

## **OVERVIEW OF SHORT-TERM TRAINING CRITERIA**

### WHAT IS THE FBA EDUCATION FUND?

The Fund supports members in the facilities subsector collective bargaining agreement to take training/education either to upgrade within their own job classification, or to improve their mobility into any other job classification with the facilities subsector agreement. Members apply directly to the Fund with requests.

As of summer 2011, the Fund has a new \$1.25M to allocate for training. This round of training allocations will build on the Fund's history – a total of \$7.5M has been put into the Fund since it was first negotiated in the 2006-2010 facilities subsector collective agreement.

Members of the Facilities Subsector Bargaining Association (FBA) unions control the Fund and make all allocation decisions.

### WHO IS THE FBA?

The FBA is the multi-union bargaining agent representing about 38,000 health care workers in British Columbia.

The Hospital Employees' Union is the largest of the 10 unions – representing about 35,000 members – followed by the British Columbia Government and Service Employees' Union covering 1,300 members.

The other unions are: the International Union of Operating Engineers; the Construction and Specialized Workers' Union; the International Brotherhood of Electrical Workers; the United Steelworkers of America; British Columbia Nurses' Union; the United Brotherhood of Carpenters and Joiners; International Union of Painters and Allied Trades, and the United Association of Journeymen and Apprentices of the Plumbing and Pipefitting Industry.

### OVERVIEW OF CRITERIA TO BE ELIGIBLE FOR FUNDING

- An applicant must be a regular employee (Full Time or Part Time), or a Casual employee who has completed 488 casual hours in their current position.
- The applicant must work in a facility or a department of a facility covered by the Facilities Subsector Collective Agreement.
- The training/education must be to upgrade within one's current classification, or move into another classification that is also covered by the Facilities Subsector Collective Agreement.
- Applicant must attend a public training institution for the training.

### WHO MAY APPLY FOR FUNDING?

Current employees (regular and casual) covered by the facilities subsector collective agreement are eligible to apply for funding.

Employers confirm employment status by signing the *Confirmation of Employee Status/Leave Form* in the application. Employers are asked to supply the FTE for a regular employee and/or confirm that a casual employee has completed more than 488 hours of work.

## WHAT TRAINING AND EDUCATIONAL OPPORTUNITIES WILL THE FUND COVER?

The training/education must be in a job classification that is in the facilities subsector collective agreement. The majority of the training should be complete by March 31, 2012.

The Fund covers two types of training – short-term and long-term. For information on short-term training, visit your union’s website.

## WHAT IS SHORT-TERM TRAINING?

Short-term training provides members with opportunities to upgrade skills in their current job, related job, or other job classification (if training is in a different job category within the facilities subsector). This includes:

- courses that require between 2 to 20 days of in-class or practicum time. This could also be a part time program that requires up to 150 hours of in class time. Distance training is also eligible under these guidelines.
- longer courses taken outside of working hours (i.e. part-time or correspondence courses, evening classes, etc.);
- applications will be funded on a continuous intake basis, and may take up to five weeks to process;
- the Fund will pay the cost of the training program and course materials, up to a maximum of \$1,200 (*per person for all short term training funded per person*);
- part-time/distance programs leading to a certificate, diploma or degree – that if available and taken full-time would require more than 20 days’ of in-class or practicum time – may be eligible for up to \$2,400 (*per person for all extended short term training funded per person*) for course costs (i.e. Purchasing Management Association of Canada, Medical Transcription, Nursing Unit Clerk), and
- the Fund will pay a training allowance (up to \$100 per day) to a maximum of 20 in-class and practicum days (*per person for all short-term courses per person funded*), if unpaid education leave for these days is approved by the employer (for example: 10 days of approved unpaid leave could be \$1,000 for an employee working full-time hours). This amount will be pro-rated for employees working part-time or less than 7.5 hours per day. Casual employees requesting the equivalent of unpaid leave will need to submit payroll proof of hours and shifts worked in the six months before this application (i.e. for an application dated July 21, 2011; proof of hours and shifts worked from January 21, 2011 to July 21, 2011 must be provided). (*see Frequently Asked Questions for a detailed explanation of the training allowance*).

### EXAMPLES OF SHORT-TERM TRAINING:

- industry correspondence courses offered for buyers and information technologists
- evening academic upgrading, such as the Grade 12 biology pre-requisite for the **practical nursing** program
- upgrade for ticketed trades

## WHAT TRAINING/EDUCATION WILL **NOT** BE COVERED?

- conferences and professional association meetings;
- employer in-service training;
- self-help, personal interest and leisure courses;
- courses leading to jobs outside the FBA bargaining unit;
- out-of-country courses;
- out-of-province courses (except correspondence), and
- courses through private educational institutions.
- training for which the majority of the course occurs after March 31, 2012.

Also, members covered by other training funds negotiated in the 2010–2012 collective agreement, may not be eligible for FBA Education fund money:

- If a member is eligible for the Joint Re-Training Fund, they will be expected to apply to that Fund instead. Members who are displaced as a result of contracting out should contact their local shop steward and/or union servicing representative for information on accessing re-training funds, and may contact the Joint Re-training Fund directly at: (email) <jhumphrey@heu.org> or call **604-456-7146** (or toll-free: **1-800-663-5813**, extension **7146**).
- If a member receives training that is financially supported by the BC Health Education Foundation, that training will not be eligible under the FBA Education Fund.

## WHERE CAN TRAINING BE TAKEN?

- The course/program should be taken at a British Columbia **public** post-secondary college or institute, or a B.C. School District Continuing/Adult Education program.
- One exemption would be courses for **industry-specific required certification**, such as:
  - Purchasing Agent certification course;
  - Information Technology hardware or software certification course; or
  - Transportation of Dangerous Goods (TDG) certificate in the HVAC/Refrigeration industry.

## IS APPROVAL/PROOF OF TAKING THE COURSE NEEDED?

- **Confirmation of Employee Status and Leave Approval Form:** The *Confirmation of Employee Status* section of the form **MUST** be completed and submitted with **ALL** applications (even if leave is not required) to be considered for the FBA Education Fund.
- **Registration:** There must be written proof from the institution of course registration and/or a confirmed start and end date for the training. This also needs to be submitted with the FBA Education Fund *Application Form*.

## WHAT ARE THE TIMELINES FOR APPLYING FOR FUNDING?

- Applications for programs/courses that begin April 1, 2010, or later, and will have the majority of training complete by Mar. 31, 2012, will be considered.
- Short-term training applications will be reviewed on a continuous intake basis, and may take up to five weeks to process.

### HOW DO I APPLY?

For detailed information on how to apply, or to download the *Application Form*, check your union's website.

If you want a printed copy of the application form and FBA Education Fund information, contact your local shop steward, local executive or union servicing representative or contact the FBA Education Fund directly at: (email) <jhumphrey@heu.org> or call at **604-456-7146** or toll-free **1-800-663-5813, extension 7146**.

### HOW IS THE DECISION ABOUT FUNDING MADE?

The FBA Education Fund Committee has set the criteria for the funding application process. The FBA Education Fund Administrative Assistant will review each application, apply the rules, and make a decision on the funding. The Administrative Assistant will consult with committee members, if needed.

Successful applicants may receive funding for **one** short-term training program. However, members applying for a second time will only be considered after first-time applicants have been processed.

### IF A FUNDING APPLICATION IS DENIED, IS THERE AN APPEAL PROCESS?

Yes, an appeal process is in place.

## **FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY (FOIPOP)**

FOIPOP protects members from unauthorized use of their personal information. You will be asked to sign the Funding Application giving the FBA Education Fund Committee permission to:

- verify information that you provide with unions, employers, educational institutions and/or other funding sources;
- use your information in statistic reports on the FBA Education Fund, and
- be included in a follow-up survey to determine the success of the fund.

*For more information, visit your union's website.*



**SECTION B: Employer Information**

**10** Employer (please check one):

- |  |                                     |   |
|--|-------------------------------------|---|
| <input type="checkbox"/> Vancouver Coastal | <input type="checkbox"/> Interior   | <input type="checkbox"/> Affiliate                    |
| <input type="checkbox"/> Vancouver Island  | <input type="checkbox"/> Northern   | <input type="checkbox"/> Shared Services Organization |
| <input type="checkbox"/> Fraser            | <input type="checkbox"/> Provincial |   |

**11** Work Site: \_\_\_\_\_

**12** Work Site Address: \_\_\_\_\_

**13** Union: \_\_\_\_\_

**SECTION C: Course/Program Information**

**14** Name of School

**15** Location

**16** Course Name (and Number)

**17** Course Hours per Week

**18** Course Start Date (yy/mm/day)

2	0	1					
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**19** Course End Date (yy/mm/day)

2	0	1					
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**20** Confirmed?  Yes  No

**21** Are you on a waitlist:  Yes Projected Start Date: \_\_\_\_\_

**22** Please explain how this course will help in your current job or future career goal in health care (within the **facilities subsector** bargaining unit):

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**SECTION D: Course Costs and Funding Information**

**23** *Course Costs:*

Tuition: \$ \_\_\_\_\_  
Lab Fee: \$ \_\_\_\_\_  
Books/Materials: \$ \_\_\_\_\_  
Practicum: \$ \_\_\_\_\_  
Other: \$ \_\_\_\_\_  
**Total Course Costs:** \$ \_\_\_\_\_

**SECTION E: For Statistical Purposes**

**24** *Date of Birth:* Year \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_

**25** *Gender:*  Male  Female

**26** *Marital Status (check one box only):*

Single  Single Parent  Married  Common-Law  Separated/Divorced

**27** *Number of Dependants:*

Under 18 years of age  Over 18 and in full-time school/study

**28** *Length of Service in health care:* \_\_\_\_\_

**29** *Current Classification (job title):* \_\_\_\_\_

**30** *Employment Status:*

Regular full-time  Regular part-time  Casual

**31** *Regularly Scheduled Hours of Work (in a two-week pay period):* \_\_\_\_\_

**32** *Average Casual Hours of Work (in a two-week pay period):* \_\_\_\_\_

## FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY DECLARATION FOR FUNDING APPLICATION

*Declaration (important – read and sign):*

I declare that the information that I have provided in this application form is, to the best of my knowledge, correct and complete.

**I understand that:** the information I have provided will be used to determine my eligibility for funding from the FBA Education Fund.

**I agree that:** by signing below I give permission for the exchange of information between the FBA Education Fund, my employer, educational institutions, and other funding sources for the sole purpose of verifying and/or investigating information in this application and related documents.

**I agree that:** I will participate in a follow-up survey to help the FBA Education Fund determine the success of the program.

### *Collection and Use of the Information:*

The personal information on this form will only be used for two (2) purposes:

- to determine eligibility for funding by the FBA Education Fund, and
- to gather statistics for use in reports (for example: the number of applications from care aides, the types of training funded, etc.)

Signature of Applicant: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date Signed: \_\_\_\_\_

### **SECTION F: Checklist**

- Confirmation of course registration and confirmed start date **attached.**
- Confirmation of Employee Status and Leave Approval Form **attached.**
- Application completed and signed in ink.**

**Mail** the completed application and other documentation to:

**FBA Education Fund  
c/o 5000 North Fraser Way  
Burnaby, B.C. V5J 5M3**

CONFIRMATION of EMPLOYEE STATUS and LEAVE APPROVAL FORM  
**SHORT-TERM TRAINING**

**EMPLOYEE, PLEASE COMPLETE:**

Name of Employee: \_\_\_\_\_

Position: \_\_\_\_\_ Dept. \_\_\_\_\_

Classification: \_\_\_\_\_ Status:  Full-time  Part-time  Casual

**Unpaid Leave** requested for the following dates: \_\_\_\_\_

\*If no leave required, put N/A \_\_\_\_\_

**Casual employees:** if requesting equivalent to unpaid leave, please submit payroll proof of hours and shifts worked in the six months prior to this application (i.e. application date June 2010; proof of hours and shifts worked from December 2009 to May 2010 must be provided).

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**EMPLOYER, PLEASE COMPLETE (*even if unpaid leave not required*):**

Is employee covered by the 2010-2012 **Health Services & Support Facilities Subsector** collective agreement?  Yes  No

**Regular** Employee status: \_\_\_\_\_ FTE (1.0, 0.5, 0.8, etc.)

**Casual** Employee: 488 hours of work completed?  Yes  No

Is this employee currently on any other leave?  Yes  No

If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Employer Name (*please print*) Title

\_\_\_\_\_  
Signature Date

Work Site Name: \_\_\_\_\_

Employer Phone: \_\_\_\_\_ Email: \_\_\_\_\_