

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



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

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

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

Heather's Last Word Search

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

environment **appeal** **safety**
compensation **danger** **hazard**
protect **WCB** **rights**

NEWS Manitoba Association of **HEALTHCARE**
September 2007 *Professionals*

Eliminate the Wait Forum



Moderator: Peter Skakum (far left). **Panelists:** (l to r) Wendy Despina, Dr. Luis Oppenheimer, Prof. Pete Hudson, Dr. Sid Frankel, **Panelists not pictured above:** Rebecca Walberg, Hon. Dr. Jon Gerard.

The lovely summer evening in July was abuzz of high energy following the public discussion on health care wait times. Panelists and audience alike were engaged and energized in discussions as they took their leave of the Brodie Centre.

On July 10th, MAHCP sponsored a public forum to discuss the issue of "Wait Times".

The forum pulled together a wide variety of panelists from diverse disciplines and perspectives. MAHCP president Wendy Despina led the panelists, consisting of Wendy Despina, President MAHCP; Professor Pete Hudson, Canadian Centre for Policy Alternatives; Rebecca Walberg, Frontier Centre for Public Policy; Dr. Sid Frankel, Social Planning Council of Winnipeg; Honourable Dr. Jon Gerard, Leader of the Manitoba Liberal Party; and Dr. Luis Oppenheimer, WRHA Provincial Director of Patient Access WRHA.

Peter Skakum was the forum Moderator and the panelists were encouraged to

offer their perspective within seven minutes or less. This was indeed a challenge as the subject of "Wait Times" is such an exhaustive topic. However the panelists achieved that target allowing plenty of opportunity for questions from the audience. And . . . questions there were! *People lined up to the microphones asking questions, providing anecdotes of systemic problems and putting forward ideas for change.*

Wendy Despina led off the discussion by focusing her remarks to the issues and impacts of shortages of Health Care Professionals and the importance of a national human resource strategy for health care. She also stressed the importance of advocating on behalf of our public system and not to have that eroded by privatization. She stated *"As Manitobans and as Canadians we need to advocate on behalf of our public system and not have it eroded by privatization. With shortages of Health Care Professionals already in*

the public system developing a parallel private system would only drain away workers from a system already stretched very thin. Wait times in the public sector will become even longer." President Despina also stated that "The members of MAHCP are part of the solution. The MAHCP membership brings a wealth of knowledge experience, ideas and suggestions."

Dr. Oppenheimer discussed the work that the WRHA has undertaken regarding wait times. In his analysis, it was discovered that simply increasing the volume of available resources didn't change the wait times – that doing more is not the answer. Encouraging results have been seen through better management of available resources, including the consolidation and streamlining of surgical waiting lists.

Professor Hudson observed that there is no way to actually fully eliminate wait times, but that it should be possible to minimize wait times in a way that's fair. He also reflected that the health care system today is delivering more services than ever before, despite "draconian cuts and hugely increased demand," but with essentially the same inputs (adjusted for changes in Gross Domestic Product (GDP)) that the system had 40 years ago.

Dr. Frankel recommended a long-term view, where greater consideration be paid

continued on page 7

NEW!

MAHCP Professional Development Fund
an Executive Council Initiative

MAHCP has a fund available for our members for Professional Development. This fund will be available to qualifying members who wish to take professional development courses or courses related to union education.

Maximum award will be \$250.00. The funds will be available until December 2007 or until it is depleted.

The rules of eligibility and how to apply will be available either on the MAHCP website or through the MAHCP office.



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.*



101-1500 Notre Dame Avenue, Winnipeg, MB R3E 0P9
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Email: info@mahcp.ca; Website: www.mahcp.ca

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Editor: Wendy Despina, President
wendy@mahcp.ca

Enclosed with this Newsletter:

- AGM Pre-registration form
- 2007 AGM Booklet

Meeting Calendar

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



- September 12, 2007**
 - Executive Council Meeting
101-1500 Notre Dame Ave
0845 hrs to 1700 hrs
 - * General Staff Rep Meeting
101-1500 Notre Dame Ave.
1830 hours
- September 19, 2007**
 - HSC Staff Rep Meeting
NA201
1130 hrs to 1300 hrs
- September 20, 2007**
 - SBGH Staff Rep Meeting
L1304
1200 hrs to 1300 hrs
- September 26, 2007**
 - The Pas Staff Rep Meeting
The Pas Hosp, Conf Rm 233
1200 hrs to 1300 hrs
- September 27, 2007**
 - SERHA EMS Staff Rep Mtg
Smitty's Steinbach
1200 hrs to 1300 hrs
 - SERHA Staff Rep Mtg
Smitty's Steinbach
1500 hrs to 1600 hrs
- October 10, 2007**
 - Executive Council Meeting
101-1500 Notre Dame Ave
0845 hrs to 1700 hrs
 - General Staff Rep Meeting
CANCELLED
Please attend the AGM on
October 11th
- October 11, 2007**
 - 2007 Annual General Mtg
Clarion Hotel, MB Room
1730 to 2000 hrs**
See more info on page 10
- October 18, 2007**
 - HSC Staff Rep Meeting
GH304
1130 hrs to 1300 hrs
 - SBGH Staff Rep Meeting
L1304
1200 hrs to 1300 hrs
- October 25, 2007**
 - SERHA EMS Staff Rep Mtg
Smitty's Steinbach
1200 hrs to 1300 hrs
 - SERHA Staff Rep Mtg
Smitty's Steinbach
1500 hrs to 1600 hrs
- October 31, 2007**
 - The Pas Staff Rep Meeting
The Pas Hosp, Conf Rm 233
1200 hrs to 1300 hrs
- November 14, 2007**
 - Executive Council Meeting
101-1500 Notre Dame Ave
0845 hrs to 1700 hrs
 - General Staff Rep Meeting
101-1500 Notre Dame Ave.
1830 hours
- November 15, 2007**
 - SBGH Staff Rep Meeting

- November 21, 2007**
 - HSC Staff Rep Meeting
NA105
1130 hrs to 1300 hrs
- November 22, 2007**
 - SERHA EMS Staff Rep Mtg
Smitty's Steinbach
1200 hrs to 1300 hrs
 - SERHA Staff Rep Mtg
Smitty's Steinbach
1500 hrs to 1600 hrs
- November 22 & 23, 2007**
 - Staff Rep Training Level 1
101-1500 Notre Dame Ave
0830 hrs to 1630 hrs
See more info on page 9
- November 28, 2007**
 - The Pas Staff Rep Meeting
The Pas Hosp, Conf Rm 233
1200 hrs to 1300 hrs
- November 29 & 30, 2007**
 - Staff Rep Training Level 2
101-1500 Notre Dame Ave
0830 hrs to 1630 hrs
See more info on page 9

**Bring your Collec-
tive Agreement to
all member meet-
ings**

Executive Council

- Officers**
 - President** *Wendy Despins,*
SBGH Laboratory
 - Vice President** *Allan Harlow*
Concordia Hospital Lab
 - Treasurer** *Chad Harris,* CCMB
Machinist
- Directors**
 - Community Therapy Services Dietitian** *Margrét Thomas,*
Physiotherapist
 - Susin Cadman,*
Brandon RHA
 - Laboratory Mental Health** *Tom Walus,* HSC
 - Kathy Yonda,* Brandon RHA
 - Nuclear Medicine Occupational Therapy Pharmacist** *Shelagh Parken,* HSC
 - Adele Spence,* DLC
 - Pharmacy Technician Physiotherapy Radiology** *Bob Bulloch,* HSC
 - Cindy Dziadek,* Concordia
 - Radiation Therapy Recreation Burntwood RHA** *Shelley Kowalchuk,* HSC
 - Janice Smith,* Concordia
 - Nor-Man RHA** *Jenn Moyer,* CCMB
 - Zana Anderson,* DLC
 - Winnipeg RHA** *Tanya Burnside,*
Pharmacy Technician
 - Bernie Krawchuk,*
Resource Coordinator
 - Jason Linklater,* HSC,
Orthopedic Technology

Staff Assignments

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

Part 5 of Collective Agreement: Understanding Income Protection

Income Protection Articles 1213-1214-1215-1216

Not Eligible for IP
Unpaid leave 1 month to 1 year
(1213)

Disability and Rehabilitation Plan
1219
Elimination Period
Income Protection Benefits
not to exceed
(1214)

Can use up to 5 days before or after EI Maternity Benefit

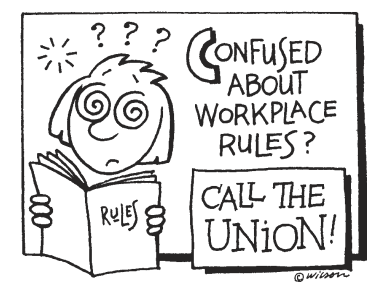
Only available after 6 months of continuous employment and does not meet Maternity Clause 1702 requirements
(1215)

5 Days
Before they are earned
(Employer will recover if employment ceases)
(1215)

How Well Do You Know Your Collective Agreement?

Question: If I am working overtime, am I entitled to any breaks?

Answer: YES, you are entitled to a paid rest period of 20 minutes (some employers only provide 15 minutes) during (Not After) each 3 hour period. If it is a full shift of overtime you are entitled to all the regular meals and breaks.



“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.”

Mark Your Calendar MAHCP 2007 ANNUAL GENERAL MEETING

Thursday, October 11, 2007
Clarion Hotel, Manitoba Room
1445 Portage Avenue

Guest Speaker: Dr. Luis Oppenheimer

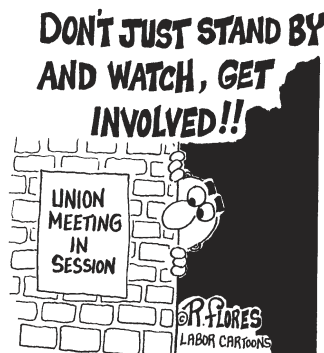
5:30 PM – 6:00 PM Registration
6:00 PM - 8:00 PM AGM Meeting

Appetizers & Dainties
Coffee, Tea, Water & Wine will be available

Teleconference Sites

Brandon:	Victoria Inn Hospitality Room 134
Flin Flon:	Victoria Inn Cambrian Room
Gillam:	Hospital Multi-Purpose Room
The Pas:	Kikiwak Inn Constant Room
Thompson:	Burntwood Ramada Inn Nickel Banquet Room

Teleconferencing has been arranged for Brandon, Burntwood and Nor-Man RHA's as above. To make a teleconferencing site request or for more information, please contact Wendy Despins, President at the MAHCP Office, 772-0425 or 1-800-315-3331, ext 215; or wendy@mahcp.ca.



MAHCP Member Retirees

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.

- **Val Reith**, Physiotherapist, HSC
- **Susan Cheadle**, Radiology Technologist, Misericordia HC
- **Cheryl Peitsch**, Physiotherapist, Tache Centre
- **Susan Larke**, Lab Technologist, HSC
- **Joan Ezinicki**, Lab Technologist, Concordia
- **Beryl Feuer**, Lab Technologist, Concordia
- **Sandy Reid**, Lab Technologist, HSC
- **Luis Martinez**, Lab Technologist, HSC
- **Olga Barth**, Lab Technician, DLC
- **Bernie Krawchuk**, Resource Coordinator, Nor-Man RHA
- **Susan Glennon**, Radiology Technologist, Nor-Man RHA
- **Vicki Brown**, Lab Technologist, HSC

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

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

Non-Central Table Bargaining Update

Brandon Clinic: MAHCP represents Laboratory, Radiology and Cardiology at the Brandon Clinic. On Thursday August 23 the members voted down the employer's last offer and were poised to go on strike Tuesday August 28th at 08:30.

Their agreement expired on July 31, 2006.

The bargaining unit's main goal for this round of bargaining was to achieve parity in wages with the rest of the province.

In the 11th hour the negotiating team and Brandon Clinic were able to reach a tentative agreement which consisted of an additional 2% for all members.

Tuesday Evening August 28th, the membership voted in favour of ratification. The clinic had always maintained a 92.5% differential between our members there and the rest of the Province, through this round of bargaining we were able to narrow that gap. Additionally the clinic will now match the member RSP contributions and a fifth week of holidays was negotiated in the 25th year. The group is satisfied with the outcome.

Society for Manitobans with Disabilities: The new collective agreement has been mailed out to members. If you have not received your copy, please contact Joan at 772-0425.

Community Therapy Services: No dates have been set for bargaining.t.

Winnipeg Clinic: Notice has been served to the Employer to commence bargaining. No dates have been set at this time.

Central Table Bargaining Update

In spite of ongoing discussions with the Labour Relations Secretariat, we have been unable to come to an agreement regarding the related groups to Lab and Radiology or the Employers proposed extension of the last increment for Lab and Radiology being extended into the next round of bargaining (2010) as compensation from that package.

We have filed an Unfair Labour Practice against the employers represented at the Central Table to the Manitoba Labour Board and the Board has agreed to hear the complaint.

Dates for the hearing have been scheduled for November and December of 2007.

The MAHCP has also agreed to a preliminary Mediation session in September with goal being to possibly resolve these issues without a hearing, however, if agreement is not reached in this non binding Mediation we will proceed to having the Board hear our complaint in late November 2007.

Scholarship Award Recipients 2007

MAHCP awards five (5) four hundred (\$400.00) scholarships to graduating high school students.

Candidates must be dependents of members and meet the criteria established by the Communication Committee.

There were several applicants for the **MAHCP Scholarship Fund** this year and all were screened as per the MAHCP Scholarship guidelines.

The 2007 recipients are:

- **Jessica Cortens** (Parent - Barb Cortens, HSC)
- **Lucy Yang** (Parent - Bo Li, CML)
- **Andrew Konkin** (Parent - Dianne Konkin,

HSC)

- **Kelsey Watt** (Parent - Cindy Watt, Burntwood RHA)
- **Mason Harris** (Parent - Maureen Harris, VGH)

Monique Wally Memorial Scholarship Fund

There was several applicants with one successful applicant entering an allied health profession. **The Monique Wally Memorial Scholarship Fund** recipient is:

- **Lucy Yang**, whose parent is Bo Li, Central Medical Laboratories.

Congratulations! We wish all applicants good luck in their future endeavours.

Member Feedback

Bargaining Committee of MAHCP:
Many thanks for all your hard work to "all" in the recent negotiations! I was pleasantly surprised by the wage increases we received over our next contract. I know everyone worked very hard to serve each individual or group's interests and needs – THANKS!!!
Sincere thanks Lydia Bartel

Thank You from the bottom of our hearts!!!
Donna Collins

Lee, Wendy and Karen,
I wanted to send the three of you a quick note to say "thank-you" for the hard work

and effort you all put in at Central Table negotiations and for affording me the opportunity to learn and participate in the process. The three of you led our team to a contract that is sound and continues to give our members the assurance and benefits we enjoy. I look forward to working with the three of you on future contracts.
Jason Linklater

Dear Wendy
This is just a brief note of thanks and appreciation from me and a significant number of other Union members to you and all the hard working members of our bargaining committee. As a Respiratory Therapist at H.S.C. I have spoken informally to a number of other Union members in regards to our recent contract settlement. The general feeling is that while no settlement is going to please

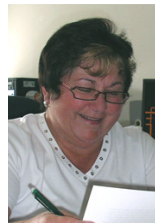
absolutely everybody, the majority of members are reasonably content with how things turned out. More importantly we realize and appreciate all the long, difficult and often frustrating work you and your team performed on our behalf. The majority of us are very grateful to have you folks looking out for us.
Yours Sincerely Tom Friesen RRT

MAHCP did receive one negative letter related to central table bargaining, it was not signed, and we do not publish anonymous letters.

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

Changes at MAHCP

As many of you know there have been several changes at MAHCP. A major change for us is the Retirement of a longstanding Labour Relations Officer (LRO).



Barb Johnson

At the end of June Barb Johnson announced her retirement with her last day in the office August 31, 2007. It will not be the same without Barb. Prior to becoming an LRO, Barb had been an active and involved MAHCP member. She not only spent several terms on the Executive Council in a number of roles including twice as President. She was also a Vice-President on the Board of the Canadian Federation of Labour and held a seat on the Manitoba Labour Board as a union representative. Through all her years as a member Barb was a dedicated Staff Representative.

Barb began her career in Health Care in June of 1968 as a Laboratory Technologist /X-Ray in Gillam Manitoba. Eventually moving to Winnipeg and working at the Victoria Hospital Lab for seventeen years and left from the position of Charge Technologist.

Barb came to work for MAHCP in 1991 as our second LRO. Barb's organizational skills are legendary, her dynamic personality and her passion for the membership. Barb takes with her a wealth of knowledge and skill. As Barb would say "We're talking. . . 40 years here!" She will be missed.

Heather Pappin has been MAHCP's Receptionist/Secretary/Clerk for the past 7½ years. She is the voice that we hear when we call the office. Heather came to us as a temp from Kelly Services and she stayed. When I think back on all that



Heather Pappin

Heather has been through with us and all of the support that she has provided to the staff, the Executive Council, and the membership it is a very impressive list. Heather is passionate about sports, particularly hockey. She also spends many hours volunteering working with children. It is her passion for the kids that takes Heather away from us. She is headed back to school in the fall to further her education down a different career path. We wish her every success.

DSM Update

We have been informed that DSM plans to implement it's fourth and final stage in the transfer of our members in the rural RHA's (Burntwood, Nor-Man and South Eastman) sometime in the fall of 2007.

Prior to implementing Stage Four DSM must first secure transfer agreements from all of the affected unions these have not been produced or presented to us at this time.

The purpose of these agreements is to ensure that the membership's seniority hours vacation entitlements etc. are carried over to the new employer and that all transition details have been addressed.

DSM has assured us that they will be meeting with membership and representatives of MAHCP prior to the transfer taking place to answer questions and concerns that members may have regarding the transfer of employment to DSM.

We will update the MAHCP Website and 1-800# as further information becomes available.

STAFF REPRESENTATIVE TRAINING SEMINARS LEVEL 1 & 2



Staff Rep training seminars will be held:

LEVEL 1

Thursday, November 22, 2007 – 8:30 am to 4:30 pm (lunch to be provided)

Friday, November 23, 2007 – 8:30 am to 4:30 pm (lunch to be provided)

Applications must be received by Friday, November 2nd in order to provide your employer with two weeks notice for union leave as per the Collective Agreement.

LEVEL 2 ** Bring your binder from Level 1 **

Thursday, November 29, 2007 – 8:30 am to 4:30 pm (lunch to be provided)

Friday, November 30, 2007 – 8:30 am to 4:30 pm (lunch to be provided)

Applications must be received by Friday, November 29th in order to provide your employer with two weeks notice for union leave as per the Collective Agreement.

Who should attend level 1?

For new staff reps or staff reps who want to learn more about MAHCP and the role of the staff rep as well as some fundamental tools for dealing with workplace issues.

Who should attend level 2?

Only for those who have been to the Level 1 workshop. In this highly interactive workshop you will learn more about the collective agreement and how to conduct an investigation, more on CSE, problem solving, human rights and health & safety legislation.

How to register:

Contact MAHCP Reception. Apply by mail, phone (772-0425 or 1-800-315-3331), fax (775-6829), or email (info@mahcp.ca). Provide your name, work and home phone number where you can be reached, employer name, and area that you represent. Indicate whether you are scheduled to work on either or both days of the seminar and which seminar you would prefer to attend.

- Training seminars will be held at the MAHCP Office 101-1500 Notre Dame Ave, Winnipeg, MB
- Must attend both days of the training seminar.
- Each session is limited to a maximum 20 participants.
- The sessions are open to staff reps across the Province.
- Out of town participants will either have their travel reimbursed or the office will arrange air travel, if required.
- Salary, meals, out of town transportation and hotel costs will be covered as per Association policy, if required.
- Coffee, tea, juice and muffins will be provided each day.
- Please call Receptionist at the Association Office (204-772-0425 or 1-800-315-3331) if you require any assistance.

Helpful Legal Information for MAHCP Members

Workplace Safety

by Sharon Tod
of Inkster, Christie, Hughes
LLP

No doubt when most people think about *The Workplace Safety and Health Act*, if they think about it at all, occupations in mining or construction are more likely to come to mind than the various professions carried out by MAHCP members. However, we should keep in mind that this Act does apply to the workplaces of our members as well.

In fact, from time to time, issues have arisen with regard to the application of the provisions of *The Workplace Safety and Health Act* to MAHCP members. In particular, the application of section 43(1) of the Act which provides "a worker may refuse to work or do particular work at a workplace if he or she believes on reasonable grounds that the work constitutes a danger to his or her safety or health or to the safety or health of another worker or another person".

There are usually three factors taken into consideration by arbitrators or Workplace Safety and Health officers in determining whether a refusal to work is appropriate. First, whether the individual honestly and reasonably believed there was a danger.

The second factor is whether the individual communicated his or her belief. Usually the concern is communicated before the actual refusal to work. In addition, *The Workplace Safety and Health Act* requires a worker who refuses to do particular work to promptly report the refusal and the

reasons for it to his or her employer or immediate supervisor.

These first two considerations are fairly straight forward and are usually easy to satisfy. The third consideration can be more problematic. The third factor is whether the danger was sufficiently serious to justify the action taken, that is, the refusal to work or to do a particular task. The test is often articulated this way: whether the average employee at the workplace, having regard to the general training and experience would, exercising normal and honest judgment, have reason to believe that the circumstances presented an unacceptable degree of hazard. Essentially, the arbitrator or Workplace Safety and Health officer is to decide if, in all the circumstances, the decision to refuse to work was reasonable.

One factor the arbitrator or Workplace Safety and Health officer will take into consideration in determining if the refusal to work was reasonable is whether the individual now refusing to perform a task, or other employees, performed the task in the past. If there is a history of employees doing the work without incident it will obviously be much more difficult to establish that the work suddenly poses too great a danger.

It is interesting to note that the legislation not only protects the worker from danger but allows a worker to refuse work if it will constitute a danger to others, such as a patient.

If a member finds himself or herself in a position in which he or she believes *The Workplace Safety and Health Act* applies, the danger should be reported to the employer and he or she should contact a Labour Relations Officer for advice.

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 is one of a series of articles that will be appearing in future editions of the MAHCP News.



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:

**SHARON TOD at Inkster
Christie Hughes LLP at
947-6801**



MAHCP Member Wins Her Workers Compensation Board Claim

Your WCB benefits have been denied or discontinued what do you do? Where do you go? What help is available to you? Many of us receive decisions from the Workers Compensation Board (WCB), employers or others affecting our work life and don't consider, or aren't aware that there may be other options or recourse.

An MAHCP member hurt herself while working. Although she wasn't recovered from the effects of that injury, her benefits were discontinued. She had become a member of MAHCP in 1984 and until recently had never required the use of the union. As a result of her decision to approach the union and the resulting outcome she is very appreciative and extends thanks to all involved on her behalf. She views her dues as an excellent investment.

The details of her experience may be helpful to other members and so . . . This is her story.

While transferring a patient in an X-ray department this MAHCP member had an onset of pain and discomfort. She continued to work, and found her symptoms getting worse, instead of better as she had hoped they would. Her work required her to don and wear a somewhat heavy and cumbersome lead apron. Wearing this amplified her symptoms, she was in spasms, and stayed that way. She sought medical treatment and filed a claim for compensation of benefits and services which was accepted by the adjudicative staff of the WCB. She started physiotherapy treatments, pharmacological therapy, and continued being mobile, as instructed by her physician. In spite of her best efforts, and those of her care providers, her injury failed to resolve itself.

Investigations, including imaging studies, revealed pre-existing condition(s) involving her injured anatomy. She had a previous injury, involving surgical intervention, some thirty (30)



Wendy Despina
President

years prior. However she has been pain free until this workplace injury occurred. In essence, she was fully functioning and asymptomatic, prior to the workplace

accident and onset of pain on June 14, 2006.

MAHCP agreed with the findings in a memo dated September 8, 2006; where the WCB's health care consultant said that the MAHCP member's complaints are indeed consistent with the mechanism of the workplace injury.

WCB had a second review conducted by a different consultant. Her MRI results were sent to Healthcare services again, and the applicant was again asked the same questions. In a report dated October 6, 2006 the physician says the current and ongoing symptoms are related primarily to the pre-existing pathology aggravated by the compensable injury.

Her doctor says: "*Based on her overall presentation, it appears that she was doing quite well until the injury that occurred on June 14, 2006. Not having had any recurrent symptoms prior to that, the event at work would appear to be the main contributing factor to her ongoing symptoms. Pre-existing changes noted on her imaging certainly could be a contributing factor, but the history suggests that there was an event that led to her being symptomatic*". Again, we agreed.

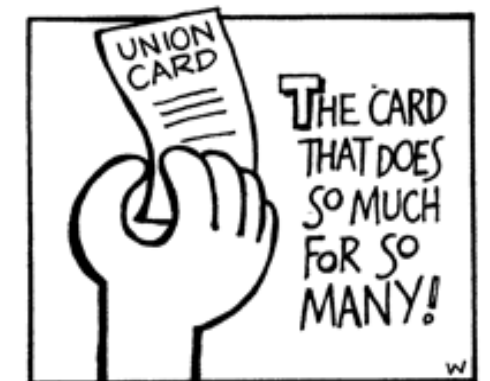
She returned to work in a graduated fashion and with clearly defined physical restrictions. She was assigned modified work for four (4) hours per day. Again, in spite of her best efforts, she was unable to increase her hours of work or return to her full and regular duties. In November of 2006 her family doctor advised against increasing her hours of work.

There were many ensuing discussions and letters exchanged prior to a decision being reached by the primary adjudication. Following this initial determination MAHCP was able to successfully argue on behalf of our member on a number of different points. As each case and circumstances are unique there is no benefit to report on the specific discussions.

One point worth mentioning is the concept and application of "recovery norms". WCB tends to use comparisons based on "recovery norms" and "averages". These measurements do not always reflect individual circumstances when "norms" or "averages" are used solely to deny a claim, they may not be fair or just. We are not automatons; we are individual workers who respond to injuries very differently. While providing general guidelines they can be very unreliable depending on the individual's circumstances.

MAHCP enlisted the aid of a professional appeals consultant to review this particular case. After thoroughly reviewing the case she recommended an appeal. The consultant vigorously argued the MAHCP member's case and the Review Office of the WCB agreed with our position. In their decision, they overturned the decision of primary adjudication, re-instated benefits retroactively to the date of termination of those benefits, and will continue paying her benefits while she recovers from her injuries.

So please note that if you are not satisfied with a decision reached by the WCB that it is very much within your rights to appeal, and that appeals can be and are often successful.



My Life as a Director

by Bernie Krawchuk
Nor-Man RHA

Have you ever asked yourself what it would be like to be nominated for a seat on the Executive Council as a Director? I have spent the last six terms as a member of the MAHCP Executive Council. In addition to that I have also participated in the last three rounds of collective bargaining for the Central Table Agreement. As an out going Executive Council member I wanted to share with you some of my experiences since becoming an MAHCP member.

The Executive Council of the Manitoba Association of Health Care Professionals monitors the business affairs of the Association, plans policy to continuously improve our internal system through implementation of a well structured framework of policies, procedures and technology. This sets the direction and authority for the Executive Director, Lee Manning, to carry out operations of the Association. With great leadership and commitment, our President Wendy Despina carries out the governance of the Association.

What follows is a little background about how I became involved. My first encounter with MAHCP business was during the transition from the former Civil Service component to the Nor-Man Regional Health Authority April 1, 1997. Shortly after that I was contacted by the former Executive Director, Ron Wally to join the MAHCP Bargaining Committee. MAHCP would be negotiating first contracts for a large number of new members. That bargaining committee negotiated the collective agreement of April 1, 1999 to March 31, 2003. There were two of us from Nor-Man, another member represented EMS and I was there to represent the Resource Coordinators. The Resource Coordinators were always under-valued and seldom recognized for their contribution to the health care system.

As a former MGEU member I always knew my collective agreement, but never participated in the business of the union. I was very impressed on how interested MAHCP

was in their new membership and and their willingness to learn about these new groups. *I informed Ron that I would try this new experience and would give him one week of my time and . . .* if after that week was up if I didn't like what I saw or heard I would back away from the experience. This was an opportunity I would give 200% commitment to.

To my amazement our membership was extraordinarily diverse, comprised of over 160 occupational classifications. I quickly got involved in learning the bargaining process. After my second day at bargaining I asked "Who was representing the rest of the occupational groups from the Nor-Man Region?" It was then that I understood that we each represented all of the membership not just our individual interest group. Hummmmm . . . Since I had a lot to learn about all those 160 occupational groups and being the shy person that I am, I asked 1,001 questions during that first week. By the end of the week I asked one more question . . . does the Bargaining Committee members still want me to participate? It was a resounding YES!

With enthusiasm MAHCP headed into uncharted territory. The countless hours of work mounted. With the breaking of new ground in this round of bargaining, looming shortages of the technical/professional/paramedical members, collective bargaining was filled with many obstacles and challenges. I strongly believed that MAHCP had to be proactive as well as reactive to the constant changes that affect both our working and private lives.

In the Call for Nominations for MAHCP Executive Council for the year 2000-01, I was asked to fill the vacancy as a Resource Coordinator Director. You guessed it; one would think I might have



Bernie Krawchuk

caught on to what would be unfolding. I had no problem in getting the support of my fellow members, and after all, the Executive Council position was only for a one year term.

As a Director stakeholder I have experienced the many facets of the Association as a whole. I believe that the services provided by our members are essential and without our members the health care system would grind to a halt. *Our members deliver essential community programs such as Home Care, Mental Health, Addiction services, Diagnostic, Clinical, Rehabilitation, Pharmacy and Dietitians.* Understanding this I have a high level of respect for the membership and as an Executive Council member I wanted to ensure our contractual issues had the attention at the highest level within our respective employer's, regional health authorities and the government. As part of the Collective Bargaining Committee and Executive Council we believed that we must continue to attract the best possible Allied Health Care Professionals across Canada. Facing growing staff shortages that threatened Canadian access to timely health care services, MAHCP focused on continuing to strengthen our ties with other unions and the labour movement in the fight to preserve our contractual rights and public health care system. As our MAHCP members are intimately involved in every step of health care delivery including diagnosis, treatment and recovery, governments and employers must recognize that they can only make significant progress in reducing wait times and improving access by working with and supporting the dedicated allied health care professionals.

I have supported the position that membership deserves to be recognized and proud of their valuable contribution and the quality of service they deliver to our communities and Manitobans. *I have conducted myself as a Director of MAHCP with integrity and with the interest of the membership as the basis of all decisions. I believe that being involved allows one to better understand day-to-day operations of our Association.*

I have enjoyed working with the Executive Council, who so passionately

worked on the development of our comprehensive objectives; lobbied support for our membership, and kept the lines of communication open for our members.

My terms with the Association involved a one year term as Resource Coordinator Director, October 2000-01; Nor-Man Regional Director, October 2001-02, 2002-03, 2003-04, 2004-05, two-year term 2005-07; participated on Central Bargaining Committees for the collective agreements of April 1, 1999 to March 31, 2003; April 1, 2003 to March 31, 2006 and April 1, 2006 to March 31, 2010.

It has been a privilege and pleasure to become a Director and because of my experience I would encourage you to consider the possibility.

Remember each and every one of you plays an enormous and important role in the health care system. MAHCP is an Association that plays a vital role in demonstrating a strong dynamic union that has had positive impact on society. If you are interested in raising the professional image of MAHCP, increasing public awareness of MAHCP and its members, upholding and enforcing the rights of its members, participating in improving community networking, staff representative involvement and improved opportunities for education and contribution to our communities, this role is for you! *If you are a member that knows the value of collaboration, the importance of listening and when to take a firm stand on issues that matter, then MAHCP is the right opportunity and experience for you!* All you have to do is reach for that Nomination Form.

I would like to thank the Association for the many opportunities, support and strong rapport with the membership, the staff of MAHCP and Employers. I would also like to thank all the dedicated people that I have had the privilege and pleasure to work with on the Executive Council and Bargaining Committees during the past six terms. Without you this great privilege would have not been possible.

Respectfully submitted
Bernie Krawchuk
Nor-Man Regional Director

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to the determinants of health in order to decrease need for health care. He argued that "the most important long-term wait time reduction policy may well be a poverty reduction policy."

Ms. Wahlberg's suggestion is that we should look to the performance of the European health care systems in order to improve our own. She provided extensive comparative statistics that provided insight into systems that are significantly different than our own.



Honourable Dr. Jon Gerard

Dr. Gerard's insights as a politician and physician were also interesting. He categorized the argument that the health care system can't afford to deliver timely treatment and care as a myth, where the facts are that if people have to wait a long time, increased visits, tests, and surgeries (a greater burden on the health care system) are the results.

In her closing remarks Wendy Despina highlighted six strategies towards "Eliminating the Wait". (See sidebar) The audience was provided with informational brochures that MAHCP had developed to "Eliminate the Wait" and advocacy postcards addressed to The Honourable Theresa Oswald Minister of Health. These cards are available from the MAHCP office.

The forum was well-received by attendees; many participants were grateful for a chance to speak to the need for improved health care within the structure of Medicare. *Federal MP Judy Wasylycia-Leis, one of the audience members spoke to President Despina expressing her appreciation to MAHCP for hosting such an event with the hope that more will follow.* A number also thanked the MAHCP for the opportunity to have health professionals and consumers speaking to each other about these issues.

Six strategies MAHCP highlighted towards Eliminating the Wait

1. Keeping our Professionals Here and Attracting Professionals to Manitoba

Through promotion, advocacy and negotiation MAHCP hopes to develop and foster one of the most positive working environments in Canada.

2. Attracting students to Manitoba's Health Care Professions.

Many of the 160 professions represented by MAHCP are invisible to most students in high school. MAHCP will work towards raising the profile of these professions within our schools.

3. Providing opportunities for Manitobans to become Vocal Advocates

Through regular promotion such as public forums MAHCP seeks to provide the vehicle for Manitobans to have their voices heard.

4. A proactive approach will go a long way towards shortening wait lists

with a greater focus on prevention, and public health care initiatives. Get Healthy Stay Healthy

5. Encouraging Proactive Participation of MAHCP Members to Help Create Models of Efficiency Throughout Manitoba's Health Care System.

6. Encouraging Government to Adopt These Efficiencies