



HOSPITAL EMPLOYEES' UNION

NEWSLETTER

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Health employers flip-flop on benchmark review

Despite solid progress on negotiating new language, health employers are ignoring an agreement with the unions on how to implement revised benchmarks, reviewed under page 209 of the collective agreement.

HEU and the multi-union Facilities Bargaining Association (FBA) reached agreement with the Health Employers Association of B.C. (HEABC) on benchmark language changes for the Stores 2, 3, 4 and 5 benchmarks, and for the ECG Assistant and Perfusionist Assistant benchmarks in October.

That means the parties have now reviewed all the benchmarks covered by the “Page 209” series, and have reached agreement on revised language for the majority of those benchmarks.

Each benchmark has been negotiated as “agreed in principle, subject to final agreement.”

Key to reaching a final agreement is adjusting wage rates using the \$2 million that has been allocated to benchmarks covered by the “Page 209” review.

Those discussions were to begin October 16. But at that meeting, HEABC took the position that all the benchmarks must be implemented and do not see negotiating appropriate wage grids as part of the review process.

That’s contrary to a written agreement between the parties in January 2008 that there will be no final agreement on a benchmark unless both parties agreed to both the language changes and the wage rate for the benchmark.

In short, HEABC wants language in place that recognizes increased qualifications and responsibilities without completing a process that would reflect these changes on members’ paycheques.

In addition, HEABC continues to hold the position that the \$2 million available for this review covers the employers’ costs for benefits – an issue that has also stalled the clerical benchmark review since the summer of 2007.

HEU and the FBA say the \$2 million should be committed only to wage increases.

The unions are prepared to start discussions on the appropriate wage grids for the benchmarks, and on determining how the \$2 million fund will be allocated.

But health employers must reconsider their position – a position that would compromise the job classification system and undermine the true value of the work carried out by union members.

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