,240,799	2,879,681	2,891,585	2,742,858

As at December 31, 2019, the total realized gain for the year on sale of marketable securities included with investment receipts on the statement of operations is \$40,564 (2018 - \$68,562).

For the year ended December 31, 2019

4.	Deferred Contributions
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HSPBA Professional Development (\$3 million Ministry of Health) Fund Opening 2,474,731 Funds received by HSA - Interest received 15,895 Expenditures (1,995,963) HSPBA Professional Development (annual \$400,000 per term of 2019-2022 CA) Fund Opening 817 Funds received by HSA 336,820 Interest received 601 EDMP Fund Funds received by HSA 88,154 Expenditures (30,440) Other deferred contributions	2,536,946 3,337 (65,552) 2,474,731 817
Opening Funds received by HSA Interest received Interest received Expenditures 15,895 Expenditures 494,663 HSPBA Professional Development (annual \$400,000 per term of 2019-2022 CA) Fund Opening Funds received by HSA 336,820 Interest received 601 338,238 EDMP Fund Fund Funds received by HSA Expenditures 88,154 Expenditures 57,714	3,337 (65,552) 2,474,731 817
Interest received Expenditures 15,895 Expenditures (1,995,963) 494,663 HSPBA Professional Development (annual \$400,000 per term of 2019-2022 CA) Fund Opening Funds received by HSA 336,820 Interest received 601 338,238 EDMP Fund Funds received by HSA 88,154 Expenditures (30,440) 57,714	3,337 (65,552) 2,474,731 817
Expenditures	(65,552) 2,474,731 817 - -
#\$PBA Professional Development (annual \$400,000 per term of 2019-2022 CA) Fund Opening	2,474,731 817 - -
### HSPBA Professional Development (annual \$400,000 per term of 2019-2022 CA) Fund Opening Funds received by HSA Interest received #### BIT 336,820 601 #### BIT 338,238 ###################################	817 - -
Opening 817 Funds received by HSA 336,820 Interest received 601 338,238 EDMP Fund 88,154 Funds received by HSA 88,154 Expenditures (30,440) 57,714	-
Funds received by HSA 336,820 Interest received 601 338,238 EDMP Fund Funds received by HSA Expenditures 88,154 Expenditures 57,714	-
Interest received 601 338,238 EDMP Fund Funds received by HSA 88,154 Expenditures (30,440) 57,714	-
### 338,238 ### 250MP Fund Funds received by HSA	
EDMP Fund Funds received by HSA 88,154 Expenditures (30,440) 57,714	817
Funds received by HSA 88,154 Expenditures (30,440) 57,714	
Expenditures (30,440) 57,714	
57,714	-
· ·	-
Other deferred contributions	-
Opening 495	1,495
Expenditures -	(1,000)
495	495
Total deferred contributions 891,110	2,476,043
Capital assets	
2019	2018
Accumulated Net Book	Net Book
Cost Amortization Value	Value
General fund	
Computer equipment 1,159,116 838,177 320,939	252,708
Furniture and equipment 972,252 874,011 98,241	259,461
Telephony equipment 173,701 170,199 3,502	4,637
2,305,069 1,882,387 422,682	516,806
Defense fund	
Office Premise - 180 East Columbia Street	
Land 2,300,000 - 2,300,000	
Building 17,191,984 1,623,860 15,568,124	2,300,000
19,491,984 1,623,860 17,868,124	2,300,000 15,893,007
21,797,053 3,506,247 18,290,806	

5.

For the year ended December 31, 2019

6. Accounts payable and accruals

Accounts payable and accruals includes \$49,226 (2018 - \$2,546) of remittances payable to various government agencies.

Accounts payable and accruals also includes \$625,000 (2018 - \$Nil) relating to a legal settlement obligation. In May 2013, a class action lawsuit was initiated against the Association by two long-term disability claimants of Trust Fund No. 1, Trust Fund No. 2 and Trust Fund No. 3, regarding the reduction in long-term disability benefits in 2012. During the year ended December 31, 2019 a settlement was reached and subsequently approved by the courts. The total settlement has been accrued and the expense is included in union governance on the statement of operations and changes in fund balances.

7. Salaries payable

	2019	2018
Vacation	550,853	552,484
Accrued wages	243,766	188,081
Overtime, sabbatical and lieu time	473,197	404,372
	1,267,816	1,144,937
Employee Future Benefits		
Severance	1,315,371	1,494,219
Sick pay payable upon severance of employment	380,071	258,368
	1,695,442	1,752,587
Long-term debt		
	2019	2018
Vancouver City Savings Credit Union Mortgage payable:		
Blended weekly payments of \$11,874 including principal and interest at 2.99% per annum		
(2018 - 2.99%) with a loan maturity date of June 6, 2020	8,254,578	8,629,033
Less: current portion	(375,900)	(371,800)
	7,878,678	8,257,233

The Association's long-term debt is secured by a general security agreement providing a first charge over all assets of the Association and 100 East Columbia Street Properties Ltd. and an unlimited guarantee and postponement of claim by 100 East Columbia Street Properties Ltd. with respect to the debts and liabilities of the Association. The Association is also required to maintain certain financial reporting ratios including a minimum debt service coverage ratio and a minimum working capital ratio. As at December 31, 2019, the Association is in compliance with the required financial reporting covenants. It is management's opinion that the Association is likely to be in compliance with all such covenants throughout the next 12 months subsequent to December 31, 2019.

Estimated principal repayments required on the long-term debt in each of the next five years, assuming long-term debt subject to refinancing is renewed at similar rates and terms are estimated as follows:

Years	Principal
2020	375,900
2021	387,300
2022	399,100
2023	411,200
2024 and thereafter	6,681,078
	0.054.570
	8,254,578

For the year ended December 31, 2019

10. Fund balances

	Invested in capital assets	Unrestricted fund balance	Internally restricted fund balance	Total
Balance, January 1, 2018	7,006,459	3,326,749	2,510,837	12,844,045
Excess (deficiency) of receipts over expenditures	-	624,053	(930,182)	(306,129)
Net additions of capital assets	174,206	(234,444)	60,238	- '
Internally restricted general funds	(46,396)	(211,397)	257,793	-
Capital asset amortization	(721,964)	397,081	324,883	-
Balance, December 31, 2018	6,412,305	3,902,042	2,223,569	12,537,916
Excess (deficiency) of receipts over expenditures	-	237,510	82,927	320,437
Net additions of capital assets	229,079	(229,079)	-	-
Internally restricted general funds	(239,563)	(178,380)	417,943	-
Capital asset amortization	(648,086)	323,203	324,883	
Balance, December 31, 2019	5.753.735	4.055.296	3.049.322	12.858.353

11. Credit facilities

At December 31, 2019, the Association has a Vancouver City Savings Credit Union operating line of credit available to a maximum of \$2,500,000 (2018 - \$2,500,000) bearing interest at the financial institution's prime lending rate plus 0.25%. As at December 31, 2019, the facility was not drawn upon (2018 - \$Nil). The line of credit is secured by the Association's land and building with a net book value of \$17,868,124 (2018 - \$18,193,007) and subject to the financial reporting covenants as described in Note 9.

For the year ended December 31, 2019

12. Related party transactions

The Association is the settlor to three Health Science Association Trust Funds ("The Trusts") and also has the ability to appoint and remove the Trustees of the Trusts. The Health Sciences Association of British Columbia Trust Fund (Trust Fund #1) was established on April 1, 1989 to provide long-term disability benefits, life insurance, and accidental death and dismemberment insurance to the Association's members. The HSA Ltd. Trust No. 2 (Trust Fund #2) was established on March 1, 1999 to provide long-term disability benefits to the Association's members. The HSA Ltd. Trust No. 3 (Trust Fund #3) was established on April 6, 2006 to provide financial security for Trust Fund #1 and Trust Fund #2. All the Trusts file trust income tax returns with the Canada Revenue Agency. The Trusts have September 30 year-ends.

	Trust Fund #1	Trust Fund #2	Trust Fund #3
Financial Position			
Assets	0.470.000	7.047	0.045.040
Cash and investments	2,472,836	7,317	6,845,942
Accounts receivable	-	-	13,989
Due from related parties Income taxes receivable	-	-	75,400
income taxes receivable	2,472,836	7,317	6,935,331
	2,472,000	7,517	0,933,331
Liabilities and Fund balance			
Benefits and accounts payable	26,813	-	189,567
Due to related parties	78,816	-	9,278
Income taxes payable	-	-	-
Deferred income taxes	-	-	-
Reserve for future benefits	642,000	-	6,975,000
Fund balance (unfunded liability)	1,725,207	7,317	(238,514)
	2,472,836	7,317	6,935,331
Operations			
Revenue			
Investment gain (loss)	219,368	151	604,033
Expenses			_
Benefits	145,804	-	985,461
Income taxes (recovery)	(25,297)	28	-
Operations	316,384	-	381,148
Change in actuarial liability for plan benefits	(98,000)	-	(590,000)
	338,891	28	776,609
Changes in Fund Balance for Year	(119,523)	123	(172,576)
Fund Balance (unfunded liability), beginning of year	1,844,730	7,194	(65,938)
Fund Balance (unfunded liability), end of year (September 30, 2019)	1,725,207	7,317	(238,514)

The Association is related to 100 East Columbia Street Properties Ltd., a company incorporated in British Columbia. The Association is related to the company by virtue of its ability to appoint the corporate directors. The company has no assets, liabilities or operations and exists solely as a bare trustee for the Association's real estate holdings.

For the year ended December 31, 2019

13. Financial instruments

The Association, as part of its operations, carries a number of financial instruments. It is management's opinion that the Association is not exposed to significant interest, currency, credit, liquidity or other price risks arising from these financial instruments except as otherwise disclosed.

Interest rate risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. Changes in market interest rates may have an effect on the cash flows associated with some financial assets and liabilities, known as cash flow risk, and on the fair value of other financial assets or liabilities, known as price risk. The Association is exposed to interest rate risk primarily through its long term debt and its investments in interest-bearing term deposits and marketable securities.

Foreign currency risk

Foreign currency risk is the risk that the value of investments denominated in currencies, other than the functional currency of the Association, will fluctuate due to changes in foreign exchange rates. As at December 31, 2019, the Association held \$198,972 (2018 - \$171,044) equity instruments denominated in U.S. dollars.

Liquidity risk

Liquidity risk is the risk that the Association will encounter difficulty in meeting obligations associated with financial liabilities. The Association enters into transactions to borrow funds from financial institutions or other creditors for which repayment is required at various dates.

Credit Risk

The Association manages its credit risk by performing regular investigation into overdue accounts and provides allowances for potentially uncollectible accounts receivable. The Association has not made any provision for doubtful accounts at year-end after reviewing each outstanding account and determining collectability based on its knowledge of the participating employers' situation.

Other price risk

Other price risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices (other than those arising from interest rate risk or foreign currency risk), whether those changes are caused by factors specific to the individual financial instrument or its issuer, or factors affecting all similar financial instruments traded in the market. The Association is subject to price risk through its marketable securities as these investments are subject to price changes in an open market due to a variety of reasons including changes in market rates of interest, general economic indicators and restrictions on credit markets.

14. Budget information

During the year, the Board approved its operating budget based on planned expenses relating to the current year receipts and other current year sources of revenue. The budget balances have been attached for information purposes only and are unaudited.

15. Comparative figures

Certain comparative figures have been reclassified to conform with current year presentation.



Leeanne Tillman, Registered Psychiatric Nurse Abbotsford Regional Hospital

COMMITTEE AND ADVISORY GROUP REPORTS

REPORT OF THE RESOLUTIONS COMMITTEE



(L-R): Jill Slind (Region 5), Jas Giddha (Region 7 Director), Jennifer Hiscock (Region 10), Carol Blake (Region 8), Deb Cline (Region 7), Caroline Widgiz (Region 9), Tara Chen (Region 6), Ella Chrobak (Region 4), Jing-Yi Ng (Region 3), Eileen Carolan (Region 1), Mandi Ayers (Vice-President, Chair, Region 10 Director), Miriam Sobrino (staff), Rosemary DeYagher (staff). Missing: Christine Ambrose (Region 2).

It is my pleasure to present my first report as Chair of HSA's Resolutions Committee.

The HSA constitution states (Article 7, Section 4(a)): "Members of the union may bring matters before a Convention for consideration by means of resolutions submitted to, and approved by, their Chapter. These resolutions may include proposed Constitutional changes or policy matters." The Board of Directors may also put resolutions forward. It is the

mandate of the resolutions committee to make recommendations to the convention on all resolutions.

The Resolutions Committee is comprised of the vice president (who chairs the committee), one elected Member-at-Large from each region, and one additional member of the Board of Directors, who sits on the committee with voice, but no vote.

The deadline for resolutions to be received in the

HSA office was January 25. The committee met Feb. 13 and 14 to review the submissions.

Chapters submitted an unprecedented number of resolutions this year. Of the 127 received, seven were rejected as they pertained to bargaining, and four were rejected for being well over the word-limit.

When resolutions are received they are reviewed for:

- structure; the "whereas" statements must be a statement of fact
- the "therefore be it resolved" must be a statement that stands alone and provides direction to the union as to what is to be achieved
- the resolution must be no more than 150 words (constitutional resolutions are not limited in length)

After initial review the resolutions are categorized according to their subject matter, for example; education, finance, or political action. When considering similar resolutions the committee may choose to amalgamate resolutions, create a substitute resolution or amend a resolution, being mindful in all cases to not change the intent of the original resolution.

Due to the number of resolutions the committee, as allowed by policy, chose to amalgamate a number of themed resolutions into composite resolutions. Composite resolutions allow for resolutions with similar intent to be combined into one all encompassing resolution. The use of composites will allow delegates to address more issues on the convention floor.

For each resolution the committee must give consideration to the following criteria:

- is the intent of the resolution clear?
- is the request something HSA can reasonably accomplish?
- what are the overall implications of the resolution?
- what are the financial implications of the resolution?
- does the resolution support current policy and strategic direction?

The Resolutions Committee takes its work on behalf of the membership very seriously. There is considerable debate on each resolution. Where needed, further research is done, and in some cases the submitting chapter is contacted for clarification. Once all factors have been considered and all committee members have had opportunity to speak, the question is called. Committee members then vote to recommend "concurrence" or "non–concurrence" on the given resolution. A straight majority vote establishes the recommendation that will go forward to the convention delegates.

The last step is to write a rationale which supports the recommendation of the committee and which will be read to the delegates at convention.

The Resolutions Committee also has the responsibility of determining the order of presentation of the resolutions on the convention floor subject to amendment by the delegates. A delegate at convention is entitled to cast one vote on each resolution. Resolutions approved by convention take effect upon adjournment of the convention unless otherwise specified.

A straight majority vote of the delegates is required to pass policy resolutions. Resolutions to change the union's constitution require a two-thirds majority vote to pass. This year, a number of constitutional resolutions were put forward by the Board of Directors on behalf of the Constitution and Organizational Policies Committee, and an appendix to the resolutions was developed to help present the proposed changes to convention delegates.

I would like to thank the members of the committee for their thoughtful deliberations on the resolutions in advance of the convention and for the time they will give during the course of the convention to ensure that the work of the union is carried out efficiently.

Respectfully submitted, Mandi Ayers, Chair

COMMITTEE ON EQUALITY AND SOCIAL ACTION



(BACK): Cherylee Hylands (Chair, Region 8 Director, Colette Barker (staff). (FRONT): Ron Regier (Region 7), Jas Giddha (Region 2 Director), Heather Maschek (Region 8), Anne Marie Rongve (Region 2).

In the early fall of each year, the Committee on Equality and Social Action (CESA) collects applications for HSA's Equality and Social Action Fund. The committee holds an annual "speed dating" meeting whereby the applicants are given a ten-minute time slot to explain the reasons for their requests and the impacts of their work. This year, the meeting took place over three days in November.

The committee's recommendations are based on an

examination of the materials submitted, presentations delivered by group representatives, and answers to questions posed by the committee. The committee engages in collaborative deliberation the day following the presentations.

This year, we received 45 requests for funding from mainly British Columbian groups, with some national and international organizations also submit-

ting requests. The total amount of funds requested – \$351,750 – was substantially more than the available funds and more than three times the dollar value of the requests from the previous year. The available funds were \$119,996. The CESA Fund is based on 0.6 per cent of total HSA revenue, as set by delegates to the 2012 HSA Annual Convention.

The criteria used to determine the recipients are as follows:

- promotion and protection of trade union rights
- promotion and protection of human rights
- elimination of inequalities in society and the workplace
- promotion of issues relevant to women
- elimination of poverty
- promotion and protection of a healthy environment

Out of the 45 requests, the committee distributed funds to 31 applicants.

The final decisions were difficult to make amidst so many worthwhile causes. A few applicants already had many generous sponsors, and the committee determined that the funds would have the biggest impact if allocated to smaller organizations.

HSA is continuing its long-term relationship with CoDevelopment Canada (CoDev), a BC-based international solidarity organization that partners HSA with labour rights organizations overseas doing courageous and remarkable work on the ground. CoDev continues to offer solidarity tours that members can participate in. In some cases, we partner with groups in ways beyond the fund. This year, CoDev is participating in HSA's Migrant Justice workshop.

In addition to administering the Equality and Social Action Fund, CESA oversees HSA's annual Social Justice Day workshop. This year's workshop, held on Feb. 20, focused on the climate emergency. A number of speakers were brought in to discuss different ways to respond to it.

PROJECTS FUNDED BY CESA 2019 Autism Support Network Society of BC 5000 BC Civil Liberties Association 5000 BC Poverty Reduction Coalition 5000 Camp Jubilee 2500 Castlegar and District Services Society 5000 Check Your Head: The Youth Global 4000 Education Network Coalition of Child Care Advocates 3000 of BC CoDevelopment Canada 14000 COSCO (Council of Senior Citizens' 1800 Organizations of BC) Downtown Eastside Women's Centre 2000 Elk Valley Society for Community Living 3000 First Call: BC Child and Youth Advocacy 5000 Coalition Fort Nelson Family Development Society's 7000 Clubhouse Greater Van GoGos 500 Haga Education and Referral Services 2000 Foundation Living Wage for Families Campaign 2000 Penticton & Area Access Centre 5000 Progressive Intercultural Community 1900 Services Society Project Somos 3000 Refugee Livelihood Lab RADIUS 3000 Rise Women's Legal Centre 3000 Senior Services Society 7000 Seva Canada Society 6000 Sher Vancouver 1000 Society of Transition Houses (THS) 2500 Society for Equity, Inclusion & Advocacy -3000 Central Vancouver Island Together Against Poverty Society (TAPS) 2800 Union Protein Project 5000 Vancouver Co-op Radio 2000 West Coast LEAF 4000 YWCA Metro Vancouver 4000 Total 120,000

Producer Andrew Williamson shared his work, which looked at the emotional and physiological reactions to climate change on frontlines around the world. Peter McCartney from the Wilderness Committee facilitated a dialogue about a just transition for British Columbia that does not rely on the oil and gas industry's false promise of prosperity.

Representatives from Sustainabiliteens, discussed their work mobilizing young people and others to take action in Vancouver. The group helped organize one of the largest marches in Vancouver's history on Sept. 27, 2019, when an estimated 100,000 people took to the streets in Vancouver.

Seth Klein, former executive director of the Canadian Centre for Policy Alternatives – BC, spoke to how some of the lessons learned from Canada's mobilizations around WWII could be applied to the climate crisis. The current crisis, he stated, should be viewed as an urgent existential threat requiring a wartime-scale emergency response.

The Social Justice Day workshop generated more interest from members than ever before, which highlights the value of social justice education opportunities across our union's work. Thank you to the speakers. The subjects you addressed were well received.

On behalf of the committee, I would like to thank all the applicants that applied to the Equality and Social Action Fund. The presentations were very interesting and we appreciate the work you do. We had many more applicants this year than recent past years, demonstrating the important work of the fund.

Respectfully submitted, Cherylee Hylands Chair, Region 8 Director

EDUCATION COMMITTEE



(L-R) Jing-Yi Ng (Region 3), Cherylee Hylands (Region 8 Director), Derrick Hoyt (Chair, Region 2 Director), Sharon Geoghegan (staff), Karen Sandhu (Region 4), Colette Barker (staff). Missing: Douglas Herasymuik.

HSA's Education Committee oversees the administration of the union's education programs and the distribution of scholarships and bursaries. The committee also reviews the educational needs of our members and makes recommendations regarding workshops, policies, and programs consistent with the goals, objectives and strategic planning of HSA.

STEWARD AND MEMBER TRAINING

Courses are offered throughout the year to stewards and members. In 2019 HSA trained over 1100 members around the province. Our steward training courses include Basic Steward Training and Occupational Health and Safety Training. We also offer

one-day Steward Team Training delivered at worksites in our members' communities. HSA's constituency liaisons and labour council delegates also receive training through HSA.

Our union provides a wide range of leadership and special interest courses for members, including annual International Women's Day and Social Justice Day workshops.

In 2019, we offered the workshop Solidarity for All for a second time – an awareness-raising workshop on the challenges facing trans workers in their communities, workplaces, and unions. It explores how unions can work to end discrimination and support trans members. We again offered the workshop Men as Allies, which examines ways for men in the union to actively support gender equity.

This year we introduced a new workshop entitled, "What's Age Got to do With It?" This workshop focused on overcoming generational differences in order to work together on common issues. Reflecting on the concepts of dignity, respect, and intersectionality – meaning how age interconnects with other social identities such as gender, class, race, and ability – workshop participants were able to work through scenarios to overcome differences.

Many convention delegates had the opportunity to attend pre-convention workshops. This year, the pre-convention education workshops were Advanced Steward Training, Privacy and Human Rights, Campaign School, Migrant Rights, and Reconciliation.

After each workshop, we collect feedback from participants. The committee and staff review these submissions and consider changes for the next course delivery.

Members are also sponsored by education funds to attend courses offered through the Canadian Labour Congress' (CLC) Winter School – held every year in January and February – and the Western Regional Summer Institute for Union Women (SIUW). Applications are reviewed by the committee. In 2019, HSA sponsored five members to attend the CLC Winter School in Harrison Hot Springs and nine to attend SIUW, which took place at UBC in Vancouver.

HSA's Madden Memorial Fund sponsors members to attend labour education courses offered outside HSA. In 2019, HSA sponsored two young workers to attend the BC Federation of Labour (BCFED) Young Workers' School at Camp Jubilee.

SCHOLARSHIPS AND BURSARIES

Members and their children under 25 years of age are invited to apply for HSA scholarships and bursaries. The committee selects ten candidates to receive scholarships of \$1500, 20 candidates in full-time studies to receive bursaries of \$1500, four candidates in part-time studies to receive bursaries of \$750, and two candidates to receive Indigenous student bursaries of \$1500. Each year we receive in excess of 100 applications for these awards, and the committee spends three full days reviewing the applications and making difficult choices about who will receive these funds.

This year the Education Committee undertook a review of the union's Indigenous bursary application and selection process with a view to minimize barriers for applicants, in keeping with HSA's commitment to take an active approach to enacting the principles outlined in the 94 Calls to Action from the Truth and Reconciliation Commission.

The committee consulted with Shelley Saje Ricci, the co-chair of the BCFED's Indigenous Workers' Caucus and representative on the Indigenous Women's Committee for CUPE BC. She is an Indigenous cultural facilitator for the Surrey School District and an educator for CUPE BC.

As a result of the consultation, the name of the bursary was changed from "Aboriginal Bursary" to "Indigenous Bursary," the application form was revised, and the process now includes the option of sending a video with the applicant's personal statement instead of a written statement.

The committee is committed to reviewing the application process again in 2020.

PENSION EDUCATION SESSIONS

In the past year we have offered sessions in conjunction with the Municipal Pension Plan (MPP) about preparing for retirement. Four workshops were offered at the New Westminster office in 2019. HSA also supports members in planning and hosting these seminars at their worksites. This year, 16 seminars were offered locally.

These workshops were well attended. For many members, this may be their first interaction with the union.

Don't forget that MPP will come to a worksite to provide workshops if the organizer provides dates, books a room, and guarantees 20 attendees. Members interested in organizing a local MPP seminar are encouraged to contact their chief steward. If a chapter contacts HSA with dates and details, the union staff can coordinate with MPP and provide funds for refreshments.

If you have never attended a workshop, I would highly encourage you to consider attending one or encourage other members to consider registering for a workshop or training session.

Respectfully submitted,

Derrick Hoyt, Chair

OCCUPATIONAL HEALTH AND SAFETY COMMITTEE



(L-R) Becky Packer (Region 1 Director), Shai Lal (Region 5), Cherylee Hylands (Chair, Region 8 Director), Mike Wisla (staff). Missing: Donna Barker (Region 6), Laurie Golemiec (Region 8).

The HSA Occupational Health and Safety (OH&S) Committee is the conduit between HSA members and health and safety initiatives developed by organizations such as the health authorities, WorkSafe BC, and the BCFED. Over the course of the OH&S meetings this year the committee analyzed items and made recommendations on a number of different fronts.

One of the major initiatives regarding health and safety in British Columbia this year was the development of an OH&S agency for healthcare workers in BC. HSA is a full partner in the development of this agency along with the Ministry of Health, senior health authority leaders, other healthcare unions, and the employers represented by the HEABC. This initiative is well underway and our OH&S committee has been informed of its progress throughout its evolution.

Another initiative, spearheaded by HSA and fully supported by the OH&S Committee, has been the presumptive coverage campaign. The committee wrote a recommendation to the HSA Board of Direc-

tors to encourage action on this issue. Presumptive coverage is a prevention measure in the respect that workers will be more likely to report injuries knowing that they will be supported by the Workers' Compensation system. More reporting equals more investigation, which equals more corrective actions in the workplace.

OHS Advocate Michael Wisla has kept the committee updated on HSA and the broader labour movement's contributions to Workers' Compensation Board (WCB) work and policy. These include the work of Workers' Compensation System Review, headed by Janet Patterson, proposed changes to Occupational Health and Safety Regulations Part 6, Substance Specific Requirements-Sections 6.43 to 6.58 Cytotoxic Drugs, and proposed amendments to the rehabilitation services and claims manual. And during preliminary hearings, HSA weighed into the proposed regulatory changes to regulations 4.24-4.31 dealing with violence, bullying and harassment. All of the work in this area will enable positive changes that will not only positively impact our HSA members but all workers in British Columbia.

In other work, the OH&S Committee reviewed a large data set on compensation claims, broken down by occupation, which shows dramatically high figures relating to claims in the social service and counselling fields. The committee recommened that HSA work to investigate further needs and solutions regarding injury prevention in these occupations.

Over the course of the year there have been a number of themes emerging across the work of the OH&S committee, including the themes of resiliency, violence, and psychological health and safety. The committee worked on issues of racism as it impacts health and safety. These subjects will form the core of the upcoming OH&S conference, which will be held June 8-9 in New Westminster at the HSA building. Planning for this conference has been an ongoing project of the committee, and we look forward to

presenting, "OHS Stewards Conference: Safe and Healthy Minds and Bodies."

On behalf of the committee, I wish to thank all members for their attention to health and safety in the workplace. We wish to especially thank the OH&S stewards, the JOHS committee members at their worksites, and the members serving on health authority committees and working groups. It is through these members that workplace health and safety evolves and focuses on the workers.

Respectfully submitted on behalf of the OH&S Committee,

Cherylee Hylands Chair, Region 8 Director

POLITICAL ACTION COMMITTEE



(L-R) Jaime Matten (staff), Joshua Carr (Region 7), Carla Gibbons (Chair, Region 5 Director), Sherry Lewis (Region 7), Tammam El Khodor (Region 4). Missing: Brittany Sanders (Region 9 Director).

The Political Action Committee (PAC) supports the involvement of HSA members in political action activities and campaigns. It oversees the use of HSA's Political Action Fund, supports the work of the Constituency Liaisons and labour council delegates, and looks for opportunities to engage HSA members in political action to support issues of importance to them. HSA's Constituency Liaison (CL) program trains and supports HSA members to lobby their local MLAs on policy issues important to HSA members.

2019 was a busy year. Here is a brief highlight of some of the projects the committee oversaw.

THE 2019 FEDERAL ELECTION

Canadians went to the polls on Oct. 21, 2019 to vote in the federal election. HSA engaged members by providing critical information about voting requirements and voting dates, and shared resources and analysis on the platforms of the major political parties.

Beyond encouraging members to vote in the election, the union urged members to think about critical issues affecting our health care system when voting. In particular we focused on the need for a universal, public Pharmacare program. Under the hashtag #VotePharmacare, we released a factsheet and a series of social media graphics raising this issue.

TAKING ACTION FOR PRESUMPTIVE COVERAGE

In the spring of 2019, the union launched its campaign on presumptive coverage, which served as the main lobby topic for the Constituency Liaison program. The campaign calls on the BC government to expand WorkSafeBC presumptive coverage to the whole team of health care and community social service workers.

Under the presumptive clause, when a worker from an eligible occupation receives a formal diagnosis of PTSD or another mental health disorder as a result of a work-related traumatic event or events, it is easier to advance a Workers' Compensation claim. This will reduce stress for workers, encourage them to get help when they need it, and remove onerous bureaucratic steps to accessing support. We know that the faster someone seeks help, the faster the recovery, and the faster they are back at work.

Based on the initial response to the issue, HSA expanded the campaign in November to include a radio ad, four videos for digital distribution, and a letter writing campaign under the slogan: They support us. Let's support them.

The online content drove people to our campaign website – www.hsabc.org/coverage - where supporters could send a letter to the Minister of Labour and/or their local MLA expressing support for this critical issue. More than 1300 emails were sent to local MLAs and/or the Minister of Labour. This is a remarkable outcome, and far exceeded our expectations.

We also created a campaign postcard to help engage members, inviting them to write a message to the minister about what presumptive coverage would mean to them. We collected close to 300 postcards – all of which had very thoughtful comments about the nature of their work and the impact of work-place trauma – and delivered them to the Minister of Labour. Through this campaign, HSA members have come together, made our voices heard, and demonstrated that we are a force to be reckoned with!

OTHER POLITICAL ENGAGEMENT OPPORTUNITIES

The CL program continues to grow across both the health care and the child development centre (CDC) streams. In some constituencies, we now have two members working together. This means more members can join the program and gain experience, and elected MLAs are getting an even broader insight into the work of our members. CL training was held in June of 2019, and we are planning for another training session later in 2020.

Following the regional meetings in the fall, we had a number of members step up and join their local labour councils as HSA delegates. This increased interest in labour councils is great news, and is an important opportunity for members to coordinate actions and activities with the broader labour movement while sharing the work of our union with other affiliates. We want to keep growing our engagement with labour councils in 2020.

The committee wishes to acknowledge the work of all our members who serve as labour council delegates and CLs.

Through the Political Action Fund, the committee continues to support the important work of the BC Health Coalition by providing wage replacement for the member Edith MacHattie, who is the labour co-chair of the BC Health Coaltion. Thanks are owed

to her for so effectively carrying out this critical role. The BC Health Coalition continues to do remarkable work in the protection and defence of our public health care system, most notably being the lead intervenor in the Cambie Case, the charter challenge by Dr. Brain Day to expand private, for-profit health care in BC. After almost a decade, the case was set to be finally wrapped up in February 2020. The ruling is expected in six to 12 months.

The committee has continued its work to increase awareness of the Political Action Fund – a fund available to members in support of community-based political activism and education. There is information about the fund on the HSA website, but please contact the union if you have any questions.

Thanks to the entire committee for their work and commitment this year.

Respectfully submitted, Carla Gibbons Chair, Region 5 Director

WOMEN'S COMMITTEE



(L-R) Sharon Geoghegan (staff), Louise Vaile (Region 9), Brittany Sanders (Region 9 Director), Candis Johnson (Region 10), Mandi Ayers (Chair, Region 10 Director). MISSING: Nicole McIntosh (Region 6).

This year's Women's Committee consisted of myself as chair, Region 9 Director Brittany Sanders, and members-at-large Candis Johnson (Region 10), Louise Vaile (Region 9), and Nicole McIntosh (Region 4). We are supported by our wonderful HSA staff, Sharon Geoghegan and Julia Zavaleta. It was a busy year for us as we tried to fulfill the committee mandate to increase gender representation of the elected positions within the union, promote women's economic and social justice issues, and foster equality and labour solidarity. Below is a summary of the committee's major projects and activities from the past year.

WOMEN DELIVER CONFERENCE

The committee selected three members to attend this international conference held in Vancouver at the beginning of June 2019. At our first committee meeting, we received report-backs from the three members selected to attend. They all said the conference was well worth attending, but some attendees expressed that they were overwhelmed by the large choice of sessions and navigating the conference schedule and space. Some also felt the panel presentations did not have enough union representation.

SUMMER INSTITUTE FOR UNION WOMEN

The BC Federation of Labour hosted the Western Regional Summer Institute for Union Women at UBC in Vancouver from July 2-6, 2019. The theme for the conference was "Equity. Justice. Reconcili-action: Building worker power through intersectional feminism and activism." The HSA Women's Committee selected eight members and one daughter of a member to attend. The attendees spoke highly about the conference and felt it was a great experience.

DECEMBER 6 COMMEMORATIONS

December 6th marks the anniversary of the École Polytechnique shooting, during which 14 women were murdered in Montréal in an act of misogynist violence. In 2018, HSA developed graphic materials to commemorate December 6th, the National Day of Remembrance and Action on Violence Against Women. Last fall, the materials were updated and distributed upon request to HSA chapters. Many members throughout the province took part in vigils held on December 6.

STOMP OUT PERIOD POVERTY

HSA has continued its campaign to Stomp Out Period Poverty. In the past year, various chapters have held very successful collection drives for menstrual products, which have then been donated to local organizations. HSA continues to work with the United Way and other community organizations to bring about systemic change and have products provided in public spaces. In 2019, the province announced that menstrual products would be provided in public schools across BC, and various municipalities across the country have announced initiatives to stock menstrual products in community spaces.

HSA took the resolution from HSA's 2019 Convention regarding this campaign to the National Union of Public and General Employees (NUPGE) triennial convention, and it passed unanimously. HSA board members challenged all delegates to fill their conven-

tion backpacks with menstrual hygiene products and donate them to local agencies in their hometowns. It is great to see the work of the committee branch out to other provinces. Now many other NUPGE constituent unions are holding events to deal with period poverty.

MENTORSHIP

The committee would like to continue its work in the area of mentorship. Last year's International Women's Day workshop focused on this topic. We did a follow-up survey to the attendees of the workshop to see if anyone had established or pursued a mentor/mentee relationship. Unfortunately the survey had little response, and those who did respond were not participating in mentorship relationships. The main takeaway from the workshop and the survey is that any sort of program needs to be organic and cannot be forced.

INTERNATIONAL WOMEN'S DAY

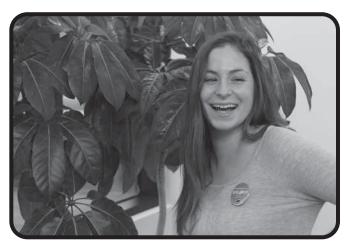
The committee hosted its annual International Women's Day workshop on March 4, 2020. The theme for this year was "Agents of Change: Women Building Inclusive Spaces." The workshop explored the importance of justice, equity, diversity, and inclusion. Participants were encouraged to incorporate these values into collaborative attitudes and approaches in order to build capacity to work cross-culturally.

I want to thank the committee for all their hard work this year. I also want to thank the members who participate in HSA events and campaigns, because without the members we wouldn't be able to make the progress towards the future we want to see.

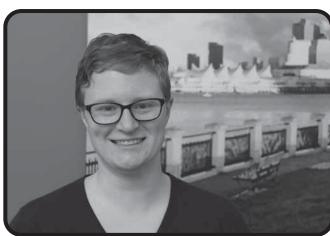
Respectfully submitted,

Mandi Ayers Chair

YOUNG WORKERS' ADVISORY GROUP



"Whatever you are not changing, you are choosing." Laurie Buchanan



"Without deviation from the norm, progress is not possible." Frank Zappa



"Our differences can make a positive difference" John C. Maxwell

Clockwise from top left: Alexandria Walenciak (Region 1), Karen Sandhu (Chair, Region 4), Jill Slind (Region 5)



"Joy is something that we have to choose and then work for." Francis Chan



"If you do not believe in yourself, no one will do it for you." Kobe Bryant

(L-R): Jennifer Hiscock (Region 10) and Jas Giddha (Region 7 Director).

Over the last two conventions, we have heard the spirit of young workers, who called on our union to create a space which would foster increased young worker involvement within HSA. As it stands, young workers make up one-third of the union membership, but those numbers are not reflected within union positions.

In December 2019, the Young Workers Advisory Group (YWAG), established by the Board of Directors, met for the first time. The group formed as a result of a motion passed at convention that year. The purpose of YWAG is to work with HSA's leadership and the board to build a partnership between young workers and the union that would support and increase active participation of young workers within the union, thus strengthening the union as a whole.

The Young Workers Advisory Group is looking to develop mentorship opportunities for all members, in accordance with HSA's 2015-2020 strategic plan, and advocate on issues important to all HSA members, which may impact young workers in a different way. As young workers, we bring new perspectives, energy and passion to the union. We also bring a unique skill set that can move the union forward in its goals. We are in our planning phases and would love to hear from you, whether you are a young or a more experienced worker.



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.

President [webpres@hsabc.org] Val Avery, Physiotherapist Royal Jubilee Hospital

Region 1 [REGION01@hsabc.org] Becky Packer, Physiotherapist Cumberland Health Centre

Region 2 [REGION02@hsabc.org] Derrick Hoyt, Pathologist Assistant Royal Jubilee Hospital

Region 3 [REGION03@hsabc.org] Cheryl Greenhalgh (Secretary-Treasurer), Medical Radiation Technologist Royal Columbian Hospital

Region 4 [REGION04@hsabc.org] Joseph Sebastian, Medical Radiation Technologist Vancouver General Hospital

Region 5 [REGION05@hsabc.org] Carla Gibbons, Cytotechnologist BC Cancer Agency

Region 6 [REGION06@hsabc.org] Tara Chen, Speech Language Pathologist St. Vincent's Hospital

Region 7 [REGION07@hsabc.org] Jas Giddha, Medical Radiation Technologist Surrey Memorial Hospital

Region 8 [REGION08@hsabc.org] Cherylee Hylands, Cardiology Technologist Penticton Regional Hospital

Region 9 [REGION09@hsabc.org] Brittany Sanders, Medical Laboratory Technologist Kootenay Boundary Regional Hospital

Region 10 [REGION10@hsabc.org] Mandi Ayers (Vice-President), Medical Laboratory Technologist Bulkley Valley District Hospital

EXECUTIVE DIRECTORS

Jeanne Meyers, Labour Relations and Legal Services

Josef Rieder, Human Resources

Kathy McLennan, Operations

MANAGING EDITOR

Miriam Sobrino

EDITORS

Samantha Ponting Katie Riecken

This annual report was produced on the unceded homelands of the Qayqayt First Nation and printed in Richmond, BC, on the unceded territories of the Kwantlen, Tsawwassen, Stó:lō, Stz'uminus, and Musqueam peoples. Unceded means that Aboriginal title to this land has never been surrendered or relinquished.

HSA recognizes the intersections between public health care and social services and Indigenous rights, noting that structural violence against Indigenous peoples in Canada, including historic and ongoing colonialism, impacts Indigenous peoples' equal right to the enjoyment of the highest attainable standard of physical and mental health, the right to access, without discrimination, all social and health services, and the right to their traditional medicines and to maintain their health practices (as outlined in Article 24, United Nations Declaration of the Rights of Indigenous Peoples).











