**VOL. 36 JUNE 2015** 

# THEREPORT





2015 CONVENTION Find out what you missed PRESIDENT'S REPORT

# THE BACKBONE OF THE UNION

ONCE AGAIN, I AM HONOURED TO HAVE BEEN ELECTED TO SERVE AS YOUR PRESIDENT.

These are challenging times for people who work in health care and community social services. These are challenging times for unions. But we've proven that we can overcome these challenges - when we work together. We may represent over 100 different professions, but those differences don't divide us, they make us stronger. We are diverse, but not divided. Unique, but united.

There is much to be done as we move forward, and we will be guided by a strategic plan presented to convention delegates. The plan sets the course for our work for the next five years in five key areas: services, rights, engagement, relationships and resources. Founded on extensive consultation with members, this strategic plan is your instructions to the Board of Directors, your priorities for your union. The whole plan is posted on the web site, and I encourage all of you to read it.

Critical to this plan is the role of stewards. These are the women and men who step forward to volunteer their time, energy, skills and compassion to support their colleagues in the workplace, the leaders who stand up and defend all of us when employers push the limits of our agreements or jeopardize our health and safety.

Stewards are the backbone of the union, and as president, my work is founded on my experience as a steward.

When I got involved in HSA, the possibilities seemed endless. I was encouraged to take training, to learn all about labour relations, to take courses in public speaking, leadership, diver-

sity, and political action. I got involved in different union committees, including the provincial bargaining committee.

With each step, I learned I had more to contribute. I kept opening the doors, which eventually led me to the president's office.

It is my goal to continue to work to make sure the opportunities I had that led me to this leadership position exist for other members starting out in their

So I want to take a moment to encourage you to join me in thanking stewards for their hard work. I'd encourage all members to consider joining their ranks. It's challenging, sure, but take it from me, there's nothing like being part of a team working to make life better for others.





Stewards are the women and men who step forward to volunteer their time, energy, skills and compassion to support their colleagues in the workplace, the leaders who stand up and defend all of us when employers push the limits of our agreements or jeopardize our health and safety.

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## THE MAKING OF

When Rachel Notley made history on May 5, no one was prouder than the HSA staff and members who worked with her back in the day.

Notley, who led Alberta's New Democrats from four seats to government, ending 44 years of Progressive Conservative rule, worked at HSA from 1994 to 2002, representing injured workers and helping members with occupational health and safety issues.

"I always knew she'd be successful," says Carol Riviere, an HSA communications officer who worked alongside Notley. "I knew she'd do a good job for her constituents and make real breakthroughs as leader of the party." She digs into the issues because she wants to make a real difference."



# ALEADER

Riviere travelled to Alberta to volunteer on election day, along with labour relations officer Leila Lolua.

"We'd come out to help her on campaigns before," said Lolua, "but this time, the moment we got there, it was clear that something very big was happening."

Rebecca Maurer, HSA's Director of Human Resources and Operations, says Notley's election breakthrough may have been unexpected, but it was no fluke.

"The wonderful thing about Rachel is that her public persona and private persona are the same. The smart, warm, caring person who voters saw on the campaign trail is exactly who she is privately."

"I was struck by her intellect, passion and ability to connect personally with anyone. She's truly one-of-a-kind."



SOMETIMES CALLED "VAMPS," "TONGUES" OR "UPPERS," THE TOPS OF MOCCASINS ARE INTENTIONALLY NOT SEWN INTO MOCCASINS, AND REPRESENT THE UNFINISHED LIVES OF MURDERED OF MISSING INDIGENOUS WOMEN. OVER 1760 VAMPS HAVE BEEN MADE FOR A COMMEMORATIVE ART PROJECT BY "WALKING WITH OUR SISTERS".

# TRUTH AND RECONCILIATION COMMISSION FINDS "CULTURAL GENOCIDE"

CANADA'S TRUTH
AND RECONCILIATION
COMMITTEE HAS
RELEASED ITS REPORT
ON THE RESIDENTIAL
SCHOOL SYSTEM THAT
ABORIGINAL CHILDREN
- INCLUDING METIS AND
INUIT CHILDREN - WERE
FORCED TO ATTEND.

The program started in the 1870s and continued until the last schools were closed in the 1990s.

Evidence shows that the government tried to eliminate the culture and language of Canada's indigenous people for well over a hundred years. They did so by forcibly removing children from their families and placing them in institutions that the Commission has characterized as cultural indoctrination centres.

The Canadian Labour Congress stands in solidarity with the victims of the residential school system and calls on all levels of government to adopt and implement every one of the Commission's recommendations

Justice Murray Sinclair, who was Manitoba's first aboriginal judge, said one estimate made in the early part of the 20th century was that 24 to 42 per cent of Aboriginal children who attended the residential schools died at school or shortly after leaving school. The findings point to a 'cultural genocide' of Aboriginal peoples.

"The Commission's research into the abuse, deaths and mental degradation of Aboriginal children must be taken seriously by all levels of government, as well as the Canadian public," said CLC president Hassan Yussuff.

"Now Canada, and all Canadians, have a responsibility to ensure that all the recommendations are implemented and everything possible is done to ensure meaningful reconciliation."

On May 31, in anticipation of the report release, CLC officers, Barb Byers and Donald Lafleur marched with 10,000 staff, affiliates, union retirees and other Canadians in the Walk for Reconciliation in Ottawa.

The CLC has a strong relationship with the Aboriginal community and will continue to work with labour's Aboriginal committees and working groups to ensure all levels of government implement the report's recommendations.

Walking With Our Sisters is touring in Canada and United States until 2019, and will be in the Comox Valley with a Memorial Installation for the Missing and Murdered Indigenous Women of North America from July 31-Aug 15, 2015. For the full schedule please go to www.walkingwithoursisters.ca.

# SUMMIT ON VIOLENCE IN HEALTH CARE "A GOOD START"

FOLLOWING A CHALLENGE ISSUED BY HSA PRESIDENT VAL AVERY, BC HEALTH MINISTER TERRY LAKE CONVENED A SUMMIT IN APRIL TO ADDRESS THE CONTINUING PROBLEM OF VIOLENCE IN HEALTH CARE WORKPLACES.

The provincial government invited HSA to help conduct the day-long solutions-oriented discussion in Richmond.

"In December, HSA called on government to bring together health care workers, employers and workplace safety experts for a summit on preventing violence in our health care system. I am pleased the Minister of Health answered our call, and I am optimistic that by bringing together key players to address the gaps between the best practice standards, and how they are applied across the province, we can make improvements in violence prevention that ultimately protect health care workers and patients," Avery said.

"Solving this problem will take more than a one-day meeting, and I look forward to working with all our partners in health care to make meaningful progress in the months to come."

"We made a good start towards working in a coordinated way to improve how we prevent violence in health care settings. I thank Minister Lake for taking up my call to action and inviting a wide range of health care workers, management and specialists to exchange frank ideas about the scope of the problem, and pathways to prevention.

The summit gave unions representing health care workers – including health science professionals, facilities and support workers, and nurses – an opportunity for substantive input on a problem that has threatened health care workers and patients for years. Participants included Health Minister Lake, senior Ministry of

Health staff, Health Authority CEOs and occupational health and safety directors, WorkSafe BC, and physicians. As part of the summit agenda, HSA was invited to deliver a presentation focused on the gaps in practices to prevent violence, and offer solutions to improve the experience of health care workers and patients.

"Solving this problem will take more than a one-day meeting, and I look forward to working with all our partners in health care to make meaningful progress in the months to come. Our members, and their patients, deserve to feel safe in the place they come to heal, and be healed. Let's get to work, and make that happen," Avery said.

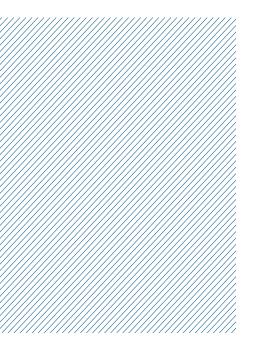
#### **OOPS**

#### WE GOT THAT JOB TITLE MIXED UP LAST ISSUE

An article in the March issue of The Report ("Time to Take the Benefits of Early Child Care Seriously") described HSA member Terri Russell as a "child development program assistant" when in fact she is a "supported child development consultant".

"I have worn both titles and proud to be called both!" said Russell when we spotted the error.

"In basic terms a supported child development consultant has a degree and supervises a child development program assistant along with supporting family and community child care program," explained Russell. "A supported child care development program assistant has an early childhood certificate or diploma and works in the community child care programs."



#### EDMP NOW HELPING MORE MEMBERS

MEMBERS AT AFFILIATE
EMPLOYERS UNDER
THE HEALTH SCIENCE
PROFESSIONALS
BARGAINING
ASSOCIATION, THE
NURSES BARGAINING
ASSOCIATION AND THE
COMMUNITY BARGAINING
ASSOCIATION COLLECTIVE
AGREEMENTS ARE NOW
PARTICIPATING IN THE
ENHANCED DISABILITY
MANAGEMENT PROGRAM.

EDMP, which is already supporting thousands of HSA members working in health authorities, has a proven track record of helping members who are absent from work due either to a work-related or non-work related illness or injury, or when they are struggling at work.

Starting in late April, the EDMP commenced as a pilot program for HSA members at a limited number of selected affiliate worksites. In late June, following the successful pilot, the program was rolled out to all affiliate employer worksites across BC covered by the HSPBA, NBA and CBA collective agreements.

#### WHO DOES IT AFFECT?

EDMP helps members during the return to work transition, or helps them stay at work with support provided by a disability management plan designed for their needs. Participation is required for all full-time and part-time employees covered by the collective agreement who have:

- Missed one shift due to work related illness or injury, or
- Missed five consecutive shifts due to a non workrelated illness or injury.

Regular employees who are struggling at work but do not meet the criteria, and casual employees, can self-refer into the program.

#### HOW DOES IT WORK?

In order to ensure timely EDMP support, most employees who will miss work due to an injury or illness will call a single phone number called "ANII". ANII is for "Absence Notification, Injury, and Illness" and triggers prompt support from a Disability Management Professional and your EDMP representative. The phone number for ANII is 1-855-999-ANII (2644). Members will be provided with an ID number needed for reporting absences on the ANII system.

Employees whose worksites do not have ANII will continue to notify their employers of their absence and the employer will provide a manual referral to initiate the EDMP process.

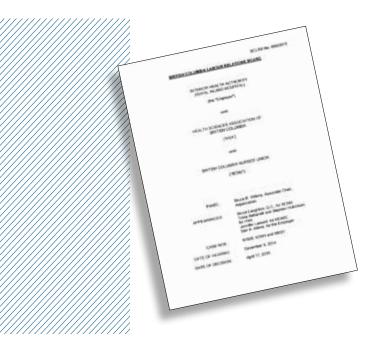
Your medical information is kept in the strictest confidence, and is available to the Disability Management Professional and your EDMP representative working directly on your file. Information is provided to your employer on a need-toknow basis and is limited to the nature of an absence and any functional information relating to returning to work. The Disability Management Professional and your EDMP representative are bound by the EDMP Confidentiality Policy.

#### HOW DO I FIND OUT MORE?

To learn more about EDMP, visit hsabc.org/member-benefits/edmp.

HSA members participating in this pilot program for members working for affiliate employers will be represented by Kent DesRochers, EDMP representative. You can reach him at 604-868-0981 or kdesrochers@hsaedmp.net.

Stewards who have questions about how the EDMP pilot program will impact their worksite should contact their labour relations office at HSA's head office



"There is the need to provide a strong disincentive for the organizing behaviour in this case which is not only contrary to the Code, but is a danger to the public and RPNs."

> Bruce Wilkins BC Labour Relations Board

## BCNU FOUND TO HAVE PUT NURSES AND PATIENTS AT RISK

IN APRIL, THE BC LABOUR RELATIONS BOARD RULED THAT WORKERS AND PATIENTS WERE PUT AT RISK BY DANGEROUS TACTICS USED BY BC NURSES' UNION (BCNU) ORGANIZERS.

The BCNU organizers were attempting to convince registered psychiatric nurses to leave HSA.

"The BCNU has demonstrated once again that they are more interested in increasing their revenue than representing the interests of psychiatric nurses and their patients," charged Val Avery, president of HSA, the union that has represented registered psychiatric nurses since the 1980s.

In a decision delivered April 17, the Labour Relations Board found that paid professional BCNU organizers spoke to patients in locked psychiatric wards and would not stop interfering with registered psychiatric nurses while on shift.

"The organizing activity in this case was conducted by BCNU during work time on psychiatric units, some of which are locked during certain periods of the day, and more generally have heightened security and limited access because of the nature of the patients being treated...

"The professional organizers involved must be taken to know their actions were contrary to the Code. They must also be taken to know that organizing on psychiatric wards while RPNs are on work time is a danger to the vulnerable patients RPNs serve and to RPNs themselves," the Labour Board decision says.

HSA has been working to address issues of violence prevention for all health care workers.

"When HSA worked with the Ministry of Health to bring together health care unions and employers, it was with a view to preventing risks of violence to health care workers and their patients. It is frankly hard to understand how another union is now responsible for increasing the potential for harm, rather than working cooperatively with the rest of us to address the issues," Avery said.

The BCNU was sanctioned by

the BC Federation of Labour several years ago for persistent hostile raiding activity of licensed practical nurses in the Hospital Employees' Union, and has been actively raiding already unionized registered psychiatric nurses represented by HSA for three years. The raiding activity has been largely unsuccessful and a majority of RPNs have chosen to stay with HSA. However, the dangerous and aggressive organizing behavior continues - even outside the legal raiding period.

"It is particularly offensive to HSA and RPNs because of the difficult nature of the work in psychiatric units, where there is an already increased risk of violence to health care workers and their patients," said Avery.

To read the full ruling by the Labour Relations Board, visit hsabc.org.







# OVER 300 DELEGATES FROM WORKSITES AROUND BC GATHERED IN VANCOUVER TO ELECT THE PRESIDENT AND DEBATE DOZENS OF RESOLUTIONS WITH DIRECT IMPACT ON MEMBER CONCERNS AND UNION PRIORITIES

#### UNIQUE BUT UNITED

Acknowleding the diversity of HSA members and the issues they care about, HSA President Val Avery opened the convention with a report on how the board of directors, committees and activists must daily strive to balance demands and goals.

"We represent a hundred different professions," said Avery.
"But those differences don't divide us - they make us stronger. We are diverse, but not divided; we are unique but we are united. And we have proven over the last year that success is possible."

#### DELEGATES RE-ELECT AVERY TO SERVE AS PRESIDENT

Three candidates stood in presidential elections this year: Region 2 Director Derrick Hoyt, Region 4 Director Joseph Sebastian, and incumbent president Val Avery. Candidates took

questions from delegates during a town hall session prior to the main plenary session, spoke individually with candidates throughout the convention and heard closing speeches from each just prior to voting on May 2. Val Avery won a majority of votes on the first ballot.

"HSA is the union that has the ability to do great things," Avery told delegates after her election. "Our membership is comprised of highly educated, thoughtful, and articulate professionals. With the support and expertise of our staff we can take on challenges and we can be successful.

"I am grateful you have given me your trust and confidence, and I pledge to earn it every day as we make the changes needed to build a stronger union in challenging times."

The position of president has a term of two years. Following the convention the Board of Directors elected Janice Morrison to serve as vice president and John Christopherson as secretarytreasurer.

#### 2020 STRATEGIC PLAN

Avery provided delegates with a special presentation on HSA's new strategic plan for 2020. The plan, which will guide the activities of the union for the next five years, resulted from extensive consultations involving interviews with members and board members, staff and activists and an online survey opened to all members in September and October 2014.

"A little over a year ago, I asked our Board of Directors to begin a thorough strategic planning process," said Avery. "We listened to members like you, we took direction from you, and we identified goals to serve your needs and keep your board focused and on track."



DELEGATES TO CONVENTION ELECTED VAL AVERY TO A SECOND TERM AS PRESIDENT

### GROWING UP ON THE PICKET LINES

AS SHE ASKED CONVENTION DELEGATES FOR THEIR SUPPORT IN THE PRESIDENTIAL VOTE, VAL AVERY SPOKE OF HOW HER ROOTS IN THE LABOUR MOVEMENT FUEL HER DETERMINATION TO FIGHT FOR THE FUTURE OF HSA

My community for the first 18 years of my life was located in HSA's Region 1, the city of Port Alberni. During the years I was growing up there it had the largest mill complex in the world for the production of pulp, paper and lumber. Freighters and barges would come and go from our port, moving these products to the rest of the world. My dad worked at that port; he was a longshoreman and a proud member of ILWU.

It was a highly unionized community. I know that one of the first words in my vocabulary was "strike", because they were frequent, long and often nasty. And, for my family with five kids, they made for stressful times, trying to meet our needs on "strike pay".

I have very vivid pictures that remain in my mind of men on picket lines. That was the way it was in those times, new collective agreements were rarely achieved without a strike.

As an adult I've walked my share of picket lines on sidewalks around hospitals. I supported and encouraged my colleagues to walk an illegal picket line when this Liberal government was first elected, while they were sitting in the house passing legislation to impose a collective agreement upon us. For my actions I had a letter of discipline on my personnel file for two years.

These days governments regularly use legislation and the courts as weapons to control organized workers. In response, unions need to



switch their thinking from every round of bargaining needing a full-scale fight in the form of a strike, to more strategic methods of applying pressure on employers that avoid negative consequences for their members.

Yes, every member in this room will agree that wage increases in the last few rounds of bargaining haven't met members expectations, but we have achieved things that other workers can only dream of. Most of us have a jointly-trusteed defined benefit pension plan that is not only a model of success in Canada but internationally. For you that means a paycheque for life. Yesterday you heard Hassan Yussuff, president of the CLC, tell you the statistics for how few people in this country have a pension plan, let alone a defined benefit plan. We are privileged.

And, in the last round of HSPBA bargaining we managed to wrestle the administration of our health and welfare benefits, which our members so value, out of the hands of government and create a jointly trusteed benefit trust plan, similar to our pension plan.

HSA is the union that has the ability to do great things. Our membership is comprised of highly educated, thoughtful, and articulate professionals. With the support and expertise of our staff we can take on challenges and we can be successful.

The position of President is a political position and I'm happy to have been called a politician. I'm not afraid to defend members rights, to engage and challenge the Ministers of Health, Children and Families, Social Development, or any other minister. If that's what needs to be done then I'll damn well do it. It's the work I have been doing in the past year and pledge to continue to do.

I've told you how I respect the work you do; how I believe in you and your desire to build a strong union.

Now, I ask you to believe in me, that I am the candidate of choice to lead us into the future and achieve some of the changes you are looking for.

I respectfully ask for your vote.

During the presentation, Avery said the plan would set the course for work in several distinct areas including service and rights, engagement and relationships, and resources.

"Critical to this plan is the role of stewards,," said Avery. "These are the women and men who step forward to volunteer their time, energy, skills and compassion to support their colleagues in the workplace.

"I know what it's like - the long hours, the complexity of labour relations issues. But being a steward often requires so much more of us. Sometimes, nothing can prepare you for some of the calls you get. When I was a steward, I remember a late night call from the Employer requesting my assistance. One of my members was suicidal. I had no idea what I could do but I went to the worksite and ensured that member got the help she needed."

Delegates offered a number of questions and comments following the presentation.

A full copy of the 2020 Strategic Plan document has been posted at hsabc.org.

#### GUESTS PLEDGE SUPPORT AGAINST RPN RAIDS

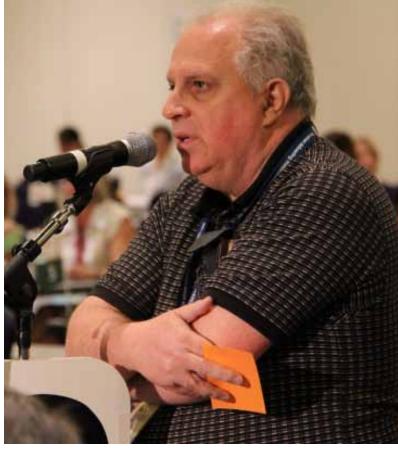
"She's determined. She's smart and experienced. And - she is the very first woman ever elected as president of the BC Federation of Labour," Avery said as she introduced Irene Lanzinger to a standing ovation.

"We are completely behind you in fighting the predatory practices of the BC Nurses' Union," declared Langzinger, who also lauded HSA's contribution to reducing workplace violence in the health care system and helping add momentum to the movement for a significant increase in BC's minimum wage.

"Is it OK if I use the word pathetic?" asked Lanzinger, looking for some way to describe the BC government's recent increase to the minimum wage.

Canadian Labour Congress





preident Hassan Yussuf - the first person of colour to hold the office - received a warm welcome and spoke to delegates about national efforts to defend public health care against legal attacks, support the call to deal with growing income inequality, and protect the labour movement from hostile government legislation.

Referring to the recent Labour Relations Board ruling that BCNU organizers had placed both nurses and patients at risk through raiding activities, Yussuf assured delegates that the CLC would help confront raiding activity that puts members at risk and drains resources at a time when unions face serious challenges from outside groups.

"Raiding is fundamentally wrong and it has to be confronted," he said.

#### DEBATE ON KEY RESOLUTIONS

Members from chapters across the province submitted over 60 resolutions for action on everything from raising union dues to lobbying governments for action on child care. Delegates debated all but four of them, and these have been referred for consideration by the Board of Directors.

Many resolutions, and much debate, focused on proposals to provide more support to stewards; specific measures proposed included paid time, office space, phone and internet access and computer equipment like laptops, printers and scanners. While there was widspread agreement that stewards could use more support, many delegates expressed concerns over costs and so while many of the invidivual resolutions were defeated delegates agreed to establish a task force to investigate and report back on the greatest needs, best solutions and cost implications.

A resolution calling for member dues to increase from 1.6 per cent to 1.65 per cent was defeated after considerable debate. Proponents suggested the increase was needed to deal with greater demands on servicing members, supporting stewards and defending registered psychiatric nursing members against raiding; those opposed, while agreeing these issues are important, were concerned that any increase in dues requires a more specific plan for deploying the revenue to help members.

Several resolutions called for efforts to defend health care and lobby the government for more support for community social services, and HSA will be guided by these as plans for campaigns, collaborations with other groups and government relations strategy are mapped out.



CARDIAC SONOGRAPHERS YAN ZHANG. (ON BEHALF OF CLARE LANGLEY), BERNADETTE GONZALES AND CAROL PETERSON ACCEPTING THE 2015 DAVID BLAND AWARD

#### **BLAND AWARD HONOURS SONOGRAPHERS**

HSA MEMBER DAVID BLAND WAS A VOCATIONAL COUNSELLOR WHO WORKED AT RICHMOND MENTAL HEALTH SERVICES. AT THE END OF AN OTHERWISE ORDINARY WORK DAY IN JANUARY OF 2005, AS DAVID LEFT HIS WORKPLACE, A FORMER CLIENT WAS WAITING IN THE PARKING LOT - AND FATALLY STABBED DAVID. TO HONOUR HIS MEMORY, THE UNION ESTABLISHED THE DAVID BLAND MEMORIAL AWARD IN 2007 TO HONOUR THE IMPORTANT WORK THAT MEMBERS UNDERTAKE AS ADVOCATES FOR THEIR COLLEAGUES IN ENSURING WE ALL WORK IN A SAFE ENVIRONMENT.

This year the award was presented to three HSA members who have shown leadership and dedication in their ongoing efforts to reduce injury rates among co-workers in Victoria. Carol Petersen, Clare Langley, and Bernadette Gonzales have helped make a real difference for cardiac sonographers who are at an extremely high risk of work-related injuries. As HSA's representatives on the Victoria Echo Lab Working Group, they are helping to gather evidence about worker injuries and are making recommendations to improve ergonomic practices for cardiac sonographers.

Carol Petersen has worked as a diagnostic medical sonographer in Victoria since 1990. In her spare time she enjoys outdoor activities including running and skiing. She has been an OHS steward for a little more than a year and this month was elected as the co-chair of the Royal Jubilee Hospital Joint Occupational Health and Safety Committee. Carol is the co-chair of the Victoria Echo Lab Working Group.

Bernadette Gonzales has worked as a cardiac sonographer for the past 22 years, including ten with the Vancouver Island Health Authority. Spending quality time with her family helps her maintain a work-life balance. Representing co-workers on the Echo Lab Working Group is Bernadette's first experience as a union activist.

Clare Langley, the third recipient of the David Bland award has been a cardiac sonographer for the past 15 years and her work with the Echo Lab Working Group is her first union involvement.

For many months, these members have been meeting regularly with their co-workers, managers and Vancouver Island Health Authority representatives to ensure that best practices are engaged in all aspects of the work carried out in the cardiac echo labs of the Royal Jubilee and Victoria General Hospitals.

Calling upon years of experience in their profession, their dedicated efforts on behalf of their co-workers and their union helps maintain HSA's reputation as a leader in health and safety among health care unions in BC.



DELEGATES TO CONVENTION HEARD A COMPREHENSIVE REPORT ON THE WORK TO ESTABLISH THE NEW JOINT HEALTH SCIENCES BENEFIT TRUST

# NEW STRUCTURE FOR BETTER AND MORE SECURE BENEFITS

#### BY DENNIS BLATCHFORD

HSA PENSIONS AND BENEFITS ADVOCATE

#### I understand there was a presentation on the new health and welfare trust at the recent HSA annual convention. What were the highlights?

Yes, members of the Joint Health Sciences Benefit Trust (JHSBT) Working Group did a report out at the HSA convention in early May. The session was led by lawyer Tony Glavin, lead counsel to the memberside JHSBT Working Group. He is a principal of Koskie Glavin Gordon in Vancouver, which is affiliated with Koskie Minski in Toronto. They are a nationally recognized firm specializing in employee-side advocacy for

pension and benefit plans.

The presentation highlighted the progress to date and some of the key achievements reached during the last 18 months of negotiation. Of particular focus was the trust agreement itself and the relevance of key features of the negotiated trust language. Such features included the JHSBT being an Employee Life and Health Trust (ELHT) rather than the traditional health and welfare benefits trust.

By negotiating the ELHT model, the new plan will be able to take advantage of more favourable tax treatment on investment income, and be allowed to accumulate surpluses and reserves in a manner not permitted under the traditional health and welfare trust model. The ELHT model is a more sustainable

arrangement for health and welfare programs only recently permitted under federal statute. These new rules were a concession by the federal government during the near bankruptcy of General Motors in 2009. The new rules only apply to new health and welfare trusts – including our JHSBT.

#### What will the ELHT model mean for members?

The ELHT model gives trustees more flexibility in managing and planning changes and improvements to the benefit plan going forward. Under a yet-to-be determined fixed funding formula (expressed as a fixed percentage of regular straight-time payroll) trustees will be required to operate within a fixed income

stream. However, having the tools to create contingencies and reserves as permitted under an ELHT will result in more certainty and stability for the JHSBT in the years ahead. For members, this means they can continue to count on a good quality benefit plan – a high priority for HSA members.

As partners in the JHSBT, trustees for the Health Sciences Professionals Bargaining Association (HSPBA) will have access to financial and claims data information as never before. Full disclosure of this information will allow for better oversight and help shape policies that better serve the needs of plan members. The partnership created by the JHSBT means the HSPBA will finally be on equal footing with the Health Employers Association of BC (HEABC) regarding the benefit plan - just like the Municipal Pension Plan partnership we've had since 2001.

Trustees will be responsible for all aspects of the relationship between the JHSBT and contracted service providers Pacific Blue Cross, Great West Life and the Health Benefit Trust. As owners of the benefit plan data, the JHSBT can test the market to ensure good value for the services provided. This means there will be competition for our business and an opportunity to see what innovations are available in the benefits field. Like most industries, technology is driving rapid changes in service delivery models world-wide. The insurance and benefits industries are no different and some of these innovations should yield benefits for both consumers and providers of benefit plans.

#### I also understand the reportout talked about a surplus being generated by our LTD plan. How does that work?

Since mid-2006, members have paid 30 per cent of the cost of

premiums for the LTD plan. Last July, as part of our due diligence for the JHSBT, HSPBA became aware that LTD premiums began generating surpluses in late 2012. The surpluses were a result of excellent market returns, (the BC Investment Management Corporation manages the funds - the same people managing your pension plan investments) and lower than expected LTD claims experience. Anticipating

Group members who have been working on this project since the beginning of 2014. Subsequent appointments would be for three years with renewals. In my role as the Pension and Benefit Advocate for HSA, and HSA's trustee to the Municipal Pension Plan for 14 years, I am a member of the Working Group and expect to continue in that role. Likewise, my HSA colleagues Alison Hietanen (Membership

The partnership created by the JHSBT means the HSPBA will finally be on equal footing with the Health Employers Association of BC regarding the benefit plan – just like the Municipal Pension Plan partnership we've had since 2001.

that this trend would continue - and on the advice of our legal, actuarial and benefit advisors -HSPBA secured an agreement for a Member Premium Trust Account. This account secures and segregates these monies for the exclusive administration for members by the HSPBA trustees once the JHSBT is operationalized in April 2016. While it is difficult to know just how much money this will generate for the Member Premiums Trust Account, we are confident it will go a long way in providing benefit security for HSPBA members right through to the expiry of the current collective agreement in 2019. The parties to the JHSBT (HSPBA and HEABC) then return to the bargaining table.

#### Who will be the HSA trustees?

Ultimately that will be a decision of the HSPBA and HEABC as the parties and appointing authorities for the JHSBT. Currently, we are projecting that interim trustee appointments will be made in June of this year. Those appointments will likely include most of the Working

Services Coordinator - Disability Management) and Jeanne Meyers (Executive Director Legal Services and Labour Relations) plan to continue to serve during these important formative stages of the JHSBT. The fourth appointment is a nominee from the other unions in the HSPBA, and current incumbent CUPE National Representative Troy Clifford is also expected to continue.

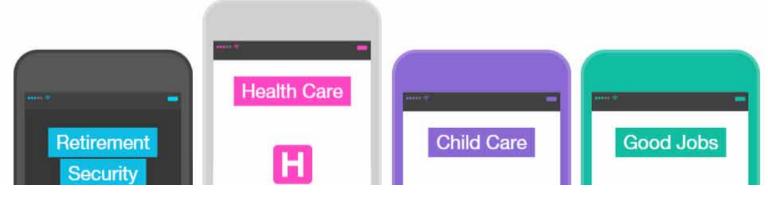
#### When will members hear more about the JHSBT?

Our current thinking is that we need to do a re-enrollment of members before the JHSBT goes live next April. That will mean issuing new pay-direct cards and some type of reenrollment process. We are actively discussing this issue with our advisors and benefit providers to determine the best approach. When those details are worked out, a communication plan will be rolled out to members and employers to ensure an orderly transition to the new identification system. There will be more information on the re-enrollment in the com-

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

## It's time to start making better choices.

Explore the issues below to find solutions that work for you, and the economy.



THE CANADIAN LABOUR CONGRESS BETTER CHOICE CAMPAIGN IS AT BETTERCHOICE.CA - AND LOOK FOR HSA MEMBERS TALKING ABOUT THESE ISSUES AT YOUR WORKPLACE IN COMING MONTHS

## A BETTER CHOICE

#### BY CAROL RIVIERE

THE UPCOMING FEDERAL ELECTION IS AN OPPORTUNITY FOR ALL OF US TO TAKE A STAND ON ISSUES THAT MATTER.

Issues like child care, good jobs, retirement security, and health care matter to Canadians, and in this election voters have a chance to make a better choice.

For the very young and their families, we can choose to support an affordable, high quality child care program for all. Only one out of five Canadian children under age six now has access to a regulated child care space. Finding quality, affordable care can be a never-ending struggle, and for many families the cost is their second-highest expense after housing.

Quebec's \$7 a day child care program has increased the number of women in the workforce, pumping an additional \$5.2 billion into the Quebec economy - which has more than paid for their child care program. Quebec's example shows that a national child care system is a better choice for children, families and the economy.

For working age Canadians, we can choose to support the creation of good, family supporting jobs. Nearly one million Canadians currently have to juggle multiple jobs to make ends meet, and our shaky economic recovery has left 2.8 million Canadians unemployed or underemployed.

The impact is even worse for younger Canadians, who face double the national unemployment rate. They need us to choose a federal government that will develop a real jobs strategy to help create full-time work with the kind of wages that can support families.

For seniors, we can choose to support a plan that allows them to retire with dignity. Currently, 11 million Canadians don't have a workplace pension. For less than the cost of a cup of coffee and a donut a day, the average worker could double their CPP benefits at retirement. Provincial governments support this plan, but the federal government has refused to implement it.

For Canadians of all ages, we can choose to support a stronger, public health care system. The federal government is cutting \$36 billion in health care transfers to the provinces at a time when more than 3 million Canadians can't afford the prescription medication they need, and when a shortage of 86,000 long-term care beds is expected over the next 10 years. We need that money, and federal leadership, to create a national plan to provide prescription drug coverage for all Canadians, and to improve seniors care across the country.

We can do better as a society, as a country. This fall as voters, let's make a better choice.



SAFETY WEEK EVENTS AT VANCOUVER GENERAL HOSPITAL WERE ORGANIZED BY OHS COMMITTEE MEMBERS FAITH UCHIDA AND MADHU MAHARAJ

### SAFETY REQUIRES YEAR-ROUND ATTENTION

BY DAVID DURNING HSA OHS OFFICER

NAOSH WEEK IS OVER, BUT SAFETY REQUIRES YEAR ROUND ATTENTION

The annual North American Occupational Safety and Health (NAOSH) Week, which took place the first week of May, is over for another year. NAOSH week has been observed in Canada since 1986, and provides an opportunity for all workplaces to refocus attention on health and safety.

We shouldn't need reminding, but health and safety - especially in health care and social services settings - requires year round attention. Risks and injuries related to ergonomics and violence are disproportionally higher in health care and social services compared to any other sectors in the province. Workers compensation claims for psychological injuries from health care and social services workers represent more than 27 per cent of all such claims in the province, even though the sector is only 12 per cent of the total BC workforce.

Throughout the year, more than 450 HSA members carry on their roles as worker reps on their joint occupational health and safety committees. They participate in monthly meetings, workplace inspections, incident investigations and much more. NAOSH safety week provides the opportunity to highlight some of the work they do all year.

This year - as in years past - the HSA supported OHS committees in various parts of the province with their NAOSH week events.



## STASIA HASUMI

#### CRISIS INTERVENTION SUPPORT WORKER

#### BY LAURA BUSHEIKIN

STASIA HASUMI, A CRISIS INTERVENTION SUPPORT WORKER AT THE COMOX VALLEY TRANSITION SOCIETY, HAS PLENTY OF HIGH-STRESS MOMENTS AT WORK.

As a front-line worker at a 12-bed transition house for women and children, she needs to respond moment-by-moment to the needs of women facing danger, trauma and severely disrupted lives.

"We have a 24-hour crisis line so someone may be phoning because of an assault, and needing to come in immediately for safety reasons," says Hasumi, describing the sort of challenges she may face on the job.

"Maybe someone is having a panic attack; maybe it's Mothers' Day and someone has lost custody of their children. We work 24 hours a day so there can be middle of the night support that might be disclosure of trauma or maybe just quietly sitting with a woman while she processes the events that have transpired."

"Many people find communal living challenging and when there are high numbers of women and children living together in a time of crisis, I have found that conflict resolution skills are vital," she explains.

But a time of crisis is also a time of change and growth, and for all the suffering Hasumi witnesses, what most stands out is the way the Transition House provides a calm haven where women can heal and rebuild.

"We see women really change. They come out of their shell and regain what they may have lost. Sometimes it's a completely different woman who leaves than the one who came in," says Hasumi."I'm really motivated by the resilience of the women and children."

In the midst of all the busyness and intensity, there are calm times when Hasumi can spend time cooking, baking, or knitting with the residents. "That's my favourite part of the job. I really like that this is a residential setting. It doesn't feel clinical. It's not even an office. We're in a living room, or in a kitchen doing dishes. It makes it easier to connect as people."

As well as companionship, Hasumi provides information, referrals, advocacy, and a listening ear. "We are the first stop for the

## "A TIME OF CRISIS IS ALSO A TIME OF CHANGE AND GROWTH"

woman. We connect her with resources. I might go out with her to appointments. We may be the first ones to remind a woman she is worthy and valuable. This is such an important part – reinforcing her worth.

"We know that gender-based violence happens across all races, all levels of education, and all classes, but there is still so much shame for these women. Attitudes need to change."

Hasumi was originally a doula, a position that also involved a blend of health care, personal support, and practical guidance for women. In that role, she discovered a passion for helping women faced with challenging life circumstances.

"I started working with women who couldn't afford to pay for doulas," she says. Looking to enhance her options, she enrolled in a two-year diploma program in social services at North Island College, graduating in 2012.

"I chose this field because I want to make a difference in my community. For me that means connecting to people one on one the Political Action Committee. "This is my big passion," she says. "I love the strong social justice piece of the union. It fits with how I apply feminism to my life. I enjoy the opportunity to

"I love the strong social justice piece of the union. It fits with how I apply feminism to my life."

and making change on a family level. Also, over years of political activism I've developed a keen feminist lens and I wanted to work in a feminist organization. This job fits my needs perfectly, and I love my co-workers."

Hasumi also brings her activist spirit to her involvement with HSA. She is a Chief Steward, a Member At Large, and sits on engage with a women-centred perspective on politics and activism."

Clearly, her union activism is a natural extension of her professional work, bringing gender equality closer, conversation by conversation, woman by woman, day by day.

## **HSA SCHOLARSHIPS 2015**

HSA PROVIDES MEMBERS AND THEIR CHILDREN WITH SEVERAL SCHOLARSHIPS AND BURSARIES FOR EDUCATION. SCHOLARSHIPS ARE ADJUDICATED BY THE UNION'S EDUCATION COMMITTEE. APPLICATIONS FOR 2016 WILL BE ACCEPTED BEGINNING IN JANUARY 2016. CHECK HSABC.ORG FOR DETAILS.

#### SCHOLARSHIP AWARDS

**Shaelin Bishop**, child of Maria Bishop, RPN, Lions Gate Hospital

**Robyn Boudreau**, child of Jody Boudreau, physiotherapist, Shuswap Health Services

**Nicole Bourne**, child of Kellie Bourne, laboratory technologist, Surrey Memorial Hospital

Isaac Dellabough, child of Leanne Dellabough, occupational therapist, Queen Alexandra Centre for Children's Health

**Alexander Diaz**, child of Paula Diaz, pharmacist, Kelowna General Hospital

**Natalie Dillon**, child of Theresa Dillon, dietitian, Chilliwack General Hospital

**Lauren Dobischok**, child of Kim Dobischok, respiratory therapist, Vancouver General Hospital

**Cody Kirbyson**, child of Tammy Kirbyson, laboratory technologist, Royal Inland Hospital

**Benjamin Klammer**, child of Gordon Klammer, pharmacist, Abbotsford Regional Hospital

**Mia Langford**, child of Delores Langford, physiotherapist, Lions Gate Hospital

First runner up: **Alexander Frison**, child of Kelly Frison, respiratory therapist, and Jeffrey Frison, physiotherapist, Royal Inland Hospital

Second runner up: **Manpreet Deol**, child of Kanwal Deol, laboratory technologist, Vancouver
General Hospital

#### **FULL-TIME BURSARY AWARDS**

**Zachary Astle**, child of Dawna Westman, laboratory technologist, Whistler Health Care Centre

**Melissa Baker**, dietitian, Royal Columbian Hospital

**Tennah Bieberdorft**, child of Doris Bieberdorft, occupational therapist, Victoria Arthritis Centre

**Alexander Cheung**, child of Kane Tse, research assistant, Vancouver Cancer Centre

**Catherine Dewaal**, pharmacist, Royal Columbian Hospital

Rachel Gardner-Zimmer, child of Anne Valerie Sales, Royal Inland Hospital

James Hackney, child of Kary Hackney, social worker, St. Paul's Hospital

Chantelle Halvorson, child of Christine Ambrose, supported child development consultant, Queen Alexandra Centre for Children's Health

**Heather Hansen**, social worker, Royal Columbian Hospital

**Bailey Henschke**, child of Lorna Henschke, laboratory technologist, Arrow Lakes Hospital

**Mandeep Kang**, child of Kulwinder Kang, residence worker Sources (Archway)

**Megan Koster**, child of Deborah Koster, program coordinator, Campbell River Family Services

Maria Murlina, child of Anna Murlina, sonographer, Surrey Memorial Hospital

**Gabriela Remes,** child of Joana Remes, health records administrator. Royal Columbian Hospital

**Danika Riedstra**, child of Deanna Decosta, physiotherapist, Vernon Jubilee Hospital

**Patrick Sand**, child of Letricia Sand, radiation therapist, Vancouver Island Cancer Centre

**Lauren Shandley**, radiation technologist, Royal Columbian Hospital **Genevieve Tellier**, child of Vikki Tellier, physiotherapist, Nanaimo Regional General Hospital

**Sydney Torok**, child of Sherrie Torok, dietitian, and Frank Torok, biomedical engineering technologist, Chilliwack General Hospital

**Kelsey Watson**, child of Karen Watson, health records administrator, Nanaimo Regional General Hospital

First runner up: **Elnaz Boloogh**, cardiac ultrasound technologist, Lions Gate Hospital

Second runner up: Isla Wrightson, child of Wendy Wrightson, health records administrator, Vancouver General Hospital

Third runner up: **Chris McBeth**, child of Kathy Burton, occupationa therapist, Centre for Child Development

#### PART-TIME BURSARY AWARDS

**Nadia Galvan Hernandez**, behaviour interventionist, Starbright Children's Development Centre

**Mandeep Kalra**, respiratory therapist, Surrey Memorial Hospital

**Mimi Lam**, laboratory technologist, Royal Jubilee Hospital

**Geraldine Pearson**, physiotherapist, Delta Hospital

First runner up: **Dawn Bergen**, laboratory technologist, Royal Inland Hospital

#### ABORIGINAL BURSARY AWARDS

Tammy Elizabeth Davidson

Leah Brianna Haldane Robinson

First runner up: Kerri Low



Name: Helga Wainwright

What you would do if you won the lottery: Probably have a heart attack which would require CPR. If I actually survived the shock, I would take the HSA EDMP Representatives somewhere tropical for their next education session as per their request.

**Job title and department:** HSA Enhanced Disability Management Program Administrator, Disability Management Department

What you actually do, in your own words: I assist with appointing, educating, mentoring and supporting our HSA EDMP representatives. as well as addressing issues and gaps in the administering and implementation of the EDMP Program province-wide for our HSA members.

Why this is cool: I get great pleasure when our EDMP reps or our members notify us when the program has been instrumental in providing our members with supports and services that helped them in returning or being able to remain at work.

**Secret talent unrelated to job:** If I told you...it wouldn't be secret!:)

At HSA since: May. 2013

Job before HSA: Accommodation/WorkAbility Advisor at Vancouver Coastal Health Authority.

What you were doing when you were interrupted for this interview: Responding to emails when I got this email request.

**Best thing you did to help a member in the last week:** Helped a member who indicated her department was requesting a medical note from all employees of absences longer than two days by addressing it with HR at the Health Authority. Result was HR told the department to stop requesting notes for every absence and had employee reimbursed for the cost of obtaining the medical note.

**Plans for the weekend:** Up to Summerland for my husband's softball tournament...I see an exorbitant use of sun screen in my future!

Last book read: Diana Gabaldon's "Written In My Own Heart's Blood" (the 8th book in the Outlander Series)

Good or bad: Good

**Why:** I love a book that has all the elements in it - history, drama, suspense, romance, science fiction and fantasy! Hoping there will be a ninth book.



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

Region 3 [REGION03@hsabc.org] Cheryl Greenhalgh Medical Radiation Technologist Royal Columbian Hospital

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

Region 5 [REGION05@hsabc.org] John Christopherson (Secretary-Treasurer) Counsellor, Vancouver Cancer Centre

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Region 9 [REGION09@hsabc.org] Janice Morrison (Vice President) Physiotherapist, Kootenay Lake Hospital

Region 10 [REGION10@hsabc.org] Mandi Ayers Medical Laboratory Technologist Bulkley Valley District Hospital

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