MAHCP

Diversified... Yes! Focused... Absolutely!

by Wendy Despins President, MAHCP

There is the old adage that you can't know where you are going without knowing where you have come from.

Recently when I was providing a brief history of MAHCP at the Staff Representative Level 1 training it occurred to me that there are many members who may not have a knowledge or understanding of our union from a historical perspective. In fact many may not know why MAHCP was founded, who founded it, when it was founded and where MAHCP was founded.

Historically the professional body for the Laboratory Technologists had negotiated informally with the Hospitals. It was in the late 1960's that the hospitals informed them that they would in future only bargain with a formal body, certified by the Manitoba Labour Board, and until that occurred refused to meet with them.

On the 22nd of October 1970 Helmut Friesen, the first President of the Association chaired a meeting held at the Winnipeg General Hospital. A \$2.00 initiation fee was required and the newly formed union was called The Manitoba Association of Medical Laboratory Technologists (MAMLT). The total membership was comprised of 74 Technologists. The first financial statement showed a balance of \$68.48. By 1975 changes were in store for the MAMLT. The union hired the first Executive Director Lorne Renault, and several other technical/professional healthcare groups made inquiries about becoming members. To meet these requests would require revisions to the Constitution and on June 12, 1975 at a General Meeting the constitution was amended to allow for the inclusion of other health care occupational groups. Radiology Technologists, Physiotherapists, Occupational Therapists, Inhalation

Therapists, Respiratory Technologists (later changed to Therapists), EEG Technologists, EKG Technicians, Laboratory Technicians and Nuclear Medicine Technologists joined



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that same year. MAMLT then became The Manitoba Paramedical Association (MPA). The third and last name change occurred in 1985 when MPA became the Manitoba Association of Health Care Professionals (MAHCP).

By 1985 membership had risen from the 74 of 1970 to 948! By 1995 it had further increased to 1300 members in 30 different disciplines! MAHCP continued to grow and in 1998 increased again totaling 2100 members, and 2001 saw the MAHCP membership swell to 3400 members represented today.

As with anything there are always many firsts. The first certificates issued to MAHCP were to represent the employees at the Brandon General Hospital and the Assiniboine Hospital in Brandon. MAHCP's first non-technical certificate was the Physiotherapists at the St. Boniface General Hospital.

MAHCP was the first union to negotiate a transfer/merger/amalgamation agreement with the Employers. MAHCP union members were the first to enjoy the full portability of seniority and benefits amongst all the bargaining units participating at the central table. MAHCP was the first union with paid maternity leave supplement in the health care sector. MAHCP is the only union that has a unique option; a majority of our Collective Agreements utilize a third party to look at the issue and offer an opinion as to the probable outcome if the grievance were to proceed to arbitration called the "Grievance Investigation Process" (GIP).

The Governance of MAHCP is now and always has been the responsibility of the elected Executive Council. Our Constitution provides the fundamental laws of our Association and provides the roadmap for governance. Governance is exercising visionary leadership and accountability to the members of MAHCP. Governance is writing the values, principles, and ethics statements and ensuring that these governance guidelines are followed. Governance is ensuring oversight of the organization. The Executive Director and staff operationalize, or put into action the vision and plans of the governing body.

So . . . the question of who runs the union is easily answered; members elected to the Executive Council are responsible for running the union. The Executive Council is composed entirely of your peers who have unique knowledge of the issues that impact our professional lives. These elected allied health professionals sit in stewardship of the organization; they establish policies and procedures to guide the staff while abiding by the constitution and by laws. The roles of governance and operations are clearly defined. The governance policies are developed by the Executive Council and the operational policies are developed and implemented by the Executive Director.

Our membership is diversified, representing approximately 160 different occupational groups, from community to onsite delivery. All of those occupational groups are health care professionals and within our diversity is a solid focus and commitment to health care professionals by health care professionals. We are a Union focused on improving working conditions and benefits for you. If you are interested in becoming involved please contact me. There are many levels of involvement that might be of interest to you. Diversified . . . Yes! Focused . . . Absolutely!

Let us celebrate our diversity and embrace our focus.

Wishing each and everyone of you the joy and blessing of the holiday season.

In friendship and solidarity,

