



Message from the Vice President

Kathleen Hamnett

Dear Sisters & Brothers,

As fall approaches I hope you had a chance to enjoy some summer weather with your family & friends minus the thunderstorms known to Alberta.

The Local has been kept busy gearing up for the Regularization project; we are piloting a few units to evaluate the process, accuracy of the data, develop strategies to formulate a role out plan. Initially the task seemed daunting with the Local having 120 units/areas but with a role out plan the picture is looking brighter. Stay tuned to some dates for orientation sessions for ward reps and managers planned for Sept.

Another project within AHS is the Rapid Hire of Nurse to various units. Initially Local 115 had approx. 40 positions posted without a site or unit, AHS has since corrected these postings. As always it is good practice to check your letter of hire if you have recently changed your position by calling TSSI at 1-877-511-4455. The Rapid hire positions were created to deal with the Nursing shortage in various areas and to assist with the backfill for the South Health Campus slated to open in June 2012.

The South Health Campus will bring some relief to the over capacity issues at the acute care sites but the issues of "No room in the Inn" and lack of community beds and supports remain an issue. FMC currently has 24 Overcapacity beds down from 69 in Jan 2010; the overall occupancy rate is 12% (April to July) with the exception of Neuro and Mental Health, which are usually utilized at overcapacity. Ruth & I did a site tour of the remaining OC beds on Aug 10, 2011 with Brenda Huband - AHS-Senior VP, Shawna Syverson - FMC VP, Holly Mackin- Site Director, Ken Page -WHS Manager Calgary Zone, and Waqar Mughal - Director OH&S. A few of the spaces continue to have pros and cons to them.

The goal of AHS is to close the remaining 24 spaces as alternate space & resources become available in the near future. Brenda Huband assured UNA that AHS has a commitment to staff and patient safety by stating "Patient safety being the #1 priority". Brenda clearly stated that managers have the ability to manage the OC beds, augmenting staff as needed based on acuity to maintain a safe staff, patient ratio. Therefore, it is important to advocate and communicate to your management teams the acuity & need. If this is not being done continue to file UNA PRC's, UNA OH&S forms & call the AHS OH&S Line so the trends are captured. Ruth is in the process of arranging a meeting with UNA's Surge Overcapacity Committee to review the data collected from each Calgary zone acute site tours and discuss next steps.

The Provincial Political front has been quiet over the summer. As candidates begin to ramp up their campaigns over the next month please take the time to consider their positions on Public Services including health care, education, social & disability services, and Seniors. The issue that needs addressing is not to cut back on services but to increase revenue. Warren Buffet recently wrote an Article on "Stop Coddling the Super-Rich" (<http://nyti.ms/nRigBa>). Buffet spoke to the need for the wealthy to start paying their share in taxes and for the government to stop whittling away at the poor and middle classes income. The delisting of services continues to hit the average Canadian pocket book more than ever. Consider what you would do if you had to choose between food or medication & treatment due to an illness or injury.

**Continued Page 2
Continued from Page 1**

Canada has lost a leader; Jack Layton succumbed to his battle with cancer. His message to all Canadians whether

Inside this issue:

- Message from the Vice President
- Statement on the passing of Jack Layton
- Gary Mar off-side on support for private health care
- Joint Workforce Regularization Process
- Second Phase: Rapid Hire of RN's.
- UNA Media Release
- Spotlight on your UNA Contract
- Links & Contact Information

UNA Local 115 Meetings

(every 2nd Weds from 1600-1800)

Follow us (Twitter & Facebook)

Contact the local if you would like assistance on how to do this!



If you have any news that you would like to

add to this newsletter, please contact us at the head office.

Email: local115exec@una.ab.ca

Web Site: <http://unalocal115.ab.ca>

Phone: (403) 670-9960

Message from the Vice President

Kathleen Hamnett

or not affiliated to the NDP Party was to never give up, have hope, be optimistic, and be loving. As members of the Health care team I believe many of us do this every day. Jack's message is a nice reminder to us all to take time to appreciate each other, not take each other for granted, to support each other both in our professional & personal lives.

In solidarity,

Kathleen Hamnett

UNA Local 115 Vice President
Phone: 403-670-9960
Fax: 403-263-2908
e-mail: khamnett@una.ab.ca


Statement on the passing of Jack Layton



NDP leader Jack Layton in April 2011. (Photo by [Matt Jiggins](#). Creative Commons License Attribution 2.0 Generic)

Edmonton - United Nurses of Alberta President Heather Smith issued the following statement about the passing of NDP leader Jack Layton:

"I am saddened to hear of Jack Layton's passing this morning. Jack Layton was a strong defender of public health care in Canada and his passion on the national stage will be missed," said Heather Smith.

"On behalf of United Nurses of Alberta, I send our heartfelt condolences to his wife Olivia and their family. 

Gary Mar off-side on support for Private Health Care




Edmonton - United Nurses of Alberta is raising concerns about comments made by Progressive Conservative leadership candidate Gary Mar supporting private health care.

At a meeting with the Edmonton Sun editorial board, Mar is reported to have said that he believes Albertans should be able to pay for private health care and jump long public wait lists. It is also reported that Mar also compared medical treatment to luxury items.

"Access to quality medical treatments is something that we hold dear as a fundamental Canadian value, not as an expensive luxury to be bought or sold," says UNA First Vice-President Bev Dick.

It was recently revealed that a Fort McMurray man was forced to travel to the United States to receive doctor recommended brain surgery after he was unable to receive the same surgery in Alberta. The man's family had to mortgage their house and take out a \$150,000 loan. The media is reporting that the family is now on the brink of losing their home.

"More private health care is not what Albertans are looking for" says Bev Dick. "We have seen the results of what increased private health care and public-private partnerships have meant for Albertans."

In July 2011, 29 seniors and veterans were [threatened with eviction](#) from the private Colonel Belcher Centre in Calgary because their care was not considered profitable for the company. In 2010, the private surgery clinic Health Resources Centre located in Calgary's former Grace Hospital [declared bankruptcy](#), costing Alberta Health Services over \$2 million. 



Nurses playing role in setting staffing

New "regularization" project gives UNA Locals say in creating nursing positions

It's a first for UNA. Starting this year, nurses will be taking part in a staffing process that aims to reduce reliance on overtime, extra shifts and casual hours. The process is called "regularization" and it comes out of a Letter of Understanding that UNA negotiated in the current provincial Collective Agreement (p. 151).

The province-wide project will identify worksites and units that use heavy overtime or extra hours and increase FTEs or post new positions to convert those hours into regular staff hours. "Regularizing" these hours will help control costs, and provide a big boost to continuity of care and also of course, to quality of care.

UNA also hopes that creating more positions and boosting FTEs will help to cut down mandatory overtime, and working short staffed, both of which are highly stressful for nurses.

Since November, a joint UNA-Alberta Health Services provincial steering committee has been developing a provincial process to undertake this "regularization". The official name is the Joint Workforce Regularization Provincial Project Steering Committee, or, the JWRP Provincial Committee.

The provincial steering committee has set up the process, but the actual work begins at the local level where joint union and employer JWRP committees will prioritize the units and areas to examine for extra hours, where regularization might bring the most benefit.

Creating more regular nursing positions

Two new UNA videos about "regularization"

In the first video, UNA's Director of Labour Relations, David Harrigan, outlines the new regularization process to convert extra overtime, extra shift and casual hours into regular nursing positions. In the second video, David Harrigan discusses how the preliminary data about overtime and casual hours can help Local Joint Regularization Committees choose the work areas that will be looked at first in the process.

Visit <http://local115.una.ab.ca> to view both of these videos.

 **UNA Media Release****Lease battle over Calgary seniors facility shows why private operators should not be involved in public health care**

The plight of dozens of elderly residents of a Calgary seniors' residence is another example of why public health care and private market-oriented health-care providers are not a good mix, says United Nurses of Alberta President Heather Smith.

Media reports revealed Monday evening that 29 seniors living in the assisted living wing at Carewest Colonel Belcher facility are scrambling to find new homes after Alberta Health Services and the current private owner of the suites, Chartwell Seniors Housing REIT, failed to agree on a lease renewal agreement.

This is just another example of the government touting private-sector 'solutions' that turn out to be the wrong prescription for curing the ills of the health care system, said Smith, who noted that back in 2003, the agreement that led to the arrangement between Chartwell and AHS was touted as a model partnership between the public and private sectors.

Smith also called on Alberta Health Services and the government of Alberta to clearly state for the public the true details of contracts signed for all public-private development of continuing care facilities in Alberta. They need to come clean about the true costs and the real risks of these 'partnerships,' she stated.

The 30 beds Chartwell wants to close to make available for more profitable uses are part of a complex of 145 seniors suites operated by the company and 175 nursing home beds run by Carewest, which is a wholly owned subsidiary of AHS. About 20 of the 30 designated assisted living beds are reserved for veterans.

A history published online by the Friends of the Colonel Belcher shows that the old Calgary Health Region committed \$20 million in capital costs to the development of the complex and worked closely with the original private-sector partner, Apex Lifestyle Communities Inc. The province donated 26 acres of land for the northwest Calgary complex.

Asked Smith: How is it that elderly residents, many of them veterans, are now being kicked out of their homes by a private company that benefitted from being part of a complex built with public funds to provide public services?

This situation is reminiscent of what happened at the Health Resource Centre, also in Calgary, a private sector hip and knee surgery clinic that went bankrupt after contracting to provide surgeries for the public health care provider, Smith observed.

Public health care facilities need to be fully in the public sector, where they are both less expensive to run and where proper staffing levels of Registered Nurses and other professionals can be assured, Smith said.

She asked: How many of these public-private service interruptions do we have to see before Alberta's politicians figure out that this kind of financing just doesn't work in health care?

In this case, it appears that the company wants out of the deal simply because it can make more money in the current market by providing more expensive hotel-style services.

Chartwell Chief Operating Officer Richard Noonan bluntly told Calgary media that his company intends to upgrade the 30 suites and rent them out privately for more money. The profitability of that community will probably improve after we make a significant investment and reposition the suites, he was quoted as saying in the Calgary Herald. We'll be able to charge whatever the market can bear,

Alberta Health Services already has a backlog of 1,500 seniors awaiting continuing-care accommodations.

Media reported that while the AHS lease on the facility expired in January, Chartwell gave the health board no indication the deal was in jeopardy until about two weeks ago.

We need to end these expensive and risky experiments with private involvement in what should be fully public facilities, Smith concluded.

Second phase:
Rapid Hire
of Registered Nurses

AHS notifies UNA that most 'rapid hire' RN positions have now been posted

Alberta Health Services has notified the United Nurses of Alberta that a majority of the approximately 300 Registered Nurse positions it plans to fill across Alberta have now been posted on the AHS website and are available in health care facilities.

All positions in Edmonton, Calgary and North Zones have been posted, AHS said, and a number remain to be posted at rural health care facilities in central and southern Alberta.

UNA members are encouraged to look closely at the full postings as multiple positions are available under a single posting in some instances.

The newly created positions are all part of the "rapid hire" staff recruitment campaign launched by AHS on July 14 to meet current demand and anticipated future need for RNs in Alberta, and to address critical staff shortages in areas of high demand.

The positions are located in major facilities, rural sites and community programs, AHS said. Positions will be available in Operating Rooms, Emergency Departments, Mental Health, Home Care, Labour and Delivery, Neonatal ICU, Surgery, Hemodialysis and other areas.

The majority of the positions are full time or near-FTE part-time, AHS said.

AHS has established a three-step process for applicants:

1. Apply for the RN positions on the AHS internal website (or externally at healthjobs.ab.ca)
2. AHS interviews
3. Start date for successful candidates

Closing dates for applications are listed on each posting. AHS says it hopes to have completed the process and hired all nurses by the end of September 2011.

To read about the earlier AHS announcement of RN hires in the Calgary Zone visit:

<http://www.una.ab.ca/news/archive/RapidHiring>

On-Call Duty/Call Back

Know when you are entitled to request off duty time.

Under Article 9.07 (a) an Employee is entitled to request a block of eight hours off duty in the 12 hours *preceding* the Employee's next shift if the employee has been called back to work in the 12 hours before their next shift without loss of earnings.

Once the request is made to the proper person, the Employee is entitled to eight consecutive hours of rest before commencing their next Shift without loss of earnings.

Example: If an Employee is scheduled for a day shift starting at 0700 and she is called in during the night shift to work from 0000 to 0200, then they will not be required to report to their day shift until 1000. After 1000 they will work the rest of that shift and will be paid as if they had reported at 0700.

If an Employee who is scheduled to work at 0700, works any hours past 1100 on the preceding evening, they are entitled to request the eight hour minimum time off entitlement.

An Employee must request this entitlement for the eight hours off duty. If a request is not made, then the nurse is not entitled to the hours off.

UNA Collective Agreement, Article 9.07 (a)

(a) Where an Employee works pursuant to this Article and there is not a minimum of eight consecutive hours off duty in the 12 hours preceding the Employee's next Shift, at the Employee's request, the Employee shall be entitled to eight consecutive hours of rest before commencing his or her next Shift without loss of earnings.

May 2011

UNA - CNA - Alberta - 05/2011



**Questions?
Contact your United Nurses of Alberta Representative:**

• Provincial Office: (780) 425-1025 or 1 800 252-9394 • Southern Alberta Regional Office: (403) 237-2377 or 1 800 661-1802 • www.una.ab.ca •

SPOTLIGHT on your UNA contract



UNA Local 115 Contact information

Local 115 Executive

local115exec@una.ab.ca

Kevin Champagne

President

kchampagne@una.ab.ca

Kathleen Hamnett

Vice President

khamnett@una.ab.ca

Cameron Westhead

Treasurer

cwesthead@una.ab.ca

Ruth Duffy

Secretary

rduffy@una.ab.ca

PRC Committee

Kevin Champagne

kchampagne@una.ab.ca

Ruth Duffy

rduffy@una.ab.ca

Daryl Kostiuk

dkostiuk@una.ab.ca

Michelle Senkow

msenkow@una.ab.ca

OH & S Committee

Kathleen Hamnett

khamnett@una.ab.ca

Ruth Duffy

rduffy@una.ab.ca

Grievance Committee

Local 115 Executive

local115exec@una.ab.ca

Jeannine Arbour
jarbour@una.ab.ca

Communications

Al Pereault

aperreault@una.ab.ca



medicare.ca



cfnu.ca

Southern Alberta Regional Office (SARO)

Suite 300, 1422 Kensington Road, NW, Calgary, Alberta, T2N 3P9

Monday - Friday: 8:30am to 4:30pm (Closed on Saturdays, Sundays and Holidays)

SARO Phone: (403) 237-2377, **Toll Free:** (800) 661-1802

Local Office Phone: (403) 670-9960, **Fax:** (403) 270-5749

Email for the Local 115 Executive: local115exec@una.ab.ca

Local 115 Web Site: local115.una.ab.ca, **UNA Web Site:** www.una.ab.ca