NERVISE Manitoba Association of CARE June 2010 Professionals

2010 BARGAINING IS HERE!

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Enclosed with this Newsletter:

- Executive Council & Staff Rep Nomination Form
- Scholarship Application Form
- Resolution Submission Form
- Personal Insurance Information

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MAHCP News is published quarterly in March, June, September and December. Advertising will be entertained. For more information, please contact the Editor at 772-0425. *Revenues from advertising will be used to supplement the MAHCP Professional Develoment Fund.* Don't worry if you missed the **Staff Rep Training** Sessions in June. Registration is now open for Fall 2010 sessions!!

> Level 1 - November 4 & 5 Level 2 - November 8 & 9

Contact Cathy at 772-0425 or cathy@mahcp.ca to register today!

Are you missing out on an opportunity?

Have you overlooked the

MAHCP Professional Development Fund?

Since its inception in 2007 the MAHCP Professional Development Fund has been well utilized by the membership. Over \$5000.00 has been awarded to members to support them in their profession. This fund is available to qualifying members for professional development relevant to their work or to take courses related to union education.

The maximum frequency of eligibility is once every two years. Successful candidates are required to pay the full amount of registration, and a percentage will be reimbursed upon submission of receipt, along with information about the course and an explanation of the relevance of the course to their profession. Maximum award will be \$250.00.

The application form can be obtained either from the MAHCP website or the MAHCP office. Completed application forms and supporting information should be sent to: MAHCP 101-1500 Notre Dame Ave. Winnipeg MB R3E 0P9 or fax to 1 204-775-6829.

Collective Bargaining Realities in Health Care

Lee Manning, Executive Director

Past articles have spoken to legislation, mediation, conciliation, arbitration and strike action relating to the collective bargaining process.

This article will serve as an update for Central Table Bargaining and some of the current realities we face in this upcoming round.

The Labour Relations Secretariat (LRS) is a body that is contracted to perform collective bargaining on behalf of the Employers. There are eighteen sites/regions represented at Central Table.

The negotiators who work for the LRS work with the Employers to gather proposals, put together the proposal package, select the Employer's members of the bargaining committee and present the package on their behalf.

The main function of the LRS is to bargain for the Employers in all sectors of healthcare and to provide input to the employers on collective agreement language interpretations during the life of the current collective agreements.

The LRS works closely with the Minister of Finance's office and take their monetary direction or mandate from that arm of the government.

There are a limited number of negotiators employed by the LRS which, depending on where a particular sector is in the "bargaining cycle" affects other sectors' ability to get to the bargaining table on some occasions as quickly as they would like to. The bargaining sectors I am referring to are ourselves, (Professional Technical Paramedical or as sometimes referred to Allied Health), the nurses (MNU), support (UFCW MGEU CUPE etc.) and community (MGEU). MNU is currently at the bargaining table and the LRS has expressed a desire to complete that table before engaging ours.



Lee Manning Executive Director

This has resulted in the delay in exchanging proposals with the Employer.

We are optimistic that the other tables will conclude shortly, however, if this is not the case we may have to exercise other options of a less collaborative nature.

To review the articles referenced by Mr. Manning please see www.mahcp.ca

- 1. Newsletter December 2008 Collective Bargaining 101
- 2. Newsletter March 2009 Contract Proposal Development Process
- 3. Newsletter September 2009 *The Collective Bargaining Process part 3 . . .*

President's Remarks

In March of 2009 we ran articles on Workplace Health and Safety followed in June 2009 with an article on Psychological Harassment. Since that time **Executive Director Lee Manning** and I have met on separate occasions with the Minister of Health Theresa Oswald, the then Minister of Labour Nancy Allan and the then Deputy Minister of Health Arlene Wilgosh. We have also met with the Leader of the Opposition Party Hugh McFadyen, Health Critic Myrna Driedger and the Leader of the Liberal Party Dr. Jon Gerrard. Follow-up meetings have also included executive council members and MAHCP members at large. Our goal was to raise government awareness of the occupational groups represented



Wendy Despins President, MAHCP

by MAHCP, to discuss the issue of shortages within the technical/ professional/paramedical sector and to discuss the anti-harassment legislation introduced by Liberal MP Dr. Jon Gerrard. Part of our presentation includes a graphic illustration with three possible scenarios showing the various health care professionals a patient might encounter in the course of diagnosis, treatment and ongoing care. This graphic diagram has proved to be very effective in demonstrating the diverse range of health care professionals involved with health care delivery. We had some excellent discussions regarding the legislation in Quebec and Saskatchewan particularly Saskatchewan's clear definition of harassment and the well laid out steps on how to investigate harassment complaints. It is our intent to continue to lobby government and advocate on behalf of MAHCP members specifically on these three topics and issues of the day. I wish you all a most enjoyable summer. Please work, drive and play safe and as always, I look forward to hearing from you. I can be reached at (204) 772-0425 ext. 213 or wendy@mahcp.ca.

In solidarity,

Wend

MAHCP Member Retirees

We are counting on you . . .

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 1-800-315-3331.

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

- Virginia Kowalski, Radiology Technologist, Health Sciences Centre
- Janice Smith, Radiology Technologist, Concordia Hospital
- Andrea Rutledge, Radiology Technologist, Concordia Hospital
- Gerry Besyk, Laboratory Technologist, DSM St. Boniface Hospital
- Eileen Nazarko, Physiotherapist, Health Sciences Centre
- Dan Michaud, Emergency Medical Services, South Eastman Health
- Bill Brereton, Rehab Engineer, HSC

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

Associate Membership Status Available for Retirees

Article 5 of our MACHP Constitution provides for our retired members to hold an associate membership and to continue to be part of MAHCP. A nominal annual fee of \$10.00 has been established by the Executive Council.

Please be aware that this option is available to you or your co-workers who have already retired. This will keep you on the mailing list for the newsletter as well as affording you opportunity to participate in programs.

Mel Myers Labour Conference -March 4 & 5th, 2010

Plenary speaker Jerry Dias of CAW opened the 2010 Mel Myers Labour Conference. There was no doubt upon hearing Mr. Dias speak that he is passionate about union activism and about the rights of all workers. Though he spoke at length about occurrences and his experiences within mostly the automanufacturing sector, he ensured that the message of solidarity (both within and among unionized workers) was loud and clear. He also made clear that decisions made by our governments/private industry and employers as a whole impact not only workers directly but also whole communities and economies. It's very easy for organizations, workplaces and individual professions to become focused on one's own interests, issues and concerns. The reminder from Mr. Dias to consider the 'bigger picture' of workers' rights in all professions and industries enthused and helped to unite all attendees.

The first session I attended was 'Bargaining in Tough Times' - a rather timely topic. The discussions held were mostly directed to construction/industry, however the general information provided and personal accounts from the presenters and attendees were very interesting. The discussions focused on the power struggle that is often the bargaining process and on the importance of keeping lines of communication open with members throughout the entire bargaining process. There was a brief but very interesting discussion surrounding the issue of essential services, the concluding message being that creative thinking becomes crucial when the bargaining process starts to break down and the majority of a membership are encompassed under the essential service umbrella.

'Remedies' was an interesting presentation on the types of remedies that one may hope to obtain (or may be available) when pursuing a grievance or lodging a complaint with the MB Labour Board. The most valuable resource



Cheryl Keller

provided during this session was the written material (as there was very little deviation by the presenters away from these materials and also little general discussion). The presenters spoke about identifying damages in the initial grievance report and differentiated between general damages, special damages and punitive damages – material I will likely refer back to.

Emotions can certainly run high when discussing, 'Strikes, Lockouts, Injunctions and Picketing'. This was a very interesting discussion as many of the attendees had previously been involved in some sort of past labour dispute. The presenters stressed the importance of early and detailed preparation and communication with the membership before and during any job action. There was also a lengthy discussion on the organization and proper conduct of members during picketing (and the possible legal ramifications resulting from misconduct).

Listening to some of the personal accounts of the members' involved in strike or lockout situations was like reading from a dramatic novel or newspaper. Some of the actions/behaviors of the employers during picketing absolutely astonished me. The overall message – the strike scenario is one that very few want to find themselves involved in. That being said, should communications break down during the bargaining process, being prepared and ready for any

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MAHCP Career Profile

Cardiology Technologist

Submitted by

Colleen Bemister Cardiology Technologist Misericordia Health Centre

According to the Canadian Society of Cardiology Technologists, cardiology technology involves the noninvasive testing and monitoring of the functioning of the human heart under various conditions and to provide basic patient care during these procedures.

Registered members may be employed in the field of Cardiology by assisting and performing duties in:

- Electrocardiography
- Exercise Tolerance Testing
- Ambulatory Monitoring
- Pacemaker Technology
- Cardiac Ultrasound
- Invasive Cardiac
 Procedures

(Duties may vary from province to province.)

Cardiology Technologists work mainly in hospitals and clinics but may also work as educators, in research, as Critical Equipment specialists or for salesand service companies as Clinical Specialists.

Affiliated with the Canadian Cardiovascular Society (CCS) the Canadian Society of Cardiology Technologists (CSCT) is a non-profit organization established to raise the standard of practice, level of competence and the quality of patient care in Canada.

It is a self-governing body that admits and revokes membership and requires members to maintain professional standards by participating in a mandatory Continuing Education Unit (CEU) system.

The CSCT was founded in 1970 and will be celebrating it's 40th anniversary this year. The CSCT has approximately 1400 members across Canada.

In Manitoba, the Manitoba Association of Cardiology Technologists (MACT), which is also a self-governing body, works to maintain the education and membership in Manitoba. The MACT was founded in 1963 and has about 130 members.

To become a Cardiology Technologist you must be a graduate of a CSCT approved program and pass the CSCT Registration Exam. There are several programs across Canada including BCIT, CDI, and Mohawk College. The programs are based on a National Occupational Competency Profile (NOCP) which has recently been revised to reflect an ever expanding profession and in turn an expanding educational program. Manitoba implemented a Cardiology Technician program at



Colleen Bemister

Red River College (RRC) which ran from 2006-2008 and graduated 29 students. Four Cardiology Technologists from Winnipeg were hired by RRC as instructors for the program. The RRC program is currently under review. Many of these graduates were successful in passing the CSCT Registration Exam and are now Registered Cardiology Technologists. Unfortunately many of these new Cardiology Technologists are under-employed in Manitoba, but with many of the current Cardiology Technologists approaching retirement this should not be

> an issue in the foreseeable future. Also, as the population ages, the demand for Cardiology Technologists will grow as the need for services increase.

Advancing technology has allowed Cardiology Technologists to do their jobs with more ease but there are downfalls to this. The electrocardiograph (ECG machine) has become more "user friendly" which has

given some employers in the community hospitals the impression that other professions can operate the equipment and do not need specific qualifications.

The quality and accuracy of the diagnostic test depends on the operator's knowledge and skills in electrocardiography.

Only Cardiology Technologists have the expertise to provide accurate results and initial interpretation to a physician for use in the diagnosis and treatment of cardiac disease.

To review earlier articles related to EKG please see www. mahcp.ca:

- 1. Newsletter March 2009 President's Report EKG A Dangerous Precedent
- 2. Newsletter March 2009 *Members Express Their Frustration*



Mel Meyers continued from Page 4

scenario (including strike action) is absolutely necessary. The written materials provided were very helpful.

The final session I attended was, 'Avoiding the Pitfalls – the Legal and Practical Issues of Representing Members Accused of Criminal conduct in the Workplace'. This is another scenario I would be glad to never have to encounter, but I would rather be well informed and somewhat prepared for this situation should it ever arise.

The presenters provided some excellent suggestions on how to conduct oneself as the union rep involved in dealing with an employee who has been charged criminally. Some of the discussion included: ensuring the employee has contacted legal counsel; talks about how to conduct oneself (as a union rep); how to suggest the employee conduct him/herself; what to do, and sometimes more importantly, what not to do in these cases. For example, the suggestion was made for staff reps to write, "These notes are being taken in preparation for the grievance and/or arbitration process" at the top on all notes. This clearly outlines the purpose of the document(s), making it less likely these notes may be subpoenaed in a criminal case. The written materials provided during this session contained mostly case law examples/scenarios, many of which I haven't yet had a chance to read.

Over the past while, there has been quite a lot of discussion at our workplace surrounding the issues of accommodation and return to work agreements. For this reason, I didn't find the plenary session, 'Assisting Members in Returning to Work' all that helpful or informative. However, had I no previous experience with this topic, this would have been a valuable introduction.

The 'Top Ten Cases of 2009' were very interesting. Topics covered included accommodation; expectation of privacy/use of personal information; video monitoring for the purpose of disciplinary action; violations to the WH&S Act; an employer denying the right for union representation; more harsh discipline for a union official vs. members; and an employers' blatant disregard for an Arbitration Award. Some of the discussions left me shaking my head, very appreciative for my current working environment, but also very mindful that situations in the workplace can change quickly. It also left me wondering how many of our members are in workplaces or have employers who try to get away with contract violations or unfair practices to/mistreatment of our members.

In conclusion, I would firstly like to thank MAHCP for this educational opportunity. While I am still relatively new in my understanding of union activism, labour practices, and various job actions; this conference proved very informative and helpful in furthering my knowledge on these and other related topics. What I do clearly understand is how important the rights and fair treatment of every worker is to me and that I am committed to doing what I can to stand up for continued fair work practices. In that, all attendees were definitely united. I appreciated the opportunity to attend and would be a more than willing participant in the future.

Respectfully submitted: Cheryl Keller MAHCP Staff Representative

On March 4th and 5th of this year, as staff representative of MAHCP, I had the privilege of attending the 9th annual Mel Myers Labour Conference along with

representatives



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Adele Spence

from a broad spectrum of labour unions. The wide range of workshops addressed labour issues as well as allowed participants to interact and learn about challenges faced by other workers and solutions they found helpful. It was particularly important to attend this conference as MAHCP begins negotiating a new central table contract this year.

The first workshop I attended was 'Bargaining in a Recession'. One of the points raised was an issue that our members are facing at present - when the employer begins to cry that 'times are tough' even before negotiations begin. During discussions, we heard that other unions had been asked to take the hit for increasing costs and mismanagement and the various strategies they used in managing that type of situation. I was pleased to hear that many suggestions had already been initiated by our executive council – such as; starting to prepare early; obtaining feedback and proposals from membership; asking members for their concerns and issues and setting priorities accordingly.

Another workshop I attended was 'Keeping Your House in Order'. Once again. I was pleased to hear that many of the recommendations had been initiated by our executive council several years ago and are part of our ongoing work. Our constitution and policies are constantly being reviewed and changed to ensure fairness, accountability to membership, and allow the work of the union to be completed as smoothly as possible. It was emphasized that, although governance work can be very tedious and boring, it should never stop. If the governance committee ever feels that their work is done, then their role is to start from the beginning and review the work of past years to see if 'it is still relevant to the membership.

Two workshops that overlapped in content were 'Strikes/Lockouts/ Injunctions and Picketing' and 'Labour Law 101: A Primer'. Labour lawyers taught us, in easily understood language, the legal intricacies of strikes as well as treatment of members in general. Using real life examples, they left us laughing much of the time, but brought home many important points and rights that members can use to empower and defend themselves. It reminded me that working for a living does not mean servitude and that management is required to follow and respect many laws and rights of workers.

I would strongly encourage any staff representative to obtain the education provided by MAHCP required to attend this conference. It is guaranteed to empower you to represent your members with greater confidence and knowledge. You may also be pleasantly surprised that Labour law can be very interesting and even exciting. The binder of notes I received will definitely continue to be an excellent reference resource for the future.

Respectfully submitted: Adele Spence MAHCP Occupational Therapy Director and Staff Representative

Psychological Harassment in the Workplace by Walter McDowell, Labour Relations Officer

There is need for clear and concise legislation and regulations to define and systematically address bullying. Our current Health and Safety Programs cannot effectively define, identify and manage this hazardous workplace behavior.

It's time to look through the lens of our internal workplace safety and health systems (Employer Health & Safety Programs) to effectively address this type of hazard in our workplaces.

We currently have a system in place to address physical and workplace environment hazards except when it comes to psychological harassment. An individual person or a group of persons, whose behaviour towards another person or persons in the workplace can equate to a hazard that is not dissimilar to a physical hazard. According to the Manitoba Federation of Labour, an estimated 41% of the labour force has experienced psychological harassment in the workplace.

The Government of Canada has enacted federal legislation; while provincially only three Canadian provinces Quebec, Saskatchewan, and Ontario have legislation (Ontario legislation received Royal Assent mid December and will become law mid June, 2010). In the United States there are even fewer, with only thirteen of fifty states having legislation attempting to address the protection of workers from personal/psychological harassment.

The impact of this hazard (in the form of behaviours) in the workplace results in real physical and mental health issues to individuals and their families. Some of which can be characterized by anxiety reactions, insomnia, irritability, social isolation, ulcers, dermatitis, depression, heart disease, nightmares, aggressive behaviours, hypertension, asthma, joint and muscle pains, hair loss, sexual dysfunction, eating disorders, increased alcohol, smoking/drug intake, violent retaliation and suicide.

So, how do we address this hazard in the workplace for our members and indeed for all Manitobans?

MAHCP is lobbying government as well as educating our membership with the knowledge of what bullying is and what to do about it.

As employees, we need to treat these behaviours as hazards to our health and begin to report them to your union, and your employer through the Workplace Safety and Health Committee. This also includes knowing and understanding the current respectful workplace policies and process descriptions therein.

As citizens, we all have the responsibility and opportunity to write to our elected members of parliament advising them of our individual experiences and/or



"Our management strategy is unrelenting psychological abuse without resorting to cheap racial or sexual harrassment."

our concerns about this insidious and often invisible hazard in the workplace.

We need to ask our government to expand the definition of harassment in law, specifically section 10 of the Workplace Safety and Health Act to include a clear and unequivocal legal definition of Bullying or Psychological Harassment.

For example, Quebec's definition is as follows:

"workplace harassment" means any vexatious behaviour in the form



Walter McDowell Labour Relations Officer

of repeated and hostile or unwanted conduct, verbal comments, actions or gestures, that affects an employee's dignity or psychological or physical integrity and that results in a harmful work environment for the employee"

Ontario's bill 68 that has been given third reading by the Ontario legislation early in the new year is as follows:

> "workplace harassment" means engaging in a course of vexatious comment or conduct against a worker in a workplace that is known or ought reasonably to be known to be unwelcome"

Saskatchewan's legislation is as follows:

I) "Harassment" means any inappropriate conduct, comment, display, action or gesture by a person:i) "that either:

> (A) is based on race creed, religion, colour, sex, sexual orientation, marital status, family status, disability, physical size or weight, age, nationality, ancestry or place of origin; or

(B) subject to subsections (3) and (4), adversely affects the worker's psychological or physical well-being and that the person knows or ought reasonable to know would

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MAHCP Members Receive 2010 Outstanding Health Professional CDA Award

Norma and Nicole were nominated by Julie Dexter, with letters of support from Dr. Elizabeth Sellers and Dr. Heather Dean. CDA Manitoba & Nunavut Regional Director Linda Berg remarks included the following excerpt from the letter of nomination.

The Outstanding Health Professional Award is presented to a health professional that has made a difference in improving the lives of individuals living with diabetes in our region. The award recognizes the work of a health professional within her or his own medical field, rather than an individual working for the Association on a volunteer basis.

This year, we are very pleased to present the 2010 Outstanding Health Professional Award to two exceptional individuals: Nicole Aylward and Norma VanWelleghem. Norma and Nicole have made significant individual as well as combined contributions as the two registered dietitians specializing in pediatric diabetes in our Region. Both have been described as "true leaders" at the Diabetes Education Resource for Children and Adolescents (DER-CA).

They have continued to provide leadership and consistency for the families in the program, amidst staffing changes, as well as offer guidance and training to other incoming health care professionals. Their abilities step far beyond basic nutritional counseling - both becoming Certified Pump Trainers, a role once held only by nurses. They have mastered insulin adjustment and the teaching of insulin therapy, in true collaborative practice.

Independently, Norma has been essential in improving the life of



L to R: Kelly Lambkin, Public Programs & Services Coordinator, CDA; Norma Van Wellegham, MSc, RD, CDE; Linda Berg, Regional Director Manitoba & Nunavut Region, CDA; and Nicole Aylward, RD, CDE

young adults living with type 1 diabetes through her Masters Thesis work which focuses on the Maestro Transition Program. She is also the lead coordinator of the Annual Teachers Workshop through DER-CA, which helps children with type 1 adjust to a safe classroom life.

Nicole, too, has vastly contributed to the quality of life for those living with diabetes. She has championed the DER-CA's Family Research Day, a networking event for families affected by type 1 diabetes.

Nicole is a member of the National Nutritional Committee and a member of the expert committee for the 2008 CDA Clinical Practice Guidelines.

Both Norma and Nicole have been contributors to the Diabetes Educator

Section and Clinical and Scientific Section of the CDA. They have both also been an instrumental part of the Association's Camp Briardale, a camp for kids living with type1 diabetes, attending first as students in counselor roles and now as members of the Medical team.

Norma and Nicole's individual contributions to advancing the care of individuals with diabetes have been strengthened by their combined efforts and partnership. Individually and collectively, their contributions to the DER-CA team, their profession, the community, and families living with diabetes is remarkable.

On behalf of CDA, Linda Berg was pleased to present the 2010 Outstanding Health Professional Award to Nicole Aylward and Norma Van Welleghem. **Registered Dietitians** are acknowledged professionals uniquely trained to advise on diet, food and nutrition. They can separate fact from fiction, healthy eating plans from unsafe diets and translate the science of nutrition into healthy food choices. Dietitians play a major role in health care, industry, government and education. Dietitians influence policy development; direct nutrition programs; manage quality food services: and provide information and counsel that allows clients, including the consumer, to make informed decisions about their nutrition and food choices. Dietitians are essential members of the health care teams and practice in a wide range of diverse workplaces (health care facilities, the community, foodservice management, private practice, industry, government, education and research). The first step to becoming a dietitian is a four year Bachelor's degree with major credits in Foods and Nutrition from a university offering a Dietitians of Canada accredited dietetic education program. Step 2 is successful completion of a one year internship program of supervised practical experience accredited by Dietitians of Canada. The final step in becoming a Registered Dietitian (RD) is registration with the provincial regulatory body. A further 800 hours of training is required to become a diabetes educator.

Diabetes educators partner with patients and their families to teach diabetes self-management. They



MAHCP Members Norma Van Wellegham MSc, RD, CDE and Nicole Aylward, RD, CDE

are skilled at assessing the particular needs of the individual living with diabetes and provide practical solutions about medication, testing, diet and exercise to help them achieve as healthy a lifestyle as possible and gain control of their disease. In Canada the requirements to become a certified diabetes educator are; being registered with a regulatory body in Canada as a health professional and a minimum of 800 hours of practice in diabetes education. Recertification is required every 5 years either by writing the qualifying exam or maintaining continuing education points.

Canadian Diabetics Association Wellness Expo



MAHCP Executive Council Members Chad Harris, Zana Anderson, and Adele Spence

MAHCP Representatives on the Social Action Committee participated in The Canadian Diabetic Wellness Expo held on April 24. As proud supporters of the CDA we were pleased to talk to people at the expo about who MAHCP is and our involvement with the Canadian Diabetes Association. Diabetes is a disease that touches people in all walks of life and many members in our Association work directly or indirectly with people who have Diabetes. Our members know only too well how important ongoing medical care and education is in order to control diabetes and prevent negative consequences. During the Wellness Expo, the many aspects of care in diabetes were highlighted, both medical and non medical. The importance of appropriate diet and exercise were, of course emphasized. Various healthy foods were highlighted; including dark chocolate (yes there were samples). One exhibit showed us the value of good quality, properly fitted shoes and another suggested that using those shoes to catch a Frisbee was an excellent way to get some exercise. Our members picked up a few Frisbees and will be demonstrating them at our next executive council meeting in order to pass on some of the lessons we learned about healthy living.

Helpful Legal Information for MAHCP Members

Making the Case for Employee Harassment

by Jacob Giesbrecht of Inkster Christie Hughes, LLP

What can we do in Manitoba if we are subject to harassment in the workplace? If it is in the form of physical or sexual harassment, employers and police are usually proactive in helping an employee deal with it. At least more so than in years past. But what if it abuse is more subtle and comes in the form of psychological harassment? What if the harasser is a superior directing you in the workplace? In those circumstances it may be more difficult to protect yourself.

One avenue that employees may look to in dealing with verbal or psychological harassment is to try to deal with the matter in court. There is a view among some in the legal community that harassment should be a tort for which a person can sue the harasser. That is

not necessarily the case. There is no clearly recognized tort of harassment in Canada. There is a similar legal action called the intentional infliction of mental distress that may be a valid basis on which to launch a lawsuit.

However, pursuing a claim for the intentional infliction of mental distress through the court is difficult and expensive. One of the aspects of this type of lawsuit that makes it particularly difficult is that evidence must be provided that the victim of the harassment has been severely traumatized. Medical evidence must show that the victim suffers severe physical or psychological impairment because of the actions of the harasser. Essentially, in order to be successful in winning this suit, you have to prove that the harasser has won. That their actions have so impacted the victim psychologically or physically

that they are severely damaged. Another problem that arises in the pursuit of this claim against a harasser is where do you go to sue the harasser? Do you have to go to court or can the union help deal with the matter at arbitration?

The Supreme Court of Canada in 1995 in the case of Weber v. Ontario Hydro essentially gave arbitration boards the power to impose common law remedies between employees and employers governed by a collective bargaining agreement. Before this case, if an employee had an issue that was not directly covered by the terms of an agreement they had to seek a remedy by suing in court. If an employee suffered a tort like the intentional infliction of mental suffering, they would take the perpetrator to court.

The Weber case changed all

Definition of Tort: A negligent or intentional civil wrong not arising out of a contract or statute. A tort is an act that injures someone in some way, and for which the injured person may sue the wrongdoer for damages. Legally, torts are called civil wrongs, as opposed to criminal ones. (Some acts like battery, however, may be both torts and crimes; the wrongdoer may face both civil and criminal penalties.) Weber case there have been many decisions out of the Courts rejecting lawsuits filed by employees or former employees against their employers. The courts are finding they simply don't have the jurisdiction to deal with issues between

that. Since the

employer and employee.

The court in Weber asked itself the following question: *"When may* parties who have agreed to settle their differences by arbitration under a collective agreement sue in tort?"

In answering this question the Supreme Court looked at the labour relations rules that essentially committed employers and unions to dealing with their employment issues exclusively through the arbitral process. They looked at the Labour Relations Act in Ontario that stated an arbitrator shall settle "all differences between the parties arising from the interpretation, application, administration or alleged violation of the agreement". The Supreme Court had to decide whether this provision gave the arbitral process the jurisdiction to deal, not only with the application and interpretation of

the collective agreement but also the ability to hear evidence and make decisions about Charter claims and tort cases.

There was some doubt raised that



Jacob Giesbrecht

arbitrator's had the necessary expertise to deal with these sometimes very complex legal issues. The Supreme Court determined that this shortfall could be overcome by the fact that arbitrators decisions are subject to judicial review. Errors made by an arbitrator could be corrected by the courts.

The court concluded "that mandatory arbitration clauses such as s. 45(1) of the Ontario Labour Relations Act generally confer exclusive jurisdiction on labour tribunals to deal with all disputes between the parties arising from the collective agreement. The question in each case is whether the dispute, viewed with an eye to its essential character, arises from the collective agreement."

This "essential character" test is now applied to any dispute between employee and employer in a collective agreement context. If employee psychological harassment occurs in the workplace, the essential character of that dispute arises out of the collective agreement and is to be dealt with according to the terms of the collective agreement.

The fact that issues of psychological harassment are to be dealt with by arbitrators does not make them any easier to prosecute. There is still no tort of "harassment" and the intentional infliction of mental distress remains a very difficult action to successfully bring forward.

Some employers have been proactive in drafting respectful workplace policies in recent years. This may become a viable means of addressing harassment complaints in the future. Their usefulness at this time is somewhat limited because it is the employer that retains the right and

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Helpful Legal Information

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responsibility over any investigation of a complaint. Where a complaint is against a manager or the employer itself, they can simply choose not to conduct an investigation.

Workplace safety and health legislation is another avenue to explore when trying to pursue a psychological harassment complaint. Unfortunately, the workplace safety legislation is directed more to resolve physical safety concerns and is of limited value when trying to establish a psychological danger.

The best way to avoid being the victim of psychological harassment is to document the activity that you feel is intended to inflict emotional suffering. Keeping a journal of such events may help to establish the pattern of activity that will ultimately help to prove the harassment. It will help to properly identify that there is actual harassment occurring.

Once a sufficient pattern is established, consultation with the union representative is integral to protecting oneself from the trauma of physchological harassment. If the harassment happens at work, the essential character of the dispute arises out of the employment relationship and is therefore something that has to be dealt with in the arbitral arena.

All of the avenues outlined above to address a case of psychological harassment have their weaknesses. The best way to address these weaknesses would be for legislation that recognizes the seriousness of the issue. A clear definition of psychological harassment is required. Along with a definition of what it is there should be an independent mechanism to investigate and provide a remedy for the victims of this ever growing workplace issue.

Choosing the Attorney

As you know, Inkster Christie Hughes LLP offers a legal assistance program to the members of MAHCP. Under this plan you receive reduced rates on a number of specific legal matters such as the purchase or sale of a home, Wills, Powers of Attorney, Health Care Directives, separation agreements, divorces as well as a reduction on general legal rates.

This paper is intended as an introduction to the topic and not as legal advice. If you require specific advice with respect to your situation, you should contact a lawyer.

This series of articles will continue in future editions of the MAHCP News. If there is a topic that you would be interested in, please contact Wendy at 772-0425.



MAHCP LEGAL ASSISTANCE PLAN

Membership does have its privileges

MAHCP members receive reduced legal fees on house purchases, sales and mortgages as well as Wills, Powers of Attorney and Health Care Directives under the MAHCP Legal Assistance Plan.

Discounts also apply to family law matters and members benefit from a 20% reduction in other legal fees.

For more information, please contact: Jacob Giesbrecht at Inkster Christie Hughes LLP at 947-6801

Psycholocal Harassment cont'd from page 7

cause a worker to be humiliated or intimidated; and;

(ii) that constitutes a threat to the health or safety of the worker.

Currently, workplaces in Manitoba have Respectful Workplace Policies that are driven by the general duty provisions of the Manitoba Human Rights Code. In our experience, personal harassment is not clearly defined or addressed. While the Saskatchewan legislation, has a clear definition and distinction that sets it apart from the Human Rights Code.

It is important that our government moves forward with changes similar to those of other provinces to address this very real and growing hazard. This will provide a pathway to improving the overall health in Manitoba workplaces. It also gives us a practical systematic approach to implementing additional requirements in order for Employers to continue to address workplace safety and health management.

We are encouraged to hear from the Honourable Minister of Labour, Jennifer Howard who has indicated that the Government is indeed moving toward addressing this important workplace health issue for our members.

The goal, or desired outcome is a comprehensive and practical approach to investigation of such hazardous behavioral occurrences will also be thoroughly addressed in any forthcoming regulation. The requirement of a common standard for investigation of personal harassment is a critical component of effectively managing behavioral hazards in the workplace.

The impact of psychological harassment /bullying goes well beyond the scope of the individual, it affects families and the community at large. It creates costs on multiple levels not the least of which include increased health care costs.

To review previous article see www. mahcp.ca

1. Newsletter June 2009 – Psychological Harassment

MAHCP Scholarship Fund

MAHCP Executive Council will award up to five (5) - \$400, scholarships annually. Scholarships are open to children of MAHCP members entering their first years of full-time post-secondary education. E.g.: University or Community College, etc.



Eligibility:

Consideration will be given to candidates (students) who must submit the following information:

- 1. A copy of their final High School transcript of marks.
- 2. A letter of recommendation from one of the following (teacher, employer, counselor, or supervisor).
- 3. A brief letter or resume outlining activities such as volunteer work, community work, or extracurricular activities.
- 4. A 500 word essay on the benefits of being a union member.
- 5. Their intended course of study and their letter of acceptance to a Post Secondary program must also be included.
- 6. Candidates should include their parent(s)/ guardian(s) full name and place of employment.
- 7. Applications must be complete in full, otherwise they will not be considered.

Process:

Deadline submission of application (available on-line or through MAHCP Office) no later than 1600 hours on July 23rd to:

> Bob Bulloch - Chairperson MAHCP Scholarship Fund 101-1500 Notre Dame Avenue Winnipeg, MB R3E 0P9

MAHCP Executive Council will notify all candidates by mail by the end of August.

MAHCP Monique Wally Memorial Scholarship Fund

The criteria for the Monique Wally Memorial Scholarship Fund is the same as the MAHCP Scholarship Fund, except for the following: one (1) - \$400 scholarship will be awarded annually to a resident of Manitoba entering their first year of full-time post-secondary education with the intention of entering an Allied Health Profession; and the topic of the 500 word essay is "why enter into an allied health profession?".

Call for Honour Roll Nominations

Eligibility:

The intent to publicly acknowledge the contribution of a Manitoba Association of Health Care Professionals member who has enabled the Association to grow and prosper.

This includes individuals who have given a generous amount of time serving as an elected officer on the Executive Council or one of many committees such as EAP, HEPP, Workplace Health and Safety.

It also includes individuals who have helped organize or were instrumental in organizing groups to join the Association.

Normally, individuals who have retired or are close to retirement and who have the general support of their colleagues would be considered.

Process:

Deadline for submissions will be no later than the end of July.

To: Bob Bulloch, Secretary Chairperson, MAHCP Honour Roll 101-1500 Notre Dame Avenue Winnipeg, MB R3E 0P9

Criteria:

A member in good standing:

- Who has served in an elected position on the Executive Council for at least two terms; and/or
- Who has served as a representative of the Association on Committees such as collective bargaining, EAP, Workplace Health and Safety; and/or
- Who has in a major way assisted in organizing new units for the Association; and/or
- Who has actively promoted the Association to others; and/or
- A member who has retired or is close to retirement; and/or
- A member who is generally recognized as a positive influence on behalf of the Association by their peers.

Meeting Calendar

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

June 8, 2010

 Seven Oaks Staff Rep Mtg Seven Oaks Cafeteria 1200 hours

June 9, 2010

• Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs

June 9, 2010

• General Staff Rep Meeting 101-1500 Notre Dame Ave. 1830 hours

June 14, 2010

 Concordia Staff Rep Meeting CH019, HR Conference Room 1200 hours

June 17, 2010

 HSC Staff Rep Meeting NA235, Isabel Stewart Bldg 1130 to 1300 hrs

June 17, 2010

• SEH Staff Rep Meeting Smitty's, Steinbach 1200 hours

June 21, 2010

 AHWC Staff Rep Meeting Marigold's Restaurant 1200 hours

June 25, 2010

• Resolution Submissions, Staff Rep and Executive Council Nominations Deadline

July 1, 2010

Canada Day - MAHCP Office Closed

July 13, 2010

• Seven Oaks Staff Rep Mtg Seven Oaks Cafeteria 1200 hours

July 14, 2010

• Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs

July 14, 2010

• General Staff Rep Meeting 101-1500 Notre Dame Ave. 1830 hours

July 14, 2010

• DSM HSC Staff Rep Meeting NA227, Isabel Stewart Bldg 1130 to 1300 hrs

July 15, 2010

• SEH Staff Rep Meeting Smitty's, Steinbach 1200 hours

July 19, 2010

• AHWC Staff Rep Meeting Marigold's Restaurant 1200 hours

July 23, 2010

Scholarship Application Deadline

August 2, 2010

• Civic Holiday - MAHCP Office Closed

August 10, 2010

 Seven Oaks Staff Rep Mtg Seven Oaks Cafeteria 1200 hours

August 11, 2010

• Executive Council Meeting 101-1500 Notre Dame Ave 0845 hrs to 1700 hrs

August 11, 2010

• General Staff Rep Meeting 101-1500 Notre Dame Ave. 1830 hours

August 16, 2010

• AHWC Staff Rep Meeting Marigold's Restaurant 1200 hours

August 19, 2010

• SEH Staff Rep Meeting Smitty's, Steinbach 1200 hours

September 6, 2010

• Labour Day - MAHCP Office Closed

October 14, 2010

• MAHCP 40th Annual General Meeting

November 4 & 5 and 8 & 9, 2010

• Staff Rep Training Levels 1 & 2 See page 2 for more information

Bring your collective agreement to all member meetings.

Rotary Career Symposium





Hailee Beauchamp

The Winnipeg Convention Centre was humming March 7th and 8th filled with student's eager and excited chatter as they explored the Winnipeg Rotary Career Symposium. MAHCP'S booth was again a major draw for students seeking information, looking to their future and possible career choices . . . or was it the jellybeans? Hmmmmm, perhaps it was a bit of both. Executive Council and Staff Representatives took the opportunity to meet with the students and adults alike, providing information about the many possible technical/professional career choices available in health care. But . . . back to the jellybeans, the person with the closest count to the total number of the jellybeans not only won them but also won a \$25 gift certificate for McNally Robinson.

Hailee Beauchamp was the lucky winner of the gift certificate and jellybeans with her guess that was within 7 of the total count.

Call for Nominations MAHCP Executive Council 2010-11

Nominations for the 2010-11 Executive Council are due at the MAHCP Office, 101-1500 Notre Dame Ave., Winnipeg, MB. R3E 0P9 on or before 1600 hours Friday, June 25, 2010. Please send to the attention of the Nominating Committee.

In order to be valid, a nomination must be signed by two eligible members of the Association (i.e. same occupational group, same geographical health region), and must include signature of acceptance of the eligible nominee.

The Executive Council of MAHCP monitors the business affairs of the Association, plans policy, and sets direction for the Executive Director to follow. The Constitution permits representation from each geographical health region, each occupational group with ten or more members, and each special interest group.

The following represents the current Executive Council positions, which have **one year** remaining in the existing term of office:

Officers:

Vice - President

Regional Directors: Burntwood RHA

Occupational Directors:

Cardiology Laboratory Medical Physics Orthopedics Pharmacist Physiotherapist Radiation Therapy Recreation

Employee Interest Group Directors:

Aboriginal Health & Wellness Centre

Nominations will be accepted for the following vacancies on the Executive Council for a full two year term of office:

Officers:

President

Regional Directors: Brandon RHA

Nor-Man RHA South Eastman RHA Winnipeg RHA

Employee Interest Group

Directors: Clinics **Community Therapy Services** Jocelyn House Society for MBs with Disabilities

Directors:

Audiology Child Life Specialist Dietitian Electroencephalography EEG EMS Food Service Supervisor Home Care Coordinator Mental Health Midwife MRI Nuclear Medicine Occupational Therapy Pastoral/Spiritual Care/Chaplain Psychologist Radiology Resource/Utilization Coordinator **Respiratory Therapy** Social Work Sonography Speech Language Pathology

(N.B. Should any members believe that a particular occupational group constitutes ten or more members, but is not listed herein, please forward a duly completed nomination for consideration by the Executive Council).

Any inquiries regarding the nomination/election process can be directed to the MAHCP office via mail, phone 1-204-772-0425, e-mail info@mahcp.ca, Fax 1-204-775-6829, or by our toll free number 1-800-315-3331.

A nomination form has been included in this newsletter and can also be obtained by calling the MAHCP office or downloading from our website, www.mahcp.ca.

In Solidarity, Al Harlow Chair - Nominations Committee



Al Harlow

Call for Staff Representative **Nominations**

All terms for Staff Representatives are for two (2) years beginning at the end of the Annual General Meeting in October. When required the Executive Council may appoint Staff Representatives if a vacancy occurs during the term or if nominations come in after the deadline date. These appointments end at the next Annual General meeting.

All those Staff Representatives who had their nominations in by the June 26, 2009 deadline still have one (1) year left in their term. These terms will end at the end of the 2011 Annual General Meeting.

The terms of those Staff Representatives who have been appointed by the Executive Council since June 26, 2009 will expire at the end of the 2010 Annual General Meeting. You will need to be renominated by this year's deadline in order to qualify for a two (2) term.

If an election is required they will be held according to the Constitution.

For a comprehensive list of the areas that are eligible to have a Staff Representative, please go to the web site (www.mahcp.ca). If you do not have access to a computer a list can be sent to you.

Your nomination must be received at the Association office by 1600 hours on Friday June 25, 2010.

In Solidarity, Al Harlow Chair - Nominations Committee

2009-10 Executive Council

Officers

President	Wendy Despins, DSM - SBH, Laboratory	Executive Director lee@mahcp.ca	Executive Assistant janet@mahcp.ca				
Vice President	Al Harlow DSM - Concordia Hospital Laboratory	Joan Ewonchuk Administrative Assist	7 1				
Treasurer	Chad Harris, CCMB Medical Devices	joan@mahcp.ca	cathy@mahcp.ca				
Secretary	Bob Bulloch, HSC Pharmacist	Linda Pondy Data Entry Clerk linda@mahcp.ca	Milcah Abril Secretary/Receptionist/Clerk milcah@mahcp.ca				
Directors							
Aboriginal Health & Wellness Centre	Daphne Lafreniere Residential Health Support Worker	Walter McDowell, LRO: walter@mahcp.ca	St. Boniface Hospital, Misericordia HealthCentre, Gamma-Dynacare Medical Labs, Jocelyn House				
Cardiology	Colleen Bemister, Misericordia Health Centre						
Community Therapy Services	<i>Margrét Thomas,</i> Physiotherapist	Ken Swan, LRO: ken@mahcp.ca	Health Sciences Centre (Lab, Diagnostic Imaging, Pharmacy, EEG), Deer Lodge Centre, Community Therapy Services,				
Laboratory	Janet Fairbairn, CCMB		Winnipeg Clinic				
Mental Health	Kathy Yonda, Brandon RHA	Michele Eger, LRO:	Health Sciences Centre (all other USC				
Nuclear Medicine	Shelagh Parken, SBH	michele@mahcp.ca	Health Sciences Centre (all other HSC Members not included under Ken's list ing), Concordia Hospital, Tissue Bank Manitoba, Manitoba Clinic, Critical Care				
Occupational Therapy	Adele Spence, DLC						
Orthopedic Technology	John Reith, HSC		Transport Team, Health Action Centre				
Physiotherapy	Shelley Kowalchuk, HSC	Gary Nelson, LRO:	Victoria General Hospital, Brandon				
Radiation Therapy	Robert Moroz, CCMB	gary@mahcp.ca	RHA, Brandon Clinic, Centre Taché				
Radiology	Michael Kleiman, HSC		Centre, Society for Manitobans with Disabilities, Rehabilitation Centre for				
Recreation	Zana Anderson, DLC		Children, CancerCare Manitoba				
Burntwood RHA	Tanya Burnside , Pharmacy Technician	Armand Roy, LRO: armand@mahcp.caSeven Oaks General Hospital, Breach Health Centre, Aboriginal Health & Wellness Centre, Nor-Man RHA, Burntwood RHA, South Eastman I					
Winnipeg RHA	Jason Linklater, HSC, Orthopedic Technology						

Lee Manning

Call for Resolutions

The Manitoba Association of Health Care Professionals is accepting resolutions for change(s) and/or additions to:

- Constitution and Bylaws
- Standing Rules
- Policy Papers

Resolutions must be specific and must be typed or in legible handwriting. The resolution must be moved and seconded by members of the Association. The mover of the resolution must attend the Annual General Meeting on October 14, 2010 to speak to the resolution as written. A telephone number should be included should clarification be required. A copy of the resolution form will be available in the newsletter, or may be obtained by calling the office (772-0425), or by downloading from the website (www.mahcp.ca).

Staff Assignments

Janet Beaudry

Please forward all resolutions to the MAHCP office, to the attention of Al Harlow, Vice-President. **Resolutions are due at the MAHCP office prior to** <u>1600 hours June 25, 2010</u>.

In solidarity, Allan Harlow, Vice-President Chair - Governance Committee

How Well Do You Know Your Collective Agreement?

Question: If I applied for and accept a different position with my employer, do I have to give notice?

Answer: No, notice is only necessary if you are leaving the employ of the employer.



"The information contained in this question is meant to be a general rule and should not be considered exhaustive in terms of contemplating every contingency in every work environment. Any questions that members may have regarding their particular situation should be directed to their Labour Relations Officer for clarification."

Have a Great Summer!!!

Word Dearch														
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Q	U	Ε	S	S	D	W	Y	Х	0	А	Х	Y	В	Н
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Ν	А	R	А	М	L	Ι	F	Т	Η	Q	F	Q	В	Ν
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Barbeque Baseball Beach Bonfires Camping				Canada Day Family Fireworks Fishing Golf			Mosquito Relax Shorts Sunscreen Swimming				Vac	ation		

Word Search

SAVE THE TREES!!

If you would like to receive this newsletter and other information by email only or in addition to your paper copy, please contact joan@mahcp. ca.

If you think you are supposed to be receiving email updates, but aren't, your email provider may be directing MAHCP email to your "junk" or "bulk" file folders. You may have to edit your settings.

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. 772-0425 or joan@mahcp.ca



RETIRING? Are you or one of your co-workers retiring in the near future? Let us know so MAHCP can acknowledge you and keep our database up to date!

Mark Your Calendar MAHCP 2010 40th Annual General Meeting

> Thursday, October 14, 2010 Clarion Hotel, Manitoba Room 1445 Portage Avenue



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**