President's Report By Wendy Despins

Many of you will have noticed the theme running through the last three issues of the newsletter. Beginning with the December 2004 issue; in my president's report I focused on a question raised by one of our members: "What has the Union ever done for me?" Answers were researched from a number of different perspectives including: the President of St. Boniface Hospital, a Federal Government Organizational Development Consultant, a union member who had grown up in a union household prior to the introduction of Medicare, an MAHCP member from the perspective of being a patient with Coronary Artery disease, and a Labour Relations Officer delving into a historical perspective. So as you can see we have approached this issue from a number of different views and angles. I would like to offer one more perspective, the perspective of union versus non union, and changes within Collective Agreements over time.

I have spoken to a number of individuals in the private sector who work in non-unionized environments. Some very key points began to emerge as we discussed salaries, benefits, pensions, overtime rates, compassionate leave and a number of other items we enjoy as unionized employees.

It soon became apparent to me that there are no standards of practice between employers or even within the same employer. I was often told that salaries and benefits are not discussed between co-workers. That type of information is between the employer and the employee. This of course varied from organization to organization; some had very clearly defined salaries and basic terms and conditions of employment, while others did not.



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Vacation packages range anywhere from 2 weeks increasing to 3 weeks after a varied number of years. Some are capped at three weeks, some at four weeks after 20 years.

One individual I spoke with, after nineteen years with the same employer was required to use a vacation day to attend her Grandmother's funeral.

Salary increases again varied and are often linked to performance appraisals.

Income protection ranged from 10 days per year to 12 days per year and some employers have a cap of 90 days. Many employers only have unpaid sick time and no provisions for medical leave, such as doctor's or dentist appointments.

Many non-unionized employers are not paid either shift or weekend premiums and have forced overtime.

Most employers do not have pre-retirement leave or sick time pay out.

Maternity leave in Canada is 1 year at EI rates (without salary top up), and depends on provincial or federal employment standards whether or not you return to the same job. In MAHCP'S collective agreement while on leave you have salary top up and you return to the same or comparable position.

Most non-unionized employers do not have a mechanism to deal with grievances or issues in the work place. Many employers do have Human Resource departments, where issues may be taken. If not resolved there the next option is that the employee can hire a lawyer and/or represent themselves at the Labour Board. If the grievance is about a dismissal and is successful, in most non-union environments the individual is generally awarded damages, in unionized environments, the individual is re-instated. According to an employment standards report put out by Statistics Canada in the fall of '03, access to a grievance system is much higher in the unionized environment, up to 95% versus a range from 22.9% to 61.3% in the non-unionized sector. It goes on to state that access is more common in larger firms. Grievance/ arbitration can and do cost in excess of \$100,000.00.

When I began to look outside of Canada I discovered even greater variations. For example maternity leave with some organizations doesn't exist; average is three months, often without pay.

I know a nurse who worked in Vancouver until the Campbell government closed the hospital where she was employed. Subsequently she has gone to work in Washington State commuting from home in Canada. It has been quite an eye opener for her. At her current employer, holiday time is earned based on the number of hours worked, it is not a predefined amount. If the employee is ill the sick time is deducted from the earned time, and the sick time bank is not drawn on until all of the earned time is depleted. There is no coverage for maternity or paternity leave; once again earned time off

is used. As a result many expectant mothers do not go on maternity leave until the last possible day, working as much overtime as possible prior to delivery in order to build up more earned time. The average nurse at this hospital is back to work within three weeks of the delivery of their child. The maximum vacation entitlement is 10 days the first year and 15 in the second. Compassionate leave is also deducted from the earned time. One nurse has to work till age 67, in order to have adequate medical coverage in later life. If she retires before this age to purchase coverage will cost her \$1000.00 per month.

A former MAHCP member also left Canada seeking employment in the United States and her experience has been very similar. With her employer her earned time off (ETO) in addition to vacation and sick time must also cover statutory holidays; there are seven in the United States versus eleven in Canada. If she arrives at work and only has two patients booked for the day, her employer can and does send her home, without pay or benefits accruing. She must punch a clock whenever she arrives or leaves the workplace and her ETO is calculated based on this and is adjusted each pay period. There is no pension plan and no medical after retirement. For her to have adequate medical coverage she will have to work into her seventies. In addition the medical coverage and benefits is only valid at the facility she currently works at. So if she requires medical care elsewhere she would have to use private insurance.

As I have done this research it has reinforced my opinion and my general appreciation for living and working in Canada in a unionized environment. It has also reinforced my belief of the importance of unions and their contribution to the overall standard of living in a country and the likelihood of higher standards and more social programs and initiatives.

And as one last point I would like to take you through a current real time MAHCP example about a specific topic relating to the subject of Attendance Management and a "program" that was recently implemented in one particular workplace by the management of that site.

In September 2004 an "attendance Management" Program was implemented in this workplace. The supporting document to this program was 72 pages in length.

The summarized description stated they were committed to providing reasonable levels of support to employees, in particular, by providing assistance and consideration to those who are ill or experiencing personal problems by monitoring and managing emerging attendance concerns, or potential concerns, unacceptable attendance and absenteeism by utilizing the Attendance Management Program (AMP)".

The premise and purpose of this program was based on "assumptions" and not hard data. One assumption is as follows: "Although most employees do not abuse sick or other leave, a small percentage of employees do."

Some examples of the type of monitoring of the employees are as follows;

• People standing at the door documenting "tardiness" resulting in placement in the program for being 1 minute, 2 minutes or 3 minutes late.

• Requirement of "advance notice" of situations that may affect attendance.

• Stating in the program document that the employee may voluntarily provide personal medical information so that management can evaluate whether the time off is being used appropriately.

There were over 18 items contained in the program document that were either a violation of the collective agreement or Human Rights Legislation or Workplace Safety and Health or the Labour Relations Act.

In April of this year MAHCP filed a grievance against this employer. That resulted in the program being removed.

So, back to the question of "What has the union done for me?"

The employees that work in this kind of environment know what this union has done for them and what this union will continue to do for them. The fact is there is still a need for unions in the workplace right here and now. The fact is there is still a need for unions in the future. The fact is there are still employers like this today....

The fact that employers still exist that practice this type of management style is reason enough for one to understand the need for unions to represent the interests of workers in Health Care.