

**Moving? Name Change?
Retiring?
New MAHCP Member?
Please let us know!!**



In order to keep our database current, please keep us informed of any information changes including addresses and names. Do not assume that your Employer will automatically pass this information on to MAHCP.

Is one of your co-workers **retiring** in the near future? Let us know so MAHCP can acknowledge them.

If you have not been receiving regular mail-outs or have a change of information, contact Joan at the MAHCP office by calling 772-0425, extension 201 or 1-800-315-3331 (press "0" to talk with someone during office hours of 8:30 am to 5:00 pm) or email joan@mahcp.ca. Thank you!

REMINDER: The Curves special time limited offer for MAHCP Members ends on December 31, 2006! Check the MAHCP website for more information.

Heather's Word Search

Y W I N T E R B H P E H E J D I P U S J
R V N O I T A C I F I S S A L C E R B N
O I W P W Y R H X Z Z M R X U Q O A N W
T S I P A R E H T Y R O T A R I P S E R
S U Z J E K R P R J T L N A B B L H J E
I Z O C O C W L Y G X Y V O T E L V Q X
H L C O T N O K W M S T I F E N E B Y W
P S M L E S A K F V Z L A U Q X K K V D
C N F X L Y A M A Q P W X E R A Q X C J
D X Q T T E M L W X A C T I V I S M R W
F A M I S L W Q I O E E O M H K I W F L
L T D B I N H V D M N X T F H W L K N Q
P F U T M T E A H N A S V C G B G A Z B
O X S X J U U M O Z Z S N X H G Z I E A
A C T I D R H O L I D A Y S T E K R A M
X Z U P E I Q R Z Y H V L B E A T G I Z
E N O I B H H R X E H W Z G U P N D P V
E F C F R O A U W Q O G W E A T H E R B
O U Q E M I T R E V O K N W D L G O K M
Y L N Q H B R A A U J V K V Z E C H N F

- | | | | |
|-----------------------|-----------|------------------|----------|
| Activism | Benefits | History | Holidays |
| Market | Overtime | Snowman | Vote |
| Weather | Mistletoe | Winter | |
| Respiratory Therapist | | Reclassification | |

Email heather@mahcp.ca for the solution.

NEWS Manitoba Association of **HEALTHCARE** Professionals
December 2006



Happy Holidays



MAHCP Staff and Executive Council wish everyone a Safe and Happy New Year!



Just Another Tea Party?



101-1500 Notre Dame Avenue, Winnipeg, MB R3E 0P9
Phone: 1-204-772-0425; 1-800-315-3331; Fax: 1-204-775-6829
Email: info@mahcp.ca; Website: www.mahcp.ca

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Editor: Wendy Despina, President
wendy@mahcp.ca

Enclosed with this Newsletter:
• MAHCP Constitution

Meeting Calendar

Visit the MAHCP Website Calendar for more meeting information -- /www.mahcp.ca/forum/calendar.asp



- December 4 to 7, 2006**
 - Central Table Bargaining
- December 13, 2006**
 - Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs
- December 13, 2006**
 - General Staff Rep Meeting 101-1500 Notre Dame Ave. 1830 hours
- December 14, 2006**
 - SE RHA Staff Rep Meeting Smitty's in Steinbach 1200 hrs to 1300 hrs
- December 18 to 20, 2006**
 - Central Table Bargaining
- December 21, 2006**
 - HSC Staff Rep Meeting NA235, Isabel Stewart Bldg 1100 hrs to 1230 hrs
- December 21, 2006**
 - SBGH Staff Rep Meeting L1304, Pathology Conf Rm 1200 hrs to 1300 hrs
- December 25, 2006**
 - Christmas Day MAHCP Office Closed
- December 26, 2006**
 - Boxing Day MAHCP Office Closed
- January 1, 2007**
 - New Year's Day MAHCP Office Closed
- January 10, 2007**
 - Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs
- January 11, 12, 13, 2007**
 - Executive Council Strategic Planning Session Location TBA
- January, 2007**
 - General Staff Rep Meeting * **CANCELLED** * due to Strategic Planning Session
- January 15 to 19, 2007**
 - Central Table Bargaining
- January 18, 2007**
 - SBGH Staff Rep Meeting L1304, Pathology Conf Rm 1200 hrs to 1300 hrs
- February 14, 2007**
 - Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs
- February 14, 2007**
 - General Staff Rep Meeting 101-1500 Notre Dame Ave. 1830 hours
- February 15, 2007**
 - SBGH Staff Rep Meeting L1304, Pathology Conf Rm 1200 hrs to 1300 hrs
- March 14, 2007**
 - Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs
- March 14, 2007**
 - General Staff Rep Meeting 101-1500 Notre Dame Ave. 1830 hours
- March 15, 2007**
 - SBGH Staff Rep Meeting L1304, Pathology Conf Rm 1200 hrs to 1300 hrs
- April 11, 2007**
 - Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs
- April 11, 2007**
 - General Staff Rep Meeting 101-1500 Notre Dame Ave. 1830 hours
- April 19, 2007**
 - SBGH Staff Rep Meeting L1304, Pathology Conf Rm 1200 hrs to 1300 hrs
- May 9, 2007**
 - Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs
- May 9, 2007**
 - General Staff Rep Meeting 101-1500 Notre Dame Ave. 1830 hours
- May 17, 2007**
 - SBGH Staff Rep Meeting L1304, Pathology Conf Rm 1200 hrs to 1300 hrs
- June 13, 2007**
 - Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs
- June 13, 2007**
 - General Staff Rep Meeting 101-1500 Notre Dame Ave. 1830 hours
- June 14, 2007**
 - SBGH Staff Rep Meeting L1304, Pathology Conf Rm 1200 hrs to 1300 hrs
- July 11, 2007**
 - Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs
- July 11, 2007**
 - General Staff Rep Meeting 101-1500 Notre Dame Ave. 1830 hours
- August 8, 2007**
 - Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs
- August 8, 2007**
 - General Staff Rep Meeting 101-1500 Notre Dame Ave. 1830 hours
- 2007 Annual General Meeting Thursday, October 11th Sites & Time TBA**

Executive Council

Officers

- President** *Wendy Despins*, SBGH Laboratory
- Vice President** *Allan Harlow*, Concordia Hospital Lab
- Treasurer** *Chad Harris*, CCMB Machinist
- Secretary** *Randy Buschau*, HSC Orthopedic Technology

Directors

- Community Therapy Services Dietitian** *Margrét Thomas*, Physiotherapist
- Laboratory Mental Health** *Susin Cadman*, Brandon RHA
- Nuclear Medicine** *Tom Walus*, HSC RHA
- Occupational Therapy Pharmacist** *Kathy Yonda*, Brandon RHA
- Pharmacy Technician** *Shelagh Parken*, SBGH
- Physiotherapy** *Adele Spence*, DLC
- Radiology** *Bob Bulloch*, HSC
- Radiation Therapy** *Cindy Dziadek*, Concordia
- Recreation** *Shelley Kowalchuk*, HSC
- Social Worker** *Janice Smith*, Condordia
- Burntwood RHA** *Jenn Moyer*, CCMB
- Nor-Man RHA** *Zana Anderson*, DLC
- Winnipeg RHA** *Ron Morrice*, VGH
- Tanya Burnside*, Pharmacy Technician
- Bernie Krawchuk*, Resource Coordinator
- Jason Linklater*, HSC, Orthopedic Technology

Staff Assignments

- | | | |
|--|--|---|
| Lee Manning
Executive Director
lee@mahcp.ca | Heather Pappin
Secretary/Receptionist/Clerk
heather@mahcp.ca | Joan Ewonchuk
Administrative Assistant
joan@mahcp.ca |
| Barb Johnson, LRO:
barb@mahcp.ca | St. Boniface General Hospital, Central Medical Labs, Jocelyn House, Misericordia Health Centre, DSM-St. Amant Centre | |
| Ken Swan, LRO:
ken@mahcp.ca | Health Sciences Centre (Lab, Diagnostic Imaging, Pharmacy, EEG, Sleep Lab), Deer Lodge Centre, Community Therapy Services, Winnipeg Clinic | |
| Michele Eger, LRO:
michele@mahcp.ca | Health Sciences Centre (all other HSC Members not included under Ken's listing), Concordia Hospital, Tissue Bank Manitoba, Manitoba Clinic, Critical Care Transport Team | |
| Karen Noga, LRO:
karen@mahcp.ca | Victoria General Hospital, Brandon RHA, Brandon Clinic, Centre Taché Centre, Society for Manitobans with Disabilities, Rehabilitation Centre for Children, CancerCare Manitoba | |
| Armand Roy, LRO:
armand@mahcp.ca | Seven Oaks General Hospital, Breast Health Centre, Aboriginal Health & Wellness Centre, Nor-Man RHA, Burntwood RHA, South Eastman RHA | |

Bring your Collective Agreement to all Member meetings

We as union members are making our own history and are impacting future generations by what we do and what we lobby for. Countless benefits have been achieved for our membership, for almost 20 years women in MAHCP have enjoyed the benefits of the maternity leave top up. As the needs of our membership evolve MAHCP continues to advocate on behalf of its membership. The accomplishments and achievements of the past can serve us a stepping stones to look to the future and to establish future gains.



However, we must always be mindful that we can never take our rights for granted. There will always be someone trying to take our rights away as is evidenced by the recent change made by the Harper Government to the Status of Women Canada. The words "women's equality" were removed from the mandate, the budget reduced by 38.5% and changes to the mandate and funding rules which prohibit women's organizations from engaging in advocacy or lobbying activities.

The Harper government has also undermined gender equality by abolishing the Court Challenges Program and announcing there will be no new proactive pay equity law.

Let me close with a couple of quotes from women who have had a profound affect on the social and cultural development of our country.

"The purpose of a woman's life is just the same as the purpose of man's life – that she may make the best possible contribution to the generation in which she is living."
Louise McKinney

"I want to leave something behind when I go some small legacy of truth, some word that will shine in a dark place."
Nellie McClung

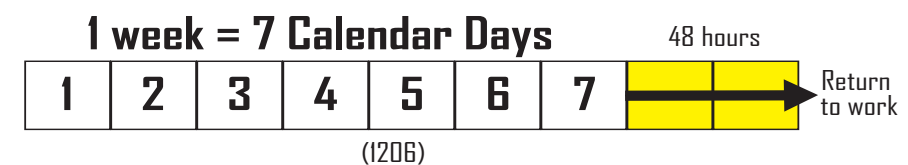
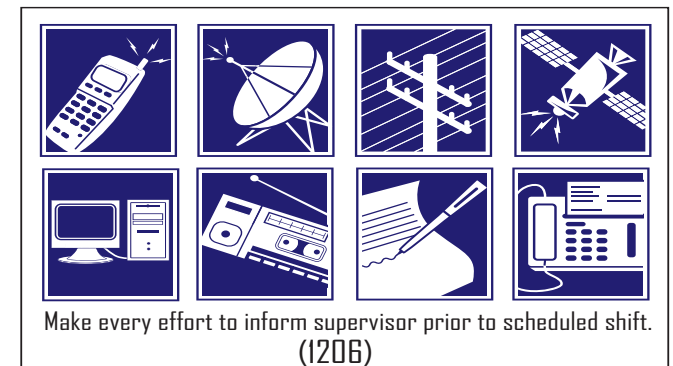
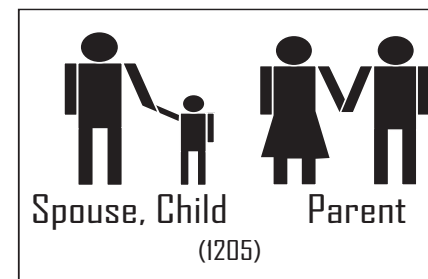


Part 2 of Understanding Income Protection

Income Protection Articles 1204-1205-1206

Over 4 weeks
Not accrued but retained
4 weeks
continues to accrue

Unpaid Leave
(1204)



"Women Are Persons"

by Wendy Despina

Seems like an odd statement to make . . . however until 1929 Canadian women were not considered persons.

The women depicted in the photograph on the front cover are referred to as **The Famous Five**. These five women were pivotal in achieving status for women in this country and shaping the opportunities for all women who came after them. It was through the efforts of Emily Murphy, Henrietta Muir Edwards, Irene Parlby, Louise McKinney and Nellie McClung that the Privy Council declared the "Woman are Persons" Act on October 18, 1929. This allowed for women to run for and hold political office, including the Canadian Senate. This is quite significant because up until the 1970's the senate approved divorces and these women believed that more equitable decisions would be made if they were part of the senate. Their petition had been defeated by the Canadian Supreme Court and their refusal to accept that decision led to it ultimately being overturned by the Judicial Committee of the Privy Council of England.

Predating this, women had to achieve the right to vote, many arguments were raised against giving women the vote including:

- A woman's place is in the home
- Politics are too corrupt for women
- Allowing women to vote will disrupt the home



Saskatchewan was close on Manitoba's heels passing a bill in March of 1916, with Alberta passing a similar bill in April 1916 as well. It would not be until a year later that the next provinces followed suit. On April 5, 1917 the Liberal government of British Columbia passed a bill giving women political equality, as did Ontario.

Finally, on May 24, 1918 all women in Canada were eligible to vote in federal elections under the Canada Elections Act.

- Women would vote with their husbands, so giving married women the vote would merely double the vote of married men
- Women would not vote if they had the privilege
- Women would vote too much
- Women can do more by indirect influence than by the ballot
- It is not "womanly" to express one's opinion in a straightforward fashion
- Women are too sentimental to vote
- Granting women the vote would give immigrant women the vote, increasing the uneducated vote.

In Manitoba we have a long history of social and labour activism often paving the way for the rest of the country.

On January 28, 1916 Manitoba became the first province in Canada to grant full political privileges to women.



The Wartime Elections Act of September 20, 1917 allowed that women in the armed forces or with military relatives the right to vote in federal elections. Other women remained disenfranchised. Finally, on May 24, 1918 all women in Canada were eligible to vote in federal elections under the Canada Elections Act.

It would take some provinces a little longer for women to achieve the vote in provincial elections, Prince Edward Island May 1922, Newfoundland April 13, 1925 and finally Quebec in 1940.

During the course of their lives these women's endeavors resulted in many other significant social reforms. Improvements to the status of widows and separated wives, the Dower Act in Alberta, and the Minimum Wage for Women Act to name a few. The impacts of these victories have been far reaching providing opportunities and rights that we enjoy today.

Two years ago I began with a series of articles around the topic of "What has the Union done for Me?" wrapping up in September of 2005 with what the membership has done for the union. This past September I wrote about the history of "Labour Day" and I am continuing here with a little more of our Canadian history.

Recently while in Calgary I happened across the Monument of the Famous Five by Alberta artist Barbara Paterson. Inspired by the work I was curious and wanted to learn more. I discovered the legacy that this generation of women left us.

continued on page 11

Non-Central Table Bargaining Update

Society for Manitobans with Disabilities: The Association is proofing the proposed first Collective Agreement and is making appropriate corrections to the documents prior to both parties signing off on it.

Misericordia Health Centre - Eye Bank Technicians: New certificate application. A hearing is scheduled at the Manitoba Labour Board for January 4 & 5, 2007 to determine whether or not this group will become members of MAHCP.

Welcome to the Newest Members of the Executive Council!

It is with pleasure that MAHCP announces the newest members of the Executive Council:

Janice Smith, Radiology Director
Jenn Moyer, Radiation Therapy Director
Ron Morrice, Social Worker Director
Jason Linklater, WRHA Director

Also, welcome back to the returning Directors.

The complete listing of Directors is on page 2.

MAHCP Holiday Office Hours

December 25 and 26, 2006 - Closed
 December 27 to 28 - 0900 to 1700
 January 1, 2007 - Closed



If we had no winter, the spring would not be so pleasant: if we did not sometimes taste of adversity, prosperity would not be so welcome.

Anne Bradstreet (1612 - 1672), Meditations Divine and Moral

Central Table Bargaining Update

We have met with the Employer since the middle of April, non-monetary is completed and at the time of this article we have met with the Employer for one week of monetary bargaining.

During this period we have exchanged proposals three times and the movement continues to be at a very slow pace.

I am not optimistic that we will have this round of bargaining completed before the Christmas break and we have set dates with the Employer out into January of 2007.

We have twenty-three monetary proposals tabled by the Employer to deal with prior to entering into discussions regarding wage increases.

Lee Manning
 Executive Director

Updates will be posted on the website as well as the MAHCP information line (1-800-315-3331) as new information becomes available.

Market Adjustment Fund

The Market Adjustment Fund is a market driven fund that exists for the purpose of attracting and retaining staff in professional groups that meet the threshold defined by the Employer (14% minimum vacancy rate). It is Employer driven with Union input.

The Union has input into the groups that will be adjusted however the Employer is under no obligation to agree with the Union's position.

There is a mechanism for third party intervention to rule on an issue if there cannot be agreement reached by the parties.

It is understood that during the life of the Collective Agreement not all groups selected may be able to be brought to their desired rates as one or two groups could potentially use up the entire fund.

The Union's goal is to get as many groups as possible the greatest amount of increase available.

Although it is the Union's position that funds of this nature are divisive to the membership and prefer to negotiate larger across the board increases for all members, the Employer's mandate is to attract and retain hard-to-recruit professionals and are prepared to offer monies toward that end.

The market fund achieved three years ago at the last round of bargaining has now been exhausted with the remaining funds distributed among the Psychologists, Biomedical Engineers, Teachers and Emergency Medical Services.

MAHCP Career Profile

Respiratory Therapist

Submitted by
Michael Bachynsky
Respiratory Therapist, SBGH

Respiratory therapy is a relatively young profession. Founded in 1964 by a small group of technicians in Montreal, the professional society was initially known as the Canadian Society of Inhalation Therapy Technicians. From this small group Respiratory Therapy has grown to a membership of over 7,000 Respiratory Therapists across Canada, of which over 200 are employed in Manitoba.

The profession's identity has metamorphasized over the years from a technical occupation, where technologists would perform hands-on repairs and trouble-shooting of respiratory related equipment, to where they now perform direct patient care and a leadership role in patient care management.

There are 17 schools of Respiratory Therapy across Canada of which the Manitoba program is based out of the University of Manitoba. The U of M program is a four year degree program of which the first year is University I and the following three years of Respiratory Therapy is through the Faculty of Med Rehab. Upon successful completion of the program graduates are eligible to write the Canadian Society of Respiratory Therapy national credentialing exam and are eligible to be licensed to practice in Manitoba.

The majority of Respiratory therapists are employed in the hospital setting of which approximately 90% of the work is in Critical Care. Respiratory Therapists are a vital part of critical care rounds and are often consulted by attending physicians for their expertise in ventilatory management and support.

Advances are being made using Respiratory Therapy administered nitric oxide therapy and artificial surfactant therapy.

When a patient is in severe distress, a Respiratory Therapist will be one of the first of a team of health care professionals on the scene. Respiratory Therapists are part of the hospital code "99" and "88" team that provide life saving care to patients in severe cardiac and respiratory distress.

When babies are delivered in the northern locations they may be too ill to be managed with the resources available. Respiratory Therapists are called upon as part of the neonatal air transport team to bring these tiny patients to Winnipeg; often done under less than desirable weather conditions.

Therapists practicing on the wards provide assessment and management for patients requiring bronchodilator therapy or oxygen therapy. Respiratory Therapists provide service 24 hours a day including overnight oximetry studies as a tool to diagnose respiratory conditions such as sleep apnea.

Therapists working in the pulmonary function labs are a vital link in the diagnoses and treatment of respiratory disease. Using state of the art equipment, therapists do a variety of tests to assess patient lung function in disease states such as asthma, COPD and sleep apnea.

Patient teaching is vital to the proper management of respiratory disease and Respiratory Therapists are often called upon as lead educators. It still amazes us as to how many patients arrive in a hospital emergency department in extreme distress, simply because they weren't using their inhalers properly.

Respiratory Therapists can now be found in the homes of patients under home care programs through government programs as well as privately run companies. The skills of Respiratory Therapists as coaches and educators providing technical as well as emotional support are vital to the overall well-being of the patient and their families.

New products and technologies for Respiratory Therapists are continually being developed and marketed by health care supply companies and pharmaceuti-

cal companies. With their expertise in this area Respiratory Therapists are in high demand for product marketing and education.

The education and training of Respiratory Therapists is highly recognized and valued; opening the door for greater responsibility and opportunity. Respiratory Therapists have taken the lead responsibility in inter-facility Critical Care Transport, a role traditionally performed by an Emergency Physician. The education and training of Respiratory Therapists qualifies a therapist to apply for the Perfusion Program or the Physician Assistant Program, both of which demand a high degree of responsibility and education.

If you enjoy travel, opportunities are available for Respiratory Therapists to transport critically ill patients on "life flight" to and from locations all over the world. Respiratory Therapists are in high demand in exotic locations such as Saudi Arabia where salaries and tax benefits are very attractive. Those who would like to escape the cold Canadian winters have the opportunity to work and travel during the winter months on "travel assignments" throughout the United States, primarily organized through Arizona based companies.

Since it's humble beginnings in 1964, Respiratory Therapy consistently make the top ten list of best occupations based on workplace surveys. The employment outlook is excellent as the profession continues to grow and expand in traditional and new areas of health care.

Don't Hang Up That Phone!

Want to know how bargaining is going? In an effort to keep you informed, MAHCP is starting a new service to our members. We will soon begin auto dial telephone calls to all members, giving an update on bargaining. If you are not sure we have your current phone number, call the office at 772-0425, and we will make sure you are on our speed-dial!

Member Feedback

Hi Wendy,

I must say that this year's AGM was a very enjoyable affair. It was well organized and had a professional feel to it. I enjoyed the speakers. I think you did a great job!

Regards, Ev Harrison

Good Morning Wendy,

I just received a copy of the newsletter yesterday. I particularly enjoyed the article on the history of Labour Day. Our daughters have been asking us about the significance of that day and now, I feel that I can respond in a manner that reflects the true essence of the day.

As I hear about the work experiences of family members who are non-unionized, I must admit that I am particularly grateful for the benefits and protection that I receive as a member of this union. . . . I have been taking the work done on my behalf for granted.

Thank you!

Marie

Wendy and MAHCP

You did a great job setting this meeting up! Our members should appreciate how far our union has come.

Thank you!

Sherri Sutton

P.S. I am so impressed with the retractable ID holders!!

If you have a question or suggestion for the President, please call the MAHCP office to have a copy of the Contact Form mailed or faxed to you, or you can access a form through the MAHCP website at www.mahcp.ca.

Did you know that the **MAHCP News**, as well as most of MAHCP's promotional material is developed, designed and printed in-house? This saves members thousands of dollars!

HEPP/HEBP REPORT

The contribution increases which began in 2005, were necessary to allow the Plan achieve a better position in funding the current level of benefits. The Plan Actuary advised the Trustees of the increases necessary, and that all of the increases would have to be in place before the Plan would be more stable.

The HEPP quarterly and annual meetings were held September 27, 2006. The Trustees received the Financial Statements and Actuarial Valuation for the year 2005. The increases to date have allowed the Plan to improve its financial position. Earlier this year (2006) the Plan increased its assets to above three billion dollars. While that amount seems enormous, keep in mind that it represents the value of pension payments for approximately forty thousand people for their many years of retirement.

The Chair of the Trustees is Bob Romph of the Manitoba Nurses Union, and the Vice-Chair is Jean Paul Gobeil of the Winnipeg Regional Health Authority.

With respect to HEBP, the quarterly meeting was held September 27, 2006. At this time, the financial health of all of the Plans appear to be in the position expected by the Trustees.

Ken Swan
HEPP/HEBP Board Member

MAHCP Member Retirees

MAHCP would like to congratulate the following members who have recently retired. We wish each and every one of you all the best on your retirement.

- **Suzanne Tetrault**, General Duty Lab Tech, SBGH
- **Judy Masters**, General Duty Lab Technologist, SBGH

If you are retiring or know of someone who is retiring, we would like to hear from you. Neither the Employers nor HEPP provide us with that information so we are counting on you to let us know. You may contact us through email, phone, fax, through your staff representative, board member, on the web site or the 1-800 number.

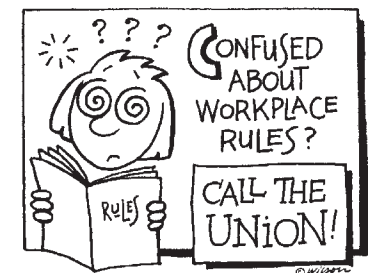
Our sincere apologies for anyone that has not been included in this list, we know that there are many more retirees out there.



How Well Do You Know Your Collective Agreement?

Question: Do you have to work overtime?

Answer: No! if your work is considered essential, then someone will have to work the overtime. You cannot be forced to do it if working would make you break the law (for example - leaving underage children unattended).



Helpful Legal Information for MAHCP Members

Reclassification

You should be paid for the job that you do. If you are performing the work of a higher classification and are being paid at a lower paid classification, that is unfair because you are providing more value to your employer than you are receiving in return. This article will examine some of the issues around reclassification, generally what it means and when it applies. It is not intended to be legal advice for any particular situation.

Reorganisation

The issue of reclassification most often occurs where the employer has reorganised its workplace. An employer has the right to organise its workplace. This is stipulated in the collective agreement and is part of the arbitral jurisprudence in the area. Implicit in this ability is the right to “re-organise” the procedures and methods of performing work within a bargaining unit. The employer must act “reasonably”, however, when reorganising. The employer can’t indiscriminately assign jobs and duties to an individual that belongs to another classification.

Where an employer has re-organized and added duties to the work of an employee that are not within the job description, there is an evaluation that has to take place. That is, do the additional duties mean there is a “material” change to the position? If the added duties are minor and do not go to the heart of what the job is, there is not necessarily a material change in classification. If it can be shown that the job is now different than it was, there is likely a change in classification.

Where the re-organisation means that an employee’s duties are changed to such a degree so that the job is no longer the same, that employee should act quickly to address the problem. The first thing to do is to make sure that the Association has been made aware that there has been a reorganisation to the extent that it has affected the way that the employee is doing the job. It may be that the employer had an obligation under the collective agreement to notify the Association about the changes before imposing them on the employee.

Changes in Job Duties over Time

Where there has been a change to an employee’s duties over time, the employee may have recourse to a reclassification process. Again, an evaluation has to be

done in order to determine whether the change is “material” or “substantial”. In order to support a reclassification the employee “must not only establish that his [or her] ability and work are beyond the present job description but [s]he must bring him[her]self squarely within the description of the classification [s]he seeks both as to ability and responsibility.” (Brown and Beatty Canadian Labour Arbitration 3rd ed., para 5:2430). A rule of thumb to determine whether the changes are material or substantial is whether the core duties of that position have been changed. Each case is different and in each case the employee should determine what are the core duties of that position. The core duties will not necessarily be listed on the job description for that position as separate duties.

If the employee feels that the core duties have substantially changed, the employee should act quickly in bringing that to the attention of the employer. Article 302 provides that “Where an employee believes that there has been a material or substantial change in her job content since she was last classified, she shall be entitled to request a review of her classification”. The employer then has the obligation to examine the duties of the employee and determine whether a reclassification should be made. Where the employee is not satisfied with the employer’s determination, the employee should talk to an Association representative about whether to file a grievance in the matter.

Change in Duties Must be Imposed not Volunteered

The employer will sometimes deny a reclassification on the basis that the employee voluntarily did the additional duties. A reclassification depends on the employer having imposed the material or substantial changes on the employee.

Sometimes the employer’s assignment of new or material duties is not direct. It can be that a job is changed by the addition of new technology or a new method of doing things. Where it is implied that the employee has to have substantially more training and higher qualifications to do the job, even where the employer has never directed the employee to perform the new duties, in these circumstances the direction is implied. This can be a fairly complex analysis and should probably be done with the assistance of an Association representative.



Timeliness

Many reclassification applications have been refused by the employer on the basis that the reclassification was not brought on a timely basis. It is often the case that an employee will assume additional duties slowly, not all at once. It may take years for the additional duties to add up to a “material” or “substantial” change. Once that change is material, the employee must act quickly to seek a reclassification.

Where the employee fails to act quickly, an arbitrator may find that he or she does not have the jurisdiction to deal with the reclassification. This happens where the material change occurs during the course of one collective agreement and the employee grieves the reclassification during a subsequent agreement. If the arbitrator finds he doesn’t have jurisdiction, even where there is a substantial change to the job, the arbitrator will not force the employer to reclassify the employee.

Conclusion

Health care professionals are often on the leading edge of technology, its development and application. Because of the dynamic nature of modern technology and the myriad tasks and duties associated with its use, a health care professional’s duties may change to meet the changes of the technology. Health care professionals deserve to be paid for the work that they do. Being appropriately classified allows you to ensure that your employer recognises your contribution and rewards you for it. If this article raises a concern for you, talk to an Association representative about how to address that concern.

By: Jacob Giesbrecht



MAHCP Respiratory Therapists



MAHCP Executive Council 2006 - 2007



From left to right:

Back Row - Chad Harris, Ron Morrice, Jason Linklater, Randy Buschau, Bob Bulloch
 Middle Row - Kathy Yonda, Shelley Kowalchuk, Tom Walus, Shelagh Parken, Adele Spence, Margret Thomas, Susin Cadman
 Front Row - Bernie Krawchuk, Cindy Dziadek, Al Harlow, Wendy Despina, Tanya Burnside, Janice Smith
 Missing - Zana Anderson, Jenn Moyer

AGM 2006 Highlights

The 2006 AGM has come and gone. It was encouraging to see a 15% increase in attendance despite the poor weather conditions, and the traffic problems on Disraeli Bridge. Apologies for the date conflict with the Long Service Awards at HSC.

Highlights included:

- Recognition of the out going Executive Council, and
- the introduction of the 2006 – 2007 Executive Council,
- presentation of the financial and committee reports
- discussion of the resolutions that have been put before us, the majority of

which were passed providing direction for the Executive Council and the membership going into the future

- the announcement of the MAHCP, and the Monique Wally Scholarship winners
- a presentation on the “Eliminate the Wait” campaign by Peter Skakum and Carole Marshall of Tangent Strategies (formally Hawthorne Revere)
- a provocative and interesting speech on ethics by our guest speaker Professor Arthur Schafer.

Following the adjournment of the meeting members enjoyed a wine and cheese reception that included an assortment of

appetizers and dainties. Again this year members were entertained with the magic tricks and illusions by Darren Dynamo Magic.

The Association was fortunate to have received a large number of donations for door prizes. The Communication Committee and the members had fun drawing the winners and distributing the prizes. These are noted on page 7.

Plans are already under way for our 2007 AGM please mark October 11, 2007 on your calendar. We look forward to seeing you there.

Prize Table



AGM Prize Draw Winners

- Tim Robson, Silpit Industries Prize Package
- Colleen Buechler, Canadian Footwear Prize Package
- Larry Hammond, Canadian Footwear Prize Package
- Margret Thomas, HSAA Prize Package
- Polly Pachu, HSAA Prize Package
- Carol Melnyk, HSAA Prize Package
- Sherri Sutton, HSAA Prize Package
- Jean Grant, Clarion Hotel Prize Package
- Maggie Nickel, UnionWare Prize Package
- Rosemary Obirek, UnionWare Prize Package
- Bob Jonuk, UnionWare Prize Package
- Joan Warden, UnionWare Prize Package
- Ed Hordienko, Catering Thyme Prize Package
- Barb Swan, Catering Thyme Prize Package
- Gisele Meilleur, Tangent Strategies Prize Package
- Jo-Anne Peltz, Galaxy Travel Prize Package
- Susin Cadman, Galaxy Travel Prize Package
- Digna Pelletier, Chamber of Commerce Prize Package
- Deborah Willis, Chamber of Commerce Prize Package
- Evelyn Harris, Inkster Christie Hughes Prize Package
- Chad Harris, Inkster Christie Hughes Prize Package
- Maureen Steenssens, Inkster Christie Hughes Prize Package
- Shirley Luczenczyn, Inkster Christie Hughes

Prize Package

- Rob Krezanski, Inkster Christie Hughes Prize Package
- Brad Duncan, Inkster Christie Hughes Prize Package
- Debra Chapman, Bridgeport Office Solutions Prize Package
- Shelley Kowalchuk, MAHCP Logo Watch
- Diane Duttchen, MAHCP Logo Watch
- Kirby Hunt, MAHCP Logo Watch
- Judith Freeborn, MAHCP Logo Watch
- Susan Cote, MAHCP Logo Watch
- Jodi Goshulak, Victoria Inn Brandon Prize Package
- Zinta Akkerman, Flin Flon Victoria Inn Prize Package
- Linda Daypuk, Flin Flon Victoria Inn Prize Package
- Darlene Quinn, Flin Flon Victoria Inn Prize Package
- Sue Murray, Flin Flon Victoria Inn Prize Package
- Sherri Sutton, Kikiwak Inn - The Pas Prize Package
- Sue Murray, Clear Concepts Prize Package

Congratulations to the Members in Flin Flon
 For the second year in a row Flin Flon has had the highest per capita attendance at our AGM teleconference sites.
 Way to go Flin Flon!