

2025 Annual Report



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Executive Reports

Report of the President

It's my honour, as your elected president, to report on the work of our union in the last year.

I'd like to begin by reflecting on the regional meetings held last fall, where hundreds of members waited patiently for their turn to share their stories with me and their elected Regional Directors. Many of them held back tears describing their exhaustion, their frustration, and their concern for the patients and clients who depend on their work.

It's striking to think about how even just a few years ago these annual meetings were quiet and sparsely attended. Now they are an outlet for members, new and old, looking to share their fears about urgent situations on the front line, and hoping to find out what is being done about it.

It's been an incredibly difficult couple of years. The ongoing health human resources crisis, a prolonged shortage of professionals in nearly all disciplines, throughout Canada and across the world, is happening on a scale we have never seen before. It has overwhelmed our system for health care and community social services. It has pushed all of us past exhaustion. And it has challenged the union at every level.

This report is all about the work the union is doing to respond to this crisis. I am

incredibly proud of this work, and I am even more proud of the people who are carrying it forward. The stewards working tirelessly to help their colleagues on the front lines. The elected representatives working to pull everyone together in their chapters, their committees, their regions, and in their bargaining units. And the members working to keep the system running.

THE SHORTAGES CRISIS

Shortages are bad across the board, though the situation is particularly bad for laboratory technologists, respiratory therapists, occupational and physical therapists, sonographers, social workers, dietitians, pharmacists, anesthesia assistants and imaging technologists working in X-ray, CT, nuclear medicine, mammography and radiation therapy.

And those are just the larger professions. Shortages and unfilled vacancies are also wreaking havoc in smaller professions. There are only 80 perfusionists working in BC, and shortages in that profession caused over 100 cardiac surgery cancellations in just the first half of 2024. There are only 30 PET technologists in the province. They are needed to scan every single cancer patient before treatment can begin, and shortages there are adding to wait times that are already too long.

That's why the union is working on the shortages issue on so many fronts.

- HSA's regional directors, senior staff and member volunteers work tirelessly to raise the shortages issue with decision-makers in government. While HSA is a non-partisan organization, during the BC provincial election last fall we took the opportunity to highlight the important role of our members within a strong public health care system, and as soon as the new ministers were appointed, HSA reached out to put our issues on their agenda. In January, I was joined by senior union staff for a meeting with the new Health Minister Josie Osborne, and in the coming weeks we will be meeting with Minister of Post-Secondary Education and Future Skills Anne Kang, Ministry of Children and Family Development Minister Jodie Wickens, Minister of Labour Jennifer Whiteside, and other ministries relevant to member concerns. In addition, senior labour relations staff from the union meet regularly with officials from government and representatives of the employer to discuss shortages in key areas. In all cases we're using actual member stories to underline the urgency of action on training, recruitment and especially retention of members dealing with burnout. This sort of engagement has led to concrete gains in recent years, including the creation of a dedicated provincial allied health officer now working inside government to address issues facing the health science professional workforce, and the implementation of recruitment and retention incentives rolled out last year.
- With the BC Conservative Party promising last year to privatize health

care delivery in BC, there was a lot at stake in the fall provincial election.

To help ensure members understood where the parties stood, and how their promises would impact workload, shortages, pay rates and the security of their jobs, the union deployed the Core Member Engagement Team to do member-to-member education at worksites around the province. CMET engaged hundreds of members to answer questions, discuss local issues and encourage further involvement. We are now working to prepare for the federal election that is expected shortly.

- Immediately after the fall election, the union launched a province-wide radio ad campaign to help set the foundation for this year's contract negotiations and to ensure that the impact of shortages and the importance of our work is highly visible to newly-elected MLAs, newly-appointed cabinet ministers and those returning to office. We will be building on this latest campaign with new ads to be launched in the coming months to provide direct support to our work at the bargaining table.
- To help provide objective evidence as testament to the urgency of the situation on the front lines, the union has conducted significant policy research. In the last year we've released a report providing an in-depth look at the challenges of acute shortages of medical laboratory technologists, and another examining how the situation in medical imaging and radiation therapy is leading to longer wait times despite welcome new investment by the provincial government. Work on a similar research project focusing on respiratory therapists and anesthesia assistants

will be underway shortly. This builds on recent research work examining wait times and professional shortages of physiotherapists, occupational therapists, speech-language therapists and others delivering rehabilitative services.

- Members working in child development centres across the province remain deeply concerned about the ongoing lack of funding and more recently plans for a new service delivery model which almost led to the closure of Starbright Child Development Centre in Kelowna. The union is currently pushing on both these issues, urging the government to increase funding and renew support for Starbright, while also tackling the complex procurement issues driving our concerns. Following extensive focus group consultation meetings with members working at CDCs across the province, we published a substantial submission to the Ministry of Children and Family Development (MCFD) on the critical need to increase funding of services for children and youth with support needs (CYSN). The report makes 14 policy recommendations to the government, and represents one of the more comprehensive reports produced in this sector. This report could not have been possible without the dedicated work and contributions of members in this sector who participated in the focus group sessions, both in-person and virtual. Thank you for helping us to create a valuable document that will be used to advance the gains for children who rely on your specialized skills.
- In November, we took this message to the wider labour movement when

your region's elected members-at-large and board members attended the BC Federation of Labour's 61st Convention. Your delegates spoke very passionately about the impacts of shortages in their professions, from social workers, respiratory therapists, recreation therapists, medical laboratory technologists, just to name a few and made a strong impact on the convention.

- At the national level, the union is working through the National Union of Public and General Employees (NUPGE) and the Canadian Health Professionals Secretariat (CHPS) to develop a strategy with other unions representing health science professionals to push the federal government for a national health human resources plan. I met with both groups in Ottawa in December for discussions on how to move this forward in 2025. NUPGE's current online campaign work is currently highlighting the impact of shortages revealed in a recent national survey of over 6,000 health care professionals across Canada, including HSA members in BC. This is the first of a three-year campaign by NUPGE to raise awareness of our work and drive policy changes at all levels of government.
- In January I met with new and returning Constituency Liaison program members for a day of updates and training. The Constituency Liaisons (CLs) are vital to our work of raising the profile of the work we do and the challenges we face by meeting with elected officials to provide first-hand reports of the impact of shortages. With a newly-elected provincial government, our CL program kicks into high gear. I encourage you

to join the program, which provides training and support for conducting meetings with elected officials. As new MLAs of all parties settle in, we look to our CLs to raise awareness about the important work that we do in health care and community social services. These efforts will be given a big boost with our Lobby Day in Victoria that is scheduled for the fall.

LABOUR RELATIONS SUPPORT

With members dealing with so many workplace issues across the board, the union's servicing work on labour relations has once again seen growing demand. Executive Director Jeanne Meyers has a full report on how the union is supporting members through this work, which last year saw an unprecedented volume of support needed throughout the ongoing classifications redesign.

Most HSA members covered by the HSPBA collective agreement have had a fairly smooth transition to the new profile-based classification system since it was fully implemented in December.

In many cases, the new system has resulted in an additional pay increase for members, and the changes more accurately reflect the complexity of the health care system and the specialized work done by our professions.

But a significant number of members are still facing problems because the employer is digging in. The problems are particularly difficult for those working in pharmacy, and in advanced practice and supervisory roles in medical imaging and medical laboratories.

It's an extremely challenging situation, and HSA is working hard to help members where the employer is objecting to our position, so we share your frustration. We are now working through the processes needed to address these problems, and with support from affected members, we will continue to push for proper recognition.

Funding for professional development and professional fees costs are incredibly important, and thanks to increased support from the provincial government in recent years we have been able to offer more funding to more members than ever before. But while the union is doing its part, the employers have for years been refusing to pay their fair share. Members have routinely had their professional development funding requests turned down by the employer, often being told there is no money available. This is not true. Money is negotiated into our collective agreements, and it's budgeted for, and it's time they started to share it with you. That's why last fall we instituted changes to the professional development application process which require members to go first to the employer. It's an extra step, to be sure, but it's the only way we can unlock the money that is owed to you.

BRINGING YOUR CONCERNS TO THE BARGAINING TABLE

Shortages will of course be a big focus as we prepare to begin negotiations for the next contracts, along with many other workplace issues.

In October and November, members from around the province began discussions to set the direction of these negotiations at bargaining proposal conferences. Over 1,300 specific proposals were submitted by members under the Health Sciences

Professional Bargaining Association (HSPBA) collective agreement, and over the course of two days delegates worked with senior staff to prioritize these. Members under collective agreements for Community Bargaining Association (CBA), Community Social Services (CSS) and Nurses Bargaining Agreement (NBA) also submitted a significant number of proposals.

All four of these contracts expire on March 31, and we anticipate a difficult round of bargaining. Unlike in the last round, the provincial government is now facing significant fiscal challenges posed by a \$10.9 billion budget deficit and the very real but constantly shifting threat of economic sanctions from the Trump administration. But while the negotiations will be difficult, we are resolute in our determination to achieve agreements that address the many concerns of our members and reflect the vital importance of front-line professionals in health care and community social services. This round HSA will look to continue the collaboration with other public sector unions which was successful in delivering some of the highest general wage increases seen in over 20 years and continue to be unmatched among health science professionals across Canada within the period since I was elected.

Your elected bargaining committees are already at work preparing to bring forward priorities focused on:

- Wages and monetary support
- Safe work and work-life balance
- Recognition and respect
- Partnership in quality health care

Members at West Coast Medical Imaging are preparing to go back to the table

following a vote to reject the tentative agreement achieved last fall, and have had their initial meeting with the employer. Negotiators and committee members are looking to reengage the membership with discussions about their identified priorities which include fair pay, workload and respect.

Bargaining is a long and intensive process, and we plan to provide updates as it progresses while ensuring that your negotiating teams are in the best position possible to get as much of what you have asked of them as they can. I want to thank all of you, from members and steward teams, for your thoughts in providing a very thorough and comprehensive list of bargaining proposals.

A CHANGING UNION FOR A CHANGING WORLD

Faced with so many challenges, the union must constantly change to keep up.

Your elected board is continuing to develop a new strategic plan to guide the union through the next few years.

With a heavy emphasis on input from members like yourselves, this strategic plan ensures your union is not just reacting to emerging issues, but setting targets to get ahead of the many challenges of the post-pandemic, shortage-riven, and globally volatile landscape around us. That strategic plan, which was developed with the guidance of a local firm specializing in progressive planning, will be unveiled to members at this convention.

This year, HSA will move to a one-member, one-vote process for the election of the president. Where previously the president

was elected by delegates to Convention, now every member in the union will have an opportunity to cast a vote. The voting is being conducted online and the results will be announced at Convention.

Despite the current backlash against all things progressive, HSA remains deeply committed to recognizing and honouring the diversity of our membership and the communities around us. We are creating new committees to focus on members who are disabled, 2SLGBTQIA+ and gender diverse, and in February we held our first ever Equity Summit, bringing members together with guest speakers to support one another in solidarity.

We need to unite, now, more than ever, given the rise of intolerance, polarization, and hate that we are seeing, not just in our neighbours to the south, but also here in Canada. The rise of extreme ends of the political spectrum both the far right, and the far left, have divided groups of people that might otherwise work in solidarity. The mindset of right versus wrong is often not broad enough to remember each other's humanity.

We need to turn to each other, not on each other. Solidarity means that we act with the knowledge that we are all complex humans with life stories that cause us to think and behave in certain ways. Solidarity means that we are not afraid of owning mistakes, as we do not live in a mistake-free world. And solidarity means that even though we may not agree on some things, we know that together we are stronger.

This solidarity is very hard work, but it's solidarity that I see when members from a multitude of backgrounds, with diverse life experiences, working in over 70 different

professions, work together at convention, in committees, in the worksite and at the bargaining table.

And am I very proud to look back on what we have achieved by working together in the last few years, despite incredible challenges.

Greater and greater recognition of the specialized and essential work we do – seen in the hundreds of new training seats added to programs to increase the number of grads needed to fill the vacancies.

Greater respect from the employer and the government – and the creation of Canada's first provincial chief allied health officer, working inside government to grow and support the professions we work in.

Greater support for our work on the front lines – seen in some of the highest pay increases in the country, and in last year's program of cash incentives for recruitment and retention for rural communities and urban facilities facing the most acute shortages.

These things do not happen on their own. It takes persistence, it takes patience and it takes all of us, working together, supporting each other and the people who depend on our skills.

We live in very difficult times. But we've seen what we can do when we stick together. I look forward to continuing the work.

Respectfully submitted,
Kane Tse
President, HSA

Report of the Executive Director/General Counsel

We come to the HSA Annual Convention this year and we tell you below of numerous accomplishments attributable to the work of the union's activists, officers and staff. Yet this year we come together acutely aware of political, social and economic threats which have the potential to fundamentally undermine our working lives, divide us on the basis of race, gender, class or deny our right to live with freedom of choice. Our strength will come from unity and commitment to fight for our rights.

*"...and our weapons are education,
organization and agitation..."*

Albert "Ginger" Goodwin

LOOKING TO BARGAINING 2025

HSA historically has been the dominant union representing health science professionals in British Columbia. While this has not changed, the structure of bargaining has changed.

The Health Authorities Act created statutory bargaining units with mandated bargaining associations composed of the various unions representing unionized employees in the health sector. The health sector is made up of the health authorities and various other employers included in the health sector such as child development

centres. HSA is the lead union in the Health Science Professionals Bargaining Association (HSPBA) that represents all unionized employees in the health science professional subsector within the health sector. The HSPBA is composed of all the unions that represent members in that sector.

The HSA also represents members in the Community Bargaining Association (CBA) and the Nurses Bargaining Association (NBA).

A similar structure brings together the unions representing community service sector members in the Community Social Services Bargaining Association (CSSBA).

Coordination of all bargaining tables is a managed by our Director of Bargaining, Norah Miner.

HSPBA

Official notice to bargain was sent from the HSPBA to HEABC in early February, with bargaining dates scheduled in March and April.

Within the HSPBA, changes to our classification system in the last contract netted increases to 67% of HSA members. But we were unable to undo the damage

caused by a number of arbitrated decisions which had imposed wage rates inhibiting both lateral and upward mobility. While the union protected incumbents by green-circling, this is not enough. This year we take that fight back to the bargaining table.

In 2024 we were able to negotiate an agreement which mitigates some of the harm caused by contracting bargaining unit work to agencies. This perennial problem has been with us since the early days of the union and has been the subject of numerous arbitrations and mediations. With the exception of the years between 2002 and 2008 when Bill 29 was still in full force and we were prohibited from pursuing remedies, the union has managed to protect bargaining unit work from numerous external threats. But two obstacles are always with us: a lack of transparency and accountability from the health authorities as to their efforts to recruit, and the chronic shortages of health science professionals which are affecting the delivery of health care nationally and internationally. We continue to oppose and grieve contracting in and out but now have more tools to police the efforts made by employers to recruit and fill our bargaining unit positions. We will be raising these issues at the bargaining table.

Benefits and professional development are also areas where we are working to provide enhanced supports through lobbying and successful management of various monies provided outside HSPBA to members for professional development – a key to retention. We have also received monies, additional to the monies managed by the Joint Health Science Benefits Trust (JHSBT), to provide more supports to assist with the many issues arising from short-staffing and workload pressures. These

funds should run through the remainder of 2025 and into 2026. Again, we will take these areas of concern to the bargaining table in the case of the former, and the Benefits Redesign Committee of the JHSBT in the case of the latter.

In addition to the priorities set by members for this round of bargaining that include: wages/premiums, safe work and work-life balance, partners in quality health care, and recognition and respect, HSA has a strong focus on protection and expansion of the equity, diversity, and inclusion (EDI) initiatives to prioritize protections that are so needed for many of our members. We will also continue to work towards the decolonization and indigenization of the collective agreement.

Finally, many of the committees and working groups established in the last round of negotiations, such as the Days of Cultural Significance working group, and the Workload working group, have completed their identified work, which may be useful as we approach the negotiating table. Certain committees that spanned bargaining associations, including the Diversity, Equity, and Inclusion (DEI) committee, Switch BC and the Indigenous Specific Anti-Racism (ISAR) committee may allow the bargaining associations to work together on some key issues. It is our hope that the work of these committees will set the stage for collective agreement improvements in each bargaining association.

CBA

The HSA CBA Bargaining Proposals conference took place in October 2024, and HSA members' priorities aligned with members in the other constituent unions.

HSA priorities are squarely within the proposals going forward at this table. The lead negotiator of the CBA has indicated to the committee that it will be a challenging, lean, and tricky round of negotiations. The CBA committee shows a great deal of solidarity between the constituent unions and is prepared to navigate this next round of negotiations on a tightly united front.

CSSBA

Over the course of 2024, there have been a number of developments in this bargaining association. The CSSBA is preparing for 2025 bargaining and will be informed by some of the events in the past year.

CSSBA and CSSEA signed a MOA to a Temporary Market Adjustment for employees working in supportive housing programs. This adjustment significantly advanced parity between the CSS and CBA collective agreements for workers doing this type of work including reducing the number of steps on the wage scale from four steps to three and adding shift premiums.

The CSSBA allocated over \$600,000 to the Labour and Education Fund (LAEF). Applicants could apply for up to \$3,000 (\$5,000 if they were facing layoffs) to advance their training and education. The funding window was April 1, 2024 - March 31, 2025. The CSSBA has also allocated monies to host a Respectful Workplace Training module. Such initiatives are top of mind in this and every sector.

The CSSBA will seek to further these initiatives in the 2025 round of bargaining. The CSSBA lead negotiator has indicated that we should prepare for a difficult round of bargaining for the CSSBA table.

Private Sector Bargaining

Paragon Orthotics: A bargaining survey was sent to Paragon members in December. Based on the survey results, the priorities appear to be wages and improvements to health and dental coverage. The collective agreement expires on March 31, 2025.

West Coast Medical Imaging: WCMI bargaining was handed over in a difficult position to a newly elected five person committee and new staff negotiators. While HSA's Board of Directors had endorsed the previous tentative collective agreement to the members, the WCMI bargaining committee was divided, and ratification ultimately failed by a narrow margin. As a result, the new negotiating committee has been tasked with delivering an improvement over the tentative agreement rejected by members.

NBA

Discussions on minimum nurse patient ratios continue weekly amongst the parties, specifically for nursing in mental health. The committee has found that there are additional complexities present in mental. For example, the use of seclusion rooms, units working with multi-disciplinary teams, rural and remote considerations, and specialized areas. Additionally, frontline nurses have consistently reported increased complexity amongst patients under their care. While it is complicated, the parties are committed to coming to agreement on minimum nurse patient ratios that will have a positive impact on patient care and staff.

The Performance Feedback working group has been meeting to develop a framework to implement the language in Appendix

R of the NBA collective agreement. This feedback process is intended to be non-disciplinary and an opportunity for reciprocal feedback to be shared between manager and employee.

In November 2024, HSA RPNs from across the province, attended the NBA bargaining proposal conference. RPNs at that conference brought forward bargaining proposals from their chapters that included proposals related to overtime, personal leave, sick leave, recruitment and more. Bargaining dates are yet to be set for the NBA.

GOVERNMENT RELATIONS

There continue to be key areas where we engage in direct discussions with the Ministry of Health. This is made possible through avenues related to the Health Human Resources (HHR) plan, and the identified recruitment and retention challenges and initiatives specific to the professions of the HSA membership.

In 2024, HSA staff held regular discussions with the Allied Health Policy Secretariat to be positioned to better inform the Ministry of the nuanced details of shortages and working conditions for allied health workers across the province.

In addition, HSA met quarterly with the Ministry of Health to review issues of concern such as the shortages in many health science professions, and the ongoing concern about the possibility of ratios for our colleagues in nursing without a more complex and comprehensive approach for ratios for all health care workers. We have continued to meet and provide specific examples of recruitment and retention challenges for HSA professions, and the

impact these shortages are having on the health system as a whole.

As a result of these meetings and the work of the Recruitment and Retention Committee, we have seen a number of actions in 2024:

- Development of the employer and ministries' understanding on recruitment and retention issues that are (like the PET techs) specific to certain groups of members.
- Alignment of recruitment and retention programs with the Ministry of Health HHR plan including the development of a shared goal to create more uniform approaches to the existing recruitment and retention programs across the province
- Development of standardized data and information sharing with a focus on determining the efficacy of current/ existing recruitment and retention initiatives
- Development of standardized data and information sharing about active shortages within specific professions (includes discussion on the collection of and definition of Difficult to Fill Vacancies for all employers)

The key outcome of this work in 2024 included the signing of a significant province wide recruitment and retention memorandum of understanding effective April 1, 2024 – March 31, 2025 for identified monetary incentives between the parties. This memorandum supported and allowed for four key province wide initiatives:

- PRRI (Rural Retention)
- Go-Health program (Recruitment)
- Rural and Remote incentive program (Recruitment)
- Difficult to Fill Urban and Metro Incentives (Recruitment).

EQUITY, DIVERSITY AND INCLUSION

Initiatives under the collective agreement

In the 2022 – 2025 round of bargaining, the union took steps towards de-colonization of the collective agreements by negotiating Appendix 44. There is now language aimed at addressing the ongoing harm towards Indigenous, Metis, and First Nations people through systemic racism within the health care system. As part of the process to work towards addressing these harms, the ISAR provincial committee was formed. As well, a DEI working group was formed and Days of Cultural Significance have been piloted.

ISAR (Indigenous Specific Anti-Racism)

The committee has engaged in education and discussions on how Indigenous specific racism is operating in health care and health care sector agreements. The parties have taken time to review relevant available literature such as, the In Plain Sight Report (2019), the Distinctions-Based Approach Primer Report (2023), and Indigenous teachings and writings to inform the discussions.

The ISAR working group has developed a “relational agreement” which is the agreed upon way that the parties within this forum operate. The ISAR working group is hopeful this kind of approach will translate into bargaining while recognizing that the context and structure of traditional

collective bargaining is fundamentally incompatible.

DEI Working Group

While this group is charged with the task of developing a framework by March 2025, consultation in this group has been limited to a broad overview of the issues, and the framework still lacks significant detail on the logistical and practical details of embedding DEI concepts into the current health care structures in BC. The working group has identified the actions in the framework which will require resources, identifying the need to assign responsibility for implementing the actions. The framework, currently far from complete, was scheduled to be presented to Joint Provincial Health Human Resources Coordination Centre (JPHHRCC) in February. Without the accountability noted above, the DEI framework may run the risk of being performative.

Cultural Days of Significance Pilot

The three sites included in this pilot project are:

- B.C. Children’s and Women’s Hospital (Provincial Health Services Authority)
- Fraser Health Authority’s Population and Public Health Program (consisting of 13 worksites)
- Fort Saint John Hospital (Northern Health Authority)

To date, none of the employers have reached out with issues or concerns which the working group considers cautiously optimistic.

There is a survey going to employers who are participating in the project to help

evaluate the cost/benefit of the program, as well as a question to the members about the meaningfulness/impact of the program. Results should be in by March/April before bargaining.

Initiatives from within the Membership

At the 2024 HSA Convention the membership passed Resolution 119 which calling for HSA to create three distinct committees for people with disabilities, 2SLGBTQIA+ people and gender diverse people, comprised of members with lived experience. Work is underway to establish terms of reference and committee membership.

Initiatives within HSA Servicing

In addition to providing staff education, staff positions – EDI Specialist – Organizer and Cultural Safety Labour Relations Officer into the Organizing and Servicing Departments, the purpose of which is to embed the principles of equity, diversity and inclusion within the union’s core values and work.

NUPGE Activity

HSA members and staff support have been actively engaged in the national union’s Anti-Racism Committee, the Indigenous Issues Committee and the Special Pride committee.

Equity Summit

On February 19, 2025, HSA held its first Equity Summit. We heard from Len Pierre, Vivek Chibber, Salmaan Khan, Winnie Ng and Adrienne Smith. A common theme emerged from the speakers, although they all brought unique perspectives to the

participants: unions must fight to protect core values and advance EDI principles. A class analysis is important in understanding discrimination, and we have to go slow to go fast. The gains that have been made over the years are gains unions have fought for. The threats to equity denied members have never been more acute and we need to find common understanding and common will to fight.

Finding the Way Forward

HSA is assessing the work it has done since 2021 to determine how best to proceed in ensuring that equity, diversity and inclusion remain core values of the union. There are many resolutions that have come forward to Convention 2025. Determination of those resolutions will guide the union’s work. As well, the Assessment Report delivered following Convention 2024 contains recommendations which will also assist the union in developing best practices to honour the principles of equality, diversity and inclusion.

LABOUR RELATIONS SERVICING

The HSA Servicing Department is the largest department at HSA and is currently staffed by 35 FTE, under the leadership of Alyson Warner.

HSA Labour Relations Servicing Department responded to many issues on behalf of our members. More than 939 grievances were opened in 2024, and although many issues do not have a direct financial impact to members, on files where there were concrete monetary impacts, over \$600,000 in direct compensation was awarded back to our members through successful grievance resolutions.

Grievance files and monetary resolutions – January - December 2024:

Case Files Opened	Case Files Closed	Case Files Open at End of Period
939	912	1561

The total monetary value of all grievance files closed in 2024 was \$614,653.

Grievance Themes

There have been several themes that LROs reported seeing from across the province during the 2024 timeframe:

- Policy grievances have been filed with the health authorities who have not fully complied with the language in the 2022-2025 collective agreement requiring employers to make all single occupant bathrooms/changerooms accessible by employees of any gender expression or identity, and to post signage in all bathroom/changeroom facilities about diverse genders being welcome in these spaces.
- There were a number of union leave grievances related to Convention, regional meeting and CMET releases, many of which were resolved without the need to use the new expedited arbitration language. Of those that required use of expedited arbitration, we were completely successful on the majority. This took a lot of time-sensitive work done by the steward teams, LROs and HSA’s legal department, and was an outcome to be proud of.
- Several members have requested support in having Indigenous Cultural

Leave be granted and have had significant success on pushing back against reluctant or overly intrusive employers. One of the key concerns seemed to revolve concerns of what was an “event.”

- With the order being lifted by the Provincial Health Officer, and corresponding Letter of Understanding negotiated with HEABC, HSA had multiple members who were previously impacted by the vaccine mandate reaching out to their assigned LROs about their options. We continue to pursue resolves for members who ought to have been accommodated, either medically or through religious accommodations, and for those who may have had opportunity to work entirely from home. The LROs who still retain conduct of these files have spent significant time with a small number of members collecting the required evidence to proceed on these files.
- With the new stipulation regarding the Professional Development Fund requiring members to have applied for funding from their employer, and grieving if they are not successful, the department has set up a streamlined way to track the increase in education grievances. There have been a significant number filed over the past year.
- We’ve seen a growing trend of grievances filed by members with Bachelor of Social Work degrees who have been reassigned to work in areas staffed by members with graduate degrees, and then not being called in for shifts in those same areas or being found not qualified for postings in

areas they've been reassigned to for significant periods of time.

- There have been a number of Section 54s requiring labour adjustment plans successfully negotiated in 2024 including the lower mainland deconsolidation affecting 1,200 members.

Strategic Relations Committees

In the last round of bargaining, Strategic Relations Committees were agreed upon between the parties under the HSPBA. The purpose of these committees is the following:

- discuss developments and potential initiatives, which may have a significant impact on members;
- develop collaborative approaches and timely resolutions to workplace issues;
- discuss broad employer initiatives and,
- discuss and share information on recruitment and retention issues.

The committee meetings are held with individual employers and include representatives with decision making authority. Labour relations staff initiated these meetings after ratification of the collective agreement and have since had one or more meetings with each employer.

LEGAL

The HSA Legal Department is currently staffed with 8.0 FTE in legal counsel, 4.0 FTE in legal administrative support and a 1.0 FTE paralegal under the leadership of Stephen Hutchison, Membership Services Coordinator (Legal Services).

It was another busy year for the Legal

department. The department opened 184 files in 2024. The department also closed 86 files.

Case Files Opened	Case Files Closed
184	86

In addition, the department managed a huge number of classification matching disputes in preparation for the implementation of the new classification system from 2023 through to April 2024. This work essentially occupied almost all of the resources of the department for the first quarter of the 2024 year.

A large number of files were settled through negotiation or mediation, resulting in recovery of \$1.3 million through mediated or negotiated settlements.

The department continues to provide assistance to members with regulatory colleges complaints, and provides support to the union's Privacy Officer in privacy matters.

The department was also successful in several matters that proceeded to formal hearing as set out below.

Arbitration Decisions

Yaletown House Society: Following the LRB's decision that the union's certification at Yaletown House Society (YHS) remained in effect and that the collective agreement continued to apply to the parties, HSA pursued its contacting-in grievance. Despite the Board's decision, YHS had taken no steps to give effect to the decision and continued to bring in contractors for services typically performed by bargaining

unit members: occupational therapy, music therapy, dietetic services and recreational therapy.

On January 10, 2024, Arbitrator Kandola issued a decision finding in favour of HSA. The arbitrator considered the nature of the work as an important factor in the decision and that the circumstances amounted to an improper contracting in. "YHS has brought in third parties to perform work that is typically performed in this sector by members of the Union's bargaining unit, and in classifications that are expressly recognized in, and governed by, the terms of the Collective Agreement."

IHA and HSA (Marriage Leave): The grievor, a part-time employee, was regularly scheduled to work three days per week, and requested five days of marriage leave pursuant to Article 20.02(a) of the HSPBA collective agreement. The grievor was scheduled to work Monday, Tuesday and Wednesday of one week, followed by a Monday and Tuesday of the following week. Initially the employer granted the request but then only provided 3 paid days of leave (the first three requested days) using the grievor's special leave bank. The arbitrator determined that the grievor was entitled to take the full five days as special leave. The arbitrator also agreed with the union that marriage leave does not need to be taken consecutively - so long as there is a sufficient nexus between marriage (i.e., the leave is requested to allow the member to participate in an event "inherent or incidental to a marriage") then the requested days could even be taken over a protracted period of time.

VIHA and HSA (Classification CYC): This case dealt with whether the employer's failure to appoint a supervisor in a timely

fashion for a group of child and youth counsellors (CYC) after the introduction of the working without general supervision classification for the CYCs and other professions in April 2021 as part of the classification improvement process. The Arbitrator found it to be an involuntary demotion and protected the grievors' wage rates.

NHA and HSA (National Day for Truth and Reconciliation Statutory Holiday (NDTR)): This case dealt with whether the formulae used to compensate part-time and casual members for statutory holiday automatically changed with the introduction of a new holiday (in this case the NDTR) or whether the parties were required to negotiate such a change.

The arbitrator found the employer's position that the entitlement for part-time and casual employees is a fixed formula or percentage, regardless of the newly proclaimed NDTR, is inconsistent with the plain and ordinary meaning of the agreement. Rather the formulae for part-time and casual employees needed to automatically change with the addition of a new statutory holiday. The arbitrator declared the employer's failure to adjust the formulae and percentage to reflect the NDTR for part-time and casual members was a breach of the agreement.

Labour Relations Board

The Legal Department also made significant submissions in two organizing campaigns (Reach Child and Youth Development Society and pharmacy residents for a number of health authority employers). In both situations the employers withdrew their objections to the certification prior to a formal decision being rendered by the LRB.

CLASSIFICATIONS

The regular staffing complement of HSA classifications department in 2024 consisted of 5.0 FTE labour relations officers, and 1.75 FTE administrative support staff under the leadership of Derek Wong.

The year was by far, the busiest ever for HSA classifications, highlighted by the long-awaited November/December full implementation of the new HSPBA profile-based classification system.

There were 932 employer job description submissions received and reviewed in 2024 (the second consecutive year of over 900 submissions), a 117% increase over the 429 job description submissions received in 2022.

Additionally, 527 new classification case files were opened in 2024 including both job description objections and member classification grievances, an approximately 65% increase over the 319 new files of 2023. Many of the cases involve multiple grievors and/or incumbents.

HSPBA

The classifications department closed 304 files. These grievance resolutions saw HSA members receiving lump sum and/or retroactive salary adjustment payments totalling over \$1,180,000 and ongoing pay increases of about \$745,000 per annum.

Classifications grievance successes, year over year, are providing increasing benefit to HSA members:

Year	Classifications Grievances Resolved	Lump Sum and/or Retroactive Salary Adjustment Payments	Pay Rate Increases (Annualized)
2024	304	\$1,180,00	\$745,000
2023	224	\$615,000	\$327,000
2022	271	\$434,000	\$239,000
2021	234	\$593,000	\$421,000
2020	174	\$601,000	\$335,000
2019	200	\$438,000	\$219,000
2018	232	\$243,000	\$210,000

Classifications grievance resolutions, 2018 - 2024

Full implementation of the new HSPBA profile-based classification system resulted in pay rate increases (over and above the general and cost of living wage increases) totalling well over \$60 million being applied to about 68% of health science professionals. Also, about 7.6% of the members were in jobs that had rate decreases under the new system, however all incumbents of those jobs as at December 6, 2024, had “green-circling” wage protection applied that resulted in no members experiencing pay cuts as well as retaining the right to all future general wage increases for as long as they remain in their green-circled position.

CSSBA

In the community social services sector, 2024 saw the implementation of the 2022-2025 collective agreement’s Health Sector Wage Comparability increases.

For jobs compensated per the Joint Job Evaluation Plan wage schedule, there were Facilities Wage Comparability wage adjustments (over and above the general and cost of living wage increases) that were applied retroactively effective to April 1, 2023.

For jobs compensated per the paraprofessional wage schedule, there were Health Science Professionals Classification Comparability wage adjustments (over and above the general and cost of living wage increases) with various retractive dates.

DISABILITY MANAGEMENT

There has been substantial reorganization in this department in 2024, providing support and advocacy to HSA Members in the areas of disability management, early

intervention, and duty to accomodate. Disability Management has two Membership Services Coordinators, Alka Kundi and Leah Kawa under the leadership of Alison Hietanen, Director of Disability Management.

The Disability Management (DM) team provides a variety of supports to HSA members navigating complex systems in their efforts to remain in the workplace or return to work following illness or injury. This includes assistance and representation through the Enhanced Disability Management Program (EDMP) and Early Intervention Program (EIP), advice and appeal services in relation to WorkSafe BC (WCB) and long-term disability (LTD) claims, as well as negotiating and implementing rehabilitation plans and duty to accommodate agreements.

In that regard, the DM team continues to work with the health authorities to improve communication and streamline processes for our members.

Ongoing education is an important facet of the work that we do, and our LROs and advocates engage with members at Basic Steward Training, Supervisors in the Union, Occupational Health and Safety (OHS) workshops, and Lunch and Learns at worksites.

EDMP

Members’ mental and physical health is being challenged more than ever by workplace safety concerns, interpersonal relationship issues with supervisors and colleagues, workload demands, staffing shortages, and instability of world events. As a result, the demand for Disability Management services continues to be high,

with 1,467 new early intervention files and 298 advice files opened in 2024.

Our diverse, highly skilled, and passionate team of DTA labour relations officers (DTA LROs) and EDMP regional representatives works diligently to assist our members with navigating complex systems and accessing supportive services. In addition, the DTA LROs work closely with members to address situations where multiple barriers complicate the return-to-work process. Due to the complexities of those barriers, along with employer intransigence, DTA LROs filed 42 grievances in 2024, successfully resolving many of them including one substantial win of \$69,000.00.

Community Social Services – EIP

Without any local regional representatives on the ground to assist members, this early intervention program is supported entirely out of head office. We work diligently with the CSS employers to educate them about their role and obligations in supporting members who are off work due to illness or injury or returning to work and in need of a medical accommodation. In addition, we continue to provide education to members about their collective agreement and common law rights through events such as lunch and learn.

West Coast Medical Imaging and Paragon Orthotics

Members covered under the West Coast Medical Imaging and Paragon Orthotics collective agreements unfortunately do not have a negotiated disability management program.

Recently, however, our head office EDMP administrators successfully connected Disability Management Institute (DMI), a

third-party service provider, with WCMI with the aim of ensuring the employer receives objective and knowledgeable guidance around how to appropriately support ill and injured employees. Further, having a third party provider manage members' disability files addresses privacy concerns related to confidential medical information by having someone other than the employer collect medical documentation. In addition, DMI has experience working collaboratively with the union to support ill or injured employees, or employees wanting to return to work following sick leave.

WorkSafe BC

In the area of WCB appeals, 61 new files were opened in 2024, bringing the total number of active files to 195. The increasing complexity of these files continues to demand greater time and resources to achieve best results for members. In particular, the number of appeals of claims denying mental health injuries continues to increase. These claims require significant investment of resources as advocates advance complex factual and legal arguments (including challenges to the legislation under the Charter) and retain independent experts to obtain medical evidence to support the claim.

Fortunately, we have continued having success with these and other appeals at the Review Division and/or the Workers' Compensation Appeal Tribunal (WCAT). In 2024, our advocates obtained 67 successful appeal decisions, representing a monetary value to members on the order of **\$6,441,988.75**.

We have also been actively filing grievances to advance collective agreement rights and entitlements for members on WCB/LTD claims. Most notably, the department has

been filing individual and policy grievances to ensure members are receiving benefits negotiated in the last round of collective bargaining. This includes grievances to clarify the employer's obligation to continue providing net pay and benefits to members who remain on a WCB claim but have transitioned from wage loss benefits.

Long-Term Disability

Similar to the WCB appeal caseload, the number of LTD appeals continues to be steady. The adjudication delays identified and addressed last year appear to have improved. Through our LTD Plan Advisory Committee, we meet regularly with the employer, the third party administrator and the insurance company to identify and address LTD adjudication concerns and improve processes.

Discussions throughout 2024 resulted in unique cases being examined with more nuance applied by claims adjudicators.

Advocates have continued their dedicated good work on behalf of our members, resulting in the successful resolution of 32 successful appeal decisions with an overall monetary benefit to those members of **\$27,351,855.40**.

The DM department has also been in active communication with benefit providers to assist members with concerns about their extended health benefits. Through this process, we have been able to assist members to obtain clarity on denied claims, assist with claim submission during the postal strike, and to assist in clarifying repayment obligations when members receive treatment through WCB.

OHS

In this past period, the OHS department has been expending a great amount of time representing HSA in a number of projects which include SWITCH BC and the Community and Social Services Health and Safety Association. This is in addition to ongoing work in supporting Regional Violence Prevention, Psychological Health and Safety, and general OHS Committees. The OHS team also provides support, training, and education to members in various chapters, and facilitates the provincial OHS committee.

Some highlights on this work:

HSA is a partner group with SWITCH BC, holding seats on the Board of Directors and the Technical Advisory Committee (TAC). From this perspective, HSA OHS has been a key contributor to the overall organization as well as specific projects. HSA holds a lead worker representative role in the OHS Resource Centre Implementation Group. The OHS Resource Centre is currently being piloted in 4 sites within Providence Health in Phase 1 of the project and is planned to go to 17 sites in Phase 2, beginning February 19, 2025. In addition to Providence Health, the Resource Centre is being soft launched in three sites within Vancouver Coastal Health in Vancouver, Richmond, and Powell River.

The second major project nearing completion is the Provincial Violence Prevention Curriculum refresh. All eight modules of the online portion of the curriculum have been completed and are being refined in preparation of soft launch. HSA has been active in the development, revision, and review of this project as part of the Technical Advisory Committee,

the Core TAC Committee, and the Review Committee. Following roll out of the online curriculum will be the development of the in-person delivery course.

The third, SWITCH BC project, prescribed by collective agreement language is creating resources for Joint Health and Safety Committees on Psychological Health and Safety. This project is in its early stages and has now formed a Core TAC Working Group, in which HSA staff are involved.

This group is scheduled to meet in March 2025, and as the group's first objective, will work towards developing a province wide needs assessment through consultative feedback with various Joint Health and Safety committees.

Psychological health and safety is a growing area of interest and concern in the OHS area. HSA is currently participating in Regional Psychological and Violence Prevention committees with both staff and member participation. These committees, or variations of these committees are in all health authorities. HSA is also represented at Psychological Health and Safety subcommittees with the BCFED, and at the SWITCH BC Community of Practice.

HSA holds Board and TAC positions in the Community and Social Services Health and Safety Association. The CSSHSA is working on developing and adapting occupational health resources for the community social services sector. Current projects include creating course content through consultative feedback with employers, bargaining associations, and subject matter experts. Course content currently being developed include topics such as new member Joint Health and Safety Committee training, musculoskeletal

injury prevention and risk assessments for violence prevention. The CSSHSA has also partnered with the Canadian Mental Health Association to create course content on psychological health and safety. In addition, webinars are being developed for CSS members on topics such as violence prevention, controls for illicit drugs and psychological health and safety. The CEO of CSSHSA recently met and presented to the OHS committee on a variety of the initiatives, listed above.

A number of prevention decisions have been presented to the WorkSafeBC Review Division and Worker Compensation Appeal Tribunal. A number of these decisions have involved large fines and disciplinary actions by employers in both health care and community social services. These decisions were shared with the committee.

This year, the OHS team has delivered one OHS Basic Steward and one OHS Advanced Steward course. Two more OHS Basic Steward courses are scheduled for this spring. Planning for the biennial OHS conference has begun with the OHS Committee recommending a theme of workplace psychological health and safety. The OHS Conference is tentatively scheduled for February 2026.

SPECIAL PROJECTS

Special union-run funds established for the HSPBA – the Professional Development and Professional Fee funds – are administered by HSA staff. Several ran over 2024, continuing into 2025. Additionally, the increased paid steward time achieved in 2022-2025 HSPBA and NBA bargaining is administered by HSA staff.

Professional Development Fund

2023-2024 \$400,000 Professional Development Fund

This fund was launched in late November of 2023. At final count we reviewed a total of 1054 applications in this fund, of that **650** applications were eligible for a total of **\$396,096**.

2024-2025 \$400,000 Professional Development Fund

Since opening this fund in July 2024, we have received 463 applications, **443** of which were eligible.

2023-2024 \$3 million HSPBA Professional Development Fund

To date we have reviewed a total of 1,890 applications under this fund, **1,447** of which have been deemed eligible. 1,347 of these have been paid and the remaining 94 will be receiving reminder emails with a final date for submission.

2024 Professional Enhancement Bursary \$4 million

The Bursary launched on November 20, 2024, and we have received 529 applications up to January 21, 2025. This fund replaces the previous professional development funds of \$3 million of specifically allocated government funding.

A change of administration in this fund is the mandatory application by members to their employer for money under Article 17 for their education. Verification of this application is necessary to be able to submit their application through the process.

A further obligation for members is to grieve under Article 17 should their employer deny them funding up to the full

\$1,000 collective agreement right. Should a member grievance prove necessary due to full or partial denial of Article 17 monies to members, members will be reimbursed the "grieved" monies from the fund while the grievance is processed so their education can proceed. The union will then pursue the grievance, and when successful, the recovered monies will be released back into the Professional Enhancement Bursary fund for distribution to other members, thus "tapping" into monies previously left "in employer pockets".

Professional Fee Fund

2023 Professional Fees Fund

\$4,184,125.65 was approved and paid. 8,812 applications were received.

2024 Professional Fees Fund

\$4,220,621.91 was approved and paid. 9,188 applications were received.

2025 Professional Fees Fund

We are planning to open the 2025 Professional Fees Fund by March 31, 2025. For 2025, we will likely only be able to reimburse members at about 70% of their fees (calculated using the 2024 fee amounts). We are aware that a number of professional associations are planning to or have already increased their fees for the 2025 year. The Professional Fees Fund will be at the collective bargaining table and we continue to analyze the data gained through administering the fund to support this, including an analysis of the impact of these fee increases on projected total demand.

Paid Steward Time

Paid/dedicated steward time has been almost completely allocated and is working well. We have received several requests for

increases in time from sites that already have some allocation, and for allocated time from sites that do not yet have any. We are hoping further dedicated steward time may be a part of the next round of bargaining. To that end we are turning our minds not only to where any newly achieved resources might be most beneficially allocated, but towards other models (such as regional stewards) from which we might benefit. It has recently come to our attention that some employers still do not have an appropriate system in place to efficiently pay these stewards and submit to the union for reimbursement. We are working with HEABC and the employers to rectify this.

JOINT HEALTH SCIENCE BENEFIT TRUST (JHSBT)

Information about current benefits, as well as information on governance and the financial standing of the trust may be found at the JHSBT website www.jhsbt.ca.

The JHSBT website is designed to give members information on the JHSBT; its structures, policies, annual reports, and financial statements, in accordance with the JHSBT trust agreement. The website also lists the JHSBT service providers who assist in managing the operation of the Trust, along with links to claims paying agents, Pacific Blue Cross and Canada Life, and third-party administrator HBT. There you will also find a review of the history of the Trust.

The JHSBT HSA Trustees have heard that there is a need to provide more information on how to access information about both benefits and the steps to take to apply and receive benefits or ask for a review of decisions made by benefit providers. We

refer you to the following websites which provide all the information:

- Your benefits booklet and benefits-at-a-glance quick reference can be viewed at: www.jhsbt.ca/your-benefits/
- For general extended health or dental benefit questions: www.pac.bluecross.ca/member-privileges/how-can-we-help-you/
- For your specific extended health or dental benefits coverages: service.pac.bluecross.ca/member/login/
- For information on life insurance, AD&D or LTD, please contact your employer or your union's EDMP Regional Representative

The JHSBT website provides an opportunity for members to provide feedback, comments or questions to the JHSBT through contact@jhsbt.ca. Benefit redesign continues to be investigated by the Benefit Design Review Committee.

We can advise that the Benefit Design Review Committee is meeting and will be conducting an updated survey as the last survey taken was in 2021. The JHSBT HSA Trustees on the Benefit Design Review Committee have also reviewed and taken notice of the various bargaining proposals which were brought forward through the bargaining proposal conference at their request.

In 2024, the BC Ministry of Health provided the Health Science Professionals Bargaining Association (HSPBA) with a one time grant of monies partially designated to establish mental health support services for health science professionals. The HSPBA

is working with the JHSBT to implement a process for eligible members to access additional benefits to support their mental wellbeing. This process will provide supplementary funding for additional registered psychology and counselling services over and above the current \$900 annual benefit, and includes registered social worker services, registered dietitian services, and digital cognitive behavioural therapy. The supplementary funding will be administered by the HSA, and access to the additional benefits will be available until the fund is exhausted.

The primary responsibility of the Trustees of the JHSBT is to ensure that the plan remains healthy and solvent, particularly in an unstable investment climate.

HSPBA members' comments and feedback are always welcome through contact@jhsbt.ca.

SUMMARY

We continue to promote the elimination of barriers for equity-seeking members, organize the unorganized, bring contract workers into the bargaining unit, strenuously pursue all meritorious grievances, which include numerous classification disputes and an increasing number of discipline grievances. We have administered millions of dollars to promote professional development and reimburse professional fees, protect our members with strong disability management and secure occupational health and safety protection in the workplace.

Once again, we are reminded by Rumi:

*"Constant, slow movement teaches us to keep working
like a small creek that stays clear,
that doesn't stagnate, but finds a way
through numerous details, deliberately."*

Respectfully submitted,
Jeanne Meyers
Executive Director/General Counsel

Candidates for President

All HSA members are eligible to vote in the union's first-ever membership-wide online election April 10-11, 2025. Four candidates were nominated by the February 7, 2025 deadline to have statements published in the Annual Report.

Candidate for President: Sarah Kooner

Thank you for considering me for the role of President of HSA. Throughout my time with HSA (as Steward, Lead Steward, Member-at-Large, and Regional Director and through participating with the Political-Action, Governance-and-Policy, Elections, and Resolutions Committee), I've demonstrated my ability to empathize with members, recognize multiple sides of presented issues, and contribute to solutions. Working in a busy facility delivering front-line care, I have firsthand experience with the challenges our members face around shortages and pressures of bedside practice.

As HSA President, I will utilize the knowledge and experience I've gained through advocacy, lobbying (provincially/federally), and government relations work as I work to meet our shared needs at negotiation tables. Having run in our last provincial election, I have important experience and have cultivated relationships that are vital to standing up for public healthcare, patients/clients, and our workers. I plan to:



- Strengthen collective bargaining power to secure better wages, benefits, professional-development opportunities, and working conditions. Our wages must reflect cost of living and complexity/uniqueness of HSA members' work and education/training.
- Address concerns around our classifications system by creating avenues for members to provide feedback and work collaboratively to find practical, effective solutions that build off existing foundation.
- Amplify lobbying efforts and work with governments to improve healthcare work.
- Work transparently so members are confident in our efforts while enhancing communication channels, keeping members informed/engaged.

I understand that our collective agreement received varying responses and will not dismiss the concerns about its presentation and rollout. As President, I understand I will need to deliver unpopular messages; my leadership style and my promise is that I won't shy away from conflict, I'll be transparent, open to feedback, and prepared to work with you to build a stronger union and public voice for healthcare.

My hands-on approach involves seeking forward-thinking, long-term solutions that reflect the various occupations within HSA. My work, education, and direct involvement with our members on front-lines give me a unique, informed outlook of members' experiences.

I stand alongside you in my work, and I will stand up for you as President. I bring a fresh perspective and eagerness to work alongside you. In my work, community involvement, and our union, I focus on transparency and honesty as core tenets of my leadership; I kindly ask for your trust in me as HSA President, and for your vote on April 10, 2025.

Sarah Kooner

Candidate for President: **Matt Wenman**



Dear HSA members:

I have worked with Island Health since 2014 with roles at both Royal Jubilee Hospital and the Victoria Health Unit. As a union steward since 2019, I played a key role in negotiating our department's 24.09 Agreement and have supported members with various issues, from vacation time to displacement. This 2025 convention will be the 5th that I have attended. My partner and our three children reside in Victoria.

I am compelled to offer my candidacy for HSA union president after the shocking discovery that HSA had signed a recent settlement agreement permitting private agency workers to do the same job for substantially more pay. This Trojan Horse settlement agreement has seen one agency physiotherapist at RJH, balloon to three within months. It is alarming to think that this trend may continue, and one must ask: *when will higher-paid agency staff replace your profession's positions?*

Perhaps the only positive aspect to this settlement agreement has been the revelation of what market wage and incentives are required to solve our short staffing and related workload issues. The numbers are staggering: agency wages up to 30 percent higher and housing bonuses up to 5000 dollars a month, resulting in total remuneration of up to 70 percent higher!

When you consider that HSA wages over the last 35 years have increased by approximately 144 percent¹, whereas housing costs have increased by more than 600 percent² and the cost of a loaf of bread by 233 percent³, you can see how we have failed to ensure our remuneration keeps up to the true cost of living in BC. It should come as no surprise then that our employer has to resort to higher paid agency staff to fill positions.

This union needs to return to its core mandate: it needs to ensure higher and equitable remuneration for all its members through a demonstrated willingness to take job action. The contracting out of public services would be unnecessary if member remuneration was equitable and market driven.

Fellow HSA members, I respectfully request your vote to pursue this agenda.

In Solidarity,
Matt Wenman, MPT, BSc.

1. Compare HSA April 1, 1989 - March 31 1992 Master Agreement with current.

2. Home in Vancouver in 1990 was \$230,000 and 1,600,000 in 2024. (REBGV)

3. Bread in Canada in 1990 was \$0.75 and \$2.50 in 2024. Refer to Stats Canada and Canada Bread Price Index.

Candidate for President: **Don Mabon**

To all HSA members.

My name is Don Mabon, from Victoria and have made it home most of my life. I am a Medical Laboratory Technologist at Island Health and HSA member for over 21 years and have been a General Steward at Royal Jubilee Hospital for the past 2.5 years.

We hear words like united, standing together, and solidarity from our union. However, I feel these foundations along with honest transparency and communication have eroded over recent years. Reclassification is a recent and perfect example. This was the catalyst in pursuing candidacy as President of our union. A message of victory continues to be delivered from the union, but I have seen how morally destructive it has been for so many. It is not modernized and does not recognize our professions and the specialized skills of each. This lit a fire inside of me and it became clear that the time to act and influence change was now.

I acknowledge that HSA has made some progress addressing the ongoing issues unique to each profession and work site. Issues that I am committed to hearing, learning from, and addressing. However, I strongly believe there needs to be a fresh perspective and new ideas in presenting these issues to Government and the public. We need stronger marketing in bringing them to the forefront of healthcare so that all have an appreciation of how dire the situation is. I will work with union staff to promote more powerful and emotional representation of our professions through new campaigns delivered on the most relevant platforms.

With a new Government now in place, it is important to build and foster healthy working relationships to facilitate the mandates they have, including incorporating an active role for Health Science Professionals in designing and implementing healthcare solutions. If elected, I promise to ensure that the Government hears our concerns and communicates these to HEABC and the Health Authorities.

It is also important to deliver an objective view when presenting information to membership. Any bias can be misleading to the uninformed member and could steer the vote in one direction or the other. I believe this happened with our last contract ratification. Unfortunately, some members I spoke with afterward thought a no vote meant a strike vote. The union is there for you, and I will promote this if elected.

Thank you.



Candidate for President: **Kane Tse**



It is my honour to seek your vote for the President of HSA. I am proud of the work that we have done together in the past 4 years, and there is always more to do. HSA must continue to focus on higher wages, better working conditions and workplaces that ensure equal opportunity and access for all its members.

From acute care, cancer centres or child development centres, at counselling centres, transition homes and long-term care; our role as healthcare and community social services professionals is a vital part of providing care to all British Columbians. We face mounting pressures; at work, we are forced to provide more services with fewer resources, and then after hours we must deal with insurmountable increases in the cost of living.

Over the past 4 years, I have worked to structure our union to tackle these challenges. As HSA grows, I've continued to learn and adopt your feedback to make HSA stronger. We've achieved some of the highest pay increases over the past 20 years; we've distributed funds to members for professional development, college and licensing fees; we've incorporated new voices onto the Board to develop cohesive leadership; we've increased opportunities to hear from you through member engagement teams, steward networking workshops, equity caucuses and other online forums and tools like social media, texting and online videos. We've implemented one-member, one-vote to give you a choice for your next president. We've sought your input to develop the next 5-year strategic plan; ensuring that your union incorporates members' voices in all of its planning and decision-making.

Increasing the voice and recognition of HSA at provincial and national levels is another way I've worked to address our issues. From Victoria to Ottawa, I have been working to increase HSA's profile with the government; because we know that the healthcare human resource crisis doesn't just impact BC, with other provinces competing for healthcare workers to fill their shortages. It's a nationwide issue and I aim to make HSA a leading voice nationally within our national union, NUPGE, to lobby for the federal dollars needed to tackle our issues.

Join me to build a stronger union and get the recognition we deserve. Re-elect Kane on April 10. Visit my campaign website for more information: <http://kanetse.ca>

Finances

Report of the Finance Committee

The Finance Committee is comprised of your peers. The work of the committee involves the following:

- Hearing appeals from members on their union leaves and expense claims, as well as responding to requests which do not fall within the financial policies;
- Approving any expenditure requests from the union that were not budgeted and exceed \$5,000, and making recommendations to the Board of Directors for any requests more than \$15,000;
- Responding to any resolutions passed at the 2024 HSA Convention applicable to financial policies, as they became effective at the close of convention on May 3, 2024;
- Reviewing the monthly financial statements and comparing the actual expenditures against the approved budget, to ensure our finances are on track and sustainable;
- Reviewing our investment portfolio, managed by Genus Capital Management Inc., who have been providing sustainable investment management strategies for Canadians since 1994. Our current portfolio holdings with Genus can be found at the end of my report;
- Reviewing the Board's and the President's annual expenditures to ensure adherence to our policies and our social and responsible spending guidelines, and that they are properly receipted;

Our auditors, MNP, met with the committee in February 2025, post audit. They provided an independent review of our accounting department, books, and records. I am pleased to say we received a clean audit rating, which in auditor's language means we are operating within all management approved reporting systems, working within internal controls and all money is accounted for.

GENERAL FUND

The general fund pays for the day-to-day operations of the union. This fund receives 95% of our dues revenue, and we maintain a healthy cash balance, topped up by investment income, to ensure that we have enough funds to cover three months of operating expenses. The general fund at the end of 2024 had a balance of \$4.4M. This includes internally restricted funds of \$450K that the Board of Directors set aside for specific items and capital expenditures that are scheduled for 2025. The general fund transferred \$1M to the bargaining fund, in preparation for bargaining, and \$48K to the defense fund for future roof and HVAC replacement.

BARGAINING FUND

The bargaining fund is used for negotiating collective agreements, organizing new members, retaining existing members, and other bargaining related activities. This fund is allocated 2.5% of dues and made additional investment income of \$116K. There were bargaining-related expenses totalling \$1.6M during 2024. Bargaining proposal conferences, ongoing legal fees and staff wages were the top expenses this past year.

As we look forward in 2025, we need to anticipate the costs of negotiations for each of our contracts. We seed the fund with enough reserves to cover those future anticipated expenses. Therefore, we have transferred \$1M from the general fund reserves to meet those needs.

DEFENSE FUND

The defense fund is allocated 2.5% of dues and earned additional investment income in 2024 of \$317K. This fund pays for items relating to our office headquarters at 180 East Columbia Street, such as property taxes, building insurance and interest on the mortgage. It also serves as our strike fund resource, to be available in the event of job action. The union's property is our collateral if we need to draw on our line of credit. The defense fund had a balance of \$8.0M at the close of 2024.

Our target strike fund goal is currently set at \$13M. This represents an essential service level of 50% of the members for two weeks at a minimum wage rate of \$18 per hours. During the year 2024, our Defense Fund gained \$700K in income, closing the gap between the fund balance and strike fund goal.

Our mortgage is held with Vancity Credit Union against our building, is worth \$6.3M and expires on May 5, 2025, with a fixed interest rate of 3.25%. Since inception in 2014, \$3.7M has been repaid.

INVESTMENTS

The markets rebounded in 2024. Our investment portfolio closed the year with a valuation of \$6.8M, a \$1.36 million increase over 2023. This included a recovery in market value of \$691K and interest and dividend earnings of \$689K. Our portfolio is spread over all funds with the bulk of the investments held with the defense fund.

A list of our portfolio holdings is included at the end of this report.

MEMBER SUPPORT FUNDS

A new mental wellness and professional development supports fund was received during 2024 for members covered by the HSPBA collective agreement. \$12.5M is available and invested, earning interest at 4.5%.

A new climate relief disaster fund, approved by the Board in the amount of \$100K.

PROFESSIONAL EDUCATION AND OTHER FUNDS

The HSPBA professional bodies fee fund paid out \$4.9 million in member reimbursements, and the HSPBA professional development fund paid out \$2.5 million in member reimbursements during year 2024.

Other funds in HSABC's current collective agreement include the HSPBA employer-paid steward time fund, the HSPBA

professional development (annual \$400K) fund, the enhanced disability management program (EDMP) fund and the NBA funds.

Listed in Note 4: Deferred contributions, in the audited financial statements, are the details of each Fund, where a summary of the annual activity is listed. We invest these funds in term deposits to maximize interest earnings where possible.

BUDGET 2025

Budgeting for any year is a no small feat. Done in collaboration with the management team, each item must align with our strategic plan, which requires tying together our mission for HSA as a collective voice, proudly advancing and defending members' rights and interests in our workplaces, communities, and society, with our vision for HSA advancing respectful workplaces, where our members provide health care and social services with professional pride. The budget must also incorporate the direction from members through resolutions passed at convention.

For 2025, the budget increased due to higher costs experienced in wages, accommodation, travel, gas, and food. However, costs are increasing due to higher member participation at convention, regional meetings, and other events. Budget 2025 includes increases for staffing in legal and labour relations servicing, and more opportunities for member education and engagement. A staff restructuring, implemented in 2023 to accommodate the growing needs of the membership, is complete and fully operational. This restructuring ensures optimization of education programs, organizing initiatives and advertising campaigns, and will also contribute to improved service to members.

This budget projects a \$36K surplus on \$31.8M receipts.

I would like to acknowledge and thank the Finance Committee members:

- Andrew Duarte, Region 1 Director
- Kathy Anderson, Region 9 Director
- Kelsey Oxley, Region 6 Member at Large

as well as the staff support:

- Cathy Davidson, Executive Director
- Stella Lee, Administrative Assistant
- Christine Singh, Manager of Accounting
- Kenji Amor, Payroll Administrator
- Eleanor Arcalas, Accounting Staff
- Otgon Dashdavaa, Accounting Staff
- Joy Opiana, Accounting Staff

Your dedication and support to the Finance Committee as well as the members has not gone unnoticed.

Respectfully submitted,
Brooke Carter
Secretary-Treasurer, Region 2 Director

Securities held with Genus Capital Management:

Bonds, T-Bills & Trusts:

- Canadian T-Bill
- Canadian Fossil Free Plus Corporate Bond
- Canadian Government Bonds
- Global Impact Bonds
- Granite Real Estate Investment Trust (Industrial Properties)

Canadian Equity Holdings:

- Angico-Eagle Mines Ltd.
- Stella-Jones Inc.
- Russel Metals Inc.
- Stantec Inc.
- Toromont Industries Ltd.
- Dollarama Inc.
- Gildan Activewear Inc.
- Metro Inc. Class A
- North West Co. Inc.
- Canadian Western Bank
- IGM Financial Inc.
- National Bank of Canada
- Celestica Inc.
- Constellation Software Inc.
- Descartes Systems Group Inc.
- Shopify Inc.
- Quebecor Inc.

U.S. Equity Holdings:

- Louisiana Pacific Corp
- Packaging Corp of America
- Steel Dynamics Inc.
- Acuity Brands Inc.
- Cummins Engine
- Emcor Group Inc.
- Ferguson PLC
- United Rentals Inc.
- Asics Corp
- Autoliv Inc.
- Booking Holdings Inc.
- Deckers Outdoor Corp.
- PulteGroup Inc.
- TJX Companies Inc.
- Colgate-Palmolive Co.
- Sprouts Farmers Market Inc.
- Abbvie Inc.
- Intuitive Surgical Inc.
- Vertex Pharmaceuticals Inc.
- Allstate Corp
- Ameriprise Financial Inc.
- Goldman Sachs Group Inc.
- Moody's Corp
- Travelers Group
- Unum Group
- Visa Inc. – CL A
- Arista Networks Inc.
- Broadcom Inc.
- International Business Machines Corp.
- Motorola Solutions Inc.
- NVIDIA Corp.
- NetApp Inc.
- Oracle Corp.
- ServiceNow Inc.
- Telenor ASA

Your HSA Union Dollar

Curious about how your dues are used to support you and other HSA members? Here's how one dollar in union dues is used:

40.1% Servicing (Legal, Classifications, Disability Management, Labour Relations)

Member support on contract rights, grievances, legal issues, appeals, classifications, OHS and disability management

16.7% Communications, Education and Mobilizing

Communications, campaigns, government relations, media relations, organizing, research and member education

8.6% Information Services

Information security and technology backbone for member data, steward portal, web site, email systems and technical support

8.5% Governance

Member committees, Board of Director meetings, regional meetings, annual convention and other conferences

7.8% Executive

Professional leadership on negotiations, labour relations, legal, communications, financial management, disability management and equity, diversity and inclusion

4.1% Affiliations

Strategic partnerships with labour movement allies in BC and across Canada

3.9% Operations and Facilities

Union office maintenance and building reserves

2.8% Defence Fund

Strike fund (secured against union realty holdings) and maintenance costs including mortgage, property taxes and insurance

2.6% Bargaining Fund

Bargaining proposal conferences, collective bargaining, and costs required to implement provisions of collective agreements

2.2% Finance

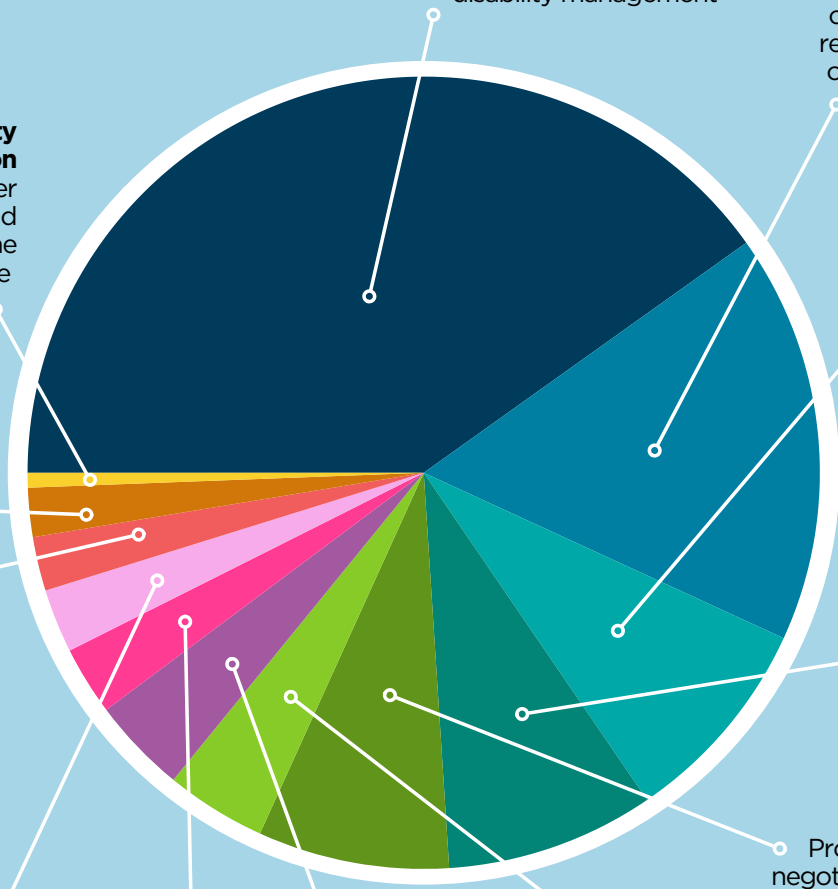
Accounting and auditing for union operations; funding for member bursaries and other education funding, and financial support for chapter, steward and member activities

2.0% Human Resources

Union staffing and human resources management

0.6% Equity, Diversity and Inclusion

Ongoing work to foster greater inclusion and belonging in the workplace



Your Union Dues

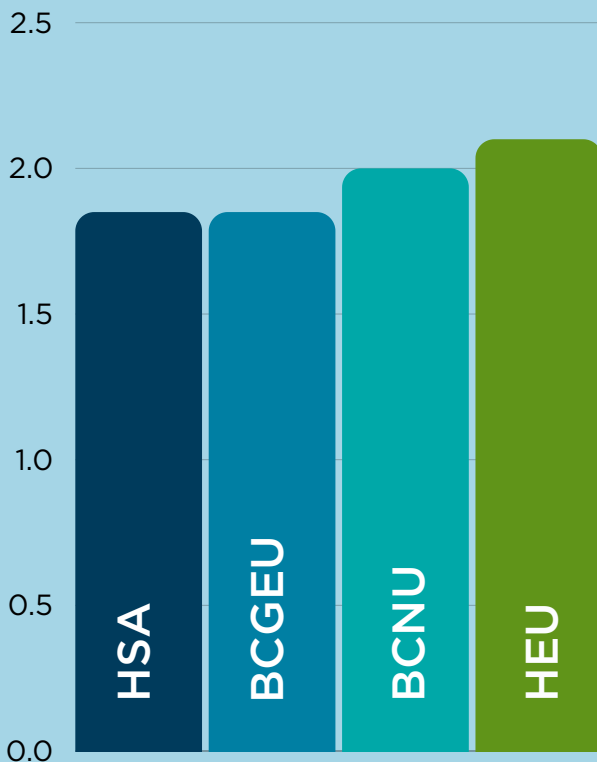
HSA members – like the members of every union – set their own dues, which can be changed at convention. Dues are your union’s sole source of income; without them, unions could not function.

Union dues come back to union members in a range of services and benefits that include negotiating and defending your collective agreement, advocacy, steward training, access to specialized staff, opportunities for training and education, and much more.

And as we enter tax season, remember: union dues are tax deductible.

Dues Rates in Health Care and Community Social Services

Union dues in our sector range from 1.85% to 2.1% of gross pay:



Which Income Do You Pay Dues On?

HSA members, like the majority of union members in BC, pay union dues on their “gross pay”, which means they pay union dues on all their earnings.

One union, the BCNU, has members pay dues on gross straight time pay.

You’d Like to Learn More?

HSA is a democratic organization run by members like you.

We elect our stewards, our Regional Directors and President, and we debate and vote on policy at our annual convention. Help us make this a better union – get involved today!



HEALTH SCIENCES ASSOCIATION
The union delivering modern health care

Financial Statements

Health Sciences Association of British Columbia
Summarized Financial Statements
For the year ended December 31, 2024

Health Sciences Association of British Columbia
Contents
For the Year Ended December 31, 2024

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Report of the Independent Auditor on the Summary Financial Statements



To the Members of Health Sciences Association of British Columbia:

Opinion

The summary financial statements, which comprise the summary statement of financial position as at December 31, 2024, and the summary statements of operations and changes in fund balances and cash flows for the year then ended, are derived from the audited financial statements of Health Sciences Association of British Columbia (the "Association") for the year ended December 31, 2024.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, in accordance with the criteria applied by management in the preparation of the summary financial statements.

Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations applied in the preparation of the audited financial statements of the Association. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements and the auditor's report thereon.

The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated March 5, 2025.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements in accordance with the criteria applied by management in the preparation of the summary financial statements.

Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standards (CAS) 810, *Engagements to Report on Summary Financial Statements*.

Port Moody, British Columbia

March 5, 2025

Chartered Professional Accountants

MNP LLP

601 - 205 Newport Dr, Port Moody BC, V3H 5C9

T: 604.949.2088 F: 604.949.0509



MNP.ca

Health Sciences Association of British Columbia
Summarized Statement of Financial Position
As at December 31, 2024

	#	General Fund	Bargaining Fund	Defense Fund	2024 Total	2023 Total
Assets						
Current						
Cash and term deposits	1	\$ 3,427,214	\$ 18,377	\$ 51,814	\$ 3,497,405	\$ 2,564,567
Marketable securities (Note 3)	2	1,291,244	1,495,931	4,026,373	6,813,548	5,449,174
Dues receivable	3	2,162,825	56,917	56,917	2,276,659	2,245,193
Accounts receivable	4	173,904	581	1,563	176,048	36,211
Prepaid expenses and deposits	5	304,880	-	153,530	458,410	487,824
	6	7,360,066	1,571,806	4,290,197	13,222,069	10,782,969
Member Support Funds (Note 4)	7	22,073,626	-	-	22,073,626	14,301,929
Capital assets (Note 5)	8	440,713	-	16,675,861	17,116,574	17,045,921
Total Assets	9	\$ 29,874,405	\$ 1,571,806	\$ 20,966,058	\$ 52,412,269	\$ 42,130,820
Liabilities and Fund Balances						
Current						
Accounts payable and accruals (Note 6)	10	\$ 1,635,812	\$ -	\$ -	\$ 1,635,812	\$ 1,572,673
Salaries payable (Note 7)	11	1,945,535	-	-	1,945,535	1,963,948
Current portion of long-term debt (Note 9)	12	-	-	419,102	419,102	413,378
	13	3,581,348	-	419,102	4,000,450	3,949,999
Interfund balances	14	(6,542,490)	(74,807)	6,617,297	-	-
Employee future benefits (Note 8)	15	3,574,743	-	-	3,574,743	2,998,521
Deferred contributions (Note 4)	16	24,855,438	-	-	24,855,438	15,237,009
Long-term debt (Note 9)	17	-	-	5,904,313	5,904,313	6,326,621
	18	21,887,690	(74,807)	12,521,610	34,334,493	24,562,151
Fund Balances (Note 11)						
Invested in capital assets	19	440,713	-	3,735,149	4,175,862	4,352,289
Internally restricted	20	454,590	1,646,613	4,290,197	6,391,400	5,643,441
Unrestricted	21	3,510,065	-	-	-	3,622,940
	22	4,405,367	1,646,613	8,025,346	14,077,326	13,618,670
Total Liabilities and Fund Balances	23	\$ 29,874,405	\$ 1,571,806	\$ 20,966,058	\$ 52,412,269	\$ 42,130,820

See Accompanying Independent Auditor's Report and Notes to the Financial Statements

Approved on Behalf of the Board:



Kane Tse, President



Brooke Carter, Secretary-Treasurer

Health Sciences Association of British Columbia
Summarized Statement of Operations and Changes in Fund Balances
For the Year Ended December 31, 2024

		2024	2024	2024		Unaudited	Unaudited	
	#	General Fund	Bargaining Fund	Defense Fund	2024 Actual	2024 Budget	2025 Budget	2023 Actual
Receipts								
Dues	1	\$ 28,916,637	\$ 760,965	\$ 760,965	\$ 30,438,566	\$ 29,030,000	\$ 31,507,368	\$ 27,312,072
Initiation fees	2	41,390	-	-	41,390	35,500	38,000	37,935
Investment	3	141,153	115,719	316,617	573,489	186,225	195,150	250,896
Deferred contributions recognized	4	9,169,352	-	-	9,169,352	75,000	75,000	5,253,389
	5	38,268,532	876,683	1,077,581	40,222,797	29,326,725	31,815,518	32,854,292
Expenditures								
General Fund								
Executive	6	2,229,502	-	-	2,229,502	1,987,515	2,479,733	2,032,873
Union governance	7	3,018,772	-	-	3,018,772	2,265,706	2,700,645	2,737,369
Affiliations	8	10,411,713	-	-	10,411,713	1,166,670	1,305,895	6,504,379
Legal services and labour relations	9	12,380,752	-	-	12,380,752	12,099,712	12,750,785	11,392,345
Strategic communications and member development	10	4,608,200	-	-	4,608,200	4,780,940	5,319,935	4,828,237
Office management and information services	11	3,644,983	-	-	3,644,983	3,587,714	3,840,608	3,529,616
Accounting and payroll	12	686,800	-	-	686,800	685,708	714,444	720,767
Equity, diversity and inclusion	13	225,384	-	-	225,384	355,824	180,250	319,622
Human resources	14	607,567	-	-	607,567	577,086	649,974	524,906
Bargaining Fund	15	-	1,629,241	-	1,629,241	805,925	826,584	1,135,373
Defense Fund	16	-	-	494,510	494,510	805,925	877,684	551,693
	17	37,813,673	1,629,241	494,510	39,937,424	29,118,725	31,646,537	34,277,181
Excess (deficiency) of receipts over expenditures before other items	18	454,858	(752,557)	583,071	285,372	208,000	168,981	(1,422,889)
Other items								
Amortization expense	19	(189,101)	-	(328,639)	(517,740)	(148,766)	(132,986)	(498,225)
Unrealized gain on marketable securities	20	130,957	151,716	408,351	691,024	-	-	319,583
Excess (deficiency) of receipts over expenditures for the year	21	396,714	(600,841)	662,783	458,656	59,234	35,995	(1,601,531)
Fund balance, beginning of year	22	5,056,654	1,247,454	7,314,563	13,618,670	-	-	15,220,201
Internal fund transfers (Note 10)	23	(1,048,000)	1,000,000	48,000	-	-	-	-
Fund balance, end of year (Note 11)	24	\$ 4,405,367	\$ 1,646,613	\$ 8,025,346	\$ 14,077,326	\$ -	\$ -	\$ 13,618,670

See Accompanying Independent Auditor's Report and Notes to the Financial Statements

Health Sciences Association of British Columbia
Statement of Cash Flows
For the Year Ended December 31, 2024

	2024	2023
Operating activities		
Excess (deficiency) of receipts over expenditures for the year	\$ 458,656	\$ (1,601,531)
Items not involving cash:		
Gain on sale of capital assets	(140)	(1,261)
Gain on sale of marketable securities (<i>Note 3</i>)	(399,136)	(63,195)
Amortization expense	517,740	498,225
Unrealized gain on marketable securities	(691,024)	(319,583)
Operating cash flow	(113,904)	(1,487,345)
Changes in non-cash working capital		
Dues receivable	(31,465)	170,967
Accounts receivable	(139,701)	508,871
Accrued interest receivable	869	(1,040)
Prepaid expenses and deposits	28,409	(191,969)
Accounts payable and accruals	388,162	(95,583)
Salaries payable	(18,413)	328,635
Cash provided by (used for) operating activities	113,958	(767,464)
Investing activities		
Member Support Funds	(7,771,698)	(11,366,469)
Net proceeds (purchase) of marketable securities	(274,213)	28,912
Purchase of capital assets, net of proceeds on disposal	(588,253)	(215,597)
Cash used for investing activities	(8,634,163)	(11,553,154)
Financing activities		
Increase in severance payable	251,198	570,195
Repayment of long-term debt principal	(416,561)	(395,113)
Increase in deferred contributions	9,618,429	11,470,029
Cash provided by financing activities	9,453,065	11,645,110
Inflow (outflow) of cash for the year	932,860	(675,508)
Cash and term deposits, beginning of year	2,564,545	3,240,076
Cash and term deposits, end of year	3,497,405	2,564,567
Represented by		
Cash	2,995,544	1,030,676
Term deposits	501,860	1,533,892
	3,497,405	2,564,567

Health Sciences Association of British Columbia

Notes to the Summarized Financial Statements

For the year ended December 31, 2024

1. Association

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

2. Significant accounting policies

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

Fund accounting

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

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

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

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

Cash and term deposits

Cash and term deposits includes balances with banks and various term deposits totalling \$501,860 (2023 - \$1,533,892) bearing interest at 3.25% (2023 - between 2.55% and 4.50%) maturing in November 2026.

Capital assets

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

	Rate
Building	50 years
Computer equipment	4 years
Furniture and equipment	5 years
Telephone equipment	5 years

Revenue recognition

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

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

Externally restricted contributions received that do not have a corresponding fund are recorded as revenue in the general fund in the year in which the related expenses are incurred and recognized.

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

Health Sciences Association of British Columbia

Notes to the Summarized Financial Statements

For the year ended December 31, 2024

2. Significant accounting policies (Continued from previous page)

Financial instruments

The Association recognizes financial instruments when the Association becomes party to the contractual provisions of the financial instrument.

Arm's length financial instruments

Financial instruments originated in an arm's length transaction ("arm's length financial instruments") are initially recorded at their fair value.

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

Transaction costs and financing fees directly attributable to the origination, acquisition, issuance or assumption of financial instruments subsequently measured at fair value are immediately recognized in operations. Conversely, transaction costs and financing fees are added to the carrying amount for those financial instruments subsequently measured at cost or amortized cost.

Related party financial instruments

The Association initially measures the following financial instruments originated in a related party transaction ("related party financial instruments") at fair value:

- Investments in equity instruments quoted in an active market
- Debt instruments quoted in an active market
- Debt instruments when the inputs significant to the determination of its fair value are observable (directly or indirectly)
- Derivative contracts.

All other related party financial instruments are measured at cost on initial recognition. When the financial instrument has repayment terms, cost is determined using the undiscounted cash flows, excluding interest, dividend, variable and contingent payments, less any impairment losses previously recognized by the transferor. When the financial instrument does not have repayment terms, but the consideration transferred has repayment terms, cost is determined based on the repayment terms of the consideration transferred. When the financial instrument and the consideration transferred both do not have repayment terms, the cost is equal to the carrying or exchange amount of the consideration transferred or received.

At initial recognition, the Association may elect to subsequently measure related party debt instruments that are quoted in active market, or that have observable inputs significant to the determination of fair value, at fair value.

The Association has not made such an election during the year, thus all such related party debt instruments are subsequently measured at amortized cost.

Transaction costs and financing fees directly attributable to the origination, acquisition, issuance or assumption of related party financial instruments are immediately recognized in operations.

Employee future benefits

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

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

Health Sciences Association of British Columbia

Notes to the Summarized Financial Statements

For the year ended December 31, 2024

2. Significant accounting policies *(Continued from previous page)*

Measurement uncertainty

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

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

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

Foreign currency translation

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

3. Marketable securities

	2024	2024	2023	2023
	Market	Cost	Market	Cost
	Value		Value	Cost
Canadian equities	1,082,701	711,948	963,341	760,583
Government and corporate bonds	2,548,766	2,488,637	2,163,146	2,162,911
US equities, stated in Canadian dollars	2,207,071	1,552,903	1,726,515	1,426,897
Other investments	975,010	833,682	596,172	565,928
	6,813,548	5,587,170	5,449,174	4,916,319

As at December 31, 2024, the total realized gain for the year on sale of marketable securities included with investment receipts on the statement of operations is \$399,136 (2023 - \$63,195).

Health Sciences Association of British Columbia

Notes to the Summarized Financial Statements

For the year ended December 31, 2024

4. Deferred Contributions

	2024	2023
Climate Relief Disaster Fund		
Transfer from Mental Wellness and Professional Development Supports Fund	100,000	-
Interest received	2,743	-
	102,743	-
Mental Wellness and Professional Development Supports Fund		
Funds received by HSA	16,312,800	-
Interest received	335,031	-
Expenditures	(3,315)	-
Transfer to Climate Relief Disaster Fund	(100,000)	-
Transfer to HSPBA Professional Development (\$3 million Ministry of Health) Fund	(4,000,000)	-
	12,544,516	-
HSPBA Professional Bodies Fee Fund		
Opening		
Funds received by HSA	8,852,518	-
Interest received	-	11,887,137
Member reimbursements	232,614	175,062
HSA admin fees	(4,929,323)	(3,022,324)
	(455,228)	(187,357)
	3,700,581	8,852,518
HSPBA Professional Development (\$3 million Ministry of Health) Fund		
Opening	3,630,340	2,909,131
Funds received by HSA	-	2,446,920
Transfer from Metal Wellness and Professional Development Support Funds	4,000,000	-
Interest received	190,386	139,537
Member reimbursements	(2,471,690)	(1,882,836)
HSA admin fees	(197,489)	(107,384)
Transfer from \$400k fund	-	124,972
	5,151,547	3,630,340
HSPBA Employer Paid Steward Time		
Opening	1,548,637	-
Funds received by HSA	-	1,500,000
Interest received	45,307	48,637
Payment to constituent unions	(299,159)	-
	1,294,785	1,548,637
HSPBA Professional Development (annual \$400,000 per term of HSPBA CA) Fund		
Opening	666,249	465,053
Funds received by HSA	326,257	326,257
Interest received	9,538	13,736
Member reimbursements	(770,000)	(13,825)
Transfer to \$3 million fund	-	(124,972)
	232,044	666,249

Note 4 continued on next page

Health Sciences Association of British Columbia

Notes to the Summarized Financial Statements

For the year ended December 31, 2024

4. Deferred Contributions *(Continued from previous page)*

EDMP Fund			
Opening		287,901	234,869
Funds received by HSA		153,431	86,173
Interest received		8,226	6,523
Expenditures		(40,349)	(39,664)
		409,209	287,901
NBA Fund			
Opening		172,208	78,772
Funds received by HSA		1,077,150	94,264
Interest received		23,016	3,800
Expenditures		(2,799)	(4,628)
		1,269,575	172,208
Other deferred contributions		150,438	79,156
Total deferred contributions		24,855,438	15,237,009

The remaining deferred contributions relating to HSPBA Professional Development Funds on the Statement of Financial Position are held in term deposits and interest bearing accounts. Total interest earned on these funds for the year ended December 31, 2024 was \$846,861 (2023 - \$387,295).

5. Capital assets

	<i>Cost</i>	<i>Accumulated Amortization</i>	<i>2024 Net Book Value</i>	<i>2023 Net Book Value</i>
General fund				
Computer equipment	1,692,485	1,295,450	397,035	370,295
Furniture and equipment	1,070,797	1,027,119	43,678	47,825
Telephone equipment	173,701	173,701	-	-
	2,936,983	2,496,270	440,713	418,120
Defense fund				
Office Premise - 180 East Columbia Street				
Land	2,300,000	-	2,300,000	2,300,000
Building	17,630,887	3,255,026	14,375,861	14,327,801
	19,930,887	3,255,026	16,675,861	16,627,801
	22,867,870	5,751,296	17,116,574	17,045,921

6. Accounts payable and accruals

Accounts payable and accruals includes \$108,890 (2023 - \$265,238) of remittances payable to various government agencies.

Health Sciences Association of British Columbia Notes to the Summarized Financial Statements

For the year ended December 31, 2024

7. Salaries payable

	2024	2023
Vacation	720,902	741,210
Accrued wages	236,406	318,788
Overtime and lieu time	988,227	903,950
	1,945,535	1,963,948

8. Employee Future Benefits

Severance	2,869,231	2,284,826
Sick pay payable upon severance of employment	705,512	713,696
	3,574,743	2,998,522

9. Long-term debt

	2024	2023
Vancouver City Savings Credit Union Mortgage payable:		
Blended weekly payments of \$11,892 including principal and interest at 3.25% per annum (2022 - 3.25%) with a loan maturity date of May 5, 2025.	6,323,415	6,739,999
Less: current portion	(419,102)	(413,378)
	5,904,313	6,326,621

The Association's long-term debt is secured by a general security agreement providing a first charge over all assets of the Association and 100 East Columbia Street Properties Ltd. and an unlimited guarantee and postponement of claim by 100 East Columbia Street Properties Ltd. with respect to the debts and liabilities of the Association.

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

Years	Principal
2025	419,102
2026	432,942
2027	447,239
2028	462,064
2029 and thereafter	4,562,068
	6,323,415

10. Internal fund transfers

During the year, the Board of Directors approved interfund transfers totaling \$1,048,000 (2023 - \$298,000) from the General Fund with \$1,000,000 (2023 - \$250,000) transferred to the Bargaining Fund and \$48,000 (2023 - \$48,000) transferred to the Defense Fund.

Health Sciences Association of British Columbia

Notes to the Summarized Financial Statements

For the year ended December 31, 2024

11. Fund balances

	Invested in capital assets	Internally restricted	Unrestricted	Fund Balances Total
Balance, January 1, 2023	4,874,863	5,680,465	4,664,872	15,220,200
Excess (deficiency) of receipts over expenditures	-	(256,015)	(1,345,515)	(1,601,530)
Net additions of capital assets	225,835	-	(225,835)	-
Internally restricted general funds	(241,208)	(107,050)	348,258	-
Capital asset amortization	(507,201)	326,041	181,160	-
Balance, December 31, 2023	4,352,289	5,643,441	3,622,940	13,618,670
Excess (deficiency) of receipts over expenditures	-	61,942	396,714	458,656
Net additions of capital assets	589,141	-	(589,141)	-
Internally restricted general funds	(247,080)	357,378	(110,298)	-
Capital asset amortization	(518,488)	328,639	189,849	-
Balance, December 31, 2024	4,175,862	6,391,400	3,510,064	14,077,326

12. Credit facilities

At December 31, 2024, the Association has a Vancouver City Savings Credit Union operating line of credit available to a maximum of \$2,500,000 (2023 - \$2,500,000) bearing interest at the financial institution's prime lending rate plus 0.25%. As at December 31, 2024, the facility was not drawn upon (2023 - \$Nil). The line of credit is secured by the Association's land and building with a net book value of \$16,675,861 (2023 - \$16,627,801).

13. Related party transactions

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

14. Financial instruments

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

Interest rate risk

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

Foreign currency risk

Foreign currency risk is the risk that the value of investments denominated in currencies, other than the functional currency of the Association, will fluctuate due to changes in foreign exchange rates. As at December 31, 2024, the Association held equity instruments denominated in U.S. dollars with the Canadian dollar equivalent fair value of \$2,207,071 (2023 - \$1,690,499)

Liquidity risk

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

Notes to the Summarized Financial Statements

For the year ended December 31, 2024

14. Financial instruments *(Continued from previous page)*

Credit Risk

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

Other price risk

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

15. Comparative figures

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

Committee Reports

Resolutions Committee

Under the union's constitution, members may submit resolutions through their chapters, where members vote on whether to forward them for consideration by convention delegates. Resolutions may also be submitted by the Board of Directors, which receives recommended resolutions from the union's committees.

The purpose of resolutions is for members to debate and guide union policy, and to give direction for the union to take policy positions or action on a variety of issues. Issues directly related to collective bargaining are not dealt with at the annual convention, but at bargaining proposal conferences held prior to the expiry of HSA members' collective agreements.

The Resolutions Committee is comprised of the union Vice-President, who acts as Chair, one Member-at Large elected from each region, one board member who participates with voice but no vote and the President as an ex officio member. The purpose of the committee is to review submitted resolutions to ensure they meet the guidelines as set out by policy, and to discuss each of the resolutions in order to make a recommendation to convention delegates on whether to vote in favour or opposed to each resolution. The committee is representative of the membership, bringing perspective from members from all across the province. The committee

is tasked with considering opportunities to group together resolutions seeking the same outcome or action, and making a recommendation to convention delegates on whether to vote in favour or opposed to each resolution.

This work is achieved through discussion and debate at the committee level. In some cases, committee members reach out to lead stewards to get clarification or propose changes to the submitted resolutions to ensure the intent of the resolutions is captured.

Another large portion of the work done by committee members is to prepare a rationale on each resolution to present to convention delegates by way of explaining the issues committee members considered in coming to a decision on whether to vote in favour or opposed to each resolution.

Each year, the committee receives more and more resolutions. This year, the committee received 296 resolutions! They were submitted online using a program developed by the union's information systems staff. Of the 296 resolutions submitted, 10 were rejected as they were related to bargaining, and four were withdrawn by the submitting chapters.

Resolutions submitted by more than one chapter are presented as a single resolution, but with each submitting chapter attributed, and there was an instance of a resolution submitted in duplicate, leaving a total of 223 resolutions to be debated by convention delegates.

During convention, a straight majority vote of delegates is required to pass policy resolutions. Resolutions to change the union's constitution require a two thirds majority vote to pass.

Resolutions approved by convention take effect upon adjournment of the convention unless otherwise specified. If convention runs out of time to consider each resolution, the remaining resolutions are forwarded to the next meeting of the union's Board of Directors for decision.

On behalf of all HSA members, I want to thank each one of the committee members for their thoughtful, meaningful – and sometimes difficult – debate in our three long days of work preparing the resolutions for convention:

- Sarah Kooner, Region 7 Director
- Morag Kydd, Region 1 Member-at-Large
- Marc Dickson, Region 2 Member-at-Large
- Livia Davies, Region 3 Member-at-Large
- Tanya Dunne, Region 4 Member-at-Large
- Lisa Daechsel, Region 5 Member-at-Large
- Melissa Bourcier, Region 6 Member-at-Large
- Penny Regier, Region 7 Member-at-Large
- Tiger Ye, Region 8 Member-at-Large
- Mike Tyson, Region 9 Member-at-Large
- Michelle Collinson, Region 10 Member-at-Large

as well the committee's staff support:

- Miriam Sobrino, Executive Director, Governance and Member Development
- Rosemary DeYagher, Paralegal
- Jennifer Baetz, Records Archivist

The hard work they all put in helps focus and prioritize the work of delegates at convention, April 9-11 in Vancouver. We all look forward to the debate, discussion, and direction by delegates.

Respectfully submitted on behalf of the committee,

Jing-Yi Ng, Chair, Vice-President, Region 3 Director

Committee on Equity and Social Action

CESA History

At the 1989 HSA convention, delegates passed a resolution to establish the Committee for Equity (then Equality) and Social Action (CESA), along with the CESA Fund. The fund was established in the spirit of solidarity to support grassroots organizations not affiliated with HSA who are focused on human rights, climate action, social and economic justice, workers rights, and universal health care. The CESA fund continues to be an important part of our collective commitment to supporting labour and social justice movements both locally and internationally.

CESA Fund Selection Process

The CESA fund is based on 0.6% of total HSA operating budget, as per Resolution #27 passed by the HSA membership at the 2012 HSA Convention. This year, the committee received 38 requests for funding totalling \$422,996. HSA had \$176,000 available for disbursement. As we've seen in previous years, the requests far exceeded the budget, so tough choices needed to be made.

Every year, CESA representatives hear from grassroots organizations working to deliver vital services, education, advocacy, and support on behalf of vulnerable people in BC. In the fall, CESA members gathered to

hear 10-minute virtual presentations from the groups applying for support through HSA's Equity and Social Action Fund. Over the course of three days in November, CESA members heard from 38 applicants, along with reviewing their written applications as part of the process of selecting recipients for this year's CESA fund.

The criteria used to determine successful recipients are as follows:

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

We are pleased to note that many organizations on this list met not only the criteria outlined in the CESA fund policy, but also aligned with resolutions passed at the 2023 and 2024 HSA conventions, as well as core justice, equity, diversity, and inclusion work coming out of HSA equity caucuses and committees.

Committee members worked diligently to assess the work of each group and make funding choices in support of the CESA

fund policy. The committee creatively stretched out every dollar to ensure that as many community organizations as possible could be supported. The committee stands in solidarity knowing that the money will make a significant positive difference to the most at-risk people in our society.

Following the union's regular practice, the committee presented their recommendations on these requests to the Board, and the Board granted approval.

CESA encourages members to learn more about organizations that have received CESA funds by visiting the CESA webpage on the HSA website. CESA also encourages members to send in recommendations to CESA for organizations to be added to the list to receive CESA fund applications. Please email info@hsabc.org with your recommendations.

Social Justice Day

February 20 is Social Justice Day – a day to recognize and promote the importance of social justice all year around. Each year, CESA makes a recommendation for a Social Justice Day workshop topic. This year, CESA's recommendation was for Psychological Health and Safety in the Workplace: Mental Health and the CSA Standard. Participants, including CESA representatives, learned about strategies to support workers with mental health issues both individually and collectively. Participants also learned how to develop workplace psychological health and safety management systems to identify psychological hazards, create reporting and investigation processes, and implement plans to control risk.

Bursary Selection Process – CoDevelopment Canada Multi-Union Delegation to Latin America

At the 2024 HSA Convention, delegates unanimously passed a resolution to provide bursaries to two HSA members to attend the 2024 CoDevelopment Canada multi-union delegation to Latin America. After the resolution passed, CESA developed an application process that was open to all HSA members. CESA also developed a selection process for the two bursaries. The committee reviewed 23 applications and undertook a rigorous selection process.

CESA is proud to have completed this work on behalf of HSA to support two HSA members to participate in this important international solidarity delegation. This delegation was lead by Codevelopment Canada and was comprised of HSA members and members of other unions. The delegation was focused on building international solidarity with grassroots labour organizations in El Salvador and Honduras, including The Salvadoran Association for Inter-community Health and Social Services (APSIES), The Honduran Women's Collective (CODEMUH), and The Network of Central American Women in Solidarity with Maquila Workers (The Network).

Respectfully submitted on behalf of the committee,

Nicole McIntosh, Chair, Region 6 Director
Carla Gibbons, Region 5 Director
Louise Vaile, Region 9 Member at Large
Teresa Forbes, Region 2 Member at Large
Tanisha Bors, Region 4 Member at Large

Projects Funded by CESA in 2024:

AccessBC	\$2,500
Afiya Care Collective	\$5,000
BC Poverty Reduction Coalition	\$5,000
(BC) Society of Transition Houses (THS)	\$6,000
Camp Jubilee	\$4,800
Centre for Family Equity	\$8,500
The Chuan Community Arts Society	\$3,400
Coalition of Child Care Advocates of BC	\$2,000
CoDevelopment Canada	\$23,000
Compost Education Centre	\$2,000
Downtown Eastside SRO Collaborative	\$7,000
Elizabeth Bagshaw Clinic	\$4,000
First Call Child and Youth Advocacy Society	\$5,000
Greater Van GoGos	\$500
Haqq Education and Referral Services Foundation (HERS)	\$1,800
Junior Black Achievement Awards (JrBAA)	\$6,500
Living in Community	\$5,000
Mayworks Festival for Working People and the Arts	\$1,000
Migrant Workers Centre BC Society	\$10,000
Penticton and Area Access Society	\$8,500
Richmond Women's Resource Centre	\$4,000
Rise Women's Legal Centre	\$4,000
Salt Spring Safely Harm Reduction Society	\$6,000
Sher Vancouver	\$2,500
Story Money Impact	\$3,500
Together Against Poverty Society (TAPS)	\$2,500
Union Cooperative Initiative (UCI)	\$10,000
The Union Protein Project	\$5,000
VALU Cooperative Community Projects	\$1,000
VanCity Community Foundation, Living Wage for Families BC	\$6,000
Wagon Wheel Housing Society	\$7,500
West Kootenay Women's Association	\$3,500
Worker Solidarity Network Society	\$5,000
YWCA Metro Vancouver	\$4,000
Total 2024 Donations	\$176,000

Report of the Education Committee

The Education Committee oversees HSA's education program and the distribution of scholarships and bursaries. HSA's education reflects the goals and objectives of our union, including democratic participation, awareness of public and social justice issues, recognition of collective strength, and enhancement of members' knowledge and skills. The committee identifies educational needs and makes recommendations to the Board of Directors regarding policies and programs to meet those needs. This year's committee did an extensive review of the education policies and procedures, as well as the terms of reference.

Year in Review

The committee met four times this past year to review and revise the education policies and procedures, prioritize workshops, select members to attend the Canadian Labour Congress Winter School, and select the recipients of the HSA scholarships and bursaries. Our thanks to past committee member Alexandra Thomson (Region 4 Director) who unfortunately had to step down during the year and was replaced by Carla Gibbons (Region 5 Director).

Workshops

2024 was another extremely busy year for the Education Department, and there has been a significant increase in interest and engagement in all HSA workshops. Thirty-nine workshops were planned and/or supported by the educators. Twenty-seven were held virtually, and twelve were in-person. Feedback has been overwhelmingly positive. Members have continued to request both in-person and virtual workshops and the education department continues to plan a mix of both types of workshops to ensure accessibility.

Notably, staff provided the following training:

- 1147 training seats (all workshops)
- 412 first-time workshop participants
- 98 occupational health and safety stewards took occupational health and safety training
- 249 general and lead stewards took basic and advanced steward training

Each workshop participant is given the opportunity to provide feedback and recommendations through a post-workshop evaluation form. The Education Committee and staff review these submissions and consider if any changes are needed for the next workshop.

Canadian Labour Congress (CLC) Winter School

Five members were selected to attend the 2025 CLC Winter School. Applications open each fall and are open to all members.

Summer Institute for Union Women

This event did not proceed in 2024 but is planned to be hosted at Simon Fraser University in 2025.

Pension Seminars

241 members attended virtual pension seminars delivered by Municipal Pension Plan (MPP) staff. The MPP offers seminars for early and mid-career members, as well as those closer to retirement. If your chapter is interested in requesting a virtual pension seminar, please get in touch with the Education Department at education@hsabc.org.

Scholarships and Bursaries

An important task of the Education Committee is to award scholarships and bursaries for post-secondary education to our members and members' children. The committee met in early February for three days to recommend the recipients of this year's scholarships and bursaries. We received approximately 218 applications. HSA scholarships and bursaries include:

- Ten \$2,000 scholarships
- Twenty \$2,000 full-time bursaries
- Four \$1,000 part-time bursaries
- Two \$2,000 Indigenous student bursaries

The committee's recipient recommendations have been sent for approval by the Board of Directors at their next meeting. The recipients will be notified in May 2025.

Madden Memorial Fund

This fund was established in 1984 to promote HSA member participation in external labour education programs. The fund covers registration, transportation, accommodation, meals and dependent care, along with one day's pay to a maximum of \$1,000 per member per year. This fund was fully used by members in 2024.

I want to take this opportunity to acknowledge the dedication and hard work of the HSA educators Jennifer Brandt, Ingrid Ericson, and Sarah Chapple, and Education Department administrative support Karin Hodgson and Kit Lui.

Respectfully submitted,

Caroline Widgiz, Chair, Region 8 Director
Carla Gibbons, Region 5 Director
Dawn Marie Goodmurphy, Region 1 Member at Large
Lara Seguin, Region 3 Member at Large
Marina Moskaleva, Region 6 Member at Large

Report of the Occupational Health and Safety Committee

Over the past year, the Occupational Health and Safety (OHS) Committee has seen continued growth and progress in health care and community social services. We have noticed increasing member participation and engagement across site, chapter, and regional committees as well as in training and education initiatives. Our partnerships have also advanced key safety projects, and HSA's advocacy has led to gains in psychological health and safety, along with improvements on safety surrounding illicit drug exposure in our workplaces.

Engagement and Participation

A key goal of the OHS Committee was to continue to grow member participation and engagement in occupational health and safety. We saw a sustained increase in HSA members stepping up to serve on Joint Occupational Health and Safety (JOHS) Committees and a rise in interest in becoming OHS stewards. This growing participation has driven demand for union-led OHS training, prompting the committee to approve an increase in the number and frequency of both basic and advanced OHS steward training.

Additionally, there has also been an increase in the demand for informal education through both chapter and site-based initiatives, including OHS-focused

chapter meetings, guest speakers, and support from HSA's OHS and organizing teams. A large number of the support requests were for locally organized North American Occupational Safety and Health week activities and events throughout the province.

Partner Projects

HSA is an active partner in two key safety organizations, SWITCH BC (Safety, Wellbeing, Innovation, Training and Collaboration in Healthcare BC) and the Community Social Services Health and Safety Association (CSSHSA). HSA representatives serve on both their boards, technical advisory committees, and other committees. Representatives from both organizations have attended OHS Committee meetings to provide updates and insight directly to committee members.

SWITCH BC has a few projects nearing completion that have moved forward due to HSA's input. The OHS Resource Centre and the Provincial Violence Prevention Curriculum update are in testing and piloting phases and are scheduled for full implementation this year. The psychological health and safety resources project is now underway with a goal of creating resources for all health care workers. SWITCH BC also sponsors the provincial Psychological Health and Safety Community of Practice,

where representatives for health care employers and unions share ideas and resources.

The CSSHSA is now at full capacity and is actively creating resources for health and safety in areas across the sector. HSA has been actively involved in reviewing and refining these materials.

Another key partner in safety is the BC Federation of Labour. HSA sits as an active member of the BCFED's Occupational Health and Safety Standing Committee, which plays a key role in advising and lobbying WorkSafeBC and the provincial government on important changes in workplace safety regulations.

Psychological Health and Safety

The importance of psychological health and safety continues to grow, our representatives, both staff and workers, participate in all health authority psychological health and safety committees and working groups, workplace violence committees, and working groups.

HSA is also involved in the development and improvement of psychological health and safety materials for the community social services sector. HSA sits on the PHS Community of Practice alongside employer representatives in the health care sector.

The OHS committee has designated psychological health and safety as a theme for the 2026 HSA OHS conference, scheduled for February 2026.

Illicit Drugs in the Workplace

A great deal of progress has been made around illicit drugs in the workplace. The OHS Committee has remained active in monitoring and responding to regulatory changes, including updated WorkSafeBC orders, citations issued at various worksites, and new substance exposure regulations. WorkSafeBC has introduced exposure limits for fentanyl and developed testing protocols, informed in part by research endorsed by HSA OHS and conducted by UBC and other Canadian institutions. This past year also saw the development of protocols and training regarding proper PPE in areas with suspected airborne drug contaminants.

Thank you to all the members of the Occupational Health and Safety Committee this year.

Andrew Duarte, Chair, Region 1 Director
Laura Greenwood, Region 4 Director
Sherrie McKinney, Region 8 Member at Large
Samantha Carroll, Region 2 Member at Large
Olga Zakaryan, Region 4 Member at Large

Report of the Political Action Committee

The Political Action Committee (PAC) supports the involvement of HSA members in political action activities and campaigns. It oversees the use of HSA's Political Action Fund, supports the work of the constituency liaisons and labour council delegates, and looks for opportunities to engage HSA members in political action to support issues of importance to them which are consistent with our constitutional objective and purposes.

Our committee has met four times since the last convention. Here is a brief summary of the work undertaken by the committee.

Provincial Election

Although the provincial election ended on October 19, 2024, the party who won the most seats – and thus formed the provincial government – was not known until over a week later. On October 28, the final results were announced. The BC NDP formed government with 47 candidates elected, the Conservative Party became the Official Opposition with 44 candidates elected, and two candidates with the BC Green Party were elected.

The provincial government has a direct impact on members through the policies and funding allocated to health, community social services, and the funds set aside for public sector bargaining.

The consequences of these government changes can last decades. Knowing this, PAC supported a strong campaign letting members know about the election and the importance of voting. The 2024 Core Member Engagement Team (CMET) focused their outreach on the election in areas across the province. Thanks to all HSA stewards and members who connected with CMET, voted, and spoke with their colleagues about voting! Two MLAs were elected by fewer than 100 votes, proving that every vote truly does count.

Constituency Liaisons

Of the 93 MLAs elected last fall, over half were elected for the first time! HSA is working to familiarize all MLAs with the specialized work done by members across the province. An important part of this advocacy is the HSA Constituency Liaison (CL) program. The program trains and supports HSA members to bring the issues facing our membership to their local MLAs.

After the election, our committee reviewed and approved the first batch of applications to join the program. After many difficult decisions the first cohort of liaisons was selected and invited to participate in an in-person workshop where new and returning liaisons reviewed the fundamentals of government relations and our topics.

The 2025 program topics are:

- advocating for government action to recruit and retain specialized health and social services professionals, including pushing for more advanced education opportunities; and
- supporting the important work of child development centres and services through a funding increase and implementing a 'social procurement' model to award contracts going forward.

HSA's work supporting child development centres will build on HSA's multi-year advocacy on this topic. In 2024 HSA produced a detailed proposal to reform how government handles CDC contracts and an in-depth submission into the Ministry of Children and Family Development consultation. Thank you to all members who shared their experiences at HSA focus groups across the province. This front line perspective was invaluable in shaping HSA's submission.

Federal Politics

In the 2021 federal election, the Political Action Committee decided to focus member mobilization on three policy issues: pharmacare, child care, and climate action.

There has been significant work to expand child care through partnerships between the federal and provincial governments. A combined \$6 billion dollars has been invested by governments since 2018. While the goal of universal, affordable, and quality child care is not yet achieved, this funding has created tens of thousands of new spaces and reduced fees to \$10 dollars a day for many families. While the funding has provided a desperately-needed

wage increase for early child educators, further actions to recruit and retain more early childhood educators are still required to meet the needs of current and future demand.

Unions also successfully lobbied Members of Parliament to pass Bill C-50, An Act respecting accountability, transparency and engagement to support the creation of sustainable jobs for workers and economic growth in a net-zero economy. This bill provides a framework for financial resources for workers whose jobs are disrupted by employer and industry actions to reduce carbon emissions.

However, the most exciting development on the federal stage is the introduction of a universal, single-payer pharmacare program! Although the legislation provides free access to just two classes of drugs, diabetes medication and birth control/contraception, the proposed framework is exactly what we need to be able to add more necessary medications in the future.

At the time of writing this report, the federal election is not yet scheduled but is expected to happen in the spring. As a member union of the Canadian Labour Congress (CLC), we encourage members to check out the CLC Workers Together campaign to join with other union members in demanding action for working people during the election.

Labour Council Delegates

We're excited to report that many members have stepped forward to join their local labour council in 2024. They have joined with delegates from HSA and other unions in making their communities better. They've met with local, provincial and federal politicians, organized large-scale

community events, and donated thousands of dollars to help those in need in their communities. And of course they are also local political action hubs, including for the Workers Together campaign!

Political Action Fund (PAF)

The Political Action Fund is a resource members may apply to for financial support with community-based political activism, issue-based campaigns, and education. This year the committee reviewed and granted multiple requests for financial support to attend training sessions and events. If you are interested in getting training in community-based political activism or issue-based campaigns that support HSA political action principles, please consider applying to the Political Action Fund.

If you or someone you know would like to join the Constituency Liaison program, serve on your local labour council, or apply to the Political Action Fund reach out through info@hsabc.org.

It was a pleasure collaborating with Region 7 Director Sarah Kooner and Members-at-Large David, Kieran, and Tonya. The Political Action Committee would not be able to accomplish this work without the staff support of Nicole and Kelly. Thank you to the entire committee for your work and commitment!

Respectfully submitted,

Candis Johnson, Chair, Region 10 Director
Sarah Kooner, Region 7 Director
David Mullally, Region 5 Member at Large
Kieran Shoker, Region 10 Member at Large
Tonya Harford, Region 4 Member at Large

Report of the Women's Committee

This year's committee consisted of Caroline Widgiz (Chairperson and Region 8 Director), Kathy Anderson (Region 9 Director), Neetha James (Region 6 Member at Large), Sonia Andhi Bilkhu (Region 7 Member at Large), and Laurie Golemiac (Region 8 Member at Large), with thanks to our staff support Sarah Chapple and administrative support Karin Hodgson.

We met four times this past year to review relevant policies and procedures, prioritize workshops, and promote events, campaigns, and external education opportunities. On behalf of the committee, the chair attended meetings of the NUPGE Advisory Committee on Women's Issues and the BC Federation of Labour's Women and Gender Rights Committee to meet the objective of liaising with other organizations and groups to learn, exchange information, and work together to further the status of women.

The Women's Committee was established by convention in 2011 to explore barriers to women's participation in our union and to develop strategies for overcoming those barriers. The committee advocates for measurable and sustainable positive change in the status of women within the membership and leadership of HSA and for women's leadership and participation at local and national levels of the labour movement. The committee will continue

to explore ways to encourage, assess, and monitor progress toward achieving the diverse representation that reflects the membership within our elected positions at all levels of HSA.

For convention this year, the committee chose to highlight the Moosehide Campaign, an Indigenous grassroots movement working to end gender-based violence by creating safer communities across Canada. Moose Hide Campaign Day, to be held on May 15 in 2025, is a day of ceremony where all Canadians are called to take a stand against gender-based violence and to take practical steps for our collective journey of reconciliation. Together, we are making a change.

This past year, the committee sent out information to the membership on December 6, the National Day of Remembrance and Action on Violence Against Women, and on March 8, International Women's Day, to promote these days of remembrance, action, and solidarity. We are stronger together and HSA now offers a yearly workshop to help members and stewards recognize and understand the impacts of intimate partner violence by addressing power, justice, solidarity, and safety. This is important work for us to undertake and we are pleased that HSA will continue to support these workshops.

The committee also recommends a theme for the yearly HSA International Women’s Day workshop to explore issues impacting union members who identify as women. This was attended by a mix of women and gender-diverse members who are new to activism and those who have more experience. This year’s theme was “Accelerate Action: A Journey Towards Gender Equity” presented by Natasha Tony of Elevate Inclusion Strategies. Workshop participants had the opportunity to learn about the impact of gender inequity in health care and social services and how we can collectively organize to prioritize gender equity for all. Together, we recognize our ongoing challenges and envision a future where gender equity is at the forefront of our collective efforts.

Respectfully Submitted,

Caroline Widgiz, Chair, Region 8 Director
Kathy Anderson, Region 9 Director
Neetha James, Region 6 Member at Large
Sonia Andhi Bilkhu, Region 7 Member at Large
Laurie Golemiac, Region 8 Member at Large

Report of the Young Workers Committee

Group Identity:

At the start of 2025, the Young Workers Committee (YWC) welcomed three new members: Alisha Khurana, Gian Canonizado and Pौरya Beheshtipour for two-year terms. They join Olivia Sandberg, and Trista Yuan who both became a part of the committee at the beginning of 2024 and will remain on the committee for all of 2025.

Towards the end of 2025, another call for new members to submit their expression of interest to join this committee will be sent. As per the committee's terms of reference, all HSA members who are 35 years and younger at the time of their expression of interest will be eligible to become a member of this committee.

The committee's terms of reference and guiding document provides clarity and direction for the goals and objectives of the committee to both canvas young worker members on their issues as well as to advocate for them. The committee's terms of reference has been updated as the committee has evolved and can be found online on the HSA website.

Actions and Activities

YWC members continue to represent HSA young workers both within and outside HSABC. This includes representing you at both the provincial and national level.

Here is a list of some of the events and working groups that YWC took part in:

- Premier's Young Worker Town Hall, held in Burnaby on July 11
- HSABC Young Workers Workshop - An Assertive Approach in Conflict Situations held virtually via zoom on September 17
- NUPGE Issues Forum held in Ottawa on October 2-4
- HSABC Young Workers Social Night, held at Locavore in Squamish on October 18
- 7th Annual HSABC Young Workers Forum, held at the Totem Hall in Squamish on October 18
- NUPGE Advisory Committee on Young Workers Issues held virtually ongoing
- BCFED Young Workers Standing Committee held virtually ongoing

Annual Forum & Issues

The HSA office training facilities were closed for renovations at the time of the annual HSA Young Workers Forum. With the news of the closure, the committee collaborated with staff and the board of directors to rent alternative meeting space to hold this event off site for the first time in its 7-year history. The committee gives thanks to the Skwxwú7mesh Nation for allowing to host this event in the meeting room within their Totem Hall space, located

in their territories at on foot of Stawamus Chief Mountain, just north of the Howe Sound.

A combination of local and out of town participants took inspiration from this setting and in beginning the day with a greeting and blessing, from a Skwxwú7mesh Nation Elder who provided participants information regarding some of her personal experiences and challenges navigating the health care system, as well as her optimism in seeing so many young people gathering to discuss and take action on issues related to equity in their space.

The agenda, for the Annual Forum, focused on fostering engagement, collaboration, and empowerment among union members aged 35 and under. Key activities included group discussions on pressing workplace issues, interactive panels exploring strategies for creating equitable and inclusive environments, and action planning to address common challenges. Participants also engaged in networking and shared insights to promote leadership and collective impact within their workplaces.

During group discussion, key issues impacting young workers across several critical areas were raised by participants.

- Affordability concerns include the need for comprehensive research into government affordability initiatives, financial literacy and pension planning workshops provided by the union, subsidized housing in urban areas, relocation allowances, and additional pay for living in high-cost regions.
- Ageism surfaced as a significant challenge, with older workers often uninformed about changes to collective

agreements, assigning less desirable tasks to younger colleagues, prioritizing seniority in vacation planning, withholding knowledge, gatekeeping specialized roles, and resisting new ideas.

- Bargaining priorities emphasized improvements in special leave, staffing levels, sick time payouts, wages, education leave, permanent positions, extended health coverage, and benefits for part-time workers.
- Retention strategies focused on financial and non-monetary incentives, work-life balance, mental health benefits, recognition, and allowances for high living costs.
- Union involvement discussions included opportunities for union involvement in workshops, social activities, steward recruitment, and enhanced member engagement through orientations and resources. Other issues included inconsistent onboarding processes, with calls for standardized orientations tailored to both the profession and union, as well as greater support for remote and flexible work arrangements. These findings underscore the importance of addressing these concerns to foster equity, retention, and career satisfaction for young workers.

Moving Forward

We recognize that everyone in our union was likely a young worker at some point. We look forward to continuing to work on these issues that affect us all.

We welcome the opportunity to connect with you! If you are in attendance at the convention, there will be a Young

Workers Caucus which will be held within convention agenda.

We continue to work on creating more ways to connect and engage with you. At this time, young workers who are hoping to get in touch with their committee by email can reach out to committee members with any questions, ideas, or concerns by contacting info@hsabc.org

In solidarity,

Alisha Khurana, Chair, Region 6

Gian Canonizado, Region 8

Olivia Sandberg, Region 9

Trista Yuan, Region 7

Pourya Beheshtipour, Region 3



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

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