

STRONG. MODERN. CARING. HSA Annual Report 2010





STRONG. MODERN. CARING.

The Health Sciences Association of BC represents people who are essential to the modern health care team and committed to strong and healthy communities.

Our specialized skills, dedication and caring help patients at every stage of the health care journey from diagnosis to treatment and rehabilitation. Our compassion and expertise support the vulnerable in our society, and offer paths to a better future.

Together, we're HSA — an effective union that will protect public health care and community services, support our members, and stand up for the patients and clients we work with every day.

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AGENDA

NOTE: Delegates please refer to the agenda in your delegate kit for final agenda details

THURSDAY, APRIL 15, 2010 CONVENTION PLENARY AND MEETINGS

11:00 AM Registration

11:30 AM New Delegates Session

1:00 PM Plenary Session4:00 PM Regional Meetings

5:30 PM Wine and Cheese Reception

FRIDAY, APRIL 16, 2010 CONVENTION SESSIONS

8:15 AM Registration 9:00 AM Call to Order

Credentials Report

Harassment Policy Statement Adoption of Rules of Order

Adoption of Agenda

Adoption of Minutes of 2009 Annual General Meeting

9:30 AM President's Report

10:00 AM Elections Committee Report

Resolutions Committee Report Run for the Cure Committee Finance Committee Report

11:00 AM Guest Speaker

12:00 PM Lunch

1:15 PM Education Committee Report

Resolutions Committee Report

3:15 PM Occupational Health and Safety Report

5:00 PM Adjournment

7:00 PM Convention Banquet and Dance

SATURDAY, APRIL 17, 2010 CONVENTION SESSIONS

9:00 AM Call to Order

Credentials Report

Committee fpr Equality and Social Action Report

Resolutions Committee Report

10:00 AM President's Address

11:15 AM Elections (Trials Committee)

12:00 PM Lunch

1:15 PM Guest Speaker

Election Results

Political Action Committee Report Resolutions Committee Report

Good and Welfare

4:00 PM Convention Adjournment

Well-positioned for the challenges ahead

Since my last report to members in 2009, HSA board members, activists, and staff have been working to prepare and position the union for post-Olympic collective bargaining. For a pre-bargaining year, 2009 turned out to be very busy on the bargaining front.

LITTLE PROSPECT FOR QUICK SETTLEMENT

Just before the May provincial election, the Nurses' Bargaining Association and government signed a contract almost a year before it was scheduled to expire. As reported to convention delegates last year, HSA was also at the table working to negotiate a collective agreement in the Health Science Professionals Bargaining Association, but even as there was agreement between the union and employer, political leaders decided there was no advantage to them for an early signing of a collective agreement with health science professionals.

The opportunity to make a deal for a collective agreement for health science professionals passed in 2009, and as conditions continue to change, the prospect of a quick settlement upon expiry of the current collective agreement March 31, 2010 has diminished. As this annual report was going to print, HSPBA and HEABC had agreed to dates to begin the negotiating process in advance of the expiry of the current

contract. HSA will not enter into a collective agreement that does not recognize the challenges facing so many of the health science professions in recruitment, retention and shortages.

At the union's bargaining proposal conference in November delegates agreed to a bargaining agenda that first and foremost protects quality health care. The improvements our bargaining committee will be working towards are improvements that make the system more efficient, and better for the patients who receive and the people who deliver the services. The bargaining committee will be working hard to ensure that a new collective agreement meets those challenges and forms a strong foundation on which to grow into the future.

HSA's board of directors and staff understand that the challenges in achieving a collective agreement will require additional resources to address long-standing issues and develop modern solutions. To that end, the board of directors has ensured that the union is well-positioned financially to carry through a complex bargaining period, and continue to deliver the superior services HSA members have come to expect in labour relations, advocacy, as well as member education and public relations.

The bargaining story is different in the rest of acute care, and for HSA members covered by other

THE BOARD OF DIRECTORS HAS
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collective agreements.

In 2009, as discussed earlier, HSA's registered psychiatric nurses, who are covered by the Nurses' Bargaining Association collective agreement saw their contract renewed for two years, well in advance of the March 31, 2010 expiry. The new agreement includes market adjustments of 3 per cent in each of the two years. The agreement will expire in March 2012.

At time of printing, the Facilities Bargaining Association (led by the Hospital Employees' Union) had also achieved a tentative settlement with government.

For HSA members who work in the community health sector, a tentative agreement was reached between that sector's lead union, BCGEU, and government. HSA's board of directors recommended rejection of the agreement. As this report was being printed, results of the bargaining association's vote on the contract were not yet known.



Reid Johnson

And at the Community Social Services table, negotiations began in the fall, and continued through February. At time of printing, those negotiations had not yet concluded.

PRESSURE ON BUDGETS AND SERVICES

Since the re-election of the BC Liberal government in May, we have seen a real focus on health care and social services budgets. And what we're seeing is pressure on health authorities to reduce spending. That pressure is resulting in reduced services.

The provincial election delivered a new health minister, and there is no question that this health minister, Kevin Falcon, is taking a hands-on approach to health care. He has made it clear that he expects monumental changes in health care. There is no question that our system faces some challenges. And change is needed. The question is what kind of change do Kevin Falcon and the BC Liberals have in mind? While Falcon speaks publically about a commitment to public health care and putting patients first, the actions of health authorities raise questions about what the real agenda is.

HSA highlighted the impact of budget reductions on services in the fall, with an intensive radio advertising campaign focusing on the huge reduction – approximately 10,000 in total – of MRI tests across the province. The union continued to highlight the impact of service cuts by speaking out against cuts to some of the most vulnerable in our province as

HSA HIGHLIGHTED THE IMPACT OF BUDGET REDUCTIONS ON SERVICES IN THE FALL, WITH AN INTENSIVE RADIO ADVERTISING CAMPAIGN FOCUSING ON THE HUGE REDUCTION — APPROXIMATELY 10,000 IN TOTAL — OF MRI TESTS ACROSS THE PROVINCE.

governments and health authorities announced cuts to funding for services to children with special needs, mental health services for adults, and acute care services throughout the province.

HSA is ensuring that the story about the service

reductions is told. Last year, we launched and this year we are continuing an extensive and thorough research plan to ensure HSA is up to date in our approach to communicating the important message about the role health science professionals play in the modern health care team.

SPEAKING UP FOR YOU

We will continue to work to raise the profile of HSA members working in the health science professions and ensure our concerns about the issues threatening quality care are heard, understood, and that we make a real difference in changing the course of health care in BC.

Our constituency liaison program continues to be successful in telling decision makers what is important about the work HSA members do in hospitals and the community. We now have 58 members who take responsibility for keeping MLAs up to date on the issues important to HSA members.

STANDING UP FOR MEDICARE

On the broader Medicare protection front, for the past several months HSA has been actively engaged in the private clinics case launched by Dr. Brian Day and a consortium of private for-profit clinics against the B.C. Medical Services Commission and the provincial government. The group of private for-profit clinics are seeking to have key provisions of provincial health legislation declared unconstitutional so that they can sell necessary health care services to patients who wish to jump the queue and can afford to pay a premium to do so.

In November, the BC Supreme Court made an important decision in the case between private clinics and the provincial government. Madame Justice

AT THE NATIONAL LEVEL, HSA HAS BECOME A LEADING CONTRIBUTOR TO THE DISCUSSION ON HEALTH CARE, LABOUR, AND SOCIAL POLICY.

Smith ruled that the BC Health Coalition and its pro-medicare partners may participate as intervenors. The ruling ensures that patients and the public will have a say in the case. As co-chair of the BC Health Coalition, HSA Board Member Rachel Tutte has been front and centre in the Coalition's efforts through this court case to defend public health care delivery in BC and across the country.

HSA has also taken a leadership role in funding the legal action, contributing \$50,000 in each of 2009 and 2010 to the legal costs, and leading a national fundraising campaign to raise the necessary funds to fight this important case.

STRENGTHENING PARTNERSHIPS

One of the areas where HSA continues to strengthen relationships is with the professional associations. These were relationships that when I was first elected President I committed to strengthen by working consistently and cooperatively with our partners representing the many different professions HSA members work in. In addition to more frequent meetings and consultation, HSA is committed to supporting the activities of professional association as a sponsor of events, and entering into collaborations to promote the work of and highlight the issues facing health science professionals. I look forward to continuing to work more closely

with professional associations on issues of common interest.

ADVANCING THE FIGHT AGAINST BREAST CANCER

Last year, I reported that as chair of the Canadian Breast Cancer Foundation's BC and Yukon Branch's 2020 Task Force working group on the health care workforce in breast cancer, I would be working to continue to advance the critical issue of the supply of health human resources in the fight against breast cancer.

The working group has completed its work, and my draft report has been submitted to the Task Force, for release later this spring. What the working group found will not come as a surprise to the thousands of HSA members who work with women going through their journey with breast cancer.

There simply aren't enough of you to go around.

What is exciting about this report is that there is a genuine commitment to ensuring real action on addressing the elements that stand in the way of ending the life-limiting effects of breast cancer – and the health care workforce is recognized as one of those challenges.

That commitment from the Canadian Breast Cancer Foundation was clear in a week-long awareness campaign run in partnership with the Vancouver Sun in October 2009. Health human resources featured prominently that week in a full-page feature story, as well as on a real-time online discussion where I fielded questions from around the province about the issues in the workforce and what we need to do to address the challenges.

WORKING TOWARD COMMON GOALS

As a partner in the labour movement, HSA continues to work with our allies to advance important issues

for working people in BC and across the country. At the national level, HSA has become a leading contributor to the discussion on health care, labour, and social policy.

Last fall, I participated in the National Union of Public and General Employees' (NUPGE) BC Town Hall meeting held as part of the National Union's 'People's response to the National Economic Crisis.' Canadians told their stories about how the economic crisis has affected them, and that report was delivered to MPs in order that they know the real story of the economic crisis. We will have an opportunity to debate solutions and plan for action to support working people at NUPGE's triennial convention, being held this summer in Vancouver.

NUPGE is also working with the Canadian Labour Congress (CLC) on a national campaign to counter the effects of the economy on working people's future. Pension plans and retirement savings have been hit hard by the economic crisis and the security of many Canadians is at risk. Some companies even want to cut defined benefit plans that employees paid into throughout their working lives. The CLC has proposed a pension reform plan that is getting attention across the country.

But to achieve change, the pressure needs to continue. An MP lobby campaign is planned for the spring and I encourage HSA members to talk to their MPs about the need for pension reform.

On the provincial level, the BC Federation of Labour continues to be an important influence in the struggle for the protection of public services. Later this spring, the Federation, working in partnership with community organizations around the province, will highlight the effects of three difficult provincial budgets on the most vulnerable communities and individuals getting by in a tight economy.

HSA continues to be an important partner in the

WHEN HSA LEARNED THIS SUMMER
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labour movement, community organizations, professional associations, and progressive organizations working to improve services for British Columbians.

HSA STAFF AND BOARD WORKING HARD FOR YOU

Elsewhere in this Annual Report, you will see the successes and progress that have been achieved for members through the work of HSA's staff, elected representatives, and activists who work every day to advocate for the collective agreement rights, the health and safety, and work of HSA members.

Two successes members should note is the excellent work and advocacy by the labour relations department, led by Senior Labour Relations Officer Sheila Vataiki, on the province's preparation for the threatened H1N1 pandemic. When HSA learned this summer that the provincial plan for protection against the spread of the virus was patchy at best, HSA took a leadership role in bringing together the public health authorities, unions, WorkSafe BC and the Occupational Health and Safety Agency for Health Care (OHSAH) to ensure proper protections and protocols were in place for health care workers and patients to reduce the risks associated with the virus. With HSA members including respiratory therapists and physiotherapists on the front lines of treatment, it was critical that HSA speak for members' right to preventative and protective measures in the face

of the deadly virus. Recently, BC was recognized as the most successfully prepared jurisdiction across the country, and HSA deserves credit for the behind the scenes work it took to be ready for that potentially devastating public health care crisis.

On the communications front, HSA's member magazine, *The Report*, won the Canadian Association of Labour Media's "Best Overall Publication" award, demonstrating the best combined use of writing, graphics, design, and editorial content and judgment. The category includes all local, provincial, and national union publications produced by staff, including federations of labour across Canada.

These are just two examples of the work that HSA staff do every day to serve HSA members. We are fortunate to have such a professional and committed team of staff working on our behalf.

Members should know, too, that the work done on your behalf to ensure that HSA members' concerns are heard and acted on is first and foremost the priority of your board of directors. This year, two board members decided not to seek reelection, and will be leaving us at the conclusion of the union's annual convention in April. Rachel Tutte, Region 6 director, and Agnes Jackman, Region 4 director have been great advocates for members in the Lower Mainland for the past several years and I thank them for their dedication and service.

As a union of health care and social service providers, HSA faces a growing number of challenges in the coming year. With the continued commitment of your HSA representatives – from your local stewards, to professional staff, members-at-large, and board members, I am confident that our union is equipped to move into the future well-positioned to meet the challenges we all face.

Respectfully submitted, Reid Johnson, President

REPORT OF THE EXECUTIVE DIRECTOR OF LEGAL SERVICES AND LABOUR RELATIONS

Health care is changing, and so is our task

The work of the labour relations and legal department is becoming increasingly complex as labour relations in health care continues to evolve.

Much of 2009 and 2010 was spent responding to the government's political agenda to reduce the costs of health care by reducing the level of health care services provided.

After the May provincial election the government embarked on a downsizing process that purported to affect only "back office" and administrative staff. These layoffs affected our members throughout the province. None of those layoffs were administrative or back office staff. The worst hit were autism workers at Queen Alexandra Hospital in Victoria. This program was closed by the Ministry of Children and Families and 51 workers were affected.

In August of 2009 the Ministry of Health announced a major consolidation and reorganization of services in the Lower Mainland, affecting pharmacy, lab services, diagnostic imaging, bio-medical engineering and medical records. These services were to be consolidated and made more efficient. The union has been attempting to meet with the employer regarding these reorganizations with various degrees of success. Most of the negotiations appear to be among the health authorities, rather than with the unions that represent the people who deliver the services. We are confident however, that eventually

the employers will resolve their differences among themselves and be prepared to negotiate the effects of the consolidation with the union.

COLLECTIVE AGREEMENT ADMINISTRATION

BILL 29 EDUCATION FUNDS

In addition to resolving grievances and arbitrations pursuant to our collective agreement, some of our efforts were spent disbursing educational money negotiated as part of the Bill 29 settlement agreements.

HEALTH SCIENCE PROFESSIONALS BARGAINING ASSOCIATION

The Education Fund that was negotiated as part of the January 2008 Bill 29 Settlement Agreement has provided great education support for many HSA members.

The priorities of the Fund are to improve employment security and future employment opportunities, and create opportunities for leadership in health science professional disciplines.

The first bursaries were awarded in March 2009 and since that time we have awarded 746 bursaries totaling almost \$1.7 million.

We have also been able to provide some targeted funding for retraining of members who have been displaced as a result of program cuts. MUCH OF 2009 AND 2010
WAS SPENT RESPONDING TO
THE GOVERNMENT'S POLITICAL
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OF HEALTH CARE BY REDUCING
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SERVICES PROVIDED.

COMMUNITY HEAITH

The Health Services and Support Community Subsector Bill 29 Settlement Agreement also contained funding for professional development through a joint employer/bargaining association process – the Joint Bill 29 Community Retraining Fund.

The application deadline was October 31, 2009. Applications are still being reviewed and the bargaining association expects the first decisions to be made soon.

NURSES' BARGAINING ASSOCIATION

HSA's share of the professional development funding under the NBA Bill 29 Settlement Agreement was approximately \$24,000. HSA combined that with other one-time funding available under the NBA collective agreement for a total of almost \$57,000, which was awarded in the form of bursaries to 19 members.

COMMUNITY SOCIAL SERVICES

The Community Social Services bargaining association reached a Bill 29 Settlement Agreement



Maureen Headley

in February 2009. HSA's share of the professional development funding under that agreement is almost \$22,000. The application deadline for HSA Community Social Service members was March 31, 2010.

BARGAINING

HEALTH SCIENCE PROFESSIONALS BARGAINING ASSOCIATION

As reported by your president Reid Johnson in this Annual Report, HSA undertook early contract discussions last spring. While those discussions did

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not result in a renewal of a collective agreement, they did lay some very important ground work for your bargaining committee when negotiations get underway later this year.

In the fall, a bargaining proposal conference was held to determine members' priorities for bargaining in 2010 in this sector. Thorough discussion was held about a number of bargaining issues. As a result, your bargaining committee, elected at that conference is well-positioned and equipped to represent your interests in the coming months of bargaining.

NURSES BARGAINING ASSOCIATION

The NBA contract extension negotiated last spring contained a senior level committee known as the Joint Quality Worklife Committee (JQWC) with a number of sub-committees. HSA sent staff members to participate in the key subcommittees: Disability Management, STIIP (Short Term Illness and Injury Plan), and Benefits.

YOUR BARGAINING COMMITTEE,
ELECTED AT THAT CONFERENCE IS
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The Disability Management Committee focused on the financial and social costs of losing health care workers from the work place and developed recommendations for revising the disability management process.

The STIIP Committee examined and costed various short term disability models. The committee agreed on a financially viable model (based on 70%

of regular earnings with the ability to top-up to 85%) but could not agree on how to manage or apportion the risk if there was a resulting increase in employees' use of sick time.

The Benefits Committee examined the existing benefit plan and reviewed the industry cost drivers including legislative responses to rising drug costs that are being pursued in other jurisdictions. The committee made recommendations for prevention and education initiatives but did not reach consensus on most of the plan design options that were identified.

These committees all submitted final reports to the JQWC in November. We expect these topics will continue to be the subject of negotiation.

HEALTH SERVICES AND SUPPORT (COMMUNITY SUBSECTOR)

HSA's negotiation team representing the health services and support (community subsector) workers headed into bargaining with the employer in mid-December. Members had set their bargaining priorities at a bargaining proposal conference held in November.

A tentative agreement was reached. However, the HSA Board of Directors recommended that HSA's health services and support (community subsector) workers reject it for a number of reasons, but of greatest concern was the erosion of the long term disability plan. The health services and support (community subsector) workers in HSA accepted the recommendation of the Board of Directors and voted 91% in favour of rejecting the tentative agreement.

COMMUNITY SOCIAL SERVICES

Throughout the fall and winter, negotiations in the community social services sector were undertaken. At time of printing of the Annual Report, there was no progress to report.

ON THE NATIONAL LEVEL, WE HAVE BEEN ACTIVE IN SUPPORTING THE NATIONAL UNION (NUPGE) AND THE CANADIAN LABOUR CONGRESS (CLC) IN A CAMPAIGN FOR INCOME SECURITY THROUGH THE EXPANSION OF THE CANADA PENSION PLAN AND OLD AGE SECURITY.

ORGANIZING

HSA organizers were successful in certifying a group of health science professionals at the Bella Coola General Hospital. Bella Coola is a remote hospital and unionization should assist this new certification to improve the facility's ability to recruit and retain staff.

PENSIONS AND BENEFITS ADVOCACY

The union continues to participate in the work of governing the Municipal Pension Plan. As one of the member organizations that make up the Municipal Employees Pension Committee (MEPC), HSA's role as an appointing authority means that we partner with the other sponsoring unions to fulfill the role of Plan Sponsor through the MEPC structure.

The MEPC along with representatives of the BC government and the Union of BC Municipalities, form the Plan Sponsors of the MPP. It is through the consensus and authority of the Plan Sponsors that any changes to pension plan design

must be approved.

Over the last year the MPP Board of Trustees has engaged the Plan Sponsors in a dialogue on the future of the plan. Issues discussed include funding options, maintaining inflation protection, early retirement subsidies, and revisiting the transitional agreement on surplus – which is a key cornerstone of the plan trust agreement.

These are important issues for all members of the Municipal Pension Plan. HSA will continue to closely monitor these discussions in the coming year, and ensure that members' interests are accounted for in any proposals considering modification of the plan design.

Another area of pension advocacy in the last year has been ensuring that members who become eligible to join the MPP are appropriately enrolled in a timely manner. Working with the Pension Corporation, HSA has been able to move this compliance issue up the priority list. Currently, enrolment audits are underway to better identify gaps in the system and to encourage best practice.

On the national level, we have been active in supporting the National Union (NUPGE) and the Canadian Labour Congress (CLC) in a campaign for income security through the expansion of the Canada Pension Plan and Old Age Security.

This initiative has gathered significant support over the last year with a developing consensus among the provinces that reforms are needed at the federal level. We anticipate that progress may be possible in the coming year; provided that momentum for advancing these important social reforms is maintained.

RESEARCH

We have been successful in the past year in develop-

ing a more effective and responsive research department. Much of this improvement has occurred because we are finally getting some access to the necessary data.

Our research department has been gathering a significant amount of information for HSPBA bargaining, as well as continuing labour relations work. The information gathered will assist our bargaining team in the coming months, as well as Labor Relations Staff in their day-to-day activities.

CLASSIFICATIONS

The union is continuing to build on our success in this area, addressing and resolving grievances related to classifications.

> HSA HAS CONTINUED TO SUCCESS-FULLY APPEAL WCB DECISIONS FOR OUR MEMBERS AT A SUBSTANTIAL-LY HIGHER RATE (64%) THAN THE PROVINCIAL AVERAGE (36%).

Forty-nine member-initiated HSPBA classification grievances were settled in 2009, reflecting HSA's priority to resolve matters grieved by its members. A further 92 classification policy grievances were settled during the same period.

But even as grievances were being resolved, the department took conduct of an additional 21 member-initiated grievances, as well as 101 policy grievances. At year's end, there were 217 active grievances, including 25 filed by members.

In Community Health Services and Support, 30 classification files were resolved and 34 classification files were resolved in Community Social Services.

WORKERS' COMPENSATION APPEALS

HSA has continued to successfully appeal WCB decisions for our members at a substantially higher rate (64%) than the provincial average (36%).

As is the trend with our membership, the greatest number of appeals arose from repetitive strain injuries: tendinitis, epicondylitis, and other soft tissue injuries which result from repetitive motions on the job. The next highest cause of appeals was back injuries.

Imaging technologists represent 30% of our appeal cases, while our ultrasound technologists represent 18%. Physiotherapists and occupational therapists are the next most common profession, representing 15% of WCB appeals.

Little has changed on the WCB front. The government's legislation and policy are unaltered and thus injured workers, provincially, continue to be denied full and fair coverage for their injuries.

We have been working on providing more information on Workers' Compensation appeals as well as Occupational Health and Safety on the HSA website. Our goal is to provide our stewards as well as our members with easy access to critical information concerning their rights in respect of safety at the workplace as well as their rights and the process of WCB claims.

LONG TERM DISABILITY AND RETURN TO WORK

Long term disability appeals continue to be filed at a steady rate. We have noted an upward trend of denied claims, particularly those which involve mental health conditions. In addition, longstanding claims are being reviewed by the insurance company with an eye to returning these members to employment by providing additional rehabilitation services. 2009 WAS ALSO THE YEAR OF H1N1.
MANY LROS WERE INVOLVED IN OUR
DISCUSSIONS WITH EMPLOYERS TO
ENSURE THAT APPROPRIATE PROTECTION WAS PROVIDED TO OUR MEMBERS WORKING IN AREAS WITH A
HIGH RISK OF INFECTION.

The result of these actions is a substantial jump in the number of claims which are proceeding to the Claims Review Committee appeal level.

Over the course of the past year Vancouver Coastal Health, in conjunction with HSA, has introduced a disability management pilot project providing early intervention and rehabilitation services to its employees in a workplace based setting. The goals of the program are to provide early and appropriate support, maintain employees' connection to their workplace, offer options for rehabilitation services, as well as early and safe return to work opportunities. Outcomes from this pilot project are being closely evaluated in an effort to determine whether similar workplace based programs may be appropriate in other health authorities.

LRO SERVICING

The Labour Relations Officers were very busy last year dealing with many large scale tasks in addition to their day to day involvement with the members.

There seems to be no end to the employer's constant reorganization of work – often for no discernible reason or benefit. The LROs have continued to be involved at the local, Health Authority and provincial levels attempting to ensure that displacements are

minimized and the remaining work is allocated in a fair manner. Sometimes the reorganizations affect single departments in one facility but more often it takes the form of centralization of services from the smaller to the larger facilities. In many ways this is a reversal of the "closer to home" initiatives in the Ministry of Health of the '90s.

Sometimes the scope of these initiatives is farreaching across several facilities within a Health Authority or even, as has been the case recently, amalgamations of services across multiple Health Authorities. In recent months we have been approached by Vancouver Coastal, Providence, Provincial and Fraser Health authorities about their intentions to reorganize Laboratory, Radiology, Biomedical Engineering, Pharmacy and Health Records services in the Greater Vancouver area. The discussions are in the preliminary stages but these services will most likely begin to be amalgamated in the very near future.

2009 was also the year of H1N1. Many LROs were involved in our discussions with employers to ensure that appropriate protection was provided to our members working in areas with a high risk of infection.

Our LROs who deal with Vancouver Coastal facilities have been very involved recently monitoring their attendance promotion initiative and making sure that it does not operate in a way that is contrary to the collective agreement.

LEGAL DEPARTMENT

It has proven to be another very busy year for the HSA staff lawyers and the legal department as a whole. Apart from the committee and project work undertaken by our two lawyers, they were also kept busy with matters before the Arbitration Board, pro-

fessional bodies and the Labour Relations Board.

This year more than 50 files were opened by the legal department requiring a wide range of representation. Of these 50 files, 19% involved representing members regarding complaints before professional colleges, 11% involved excessive discipline and discharge, 32% were classification disputes, 6% involved allegations of harassment/discrimination and 32% involved other interpretive matters in the collective agreement.

We have seen a marked increase in the number of complaints about members to the various colleges. The increase may be the result of certain legislative changes that require registrants in colleges to report other registrants. It is an area that we are closely monitoring to ensure that the reporting requirements in the legislation are not being abused by employers or others. There also appears to a growing complexity to such complaints.

We continue to make use of the expedited arbitration provisions under Section 104 of the Labour Relations Code. Section 104 provides for an expedited process which most often includes the appointment of a settlement officer. In most cases these applications result in a settlement. We can be proud of our efforts in this regard. We are able to get dismissal grievances to hearing within 60 days and as a result a terminated member is not further harmed by the length of procedural delays.

LABOUR RELATIONS BOARD

We applied for and were granted standing in several matters before the Labour Relations Board (LRB) this past year. The cases before the LRB in which we applied for standing were of particular labour relations interest to HSA and we wanted to ensure that certification rights of the HSA were not undermined.

In one particular file, we made submissions on the interaction of essential services and replacement THE UNION HAS FACED SOME SIGNIFICANT CHALLENGES OVER THE PAST YEAR. THESE PROBLEMS HAVE BEEN ADDRESSED WITH SKILLED ADVOCACY FROM OUR LABOUR RELATIONS AND LEGAL STAFF. WE HAVE ACHIEVED POSITIVE OUTCOMES FOR OUR MEMBERS.

worker provisions of the Labour Relations Code. The LRB determined that replacement worker provisions do not apply in the essential services sector given the nature of the work in the essential services sector.

In another file we were successful in having a new discipline – acupuncturist – added as a health science profession.

We also made submissions in opposition to BCGEU's application to change the Terms of Association of the CSSBA. BCGEU subsequently withdrew its application.

The union has faced some significant challenges over the past year. These problems have been addressed with skilled advocacy from our labour relations and legal staff. We have achieved positive outcomes for our members. You are fortunate to have such a dedicated, professional and skilled staff working for you. I thank each one of them for the commitment to HSA members they demonstrate every day.

Respectfully submitted Maureen Headley, Executive Director of Legal Services and Labour Relations

Our focus: representing you effectively

The role of the Human Resources and Operations division is to provide assistance and support to the HSA staff who deliver direct service to you, the members.

From the Administrative Assistants who work side-by-side with our Labour Relations Officers, to those responsible for managing the union's information and technology, our job is to equip HSA's labour relations, legal, and communications staff with the tools they need to represent you effectively.

Until recently, human resources and operations functioned as two separate divisions, but were merged last year as part of our commitment to streamline and improve support services. Since then, we have implemented several other changes aimed at improving our operational efficiency

Last fall, HSA converted one of our administrative assistant positions into a full-time Office Manager, responsible for office administration, purchasing and facilities management. Kim Templeton, who served previously as a senior administrative assistant in the executive decision, has moved into the Office Manager role with a mandate to review all of our office policies and procedures to ensure we are managing the office efficiently and cost-effectively, but also in a way that is environmentally responsible.

Over the past several years, delegates to convention have passed several resolutions calling on the

union to identify ways we can reduce our environmental footprint. In 2008, we completed an environmental audit and have since taken concrete steps to reduce our energy consumption and reliance on paper, and to adopt more environmentally friendly purchasing practices. Our next step will be to look at the costs and feasibility of making large union events like convention and bargaining conferences carbon neutral through the purchase of carbon credits.

Under the leadership of Owen Soroke, our information management staff continue to strive to deliver outstanding support by matching the right tools with the needs of our servicing staff to bring full value to the investment HSA makes in technology.

In addition to supporting technology, staff have made significant progress in improving our database systems and software applications, including adding several new features designed to more efficiently collect and process information. These features provide enhanced access to the information staff require both in administering our collective agreements and during bargaining.

It has never been more important to ensure that union records are safe and secure. A key priority over the last year has been to fortify the security and integrity of our records by adding layers of system security and modifying our operations for physical and digital records. These changes are an important part IN 2008, WE COMPLETED AN ENVIRONMENTAL AUDIT AND HAVE SINCE TAKEN CONCRETE STEPS TO REDUCE OUR ENERGY CONSUMPTION AND RELIANCE ON PAPER, AND TO ADOPT MORE ENVIRONMENTALLY FRIENDLY PURCHASING PRACTICES.

of our commitment to the security of the information with which we have been entrusted.

Another project where HSA has made significant strides is on the development of a comprehensive policy manual. Under the leadership of the union's Constitutional and Policy Committee, HSA has worked for several years to update its governance and operational policies to help guide the board and senior staff. This project was an enormous undertaking, and I am pleased to report that manual is now close to complete.

In the human resources department, formalizing our human resources practices, staff development and employee health and wellness have been top priorities over the past year. That means adopting clear and consistent HR practices; working with staff to ensure they have the training and support to do their jobs capably; identifying and mentoring future leaders; recruiting new staff with the specialized skills we need to complement our staff team, and placing a greater emphasis on employee health and wellness.

I am also pleased to report that we recently concluded a three-year agreement with our staff union, CEP Local 465. We are very fortunate to enjoy an excellent working relationship with our staff union and I want to thank the CEP executive, stewards and all



Rebecca Maurer

staff for working with us to maintain a fair, productive and healthy workplace. It is a pleasure working with such a skilled and dedicated group of people.

Rebecca Maurer Director of Human Resources and Organizational Development

NOTES



COMMITTEE REPORTS

COMMITTEE ON EQUALITY AND SOCIAL ACTION

Your committee: Suzanne Bennett (Chair and Director, Region 1)

Janice Morrison (Director, Region 9)

Irene Hobbins (Member at Large, Region 1) Mike Trelenberg (Member at Large, Region 3) Mary Lou Iceton (Member at Large, Region 8)

Yukie Kurahashi (Staff)

MANDATE OF THE COMMITTEE

On behalf of HSA, the Committee on Equality and Social Action promotes economic and social justice, equality, and labour solidarity. CESA encourages members to join other HSA activists to advocate for positive social change.

The members of this year's committee are committed to increasing capacity, broadening awareness, and increasing support for women's issues.

As decided by delegates at the union's annual convention, the committee's primary domestic focus is BC, and our international focus is Central and South America.

The committee works with other organizations and groups to exchange information, share ideas, and raise members' awareness and participation in working towards social justice.

DEVELOPING A NETWORK OF ACTIVISTS

HSA's board of directors endorsed a recommendation from this year's committee to develop a way for members to become more active in their areas of interest in social change.

Starting this spring, members who self-identify as being interested in participating in union and union-sponsored activities, as well as receiving information about union activities will be identified in the union's database. HSA will use this information

to ensure members who have told us they want to be involved in activities will have access to opportunities such as attending events, participating in campaigns and rallies, and representing HSA at public events. The committee will be providing additional information throughout the spring.

ISSUE EDUCATION, OUTREACH, AND FUNDRAISING

As chair of the Committee on Equality and Social Action, I participated in the National Union's Advisory Committee on Women's Issues. NUPGE brings together the chairs of the women's committees of constituent unions to form this committee. While HSA is one of only two participating unions without a women's committee, I am proud of our union's contributions in advancing women's equality. This spring, this national committee is holding a conference that includes women from across Canada. Participants in NUPGE's Quality of Women's Lives conference will have the opportunity to explore the issues of balancing the responsibilities at work and at home, culminating in difficulties finding time to get involved in their unions, or run for political office. HSA will be well represented at that conference.

Many union conventions and social action events include a small "marketplace" of vendors and display booths. This winter, HSA's board of directors voted in favour of the committee's recommendation to develop an application process to encourage such participation. In exchange for any fundraising activities at HSA's convention, social activism groups will be asked to provide educational materials and a spokesperson to engage convention delegates about their cause. Their materials and energy for social change will help HSA delegates become more informed about what they can do – as individuals, union activists, and as part of the broader labour movement – to make a difference.

In addition, this year's committee responded to repeated calls to reconfigure the regional basket auction at convention. Regional baskets – filled by HSA members from each region with local specialties – have been extremely popular. This year the baskets will be awarded by a raffle instead of an auction, allowing more delegates to participate. Hopefully, we'll also be able to raise even more money towards the Equality and Social Action Fund.

Proceeds from the convention raffle will go to Shelterbox (*shelterbox.org*), providing disaster relief in the form of rugged boxes packed with emergency supplies and shelter. For \$1200, one shelterbox supplies 10 people with a tent, sleeping bags, food, and other supplies.

EQUALITY AND SOCIAL ACTION FUND

Last year's convention delegates voted to increase the Equality and Social Action Fund from 0.45 per cent of general revenue to 0.5 per cent. This resulted in an increase of approximately \$5877, allowing the funding of additional programs. Organizations benefitting from this increased funding are:

 Street Sisters: First person stories of survival and support from the Downtown Eastside
 A collective of six filmmakers – half of them Aboriginal – are volunteering to produce a docu mentary film, following the lives of nine women as they participate in an Aboriginal women's support group; HSA's contribution will help provide a stipend for the facilitator/counsellor/outreach worker, who is an Aboriginal Elder.

• Partners in the Horn of Africa

Although the committee's focus does not include Africa, an exception was made this year for this project. With strong ties to BC's labour movement, Partners in the Horn of Africa works with a sister organization in Ethiopia to provide micro-loans to marginalized women and construct schools, in addition to other projects.

• Vancouver Co-op Radio

Located in the heart of Vancouver's Downtown Eastside, Co-op Radio is a voice for the voiceless, providing community access to a broad range of information and perspectives. HSA's contribution this year is towards a pod-cast pilot project featuring a selection of flagship programs that provide labour and human rights information and programming.

Homelessness Connect

This is a partnership with small businesses to provide work for homeless people in the community.

In addition, the committee was excited about contributing to another new project through HSA's VISA credit card cash-back accumulation. Protein for People is a BC labour movement initiative to donate canned salmon to food banks. Each can carries a label identifying labour's contribution, and the project provides cans for a fraction of the cost that food banks must pay to provide similar protein-rich cans.

Protein for People is also conducting successful "community forum" events. Participants at a

community forum held in North Surrey enjoyed burgers served by firefighters; a booth from BC Housing, where several people facing eviction were placed into housing on the spot; and an Employment Standards Booth with advocates who answered questions about workers' rights.

Protein for People is working to expand province-wide in the next year. HSA's continuing contribution as a member of the "affiliates' council" is noted.

TAKING ACTION

The committee encourages members to bring to our attention issues of social justice or solidarity. Delegates at last year's annual convention gave direction on various issues through convention resolutions. The following is a summary of how the committee continues to take action:

Emergency resolution: Join the National Union and the Canadian Labour Congress to demand the parliament of Afghanistan withdraw the Shia Family Law.

- This law legalizes rape of Afghan women by their husbands; nor can women leave their homes or seek education without their husbands' consent.
- NUPGE has invited a resolution on this issue to its convention being held later this year.

Resolution 22: Support the CLC campaign to oppose Canada-Colombia free trade.

- Trade union leaders stewards and elected officials – are routinely executed in Colombia just for attending union meetings and advocating on behalf of their colleagues.
- This summer, HSA's *The Report* magazine

reproduced CLC's educational illustrated essay on the current situation in Colombia, calling on members to tell their Members of Parliament to put free trade talks on hold.

Resolution 23: Gather HSA members' information on the impact to clients and patients of recent cuts to legal aid; join with other organizations such as the West Coast Legal Education and Action Fund (LEAF) to publicize the impact of and protest such cuts.

- Last spring, HSA sent a bulletin calling on members to sign the West Coast LEAF and Pivot Legal Society petition calling for the restoration of legal aid in the province.
- In 2004, West Coast LEAF collaborated with the Canadian Centre for Policy Alternatives (CCPA) to produce an in-depth study about the effects of cuts to legal aid. This year, LEAF is working on an update to its original report. HSA obtained an invitation from LEAF to participate and contribute. A memo asking members to contribute their anecdotes and information was circulated in early February, as well as posted on HSA's website, and the committee encourages members to participate.

Resolution 24: Call on provincial government to take concrete policy action to address poverty and homelessness in BC.

- HSA's board of directors voted in favour of the committee's recommendation to endorse the Living Wage Campaign, declaring that it is unacceptable for BC to have Canada's highest child poverty rate, and calling for government policy and programs to provide sufficient wages and benefits.
- HSA's board also voted in favour of the com-

mittee's recommendation to endorse Canada Without Poverty's Dignity for All campaign; to continue supporting the work of the Living Wage Campaign and Canada Without Poverty; and to support Homelessness Connect, a partnership with small businesses to provide work for homeless people in the community.

Resolution 25: Endorse NUPGE's plan for a strong economy and fair society.

• HSA has endorsed this plan; union president Reid Johnson has also highlighted this action

plan by participating in the Nanaimo session of NUPGE's Cut Me a Slice: a people's response to the economic crisis national tour.

Resolution 26: Work to lower child care subsidy eligibility requirements.

• HSA members with expertise in this area are helping to develop an action plan; look for more information in the coming years.

Respectfully submitted, Suzanne Bennett, Chair

Equality and Social Action Fund:	Donations: 2009			
	Donations: 2003			
BC Coalition of People		Vancouver Co-op Radio	4000	
with Disabilities	1500	Vancouver Rape Relief		
Camp Jubilee	1000	and Women's Shelter	1089.44	
Canada Without Poverty:		"We Can" BC Campaign		
Dignity for All Campaign	1089.44	(We Can End All Violence		
Check Your Head: The Youth		Against Women)	3000	
Global Education Network	5000	West Coast Legal Education		
CoDevelopment Canada	14,000	and Action Fund (LEAF)	4000	
First Call: BC Child and Youth		World Peace Forum Society	2000	
Advocacy Coalition / Living				
Wage Campaign	1089.44	TOTAL	58,768.32	
Global Youth Education				
Network Society	2500			
Homelessness Connect	2250	Additional donations:		
Partners in the Horn of Africa	2500			
Penticton & Area Women's Centre	3500	HSA's credit card cash back a		
Quesnel Northern		was donated to Protein for P	eople (see full description	
Women's Conference	500	in committee report)		
Sierra Club of Canada, BC Chapter 2500 • Kirsty Babcock/Semiprecious Jewellery, from its boo				
South Okanagan Victim		at HSA convention, donated \$500 of sales to the		
Assistance Society	3250	Equality and Social Action Fund		
Street Sisters: First person stories • Proceeds from the 2009 convention re				
of survival & support from	4000	ket auction – \$2333.20 – we	ere donated to Project	
the Downtown Eastside	4000	SOMOS		

EDUCATION COMMITTEE

Your committee: Marg Beddis (Chair and Director, Region 7)

Agnes Jackman (Director, Region 4)

Charles Wheat (Member at Large, Region 10) Rick Lascelle (Member at Large, Region 3) John Sawicz (Member at Large, Region 4)

Leila Lolua (Staff)

MANDATE OF THE COMMITTEE

The mandate of the Education Committee is to oversee HSA's comprehensive education program. HSA ensures that all stewards have access to training to provide them with the knowledge and tools required to represent members and HSA's interests.

EDUCATION IS AN ONGOING PROCESS, SOMETHING THAT HELPS TO MOBILIZE AND KEEP OUR ACTIVISTS AND STEWARDS ENGAGED WITH THEIR UNION AND IN THEIR WORKPLACES AS ADVOCATES.

Core training includes three-day workshops for new stewards and two-day workshops for health and safety stewards. It also includes constituency liaison training to educate MLAs about HSA and to promote HSA issues to meet our members' interests, and labour council delegate training for members who participate in their local CLC Labour Councils to ensure that our stewards and activists have the knowledge and skills to be effective HSA representatives. The number of stewards attending these workshops continues to grow, with more than 180 members taking advantage of core training last year.

The committee makes recommendations for workshops they would like to see offered, based on current issues that affect our members, to increase the effectiveness of our activists. The committee identifies educational needs and makes recommendations to the board of directors regarding policies and programs consistent with the goals and objectives of HSA.

EXTERNAL LABOUR EDUCATION

The Education Committee also oversees the selection of HSA scholarships that offer members the chance to participate in external labour-sponsored education at the Canadian Labour Congress Winter School and the BC Federation of Labour's Summer Institute for Union Women. A record number of HSA women applied to attend the Summer Institute for Union Women. Eight HSA members and one daughter were selected to attend the Institute, held at UCLA in Los Angeles last summer. Members described this opportunity as transformative and inspirational, and raised their awareness of the value of unions to improve the lives and working conditions of women. Twelve members received HSA CLC winter school scholarships to attend courses such as Facing Management and Women in Leadership. HSA funds wage replacement and costs to make it possible for members to experience these valuable, multi-union educational opportunities.

FINANCIAL AID AND AWARDS PLAN

HSA's Financial Aid and Awards Plan – which supports members and their children through bursaries and scholarships for full-time post-secondary study in a public education facility – are always well subscribed. Each year the committee is impressed by the quality of applicants, and has the challenging task of choosing 30 winners. This year, in response to direction from last year's convention delegates, the committee recommended that four part-time bursaries be offered to members, in addition to the full-time awards.

HSA offers two \$1000 Aboriginal Bursaries for students entering post-secondary education in an HSA-related field. If you know of any aboriginal students in your community, encourage them to apply. Please note that the application deadline for these awards is generally the end of February each year. Refer to the education section of HSA's website for more details.

In addition, the committee oversees the Madden Memorial Fund which funds members taking labour-oriented training in areas such as human rights, labour relations and health and safety.

THE YEAR IN REVIEW

A record number of delegates attended pre-convention workshops last year. Members attended workshops to discuss work-life balance, sick leave and disability plans, and health and welfare benefits. Public speaking training was also offered, and all participants learned about the realities of trying to achieve economic equality for women in Canada.

In addition to providing training to stewards, HSA supports supervisors by offering Supervisors in the Union workshops to help clarify their rights and obligations under the contract. Feedback from participants demonstrates how valuable it is for supervisors to have a chance to share concerns in this environment, where they can meet with their peers from various workplaces. Workshops were held in Victoria and Vancouver last year. Look for bulletins advertising Supervisor in the Union workshops which will be held in the HSA office in the late spring this year.

Each year, regional workshops are held in conjunction with fall Regional meetings. In 2009, topics addressed included Occupational Health and Safety and pandemic planning, vaccinations, the right to refuse unsafe work, layoffs and collective agreement rights, and preparing for bargaining.

Education is an ongoing process, something that helps to mobilize and keep our activists and stewards engaged with their union and in their workplaces as advocates. As always, but especially in a bargaining year, we continue to support stewards to organize locally in their worksites to be prepared to defend our bargaining objectives.

Respectfully submitted, Marg Beddis, Chair

OCCUPATIONAL HEALTH AND SAFETY COMMITTEE

Your committee: Heather Sapergia (Chair and Director, Region 10)

Rachel Tutte (Director, Region 6)

Larry Bryan (Member at Large, Region 5) Doug Brydle (Member at Large, Region 7) Donna Mason (Member at Large, Region 9)

Marty Lovick (Staff)

MANDATE OF THE COMMITTEE

The Occupational Health and Safety Committee is tasked with raising issues of safety concerns for members. In conjunction with the Education Committee, the OHS committee makes safety steward training and further education available, and it brings outside sources of safety training to the attention of members. The committee reports to the

ONE OF THE MOST IMPORTANT IS-SUES FOR OUR MEMBERS THIS PAST YEAR HAS BEEN THE H1N1 PANDEM-IC. HSA TOOK A LEADERSHIP ROLE AMONG HEALTH CARE UNIONS BY KEEPING OUR MEMBERS INFORMED ABOUT BEST PRACTICES FOR SAFETY.

HSA board of directors and makes recommendations on issues concerning OHS. The committee advocates for members with partner agencies such as the Occupational Health and Safety Agency for Healthcare (OHSAH). The committee promotes workplace health and safety, encouraging members to be knowledgeable and diligent about their safety rights at work, and acts on resolutions assigned to it from convention.

THE YEAR IN REVIEW

The committee met four times in 2009. One of the meetings occurred partially by teleconference from the Kelowna conference and the rest in the usual one-day format.

In September, some committee members, along with other members who have played an active role in OHS work, participated in the biannual safety conference put on by the health authorities. At this conference in Kelowna, members heard the results of several OHSAH studies which affect our members; training methods for safe work habits and best practice for reducing exposure to xrays, for example. Members also heard from several dynamic leaders in public health care and OHS from Canada, the US and UK.

HSA is initiating a study to be undertaken by St. Joseph's hospital in Comox. The study will look at ways to reduce the injury rate for ultrasonographers. The objective is to look for practical preventative measures for an occupation that has high risk of muscle skeletal injuries.

HSA is continuing to push for a study of the effects of on-call for our members. In conjunction with OSHAH and Northern Health, HSA is pursuing a grant application to Work Safe to fund this study. This study is expected to be underway by the time our annual convention begins.

In January, HSA joined some health authorities,

other health care unions and some of the public universities to participate in an OSHAH-led meeting to initiate a study of the potential risk factors that result in poorer health outcomes for workers injured in rural areas as compared to urban ones.

In recognition of the April 28 Day of Mourning for workers killed or injured on the job, HSA encouraged members to attend events in their local communities and published a list of these events on the web site. In memory of David Bland, an HSA member murdered at his worksite, an annual award was established in 2007 that honours an outstanding HSA safety advocate. The committee chose Alan Peters as the 2009 winner. Peters has had a long history of educating and mentoring safety stewards.

One of the most important issues for our members this past year has been the H1N1 pandemic. HSA took a leadership role among health care unions by keeping our members informed about best practices for safety during the pandemic. HSA staff member Sheila Vataiki did a great job in getting the latest information available to members in a rapidly-changing atmosphere. In September, HSA invited safety stewards to attend an intensive workshop that equipped them to return to their work sites able to monitor work practices and advocate for our members' safety during the ongoing pandemic.

Delgates to last year's convention directed HSA to make public Work Safe's failure to deal forcefully with issues of violence in health care. We are addressing this by supporting HSA members who are taking strong leadership roles in advocating for staff safety and knowledge of violence issues. As well, there will be a significant focus on violence during Occupational Health and Safety Week in May and at the fall OHS conference. In addition, Larry Bryan, who sits on the provincial Violence in the Workplace Committee, is representing HSA on the development of online modules for self-protection training.

THE YEAR AHEAD

Following the successful 2008 advanced OHS steward's workshop, the committee plans to again host a two-day workshop for experienced OHS stewards in the fall of 2010.

Thanks go to the committee members, Rachel, Larry, Doug and Donna for being safety advocates in their work and for their commitment to the OHS committee. To all our HSA members who also make safety part of their daily best practice at their work sites, thank you for staying safe at work. This committee also benefits greatly from the work of our staff person Marty Lovick, with assistance from Karin Herbert.

Respectfully submitted, Heather Sapergia, Chair

POLITICAL ACTION COMMITTEE

Your committee: Rachel Tutte (Chair and Director, Region 6)

Joan Magee (Director, Region 8)

Anna Morton (Member at Large, Region 2) Mo Norton (Member at Large, Region 6) Dave Noga (Member at Large, Region 6)

Carol Rivière (Staff)

MANDATE OF THE COMMITTEE

The mandate of the Political Action Committee (PAC) is to support the involvement of HSA members in the political process and in approved grassroots political activism. It oversees the work of HSA's constituency liaisons, other lobbying efforts assigned by the board, and the use of HSA's Political Action Fund (PAF). The committee reports directly to HSA's directors at each board meeting, and to the membership in the Annual Report and at convention.

THE YEAR IN REVIEW

RESOLUTIONS FROM
PAST HSA CONVENTIONS – 2008

In 2008, HSA delegates passed resolutions directing HSA to increase the Political Action Fund for two years, from 0.5 to 0.75% of revenue, and directing PAC to make a recommendation to convention on whether to continue the increase after 2010. HSA members are becoming more politically active, and are supportive of the union becoming more involved in politics. Given the current local and international economic and political context, government cuts to health care and social services, and our current bargaining efforts, HSA members will need funds for increasing grassroots political action, for member activities with the BC Health Coalition, and to en-

gage in electoral politics. We therefore recommend that the Political Action Fund remain at 0.75% after 2010.

RESOLUTIONS FROM
PAST HSA CONVENTIONS – 2009

PAC was assigned two resolutions passed at the 2009 convention:

- Resolution 7 directed HSA to inform members about the criteria used by labour councils in recommending candidates running for political office. PAC has mapped out a plan to obtain this information, and for the incoming committee to ensure members receive the information before the next municipal election in 2011.
- Resolution 48a directed HSA to continue participating in campaigns to educate the public and members about the impact of public private partnerships (P3s) on public health care, and to continue opposing P3s in public services. HSA continues to participate in the BC Health Coalition and the Canadian Health Coalition campaigns against P3s. HSA has also contributed to an update of the Ontario Health Coalition's major report on P3s, and will provide members with information from this report as soon as it is available.

PROVINCIAL ELECTION

HSA support for member participation in the May 2009 provincial election was the highest ever. Eleven members were approved to receive a total of 147 days of wage replacement, provided through the Political Action Fund, to run for office or work on approved campaigns.

HSA also mailed information about significant election issues to every member, and the HSA website provided information about the Single Transferrable Vote referendum, which asked British Columbians if they wanted to change the voting system used in provincial elections.

CONSTITUENCY LIAISON PROGRAM

Expanding HSA's Constituency Liaison program has been a priority because of a number of factors: the number of MLAs increasing from 79 to 85 last spring, the election of many new MLAs with little knowledge of HSA, significant government cuts to health care and community social services, and the lead up to bargaining for our members. The number of liaisons has increased from 37 to 57 since our last convention, and HSA held two constituency liaison workshops during the past year, training a total of 35 liaisons.

Liaisons are currently meeting with their MLAs and providing them with a new information package intended to support a key HSA bargaining message: protecting quality health care. An important part of this message is that government and employers must address the shortage of health science professionals in order to protect quality health care. Liaisons are also introducing newly-elected MLAs to HSA and the essential work our members perform.

There has been no MP lobby since the last

convention because there hasn't been a long enough period of time without the likelihood of a federal election. Potential issues for a future MP lobby include health care privatization, enforcement of the Canada Health Act, seniors' care, and a National Pharmacare plan.

BC HEALTH COALITION

HSA has continued to be very involved in the BCHC, including providing support for Region 6 Director Rachel Tutte to serve as the labour co-chair of the Coalition since August 2009.

The BCHC has launched two major campaigns during the last year:

- "Broken Promises. Seniors Care. We can do better." This campaign calls for the government to establish an independent seniors' advocate, create 5000 new not-for-profit residential care beds, expand home support services and increase direct nursing care hours in residential care to 3.5 hours per resident per day.
- "Medicare: It's got us covered." This campaign opposes health care privatization and promotes public solutions and innovation to improve public health care. Specific goals are to halt the expansion of for-profit surgical and diagnostic clinics, ensure compliance with the Canada Health Act, and to protect our public, singlepayer universal health care system by preventing the sale of private health insurance for provincially insured services. This campaign ties into the BCHC's action to defend our public health care system against a group of private clinics who have launched a Charter challenge seeking to strike down provincial health care legislation that limits the for-profit delivery of medically necessary services.

The BCHC organized a pro-medicare coalition which has obtained intervenor status in this lawsuit, and is currently holding workshops around the province to spread the word about the potentially serious consequences to our public health care system if the for-profit clinics win and private health insurance is allowed for services that are currently funded by MSP.

WE WILL CONTINUE TO FACE SIG-NIFICANT CHALLENGES IN THE YEAR AHEAD. THE ECONOMIC SITUATION IS STILL VERY UNSTABLE, THERE ARE STILL HIGH LEVELS OF UNEMPLOY-MENT IN THE PRIVATE SECTOR, THE CUTS TO HEALTH CARE AND SOCIAL SERVICES HAVE BEEN SIGNIFICANT

This lawsuit represents a crossroads for medicare. It is likely that it will end up in the Supreme Court of Canada, and may produce the defining Charter of Rights and Freedoms interpretation that would apply across the country. Find out more by visiting the BCHC website *bchealthcoalition.ca*.

POLITICAL ACTION FUND

Since the last convention, HSA's Political Action Fund has been used to support members who ran or worked in the provincial election, as outlined above. Support has also been made available for members to work with the BCHC, participate in a Canadian Labour Congress-organized national MP lobby and to attend non-partisan training to engage in electoral politics.

PAC also spent time this year developing a plan to expand the use of the fund to support members to obtain training and to engage in grassroots political action. As a result, the board has approved the use of the fund to support members to work with progressive, non-partisan organizations, such as the BCHC and the Council of Canadians, as well as non-partisan campaigns coordinated by affiliated labour organizations including NUPGE, the BC Federation of Labour, and the CLC. The fund can be used to support members engaged in educating, advocating, lobbying, and organizing around issues such as anti-poverty initiatives, promoting seniors services, or building a provincial or national child care program.

CONVENTION 2010

Your Political Action Committee recommended several resolutions for convention delegates to consider. One is a resolution proposing that NUPGE consider a National Day of Action on the Economy to support its campaign entitled: "Cut Me A Slice – A People's Response To The Economic Crisis". This would allow a national discussion of, and education about, solutions that benefit the majority of people rather than just the banks, large corporations and the rich.

Another resolution encourages HSA members to learn about May Day, because knowing the history of the labour movement is so important in helping us know how to act and fight in the present and the future. HSA is also providing convention delegates with a Pacific Northwest Labour History Association booklet that outlines a walking tour of downtown Vancouver sites that played a significant role in BC's labour history. Delegates will have an opportunity during convention to participate in a

guided tour based on this booklet.

In concluding this review of the past year, I want to thank all the committee members for their hard work and enthusiasm, and to thank the incredible staff support for the committee – Carol Rivière and Pattie McCormack.

THE YEAR AHEAD

We will continue to face significant challenges in the year ahead. The economic situation is still very unstable, there are still high levels of unemployment in the private sector, the cuts to health care and social services have been significant, and we can expect more to come. HSA members are expressing concern about our patients, the cuts to programs and the heavy workloads that make it more and more difficult for our members to provide quality services. We must be ready to fight for quality public health care and social services, and for a fair taxation system that will fund them.

There is support through HSA's education and the Political Action Fund to help you to take action against the cuts, and to help you act to restore and improve the quality public services we know can exist.

Respectfully submitted, Rachael Tutte, Chair

RUN FOR THE CURE COMMITTEE

Your committee: Agnes Jackman (Chair and Director, Region 4)

Val Avery (Director, Region 2)

Feriba Rasool (Member at Large, Region 4) Brent Jeklin (Member at Large, Region 7) Kevin Towhey (Member at Large, Region 8)

Janice Davis (Staff)

MANDATE OF THE COMMITTEE

The Run for the Cure Committee promotes, co-ordinates, and oversees HSA activities associated with the annual Canadian Breast Cancer Foundation Run for the Cure fundraising event. HSA has participated in the Run for the Cure since 1997 and is a proud corporate sponsor at all 11 Run sites in BC. HSA's sponsorship of the Run helps to raise awareness of HSA and the important work HSA members do in the diagnosis, treatment, and rehabilitation of breast cancer patients.

2009 WAS OUR BIGGEST FUNDRAIS-ING YEAR YET. THE TEAM FUNDRAIS-ING PLUS THE ANNUAL CORPORATE SPONSORSHIP OF \$35,000 AMOUNTS TO A SIGNIFICANT CONTRIBUTION TO THE CANADIAN BREAST CANCER FOUNDATION AND FINDING A CURE.

HSA members, friends and family are encouraged to join the HSA team on-line. There are 11 official Run sites: Abbotsford-Fraser Valley, West Kootenay (Castlegar), Golden, Kamloops, Kelowna, Nanaimo, Port McNeill, Prince George, Vancouver, Vernon and Victoria. You do not need to live in or

near a Run site to join the HSA team and fundraise on-line.

Every day, HSA members help breast cancer patients in their personal fight with cancer. We provide the diagnostic services that detect and pinpoint the disease. We perform crucial clinical roles during treatment. And with the rehabilitation services we provide, we help patients and their families adjust to their post-treatment lives.

THE YEAR IN REVIEW

HSA is pleased to announce the appointment of Val Avery (HSA Vice President, Region 2 Director and HSA Run committee member) to the BC/Yukon Region of the Canadian Breast Cancer Foundation Board of Directors. Val's addition to the CBCF board adds the perspective of a health science professional working in the field of breast cancer.

This year the Run committee and members were fortunate to have the creative assistance of Angie Dingler, an HSA member at the BCCA Fraser Valley Cancer Centre. Angie did a fantastic job working with HSA Run chapter coordinators to organize and facilitate lunch and learn meetings at over 20 HSA worksites and at the HSA office. These successful meetings increased awareness of HSA's involvement in the Canadian Breast Cancer Foundation and the Run for the Cure. The money raised at these lunches was applied as donations to the HSA team.

2009 was our biggest fundraising year yet. The 164 HSA team members beat our goals and raised \$36,562.34. The team fundraising plus the annual corporate sponsorship of \$35,000 amounts to a significant contribution to Canadian Breast Cancer Foundation and finding a cure. Way to go!

If you are at the HSA convention this year please plan to join the Run committee-sponsored lunch on Friday, April 16 as we talk about the members' successes this year and how you can use these mobilizing ideas at your chapter in 2010.

TOP PRIZE WINNERS

For many years Mary Hatlevik has shown her commitment to the HSA team in Castelgar. The committee takes pleasure in congratulating Mary for being the top HSA team fundraiser for seven years in a row. Mary is a 'retired' psychiatric nurse working casual at Kootenay Boundary Regional Hospital. She is a long time HSA activist, chief steward and supporter of the Run for the Cure.

HSA incentive prizes were given out to five team members:

- Mary Hatlevik Kootenay Boundary Regional Hospital\$3,692.00 (prize: \$300).
- Megan Lockhart (partner of Pej Namshirin at Vancouver General Hospital) \$1790.00 (Prize: \$250)
- Mari Mills Holy Family Hospital \$1600.00 (Prize: \$200)
- Anita Bardal St. Paul's Hospital \$1,551.80 (Prize: \$150)
- Gina McGuire CML Healthcare Lower Mainland \$925.00 (Prize: \$100)

On behalf of the committee, I want to thank all the chapter and site coordinators who worked to recruit team members and organize the tattoo tables at each site; the team members and volunteers for participating; all those who ran and donated; and every HSA member who helped to make this year a great success.

And last but not least, thank you to the committee members: Val Avery, Feriba Rasool, Brent Jeklin, Kevin Towhey, staff members Janice Davis and Karin Herbert, and HSA member Angie Dingler for their hard work and commitment to HSA's participation in the Run for the Cure.

We look forward to seeing you on the HSA team on Sunday October 3rd, 2010.

Respectfully submitted, Agnes Jackman, Chair

NOTES



HSA Health Sciences Association The union of caring professionals

HSA's Board of Directors is elected by members to run HSA between Annual Conventions. Members should feel free to contact them with any concerns.

President [webpres@hsabc.org] Reid Johnson, MSW Centre for Ability

Region 1 [REGION01@hsabc.org] Suzanne Bennett, Youth Addictions Counsellor, John Howard Society

Region 2 [REGION02@hsabc.org] Val Avery (Vice-President) Physiotherapist, Victoria General Hospital

Region 3 [REGION03@hsabc.org] Bruce MacDonald (Secretary-Treasurer) Social Worker, Royal Columbian Hospital

Region 4 [REGION04@hsabc.org] Agnes Jackman, Physiotherapist George Pearson Rehabilitation Centre

Region 5 [REGION05@hsabc.org] Kimball Finigan, Radiation Therapist BC Cancer Agency (Vancouver)

Region 6 [REGION06@hsabc.org] Rachel Tutte, Physiotherapist Holy Family Hospital

Region 7 [REGION07@hsabc.org] Marg Beddis, Dietitian Surrey Memorial Hospital

Region 8 [REGION08@hsabc.org] Joan Magee, Laboratory Technologist Cariboo Memorial Hospital

Region 9 [REGION09@hsabc.org] Janice Morrison, Physiotherapist Kootenay Lake Hospital

Region 10 [REGION10@hsabc.org] Heather Sapergia, Laboratory Technologist University Hospital of Northern BC

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EDITOR David Bieber

(From left) Agnes Jackman, Bruce MacDonald, Janice Morrison, Heather Sapergia, Rachel Tutte, Joan Magee, Suzanne Bennett, Marg Beddis, Val Avery, Reid Johnson. (Inset) Kimball Finigan.





