

THE REPORT

HEALTH SCIENCES ASSOCIATION OF BRITISH COLUMBIA

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HSA'S NEW PRESIDENT
VAL AVERY

CHANGES



WELCOME TO THE OCTOBER ISSUE OF THE REPORT, AND TO NEW LEADERSHIP AT HSA.

I assumed the position of union president in September after former president Reid Johnson announced his resignation. He let board members know this summer that, on a personal level, he had decided he would no longer continue as president, and resigned the position effective September 11. As provided under the union's constitution, as vice president, I stepped in to fulfill the role of president. An election will be held at the April 2014 convention, to see out the current term for president, which will expire in April 2015, when an election resuming the regular two-year term cycle will be held.

I thank Reid for his service to the members for the past six and a half years as president, and the many years he spent as a board member, including as the union's secretary treasurer.

In that time, he was a tireless advocate for our members during difficult times.

I come to this role having been an HSA member for 30 years. I have served as your Vice President since May 2009, and as chair of the Health Science Professionals Bargaining Association, which negotiates on behalf of 17,000 health science professionals working in BC's public acute and community health care facilities, I have been at the bargaining table defending our contract in a very hostile bargaining environment.

I am a physiotherapist by profession. Working at the outpa-

tient orthopaedic clinic at Royal Jubilee Hospital in Victoria, I have spent many years working alongside you. I know how much pressure our members face daily as they fight to provide their patients and clients with the best care possible in the face of cutbacks and shortages made worse by governments who too often take our work for granted.

It has indeed been a summer of change at HSA, including the tragic loss of our Labour Relations Membership Services Coordinator Dave Martin, who became ill in May, and passed away in August.

I worked with Dave for almost 20 years: first as a steward, later as a pool Labour Relations Officer and most lately as a member of the Board of Directors and at the bargaining table. Dave was a genuinely principled human being who lived every aspect his life with a commitment to fairness for all. His loss leaves a big hole in our hearts. At a wonderful celebration of Dave's life, I extended sympathies, on behalf of all HSA members, to his family, including his partner Yukie Kurahashi - who is also a long-time HSA staff member.

I look forward to working with you to meet the challenges ahead of us. We are, as always, stronger together.

I am a physiotherapist by profession. Working at the outpatient orthopaedic clinic at Royal Jubilee Hospital in Victoria, I have spent many years working alongside you. I know how much pressure our members face daily.

Val Avery

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BEHIND THE SCENES

In October, HSA launched its third televised ad. Broadcast around the province for several weeks and filmed by award winning national advertising agency DDB, the ad again uses light humour to show that health science professionals are the real stars of the health care story. You can watch it at hsabc.org.



FLU SHOT GRIEVANCE HEADS TO ARBITRATION

HSA ENCOURAGES VACCINATION BUT WILL FIGHT PUNITIVE POLICY

In October 2012 the Health Sciences Association of BC, on behalf of the Health Science Professionals Bargaining Association (HSPBA), filed a policy grievance calling for the withdrawal of the province-wide flu shot policy that threatens to fire health science professionals who refuse to declare whether they have been vaccinated against seasonal flu. In addition to the union's position that the policy breaches the collective agreement, HSA argues the policy violates member's privacy rights, as well as rights guaranteed under the Canadian Charter of Rights and Freedoms.

"The policy forces virtually anybody who works in health care to be immunized and make a public declaration they have been vaccinated; or wear a surgical mask every day for the duration of the declared flu season ... which can be as long as four months. The policy is punitive, since if people don't comply they risk being fired," said Reid Johnson, then president of HSA.

Jeanne Meyers, HSA's executive director of legal services and labour relations, said the bargaining association's grievance of the policy calls on HEABC to declare the policy is not in force and effect, and to revert back to the policy which was in place prior to August 2012.

"HSA has historically encouraged members to be vaccinated against seasonal flu, and continues to encourage members to be vaccinated. But we are firmly of the view that nobody should reasonably be expected to make a public declaration of their personal health choices. HSA will continue to defend members' rights to privacy," she said.

"While we do encourage members to take advantage of on-site flu vaccine clinics or to visit their family doctor to get a vaccine, we do recognize that

individual health care workers have a right to make their personal health decisions. If they choose not to be vaccinated for any number of factors ... including experiences with bad side effects to vaccines, and fundamental, philosophical, or religious objections to vaccination ... that is their right," Meyers said.

MEMBERS SUPPORT NEW AGREEMENT AT PARAGON ORTHOTICS

HSA MEMBERS AT PARAGON ORTHOTIC LAB IN VICTORIA, A MANUFACTURER OF CUSTOM FOOTWEAR ORTHOTICS, HAVE VOTED UNANIMOUSLY IN FAVOUR OF ACCEPTING A FOUR-YEAR COLLECTIVE AGREEMENT.

Highlights of the agreement include wage increases equal to the cost of living, or a minimum of 2 per cent, in the third and fourth years of the agreement, in addition to increased benefit coverage in the third and fourth years of the agreement. The benefit coverage improvements include increases in dental coverage, as well as the introduction of eyeglass coverage for employees' spouses.

The new Family Day statutory holiday will be added to the list of statutory holidays and will be accounted for in the holiday reimbursement formulary.

HSA Chief Negotiator Josef Rieder thanked members for their support of the efforts of their bargaining team.

"Members have voted in favour of an agreement that reflects the financial times, and some of the challenges facing their employer, and in turn Paragon Orthotic Lab has shown through this fair agreement that they value the work of their employees," he said.

The collective agreement is in effect May 1, 2013 to April 20, 2017.



Left to Right: Karim Kanji, Julia Thickett, James Benson, Sharon Martin, Terry Ho, Sean Mckibbin, Nadine Soukoreff, Debora Munoz, Ashley Sumner, Benita Spindel, David Noga, Helga Wainwright, Penny Regier

ENHANCED DISABILITY MANAGEMENT PROGRAM REPRESENTATIVES READY TO HELP

Jointly developed with employers and other unions over several years, EDMP is an employee-centred, proactive and customized disability management program for employees with both occupational and non-occupational illnesses and injuries. Right now, EDMP is being made available for HSA members covered by the health science professionals collective agreement and the community health and support collective agreement, but HSA is working to extend this program to all our members.

Regional EDMP representatives are ready to help you. To contact them or find out more, visit hsabc.org/member-benefits/edmp.

HSA WELCOME NEW MEMBERS AT TWO LOWER MAINLAND SITES

LOOKING FOR STABILITY AND A GREATER VOICE, EMPLOYEES AT TWO MORE WORKSITES HAVE JUST JOINED HSA.

Located in White Rock and funded by the provincial Ministry of Children and Family Development (MCFD), Winter House is run by Sources Community Resources Society. Staff there work to provide short term, emergency residential services for up to five youth ages 13-18 who are experiencing crisis. Winter House provides

a safe environment in which youth can stabilize before being placed. While in residence youth are supported to attend school, or other day programs.

HSA represents members working at other facilities managed by Sources, and in May, 16 child and youth care workers at Winter House certified their membership with the union.

At the Alberni Community and Women's Services Society, another 18 new members joined on July 30. The members offer important services to vulnerable

women and children: a transition house for women and kids escaping domestic violence and abuse, a program to assist women on campus at North Island College called Safer Hands, and several programs offering sexual abuse intervention and resources to help children who witness abuse.

Members at both sites will benefit from the contract negotiated by the Community Social Services bargaining association.



Coquitlam

Global
BC

GLOBAL TV INTERVIEWS SALLY COMIN AND HER SON JAKE ABOUT THE IMPACT OF CUTS

LOSS OF MENTAL HEALTH COUNSELLORS PUTS CHILDREN AT RISK

INPATIENT PSYCHIATRY PROGRAM AT CHILDREN'S HOSPITAL CUTS HOURS, REPLACES FIVE YOUTH AND FAMILY COUNSELLORS WITH ONE PART-TIME NURSE

SALLY COMIN SAYS SHE WOULD HAVE LOST HER SON WITHOUT IT.

About ten years ago, her son Jake was referred to the in-patient psychiatry program at BC Children's hospital. He was only seven years old, but he'd been bounced around through a number of community resources, and she was exhausted and discouraged. But at Children's, the youth and family counsellors learned more about Jake's mental health challenges and developed strategies to cope with them.

"If it wasn't for the youth counsellors, who observed him, worked with him, and came up

with a behaviour program that we were able to use at home, we would have lost him to foster care," Comin said.

"He formed a relationship with one of the counsellors, and that trust and consistency was essential. As is the overnight stay. You can't observe everything in a three-hour daytime visit," she said.

With skillful and caring support, kids with mental health challenges can meet and exceed their potential. But changes to the program that help Jake may no longer be available for other children and the families who love them.

The unit closed for a month in

July and August to allow for a redesign of the treatment model. For many years a 24/7 inpatient program, it will now run only during daytime hours from Monday to Friday. Changes also include reducing the number of experienced youth and family counsellors (YFCs) from the health care team working with the children aged 5 to 12 years old and their families.

In a management document circulated to staff, the change in program says "a day treatment model will improve the quality of care for children and their families through consistency in staffing and a focus on relationship development. This is in keeping with evidence-based

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WHAT YOU CAN DO

Letters from the public make a big impression on political leaders and decision makers at the health authority.

Take a minute right now to visit hsabc.org where we make it easy to compose a letter, send it to key officials in the government, at the hospital and the health authority, and send a copy to your local MLA.

practice and with a focus on attachment theory and trauma informed care."

Five counsellors have been removed from the program, and replaced by a part time nurse. As a result of the reduced service through the closure of the weekend and nights in the program, nurses will be rescheduled to cover the day program.

HSA says members are stumped by the change.

"Youth and family counselors have been working in the program for years, and are at a loss to explain how removing them from the team improves the treatment plan," said Val Avery, president of the Health Sciences Association of BC.

"There has been no consultation with front line staff or allied health professionals regarding changes to the program, and there has been no public forum for discussion of program changes and their impact on families," she said.

While the program plan is supposed to increase the nurse-to-patient ratio, counsellors say that adding more nurses at the expense of counsellors trained and experienced in cognitive-behavioural interventions, crisis management, therapeutic support, parent education, and other skills will contribute to a decline in outcomes for children

in the program.

"It takes a whole team to provide the kind of services and treatment that these children need," Avery said.

Staff say the continuous process of program redesign without evaluation and staff training has resulted in an increase in threat of emotional and physical violence to patients, families, and staff. In 2012/2013, there were more than 300 reports of behavioural safety related events.

The YFCs are concerned the changes will impact the children, families and community support teams because of the reduction of services available to families who depend on the mental health services at BC Children's Hospital. Among the changes will be a reduction in the level of assessments and treatments provided by the in-patient program.

Nurses who work in the program are also concerned about the elimination of the YFCs.

"YFCs are a valuable resource... and bring a skill set that nurses do not possess. As the registered nurses (RNs) and registered psychiatric nurses (RPNs) we oppose these changes," nurses who work in the program said in a July 2 letter to management.

The service reduction comes on the heels of a scathing report of

the Representative for Children and Youth on the status of mental health services for youth and families. The report lambastes the lack of acute care in hospitals and inadequate supports for families and caregivers. The report also sheds light on a fractured and confusing system of care and a "distinct lack of provincial leadership and accountability."

Tara Skobel, spokesperson for the Child and Youth Care Association of BC, notes that the YFCs play an important role in the multi-disciplinary care vulnerable young people receive. It is the YFC's role to deal with the behaviours, the emotions and social aspects of the children's stay in the hospital.

"It is concerning that the specialized skill set and education that professional Child and Youth Care workers bring to this important resource will be lost in this re-design, particularly at a time when we are hearing more and more about the need for more supports for British Columbian's vulnerable young people," she said.

Skobel said the change to a day program effectively eliminates what is often a 'last-resort' option for families who don't have the ability or resources to commute from outlying areas to the west side of Vancouver for the program.



FAMILY SERVICE WORKERS PROVIDE VITAL PROGRAMS FOR VULNERABLE FAMILIES ACROSS BC.

GOVERNMENT RENEGS ON THEIR OWN DEAL

COMMUNITY LIVING AND FAMILY SERVICE PROGRAMS MAY BE CUT AS THE GOVERNMENT REFUSES TO FUND NEGOTIATED WAGE INCREASES THEY NEGOTIATED

THE INK WAS BARELY DRY ON THE NEW CONTRACT WHEN HSA LEARNED THAT A NUMBER OF EMPLOYERS WERE NOT PAYING THE WAGE INCREASE NEGOTIATED IN APRIL.

Without government funding to pay the negotiated 1.5 per cent increase, some employers decided to reduce the number of hours of work or cut programs and services for vulnerable families across BC.

Family service workers provide vital community-based social programs for vulnerable children, struggling youth and families across British Columbia. Community living workers

provide programs and support for people with developmental disabilities. Three-quarters of British Columbians have used community-based social services delivered by not-for-profit agencies across the province.

The funding issues concern a small number of agencies – largely in the General Services subsector – that have not received sufficient funding from the Ministry of Children and Families (MCFD). Other agencies are not affected.

“This is unacceptable. There shouldn’t be any further cuts to programs or services due to a lack of bridge funding,” said Community Social Services Bargaining Association Chair



We upheld our side of the deal. The government should do the same.



Patsy Harmston who is also Community Social Services Chair at the B.C. Government and Service Employees' Union, the largest union in the sector. "We negotiated the 1.5 per cent wage increase in good faith and found savings in our collective agreement to pay for it. The pay raises were negotiated and ratified within the government's so-called co-operative gains mandate, which identified cost savings to fund the pay raises. However, MCFD has failed to provide bridge funding to cover the payroll increase until the cost savings can be achieved in two to three years.

"We upheld our side of the deal. The government should do the same," said Harmston.

The following community-based social service agencies are not paying the 1.5 per cent wage increase or may be cutting programs and services because they have not received proper funding:

- John Howard Society - across British Columbia;

- Prima Enterprises - Kamloops and Prince George;
- Okanagan Boys and Girls Club - Kelowna, Vernon, Penticton;
- Abilities Community Services - Victoria;
- Interior Community Services - Kamloops;
- Bernard C Vinge & Associates Community Living Services - Burnaby;
- Richmond Society for Community Living;
- North Okanagan Youth and Family Services - Vernon;
- South Okanagan Association for Integrated Community Living - Penticton.

Pay raises were negotiated and ratified within the government's so-called "co-operative gains" bargaining mandate, which identified cost savings to fund the pay raises that were to take effect April 1, 2013.

The Ministry of Children and Family Development has failed to provide bridge funding

to cover the payroll increase until the cost savings can be achieved in two to three years. By contrast, the Ministry for Social Development has provided the same funding for the much larger number of community-based social services that it funds.

"Why are some programs being treated differently than others? This discrepancy amounts to program cuts by stealth and bad faith bargaining," says Harmston.

The Community Social Services Bargaining Association bargains on behalf of 10,000 unionized community-based social service workers that work with vulnerable British Columbians. The bargaining association includes HSA, BCGEU, CUPE, HEU, and six other unions.

FOR UPDATES ON THIS STORY

Visit hsabc.org and facebook.com/HSABC or follow us on Twitter at @hsabc



MOVING ON

AFTER ALMOST SEVEN YEARS AS PRESIDENT OF HSA,
REID JOHNSON IS LOOKING TO TAKE ON NEW CHALLENGES

REID JOHNSON,
PRESIDENT OF HSA SINCE
2007, HAS DECIDED TO
CALL IT A DAY.

"The timing is right for me to step away from the leadership of the union," he said. "I join with the rest of the board of directors in welcoming Val Avery who will take over as president until an election is held in April 2014. Val has served in many important capacities in the union and is fully prepared for the work ahead in the coming months."

First elected as president in April 2007, Johnson earned his Masters of Social Work at UBC and holds a post-masters certificate in family therapy. He has worked in psychiatry, spinal cord and vocational rehabilitation, and in family therapy. Johnson originally joined HSA in 1988 and has been a full-time member of the union since 1990. He joined the Board of Directors in 1997, and previously served as the union's secretary-treasurer.

"It has been a privilege for me these past six and a half years to represent HSA members working throughout the health care and social services systems."

Under his leadership, the union has focused on increasing staffing to support labour relations services to members, including specialized support for disability management and pension advocacy, as well as raising the profile of health science professionals as integral members of the modern health care team. Since his election in 2007, unprecedented resources and support have been committed to a long term advertising program, and developing a sophisticated and professional government relations strategy involving direct lines of communication between HSA members and elected officials.

"I'm proud of the work we've

done to raise the profile of our members and the work they do every day. In addition to the province-wide televised ads that turned so many heads, we organized our first lobby day with government and opposition members in Victoria, and that, along with our other government relations work, has given us direct access to key decision makers."

Johnson also pointed to HSA's increased participation in the labour movement in BC and across Canada.

"HSA became a core contributor not only to the BC Federation of Labour, but also to the National Union of Public and General Employees. We can point to an im-



VAL AVERY NAMED NEW PRESIDENT

pressive track record, whether supporting NUPGE's efforts to make substantive changes to the Canadian Labour Congress' constitutional language around raiding or introducing a standing finance committee and biennial conventions to the BC Federation of Labour."

Johnson says Avery is experienced, supported by a great board and ready to get to work on behalf of the members.

"She's going to do great work."

"It has been a privilege for me these past six and a half years to represent HSA members working throughout the health care and social services systems in British Columbia," Johnson said. "In the three terms I served I attended almost 100 chapter meetings, spoke face to face with thousands of members and was always excited to get out into the worksites."

"In that time members have been under continuous pressure to deliver excellent and compassionate services in spite of growing shortages, tightening budgets, and continued assaults on those very services," he said.

As provided under the union's constitution, vice president Val Avery, a physiotherapist at Royal Jubilee Hospital in Victoria, has stepped in as the new president. An election will be held at the union's April 2014 annual convention.

A union member for 30 years, Avery has served as the union's vice president since May 2009. Avery has been the chair the Health Science Professionals Bargaining Association, which negotiates on behalf of 17,000 health science professionals working in BC's public acute and community health care facilities. She led the committee through the last two rounds of bargaining.

Avery is a member of the board of directors of the Canadian Breast Cancer Foundation - BC and Yukon Branch. She has served as a general steward, assistant chief steward, chief steward, member-at-large, district representative, relief labour relations officer and on several union committees.

She is a strong advocate for health science professionals and the public health care system, and is committed to speaking up for quality and accessible health care and community services, and respect for the people who deliver these services.

Janice Morrison, a physiotherapist at Kootenay Lake Hospital, has been elected by the union's board of directors to fulfill the duties of vice president, and Brendan Shields, a music therapist at Richmond Hospital, will serve as secretary-treasurer.

A byelection for Regional Director for Region 2 will be held in the coming weeks to fill the vacancy on the board of directors created by Avery's new position as HSA President.



CONSERVATIVE MP PIERRE POILIEVRE NEEDS TO HEAR FROM YOU

HARPER'S PLAN TO HOBBLE HSA

PROPOSED BILL COULD END DECADES OF PROGRESS FOR WORKING PEOPLE

THE CONSERVATIVE GOVERNMENT OF STEPHEN HARPER APPEARS HELL-BENT ON PASSING LEGISLATION THAT WILL MAKE IT VERY DIFFICULT FOR CANADIAN UNIONS – INCLUDING HSA – TO DEFEND THEIR MEMBERS.

The Harper government's push focuses on Bill C-377, a private member's bill first introduced by Conservative MP Russ Hiebert. The bill would impose upon unions excessive financial reporting requirements that are not required of similar organizations. HSA, like all unions, already produces annual reports allowing members, the media and the public to examine our financial operations, so the bill would have the effect of bogging the union down without adding to transparency.

The Canadian Bar Association says Bill C-377 should be withdrawn because it would invade the personal privacy

of individual Canadians and is likely unconstitutional. Canada's federal Privacy Commissioner also said that the bill would invade personal privacy and overreaches in its intent.

The bill is so controversial it's even being fought by Conservatives. Over the past year, several Conservative senators proposed a series of amendments intended to remove the most destructive aspects of the bill. However, Stephen Harper's recent move to prorogue parliament has the effect of undoing the senator's proposed amendments. Most recently Pierre Poilievre, Minister of State for Democratic Reform, has stated that passing Bill C-377 in its original form is a top priority, even if it requires abolishing the senate.

The Canadian Labour Congress is working to oppose the bill but members like you can make an important contribution by speaking out about the following concerns.

Information on union finances

WHAT'S AT STAKE

The proposed changes could leave HSA and other unions tied up with discriminatory and excessive financial disclosures.

That means fewer resources for protecting members when they get sick or injured, suffer unsafe working conditions or face managers who don't follow the rules.

WHAT YOU CAN DO

Contact your local MP to express concern.

Contact Conservative senators fighting the bill and express your support.

Write letters to the editor of your local newspaper.

Talk to fellow members.

is already available to any members attending meetings of their locals, and also at annual conventions. In addition, most provinces also have additional reporting requirements.

Bill C-377 discriminates against unions. The Conservatives would single out unions to make public detailed financial information but they are not forcing organizations representing doctors, lawyers, accountants and others to produce similar detailed financial reports.

Bill C-377 invades the privacy of individuals. Bill C-377 would force every labour organization in Canada to file detailed financial information not only about the labour movement, but also the individuals and companies who do business with us.

Canadian mutual fund and life insurance firms have also expressed alarm over how the privacy of their clients and investors might be violated in a bill that claims to be aimed mainly at labour unions.

THE VOICE OF LABOUR IN YOUR COMMUNITY

LABOUR COUNCILS ARE ABOUT PEOPLE FOCUSED ON THE ISSUES THAT MATTER AT THE LOCAL LEVEL

MANY HSA MEMBERS ARE AWARE OF THE CANADIAN LABOUR CONGRESS, AND THEIR WORK PROMOTING THE INTERESTS OF WORKING PEOPLE ON THE NATIONAL AND INTERNATIONAL STAGE.

Similarly, the work of the BC Federation of Labour at the provincial level to improve the lives of working families is familiar to most HSA members.

But members may be less familiar with the local labour council that is the face and voice of labour within their own community.

Region 1 Director, Anne Davis, is a long-time delegate and currently Vice-President of the Campbell River, Courtenay District Labour Council.

"Labour council is a place where I can work with other union activists on the issues that matter in my community. Things like sustainable jobs, improving worker safety, keeping public services public, getting a real child care program and improving employment standards so that all workers - whether they're unionized or not - have decent working conditions."

HSA is a proud member of the labour movement, the CLC and the BC Federation of Labour. HSA encourages and supports

chapters to affiliate to their local labour councils, and members to serve as labour council delegates.

HSA chapters will hold steward elections later this fall. This is also the time for chapters to consider affiliating to their local labour council, and to nominate new, as well as confirm existing, labour council delegates. HSA pays all affiliation fees, and provides training and support for members to serve as delegates. A one-day workshop for HSA's labour council delegates will be held at the HSA office early in 2014. This will be a great opportunity for new delegates to learn about their role, and for experienced delegates to share their knowledge and plan their labour council work for the coming year.

"I really urge HSA members to get involved in your local labour council", says Davis. "You have a lot to offer, and it's a great opportunity to work with members of other unions on important issues."

For more information on affiliating your chapter to your local labour council, or becoming a delegate, contact Carol Riviere at the HSA office at criviere@hsabc.org.

FIVE GREAT REASONS TO BECOME A LABOUR COUNCIL DELEGATE

1.

Learn about the other unions in your community.

2.

Inform other unions about HSA issues.

3.

Work with members of other unions on issues that are important to your community.

4.

Obtain training and develop skills to promote issues within your community.

5.

Get involved in local politics.

FAIRNESS WORKS

WE STAND UP FOR FAMILIES.

Today, Canada's workforce is made up of both women and men. Gone are the days when one income was enough to raise a family. The labour movement's demands that employers provide paid leave for new mothers resulted in the creation of "maternity leave benefits" from the federal government in 1971. Ten years later, the Canadian Union of Postal Workers went on strike to win additional weeks of paid maternity leave for their members. Now, working parents can share 35 weeks of parental leave through the EI program. And as parental leave continues to evolve, the labour movement continues to negotiate with employers and push governments to support working parents. [Learn More](#)



AT FAIRNESSWORKS.CA YOU'LL LEARN ABOUT HOW UNIONS BENEFIT MEMBERS AND THE ECONOMY

TIME TO TALK ABOUT THE VALUE OF UNION MEMBERSHIP

MILLIONS OF CANADIANS PAY UNION DUES. HOW MANY STOP TO THINK OF WHAT THEY GET IN RETURN?

THIS FALL, THE CANADIAN LABOUR CONGRESS AIDS TO LAUNCH THE LARGEST MEMBER-TO-MEMBER ENGAGEMENT PROGRAM IN CANADIAN HISTORY.

The "together FAIRNESS WORKS" program hopes to engage three million unionized Canadians about the value of their membership. It includes promotional material you can expect to see at the workplace, training workshops on member engagement for affiliates, and communications material that can be adapted for local worksites.

TFW is a workplace canvass. Identified and trained members will carry out the project by approaching members in an organized fashion to have a series of conversations.

This campaign is different. It's not solely focused on an action

like signing a petition, pledge, postcard; going to a rally, meeting or taking a strike vote. Instead, this project is about approaching all members, active, inactive and hostile, to listen to and hear from them.

The project aims to inform and educate members about what unions have done to improve life for all Canadians and why we must ensure labour rights are protected moving into the future.

The plan is to reach all members, in every workplace in order to find out about their core concerns and values. It is designed to build trust and interest rather than to immediately push for support of an idea or action.

It is the hope that by making

a personal, thoughtful connection that isn't all about the "ask", members who don't have an active relationship with the union or those who are hostile will shift how they feel about the union.

Ultimately, once connections have been made to a member's priorities, organizers will tie that interest back into the work of the union and how the union has been a benefit to the member.

For active members, it may only take one conversation for them to understand that labour is up against serious challenges; for more distant, non-active or indifferent members a series of conversations may be needed to be able to engage in this topic.

To find out more about Together FAIRNESS WORKS, visit fairnessworks.ca.

ALWAYS CHECK YOUR PENSION STATEMENT

AND DO YOU KNOW WHO TO TURN TO WHEN YOU THINK IT'S WRONG?

BY DENNIS BLATCHFORD
HSA PENSION AND
BENEFITS ADVOCATE

In reviewing my annual pension statement, I notice that I have less than a full year of pensionable service. I don't recall missing any of my scheduled shifts for the year, yet I appear to be short of a full year of service. How can this happen, and what should I do about it?

Your annual Member Benefit Statement (MBS) is an important source of information on your specific pension entitlements as a member of the Municipal Pension Plan (MPP). This annual June mailing is something members should review to ensure it reflects the service you put in during the previous year. If your MBS shows an unanticipated shortfall of service, then you may need to contact payroll to find out why. Quite often there is a good explanation for the shortfall. If you don't keep a personal record of your hours, it can be quite easy to forget the odd variance in your work schedule. After all, by the time you receive your MBS, some of the information is from 18 months ago. Even a few hours off for a personal appointment will be reflected in your pensionable service totals; unless the absence was drawn from a pensionable source like your vacation or sick bank.

Would it be easier just to call the Municipal Pension Plan?

Actually, your first call is to your payroll department. The BC Pension Corporation (Pension Corporation) is the administrative agent for the Municipal Pen-

In this digital age, it may seem quaint to keep track of your hours, but that information may be useful if a dispute arises over your pensionable service.

sion Plan. The Pension Corporation is responsible for sending out the annual Member Benefit Statement, however, the benefit information is simply a summary of the payroll data submitted by your employer. If there are errors or omissions in the data, it will be reflected in your Member Benefit Statement.

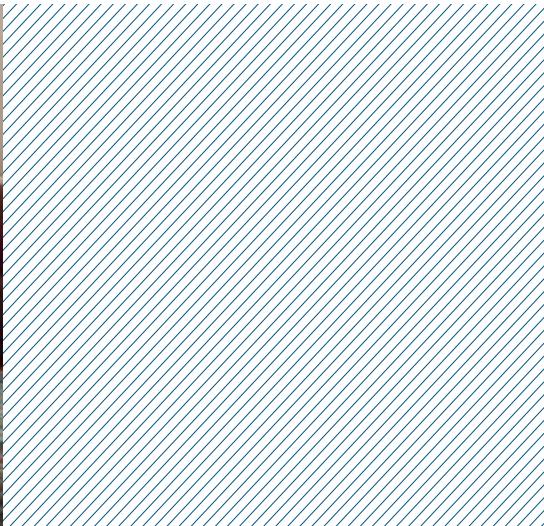
The annual MBS serves as a cross check for members and this information should not be ignored. You are providing your labour, and your employer is receiving same. If there are issues with this exchange, (labour for pay) then they need to be resolved in order that your pensionable service accruals are accurate. In this digital age, it may seem quaint to keep track of your hours, but that information may be useful if a dispute arises over your pensionable service. By and large, modern payroll systems are sophisticated and have a high degree of accuracy. But these systems are not infallible and certainly not closed to questioning. In fact, most members report that payroll departments were very

helpful in sorting out, and in some cases, correcting payroll data for pensionable service. If you have questions or concerns about your MBS, it can never hurt to ask for an explanation from payroll.

What if I'm still not satisfied after dealing with payroll?

Your next stop should be your local steward. HSA devotes a lot of time and resources to training and supporting the work of stewards in the workplace. Many have a lot of experience in payroll matters and a good understanding of the collective agreement. Where that expertise is lacking, most stewards will have a chief steward or labour relations officer readily available for guidance and support. Stewards need to know if members have active issues with the employer. They can't act if they don't know; and they may be able to quickly verify if you have grounds for complaint. Your Pensions and Benefits Advocate is also happy to take pension-related calls from members or stewards.

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



MUSIC THERAPIST BRENDAN SHIELDS WORKS AT MINORU RESIDENCE IN RICHMOND

MUSIC HAS POWER

BY BRENDAN SHIELDS

I'M A MUSIC THERAPIST, AND THE FIRST THING PEOPLE ASK ME IS, WHAT'S MUSIC THERAPY?

As a profession, music therapy developed in the aftermath of the Second World War. Shell-shocked veterans didn't respond to traditional approaches, but music seemed to reach them, and help them process their experiences.

It's evolved considerably since that time, along with so many other disciplines within the world of modern health care. Today, music therapy involves the skillful use of music and musical elements to promote, maintain, and restore mental, physical, emotional and spiritual health. Music has qualities that are non-verbal, structural, creative and emotional, and these are used in the therapeutic relationship to facilitate contact, interaction, self-awareness, learning, self-expression, communication and personal development.

Once you complete a bachelor's degree in music therapy and perform 1000 hours of intern-

ship, you can work on a wide array of specialized treatments, helping people with everything from substance abuse to cancer treatment.

The other thing people ask me is how you actually "do" music therapy.

A typical day starts with using a guitar or other instruments with a large group, addressing isolation and building community. Familiar songs and rhythms motivate people to get involved and interact. Later, you might spend time with someone who is dying. Music can provide emotional comfort, and a clinical technique called "entrainment" can help relieve laboured breathing. Finally, you might work with a physiotherapist or occupational therapist to help clients to recover function. Using rhythm and lyrics, a skilled music therapist can activate and motivate clients who are addressing physical goals to engage more fully in their treatments.

MUSIC THERAPY CAN HELP PATIENTS WITH

- Acquired brain injury
- HIV/AIDS
- Autism and other pervasive development disabilities
- Critical care
- Developmental disabilities
- Emotional Traumas
- Geriatric care
- Mental health
- Neonatal care
- Obstetrics
- Oncology
- Pain control
- Palliative care
- Physical disabilities
- Speech and language impairments
- Substance abuse
- Teens at risk
- Victims of abuse

SOMETIMES THERE'S JUST NO TIME TO SEARCH THE WEB

ACCORDING TO A NEW RULING, POSTING FIRST AID PROCEDURES ONLY ON THE EMPLOYER'S INTRANET IS NOT GOOD ENOUGH.

BY DAVID DURNING
OCCUPATIONAL HEALTH
AND SAFETY OFFICER

WorkSafeBC has ruled that posters and hard copies of first aid information must be properly posted and readily available to workers throughout FHA work locations.

BACKGROUND

Last fall, WorkSafeBC advised the Fraser Health Authority they were in violation of Section 3.17 (2) of the Occupational Health and Safety Regulation because first aid procedures were not properly posted "conspicuously in suitable locations throughout the workplace...." WorkSafe inspectors found that first aid procedures – including contact phone numbers and injured worker transportation protocols – were not sufficiently available for workers throughout Surrey Memorial Hospital and ordered the health authority to fix the problem. The FHA responded by appealing the order, arguing that they had met their legal obligation by posting the procedures on the FHA intranet. The health authority also argued it was not reasonable for them

to post hard copies in multiple locations.

The HSA was asked to comment on the matter. A submission was made to the WSB Review Division in May. The union pointed out that having first aid procedures only available on the FHA intranet was a violation of the OHS Regulation because:

1. Many workers at Surrey Memorial (and in other FHA sites) do not have easy access to the health authority intranet and as a result did not have access to necessary first aid information.
2. The union found that even among those workers who regularly access the FHA intranet, it was not an easy task to locate first aid information.
3. At Surrey Memorial Hospital there are more than 400 HSA members employed by health authorities other than the FHA. Extra steps may be required for those workers to access the FHA intranet and no clear direction was provided by FHA directing those workers to the proper first aid procedures.
4. FHA first aid procedures posted on the intranet were quite specific to the FHA even though many SMH workers are employed by other health authorities.
5. FHA, as the prime contractor at Surrey Memorial, is responsible for the health and safety of all workers at the site, regardless of which health authority they work for, so first aid procedures must be readily available to all.

THE OUTCOME

The decision of the Review Officer, which is a final decision from WorkSafeBC, was that FHA must post the appropriate hard copy first aid information conspicuously throughout the workplace.



ADESH KAHLON, ULTRASOUND TECHNOLOGIST

BY LAURA BUSHEIKIN

ULTRASOUND TECHNOLOGIST ADESH KAHLON KNEW EARLY ON WHAT CAREER PATH SHE WANTED. AND WHEN SHE GOT INTO THAT CAREER, SHE KNEW, WITH EQUAL CLARITY, THAT SHE WANTED TO BE IN A UNIONIZED WORKPLACE.

So when CML Health Care, the private facility in Surrey she's worked at since 2002, was contemplating joining HSA, she supported the process in any way she could.

Her first health-care position was not unionized - but it set the course of her career. In her teens, Kahlon had a part-time job at St. Joseph's Hospital in Comox, delivering food trays to patients and long-term care

residents. Even at that young age, Kahlon realized she'd found her direction.

"I really liked working with the patients," she says. "The interactions were really interesting and meaningful." So after high school graduation, she went into a three-year x-ray program with two years at BCIT and one year of clinical placement. While working at the Cross Cancer Institute in Edmonton, she signed up for on-the-job training as a medical sonographer (also known as ultrasound technologist), eager not just to learn a new skill but also to move into a field that has more patient interaction.

The Cross Institute was unionized and Kahlon could see how that benefited everyone. When she moved back to BC and got a position with CML, she was happy to get a job she loves at a great facility in a vibrant,

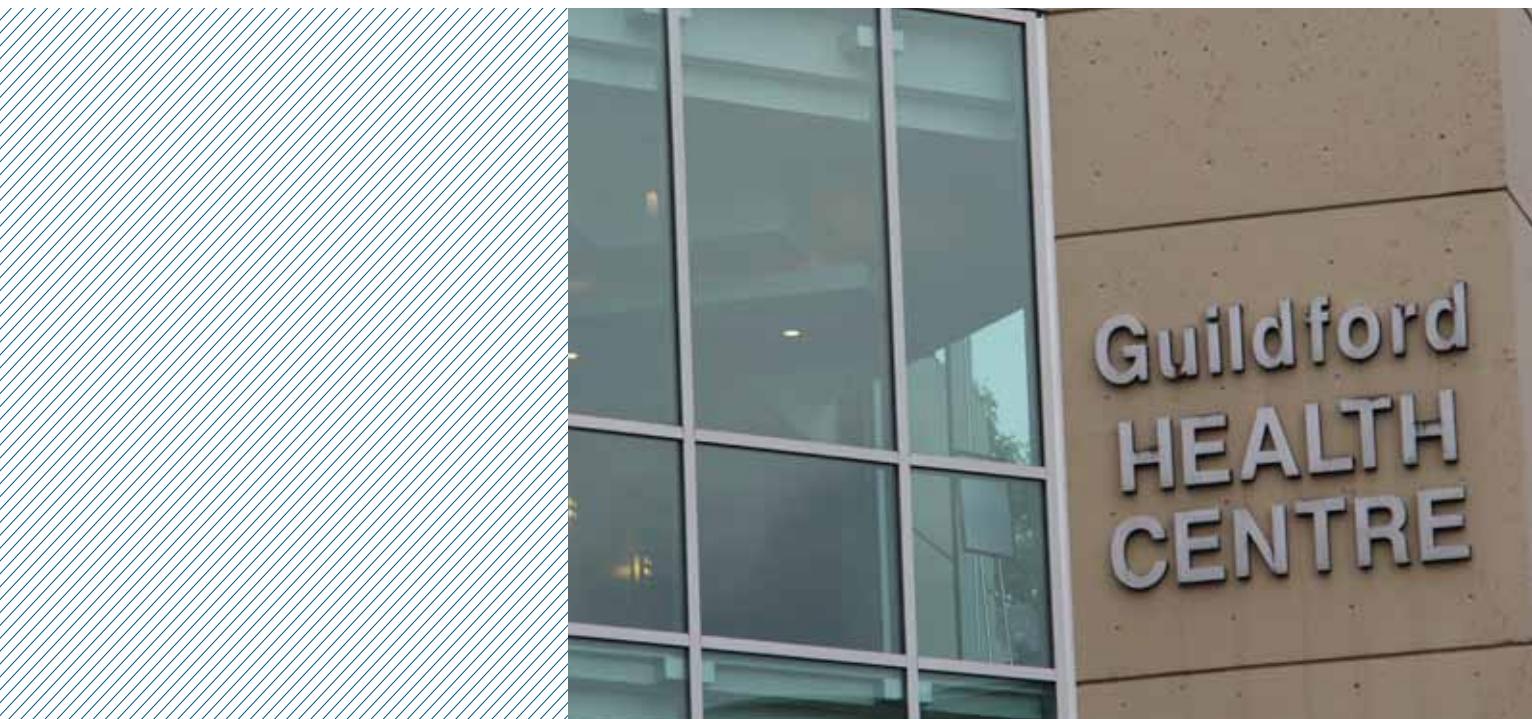
multicultural neighbourhood, but disappointed to find that the workplace was not part of a union.

This changed in 2008 when the CML staff voted in favour of joining HSA. Since then, says Kahlon, her workplace has seen many benefits.

"The most important thing is the collective agreement. If there are any issues we follow a process and protocol. It applies to everyone equally and fairly. Before this people were paid different wages for doing the same job, no one knew how much others were making...now it is all clear."

"Everyone gets paid for overtime; we have proper coffee breaks and lunch breaks; casual is handled better; seniority is considered when there are job openings; and we have job security."

"We have an RRSP plan with



employer contributions, and there's been a lot of health and safety improvements. We now have proper monthly safety checks and we have a general and a health and safety steward that members can bring their concerns to."

All this translates into better patient care, says Kahlon. "We have better equipment which is looked after properly. We are able to properly address workload issues, and thus give more time to our patients, and perform better in general. When you're happier, and things run better generally, of course it transfers to your clientele."

Kahlon plunged into union involvement, joining committees, attending winter school, taking trainings, working on her local MLA's election campaign with the support of HSA's political action fund, and serving as constituency liaison.

"Being politically active has made me realize we all have the heart to change things for the better. We just need to be courageous enough to ask the questions, and engage in the opportunities that come our way."

"Being active in HSA has had a positive influence on all aspects of my life. I've probably learned more in the last few years than I did in the ten years before that. My awareness has expanded so much. Of course, workplace rights are central, but HSA's focus also expands into human rights, women's rights and global rights.

"Being politically active has made me realize we all have the heart to change things for the better. We just need to be

courageous enough to ask the questions, and engage in the opportunities that come our way. HSA has given me great opportunities to do that."

With a job she loves, a union that continually broadens her horizons and allows her to make a positive difference in the world, Kahlon is in a great position.

"I feel really lucky. If you enjoy what you do, your energy and enthusiasm just multiply," she concludes.



FAREWELL TO DAVE MARTIN

HSA LOST A VALUED LONG-TIME MEMBER OF STAFF THIS SUMMER, WITH THE PASSING OF DAVE MARTIN, MEMBERSHIP SERVICES COORDINATOR – LABOUR RELATIONS.

Dave joined the HSA labour relations staff in 1994. He was respected by stewards, members, colleagues, and his peers on the employers' side of the labour-management relationship for his ability to be pragmatic and practical, at the same time as being a forceful advocate for members. His knowledge of all the collective agreements covering HSA members made him an invaluable member of several bargaining teams.

After years of providing direct service to members, Dave moved into a supervisory role at the union in 2011, acting as a teacher and coach devoted to mentoring staff and union stewards supporting members advocating for members.

At a celebration of his life held in September, Dave's impact on

the lives of others was well documented. He had a remarkable number of friendships formed in childhood that endured for decades. They told stories of a devoted friend who understood the value of relationships. A regular campaigner for the NDP, others related anecdotes that depict a tireless commitment for social justice and workers' rights

He had a lifelong passion for baseball, jazz, union activism, the NDP, fine cuisine, and ocean kayaking.

For more than 18 years, he shared a deep romance with his partner Yukie Kurahashi, also a long-time HSA staff member. His loss will be felt by a tight-knit community of HSA staff and activists.

Dave was predeceased by his father Dave Martin Sr. and is survived by his mother Evelyn Martin, brother Paul, parents-in-law Mitsue and Dan Kurahashi, siblings-in-law Juneko Kurahashi (Mike Squance), Elina Kurahashi (Jonathan Mewis), niece Mika, and nephews Kaito and Kayda.



Katie FitzRandolph I can't begin to say how sorry I am to hear this. Dave was a fighter for the rights of workers, and that's a voice that will not be silenced, because the many people he influenced over his life will keep that voice alive. On a more personal level, I will miss a man with whom I shared an elusive bond - the connection between a son given up for adoption, and a mother who gave up a son - not Dave - for adoption. Though not related directly, we shared a story, a sense of being connected, a sense of loss. And we shared a passion for social justice. Please pass that passion on, in Dave's name.

August 13 at 6:32pm · Like · 45 3



Deb Cline So sad, RIP

August 13 at 6:41pm · Like



Lila Mah very sad news, we have lost a truly incredible man.

August 13 at 8:06pm · Like



Edith M I'm so shocked and sad to hear this!!! Thinking of his family and feeling grateful that he helped so many healthcare workers in BC.

August 13 at 8:19pm · Like · 45 1



Douglas Herasymuk Thank you for choosing to participate in and build the union movement to protect healthcare and healthcare workers.

August 13 at 8:45pm · Like



Jennifer Duprey I'm so sorry to hear this and send my condolences to Dave's family and HSA colleagues. Dave was a sincere, respected member of the labour community.

August 13 at 8:55pm via mobile · Like · 45 2



Cindy Stewart A very sad day - the labour movement has lost a fearless crusader and HSA has lost an invaluable member of the family. My deepest condolences to all.

August 13 at 9:58pm · Like · 45 3



Jae Yon Jones I am in shock and sad to hear of this great loss! My condolences to Yukie and his family for this tragic passing. He was a true activist and I had the honour to work with him as my LRO and on a union campaign. He will be sorely missed. The world lost a wonderful person and advocate for union rights.

August 14 at 4:24pm · Like



Melissa Gammon My heart goes out to Yukie & the family. Dave was a fair, inspirational leader..he will be dearly missed.

August 14 at 6:44pm · Like



Erna Bruce Truly sad news! H.S.A has lost a great advocate for labour and a great person! It was a pleasure to know and work with Dave over the years. He will be missed! My condolences to Yukie and our H.S.A. staff.

August 18 at 4:56am · Like



HEALTH SCIENCES ASSOCIATION

The union delivering modern health care

HSA's Board of Directors is elected by members to run HSA between Annual Conventions. Members should feel free to contact them with any concerns.

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Currently vacant

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Which union best represents RPNs?

BCNU

Tried to limit RPNs ability to post into psychiatry jobs and in some cases eliminate RPN jobs altogether.

Huge 25% dues increase = about \$200 to \$300 per year out of your pocket.

30,000 RNs
7,200 new LPNs. Where is your voice?

HSA

Advocating for RPN rights since 1971 and recognizes your specialized training and expertise.

HSA dues are 1.6% with all the benefits of the Nurses' contract.

1388 RPNs are HSA members. HSA is the expert advocate for RPN issues.

UPN

As an affiliate of BCNU, has been ineffective in getting RPN issues addressed in bargaining.

No union training and education, but you pay higher union dues of 1.85%.

No specialized staff to deal with professional college, classifications, disability management and occupational health and safety.

Find out more. Get involved.