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Message from the President

Welcome November and we must first tribute our veterans who have so bravely fought for our country and freedom. Our thoughts are with the families that have soldiers now fighting to secure peace in Afghanistan.

October was busy with UNA- AGM in Edmonton - Local 115 went with 44 voting delegates and observers to participate in the elections and business of our union. Many terrific education sessions were also presented.

Christmas hours should be posted and Art 18 clearly states the requirements for your time off- we have had to file some grievances to deal with these issues. Next will be the Vacation Planner posted Jan 1/07 - important to mark on the vacation Planner your requests for the ENTIRE Year from May 1/07 to April 30/08. Mark in blocks of time e.g. Dec 1-10 means you have the entire block off and whatever days you are working during that time will be marked as vacation if approved.

Many units are changing rotations and this would cover whatever rotation you are in at the time of vacation. So start thinking about that. This month Local 115 delegates go to the Demand Setting meeting to discuss and vote on our proposals for our next contract. Following that meeting there will be our Local AGM meeting on Dec 6/06 and then Information meetings to provide info and discussion about the proposals followed by a ratification vote on Jan 11/06.

Hope to see you at the meetings.

Take care,

Michelle M. Senkow RN, BScN
President, Local 115
United Nurses of Alberta

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Local 115 is holding a Draw for 5 nurses to go to the 1 day Nurse Abuse Workshop

Date: To be Announced

Enter your name via UNA mailbox by December 15, 2006 to Local 115 Nurse abuse workshop.

A one day wage replacement will be provided to those who attend.



Getting ready for provincial negotiations

In 2007, UNA will go into provincial negotiations; fully four years after the last round began. All members can participate in a number of ways in setting the negotiations priorities and agenda. This calendar for 2006 & 2007 highlights the main steps in preparing for negotiations. Locals will be considering and drafting proposals for what members want to see in the next agreement as well as considering nominations to the Negotiating Committee. Check with your Local for these crucial meeting times.

November 28, 29 30 Provincial Demand Setting Meeting (DSM) – Edmonton

January 11, 2007 Members Ratification Vote on in-going proposals

January 2007 Bargaining begins, exchange of proposals on provincial agreement

Special UNA Local 115 Notice

Please make sure you have your UNA Membership Card and that your information is up to date (i.e. address and phone numbers). Negotiation time is approaching and the phone Fan - Out lists needs to be accurate. Please submit your changes by contacting the UNA Local 115 Office.

On the Lighter Side

Sick Leave Policy

TO: ALL EMPLOYEES

SUBJECT: SICK LEAVE POLICY

SICKNESS: No excuse. We will no longer accept your doctor's statement as proof. We believe that if you are able to go to the doctor, you are able to come to work.

AN OPERATION: We are no longer allowing this practice. We wish to discourage any thoughts that you may need an operation. We believe that as long as you are an employee here, you will need all of whatever you have and should not consider having anything removed. We hired you as you are, and to have anything removed would certainly make you less than we bargained for.

DEATH: Other than your own. This is no excuse for missing work. There is nothing you can do for them, and we are sure that someone else can attend to the arrangements. However, if the funeral can be held in the late afternoon, we will be glad to allow you to work through your lunch hour and subsequently let you leave 1 hour early, provided your share of the work is ahead enough to keep the job going in your absence.

Your own: This will be accepted as an excuse. However, we require at least two weeks notice as we feel it is your duty to train your replacement.

ALSO Entirely too much time is being spent in the restroom. In the future, we will follow the practice of going in alphabetical order. For instance, those whose names begin with "A" will go from 8:00-8:15, and so on. If you're unable to go at your time, it will be necessary to wait until the next day when your time comes again.

We appreciate your cooperation. – Hospital Administration



UNA AGM 2006 Banquet Photos



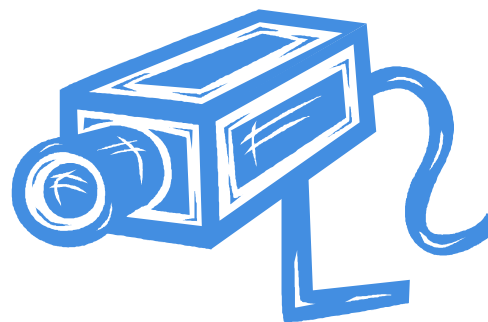
Calgary ER triages get video cameras

Nurses at the Rockyview Emergency Department were startled this week when crews arrived to install audiovisual camera monitoring equipment at the desk. The nurses were concerned the Employer would use the camera to oversee their work and that it would increase stress levels for triage nurses.

It turns out that the Calgary Region had contacted UNA at a couple of levels to discuss the video monitoring, but it had failed to actually consult Emergency nurses and explain how the equipment would be used.

Many emergency nurses have been asking for video monitoring for years to protect staff and discourage abusive behavior by patients and families at triage. Nurses from the Peter Lougheed Centre were welcoming the installation of cameras.

UNA continues to discuss implementation of the video system with the Calgary Health Region.



Heather Smith re-elected at UNA meeting in Edmonton



Heather Smith was re-elected provincial President of the United Nurses of Alberta at the nurses' unions convention in Edmonton, Thursday.

Chandra Clarke, a nurse from the Edmonton Grey Nuns Hospital, was also nominated for President.

"I'm honoured to continue representing nurses," Heather Smith said when the results were announced. "Our members are confident in their union as we face a trying time for nursing," she said. "The shortage of nurses, the workload, stress and extra hours working is taking a toll on our Registered nurses. And we are going to work through our union to try to solve these serious problems," Heather Smith said.

In her speech to the members, Heather noted that the upcoming provincial negotiations will have to directly confront the issues of the shortage, retaining and recruiting nurses.

"We have to solve these problems, and we will," she said.

Nearly 700 nurses, observers and voting delegates were at the convention held at the Agricom in Edmonton.

UNA is the union of over 23,000 Registered Nurses, Registered Psychiatric Nurses and a small number of allied health care workers.



UNA sending members to CFNU Biennium

The biennial Canadian Federation of Nurses' Unions convention will be held in St. John's Newfoundland June 4 to 8, 2007.

Electronic Health Records: Public Liability or Practical Asset?

By Kate Rexe, CFNU Researcher

Nurses recognize that good records and quick access to information enables for the provision of safer care, but time spent on information management is sometimes seen as decreasing the actual quality of care¹. Question marks exist as to whether the move towards Electronic Health Records will improve the safety and quality of care, especially in regards to freeing up time with patients, time currently spent retrieving or recording the relevant information.

Whereas it is generally acknowledged that patient safety will be improved by Electronic Health Records, there are concerns about the safety of the information itself, especially in the post 9/11 era. This article weighs the pros and cons of Electronic Health Records, ultimately concluding that they are a necessary, exciting development and that the risks of privacy violations can and must be minimized.

What are Electronic Health Records?

As electronic records emerge as a concept in healthcare, there is some uncertainty as to what the terminology really means. The labels given to electronic records vary depending on the nature and use of the files. For example, shared files in a hospital are categorized differently than records in a private doctor's office. And, a file that can be shared regardless of hospital, city, region or province is different from what is available in the health system today.

The following definitions identify the differences between the various types of records, with the hope that concise terminology can create a clear understanding of the uses of electronic files in the health system.

Electronic Medical Record (EMR) – the electronic record in a physician's office
Electronic Patient Record (EPR) – the electronic record in a hospital or facility
Electronic Health Record (EHR) – the longitudinal electronic record of an individual that contains data from multiple EMRs and EPRs

This article will examine the opportunities and challenges of moving Canada's healthcare system to Electronic Health Records (EHR).

EHR – Taking healthcare into the 21st century

EHR have been identified as the way of the future for both the medical system and patient care. International experiences have taught us that from a patient care perspective, a national system has the potential to reduce wait times, better manage medication errors, drug reactions or problems resulting from inaccurate or incomplete medical records. From an economic perspective, an Electronic Health Records system has the long-term potential to reduce costs within the public system by better managing resources and improving efficiency. Notable cost saving comes from the sharing of information, which results in the elimination of duplicate tests and procedures.

Electronic records will offer new opportunities because a patient's full medical history will be available for consultation, regardless of the patient's location and over the course of their lifetime. This is a valuable advancement in healthcare because it identifies symptoms and red flags for future consideration in care. The system can be used to identify problems early because the record is based on recorded evidence as opposed to a patient's memory or how they are feeling on a particular day.

Given the current priorities set out by government, EHR can offer solutions to lengthy wait times, improving efficiency, reducing costs within the public system and improving the quality of care for patients.

Challenges

There are, however, some practical challenges to implementing EHR. For example, the cost of developing a system of longitudinal electronic records is unknown, but understood to be enormous. This takes into account the cost of technology, as well as developing a compatible system across Canada. In 2000, Canada Health Infoway, a national nonprofit organization, was given \$1.2 billion by the federal government to get EHR up and running. The original goal was to have 50% of the population with an EHR by 2009. At present there is an electronic health record system (EHRS) blueprint with a technology framework to guide the sustainable development of interoperable EHRS across Canada. However, the IT systems that exist are fragmented and lack standards for data, terminology and consistent use.

Other concerns relate to clinical acceptance and the pragmatic ability to make the shift to electronic records. EHR have been a tough sell to an aging and overworked workforce. Not only that, the process is long and arduous, with many fine details. On average, it takes three to five years to recognize results, thus making it difficult to justify the costs. The solution to this is to look for small victories and to find champions who support the transition, because over the long-term, the results appear to be worthwhile.

Privacy

Privacy and confidentiality continue to be on-going concerns with the transition to an electronic records system. In particular, there are concerns relating to the storage of systems if they were housed by an American company. In a post 9/11 world, there are legitimate concerns for privacy as American and Canadian legislation has passed that increases the surveillance power of the government.

Concerns over the safety of patient information held electronically led the British Columbia Government and Service Employees' Union (BCGEU) to launch a lawsuit against the BC government in 2004 aimed at halting the government's plans to retain a US-linked contractor to run the province's health insurance program, the Medical Services Plan. A key concern for the BCGEU was that contractors who possess sensitive personal information could be secretly compelled under the USA Patriot Act to turn it over to US authorities. Individuals, especially in times of crisis, are vulnerable to abuse from government misuse of personal information. In Canada, we only need to think of Maher Arar to realize the truth and extent of this statement. There needs to be well-developed privacy and confidentiality legislation that bridge jurisdictional boundaries, both within Canada and across national borders.

What do EHR mean for nurses?

With a growing human resource shortage in Canada, the health care system needs to look at new mechanisms to manage care. New technologies, including Electronic Health Records, can offer much needed relief to the increasing pressures on the health system. For example, improved and more complete records and access to comprehensive patient information can lead to more efficient diagnosis and use of health human resources. Also, sharing information at the click of a button means quicker access to information, not just from a patient perspective, but also from a nurse's perspective.

Nurses who have been exposed to an Electronic Health Records system feel strongly that this is a shift for the better. However, implementing an electronic health records system requires a commitment to training and computer skill development. By providing appropriate and effective training for this records and information management system, nurses will have the necessary support to allow for a smooth transition.



United Nurses of Alberta

Local #115 Meeting

Date: December 6, 2006

Time: 1530-1800

Place: Coombs Theatre

***Topic: Local AGM and election
of 2nd Vice-President
& Treasurer***

Call 670-9960 for more information



United Nurses of Alberta

Local # 115

Nomination For 2nd Vice-President

I wish to let my name stand as a nominee for the United Nurses of Alberta Local #115 2nd Vice-President

Name: (Please Print) _____

Home telephone #: _____ UNA ID #: _____

Signature of Nominee: _____

**Signature and Name of two (2) members in Good Standing
Nominating the Nominee**

Signature of a member in good standing: _____

Name (Please Print) _____ UNA ID #: _____

Signature of a member in good standing: _____

Name (Please Print) _____ UNA ID #: _____

PS: Please remit this form to Local #115 Executive, drop in Local #115 UNA mailbox, mail or fax to SARO office at 270-5749.
Nomination deadline: November 29, 2006 -1600 hours.



United Nurses of Alberta

Local # 115

Nomination For Treasurer

I wish to let my name stand as a nominee for the United Nurses of Alberta Local #115 Treasurer

Name: (Please Print) _____

Home telephone #: _____ UNA ID #: _____

Signature of Nominee: _____

**Signature and Name of two (2) members in Good Standing
Nominating the Nominee**

Signature of a member in good standing: _____

Name (Please Print) _____ UNA ID #: _____

Signature of a member in good standing: _____

Name (Please Print) _____ UNA ID #: _____

PS: Please remit this form to Local #115 Executive, drop in Local #115 UNA mailbox, mail or fax to SARO office at 270-5749.
Nomination deadline: November 29, 2006 -1600 hours.



United Nurses of Alberta

Local # 115

Nomination For Committee Position

(Nominations are open to anyone who is a member in good standing of the U.N.A.)

COMMITTEE APPLIED FOR: _____

Name: (Please Print) _____

Home telephone #: _____ **UNA ID #:** _____

Signature of Nominee: _____

**Signature and Name of two (2) members in Good Standing
Nominating the Nominee**

Signature of a member in good standing: _____

Name (Please Print) _____ **UNA ID #:** _____

Signature of a member in good standing: _____

Name (Please Print) _____ **UNA ID #:** _____

PS: Please remit this form to Local #115 Executive, drop in Local #115 UNA mailbox, mail or fax to SARO office at 270-5749.
Nomination deadline: November 29, 2006 -1600 hours.



United Nurses of Alberta

Local 115

Foothills Medical Centre & Satellites

Contact Information

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Al Perreault: aperreault@una.ab.ca

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