



# Bargaining Bulletin

HOSPITAL EMPLOYEES' UNION

THE HEART OF HEALTH CARE

## Day 2: Union proposals address changing roles, diverse skills

**H**ealth unions tabled a comprehensive package of contract proposals on Tuesday that emphasized members' diverse skills and changing roles in health care.

It's the first of five areas in which the Facilities Bargaining Association (FBA) intends to table proposals in this round of negotiations with BC's health employers.

The unions produced a number of studies to back up the package.

"We demonstrated in concrete terms that wages for health care jobs are out of-sync with wages in the private and public sectors," says FBA spokesperson Judy Darcy.

To address these wage inequities, the unions tabled a comprehensive proposal targeting uncompetitive wage rates and the mismatch between changing roles, responsibilities and training and compensation.

In particular, the unions proposed wage adjustments for:

- trades and maintenance workers, information services, LPNs, buyers and cardio-technologists to address recruitment and retention problems;

- LPNs and related patient care classifications to recognize their expanded scope of practice as well as recruitment and retention issues; and

- nursing unit assistants (unit clerks or unit coordinators) to recognize increased responsibilities – and recent changes to the benchmark.

The unions also proposed a benchmark review of:

- clerical classifications to eliminate redundant benchmarks and recognize lead hand and training responsibilities – and to develop new benchmarks and wage rates where appropriate;
- patient care technical and information services classifications to ensure job titles, training, technical competencies and professional certifications are recognized; and
- stores classifications to recognize that increase responsibilities have accompanied regionalization and amalgamation of services.

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Hospital Employees' Union – 5000 North Fraser Way, Burnaby, B.C. V5J 5M3 – (604) 438-5000

The BC Health Services Division of the Canadian Union of Public Employees



Also on the table is a union proposal to update the maintenance agreement – the collective agreement language that provides for an ongoing evaluation of bargaining unit work – to include:

- increased pay for jobs requiring more than one classification or ticket;
- increased pay rates for training requirements not recognized in the benchmark; and
- more recognition for the lead hand role.

A number of other FBA proposals are intended to reflect changing roles in the workplace, specifically:

- a review of clerical issues including standardized testing, support for training on new software and systems, and measures to address privacy, skills shortages and training related to the work of medical transcriptionists;
- an increase to the trades qualification premium (including for certified power engineers) to \$2000 a year; and
- responsibility pay for LPNs and care aides who are assigned supervisory duties or left "in charge" of a worksite or unit.

"Health employers are relying on our members to take more responsibility for training and preceptorships," says Darcy.

"Our research also showed where members are required to obtain more training, education and professional certifications."

On that score, the FBA tabled a number of proposals that deal with education leave, orientation and preceptorship and previous experience:

- an hourly premium for time spent providing orientation or preceptorships;
- education leave provisions in line with BCNU and HSA; and
- credit towards increment steps based on previous hours worked in the position on a temporary or casual basis.

"Our members are fed up working with dated job descriptions that no longer reflect their work," says Darcy.

"Today, we've put forward contract proposals to health employers that recognize our members' place on the health care team – and wages that match these changing roles."

It's expected that some of the issues raised Tuesday by the health care unions will be the subject of discussion and negotiation when talks resume Wednesday.

The FBA, representing 38,000 hospital and long-term care workers, told health employers last week that it also intends to table proposals designed to recover lost ground, address workload, promote stability and stronger public health care, and deal with other general issues.

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