

NEWS BULLETIN

VOLUME 4, NO. 3

OCTOBER, 1980

UNA wins better staffing at Medicine Hat

U.N.A. Local #70 in Medicine Hat recently requested that the union lodge a complaint on the local's behalf, concerning the level of nursing care provided by the employer at the Medicine Hat Auxiliary Hospital. The particular concern was the night shift, when only one R.N. was on duty and consequently was responsible for 100 patients located on two floors of the hospital.

U.N.A. filed a complaint with the provincial government's Health Facilities Review Committee. The complaint alleged violation of The Operation of Approved Hospital Regulations under the Alberta Hospitals Act. The specific sections alleged to have been violated were: Section 26(4) which states:

Adequate graduate nurse coverage shall be provided at all times in the hospital.

and Section 33(1) which states:

Each hospital shall strive to meet the standards for accreditation of hospitals established by the Canadian Council on Hospital Accreditation.

Expanding on the latter section, Standard II in the Nursing Service section of the Guide to Hospital Accreditation was cited. It states:

There shall be a sufficient number

of registered nurses, who hold current registration and/or licensure in the province or territory, on duty at all times to give nursing care that requires professional judgement and skills and to plan, assign, supervise and evaluate the care given.

The Health Facilities Review Committee referred the complaint to the Institutional Operations Branch of the Department of Hospitals for investigation and recommendation. The outcome of the complaint was satisfactory since suddenly more staff was hired and now two R.N.s are assigned to the night shift.

In following up on the complaint, U.N.A.'s Calgary-based E.R.O., Mike Mearns, was surprised to learn that the Institutional Operations Branch does not have any written guidelines as to what constitutes "adequate graduate nurse coverage". Investigating staff take into account the number of patients, the level of nursing care required by each patient and the number of nurses on duty. Rare instances of inadequate coverage are not a good basis for complaint but a general pattern of inadequate staffing will bring about corrective recommendations that hospitals are unlikely to ignore.

U.N.A. encourages its members to



Arline Kroetsch (right) and Merline Hornberger (left) both from Macleod Municipal Hospital concentrate on learning the techniques and methods needed to effectively run a Professional Responsibility Committee. UNA members attended the day long Professional Responsibility workshop organized by the South District and the provincial office in mid Sept. in Lethbridge.

use the process used by Local #70 in order to achieve better nurse/patient ratios. This will ensure that patients receive the care to which they are en-

titled. Do not hesitate to contact your assigned Employment Relations Officer if you wish to pursue a complaint similar to that of U.N.A. Local #70.

Labour Act:

Minister hints at changes in fall

Labour Minister, Les Young, recently announced his intention of introducing major amendments to the Alberta Labour Act in this fall's session of the legislature.

The proposed amendments, which have not yet been made public, will undoubtedly address many sections of the act that are important to UNA members.

In late August, UNA's steering committee (the chairman of the various executive board committees) and chief executive officer, Simon Renouf, made a formal presentation to the labour minister and labour department officials.

The union's presentation was based on a brief sent to the department last January.

Among the changes UNA is proposing are:

- the Board of Industrial Relations be given the power to grant certifications in cases where the employer is guilty of unfair labour practices
- mandatory dues checkoff in all collective agreements
- removal of much of the labour

minister's powers to delay conciliation proceedings

- deleting the controversial back-to-work power held by the provincial cabinet.

Referring to division 15 of the act, which contains the controversial section 163 under which the government can order striking workers back to work, the union's brief said: "The right to strike is an essential condition for a functioning collective bargaining system. Removing the right to strike or even being able to threaten the removal of the right to strike, distorts the collective bargaining process."

"The United Nurses of Alberta and other hospital industry trade unions are familiar with the distortions in collective bargaining created by the existence of division 15 of the act. It appears to us that employers may attempt to provoke a strike in the hope that division 15 will be invoked and that a form of compulsory arbitration will ensue."

Commenting on the process of legislative amendment, Renouf said, "Clearly, if we want to avoid amend-

ments to the labour act which make our bargaining system even more anti-union than it is now, all UNA members must begin to organize for an effective lobbying campaign this fall."

Material concerning the proposed labour act amendments and lobbying tactics is being prepared by UNA provincial office staff, and will be sent to all locals.

Hardisty Nursing Home:

UNA members vote on strike action

UNA members at another Edmonton nursing home, Hardisty, will be voting on strike action in early October.

The nurses at Hardisty are seeking a wage increase of about 29 per cent over 15 months. Although their wage demand may sound high the nurses are just trying to catch up to nurses' salaries in provincially run nursing homes.

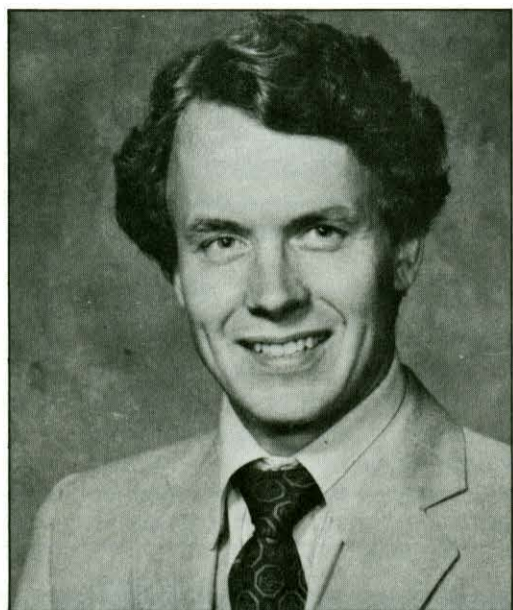
The other issues in the dispute include ten holidays per year, the introduction of a sick leave provision, and the Rand formula.

Simon Renouf, UNA Chief Executive Officer, commenting on the Hardisty situation said "Clearly the main difficulty we are facing in the nursing home industry is the reluctance of privately owned, profit making corporations to accept the reality of improved wages and working conditions for nurses."

Hardisty like other privately owned nursing homes receives a daily subsidy of \$21.25 per patient from the provincial government.

C.E.O. REPORT

By Simon Renouf,
Chief Executive Officer



Nursing shortage continues despite UNA contract

Did U.N.A.'s 1980 collective agreement provide a solution to Alberta's nursing shortage? Apparently not.

Recent reports indicate that the number of officially vacant positions in hospitals has increased since the spring and now stands at more than 700. Also, there is a "shadow shortage", a large number of new positions that hospitals would create if financial constraints were loosened. With changed fiscal policies we could probably provide jobs for 1,000 nurses in Alberta today.

Where will they come from? The point we should make to the public is that there are enough nurses in Alberta now to fill those jobs. But they are just not interested in working in the hospital industry under the present circumstances.

What is the solution? We must understand that the problem itself is complex. Income levels certainly were inadequate and we still have a long way to go to arrive at a fair level of compensation for nurses. But wages were never the only problem. Shift work, lack of adequate child care, and planned understaffing all contribute to dissatisfaction with the job. Also, nurses feel that they have little or no say in important issues of patient care. Our newly negotiated professional responsibility clause was intended to address this last problem: only time will tell if it is to succeed.

What is needed now most of all is some creative thinking in the hospital industry, and a consensus that attention must be paid to guaranteeing high levels of job satisfaction for nurses.

SPEND MORE ON PEOPLE

Let us encourage the Alberta government to spend less money on high technology equipment and fancy consultants and spend more on people.

Hospital management can be characterized as authoritarian, hierarchical and highly resistant to innovation from below. For 50 years we have tried to run hospitals on a paternalistic basis. It's time we recognize that this style of management is part of the problem of staff shortages. As such it is incapable of providing the solution.

Industrial democracy has worked in some industries. Let us try an experiment where at one hospital the nurses elect their own supervisors, decide who gets the educational leaves of absences, and do their own scheduling on a co-operative basis.

Let us try more two-shift rotations (day/night or day/evening). Let us make the provision of day care a major priority in the larger hospitals.

It's time for a new look at hospital management.

* * * * *

As a final note, some have suggested that nurses are themselves to blame for the shortage because they haven't been good promoters of the profession. It seems to me that this reasoning is backwards. Nurses aren't likely to recommend the profession to anyone until they are satisfied themselves that the compensation, working conditions, and job satisfaction are reasonable.

What is your view on the nursing shortage?

Annual Meeting:

More than 200 delegates expected

Constitutional changes, a debate on the desirability of the baccalaureate nursing degree, and a presidential election are all on the agenda for U.N.A.'s third annual meeting, to be held in Lethbridge on November 12 and 13.

The first day of the annual meeting will feature reports from the executive board committees, the chief executive officer, president and secretary-treasurer. For the first time this year, following a directive from the 1979 annual meeting, the secretary-treasurer's report will contain the union's proposed budget for 1981. As in the past, the report will also contain the audited financial statements of income and expenditure for the U.N.A. for 1979.

Another factor is that all reports will be mailed out to each local more than a month before the annual meeting in order to allow delegates to raise questions about those reports on the floor of the meeting.

Among the constitutional amendments to be discussed are a procedure for disciplining members who undertake activities contrary to the goals of U.N.A., and a proposal to establish a fixed percent of U.N.A.'s revenue to be directed to the Emergency Fund.

BSC RESOLUTION DRAFTED

At the direction of the executive board, a draft resolution has been prepared to stimulate debate on the desirability of promoting the baccalaureate program within nursing.

This matter has been subject to considerable discussion within U.N.A. and within nursing circles in general for some time. It is expected that the annual meeting debate will result in a firm union policy on the subject.

The second day of the annual meeting will commence with elections for the positions of president and secretary-treasurer. (The next election for the position of vice-president, currently held by Donna Clark of Calgary, will take place in 1981.)

Also on the second day, about ten district representative positions are open for election including a number of positions newly created at last year's annual meeting in the populous North Central and South Central districts.

The 1980 annual meeting will be held in the attractive Lethbridge Lodge hotel. More than 200 delegates are expected to attend the meeting. As well for the first time, full provincial office funding, including salary replacement, accommodation and travel expenses will be provided for the first two delegates from each local. Provincial office will also provide meals to additional delegates and observers, however, the local is responsible for funding their travel expenses and salary replacement.

Any U.N.A. member wishing to attend the Annual Meeting as a delegate or observer should contact a member of her local's executive before October 31.

Article 37:

Professional Responsibility is nurses' responsibility

This new article has given hospital nurses a channel through which they can voice their professional concerns. It is an article that is essential to nurses charged with every increasing responsibilities even though it has been perceived by some employers as a curtailment of their management authority.

But any real loss is very small when compared to the potential loss of livelihood for nurses who are frequently expected to work in conditions that, as professionals, they know to be wanting.

The United Nurses of Alberta members in each hospital are entitled to have four members represent them on this committee. The employer may, but not necessarily, have an equal number. The employer may not, however, have more representatives than the nurses.

The committee is to meet at least once per month but is not to be restricted to only one meeting per month.

Each party may appoint alternates to represent them on this committee. To build up the number of experienced representatives, we recommend that four members where practical, attend all professional responsibility committee meetings.

RECOMMENDATIONS NOT BINDING

The committee can only make recommendations which are not necessarily binding on the employer. Should the recommendations not receive thorough consideration,

however, it will only serve to increase the need for a stronger committee.

Some suggested functions and objectives of this committee are:

1. To provide documentation so that recommendations made by the committee may be as informed as possible.
 - in the event that issues raised by local committees are not resolved, they may be referred to the provincial negotiating committee of U.N.A.
 - documentation completed at the local level could be elaborated upon through the experience of other locals to provide the negotiating committee with a substantial base of knowledge on particular subjects.
2. To protect our members from any liability which may arise as a result of their employment relationship.
3. To improve the working conditions within each hospital.
4. To improve patient care.
5. To establish a valid role of the union in professional concerns.

Almost everything falls within the terms of reference of this committee as most concerns can be related directly or indirectly to patient care. It is your committee. Make good use of it.

One question which has arisen concerns meeting times. It is the position of the United Nurses of Alberta that the contract covers terms and conditions of paid working time and this is a contract item. Therefore, this committee should meet on "company time".

EDITORIAL

Nursing homes for profit?

Elsewhere in this edition is an article on the current bargaining situation at two U.N.A. locals where the members are employees of privately-owned nursing homes.

Regardless of the final outcome of these difficult and protracted negotiations, surely it is time U.N.A. took a position on the issue of the profit motive in the nursing home industry.

We in Canada are proud of our publicly owned hospitals, and we like to contrast them favourably with those hospitals in the United States which are operated primarily for profit. We recognize that when making money is the main priority, patient care cannot be uppermost.

And when profits must be made on income which comes largely from government grants, as is the case in our nursing homes, there is an additional incentive for the owners to keep staffing levels — and compensation — as low as possible.

Why do we still allow private profit to be made from the care of our elders?



UNA 117 vice-president, Gertie Kmech (left) and Local president, Bea Cipryk (right) discuss what actions to take next in their strike against Parkland Nursing Home. Local 117 went on strike in late Sept. to press for better wages and benefits.

Parkland Nursing Home:

Nurses strike for better deal

Nurses at Parkland Nursing Home, a privately owned home, in Edmonton took to the street in late September to back contract demands.

The 19 nurses, members of UNA Local 117, voted 13 to 1 in favour of strike action after negotiations between Parkland and the union broke down in late August.

In order to demonstrate support for the striking nurses and to force Parkland's hand UNA called on all nurses to boycott Parkland Nursing Homes in the province for the duration of the strike.

The major issues in the dispute are wages, responsibility pay, shift premiums and vacation time.

Local 117 members who earn about \$3.00 per hour less than nurses earn in provincially owned institutions are seeking parity with nurses at Central Park Lodges in Calgary and Grande Prairie.

In addition the union is asking for 50 cents per hour responsibility pay and 20 cents per hour shift premium. As well the nurses are seeking more annual vacation time. Currently, Local 117 members receive two weeks vacation during the first five years of service at Parkland.

Parkland has claimed that it cannot financially afford to meet the union's demands but Parkland's owners, the Cascade Group, said in its 1979 annual report to shareholders that once again its nursing homes have enjoyed a good year with "cash flow surpassing all previous levels." In fact Cascade's homes have enjoyed such a good monetary level that the company saw fit to build another nursing home in Dartmouth, Nova Scotia in the last quarter of 1980. Cascade currently owns 12 nursing homes in Alberta and one in Halifax.

And to add to its coffers Parkland along with other privately run nursing homes with more than 100 beds receives a daily subsidy of \$21.25 per patient from the provincial government.

"Taxpayer's money is used to fund private nursing homes supposedly to provide good nursing home care," UNA staff member Dave Thomson said. "But when you have business wanting to make a profit from those funds there's a built-in incentive for them to keep wages low. And when wages are low there's a high-turnover in nursing staff which leads to a regular disruption of the residents' lives and care," he said.



Hundreds of Alberta Union of Provincial Employees members in a show of strength demonstrated at the provincial legislature in late July in order to put pressure on the government to lift provincial wage guidelines. The AUPE members were seeking wage settlements similar to those wage increases won by UNA in the spring.

AUPE breaks guidelines

This has been a year of labour turmoil in Alberta.

For our fellow union members of the Alberta Union of Provincial Employees, July 1980 marked a period of determination and fortitude when thousands demonstrated their discontent with their employer.

The two major issues in the strike were wages and a desire to gain basic bargaining rights enjoyed by the rest of organized labour in the province.

At the AUPE's annual convention held in November 1979, a unanimously supported mandate was issued. The fundamental objective was the negotiation in 1980 of adequate pay increases after years of wage restraints and the growing pressure of inflation.

Provincial government employees like other public sector workers have borne the brunt of arbitrary restraints since 1975 when the Alberta government entered into the federal Liberal government's wage guideline program.

For the last four years wage increases have consistently lagged behind increases in the cost of living. Large portions of the provincial service have lost as much as 16 to 20 percent in real buying power during that time.

POVERTY LEVEL WAGES

Half of the provincial government employees earn an average salary below the \$14,000 per year level established by the Canadian Council for Social Development as the func-

tional poverty level for a family of four.

This year the government, through the provincial treasurer publicly proclaimed guidelines of 7½ - 9%. Attempts were made by A.U.P.E. through its "apples and oranges" public relations campaign to get MLA's and the general public to recognize that the proposed guidelines were inadequate.

As negotiations progressed during the first weeks of April, it became increasingly evident that government officials were unresponsive to the bargaining proposals of the union. In frustration, union members took to the picket lines to contest anti-strike legislation.

AUPE DEFIED ORDER

The government obtained a back to work order through the courts, a tactic that is not new to the members of U.N.A. who confronted the same move during their past negotiations with the Alberta Hospital Association. A.U.P.E. members defied the order on the grounds that they would return to work only when the government instructed its negotiators to bargain meaningfully and realistically.

Before the court, members were brought up on charges of civil contempt. In an attempt to avoid further conflict with the courts, members returned to work and awaited convincing proof of the government's good faith in negotiating fair and reasonable settlements.

BILL 41 DISPUTED

The second issue in the dispute is Bill 41, The Public Service Employee Relations Act.

In 1971, when he was leader of the opposition Peter Lougheed promised provincial government employees the same basic bargaining rights (association, collective bargaining and the right to strike) as held by other working people in the province. In May 1977, as premier, he introduced legislation concerning provincial employees which has been labelled as the most regressive labour legislation in Canada.

The question of the validity of Bill 41 is to be brought before the Supreme Court of Canada.

Since Bill 41 affects three hospitals whose employees are members of U.N.A. (Alberta Children's, Glenrose and Foothills) the executive board of U.N.A. has authorized our legal counsel to seek intervenor status. This will allow U.N.A. the right to speak up against this legislation at the same time as counsel for A.U.P.E. presents its case to have the Public Service Employee Relations Act quashed.

Grievances, success without arbitration?

In large or small locals, with grievance committees or without them, with ward reps or without them — whatever system you choose — it is necessary to learn how to use the grievance procedure. This is the method laid out in your collective agreement for resolving differences of opinion between an employee and his or her employer or between the union and management.

Once the contract is in place, it is inevitable that there will be disputes regarding the "interpretation, application, or alleged violation" of the collective agreement.

Without the grievance procedure there would be no means of settling these disputes. What advantages can there be to this process? The most ob-

vious answer is that it allows for a final and binding decision to be made by someone who is not directly affected by the matter (neither the hospital or the union).

As well, the grievance procedure allows the parties to get together and resolve their own problems. Discussion, negotiation, compromise or concession are all possible at any time during any stage of the grievance procedure. Many grievances are resolved at these early stages — without the necessity of going to arbitration. Some examples of recent grievance settlements are:

- Two psychiatric nurses filed a grievance asking for an adjustment to the nursing pay scale and for this adjustment to be made retroactive to their

date of hire. A settlement was negotiated and seven psychiatric nurses were paid retroactively pay to January 1, 1980. For those employed throughout that period, settlements amounted to as much as \$2,600 per nurse.

- A public health nurse employed part-time by a health unit, was denied sick benefits by her employer. The health unit claimed she was casual and therefore not entitled to them. A negotiated settlement resulted in back pay for this nurse of \$1,100.
- A nurse on sick leave for three months obtained a clean bill of health from her doctor and notified the hospital that she was ready to come back to work. Instead of taking her back, the hospital attempted to place her on two years of additional sick leave. This was grieved and the matter has been resolved as follows:

The nurse has been reinstated with back pay, conditional on her agreeing to receive one medical check-up per month for a period up to one year.

- Two nurses in separate hospitals grieved an incorrect placement on the nursing pay scale, (failure to recognize previous experience). Each was a long-time employee. One hospital adjusted the pay rate, as a result of initial discussion. The other hospital involved the Alberta Hospital Association and the matter was finally resolved just prior to arbitration. For both nurses, pay was adjusted from the date the grievance was filed.

- Part-time and casual staff working a twelve hour shift were only being paid straight time rates throughout. The matter was resolved when all part-time and casual staff received retroactive pay settlements of time and one-half for all hours worked in excess of 7½ hours on each shift. Depending on amount of time worked, cheques totalled over \$1,000 per nurse.

These grievance settlements are the result of staff nurses throughout Alberta asserting their contractual rights and working with their local unions to achieve them.

Daycare committee:

Pilot project investigated by union committee

A joint union committee has been established to investigate and prepare a report on day care for hospital employees.

Representatives from the Alberta Union of Employees, Health Provincial Sciences Association, Alberta Association of Registered Nursing Assistants and the United Nurses of Alberta, met in early August. The meeting resulted from UNA negotiations last spring when the hospitals agreed to a clause in the contract which stated that an interunion committee would be established to work with the Alberta Hospital Association for the purpose of investigating the costs, benefits, alternatives and needs for child care in the hospital industry.

To date, this interunion committee has not met with the AHA and the AHA has yet to nominate its representatives. Meanwhile the deadline for preparing a report on the day care question is October 28, six months from the date that the collective agreement was signed.

The union representatives, however, have agreed to establish two pilot projects to demonstrate the need and to investigate both the costs and alternatives in those pilot areas rather than doing a research study. The two suggested areas for pilot day care projects were Grande Prairie, where there is a drastic nursing shortage and the area around the Glenrose, Royal Alexandra and Norwood hospitals in Edmonton. In Grande Prairie, the hospital has already taken some initiative in establishing a committee to investigate the feasibility of establishing a daycare centre.

In Edmonton, the UNA local at the Glenrose hospital expressed some in-

terest and an organizing meeting was held in late August for all interested people working at any of the three hospitals or unemployed persons who might return to work if child care were available.

A steering committee along with working committees were established to investigate need (by surveying the hospital workers at the Royal Alexandra, the Glenrose and the Norwood and Dr. Angus McGugan), space and licensing requirements, and alternatives in the area of infant care.

The provincial daycare scene is now in a state of flux. Improved daycare standards along with changes in provincial subsidy rates were recently announced. As well there may also be restrictions regarding the kind of centres or child care facilities which can be operated. For example, government policy appears to favour the establishment of family day homes for the care of children under aged 18 months. But unanswered questions include whether additional funding would be made available for centres operating outside the normal 0700 hour to 1700 hour day.

Current members of the committee are Carolyn Gibbons, Irene Struck, Norine Lowry, Elsie Achtemichuk, Jamie Jones, Linda Mikus, Ken Saunders, Linda Acheson, Sharon Daniel and Josephine Schmidt. In addition, Brenda Roberts and Maggie Dick deserve special mention for coordinating questionnaire distribution at their own hospitals.

Any hospital worker who wishes to become involved in designing and developing this pilot project, may contact Joanne Monro at the United Nurses of Alberta.

EDUCATION/PUBLICATIONS OFFICER hired

The new position of Education/Publication Officer, advertised in the June U.N.A. Newsbulletin, has been filled. Marilyn Burnett, 29, commenced her employment with U.N.A. on September 29. A graduate of Glendon College, York University, Ms. Burnett for the last two years was editor of Co-operative Press Associates, Canada's only labour news service. In that capacity, she was responsible for producing a weekly news service for union publications in Canada. Previous work experience includes editing a community newspaper, *The Toronto Clarion*. Following university, Ms. Burnett was an organizer with the Ontario Federation of Students where she was involved in press liaison, writing and designing pamphlets, and organizing workshops. Her community activities include editing *Upstream*, an Ottawa based woman's newspaper and active involvement in support committees for striking Inco workers and Radio Shack employees.

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UNA welcomes newcomers

U.N.A. welcomes the following newly certified Locals:

Fort Vermilion - High Level, U.N.A. Local #124 — 18 members

Mary Immaculata, Willingdon, U.N.A. Local #127 — 5 members

Thorhild County General Hospital, Redwater, U.N.A. Local #128 — 12 members

CHANGE OF ADDRESS

U.N.A. members are asked to complete the form below to advise the Union of any change of address or employment. This will enable us to continue to send you information as quickly as possible.

Name: _____

Address: _____

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