

Canadian Union of Public Employees

SASKATCHEWAN



HEALTH CARE COUNCIL of UNIONS

HISTORY

1997 – 2007

History of the Saskatchewan CUPE Health Care Council of Unions

1997 - 2007

Background to the Formation of the Council:

In 1992, the then Minister of Health initiated the “Wellness Project” *A Saskatchewan Vision for Health: A Framework for Change*. The plan involved massive restructuring; autonomous facilities and service sectors would be consolidated, devolved and integrated into health districts, whose boards would administer service delivery.

Although Industrial Relations in the province’s health sector were highly developed in the early 1990’s, the system was filled with many parallel structures, separate and often competing employer associations, union rivalries, collective agreements providing dissimilar terms and conditions of employment, and occasional strikes. Health labour relations ranged from agitated on occasion to accommodating.

CUPE acute and long-term care bargaining had been centralized since 1970, two chartered councils (the Nursing Home Workers Council of Unions and the Saskatchewan Hospital Council) bargained provincially with two multi-employer associations (the Saskatchewan Health Association and the Saskatchewan Association of Special Care Homes) representing employers and government.

Our members in public, community and mental health bargained directly with the provincial or appropriate municipal government, most notably in CUPE Local 600.

Prior to the creation of District Health Boards Saskatchewan had 132 Hospital Boards, 141 Nursing Home Boards, 45 Home Care Boards and 108 Ambulance Boards.

In April 1993, restructuring began in earnest with the conversion or closure of fifty-two small rural hospitals and integrated facilities.

By early 1994, thirty-two (32) District Health Boards had replaced some four hundred (400) independent acute care, long-term care, home care and ambulance boards. These thirty-two (32) Employers inherited more than 500 certified bargaining units.

In April 1995 mental, community and public health services were devolved, or transferred, from the provincial and municipal governments to the Districts, bringing to an end the government’s role as a direct provider of health services in these areas.

In 1995 the Saskatoon Health District applied to the Saskatchewan Labour Relations Board to create three standard units to represent the employees. They asked for a nurses unit, a professional unit and an all employee unit. At this time the Saskatoon Health District had to deal with 7 Unions and approximately 50 bargaining units.

It was during this time, the health districts established a collective provincial presence in the form of the multipurpose, multi-employer association the Saskatchewan Association of Health organizations to represent and serve the health sector employers.

July 1996 - Government established a “Reorganization of Saskatchewan’s Health Labour Relations” commission chaired by James Dorsey, known by health care workers as the Dorsey Commission to deal with the composition of bargaining units on a provincial basis and to consolidate Union jurisdictions.

January 1997 - Mr. Dorsey submitted his final report to the Government January 15, 1997, and on January 17, 1997 the Government enacted it into law.

Dorsey determined that three certified bargaining units be established in Saskatchewan:

- a) A nurse Unit
- b) A health support practitioners unit
- c) A health services provider unit

Mr. Dorsey determined that one Union would be certified to represent all the employees employed by each of the District Health Boards and all unionized employees of affiliates to the District Health Boards.

He determined that CUPE would be automatically certified in 18 Health Districts and SEIU would be automatically certified in 11 Health Districts.

CUPE would represent health services providers in the following health districts and CUPE would charter one new local union for each health district in which it held representation rights. Once the new locals were chartered to CUPE the new locals held founding meetings to elect officers to carry out the local functions.

Assiniboine Valley - Local 5949	Pasquia - Local 3974
Battlefords - Local 3969	Prairie West - Local 3857
Central Plains - Local 3970	Prince Albert - Local 3833
East Central - Local 3991	Regina - Local 3967
Gabriel Springs - Local 2630	South Central - Local 4110
Lloydminster - Local 3971	South Country - Local 1481
North Valley - Local 5000	South East - Local 80
North West - Local 2629	Touchwood Qu’Appelle - Local 2400
Parkland - 3973	Twin Rivers - Local 1549
La Ronge Hospital - Local 1786	
Uranium City Municipal Hospital - Local 1561	
St. Joseph’s Hospital, Ile a la Crosse - Local 1561-1	
St. Martin’s Hospital, LaLoche - Local 2726	

Circumstances as they developed out of health care reform simply dictated that these changes were inevitable. The Unions chose to facilitate these changes without engaging in industrial warfare.

The nineties will be marked in our history as a journey through uncharted waters from an industry that had provided stable full-time employment, to disruption, transfers, lay-offs, work intensification, workload increase, diminished job security and the beginning of a trend towards a more “casualized” membership.

This will also be marked as an era of sad farewells and new beginnings for health care workers in Saskatchewan.

New Beginnings - Formation of Our Council:

June 1997 - Founding Conference of the “*CUPE Saskatchewan Health Care Workers Council of Unions*”, comprising of Health Care Workers who previously belonged to:

- CUPE Saskatchewan Hospital Council
- CUPE Nursing Home Workers Council of Unions
- SEIU
- SGEU
- Pre-Dorsey non-unionized health care workers in “amalgamated” facilities
- CUPE 600

First Executive Officers of the Council:

- President - Stephen Foley
- Vice President - Janet Christopherson
- Recording Secretary - Laurie Appel
- Secretary Treasurer - Kelly Sigfusson

June 1997 - Four staff representatives were exclusively assigned to Health Care - Bryan Brotzel, Andrew Huculak, Melanie Medlicott and John Welden.

October 29, 1997 - First All Local Presidents Meeting of the Council.

December 4 & 5, 1997 - Pre-Bargaining Conference in Saskatoon

June 3 & 4, 1998 - Bargaining Conference in Regina.

June 5, 1998 - First Annual Conference of the New CUPE Health Care Council - two executive members at large were elected expanding the executive from four to six executive council members.

- President - Stephen Foley
- Vice President - Gordon Campbell
- Recording Secretary - Laurie Appel
- Secretary Treasurer - Kelly Sigfusson
- Executive Member at Large- Pearl Blommaert
- Executive Member at Large - Janet Christopherson

Bargaining for one agreement:

The creation of districts and integrated services found our members from the various different locals and unions, a number with their own individual collective agreement, working side by side in the same occupation and in the same workplace. Sectoral compensation differences also existed, between home care, long-term care and acute care.

October 5 – 8, 1998 - the first post-Dorsey bargaining for a common collective agreement began - one that would combine the eight prior collective agreements from different unions and health sectors within CUPE’s jurisdiction into one. The bargaining committee faced a formidable task of

aligning disparate provisions within these agreements and the first meeting understandably got off to a rocky start for the first two days.

With a focus on settling upon common terms and conditions of employment for our members, CUPE used strategies that combined traditional positional and political bargaining, bypassing SAHO when possible and negotiated with the politicians.

The key issues identified involved:

- Standardizing contract language,
- Developing a uniform pay system,
- Improved pensions and benefits
- Developing common hours of work, and
- Implementing start date seniority

Bargaining did not go well! CUPE members were not in an accommodating mood. Restructuring had affected many members negatively, creating feelings of grievance and militancy. Health Districts were larger, more impersonal organizations, they required our members to work more intensely and workplace conditions were often more stressful.

December 2, 1998 - CUPE health care workers sent a message to the government; *“We are ready to rumble”*.

December 7, 1998 - The Council served strike notice.

January 7, 1999 - a bitterly cold day, the Council embarked on a one-day strike with a massive rally at the Provincial Legislature. Our first agreement post-Dorsey for all 12,500 CUPE members was reached shortly afterwards.

The agreement contained many major break-throughs including:

- Agreement to negotiate a province-wide job evaluation plan to achieve pay equity and internal wage parity,
- Creation of a provincial Employment Strategy Committee,
- Achieved start date seniority and moved to annual wage increments not based on hours worked,
- Moved closer to common hours of work: 2080 annual hours was reduced to 1948.8 annual hours,
- Portability of benefits within the health districts,
- Minimum three-hour shift report pay for home care workers.

In 1998-99, agreement was reached that the joint job evaluation plan would cover all 25,000 health care workers represented by CUPE, SEIU and SGEU (the providers' group).

October 19 – 21, 1999 - The JJE Project Steering Committee met for the first time in Regina.

November 4, 1999 - First CUPE/SAHO Provincial Labour/Management Meeting.

June 2000 - Pension improvements: The Council led a multi-union campaign with five other major health care unions demanding improved funding for pensions. At the time the employer's

contribution was only 4.6%, one of the lowest contribution rates in the country. The funding dispute delayed implementation of another major Council initiative, a jointly trustee pension plan.

CUPE and a coalition of unions organized a massive petition and launched a newspaper ad campaign: "*Poverty has many faces. This one belongs to a health care worker*". It featured retired CUPE health care worker, Mary Leach. After 19 years of service, her pension benefits were only \$300 per month.

When the government didn't move on pension funding, the CUPE Health Council vowed to make pension reform a priority issue at the bargaining table in 2001.

November 15, 2000 - The Representative Workforce Strategy: Another important milestone was the signing of our partnership agreement with the Provincial government and SAHO to create "a representative workforce." The official signing ceremony occurred in Regina. CUPE National President Judy Darcy, Health Care Council President Steve Foley and many members of the CUPE council executive and staff participated in the ceremony.

The agreement committed the Council, the provincial government and SAHO to work together to increase employment of First Nations and Metis persons in the health sector.

Since the partnership signing in 2000, over 19,500 health care workers have received the Aboriginal Awareness Training.

In addition, the participation rate of Aboriginals in the health sector workforce has risen from less than 1% in 1996 to over 6% in 2006.

March 2000 - LPN campaign: Our campaign to allow LPNs to work to their full scope of practise also began in 2000, we lobbied the provincial government to allow LPNs to use all of their skills on the job and briefs were presented to the government and the District Health Boards jointly with SALPN.

May 26, 2000 - LPN Legislation: the Health Care Council called for action on LPN Legislation. Legislation was introduced on May 26. The same day, delegates at the Council's May convention in Yorkton sent MLAs a balloon bouquet. The balloons, released outside the Travelodge contained a message to MLAs, urging quick passage of the bill. The legislation was passed, but health regions were slow to react.

November 6, 2000 Health Care Providers' Week - At the request of the CUPE Health Care Council, the Saskatchewan government designated the week of November 6, 2000 as Health Care Providers' Week. The Council organized the special dedication of the week as a positive way to recognize the important contributions of CUPE health care workers to our public health care system.

The designation of "Health Care Providers' Week" continues to take place each year.

November 8 – 9, 2000 - Bargaining Conference held at the Ramada Hotel in Regina.

Second post-Dorsey Bargaining Round:

2001- A new round of bargaining, the Council christened it “*The Work and Family Bargaining Round*”

Members wanted major improvements to help them balance the demands of their work life and their home life. The priority issues included:

- A reduced work week,
- Improved family / dependant care leave,
- Reduced workloads,
- Better pensions.

There was tremendous membership support for these issues and by May, contract talks with SAHO were at an impasse - and the locals really demonstrated the power of collective action.

May 25, 2001 - The Health Council received a 63% strike mandate.

June 5, 2001 - The Council served strike notice.

June 9, 2001 - 12,500 CUPE health care workers in 18 districts were on the line.

A few days later, mediator Vince Ready was appointed to help resolve the contract dispute. After a marathon 43-hour bargaining round, the Council achieved a tentative agreement, ending the six-day strike.

Highlights of the three-year agreement included:

- Paid family days,
- Parity with other health care workers,
- Pension plan improvements,
- A process to deal with workload issues,
- Contract language to create a representative workforce.

Another major initiative in this round was the introduction of the Final Independent Review of Disability Income Plan Appeals. The Council was the first Provincial Health Care Union to achieve an agreement from SAHO to develop and implement an independent review process for DIP denials. Historically, workers had to appeal to the same people who cut them off in the first place! The Health Council invited all other Provincial Health Care Unions to participate in this initiative, and today, all Saskatchewan health care workers have the opportunity to have their appeal of denial of DIP benefits independently reviewed by a third party.

October 25, 2001 – CUPE medical technologists in the Regina Health District walk-off the job in a one-day wildcat strike to protest high vacancy rates and crushing workloads. They want SAHO to agree to a uniform pay schedule for technologists and a quick process to deal with staff retention and recruitment problems.

December 2001 – Technologists from CUPE, SEIU and SGEU hold a joint union meeting in Saskatoon to develop a campaign around retention and recruitment issues.

2002 - CUPE LPN's - The Council surveyed members about their ability to work to full scope. The results were compiled in a report.

April 1, 2002 - Extended Health Benefits and Dental Plan Improvements - CUPE health care workers achieved major benefit improvements with the introduction of these important benefits.

April 15, 2002 – Technologists working on the tri-union committee release their report at news events across the province. The report, “Understaffed and Overworked”, documents the problems facing technologists.

December 23, 2002 - Major pension improvements were achieved in contract negotiations and all of the health unions signed a formal trust agreement to implement joint governance of the SAHO pension plan. The Saskatchewan Healthcare Employees Pension Plan was wrestled from SAHO's grasp on January 1, 2003.

Fyke Commission on Medicare and Representation Votes:

September 2002 - CUPE health workers were involved in representation votes, triggered by government implementing recommendations from the Commission on Medicare (Fyke Commission) who restructured the health care system once again substantially reducing the number of Health Districts from 32 Districts to 12 Regions.

The CUPE Health Care Council organized campaigns in many regions across the province to secure the support of health care workers in the providers' group. Many CUPE activists and staff devoted a vast amount of time and energy to these campaigns.

By the end of 2002, CUPE had secured majority support of 12,500 health workers employed in five of the health regions: Regina Qu'Appelle, Weyburn/Estevan, Yorkton, Prince Albert and the Battlefords.

2003 - CUPE Health Care Local Founding Meetings:

CUPE would once again charter one new local union for each health region in which it held representation rights. Once the new locals were chartered to CUPE the new locals held founding meetings to elect officers to carry out the local functions.

Spring 2003 - New Regional Locals

Regina Qu'Appelle Health Region - Local 3967
Sun Country Health Region - Local 5999
Sunrise Health Region - Local 4980
Prince Albert Parkland Health Region - Local 4777
Prairie North Health Region - Local 5111

March 4, 2003 - Special Meeting called for Council Restructuring & Bylaws location Regina.

March 5, 2003 - CUPE Health Care Council Annual Conference held in Regina establishing new Council Bylaws and Council Executive Structure - representation from the five locals and four Table Officers.

- President - Stephen Foley
- Vice President - Gordon Campbell
- Recording Secretary - Pearl Blommaert
- Secretary Treasurer - Kelly Sigfusson
- Local 3967 - Stan Adcock
- Local 4777 - Carol McKnight
- Local 4980 - Rhonda Oneschuck
- Local 5111 - Brian Manegre
- Local 5999 - Sandra Seitz

2003 - The Health Council also produced a video in 2003 called “The Health Care Journey: Utilizing LPNs to Their Full Scope of Practise”. The report and the video were discussed in CUPE news conferences and meetings across the province. The report was presented to the Government of Saskatchewan through the Minister of Health.

Many more LPNs are now working to full-scope of practise - and the Council continues to work on this important initiative.

2003 - Campaigns to keep food services and laundry “in-house.”

CUPE health care workers in three of our Health Regions organized major campaigns to stop the employer from centralizing or contracting-out food services and laundry.

In 2003, the Regina Qu’Appelle Health Region proposed a new system of food delivery - one that involved closing the hospital kitchens in two of the Regina’s three major health facilities and the abolishment of many dietary positions. CUPE Local 3967 was successful in protecting jobs, but the rethermalized food system is proceeding in Regina.

CUPE 4980 members also organized a campaign to stop the centralization of food services in Yorkton, while CUPE Local 5999 campaigned to stop the centralization of laundry services in Weyburn.

Bright spots on the laundry front were CUPE 5999’s successful campaign in 2003 to ensure the new health facility in Weyburn; Tatagwa View contained a laundry facility, and they were also able to maintain the laundry at St. Joseph’s Hospital in Estevan through a concerted effort with community coalition partners!

Joint Job Evaluation Plan: Although the massive plan, the largest in the province, continues to generate headaches and headlines for the Council, the implementation of the plan in 2003 is likely one of the most significant achievements.

The plan, which removed gender-based discrimination from the pay system, resulted in significant wage increases for many health care workers. The first payments began at the end of 2003 and the last pay equity increase took place on April 1, 2007.

June 23 – 24, 2003 - Bargaining Conference held in Prince Albert.

March 4, 2004 - The Bargaining Committee & Executive believes that implementation of our job evaluation plan is a priority. The attention and energy focused at this time on ensuring that SAHO and the Employers honour the terms of the pay equity agreement. The Council therefore

decided plans for bargaining would be put off until after a March 24-25 meeting scheduled with SAHO. The Committee also decided that membership information meetings regarding the proposal package, originally planned for mid-April to mid-May, would be postponed until more is known about the status of JJE implementation.

Unresolved issues related to implementation of the JJE were forwarded to a dispute resolution tribunal by the three health provider unions for resolution. The tribunal, chaired by Dan Ish of the University of Saskatchewan, would decide the outstanding issues no earlier than July 2004. In spite of these disputes, the Reconsideration and Pre-screening Committees still commenced their important work.

November 2, 3, 4, 2004 - The CUPE Health Care Bargaining Committee commenced bargaining with SAHO.

February 28, 2005 – After the majority of union specific items were concluded, CUPE, SEIU, SGEU, moved to a “common table” with SAHO to discuss extended health benefits and other matters of common concern.

February 2005 - CUPE enters into a Joint Media Campaign with SEIU and SGEU to combat SAHO’s attempt to gut the extended health benefits and dental plan improvements. Four days after the campaign was launched the Government of Saskatchewan and SAHO withdrew their regressive proposals and made a commitment to maintain the current level of benefits until March 31, 2008.

November 17, 2005 - 67% of CUPE Health Care workers voted at union meetings throughout the five health local regions in support of taking strike action.

At this time, contract negotiations with SAHO, discussing primarily non-monetary issues had been going on for more than 14 months.

December 2005 - CUPE Bargains at a Common Table with SEIU, SGEU regarding monetary items as well as common proposals to create and maintaining equitable treatment in the workplace. Creating and maintaining a healthy workplace and maintaining a public health care system continue to be priorities.

January 7, 2006 - Tentative Memorandum of Agreement was reached.

Memorandum of Agreement A - term April 1, 2004 – March 31, 2005, and

Memorandum of Agreement B - term April 1, 2005 – March 31, 2008

The Tentative Agreements covered a four-year period. The agreements give our members a 2% wage increase in each of the years and a further 1% for extended health and enhanced dental, nearly a 50% increase in funding from 2.1% to 3.1% through to March 31, 2008. Significant improvements to priority issues identified by our members include shift and weekend premiums, standby pay, professional fees, access to family illness leave and improved vacation entitlements.

February 17, 2006 - Collective Bargaining Agreement ratified by a 97% in favour vote from the members.

April 17-18, 2007 - First Western Health Care Meeting of the members and staff from British Columbia, Alberta, Saskatchewan and Manitoba.

May 16 -17, 2007 - 10th Annual CUPE Health Care Council Conference held in Regina.

Respectively submitted,

CUPE Health Care Council - History Committee