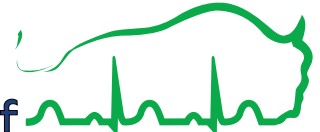


NEWS

Manitoba Association of
HEALTHCARE



June 2012

Professionals

A Look Back

Rural EMS Workers Win With MAHCP At Their Side

By Armand Roy

MAHCP has served its Emergency Medical Services members well. Not so many years ago EMS membership was made up of many Emergency Medical Responders working as casual employees in various small community sites across the three Regional Health Authorities MAHCP represented. Often the RHA's looked upon EMS personnel as nothing more than ambulance drivers. MAHCP realized that there was a change that needed to take place in that perception and that the Employers needed to realize how a dedicated, well trained, professional and stable paramedic staff would bring untold rewards to the delivery of health care.

As an example, in January of 2005, MAHCP membership in EMS in South Eastman consisted of 4 full time paramedics, 11 part time paramedics and 65 casual Emergency Medical Responders, Community EMS, and EMT 1 members. In 2005, MAHCP signed a Memorandum of Understanding with the Nor-Man Regional Health Authority for a 12 hour, 4 days on, 4 days off, shift schedule. This schedule was designed by the EMS membership in Nor-Man and to the Employer's amazement was adored by the staff.

In 2006 MAHCP provided a copy of that schedule to the staff representatives in South Eastman to discuss and consider, in an attempt to find solutions to numerous grievances and frustrations experienced by EMS membership in South Eastman.

EMS management caught wind of the exchanges the staff were having over these shifts and realized an opportunity was presenting itself. MAHCP's initiative

would create efficiencies and a more stable workforce. EMS management took it upon itself to lobby the RHA's Board of Directors for funding. They also requested that MAHCP form a committee of EMS MAHCP representatives. The goal was to create more full time staff and a viable work schedule.



Dana Spence
South Eastman Health

Within three days MAHCP had a committee struck and the process began. Meetings were held monthly for over two years where several schedule options were discussed with input from every EMS member. The plan consisted of two phases. Each phase was tied to approval of increased funding for EMS in South Eastman.

EMS membership has increased to over 70 employees in South Eastman - all because MAHCP was able to react quickly and was pro-active in working with the EMS membership and the Employer to create stable employment for its members.

In Phase One twenty-eight full time EMS Paramedic positions were created and four part-time. Today there are now 37 full time EMS paramedics and 6 part-time paramedics working in South Eastman with the full benefits of the MAHCP contract. EMS membership has increased to over 70 employees in South Eastman - all because MAHCP was able to react quickly and was pro-active in working with the EMS membership and the Employer to create stable employment for its members.

Back in Nor-Man, EMS personnel were required to do security duty and attend to care homes to provide phlebotomies; not exactly their core functions. MAHCP lobbied tirelessly to eliminate these tasks that were originally put in place solely because it was thought that this would fill their time when they weren't out on a call.

Finally after years of discussion, grievances and meetings with the Employer, both tasks were removed from EMS duties.

A more recent example of the positive relationship between MAHCP and the EMS membership occurred in April of this year. A grievance was filed in Nor-Man over the compensation of the EMS Operations Supervisor compensation. The Operations Supervisors in Nor-Man had traditionally been paid 10% above the EMT top of scale.

continued on page 4

WIN AN IPAD!!!

See page 11 for details

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Enclosed with this Newsletter:

- Executive Council Nomination Form
- Staff Rep Nomination Form
- Scholarship Application Forms
- Call for Resolutions 2012
- AGM Pre-Registration
- CDA Run Poster
- 2014 Central Bargaining Team Nomination Form

Editor: Shelley Kowalchuk
Physiotherapy Director

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Shelley Kowalchuk,
Joan Ewonchuk



Production:

Joan Ewonchuk
Administrative Assistant

Meeting Calendar

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

June 5, 2012

- Gamma-Dynacare Staff Rep Mtg
101-1500 Notre Dame
1800 hours

June 5, 2012

- Gamma-Dynacare General Mtg
101-1500 Notre Dame
1930 hours

June 6, 2012

- CCMB Staff Rep Meeting
CCMB - Rm TBD.
1200 hours

June 7 & 8, 2012

- Staff Rep Level I Training
101-1500 Notre Dame
0830 to 1630 hours

June 11 & 12, 2012

- Staff Rep Level II Training
101-1500 Notre Dame
0830 to 1630 hours

June 12, 2012

- Seven Oaks Staff Rep Mtg
Seven Oaks Cafeteria
1200 hours

June 13, 2012

- Executive Council Mtg
101-1500 Notre Dame
0845 to 1700 hours

June 13, 2012

- General Staff Rep Mtg
101-1500 Notre Dame
1830 hours

June 18, 2012

- AHWC Staff Rep Meeting
Golden Terrace Restaurant
1200 hours

June 21, 2012

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

June 21, 2012

- HSC Staff Rep Meeting
NA001, Isabel Stewart Bld
1130 to 1300 hours

July 2, 2012

- Canada Day Stat Holiday
MAHCP Office Closed

July 4, 2012

- CCMB Staff Rep Meeting
CCMB - Rm TBD.
1200 hours

July 10, 2012

- Seven Oaks Staff Rep Mtg
Seven Oaks Cafeteria
1200 hours

July 11, 2012

- Executive Council Mtg
101-1500 Notre Dame
0845 to 1700 hours

July 11, 2012

- General Staff Rep Mtg
101-1500 Notre Dame
1830 hours

July 16, 2012

- AHWC Staff Rep Meeting
Golden Terrace Restaurant
1200 hours

July 19, 2012

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

August 1, 2012

- CCMB Staff Rep Meeting
CCMB - Rm TBD.
1200 hours

August 6, 2012

- Stat Holiday
MAHCP Office Closed

August 8, 2012

- Executive Council Mtg
101-1500 Notre Dame
0845 to 1700 hours

August 8, 2012

- General Staff Rep Mtg
101-1500 Notre Dame
1830 hours

August 14, 2012

- Seven Oaks Staff Rep Mtg
Seven Oaks Cafeteria
1200 hours

August 16, 2012

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

August 20, 2012

- AHWC Staff Rep Meeting
Golden Terrace Restaurant
1200 hours

ANNUAL GENERAL MEETING
October 11, 2012

**Bring your
collective
agreement
to all
member
meetings.**



PROUD SUPPORTER OF THE



Visit diabetes.ca/proudsupporter

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 Development Fund.*

Seeing CETA For What It Really Is

I recently met a woman who is fiercely proud of being a Canadian citizen and feels blessed to live in such a wonderful country. This is something I share her passion about. She hasn't always been a Canadian citizen; she immigrated to Canada just over 20 years ago. In the years leading up to the family's immigration to Canada her country was ravaged by almost 2 decades of civil war. There were staggering numbers of citizens being murdered at the hands of the military death squads. In one year alone almost 12,000 civilians were murdered. The vast majority of those targeted by the death squads were teachers, students, journalists, human rights advocates, priests, trade unionists, and villagers.

Her message to me and to everyone that is willing to listen is **WAKE UP! Wake up Canada** to what is happening now and what we have lost just in the past 20 years. She is asking us to look at the erosions to social services, to health services, to public services, to legislation affecting all aspects of Canadian life including unions and unionism. All of these changes are showing us what we can expect in the future if we don't **Wake UP!**



What is CETA?

Is this an everyday topic of conversation at your dinner table or in your work place? My guess is no. In fact many of you are asking who or what is CETA? CETA is the Canada-European Comprehensive Economic Trade Agreement. For this woman it is a topic of conversation at the family dinner table. They see the staggering negative impact that this agreement will have on our Canadian way of life if signed by our Government. It would encourage the privatization of public sector services; it would undermine social, health and environmental regulations while providing increased investors rights at the very high cost of our democratic rights. A singular example in respect to health care is the potential for higher prescription drug costs at an estimated 2.8 billion per year. These costs will impact our public health care system and individual Canadians.

Language in the proposed agreement would allow large corporations to override government decisions federally, provincially and municipally. At the municipal level it would include decisions made by school boards and hospitals. This has the potential to undermine our democratic decision making processes by our fellow elected Canadian citizens.

Will CETA cause job creation or job loss? The government claims there will be an increase of 80,000 new

jobs. However, the Canadian Centre for Policy Alternatives study estimates that between 28,000 and 150,000 jobs will be lost as a result of CETA.

There are many examples of loss of sovereignty that Canada would sustain under CETA. The European Union wants all public services covered by CETA. If it is passed, private health care companies from both Europe and the United States will be able gain access to our Medicare services. Drinking water services could be included in CETA, allowing European multinational companies access to municipal water services. Also, our already dwindling environmental controls could be ignored by European companies working in Canada and would impede our government from making new regulations.

As of May 15th, three provinces including Manitoba, British Columbia and Ontario have raised their concerns about the agreement. Motions have been passed by over 50 municipalities requesting a greater say in the negotiations. There are millions of Canadians represented by these municipalities. And over 80 Canadian and European organizations have jointly demanded an end to this brand of free trade negotiations. Are these voices enough for our Government to hear?

I know that each of us have very busy work and home lives, but . . . if we don't speak up our society and our culture will continue to be undermined and eroded. As citizens our human rights and environmental rights far out-weigh short term private interests. As this very inspiring woman said to me, "**WAKE UP! Wake up Canada!**"

In solidarity
Wendy

For more information, check out:

Council of Canadians http://www.canadians.org/trade/documents/CETA/CETA_ten.pdf

Trade Justice Network <http://www.tradejustice.ca/en/section/1>

Canadian Centre for Policy Alternatives (CCPA) <http://www.policyalternatives.ca/publications/commentary/what-ceta-and-why-should-we-be-worried-about-it>

National Union of Public and General Employees (NUPGE) <http://www.nupge.ca/search/results/ceta>

Canadian Union of Public Employees (CUPE) <http://cupe.ca/ceta>



Wendy Despina,
President, MLT

DID YOU KNOW...

100,000
Manitobans are living
with diabetes

EMS Workers Win

(cont'd from page 1)



When the Provincial Government initiated a more standardized accreditation system for EMS, the differential for the Operations Supervisors actually was reduced and any Paramedic who would replace the OS when they were off duty were paid more in responsibility pay than the OS.

MAHCP made several attempts at bargaining to deal with the issue but eventually it was agreed by both sides to deal with it outside of bargaining once a new collective agreement was completed. Within the MAHCP contract there is a provision for a Grievance Investigation Process. That process consists of a mediator cost-shared by the Employer and MAHCP whose mandate is to find resolution prior to going to arbitration.

On April 1, 2012, MAHCP reached agreement with the Nor-Man Regional Health Authority for a special hourly premium to be paid to Operations Supervisors of 10% above the Intermediate Clinical Paramedic wage scale. This ensured that the unique pay arrangements for Nor-Man EMS remain in place and made their compensation for Operations Supervisors higher than the provincial standard.

In MAHCP's last negotiated settlements with Nor-Man, South Eastman and Burntwood, EMS made some significant gains. Although EMS employees are still underpaid for the work they do, the gains made at the table were significant given the economic climate and the provincial government austerity program. They include:

- An increase in the uniform credit system
- Adjusted wage scale to catch up with provincial standards
- 2.75% General Increase over two years
- 1.85% Market Adjustment increase
- 2% long service step for employees with over 20 years service
- Increases from 3% to 3.6% till 2019 to ensure they will have parity with Paramedics in the City of Winnipeg
- For Employees in the North a northern differential of \$7,000.00 in Nor-Man and \$9,000.00 for Burntwood.

MAHCP does more than just negotiate contracts and file grievances. It has taken the lead in negotiating better working conditions and salaries for EMS Employees. And the challenge is there - there is still a lot of work to be done.

We have to educate the Employers and Government as to the importance of our front line "hospitals on wheels" and the dedicated Paramedics who tirelessly and unselfishly give their all for patient care. We need to educate the public and our own members about the work they do. MAHCP is proud of our EMS members and are working hard to build these principles and goals.

Introducing MAHCP'S Newest Staff Members!

Please help the Executive Council and Staff welcome Jake, Marcy and Birgit to MAHCP. Their bios can be found on the MAHCP website (www.mahcp.ca).



Jacob Giesbrecht, LLP
Legal Counsel



Marcy Ervick
Labour Relations Officer



Birgit Molinski
Labour Relations Officer

Happy Canada Day!



How Well Do You Know Your Collective Agreement?

Question: How many days of Banked and Vacation time can I carry over into the next vacation year?

HSC Article #18, Clause 1802 General Holidays in the 2010-14 CA (formerly 1402) – *An employee scheduled and required to work on any General Holiday shall be paid one and one-half (1½) times her basic rate for regular daily hours. In addition a full time employee shall be granted a compensating day of rest within thirty (30) days before or after the holiday. If the compensating day of is offered to, but by mutual agreement, not taken by an employee, then that employee shall receive an additional day's pay at the basic rate in lieu thereof.*

If the Employer has not offered the compensating day off and has allowed the employees to bank their compensating day off or in their language their stat days, the Employer has not paid a day's pay for the stat. That leads to Article 1403.

HSC Article #18, Clause 1803 General Holidays in the 2010-14 CA (formerly 1403) – *Employees shall be allowed to bank up to five (5) alternative days off in lieu of general holidays, for the employee's future use, at a time mutually agreed to between the employee and the Employer.*

That means if in **1802** (formerly 1402), the criteria have not been met then the employee can bank the stat days up to five to use at another time. The mutual agreement is subject to operational requirements in order to achieve a time suitable to both parties. There is nothing in the language that now supports a pay-out of the banked 5 days.

Now it gets more complicated. In the previous contract there was a clause – 1401(b) which allowed an employee to carry over up to 3 days of combined banked time and vacation into the new vacation year. The clause was bargained out and replaced with **1503**.

HSC Article #15, Clause 1503 Annual Vacation (New) – *Upon request, an employee may be permitted to retain up to three (3) days of her regular vacation for the purpose of taking such time off for personal reasons such as religious observance or special occasion, as long as adequate notice is given to accommodate scheduling. Carry over of these three (3) retained vacation days will be allowed subject to a written request being received by the appropriate manager 60 days prior to the end of the current vacation year. Such days shall be paid out if not taken by the end of the vacation year to which they were carried over.*

The language no longer speaks about banked time and therefore our interpretation is there is no limit to when the 5 days of banked stat time can be used. It does not state a limit

based on a vacation year or a fiscal year. Following this logic an employee has the opportunity to carry over 8 days of combined stat and banked time. If the original 1401 (b) had remained then there would still be a limit. The new language, which all of the Employers agreed to, now provides for a greater combined allotment of of vacation and banked time. The new language under **Article #15 Annual Vacation**, replaced 1401 (b) in Article #14 General Holidays, as it was considered by the Employer to be confusing.

Unless there is a Memorandum of Understanding in your particular agreement which limits the amount of banked time that can be carried over, then our view is the limit is only set by the equivalent to the five stat days.

Article numbers in red refer to the draft HSC collective agreement for 2010-14. Article numbers in black refer to the former HSC collective agreement for 2006-10. Although we refer to the HSC collective agreement, this language exists in other central table collective agreements. Please contact your LRO if you have any questions.

“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.”

Collective Agreement NO print copy, please!

In order to “save the trees” we are trying to keep our printing to a minimum. If you are interested in using the online version, please complete the form below:

I do not wish to receive a print copy of my collective agreement. I will view it online at the MAHCP website at http://www.mahcp.ca/htmlfiles/MEMBER_SERVICES/collective_agreements.asp

Name (print): _____

Employer/Site: _____

Signature: _____

Date: _____

Return completed form to MAHCP by mail or email
joan@mahcp.ca.

DRAFT Central Table Collective Agreements are now available to view online at www.mahcp.ca (click on Member Services)

A Day at Children's EEG

Submitted by:

Christina Anderson R.E.T., Paula Melendres R.E.T.,
Leanne Morissette R.E.T., and Jill Patrick R.E.T.

The Children's EEG lab is nicely tucked away on the first floor of the Children's Hospital, Winnipeg. On any given day upon walking past you can expect to hear laughing, singing, and sometimes crying.

Inside the lab you will find four full time EEG technologists working hard with the children to get quality EEG recordings. This involves keeping the child still, calm and relaxed while they perform simple tasks as specified by the technologist.

This is a feat often easier said than done when working with children and requires creativity and flexibility. Not only does this require the technologists to be competent in their technical skills but also skilled child entertainers. Although an EEG is a simple test to perform, some children may find it boring while others may think it is a little scary, which can make cooperation difficult. It is, therefore, the technologist's job to put the child and their family at ease and do their best to make it a fun experience.

Children are welcomed into the lab with walls full of stickers of popular cartoon characters and two big fish tanks that are home to many tiny friends. In the recording room, technologists have on hand toys, story books, movies, and music to help keep the child preoccupied and content. Walls and ceilings are made more interesting with airplane mobiles, glow in the dark stickers and an alphabet chart to sing along to.

Once in the room, the child is also allowed to choose toys and stories from the lab's collection. Typically, two technologists would be working with a child; one will interact with the child and keep them entertained while the other one will perform the actual test. Lab coats are also avoided so the techs look like everyday people.

The technologist then demonstrates the electrode application process to the patient in a child-friendly manner, often applying a single electrode referred to as a "camera" to his or her hand and explaining how all the electrodes are "colorful ribbons for their hair" while the EEG itself is referred to as "picture-taking". Toys, stories and, for smaller ones, bottles or soothers, keep the child distracted while electrodes are applied.

recording. Lights are then dimmed for "quiet-time" where the child is asked to lay still and quiet.

At this time the technologists may count, sing, or let the child listen to the radio depending on age and cooperation levels. More often than not the child will fall asleep. At the end of the EEG the child receives a sticker of his or her choice. Sometimes the children have such a good time that they cry when its time to leave.



L to R: Paula Melendres, Christina Anderson, Jill Patrick (on the table), and Leanne Morissette

During the recording children may be asked to close and open their eyes followed by 3 minutes of deep breathing, during which the child is asked to "practice blowing out their birthday candles". As required, deep breathing will at times be performed for 5 minutes which may require the technologist to be creative in order to keep the child encouraged and breathing adequately. A strobe light is shown to the child during the EEG

The lab tends to both outpatients and inpatients ranging in age from a few hours old up to 17 years old. The procedure takes a minimum of one hour.

Methods of recording include: Routine EEGs recording approximately 30 minutes; Sleep-deprived EEGs recording a minimum of 45 minutes, where patients were instructed to either stay up late the previous night or not go to bed at all;

continued on page 7

Central Table Bargaining Update

Standardization:

We have met with the Employer and all of the monies in the Standardization fund have been allocated to the selected groups; Orthopedic Technologists, Spiritual Care Providers, Audiologists and Technical Advisors.

Market Adjustments:

We are awaiting dates for meetings with the affected Unions, MAHCP, UFCW, MGEU and the Employer representatives to decide which of the groups put forward will receive market adjustments and what the value of those adjustments will be.

Reclassifications:

Reclassification requests for new classifications have been filed with the

Employer and we are awaiting responses on these requests.

Collective Agreements:

The Employer received the new collective agreements for proofing at the end of March. Once we have them back from the Employer we will do a final proof and signing and they will be ready to print.

This is an arduous task as it requires the committee to proof each of the agreements (approximately 2 days) and to sign each memorandum of understanding in each of the agreements. In previous years this has amounted to over 130 man hours by the committee. You will find a draft of the collective agreement on the MAHCP website.

Also please take notice earlier on page 5 in the Newsletter regarding a form titled "Collective Agreement NO print copy, please!"

Recruitment and Retention Committee:

The Recruitment and Retention Committee has yet to meet. However we have made the Minister of Health aware of its existence and this seems to have filtered through to some of the Senior Executive of the WRHA and Workforce Planning. Meetings have been scheduled to discuss this with them in May.

Please note this issue includes the 2014 Central Bargaining Team Member Nomination Form.

Children's EEG *cont'd from page 6*

Neonatal recordings, either in the lab or in the intensive care unit, where infants are recorded for a minimum of 60 minutes and require additional electrodes to monitor physiological changes that aid with sleep cycle evaluation. To encourage children to go to sleep, which helps to get an artifact free recording and may give additional information, patients are scheduled around nap times and sleep habits, with teenagers scheduled first thing in the morning, infants around mid morning, and young children in the afternoon.

Prolonged monitoring, aimed at capturing events of concern, can be done on an outpatient using an Ambulatory EEG, where patients are set up with a compact EEG recording system, which they will then take home to be recorded overnight. It may also be performed on an inpatient with continuous EEG with video monitoring, which typically last up to a week but can also last several weeks and are done in the hospital wards.

Being able to interpret the EEG is an important part of working in the lab. Before any analysis is started the technologist's first goal is to get the EEG recorded as clearly as possible. The EEG patterns of the developing brain vary greatly from birth to age 17 years and technologists have to be familiar with what is appropriate for different age groups in addition to the epilepsies that are exclusive to, and present in, childhood.

A career in pediatric EEG is as rewarding as it is challenging. In addition to their regular duties at the Children's Hospital, each year the EEG technologists also participate in 'Discovery Day' where, together with the pediatric neurologists, they present and demonstrate to local teenagers the practice of neurology and give them exposure to different career paths in health care. The technologists also play a part at the Annual Teddy Bear's Picnic where they setup a Neurology booth and perform mock EEGs on the guests' stuffed animals.

MAHCP Asks You – Come Run With Us!

By Shelley Kowalchuk
Physiotherapy Director

Manitobans believe in giving back to the community. We've often been commended for our generosity to good causes and our spirit of volunteerism. So it was a logical step for us at the union to start a partnership with a 'good cause' near and dear to many of us here in Manitoba.

If you look at our MAHCP literature, our newsletter and our letterhead, you will see another logo alongside; it's the Canadian Diabetes Association logo. It's there because we started a partnership three years ago to work together to promote education and understanding of Diabetes. We as a union chose this partnership with CDA, because of diabetes' ever-increasing prevalence in our society, especially in Manitoba.

But it's not just our patients who live with diabetes; it's also our members and their families who are finding out that diabetes is, in fact, becoming a bigger part of our lives, both professionally and personally.

Throughout this newsletter, you will see some diabetes facts; they are highlighted in red balloons. We hope they provide you a glimpse into a disease that is with us more every day.

DID YOU KNOW...

...our province has the highest rate of Type 2, diabetes in the country

Call for Nominations MAHCP Executive Council 2012-13

Nominations for the 2012-13 Executive Council are due at the MAHCP Office, 101-1500 Notre Dame Ave., Winnipeg, MB. R3E 0P9 on or before 1600 hours, June 29, 2012. Please send your nomination form 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 Executive Council positions which have the **current term of office ending in October 2012**. Nominations will be accepted for **two year terms** in the following positions:

Officers:

President

Regional Directors:

Winnipeg Region

Nor-Man RHA

South Eastman Health

Employee Interest Group Directors:

Clinics

Community Therapy Services

Jocelyn House
Society for Manitobans with
Disabilities

Occupational Directors:

Child Life Specialist

Dietitian

EEG

EMS

Food Services Supervisor

Home Care Coordinator

Medical Devices

Mental Health

Midwife

MRI

Nuclear Medicine

Occupational Therapy

Orthopedic Technology

Pastoral/Spiritual Care

Pharmacist

Psychologist

Radiology

Resource Utilization Coordinator

Respiratory Therapy

Social Work

Sonography

Speech Language Pathology

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

Officers:

Vice-President

Regional Directors:

Brandon RHA

Burntwood RHA

Employee Interest Group Directors:

Aboriginal Health & Wellness Centre



Allan Harlow
Vice-President

Occupational Directors:

Audiology

Cardiology

Laboratory

Physiotherapy

Radiation Therapy

Recreation

(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,
Allan Harlow
Chair - Nominations Committee

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 30, 2011 deadline still have one (1) year left in their term. These terms will end at the end of the 2013 Annual General Meeting.

The terms of those Staff Representatives who have been appointed by the Executive Council since June 30, 2011 will expire at the end of the 2012 Annual General Meeting. You

will need to be re-nominated 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 June 29, 2012.

In Solidarity,
Allan Harlow
Chair - Nominations Committee

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 27th to:

Bob Bulloch - Chairperson
MAHCP Scholarship Fund
101-1500 Notre Dame Ave
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?”.



Bob Bulloch
MAHCP Secretary and
Pharmacy Director



Call for Honour Roll Nominations

Eligibility:

The intent of the Honour Roll is 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 Ave
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.

BRANDON SYMPOSIUM CONTINUES TO DRAW STUDENTS

By Kathy Yonda



Kathy Yonda at the Brandon Symposium

The Brandon Career Symposium was held on March 5, 6 and 7, 2012. This is the MAHCP's fourth year of participation, with 2908 students registered to attend. Students come from all over the province besides Brandon and this year included Boissevain, Portage, Shoal Lake, Swan River, and Dauphin as well as a school from Saskatchewan. In past years schools from up north and as far away as Thompson have come down to Brandon. We had many students stop by the MAHCP booth to ask questions about who we are and the various job opportunities in Health Care.

The two evenings were open to the general public with approximately 1200 people who came and checked out the displays. The adults were often looking to further their education and many stopped by with various questions. This was a great way to get the Associations' name out there. The symposium also enabled the MAHCP to educate and encourage the public and students to consider a career in one of the various health care professions.

A big thank you to all the members who volunteered to sit at the Association's booth this year. Without your support we wouldn't be able to participate in these types of events.

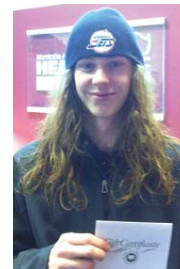
WINNIPEG CAREER SYMPOSIUM

By Shelley Kowalchuk

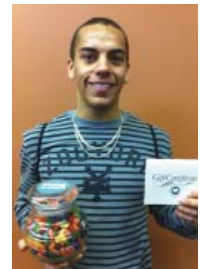
The Rotary Career Symposium was held in Winnipeg on April 4 & 5, 2012. Titled "Find Your Passion, Not Just Your Profession", approximately 15,000 students of all ages came to the Convention Centre to talk career choices with upwards of 179 businesses and organisations.

MAHCP members were on hand at their booth to talk to career seekers about the variety of health care professions open to them, and how our union fits into the health care landscape. A diverse group of members discussed job prospects, the kind of education needed and general information about our union. It was chance for health professionals to reach out to both older adults and high school and university-age students.

Once again a jellybean-counting contest was a draw for younger students. Students Declan Sparling and Tyree Cayer came up with the winning number, and were awarded with both jelly beans and a \$30 gift certificate from McNally Robinson.



Declan Sparling
Jelly Bean Contest Winners



Tyree Cayer

Non-Central Table Bargaining Update

Aboriginal Health & Wellness

Centre: The current agreement is in place until March 31, 2014

Brandon Clinic: Your new collective agreement has been mailed out and is in effect until March 31, 2014.

Gamma-Dynacare Medical

Laboratories: Your new collective agreement has been mailed out and is in effect until March 31, 2014.

Jocelyn House: The current agreement will expire January 31, 2014.

Manitoba Clinic: The Manitoba Clinic Collective Agreement was ratified in December 2010 and is in effect until December 31, 2013.

Society for Manitobans with

Disabilities: On Monday, May 15, 2012, Manitoba Association of Health Care Professionals (MAHCP) members employed at the Society for Manitobans with Disabilities (SMD) ratified a new collective agreement that run until March 31, 2014. The members at SMD had previously set a strike deadline of Wednesday, May 16, 2012, to back their demands for a fair collective agreement. Representatives of MAHCP and SMD worked with a Provincially appointed conciliator in seeking to find a settlement that would meet the needs of both parties.

Improvements within the new agreement include:

- Salary increases of 2.75% on April 1st of 2012 and 2013.
- 2% long service rate for members with twenty or more years of service with SMD.
- New lead classifications for Occupational Therapy, Physiotherapy and Speech Language Therapy.
- Improvements to travel rates.
- Portability of service for new hires with respect to vacation accrual and income protection benefits.

Winnipeg Clinic: Proposals are currently being formulated.

Win an iPad!!

Send us your email address and be entered into a draw for an iPad. You've already sent in your address? No problem! You're already eligible.

Between now and the next newsletter, we will collect new email submissions. If we hit the target number of emails, a draw will be made from the pool of ALL member email addresses (new and previously submitted).

If you have already sent us your email, encourage your co-workers to send in theirs so that we can hit the target. If we do not reach target, the draw will roll-over to the following newsletter.

How do I enter?

It's easy: send an email to joan@mahcp.ca or call Joan at 772-0425

PS: If you've already sent in your email address, but have not recently received any emails from the Association, give Joan a call.

Rules:

1. Winner to be drawn from all Association emails (new and previously submitted) prior to the publication of the next newsletter.
2. A minimum threshold of new emails must be achieved to trigger the draw.
3. Must be an active member of the Association.
4. Executive Council members are not eligible.
5. Winner consents to photo and announcement in the newsletter.
6. Failure to achieve the minimum threshold will result in the draw being rolled over to the next newsletter.
7. Prize details: iPad-2 16GB Wi-Fi



CALLING ON MAHCP MEMBERS!

Join the Third Annual *Run for Diabetes*

Get active and have fun, while making a difference for more than 94,000 Manitobans living with this serious, life-threatening disease

The Canadian Diabetes Association and Team Diabetes invites you to cap off your summer and launch into fall with the third annual Run for Diabetes in Winnipeg. Rally your family and friends on September 3rd, and be among hundreds of Winnipeggers at this fun-filled family event at Assiniboine Park. Your pledges and participation can help make a change in the lives of the more than 94,000 Manitobans living with diabetes or prediabetes.

You can sign up to run the North West Company Half Marathon. You may also choose to walk or run 10 k, or take part in the 3 k Family Run/Walk, or register your youngsters in the free Kids 8 & under Fun Run! It is a fabulous opportunity to spend a fun-filled day in the park, while being active and raising vital dollars to help support the work of the Canadian Diabetes Association.

This year's event will feature: food, refreshments, draw prizes, age-group awards, and overall female and male winners for the Half Marathon & Guaranteed T-Shirts and Medals for all finishers.

All participants who register by July 7 have a chance to win a 2 night stay for 2 at the Elkhorn Resort

A Special Deal for MAHCP Members – the first 20 to register by June 29th with our office will receive a special Team MAHCP t-shirt and free registration. Call 772-0425 for details!

Also, If you raise \$150 or more for the Canadian Diabetes Association you will have your registration fee waived.

A prize of a \$1200 travel gift certificate also goes to the person who raises the most in pledges and donations.

Register at: <http://www.events.runningroom.com/site/?raceld=7631>

For more information on becoming a participant or volunteer, please contact Kelvin Hollender at kelvin.hollender@diabetes.ca or 204-925-3800 ext. 225

DID YOU KNOW...

95% of those diagnosed cases are Type 2, a preventable lifestyle disease

Accommodating the Invisible Disability in the Workplace



Jacob Giesbrecht
LLP

Human beings are a diverse group of people. That's what makes us so interesting. Every one of us has her own distinct background that makes us unique. We have varying abilities, strengths and weaknesses. Canadian laws and customs celebrate and protect the differences that we are. Government has put into statute on what we all have, over many years, come to agree on; Canadians should not discriminate against one another because of our differences.

Sometimes we can't at first see the differences among us. Sometimes these invisible differences affect a person's ability to do a job or interact with people. One such "invisible disability" is psychiatric illness. Discrimination on the basis of psychiatric illness has become an increasingly controversial and publicized issue in Manitoba.

The Great West Life Centre for Mental Health revealed that employees believe the workplace is where they are least likely to get support so 64% of employees with mental-health problems keep their condition secret from their employers.

"Taking care of our mental health at work has never been more urgent than it is in today's knowledge-based economy." (Global Business Economic Roundtable on Addiction and Mental Health.)

The CBC in a recent publication outlined that the Government of Canada is spending billions of new dollars on addressing mental illness, stating:

"Approximately one in five Canadians will be affected by a mental health issue which means almost every Canadian will be touched by it either themselves or through someone they know."

The Manitoba Association of Health Care Professionals is a union that is not afraid to take on this controversial issue. As health care professionals we understand that health issues can create barriers in the workplace. The MAHCP has been active in advocating for members suffering invisible disabilities and educating employers and members alike on the issues involved.

We all share the right not to be discriminated against. With this right comes a responsibility. We all share in our legal responsibility to try to mitigate the negative image and impact of psychiatric disability in the workplace. In fact, our right not to be discriminated against is protected by the Human Rights Code which is based on the Canadian Charter of Rights and Freedoms which says:

15. (1) Every individual is equal before and under the law and has the right to the equal protection and equal benefit of the law without discrimination and, in particular, without discrimination based on race, national or ethnic origin, colour, religion, sex, age or mental or physical disability.

This right not to be discriminated against is most important in the workplace setting. The workplace is where we earn our livelihood. It is important that the workplace is an equal playing field because if it is not equal for all, the consequences can be drastic. Manitobans don't want a society where a person's invisible disability can deprive them of the same benefits that we all enjoy.

MAHCP has taken a leadership role with a number of employers to provide awareness and representation regarding this invisible disability.

Provincial legislation based on the Charter language has been put in place to deal with specific cases of discrimination. The Human Rights Commission is established to receive, investigate and adjudicate cases of discrimination in Manitoba.

It is important to note that not every act of discrimination is a violation of a person's human rights under the law. The Human Rights Code provides that every person in Manitoba has the right not to be discriminated against, based on listed characteristics. These characteristics are:

- (a) ancestry, including colour and perceived race;
- (b) nationality or national origin;
- (c) ethnic background or origin;
- (d) religion or creed, or religious belief, religious association or religious activity;
- (e) age;
- (f) sex, including pregnancy, the possibility of pregnancy, or circumstances related to pregnancy;
- (g) gender-determined characteristics or circumstances other than those included in clause (f);
- (h) sexual orientation;

- (i) marital or family status;
- (j) source of income;
- (k) political belief, political association or political activity;
- (l) physical or mental disability or related characteristics or circumstances, including reliance on a dog guide or other animal assistant, a wheelchair, or any other remedial appliance or device.

The MAHCP collective agreements incorporate the anti-discrimination provisions of the Human Rights Code into every contract. Most contracts also provide for an obligation for all parties to work together to accommodate an employee with a disability into the workplace.

The Employer and the Association are committed to reasonable accommodation in a manner that respects the dignity and privacy of the employee. Reasonable accommodation is the shared responsibility of the employees, the Employer and the Association. Where a need has been identified, the parties will meet to investigate and identify the feasibility of accommodation that is substantial, meaningful and reasonable to the point of undue hardship.

Where necessary, relevant provisions of the Collective Agreement may, by mutual agreement between the Association and the Employer be waived.



This provision of the collective agreement clearly articulates that accommodation is a *shared responsibility*. If any of the parties to that responsibility fail to meet their obligations, the person who suffers resulting discrimination can make a complaint to the Human Rights Commission. The complaint can be made against the employer, the union or other employees in the workplace. However, if the complaint to the Human Rights Commission is made against other employees in the workplace the union does not have any role in the process.

It is often very difficult for a person to admit to themselves that he or she has a mental disability and even

more difficult to admit that to others. How the employer and co-workers react to this admission is crucial to being able to accommodate the disabled employee into the workplace.

Employees who suffer invisible disabilities face special hurdles. One of the main ones is that because they don't look like they suffer a disability, the expectation is that they should act that way too. Some employees suffering this disability report excessive physical and mental fatigue as a hurdle. Others feel they must avoid conflict with others, even the most minor disagreement. Some find it difficult to communicate effectively. Many try to hide the disability from coworkers and the employer, which can cause stress that in turn negatively impacts work performance.

There is also a deeply engrained stigma related to mental disabilities. MAHCP, as the union that represents the majority of health care professionals in Manitoba has taken a leadership role with a number of employers to provide awareness and representation regarding this invisible disability.

The employer, the employee, the union and the other employees in the workplace have to work cooperatively with one another.

Awareness and education can dispel the fear and distrust if everyone works together to accommodate the needs of individuals suffering mental disabilities in the workplace.

An effective accommodation may be as simple as taking a break to help an employee cope with stress. Some other examples of accommodations for employees with mental disabilities are: flexibility to modify daily duties and schedules; extra feedback and easy access to supervision; restructuring jobs to alleviate stressful elements; specialized equipment to assist with instruction confirmations like daily email instructions; provide a job coach or mentor; and provide a modified work site or station.

The most effective accommodation will be that which is specially developed for the person suffering from the invisible disability. In order to create such an accommodation, the employer, the employee, the union and the other employees in the workplace have to work cooperatively with one another.

A union such as ours is particularly suited to understand that mental health issues can create barriers in the workplace. MAHCP will continue its advocacy for members suffering invisible disabilities and educate employers and members alike on the issues involved. It is one way that we are working hard to represent our members in an increasingly complex workplace.

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 Shelley at 772-0425.

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.

- **Lori-Anne Lobb**, Physiotherapist, HSC
- **Darby Johanson**, Palliative Care Coordinator, Nor-Man RHA
- **Anna Stertz**, Laboratory Technologist, DSM St. Boniface Hospital
- **Karen Wedlake**, Radiation Therapist, CancerCare Manitoba
- **Heather Morton**, Physiotherapist, HSC
- **George Nytepchuk**, Physiotherapist, HSC
- **Jean Grant**, Dental Assistant, 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.

Defense Fund Update

\$2 Million +



Bob Moroz
Radiation Therapy Director
and Treasurer

It is my great pleasure to report to the members of MAHCP that the value of our Defense Fund as of March 31, 2012 is **\$1,868,291.37**.

In our presentations to membership, a value of \$2 million was used as a benchmark to illustrate what we would be able to provide to members in the form of strike pay during a general strike. We are obviously well on our way to reaching and even exceeding this goal.

As you may recall, when the resolution to temporarily increase dues was passed by membership, it was explained that the purpose of this fund is to provide us with financial strength during times of strikes and other threats to the organization. As promised, not one single dollar of this fund has or ever will be used for day to day operations of the Association.

I would like to take the opportunity to both thank and congratulate MAHCP members on this accomplishment.

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 in October 2012 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).

Please forward all resolutions to the MAHCP office, to the attention of Margrét Thomas. **Resolutions are due at the MAHCP office prior to 1600 hours June 29, 2012.**

In solidarity,
Allan Harlow
Chair - Nominations Committee

2011-12 Executive Council

Officers

President	Wendy Despins, DSM - SBH, Laboratory
Vice President	Al Harlow DSM - Concordia Hospital Laboratory
Treasurer	Robert Moroz, CCMB Radiation Therapist
Secretary	Bob Bulloch, HSC Pharmacist

Directors

Aboriginal Health & Wellness Centre	Daphne Lafreniere Residential Health Support Worker
Audiology	Leanne Gardiner, Brandon RHA, Audiologist
Cardiology	Colleen Bemister, Misericordia Health Centre
Community Therapy Services	Margrét Thomas, Physiotherapist
Dietitian	Vanessa Hamilton, Brandon RHA
Laboratory	Janet Fairbairn, CCMB
Occupational Therapy	Ann Patton, HSC
Orthopedic Technology	John Reith, HSC
Physiotherapy	Shelley Kowalchuk, HSC
Radiology	Michael Kleiman, HSC
Recreation	Zana Anderson, DLC
Social Work	Sylvie Theriault, HSC
Brandon RHA	Gale Rowley, Mental Health Clinician
Burntwood RHA	Tanya Burnside, Pharmacy Technician
Winnipeg Region	Janelle Morissette, DSM-HSC, Laboratory

Staff Assignments

Lee Manning
Executive Director
lee@mahcp.ca

Janet Beaudry
Executive Assistant
janet@mahcp.ca

Joan Ewonchuk
Administrative Assistant
joan@mahcp.ca

Cathy Langit
Administrative Assistant
cathy@mahcp.ca

Jacob Giesbrecht
Legal Counsel
jake@mahcp.ca

Michele Eger, LRO:
michele@mahcp.ca

Health Sciences Centre (all other HSC Members not included under Ken's list(ing)), Concordia Hospital, Manitoba Clinic, WRHA Corporate Program

Marcy Ervick, LRO:
marcy@mahcp.ca

St. Boniface Hospital (non-DSM), Misericordia Health Centre (non-DSM), Jocelyn House

Walter McDowell, LRO:
walter@mahcp.ca

DSM - St. Boniface Hospital, DSM - Misericordia Health Centre, Gamma-Dynacare Medical Labs

Birgit Molinski, LRO:
birgit@mahcp.ca

Permanent portfolio to be determined.

Gary Nelson, LRO:
gary@mahcp.ca

Victoria General Hospital, Brandon RHA, Brandon Clinic, Society for Manitobans with Disabilities, Actionmarguerite, 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 Health

Ken Swan, LRO:
ken@mahcp.ca

Health Sciences Centre (Lab, Diagnostic Imaging, Pharmacy, EEG), Deer Lodge Centre, Community Therapy Services, Winnipeg Clinic

SAVE THE TREES!!



If you would like to receive this newsletter 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.



*Enjoy
Your
Summer!*

Mark Your Calendar for

MAHCP's Annual General Meeting

October 11, 2012

Holiday Inn Airport West

2520 Portage Avenue, Winnipeg

Registration at 5:00 pm

Meeting 6:00 to 8:00 pm

Please pre-register with the form included with this mail out.

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 \$15,000.00 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 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.



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