

THE Report



**CONVENTION
2005**

**NEW DELEGATES
BRING ENERGY, IDEAS**

Balanced government: will it affect upcoming contract negotiations?

by CINDY STEWART

On May 17, British Columbians sent a strong message that they want a balanced approach to government.

With 46 Liberal and 33 NDP MLAs representing us for the next four years, the Liberal government will be working with a much different mandate than British Columbians delivered four years ago.

At HSA's 2005 convention, delegates had a thorough discussion about HSA's political action strategy. Delegates agreed that the union's Political Action Committee is on the right track, and gave clear direction to the Board of Directors to continue to engage in the political process to make every effort to ensure that HSA's issues and concerns are addressed by government. Convention resolutions directed the union to build on the successful Constituency Liaison project, which matches HSA members with MLAs to educate our representatives about the issues HSA members deal with and are important to them.

The work of HSA's Constituency Liaisons – and, indeed, all HSA members – in raising awareness about the issues important to you will be critical to achieving success in this round of negotiations.

Thanks to the work of the Constituency Liaisons, many government MLAs have a new awareness about shortages in the health science professions, and a better understanding about the concerns that HSA members have about the services you deliver. The job



Cindy Stewart, HSA President

for the Constituency Liaisons and Political Action Committee will be to build on the work of the past two years and ensure our representatives are aware of the issues important to HSA and our members.

This work will be particularly important in the coming few months as we turn our concerted attention to negotiating new collective agreements. The current health care and social services collective agreements all expire in 2006, and there are a number of issues that members will be seeking to raise at the bargaining table.

Actions that ensure the decision-makers understand your concerns will be complementary to the work that is done in identifying bargaining proposals and finalizing a package to take to the negotiating table. The work of our Constituency Liaisons – and, indeed, all HSA members – in raising awareness about the issues important to you will be critical to achieving success in this round of negotiations.

With a strong opposition in Victoria, there will be much more opportunity to hold the government to account for its actions, and part of the work for HSA will be to find ways to work with the government and the opposition to ensure that your interests are heard and understood. **R**



6 COUNT US IN! Coverage of 2005 Annual Convention

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THE FRONT COVER

Ribeka Kim is a medical laboratory technologist at Canadian Blood Services. Patricia Sayer photo.

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News



CHPS cites growing shortage of health science professionals

NUPGE

Members of the Canadian Health Professionals Secretariat (CHPS) gathered in Ottawa April 28-29 to assess progress in their campaign to draw attention to the growing shortage of health science professionals across Canada.

The Secretariat represents more than 60,000 health science professionals in more than 100 different disciplines who provide the diagnostic, clinical and rehabilitative services essential to the health care team and to quality patient care.

“While some progress has been made in addressing physician and nurse shortages, the equally pressing problem of a human resource shortage of health science professionals has commanded relatively little attention,” said Secretariat co-chair Cindy Stewart, president of the Health Sciences Association of BC.

“While some progress has been made in addressing physician and nurse shortages, the equally pressing problem of a human resource shortage of health science professionals has commanded relatively little attention.”

“Not only do CHPS members confront these shortages every day in the workplace, but without immediate action, the problem looks set to get a great deal worse,” added CHPS co-chair and NUPGE national representative Shelley Wilson.

“In a typical hospital, there are as many as five or six highly trained health science professionals for

every physician. As physician supply gradually increases, the demand for the health science professionals who are essential to the health care team will grow exponentially,” Wilson said.

Members of the Secretariat reviewed collective and individual provincial efforts to raise the profile of this looming crisis amongst the public and with policy makers. Wilson also surveyed media and communications activities the Secretariat has taken to raise the profile of its member organizations since their last meeting.

Secretariat members also made time during their semi-annual meeting to attend National Day of Mourning ceremonies at the CLC monument to workers killed and injured on the job.

Since 1984 a staggering 17,000 Canadians have been killed while at work, and more than 18 million injured.

In addressing CHPS members, James Clancy, president of the National Union of Public and General Employees (NUPGE), underlined the fact that health science professionals are sadly a big part of those numbers.

“The National Day of Mourning is an important opportunity to remember the individual tragedies behind those statistics and to renew our personal and collective commitment to hold governments accountable for health and safety legislation and enforcement,” said Clancy.

Members of the Secretariat also had the opportunity to meet with Carey Lai, founding member of the New Health Professionals Network (NHPN), president of the Canadian Association of Pharmacist Students and Interns (CAPSI), and just-graduated pharmacist. The NHPN represents students across the health care professions who are committed to preserving and strengthening a single-tier, publicly-funded health care system.

Stewart briefed the Secretariat on an invitation from the Health Council of Canada to attend the June 2005 National Health Human Resources Sum-

mit. The summit was first proposed in conjunction with the release of the council's first report called "Accelerating Change."

"The Council believes that the commitments of first ministers in 2003 and 2004 can only be achieved by a collaborative and coordinated approach to resolve the outstanding and complex barriers to progress in health human resources, and we're looking forward to the opportunity to advance our positions and proposals," said Stewart, who will be representing NUPGE at the Summit.

The Canadian Health Professionals Secretariat was created by NUPGE to address challenges and opportunities facing health science professionals across the country and to enhance the recognition of the valuable contribution that professionals who provide diagnostic, clinical and rehabilitation services make to the health of Canadians.

Employment Insurance program is failing Canadian workers

NUPGE

Ottawa is mismanaging the multi-billion-dollar Employment Insurance (EI) program and failing Canadians who are struggling to find jobs, says a survey commissioned by the government from the national Ipsos Reid polling firm.

Nearly two out of three people questioned (62 per cent) said the federal government is spending too little to help workers find and keep good jobs. Just over one in three (34 per cent) feel Ottawa is operating the program unfairly.

Among workers worried about losing their jobs, 46 per cent feel the program is run unfairly. The level among rural Canadians stands at 43 per cent.

On paper, the EI program is running a massive (and many argue illegal) \$46-billion surplus.

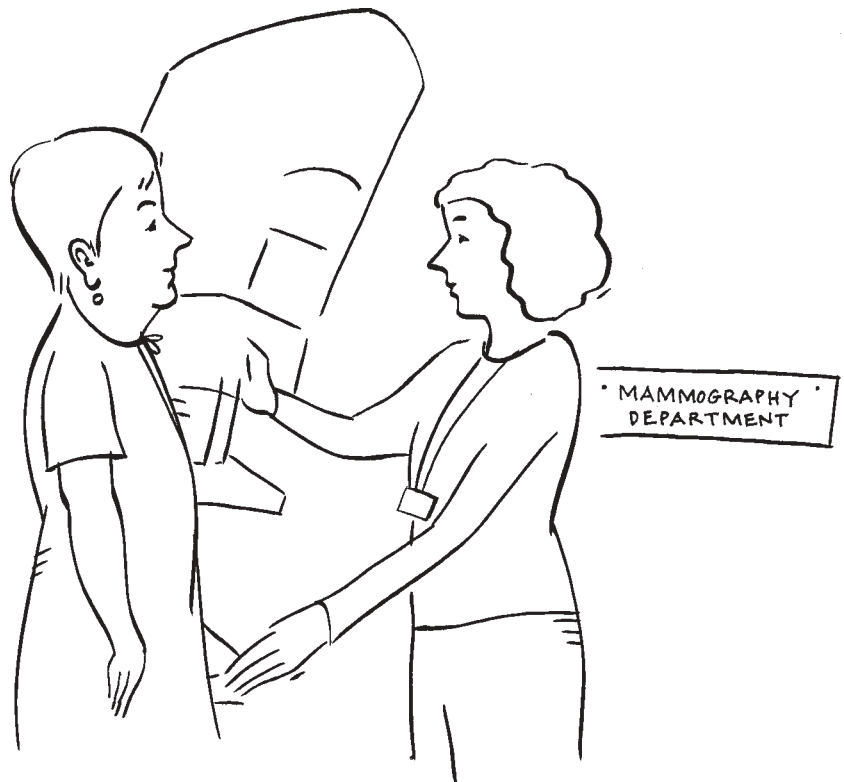
Premiums are supposed to be limited to a level that allows the program to run a prudent but not excessive surplus. Instead, Ottawa has been collecting billions more every year than is required from

workers to keep the program solvent.

The excess has been confiscated and dumped into general government revenues, where it has been used for other purposes.

The poll also uncovered widespread confusion about the program, which has been amended many times over the years. It sets different qualifying times for different regions of the country and new categories have been added in recent years to cover parental and compassionate leave.

More than half (56 per cent) said they knew little about the program. More than one in five (22 per cent) acknowledged that they were "not at all familiar" with the program while fewer than one in 10 (eight per cent) thought they were "very familiar" with the way it operates. **R**



MARILYN KOOP GRAPHIC

Debora Muñoz

Clinical Neurophysiology Technologist
Prince George Regional Hospital



This is my very first convention, reflecting my increased political action over the last two years. HSA has certainly been an incredible support system in allowing me to complete four campaign schools, for example.

The tools I gained are very valuable. These include being organized, working with a team, ensuring you have the physical and mental energy to get out there and mobilize the whole community – and that’s in your union, in your workplace and then your overall community as a whole.

Getting out there, talking about the issues, encouraging dialogue about the issues and trying to alleviate some of the fear – for example, “I better not rock the boat for fear of losing my job.”

Trying to ease some of those fears, and motivate and encourage everyone to play their part – their democratic right to vote and their democratic right to have a better province for all of us.

(above) Patricia Hiscocks [Assisted Living Worker, left] and Stephanie Smith [Front Line Advocate] of the Kettle Friendship Society vote on a resolutions with Wayne Guest [Cytogenetics Technologist] from Royal Columbian Hospital.

ANNUAL CONVENTION 2005



“Count us in!”

Count us in.

That was the theme of the Health Sciences Association of BC’s 34th annual convention, held at the Hilton Metrotown Hotel in Burnaby April 7 to 9.

In her report to delegates, HSA President Cindy Stewart said over the past several years HSA members have, through convention resolutions, continued to urge the union to take increasingly proactive positions to speak out about concerns in the health care system, and to ensure the issues of HSA members are heard.

Increasing political involvement

“We have, traditionally, focused on labour relations, not so much on political action, because our primary responsibility as a union is to negotiate and uphold collective agreement rights,” Stewart told delegates.

“But that is proving hard to do when the government is so willing to interfere politically in collective bargaining and labour relations.

“As public sector workers, the framework in which we practice labour relations is very much influenced by the government of the day. As health care workers and community

Continued on page 9

Sharon Geoghegan

Community Work Service Supervisor
John Howard Society



I like being involved in making the decisions about what's happening. I like connecting with people within my region that I don't get to see on a regular basis, and all the other HSA members from around the province.

In the last round of bargaining for community social services members, our sick benefits were cut back to 80 per cent, as well as our accrual rates. We know HSA did the best we could under tough circumstances, but this was upsetting. It is so important for the work that we do that we have our time off should we need it.

The pre-convention education seminars were fantastic! The facilitators, Jessica Peart and Tammie Tupechka, were absolutely dynamic. They did a great job at teaching public speaking. We came with our own experiences and they just helped us draw on that. It was just great!

(above) HSA President Cindy Stewart addresses delegates; (below, l-r) Richmond Hospital stewards Ellen Lee [ENP Tech] and Catherine Eadie [Nuclear Medicine Tech].



Anita Bardal

Medical Radiation Technologist
St. Paul's Hospital



Convention is going really well. What I've noticed is that there is a real sense of concern by the members here, and I also sense a stress level and a fatigue level of the members here from their workplaces – because of the cutbacks and the way they work.

This all links into occupational health and safety and how WCB has cut the number of claims they accept, which has increased the rates that our colleagues are having to take sick time.

Increased sick time in hospitals has also caused disability to go up because once they use up their sick time they have to apply for disability, so it's all linked together.

It's been very interesting because it's a very broad convention, because it covers not just our own union – it covers the global issues: not only how we care for others, but how we need to care for ourselves so that we can continue caring for others.



Continued from page 6

“Because of the work you do in your communities, you know only too well that the services you provide are threatened.”

social service workers, you deliver services to people in communities across BC who struggle every day of their lives to make ends meet... to access the services they need, or cope in an abusive relationship... or battle their internal demons.

“Because of the work you do in your communities, you know only too well that the services you provide are threatened.

“And that is why at the past few conventions, members have told us that in addition to defending your collective agreements, we need to defend the services you deliver,” she said.

Convention delegates heard from HSA members who have been active in their communities to promote the services they provide. Thalia Vesterback, one of HSA’s Constituency Liaisons, described a series of meetings she has had with her MLA, Sandy Santori, and her efforts to ensure the government understands the contribution of health science professionals to the health care team.

Santori invited Vesterback for a subsequent meeting with then-Health Minister Colin Hansen.

“When I started as a Constituency Liaison, I wasn’t sure how I could make a difference. But I am making a difference,” she said. Vesterback encouraged other HSA members to work to keep their MLAs and the government accountable to their constituents.

Debora Muñoz from Prince George told delegates the union’s support for members interested in taking a more proactive approach to government and decision making has given her the skills and confidence run for municipal council in the coming fall elections. And Nikki Maier from Kelowna told delegates she has become more active in her community and her union thanks to the support of union education programs, including HSA’s campaign school and steward training. **R**

(above left) HSA Vice President Kelly Finlayson [Mammographer, St. Joseph’s Hospital, left] confers with Suzanne Bennett [Youth Addictions Counsellor, John Howard Society] about a resolution while Sharon Geoghegan [Community Work Service Supervisor, John Howard Society] looks on; (below left) outgoing Region 5 Director Bonnie Norquay [Recreation Therapist, Vancouver Community Mental Health, left] applauds a keynote speech with Pamela Black [Administrative Assistant, THEO BC].

Tami Nishi

Speech Language Pathologist
The Centre for Child Development



This is my second convention, and just like the first time, I find it very stimulating. I like coming to convention specifically because it helps me get motivated about a lot of the things I’ve been thinking about all year.

It’s very insightful. It seems that when you’re in your own chapter – your own region – often the issues are very similar, so it gives me a broader knowledge of what’s happening in the province, and an appreciation for what people are doing, as well.

I was particularly interested in this convention because of the upcoming election, and had very mixed feelings about it. I felt it was a very important debate. I went to campaign school, and personally feel it’s very important to be involved. What I realized at the end of it is that the union is supporting me and the membership in getting involved politically, and helping us educate ourselves on the issues that are really important. We don’t necessarily have to do that in a direct way in having that amended in our constitution.

There’s one today on the issue of autism and lobbying the federal and provincial governments for funding for treatment. That one stands very close to me as well. I work with autistic children, and work very closely with the families. It’s an interesting debate, as an advocate for all families, not just children with autism.

Rachel Tutte
Physiotherapist
Holy Family Hospital



Convention has been very interesting this year. We've had an awful lot to talk about and debate, and that's always healthy for our union.

For example, there was a resolution yesterday about our workload, and that was very successful; there were lots of people up at the mike talking about the increased stress in the workplace from the workload, and how that's affecting our members mentally and physically.

Oh, and we had a great time at the dance last night!



Vancouver Mayor Larry Campbell delivered a keynote address. With characteristic deadpan humour, he outlined many reasons for HSA members to become more politically active.



BC Federation of Labour President Jim Sinclair spoke to convention delegates about the need for a more balanced government and the responsibility individuals have to increase participation in the democratic political process.



National Union of Public and General Employees President James Clancy praised HSA activists for their contributions to the struggle for social justice and the protection of universal health care.



VIHA stewards [from right] Erna Bruce [Physiotherapist], Nicole Painchaud [Social Worker], and Doreen O'Neill [Social Worker] applaud convention guests.

Pam Black

Administrative Assistant
THEO BC



It's my first convention, and I am thoroughly enjoying it. I'm learning about new issues that I wasn't familiar with, and it's definitely opened my eyes to what is going on in BC.

I'm really enjoying meeting so many activists from around the province – I guess I was basically a silent activist, and I came out of the closet, so to speak. And definitely we need reform in this province, and HSA has opened my eyes, and I'm definitely going to be very much a part of the election process and help HSA along the way.

Charlie Wheat

Residential Care Aide
South Peace Child Development Centre



I like coming to convention because it's a great way to interact with activists from all the other CDCs all throughout the province – just to get an idea of what everybody is doing, and all the different issues that are going on.

It's great for the occupational health and safety aspect of it. It's just a really good networking system.

Margaret Farrell

Neighbourhood Support Clerk
North Shore Health



This year's convention is really good; very interesting. I really enjoy all the debates on the questions. This is my sixth convention.

It's great to interact with other activists. You get a lot of energy from coming to conventions, and you go back really energized. You just get caught up in it.

I've just really enjoyed it.

Amanda Bartlett

Physiotherapist
Kelowna General Hospital



Convention is great. It's always a great opportunity to catch up with fellow activists, and to be with people who are like-minded.

The resolution that struck close to me was one on lobbying the government through NUPGE to support funding for autism, and the treatment of autism and mood-related disorders. There are so many people struggling, and that is particularly sad when these families are facing horrible financial, social and emotional trauma because of cutbacks by the government. These people deserve treatment and the support that is necessary to even lead a somewhat normal life.

Also, at KGH, we have huge, absolutely huge issues with food services. I work at a rehab centre in Kelowna, and the food that comes on the plates is indescribable. The patients who are there for any length of time – anything more than two weeks – lose weight. They can't eat the food; it's disgusting!

People are meant to be on special diets with special kinds of consistencies – and if they are wrong, people can aspirate, people can die.

Katrina Herriot

Darkroom Technician
CML Healthcare



Convention was great. I really enjoyed learning all the new things that we got to do. I've never been involved in such a democratic process, and I really enjoyed that.

I believe that women should be involved in the electoral process because we're not very well represented in politics. I'm actually running as a candidate in Victoria for the Work Less Party. I've never felt that there was people representing my issues which are both the environment and workers' issues.

If I can add my Party's motto: Work less, consume less and live more.

The Committee for Equality and Social Action thanks all members who contributed to this year's silent auction!



Run for the Cure: HSA President Cindy Stewart [right] presents a sponsorship cheque to Diane Lyons of the Breast Cancer Foundation, while Run Committee members Agnes Jackman [left] and Cheryl Greenhalgh [second from left] receive a recognition plaque on behalf of the union. [Below] Ken Liao [Laboratory Technologist, St. Paul's] scrutinizes the budget.



Stephanie Smith

Front Line Advocate
Kettle Friendship Society



This is my first convention, and it's really interesting – even the business that I thought would be dull as dishwater, like the LTD plan, is actually quite fascinating.

The convention is well run and well structured. The members are really interesting people who come from really diverse backgrounds and are very dedicated, intelligent, and engaging. I'm also impressed by how well the staff are doing things, and how well the board does things.

One resolution that ended up being really interesting was the one about the provision of adequate food for people in extended care. It's a resolution that so clearly was going to pass, and yet so many people got up to speak about it that it's obvious that that is an issue that really is affecting our membership.

I would come back to future conventions. We're a new cert – only two years along. I am a new steward with very little experience. Every place I've been in HSA, people have been really supportive and given us what we've needed to learn how to do things. People have been really patient with us. So it's been a really positive experience all around; I'm having a really good time.

Gwen de Rosa

Registered Psychiatric Nurse
Kiro Manor



Overall, convention has been great as it always is. It's nice to see that people are able to stand up and go against the resolution committee's recommendations by voting down resolutions. I actually think that that's another sign that we're a very democratic union.

I voted against the resolution to do with party endorsement. I thought that was up to each individual member. I thought the debate on that was quite interesting because both sides were very compelling.

Otherwise, I think most of the resolutions have been ones that we see quite frequently – for example, the ones for supporting ongoing lobbying. These are always important and always go over well, so that was good.



[top, from right] VIHA stewards **Debra Gillespie, Carmela Vezza, Val Avery and Don Chan** vote on a resolution. [centre, from right] Kelowna General Hospital stewards **Connie Bakker, Pat Munro, Neil Lalach and Lila Mah** [bottom] On the first morning of convention, HSA Administrative Assistant **Susan Isaacson** helps Vancouver General Hospital steward **Karen Parinas** register for convention. [facing page, from left] Prince Rupert Regional Hospital stewards **Arlene Carlson and Marcela Dudas**

Sue Motty

Laboratory Technologist
Canadian Blood Services



I've been a member of HSA since about 1992, and I've been at convention several times. I always enjoy coming here for the educational opportunities, to hear the debates, to see my union at work and to see it working for me – and listening to concerns of everyone out there in the health care profession.

Some of the political resolutions are interesting this year. Occupational health and safety is a big concern – anything to do with work conditions and the degrading of the working conditions by the Liberal government. Even though we're not politically affiliated, these things are coming up. I enjoy that.

Lynda Kimola

Infant Development / Community
Integration Consultant, GR Pearkes



I've attended four or five conventions. This year, there seems to be a lot of emotional issues – such as the impact of workplace violence, and the effects of cutbacks.

It was really informative to hear what people were experiencing in the workplace, especially in acute care. I like interacting with the other activists from across the province, and I've really enjoyed the presentations on various issues.

If anything I'd appreciate more details on issues. A lot of people are getting very emotional at this convention, and I find that it's telling. But I'd like more information.

Rick Lascelle

Respiratory Therapist
Royal Columbian Hospital



As usual, it's a very interesting and thought-provoking convention. A number of interesting issues have been debated throughout the convention.

I think HSA has put on a great event, and I appreciate the board and the executive for doing such a good job.

Russell McMullin

Electroneurophysiology Technologist
Nanaimo Regional General Hospital



I enjoy convention: different views and a broad variety of people that I haven't seen or met before.

Our problem right now at our workplace is the housekeeping services, and the hospital is a lot dirtier than it used to be.

Because they've contracted out the housekeeping services, it's not really the fault of the people that do it, but the company is trying to make a profit so they're holding back funds and it's not good.



Your representatives

Members at Large are elected at regional meetings. They participate in HSA's standing and special committees, and are delegates to the annual convention as well as to the BC Federation of Labour Convention.

REGION 1

Marilyn Riddell
Residential Support Worker
Future Focus (Campbell River)

Hilary MacInnis
Occupational Therapist
St. Joseph's General Hospital

REGION 2

Anna Morton
Social Worker
Queen Alexander Centre

Greg Hill
Medical Radiation Therapist
Royal Jubilee Hospital

REGION 3

Tanis Blomly
Recreation Therapist
Eagle Ridge Hospital

Bruce MacDonald
Social Worker
Royal Columbian Hospital

Cheryl Greenhalgh
Medical Radiation Technologist
Royal Columbian Hospital

REGION 4

Ben Birovchak
Nuclear Medicine Technologist
Vancouver Hospital (12th/Oak)

Colya Kaminiarz
Respiratory Therapist
Vancouver Hospital (12th/Oak)

Filippo Berna
Clinical Perfusionist
Vancouver Hospital (12th/Oak)

REGION 5

Susan Diane
Suicide Intervention Counsellor
Vancouver Community Mental Health

Sue Motty
Medical Laboratory Technologist
Canadian Blood Services

REGION 6

Rachel Tutte
Physiotherapist
Holy Family Hospital

Kimball Finigan
Radiation Therapist
Vancouver Cancer Centre (BCCA)

REGION 7

Marg Beddis
Dietitian
Surrey Memorial Hospital

Brent Jeklin
Medical Radiation Therapist
Langley Memorial Hospital

Rosalie Fedoryshyn
Infant Development Consultant
Fraser Valley Child Development Centre

REGION 8

Brigid Kemp
Older Women's Liaison
South Okanagan Women in Need Society



Region 4 members at large Filippo Berna [left] and Colya Kaminiarz attend a regional caucus at convention

Irene Goodis
Physiotherapist
Penticton Regional Hospital

REGION 9

Ruth Simpson
Medical Laboratory Technologist
Invermere District Hospital

Thalia Vesterback
Medical Radiation Technologist
Kootenay Boundary Regional Hospital

REGION 10

Charles Wheat
Residential Care Worker
South Peace Child Development Centre

Marcela Dudas
Medical Laboratory Technologist
Prince Rupert Regional Hospital

Thalia Vesterback
 PACS Administrator / Sonographer
 Kootenay-Boundary Regional and
 Castlegar Hospitals



This year's convention is going very well; it's very interesting. There are a lot of issues being debated, and there's a lot of people getting up and talking which is really good to see. There's a lot of energy in the room about the theme for convention which is getting active about the vote – good to see.

Women are greater than 50 per cent of the population and we're much under-represented in politics. We don't live up to the numbers of society; we don't come close to fully representing our issues and ourselves. So we need to get more involved.

At the hospitals I work at, we no longer have any food for staff; they've closed our cafeterias to staff. We have vending machines. Two Christmases ago, Kootenay Lake Hospital said they were just shutting the cafeteria for lack of relief over Christmas, and then they never reopened – and they put in two vending machines. Castlegar then followed suit after that. Trail still has a cafeteria, but it's limited food service to the staff.

There isn't contracting out for patient food services which is good to see, but there is definitely talk about bringing in the prepared food like they are using in the Okanagan, and that is a definite concern.

COMMITTEES 2005 / 2006

Members appointed to HSA committees

COMMITTEE FOR EQUALITY AND SOCIAL ACTION

Maureen Ashfield (Chair, Region 3 Director)
 Ernie Hilland (Region 6 Director)
 Susan Diane (Region 5)
 Kimball Finigan (Region 6)
 Thalia Vesterback (Region 9)
 Pam Bush (Staff)

EDUCATION COMMITTEE

Jackie Spain (Chair, Region 9 Director)
 Audrey MacMillan (Region 7 Director)
 Hilary MacInnis (Region 1)
 Bruce MacDonald (Region 3)
 Filippo Berna (Region 4)
 Leila Lolua (Staff)

ELECTIONS COMMITTEE

Reid Johnson (Chair, Region 5 Director)
 Maureen Ashfield (Region 3 Director)
 Rebecca Maurer (Staff)

FINANCE COMMITTEE

Brian Isberg (Chair & Secretary-Treasurer, Region 2 Director)
 Audrey MacMillan (Region 7 Director)
 Joan Magee (Region 8 Director)
 Susan Haglund (Staff)
 Peggy Lavigueur (Staff)

OCCUPATIONAL HEALTH & SAFETY COMMITTEE

Jackie Spain (Chair, Region 9 Director)
 Lois Dick (Region 10 Director)
 Marilyn Riddell (Region 1)
 Marg Beddis (Region 7)
 Charles Wheat (Region 10)
 Marty Lovick (Staff)

POLITICAL ACTION COMMITTEE

Kelly Finlayson (Chair & Vice President, Region 1 Director)
 Joan Magee (Region 8 Director)
 Cheryl Greenhalgh (Region 3)
 Ben Birovchak (Region 4)
 Rachel Tutte (Region 6)
 Carol Riviere (Staff)

RESOLUTIONS COMMITTEE

Kelly Finlayson (Chair & Vice President, Region 1 Director)
 to be announced (Region 1)
 Greg Hill (Region 2)
 Tanis Blomly (Region 3)
 Colya Kaminiarz (Region 4)
 Sue Motty (Region 5)
 Kimball Finigan (Region 6)
 Brent Jeklin (Region 7)
 Irene Goodis (Region 8)
 Ruth Simpson (Region 9)
 Marcela Dudas (Region 10)
 Ron Ohmart (Staff)

RUN FOR THE CURE COMMITTEE

Agnes Jackman (Chair, Region 4 Director)
 Lois Dick (Region 10 Director)
 Tanis Blomly (Region 3)
 Sue Motty (Region 5)
 Rosalie Fedoryshyn (Region 7)
 Miriam Sobrino (Staff)

TRIAL COMMITTEE

Hilary MacInnis (Region 1)
 Wendy Morin (Region 1)
 Stephanie Smith (Region 5)
 Marg Beddis (Region 7)
 Thalia Vesterback (Region 9)
 Dennis Blatchford (Staff)

CONSTITUTIONAL & ORGANIZATIONAL POLICY COMMITTEE

Kelly Finlayson (Chair & Vice President, Region 1 Director)
 Ernie Hilland (Region 6 Director)
 Susan Haglund (Staff)



Committees

EDUCATION COMMITTEE

HSA congratulates scholarship winners



HSA's Education Committee deliberates over scholarship applications and disburses awards. The members of the 2004/2005 Education Committee were:

- **Bonnie Norquay (Chair)**
- **Audrey MacMillan**
- **Filippo Berna**
- **Larry Bryan**
- **Irene Goodis**
- **Leila Lolua (Staff)**

For information on scholarships and bursaries available through HSA, contact your chief steward, or Leila Lolua at 604/439.0994 or 1.800/663.2017.

Craig Kent Reddick Bakker

son of Connie Bakker
Speech Language Pathologist
Kelowna General Hospital

Alana Kaley Benes

daughter of Cindy Benes, Medical Laboratory Technologist
Surrey Memorial Hospital

Teresa Anne Cheng

daughter of Kin Cheng
Medical Laboratory Technologist
Royal Columbian Hospital

Jessica Lauren Firus

daughter of Alexander Firus
Pharmacist
Delta Hospital

Paul W. Gallant

Recreation Therapist
St. Paul's Hospital

William James Lawrence Green

son of Maureen Green
Dietitian
Penticton Health Centre

Alysson Flora Marshall

daughter of Eleanor Marshall
Occupational Therapist
Shushwap Lake General Hospital

Alana Justine Radford

daughter of Linne Radford
Medical Laboratory Technologist
Kelowna General Hospital

Brenda Lynn Tymchuk

Health Records Administrator
VIHA South Island

Amy Kaelynn Walker

daughter of Debbie Walker
Sonographer
Royal Columbian Hospital

Andrea Elaine Bakke

daughter of Elaine Huhto-Belair
Social Worker
Langley Memorial Hospital

Dagan Jamie Cawley

son of Robyn Cawley, Dietitian
Vernon Jubilee Hospital

Vanessa Helene Charvin

ID/CI Consultant
Queen Alexandra Centre

Alison Elizabeth Clancy

daughter of Donna Jansons
Social Worker
Kelowna General Hospital

Karyn Paige Giesbrecht
daughter of Shelby Giesbrecht
Medical Laboratory Technologist
Castlegar Health Centre

Jana Kim Johnston
daughter of Katrina Johnston
Transcriptionist
CML Healthcare Imaging Inc.

Jaclyn Marie Pell
daughter of Lorina Pell
Recreation Therapist
Brookhaven Care Centre

Elizabeth Jean Pilyk
daughter of Sally Pilyk
Medical Radiation Technologist
Cowichan District Hospital

Sean Patrick Spina
Pharmacist
Royal Columbian Hospital

Leighton N. Wickey
son of Victoria Wickey
Medical Laboratory Technologist
Surrey Memorial Hospital

Tiffany Graham
Medical Radiation Technologist
St. Paul's Hospital

Hussein Kamrudin
Nuclear Medicine Technologist
Burnaby Hospital

Del Leibel
Radiation Therapist
BC Cancer Agency, Fraser Valley Cancer Ctr

Kimberly Mead
Medical Radiation Technologist
Shushwap Lake General Hospital

Erica Krafczyk
Registered Psychiatric Nurse
Lions Gate Hospital/Magnolia House

Aboriginal Bursary Awards
Sadie Mae Quintal
Rhyannon Garant Alexander




PPBA collective agreements now available for members



Paramedical professional collective agreement booklet: get yours through your employer

The provincial agreement between the Paramedical Professional Bargaining Association and the Health Employers Association of BC effective April 1, 2004 – March 31, 2006 has been printed and is now available.

Employers are responsible for ensuring all members working under the contract receive a copy.

If you do not receive a copy of the contract, you may request one through the human resources department or contact at your workplace. For your convenience, HSA also makes the agreement available on the union web site at www.hsabc.org. 

HSA to represent Biomedical Engineering Technologists

In May, the BC Labour Relations Board ruled that two hundred Biomedical Engineering Technologists working in BC hospitals are appropriately represented by HSA.

This follows a previous ruling by the LRB that designated Biomedical Engineering Technologists as paramedical professionals, but did not resolve the issue of union representation. HSA holds the paramedical professional certification at all of the hospitals where Biomedical Engineering Technologists work.

Biomedical Engineering Technologists maintain specialized hospital equipment at acute care hospitals across the province.

Wage rates in dispute

The LRB ruling simply places the BMETs into the existing paramedical professional agreement and is not the same as an expired collective agreement in which the parties can bargain new provisions. HEABC and HSA have failed to reach an agreement on an appropriate wage rate and other classification issues arising from the ruling.

Prior to the 1996 LRB ruling which placed all BMETs into the Facilities Support Unit, about a third were HSA members and covered by the HSA master agreement. In that agreement, BMETs had a “job family” which started at grid level eight with provi-

BMETs should be working with their employers to return to a 36- hour work schedule.

sions for additional classifications such as sole charge, special procedures, and different supervisory levels.

It is HSA’s position that given the circumstances,

the BMETs should be returned to their former placement within the paramedical professional agreement. Since the only professions on schedule B are those that were imposed by legislation – not negotiations – BMETs would be on schedule A.

The employers’ position is that the BMETs should be placed on the miscellaneous wage rate schedule A with the staff position being at grid six, and another unspecified supervisory level. Additional classifications would not be available under this scheme.

As a result of this breakdown in discussions and the wide disparity in positions, the parties have agreed that the matter will proceed to arbitration. Both parties are committed to seeing that this occurs as soon as reasonably possible. Whatever the outcome, it will be retroactive to May 6, 2005.

“It is very disappointing that the employer is failing to recognize the previously negotiated terms, especially since the employer took the position at the LRB that the BMET’s duties have expanded in the last 10 years,” said Ron Ohmart, Executive Director of Labour Relations for HSA, who is handling the discussions with HEABC.

In the meantime, BMETs should be working with their employers to return to a 36-hour work schedule by reaching mutual agreement through the Appendix 6 process in the collective agreement.

In addition, BMETs will be transferred to the HSA Long Term Disability Plan beginning the first pay period in June. The premium is paid by the employee and is currently three per cent of regular earnings.

Updates will be posted on HSA bulletin boards and the HSA website. **R**

CONTRACT INTERPRETATION

It's your right: questions and answers about your collective agreement rights

Insubordination

by BRUCE WILKINS

Q: I work in a position covered by the Paramedical Professional Bargaining Association collective agreement. Our employer has recently reorganized our workplace as a cost-cutting measure. My colleagues and I are concerned that our patients are no longer getting the level of care they need. We have brought our concerns to our department head, our union steward, as well as to our professional association. In the meantime: when is it permissible to refuse the employer's instructions at work?

A: Insubordination is commonly defined as the act of refusing to follow instructions or show respect to your employer. The rules governing when an employee can or cannot refuse to follow instructions from the employer is one of the more commonly occurring disputes in labour law and has generated thousands of cases from labour arbitrators.

The key elements of insubordination are as follows: there must be an instruction given by the employer; the instruction must have been clearly communicated by an appropriate authority; and there must be a clear refusal to follow the instruction.

While exceptions do exist, a clear line of arbitral authority has arisen, embodied in the saying: "obey now, grieve later."

This means that if an employee disagrees with an instruction given by their employer they must follow the instruction and then grieve the matter later if they feel the instruction has violated the collective agreement. Even if the instruction does violate the collective agreement, insubordination may well attract discipline on its own.

When one asks why arbitrators have gone in this direction, one arbitrator has famously said, "an industrial plant

is not a debating society." The reasoning is that if production or work stopped until the grievance process had gone through its course, the very work that the operation does will not get done.

Many HSA members belong to professional organizations that have guidelines and principles of their own which members must follow, subject to penalties from their professional organizations. This may in some situations lead a member into a perceived conflict between employer instructions and professional obligations.

In cases where there was a perceived clash between professional obligations and employer instructions, arbitrators have tended to side with employers' right to instruct their staff. In an Alberta arbitration, the United Nurses of Alberta sought the right to refuse work where high workload put their professional obligation of quality care at risk. The arbitrator found that the "work now grieve later" maxim applied because the employer was under a statutory obligation to provide care, and that the employer is liable for whatever happens to patients who are in attendance at the hospital. Because of this, the employer needed to be able to insist on instructions being carried out.

The lesson in this is that relying on professional obligations in refusing work will not necessarily save an employee from discipline. In dealing with perceived conflicts between employer instructions and professional obligations, consult your union and your professional organization on the manner in which the problem can be resolved.

Once crucial exception to the "obey now, grieve later" rule is that of unsafe work. The Occupational Health and Safety Regulation section 3.12 provides a procedure by which employees can refuse to do work which would be unsafe to any person. **R**

Bruce Wilkins is legal counsel for HSA.



This column is designed to help members use their collective agreement to assert or defend their rights and working conditions. Please feel free to send your questions to the editor, by fax, mail, or email [yukie@hsabc.org]. Don't forget to include a telephone number where you can be reached during the day.

An activist is born

by LAURA BUSHEIKIN

Nikki Maier likens her entry into HSA involvement to catching the bridal bouquet at a wedding. Last May, she had just started her job as Educator/Speakers' Bureau Coordinator at the Living Positive Resource Centre, an AIDS service organization in Kelowna. She was sitting in the office with another coworker when someone came by with mail from HSA.

"She threw the mail package into the office and I was the one who caught it. And so I took on dealing with it," says Maier. Which led, naturally it seems, to becoming Chief Steward less than a month later.

Maier was well prepared for such a commitment. She brings to HSA an impressive pedigree as a political activist, having used her skills in writing, editing, educating and organizing in service of First Nations issues, the anti-poverty movement, and, currently, the fight against AIDS.

Maier says her background helps her see HSA as part of a broad-based, historical movement for social justice. Workers' rights, first nations' rights, patients' rights – all are roads to the same destination: human rights.

Maier hasn't always had this awareness. Her political awakening came in her early 20s, when she was studying English in Kelowna.

"I was a political virgin. Then some friends of mine started a Native youth magazine. I thought it

would be about how to do your hair, put on lipstick, or it would have an advice column on dating – that kind of thing," Maier said. She took a job with the magazine because she wanted to develop her writing and editing skills. To her surprise

it turned out to be very different – the magazine dealt with social and political issues in a serious, often radical way.

"It opened my eyes to injustice and the lack of action and awareness around Native issues," says Maier. This ignited a latent passion for social justice, and Maier began to act as a political person – writing letters to newspapers, joining Native rights organizations, and getting involved in election campaigns.

Maier's next job was editor for *The Long Haul*, an anti-poverty magazine published by the Vancouver group End Legislated Poverty.

"I got a lot of education doing that job. As you can notice if you look at the name of the organization, we looked at poverty as being rooted in legislation and government policies. We looked at the structure of capitalism, for instance," she said. And while she was gaining an understanding of global structures, she was also finding insight on a very personal level.

"A lot of what I was learning led me to a better understanding of my own family. I grew up with a single parent and it was hard for us. Sometimes we were on social assistance, sometimes not. I was able to see what played into those factors...how poverty is rooted in capitalism and patriarchy," Maier said. However, Maier has no interest in claiming the victim role.

"I'm happy I've had that experience [of economic hardship] and that I wasn't as sheltered as some people. It created a need to fight for the underdog," she says.

After two years at *The Long Haul*, Maier went back to Kelowna to finish her degree. Right after graduation, she saw the Living Positive job adver-

"The job of a union is not just looking at our own contracts, but also at the rights of all individuals."

tised in the local paper. It seemed ideal for her. She applied, and got it. So far, it has lived up to her expectations. She fills her workdays organizing and presenting workshops at schools, treatment centers, colleges, and other venues, teaching people to prevent themselves from getting infected with HIV and Hepatitis C.

“There is an epidemic, and it’s important to make sure people are aware. What I heard at [the April 2005] convention was that HSA members take their jobs very seriously. We’re called the union of caring professionals. And that’s so true. I care a lot about what I do,” she says.

Appreciating solidarity

One of the things Maier has most enjoyed since getting involved with HSA has been opportunities such as the convention, training workshops, and events that bring her in contact with the larger labour movement. Such experiences give her “a sense of solidarity, connections with other union members, contacts with people that are going to remain in place for a long time,” she says.

In January, Maier attended The Canadian Labour Congress Winter School at Harrison Hot Springs.

“It was an amazing opportunity to meet other activists from around the province and to look at how strong the labour movement is, how many people are passionate about making sure it remains strong. I hope that labour can continue to be a big movement for social justice,” she says.

Maier is not one to hope passively. She brings her unique personal and professional background, her own ability to see the wider picture, as assets to her union work.

“I went to the BC Federation of Labour office once when I was working at End Legislated Poverty.

They have pictures of workers on the walls. I saw hardly any brown faces or people who could easily be recognized as Native. While I don’t believe there is a single Native perspective, I would hope to bring awareness of some of those issues to HSA.

“For instance, there is a strong history of native people in the labour movement, but it’s not often recognized,” she says.

Also, her awareness of economic injustice, honed at ELP, is still with her.

“At the CLC Winter School Jenny Kwan spoke. I asked a question around cuts to welfare. I hope to be brave enough to keep bringing up issues and asking questions that need to be asked,” she said. “The job of a union is not just looking at our own contracts, but also at the rights of all individuals. When we look at the role labour has played in entrenching rights we take for granted today, we can remember that the fight is for social justice in the larger context of what might be.” **R**

Nikki Maier, a charismatic speaker, described to HSA convention delegates the importance of becoming politically and socially involved.



Nikki Maier

Educator / Speakers’ Bureau Coordinator
Chief Steward
Living Positive Resource Centre

MEMBER PROFILE

Top marks for HSA member

by DAN KEETON

There are many HSA members who received excellent grades while training for their profession. But how many achieve one of Canada's top academic honours while studying for a new health sciences career?

Di Cindy Wu, who works evening and night shifts in the laboratory at Surrey Memorial Hospital, won the Governor General's award for the highest grade point average achieved in 2003. It's all the more impressive since English is Wu's second language, and one she seldom used before her relatively recent migration to this country.

And like all such honours, it was gratifying while potentially being somewhat of a burden.

"I was very happy," Wu said. "You know your hard work is recognized. On the other hand, it constantly reminds me to keep up the good work and always try my best."

"It's like a detective job. A patient comes in that you know nothing about, and you do all kinds of tests."

So far, she has. Wu has been on the job for one and a half years, and loves it. "I really like my job. It's quite rewarding; you feel very good if you know that you did something right, and helped save a person's life."

Such responsibility does rest on the shoulders of laboratory technologists, who perform a variety of tasks crucial to reaching a medical diagnosis. For Wu, the tasks include chemistry, hematology, trans-

fusion and accessioning.

Chemistry mainly involves blood and urine analysis. Hematology includes tests for blood cell counts and coagulation function, which is crucial in the prevention of clotting and strokes.

"Transfusion involves finding out what blood group you are, if you have any antibodies in your blood, whether there are any special requirements for the product you need," she said.

"Or in trauma cases, where they need a lot of blood quickly, then that's very stressful. You need to work very fast, and without mistakes."

Accessioning coordinates the collection of blood samples by lab assistants, entering the data into the computer system and ensuring that the specimen matches the patient. "There's a lot of communication and troubleshooting."

Wu's academic achievement is especially remarkable considering that as late as 1999, she lived in her native China. She was a biology teacher teaching in middle school – approximately Grades 6 to 10. Like many of her generation, she had been taught English, but seldom used the language in which she is now fluent.

When she and her husband emigrated to Canada, "I thought about other jobs – some kind of labour, maybe a supermarket or restaurant – but I didn't

Di Cindy Wu

Laboratory Technologist
Surrey Memorial Hospital



Di Cindy Wu, a laboratory technologist at Surrey Memorial Hospital, won the Governor General's award for the highest grade point average achieved in 2003.

think I'd want to do that my whole life. So I thought I should do something that I really like and related to my specialty."

Wu discovered the lab technologist program in a brochure from the BC Institute of Technology. "I found the program interesting, and not too far from what I knew," she said. She was accepted as a high school graduate into the two-and-a-half-year program.

It was anything but a cakewalk. "It was quite shocking. I had eight or nine courses in the first semester. There were so many books, and the courses were all in English. I thought, I really had to study hard to stay in this program."

The second year was easier: only five

courses and a somewhat lighter workload. "I liked it and was willing to spend time on the program. And I felt everyone else in the class was studying hard, too."

At present, Wu isn't certain what further goals she has, other than to obtain an advanced training as a registered technologist. Right now, she's enjoying her current job and what she calls its element of mystery.

"It's like a detective job. A patient comes in that you know nothing about, and you do all kinds of tests, take this sample and that sample," she said. "And the doctor puts all the pieces together and figures out what is wrong with that patient. It's great to be able to help." **R**


"You feel very good if you know that you did something right, and helped save a person's life."



Privacy survey reminder for HSA stewards

Recently, all stewards were mailed a HSA Steward Privacy Survey with a cover letter from HSA's Privacy Officer and a handy self-addressed return envelope. Special thanks to all who have filled out and returned it already. Your feedback is very helpful.

If you have not already returned your survey to HSA, please be sure to do so. If you are a steward and for some reason did not receive your survey, please contact the Privacy Officer at privacy@hsabc.org or by calling 1.800/663.2017 to have one mailed to you. **R**

<p>MOVING ?</p> <p>Your employer does not send us address changes. We depend on you to let us know.</p>	<p>RETURN TO:</p> <p> Health Sciences Association of BC 300 - 5118 Joyce Street Vancouver, BC V5R 4H1</p>	<p>OR EMAIL:</p> <p>memberlist@hsabc.org</p>
Member # (at top left of mailing label)		CHANGE OF ADDRESS
Surname		
Given names		
Facility/worksites)		
New home address		
City	Province	Postal code
Home email		
Home tel. ()	Work tel. & local ()	
<p>HSA is committed to using the personal information we collect in accordance with applicable privacy legislation. By completing this form you are consenting to have HSA use the submitted information for the purposes of conducting our representational duties as a union, and in providing services to our members.</p>		
ADM 0 035 CHANGE OF ADDRESS		

FOCUS ON PENSIONS

Online Pension Estimator gives you a peek into the future

Q: I hope to retire in 10 years, but I'd like to get a sense of how much my pension would be. Is there an easy way to figure this out?

A: The Municipal Pension Plan has an online pension estimator at pensionsbc.ca that can be useful in helping you make decisions about your pension.

The online Personalized Pension Estimator allows plan members to log on and call up their particular pension information, and then estimate a pension using different scenarios.

Even if you are only in your 20s or 30s, the pension estimator can give you an idea of how much income you can expect from your Municipal pension when you retire.

The instructions for the estimator are simple: Log on to pensionsbc.ca and click Municipal Pension Plan. Click on Personalized Pension Estimator in the "Tools" section.

You will be asked to enter your social insurance number and the date you began contributing to your

pension (from your latest Member's Benefit Statement). Click "go" and confirm, and your pension information will be displayed. The pension estimator is encrypted, so your information is secure.

There are four sections that you can change:

- your retirement date,
- your termination date,
- additional service that you may be able to purchase, and
- your highest monthly average salary.

Using these four fields, you can estimate your pension under several different scenarios. You can project how much your pension will be if you stay at the same job at the same salary. You can estimate your pension at any age between 55 and 65. You can determine approximately how much your pension would be if you stop being a plan member (ie terminate your membership). You can estimate by how much your pension will increase if you purchase service, and you can project your pension based on your earning a higher salary in the future.

Easy-to-follow instructions are available at pensionsbc.ca. **R**



In this regular feature, the Municipal Pension Plan answers frequently-asked questions. See pensionsbc.ca for more information about the Municipal Pension Plan.

Disability management: an increasingly significant challenge

by JEANNE MEYERS

There have been many shifts in the representational services HSA has provided to its members over the past fifteen years. We are proud to be able to point to increased and more specialized resources in a number of areas.

Within the broader bargaining unit there are numerous interests and the union has tried to balance them all to provide the most effective representation possible. In the mid '80s, issues of part-time work and benefits were at issue; in the late '80s and early '90s, the union addressed pay equity.

With the massive restructuring of the '90s, job/income security and professional/career opportunities were always at the forefront of the union's activities and bargaining objectives. Throughout the '90s, the bargaining units increased in number and size.

There is no doubt that wherever possible, an early intervention and a return to work will be in the best interests of an employee suffering from disability.

Increasingly complex issues

The HSA labour relations staff has kept pace, and the legal department has re-structured over the years. We endeavour to provide the best and most specialized resources possible to assist the work of the labour relations staff and union stewards. Along with increasing members, it



Jeanne Meyers
HSA Legal Counsel

became apparent in the late '90s that there was a trend towards more complex grievances, and ones which included a greater number of disability claims. To address the increased number and complexity of disability claims the legal department has identified specialized resources to assist in disability management issues and ensured that our advocates and labour relations officers have developed expertise in accommodation and return to work issues.

A successful accommodation or return to work takes a coordinated approach

There is no doubt that wherever possible, an early intervention and a return to work will be in the best interests of an employee suffering from disability. The union has tried to be proactive in that regard and has been a keen participant in early intervention pilot programs. But the test of the union's effectiveness which means the most to our members comes in its handling of individual cases.

We struggle to assess the workplace factors that will lead to the best success for an accommodation or return to work program. It is never just a case of performing job analysis to identify the physical demands of the job. Working successfully in this

Working successfully to return members to work also requires considerable negotiation and conflict resolution skills: without common goals, the best worksite policies or guidelines will fail.

area also requires considerable negotiation and conflict resolution skills: without common goals the best worksite policies or guidelines will fail.

A hypothetical case

I thought that it might be of value to provide a hypothetical scenario in which disability matters were effectively managed. I hope this provides some insight into the types of issues and complexity which challenge the union in this area.

Let's consider the hypothetical case where an HSA member has been out of the workplace on long term disability for several years. The diagnosis is Adult Attention Deficit Disorder (AADD) as well as depression. Although her doctors believe she can attempt a graduated return to work, it becomes clear the member will need to engage in some additional counselling sessions to psychologically prepare for her return to the work environment. Some assertiveness training and time management is also in order. After negotiation, the Healthcare Benefit Trust rehabilitation consultant arranges to cover the cost of these sessions.

But there is a further problem for, as a result of the member's illness, animosity is evident in the workplace. Other employees have had to shoulder additional duties which the disabled member will be unable to perform when she first returns. There is building resentment.

To counter this, several conflict resolution meetings are set up, initially without the disabled member present, and then a final meeting with the member present. The issues have to be aired openly without fear of reprisal. The employer and the union have to ensure that the employees understand that all parties and employees have obligations to work together in the accommodation process. This particular member is willing to talk about her disability as she wants her coworkers to understand her situation.

The sessions are successful in helping the employees understand their coworker's disability, and in establishing a non-hostile and welcoming environment for the return to the workplace. In addition, an in-service is provided with a medical professional to provide insight into AADD.

In terms of actual job functions and requirements, the employer makes adjustments. A quiet office with a non-shared computer is provided away from distractions for the employee. Duties and responsibilities are gradually increased over the period of several weeks.

In the past there has been some friction between this worker and her supervisor, so the employer arranges for the supervisor to attend at a leadership and supervising education course. Regular meetings with the supervisor are set up to deal with any concerns or issues on a timely basis. Ultimately, this return to work is successful, and the member returns to full time work.

What leads to success in a return to work scenario?

What did this successful outcome require? It required an understanding of duty to accommodate established through human rights law; an acceptance of the duties placed on all parties by that law; an understanding of the functional limitations of the member's disabilities supported by proper assessments; a responsible and respectful approach by management; a willingness to engage in conflict resolution where necessary; and a willingness of the member herself to do her part in working towards a successful outcome. We see these resources and capabilities developing in the workplaces, and the legal department is pleased to be able to assist a successful outcome wherever possible. **R**

Jeanne Meyers is HSA's Legal Counsel.

Advocating for members in PHSa lab restructuring

by ERNIE HILLAND

The Provincial Health Services Authority, like the other health authorities, is planning to restructure the labs within its jurisdiction. The laboratories in the PHSa are located at the BC Cancer Agency's Vancouver Cancer Centre, Women's and Children's Hospital, BC Centre for Disease Control (CDC), and Riverview Hospital.

Although the restructuring process has been ongoing since the fall, so far there has been little to show for all the uncertainty experienced by members since the initial announcement.

Every timeline the PHSa has given the union has so far proved unworkable, and no announced date or deadline has been met so far. Throughout this process, your stewards and labour relations officers have been working to ascertain the changing terrain, and to advocate for the best possible outcomes for HSA members and for the laboratory system in which we work. Many members at PHSa lab sites have attended recent information sessions with HSA's representatives, explaining the employer's process. Once the employer announces further information regarding its plans, HSA will meet with members to share information, and inform you what your union is doing to minimize disruption and explore opportunities for members.

Information is slow in coming from administration, and rumours are rampant. Last November, we were called to a meeting and given an update with little actual information. As well, the Lane Level Lab was initially supposed to have opened in mid-December, and there have since been two further announced target dates that came and went without outcome.

The employer reports that the Lane Level Lab will soon be opening; however, there are currently no clear plans that have been articulated to the union, and the employer seems unwilling or unable to provide further details. Because this is the first of many steps in the employer's restructuring plan, the union is seeking clarification of current plans and developments. This lab will be located in the CDC, whose lab technologists are represented by the BC Government and Service Employees' Union.

The ultimate goal of the restructuring, according to the employer, is one seamless integrated laboratory system. To this end, there are three initiatives in the early stages:

1. common administration of all the laboratory services within the PHSa;
2. a single laboratory information system;
3. a single accessioning area for all referred-in specimens in the PHSa – the Lane Level Lab.

Of these, the only attained goal so far is that of the senior administrative physicians being hired in mid-May.

Issues of concern to HSA revolve around paramedical work. BCGEU is the certified bargaining agent for paramedical professionals in the CDC. An agreement needs to be reached between HSA, BCGEU and PHSa human resources to



Ernie Hilland, Region 6 Director

protect the best interests of all lab workers. The PHSa is unique among the health authorities in that there is no authority-wide bumping and job posting agreement. This too will have to be negotiated, and your HSA representatives will explore all options that offer greater job security and opportunities for members. Over the years, HSA staff have gained a wealth of experience in assisting members through the challenges of laboratory restructuring. In this instance, the process will be somewhat more complex: we will be working with our sister union, the BCGEU, in representing the best interests of all paramedical professionals caught up in this process.

What is not yet known is what impact this will have on the HSA job classification structures at each site.

Many sections of the laboratories at BCCA currently don't have a laboratory information system. For those sections of the laboratory, a lab information system could be a great improvement. However, for sections of the laboratory that have a pre-existing information system, whether the new system is as good as what they had remains to be seen.

Overall, a PHSa-wide lab information

Continued on next page

Mourning for the dead, fighting for the living



On April 28, labour activists gathered to mark the annual Day of Mourning for workers killed and injured on the job. [above] In New Westminster, Region 3 Director Maureen Ashfield with former HSA member Kate Rowbottom, whose son was seriously injured in a workplace accident; [below] in Vancouver, Region 6 Director Ernie Hilland lays a rose on the Workers' Memorial in Hastings Park.

PHSA lab restructuring

Continued from previous page

system should be an improvement if it is done right, which requires a commitment to spend sufficient time and resources. In any case, the new information system will change the way everyone works – and may be a source of anxiety.

In addition, the employer is reassessing the scope of practice of laboratory technologists.

The specter of change has many HSA, BCGEU, and HEU members apprehensive. HSA will continue meeting with the employer to encourage further clarification of all these issues, and will continue to inform members regarding new developments. **R**

Ernie Hilland represents Region 6 on HSA's Board of Directors.

THE Report MAGAZINE

The Report is dedicated to giving information to HSA members, presenting their views and providing them a forum. The Report is published six times a year as the official publication of the Health Sciences Association, a union representing health and social service professionals in BC. Readers are encouraged to submit their views, opinions and ideas.

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The 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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PROUD TO SAY I'M HSA

Occupation buttons available from HSA



New buttons were a big hit with convention delegates



HSA CONVENTION DELEGATES have passed numerous resolutions calling on the union to raise the profile of health science professionals and community social services workers.

One of the most effective ways to promote our professions is to ensure we are visible in our workplaces. To that end, we have designed a series of buttons that will help identify you to patients, clients and their families. Previewed at convention this spring, these buttons were a big hit among union stewards and activists.

Please see your steward to place an order. Buttons are available for various professions, and available for a limited time. Deadline for orders is Monday, September 5, 2005. Orders must be coordinated by stewards and submitted to the HSA office using one order form per facility.

Stewards: if you did not pick up an order form at convention, please contact Pattie McCormack at the HSA office to receive your copy.



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