

WINTER 2019

# In Touch

REGISTERED NURSES' UNION NEWFOUNDLAND & LABRADOR

## 26TH BIENNIAL CONVENTION RECAP

Page 15

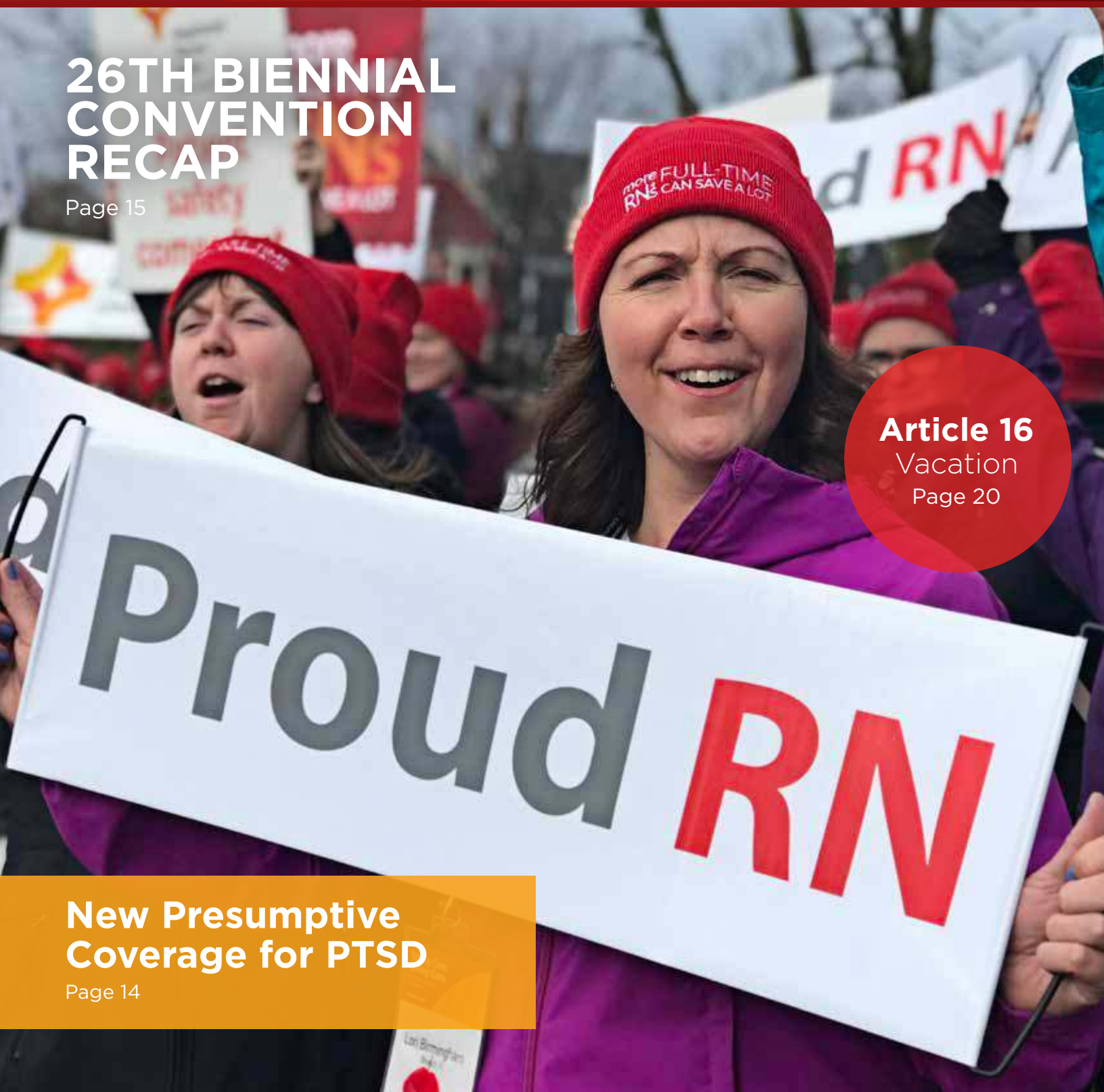
### Article 16

Vacation

Page 20

## New Presumptive Coverage for PTSD

Page 14





## Message from the President

DEBBIE FORWARD, RN

By the time you receive this newsletter we will already be into April of a new year. Sometimes I wonder where the time goes. It seems like just yesterday I was wishing people Happy New Year. This is an important year for our province, our country and our members. In 2019 we will have a provincial election, a federal election and hopefully a new collective agreement.

As you are reading this, it is my hope that we will have a tentative agreement that your bargaining team is recommending. It has been a long process. As I write this update, we have already resolved a number of proposals that are primarily at the employer-level of decision-making that will improve RN workload and support a healthier work life balance. This includes language on the use of casual employees, changes to our temporary employee language, improvements to our professional practice committee language, as well as the creation of additional permanent and temporary relief positions. However, our work is not done.

*"At every opportunity, the RNU leadership has been advocating for a core staff review based on patient acuity."*

As part of our recent campaign More Full Time RNs Can Save a Lot, at every opportunity the RNU leadership has been advocating for a core staff review based on patient acuity. It has been a priority at the bargaining table. Staffing based on the needs of our patients, I believe, is the only way that we can truly address the workload challenges within our workplaces. If we get our core staffing right, then workload will be manageable, patient outcomes will improve and health care costs will diminish. This is one of our bargaining priorities that is still under discussion with government as we go to print.

And what about the two upcoming elections? Have you given them any thought? Do you consider elections to be an opportunity for registered nurses to influence health care and your workplace? I certainly do. We all have the power to influence change with our vote and all election candidates will be vying for yours. What must they do to earn it?

The federal election will be in October and the parties and candidates are already gearing up. The Canadian Federation of Nurses Unions National Executive Board is preparing a campaign that will push issues important to nurses and health care. You can be assured that a National Pharmacare program, Health Human Resource Planning and Workplace Violence will be part of the CFNU's

priorities. Watch for more information in the months ahead.

*"We are headed to the polls again. It's a powerful time for us to remind the provincial government that if they want our vote, RN staffing and workload will have to be priority items."*

And with a provincial election just around the corner, I have been thinking back to the last one in 2015. The leaders of our province's political parties stood in a room of RNs and RNU volunteers and made a number of commitments: working and consulting with RNU on workload; support for better professional practice committee processes; and support for public delivery of health services. Each party praised the role of registered nurses and our place within the health care system.

While we have made progress in some areas, the current state of RN workload and staffing remains critical. Many areas are experiencing a shortage of RNs, 24-hour shifts are still being mandated, and poor work life balance is taking its toll on RNs' health and morale. But we are headed to the polls again. It's a powerful time for us to remind the provincial government that if they want our vote, RN staffing

and workload will have to be priority items, with a real plan established to address them.

RNU is also feeling empowered to make progress on the heels of an invigorating convention. Be sure to read the recap on our 26th Biennial Convention on page 15. The focus on this important week was taking care of ourselves so we can give care to others. Convention delegates, made up of RNs from across the province, passed resolutions on key issues including workplace violence, mental health, and diversity and inclusion. These resolutions will guide our work moving forward.

*"We are asking government to be a partner in change."*

Staying connected to the frontlines as we move forward is vital. This is why I, along with Vice President Yvette Coffey and Secretary Treasurer Tony Moores, have committed to more frequent visits with branches. We know

the value of getting in your meeting rooms, seeing RNs and discussing the issues in person. RNU staff and I are currently closely working with areas including Happy Valley-Goose Bay, Burgeo, St. Anthony, and the Janeway to ensure employers are listening to the needs of RNs.

It's a big year and we are ready to make the most of it. In 2019, we will champion ourselves, lead the way and keep the pressure on for much-needed systemic change. We are asking government to be a partner in change. We know in the current economic environment there are limitations and hurdles—that's why we need strong policy and an evidence-based plan. We also know the difficulties you are facing in the



workplace each day and how frontline patient care pays the price—that's why we need government's prioritization. Government cannot keep relying on outdated staffing levels of RNs to work harder and pick up the pieces. They need to join us and determine smarter health care delivery.

This year, we will push to achieve what we can at the bargaining table, and if a little more is required from government, we'll see them on the campaign trail. We won't wait for them to knock on our doors. We will knock on theirs first and ask what they plan to do to help registered nurses do their important job in health care, and how that support will roll out.

It's time to make good on commitments.

In solidarity,

*Debbie*

Debbie Forward, RN  
PRESIDENT







## Message from the Executive Director

JOHN VIVIAN, QC



### **Negotiations: Where Things Stand**

As RNU proceeds with negotiations, I look forward to providing an update in the (hopefully near) future detailing a new collective agreement. In the meantime, a cross-country check-up is a great way to compare the bargaining challenges and opportunities facing our fellow nursing unions. Here are some of the latest bargaining updates from our counterparts across the country:

#### **British Columbia Nurses' Union**

**(BCNU):** BCNU members voted to ratify a new provincial collective agreement covering 2019-2022 in January, 2019. The new agreement contains many improvements, including new professional practices language that is less confrontational and puts greater emphasis on professional partnerships. Changes to casual language are designed to address the issues of lack of relief for permanent staff. The employer will now have the right to schedule casuels for up to 200 hours in peak vacation periods. Casuels who are prepared to work 500 hours annually during peak periods or 975 hours annually overall will be entitled to benefits. Permanent employees who change to casual status will for the first time be able to retain their seniority as well as have their benefit banks available to them should they return to regular status later in their careers.

The agreement included salary increases of 2% on April 1st of 2019, 2020 and 2021. Other improvements in compensation included "End of Shift" compensation for giving report, an employer contribution of \$215 annually towards professional fees starting in 2020, a premium of \$2.00/hour when a nurse accepts a straight time shift with less than 24 hours' notice as well as a new Working Short Premium. This premium would obligate the employer to pay an additional \$3.00 to \$5.00 per hour depending on the size of the unit when a nurse has to work short.

#### **United Nurses of Alberta (UNA):**

UNA remains in negotiations for more than 20 long term care employers who are proposing extending the existing agreement while rejecting gains made by the union in their current three year 2017-2020 provincial collective agreement. The provincial agreement itself expires March 31, 2020 and it includes a no lay-off clause, the introduction of an Independent Assessment Committee as part of their professional practices language, as well as a 2-year wage freeze with a wage reopener February 15, 2019. The employer has proposed a zero percent increase for other unions with similar reopeners and it is expected the wage dispute for the third year will be resolved through arbitration.

#### **Saskatchewan Union of Nurses**

**(SUN):** The announcement of a 3.5% wage rollback target for all public-sector workers along with a nominal 0.7% health spending increase by employers, that failed to keep pace with current patient needs, and a then projected inflation rate of greater than 2%, left many SUN members extremely concerned about the future.

Although SUN has been in bargaining since September they did not receive the employer's full package of proposals until January 9, 2019. SUN advises us that the package represents a full-on attack on their collective agreement including hours of work and scheduling. SUN has a long rough road of bargaining ahead.

#### **Manitoba Nurses Union (MNU):**

Most contracts for members of the Manitoba Nurses Union expired in March of 2017. Although the union gave notice to commence bargaining in December of 2016 and finalized their opening package the following month, the employer has not proposed dates to begin bargaining. What the government has done is introduce two pieces of legislation that will have significant impact on collective bargaining.

Bill 29 will force the MNU to participate in "runoff" votes with other unions to determine which union(s) will represent nurses in the

province. Bill 28 will remove the ability of MNU to bring any proposal to the bargaining table that has a cost implication for employers. MNU has joined other public sector unions in mounting a court challenge to the legality of Bill 28.

**Ontario Nurses Union (ONA):** ONA is in the middle of a 2-year collective agreement covering the period of April 1st, 2018 to March 31st, 2018. The agreement was imposed by binding arbitration and it provided for salary increases of 1.4% on April 1st of 2018 and 1.75% on April 1st of 2019. ONA was not satisfied with the arbitration award and will be attempting to address this issue when they enter negotiations for a central agreement for their nursing homes this spring.

**New Brunswick Nurses Union (NBNU):** The New Brunswick Nurses Union negotiates three collective agreements in the province. One for Hospitals/Community Health, another for Nursing Home Groups, and a third for Nurse Managers and Nurse Supervisors. New Brunswick permits nurse managers to unionize. All three collective agreements expired on December 31, 2018. For the first time NBNU will be negotiating all three contracts simultaneously as the issues and priorities for all three groups are very similar.

#### **Nova Scotia Nurses Union (NSNU):**

In March of 2015 the Nova Scotia government, with the consent of unions, legislated health care unions to bargain at one table. Four councils of unions were established to bargain on behalf of each bargaining unit —nursing, health care, support and administrative professionals. This agreement was meant to streamline the number of bargaining processes from 50 to four. Having one union leading negotiations for each of the four bargaining units (NSNU led the nursing negotiations) was to ensure clarity for employers during the negotiation process.

This unprecedented round of bargaining included nurse representatives from across the province, from four different health care unions, NSNU, NSGEU, CUPE, and Unifor, together at one table. Council representatives had the arduous task of combining almost two dozen collective agreements into one each for the NSHA and the IWK.

The monetary benefits found in the December 2018 arbitrated agreement included 0% increases for 2014 and 2015 followed by increments totalling 7% spread between November 1st, 2016 and October 31st, 2020. The new contract covers the six year period November 1st, 2014 to October 31st, 2020.

#### **Prince Edward Island Nurses' Union (PEINU):**

PEINU commenced negotiations in October of 2018 and presented its monetary proposals to government in late January of 2019. Negotiations are ongoing with additional dates set through the end of March.



**RN Appreciation Night**  
hosted by the St. John's Edge  
March 23, 2019



# #WearWhiteWednesday

Being visible is key to promoting and protecting the RN role. Members continue to adopt the RN identity with their uniform colours, RN pin, and RN scrub hats. In fact, 80% of members believe RNU should keep encouraging members to wear white and stand out.

That is why RNU started a weekly **#WearWhiteWednesday!** It's important to be visible every day, however, on Wednesdays we'll share your pictures on social media as a way to promote the RN identity with our members and the public.

Email your photos to [info@rnunl.ca](mailto:info@rnunl.ca). We'll share your photos on our Facebook and Twitter and enter your name for a monthly draw for a \$25 gift card from The Uniform Shop.







## Our Winners!



January - Sherri-Lynn Mulrooney, Health Sciences Centre



February - Caitlyn MacKinnon, Sir Thomas Roddick Hospital



# Professional Practice Success Story

## Branch 5's Recipe for Success

As Professional Practice Committees continue to find solid footing, gain momentum and hit their stride in regional health authorities across the province, we continue to highlight stories where these committees are creating positive change in the workplace.

At RNU's Biennial Convention in November 2018, RNU President Debbie Forward recognized the good work completed by the Professional Practice Committee (PPC) from St. Clare's during her opening remarks. The RNs of the endoscopy unit, as well as the RNs serving on the PPC were praised for their diligent documentation, tracking, and commitment to the process.

Cindy Mackey, President of Branch 5 and member of the St. Clare's PPC, described how their success came to be.

### Emerging Workload Issues

"Back in 2018, our committee was receiving a lot of PPC forms from RNs working on the endoscopy unit," said Mackey. "The forms touched on issues like workload, stay-lates, too many procedures for allotted time, very high patient acuity, limited training for new staff on new procedures (no educator specifically for endoscopy), and unsafe working conditions due to increased number of procedures, with same number of staff."

The PPC process outlines that each PPC form filled out by a RN is to

be addressed by the RN's manager, with a response going back to the individual RN who filled it out. From there, the PPC committee can follow up on the documented issue. However, the process was going astray for the RNs of the endoscopy unit. A delayed managerial response, followed by an attempt to bulk respond, was holding the PPC process up.

"We followed up on PPC form response progress by approaching and prompting the manager, who then gave an overview of answers for all of their PPC forms together," said Mackey. "In order for the process to work right, we need every form sent in to be individually addressed with individual responses going back to the RN."

As a result, the PPC was not making any headway in their efforts to address the issues RNs were experiencing in the endoscopy unit. As suggested in RNU's Professional Practices Toolkit, Mackey reached out to the RNU Labour Relations Officer for St. Clare's, Violet Browne, for support and guidance.

### Asking for Support

The next step for the PPC was to organize a meeting, inviting Browne and the manager of the endoscopy unit to sit with the members of the committee and discuss the issues brought forward on the professional practice forms.

"By setting up the meeting and bringing it to a higher level with additional

participants from Eastern Health and RNU, we were able to have a productive discussion that addressed the concerns laid out in submitted PPC forms," said Mackey.

The special PPC meeting resulted in the endoscopy unit getting an extra staff person, which pleased registered nurses on the unit. The addition of a Licenced Practical Nurse to the endoscopy unit in April 2018 helped alleviate some of the pressure RNs were feeling. This accomplishment was a direct result of these registered nurses filling out and following up on their PPC forms.

While workplace conditions had improved, RNs on the unit still feel more can be done to ensure patient safety.

"The registered nurses on the unit are still filling out forms," said Mackey. "They are still running into some of the same issues because ultimately we still have the same RN staffing levels on the unit from 20 years ago. These levels haven't increased despite the increased acuity or the complexity of procedures that are now being done."

But despite ongoing form submission, Mackey feels there is a silver lining in the situation, which is a well-run committee and the RNs' strengthened resolve to keep working the process. RNs are still committed to documenting and building the evidence needed for change. They have seen the process yield a possible solution before,



and feel with persistence they can get it right.

### What is Making PPC Work?

Mackey speaks of the importance of focusing on shared principles and common ground between employer and RNU representatives on the committee.

"Everyone wants the workplace to be safe and we are here to work together to solve the issues," said Mackey.

"Regardless of who is there from the employer, they take it quite seriously and we're all there for the benefit of the patients and the staff. The goal is to work together, not against each other, to solve the problems. Being on the same page makes things run more smoothly."

While the St. Clare's PPC has seen member changes due to factors such

as retirements, the norms and overall committee framework keep it working productively.

"We have a new manager who is co-chair and we have a new director sitting in because the former director retired," said Mackey. "Even some of our own RNU PPC members have changed because they moved locations or retired. It's almost a new committee—but it continues to work well."

The PPC aims to meet regularly once a month and maintains open lines of communication in the event that ongoing discussion is needed.

"Because we have built a good rapport with employer members of the committee, I can contact them outside of the meetings if I feel I have to," said Mackey. "Building a good rapport for me

is about being upfront and making sure everyone is on the same page."

When asked what advice she would give to RNU members looking to make an impact through their PPC, Mackey said commitment to documentation, filling out forms and following up is key.

"Fill them out, fill them out, fill them out. It might take time, but things do get resolved eventually. It might not be exactly what you want, but sometimes it's the best the employer can give to help solve the problem at the time. Sometimes it's a good first step in the right direction in an ongoing effort to ensure quality patient care."



### Home for Dinner Program

As part of Ronald McDonald House's Home for Dinner Program, RNU staff donated ingredients and prepped a meal for families staying at the house on January 30, 2019.



# There's an App for That!

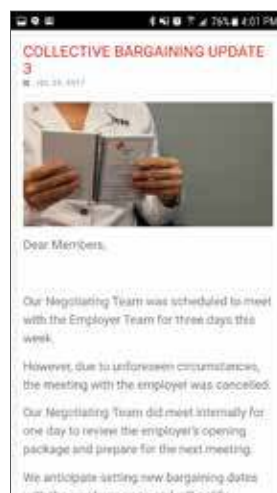
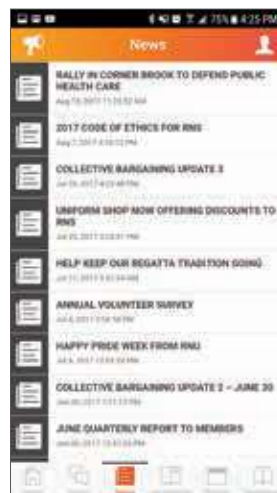
Stay Connected. Download the *myRNU* App.

You can now access all the great features of the *myRNU* website on your phone.

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- View your Collective Agreement
- Get breaking news updates
- Use the planner to stay organized
- Access valuable resources



If you already have a *myRNU* account, simply go to the App Store or Google Play and download the *myRNU* app. To sign up for a *myRNU* account, visit [rnunl.ca](http://rnunl.ca). The member verification process may take a day or two.



# Options RN style. (ARE IN)

Let's make **white & black**  
not so black & white.

We encourage you to wear the RN white & black your way. Keep our look by pulling on a professional lab coat or a comfortable warm up coat. From casual scrubs in a wide variety of styles to a modern looking polo, you can find the style that suits you best.



Registered Nurses are now identifiable in our health care system. No longer are we being lost in a sea of scrubs where everyone looks alike. Retailers offer white tops that come in fabrics that are stain resistant and easy to clean. The black pants are comfortable and come in styles that offer great versatility – wear them as scrubs or as casual clothing.



## Why wear white & black?

- 70% of RNU members are wearing the RN uniform and standing out for their patients.
- We are putting our RN value on display and helping to eliminate confusion for our patients by standing out as a profession.
- The blur of a busy hospital becomes a little clearer when the white & black uniforms are visible.

**Making white & black work for you. It's not one size fits all.**



If you are permitted to wear cloth hats, this RN scrub hat (available at The Uniform Shop) will make you visible in hospital greens.

A lab coat is another great way to show your RN pride and incorporate your white & black if you wear business casual or street clothes to work. Your personal style can still shine through.



## 20% discount



Mark's

RNU members get a 20% discount for Keltic Clothing or Mark's. Shop Keltic Clothing at [www.kelticclothing.ca](http://www.kelticclothing.ca). Enter discount code: RNU 10. Or download and print the Mark's discount voucher on myRNU.

## Save up to 15% The UNIFORM shop+

RNU members receive 10% off any regular priced item, or 15% off three items or more. Visit <http://uniformshopplus.com> or drop by their location at 320 Torbay Road today!





## Education Corner

### A Haze of Uncertainty Surrounds Cannabis in the Workplace

Among the many public sentiments that accompanied the recent legalization of recreational cannabis in Canada was uncertainty by many workers about the implications in their workplaces.

Workplace policies and procedures on impairment, accommodation, occupational health and safety and training, among other areas, will need to be reconsidered in light of the new legal terrain.

For better or worse, federal labour laws, which apply to federally regulated workplaces, provided no guiding light in this process, receiving no changes as a result of legalization. Unsurprisingly, workplace policies have been, to date, wildly inconsistent. The policy released by the Department of National Defence, for example, prohibits the military from using cannabis within eight hours of duty, and 24 hours for those handling weapons or who conduct firefighting or medical response. Meanwhile, RCMP officers in so-called “safety-sensitive” roles must abstain from non-medicinal cannabis use a full 28 days before reporting to work.

For health care workplaces, the issues get even messier as policies must navigate the potential for patient and employee use of medical and/or recreational cannabis. In such a confusing haze (so to speak), how



can workplaces strike a fair balance between the interests of public safety and the rights of employees?

The Canadian Federation of Nurses Unions (CFNU) has developed some guiding recommendations with regard to medical and recreational cannabis that were released to coincide with legalization.

In general, the CFNU supports a public health approach to cannabis and recommends that nurses “be provided with sufficient resources and training

to acquire the necessary knowledge, skills and judgment to assist with the administration of medical cannabis, and to educate and respond to the public with respect to the health implications of recreational cannabis.”

Where nurses may be exposed to cannabis in their workplaces, they must have “appropriate training and have access to recommended personal protective equipment (PPE).” Furthermore, “the risk of exposure to smoked cannabis must be included in safety policies, which need to provide

for a non-consumption period prior to nurses entering a patient's residence or resident's room."

Regarding potential cannabis use by employees, nurses unions are strongly opposed to random drug testing, a position that is generally supported by existing case law on the subject. The CFNU recommends that employees who use medical cannabis should be

accommodated in a way that mirrors existing practices for an employee taking prescribed medications "that have the potential to impact or impair their work."

While more clarity, and contention, will no doubt emerge in the months following legalization, in the interim the CFNU is encouraging health care workers faced with improper

training, lack of access to PPE, unsafe working conditions or whose right to accommodation is not respected, to contact their union.

For more information on these recommendations, visit [nursesunions.ca](http://nursesunions.ca)

Other Online Resources:  
Your Cannabis Questions Answered (NL Government)  
[gov.nl.ca/cannabis/](http://gov.nl.ca/cannabis/)

Cannabis in Canada – Get the Facts (Government of Canada)  
[canada.ca/en/services/health/campaigns/cannabis.html](http://canada.ca/en/services/health/campaigns/cannabis.html)

Cannabis NL (Newfoundland Labrador Liquor Corporation)  
[shopcannabisnl.com](http://shopcannabisnl.com)



CANADIAN  
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OF NURSES  
UNIONS

WHERE KNOWLEDGE  
MEETS KNOW-HOW

# International Solidarity Fund



YOU CAN MAKE A DIFFERENCE

Are you going abroad to provide humanitarian assistance? You could be eligible for a travel subsidy from CFNU. Apply online at: [www.nursesunions.ca](http://www.nursesunions.ca)



**Application deadline is December 31, for travel the following year.**



# Provincial Government Announces Presumptive Coverage for PTSD for all Workers

The provincial government announced amendments to the Workplace Health, Safety and Compensation Act to provide presumptive coverage for work-related post-traumatic stress disorder (PTSD) for all workers on December 4.

This is a great achievement for workers and unions who have advocated long and hard to make this a reality. RNU submitted a proposal as part of the workplace mental health review in 2018.

"RNs are constantly exposed to life and death situations and are witness to various other complex patient scenarios," said RNU

President Debbie Forward. "This puts them at risk to develop work-related mental health symptoms, including PTSD. Presumptive coverage will bring much needed support for RNs and workers in our province."

Amendments to the Workplace Health, Safety and Compensation Act will come into effect as of July 1, 2019, and mean that a worker who experiences a traumatic event or multiple events at work will be presumed to have developed their diagnosed PTSD as a result of their work.

The diagnosis must be made by a psychiatrist or registered psychologist using the most recent edition of the

Diagnostic and Statistical Manual of Mental Disorders.

This legislation would simplify the claim process and allow the workers' compensation system to help injured workers receive the assistance they need earlier.

This will lead to better outcomes in improving the worker's overall health and well-being as well as options for returning to work when appropriate.

Government also committed to review legislation in July 2020 to look at coverage of other psychological injuries.



Workers, unions, and government officials celebrate the announcement of presumptive PTSD coverage.



# 26th Biennial Convention Highlights

## Taking Care. Giving Care.

From November 5-9, approximately 230 registered nurses and nursing students from across the province gathered in St. John's for the 26th Biennial Convention.

The convention theme "Taking Care. Giving Care." highlighted the importance of taking care of both patients and registered nurses. To give patients the care they need and deserve, RNs need healthier and safer workplaces.

It was a productive convention that included a Q&A session with the health minister and a rally for More Full-Time RNs Can Save A Lot. Issues addressed included psychological health and well-being, diversity and inclusion, scope of practice, and cannabis. The closing speaker was Big Daddy Tazz, a comedian and mental health advocate. For the first time, a number of the convention sessions were available to all members via Facebook Live.

To kick off the week, delegates heard an inspiring address from RNUNL President Debbie Forward. Your president sent a strong message:

"I have set two personal priorities for the next 12 months. First, I want to stand up to my members and announce that we have a collective agreement that will improve RN workload going forward. There has to be something in our collective agreement that will make a difference in terms of the workplace and workloads that every single RN in our province is experiencing. Second, I

want to make sure that RNU and our members do everything in our power to make sure that healthcare is a priority in our next provincial election... we must stand up for our patients, ourselves and each other."

Watch the full address on RNU's YouTube channel:

[www.youtube.com/user/rnunl](http://www.youtube.com/user/rnunl)

### Panel on Psychological Health & Well-Being

One of the most memorable parts of convention was the panel discussions. During a panel on psychological health and well-being, RN Maureen Brennan shared her experience with PTSD. She spoke about the impact of her diagnosis on her life and her path to create the RNSG Support Group. NP

Lori Chaffey told a heart-wrenching story of witnessing domestic violence in the workplace. It was an impactful, moving and emotional session that explored the importance of psychological health and well-being for registered nurses.

### Panels on Diversity & Inclusion

A panel of RNU members took part in a panel discussion on diversity and inclusion within our union and our profession. RNU represents many diverse groups including members of Indigenous descent, members with disabilities, racialized members and members of the LGBTQ community. Like society in general, our members also experience discrimination and marginalization within their workplace. Registered nurses Lesley Hynes,





## 26th Biennial Convention Highlights

### Taking Care. Giving Care. (continued)

Sarah Downey, Kimfa Wright and NP Ada Roberts shared their stories and reflected on how we can ensure mutual respect and rights for all RNU members.

Following the member panel, Journalist David Maher moderated a panel discussion with patients. LGBTQ+ activist Gemma Hickey, mental health advocate Mark Gruchy, Nancy Reid with the Coalition of Persons with Disabilities NL, and Mohammad Al Maksour from Association for New Canadians spoke about their experience with the health care system. The discussion was powerful and insightful and will inform RNU's work on the issue of inclusion and diversity.

Videos of the panel discussion are available on the RNU Facebook Page.

#### More Full-Time RNs Can Save A Lot Rally

On Wednesday, RNs rallied outside the Sheraton Hotel next to a monument for Ethel Dickinson. Ethel Dickinson was a volunteer nurse who tended to wounded Newfoundland soldiers during WWI. She gave her life treating victims of the 1918 Spanish flu. Like Ethel, RNs continue to put our patients first. The rally was a chance to stand up for safe staffing and patient care.

#### Resolutions

Resolutions set the direction of the work being planned by your union. Ten resolutions were passed at convention:

- **Increase to Defense Fund** – The Defense Fund cap for negotiations was increased to \$400,000/round of



provincial bargaining.

- **Union Dues** – Provincial dues have increased by 0.1%. This means dues will increase by \$3.00 per pay period.
- **Domestic Violence** – RNU will lobby and negotiate for a paid leave of absence for use by health care workers who are victims of domestic violence.
- **Pharmacare** – RNU will continue lobby efforts for a national public prescription drug program.
- **Mental Health** – RNU will lobby government to provide stronger mental health and addictions strategies to improve access to quality community mental health and addiction services within NL.
- **Clarity Project** – RNU will continue to educate employers and government on the unique value registered nurses bring to health care.
- **Diversity & Inclusion** – RNU will place an equity lens on all activities of the union.
- **Violence in the Workplace** – RNU will continue to lobby for a provincial

task force, bringing together government, employer, unions and other stakeholders to address violence in health care.

- **Long-term Care** – RNU will call upon government to increase the funded hours of care per resident, per day, in long-term care to a minimum of four hours of care for all residents.
- **Nurse Practitioners** – RNU will lobby government to implement payment models to support NP-led clinics under our public system.

Plans are now being developed to guide work on the resolutions.

#### CFNU Update

Canadian Federation of Nurses Unions President Linda Silas provided an update on issues facing nurses across Canada. She gave an update on advocacy efforts including work on Pharmacare, utilization of nurse practitioners, safer workplaces, and the petition to end violence in the workplace. As always, Linda invigorated and inspired delegates.

### Closing Speaker

We ended the week on a high note with Big Daddy Tazz. Big Daddy Tazz is equal parts motivational speaker and comedian. He opened up about his struggles with mental health and his journey through recovery. He brought laughs, tears and an infectious energy. It was the perfect way to close the convention.

### Ovation Awards

The Ovation Awards provide RNU and its members with the opportunity to recognize exceptional leadership and advocacy in registered nursing and dedication to nursing unionism.

The 2017 Ovation Award recipient was Lorna Oldford, Branch 38. Lorna has dedicated a significant part of her life to registered nursing and her union. She entered the workforce in 1979. And has been inspiring fellow registered nurses ever since. Lorna has been quite involved with RNU through her nearly 4 decades of service. She



has held the positions of branch secretary, shop steward, branch president and most recently branch-treasurer.

Lorna has proven her dedication to RNU and RNs over and over again.

Her commitment to standing up for RNs' rights has been unwavering and only grows with time. She has been a member of the Professional Practice Committee, a strong ambassador for the clarity project and helped make schedules for the strike in 1990.

She is a leader in her branch. She helps to mentor, guide and educate nursing students to be successful registered nurses and spirited activists.

Lorna's benevolent character was what made her stand out to her nominator and colleagues.

### The Fun!

Convention was also plenty of fun with our Carnival Night Welcome Reception, A Costume Fun Night hosted by Branches 16, 28 and 29, as well as our Dinner & Dance.

**Looking forward to seeing new and familiar faces at the 27th Biennial Convention in 2020!**







26th Biennial Convention (continued)





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and exclusive offers on  
home and car insurance  
through Johnson.**

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# Understanding Your Contract

## Article 16 – Vacation

BY VIOLET BROWNE, LABOUR RELATIONS OFFICER

### 16.03 Vacation Period

All employees shall receive their annual vacation between May 1 and October 31, both dates inclusive. An employee shall be entitled to request annual vacation other than between May 1 and October 31, which request shall not be unreasonably denied. The Employer shall post the vacation schedule by May 1 of each year.

### 16.04 Selection of Vacation Dates

Employees in each nursing unit, in consultation with their supervisor, shall determine the method of selecting vacation dates. In the event that majority agreement cannot be reached, preference in vacations shall be regulated according to a rotation plan. The initial placing of employees in the rotation plan will be in accordance with seniority, thereafter, the rotation will proceed without regard to seniority.

### 16.05 Choice of Vacations

Employees shall be granted a choice of vacation in accordance with 16.03 and 16.04 provided that once the schedules have been posted they shall not be changed except by mutual consent between the employee and the Employer. Vacations shall be given consecutively except by mutual consent between the employee and the Employer. Vacation for the purposes of this Article shall include all current, accumulated and accrued annual leave. Employees shall not be compelled to take more annual leave than they request.

### COLLECTIVE AGREEMENT EXPLANATION

Article 16.03 indicates that registered nurses are entitled to access their annual leave between May 1 and October 31. However, registered nurses may request annual leave outside of these dates if desired. The employer may not unreasonably deny this request.

In recent years, various employers have placed restrictions on the amount of annual leave granted to individual employees during “peak” summer periods, when the majority of requests are made. The peak period is normally defined as July and August, but may extend into September in some cases,

depending on the anticipated leave requests in a specific area.

While this practice can lead to some confusion, and raises concerns for our members, RNU monitors each situation. In some instances, the employer's practice or policy clearly violates the collective agreement, in which case we will file a grievance. Most often, however, there is no apparent violation of the collective agreement based on the written policy, but the potential exists that violations may occur when the practice or policy is applied. In these cases, RNU will initiate the early intervention process. For example, an employer may develop a policy that places a three week “cap” on access to annual

leave during the peak period of July-August. However, if the employer is willing to consider further requests outside the peak period but within the collective agreement language time frame (in this instance, May-June and September-October), then the policy does not violate the collective agreement, and RNU would not file a grievance on the policy itself. We would reserve the right to grieve if its implementation resulted in a violation.

Article 16.03 also requires that all employers post the vacation schedule by May 1 of each year. This is relatively new language that was agreed upon during the last round of negotiations. While posting the full vacation



schedule by May 1 was the practice in many areas, the collective agreement did not require such until 2014, and until then, RNU could not enforce the practice provincially.

Article 16.04 stipulates that registered nurses shall determine the method of selecting their vacation dates in consultation with their supervisor. As such, there are potentially many different approaches that can be used to decide how annual leave is awarded, but it is common practice that the members initially take a vote on the preferred method of choice and proceed yearly based on that vote.

If majority agreement cannot be reached, vacation is awarded annually according to a rotation plan, with the initial placement in the rotation being based on seniority and, thereafter, the rotation will proceed without regard to seniority.

In essence, awarding vacation according to a rotation plan is the default approach as per collective agreement language, and is the most widely used method of awarding annual leave.

Article 16.05 provides that once annual leave has been approved, it cannot be changed except by mutual consent. This means that neither the employer nor the registered nurse can unilaterally cancel annual leave that has been approved by the employer. As well, the employer cannot require that a registered nurse take more annual leave than she/he requests, as per the collective agreement.

If the employer cancels annual leave that is approved, RNU strongly suggests that members consult with their local branch executive and/or LRO at RNU Provincial Office for further discussion and assistance.

*The information is provided for internal RNU education purposes only. It does not represent the official position of RNU and is strictly "without prejudice" to any formal position whatsoever that RNU may choose to take in proceedings, legal matters, negotiations, or otherwise.*

You can look up interpretations of collective agreement language using the *myRNU* app. Simply go to "Resources" and click "Collective Agreement Interpretations." Or check out the "Agreement" section on *myRNU*. When you click on Article, scroll down to see if an interpretation of the contract language has been provided.





# Registered Nurse Spotlight

## Sarah Downey, RN

Sarah Downey graduated from nursing school in 2007. She knew she wanted to be a registered nurse, to help people. But she has helped more than just patients as she has played a role in bringing attention to mental illness in the workplace, encouraging fellow RNs and employers to understand the importance of support and acceptance.

Sarah joined the armed forces as a nursing officer after graduation. This was an extremely demanding but fulfilling career where she honed her nursing skills. In 2012, Sarah was released from the forces and moved to Stephenville, NL where she currently resides with her two children and works at the local hospital.

### **When did you start to notice that you had issues with mental health?**

As a single mother, I always felt pulled in many directions. Adding to that, I enrolled in a Nurse Practitioner program, from which I'll graduate in 2020. So, not only was I a mother and a registered nurse, but now a student. The demands were endless. But I was up for the challenge.

In 2014, I noticed a change. I was feeling more exhausted than usual and beginning to believe I was unable to meet any of the challenges that lay before me. The feeling of "not good enough" became overwhelming and affected my ability to work and parent.

In denial that there was a mental health issue and struggling in silence, I forged ahead as best I could. I began missing work and became increasingly critical of myself.

Finally, I sought help.

### **When were you officially diagnosed?**

After tests and treatment, I was officially diagnosed in 2016 as bipolar. Once I accepted the diagnosis and began proper treatment everything changed. I began to feel like myself



again. I could do my job again and could ask for support from colleagues and my employer.

### **What do you want people to understand about mental health issues in the workplace?**

I want to urge fellow RNs who live with mental health issues to seek support. Suffering in silence is not the right thing to do. Now that I've begun asking for help, I have a support system in place and feel confident at work again. I know I have help when I need it and I accept myself and my mental health.

There can be a stigma around missing work. Many assume there is an abuse of sick leave taking place, rather than having an open mind to consider an RN is likely struggling in some way. So, I would like to urge employers to speak to their employees and ask if everything is ok. Some may not be ready to disclose everything, but many will let you know that they are struggling.

**How are you feeling these days?**

Things are very different for me now, compared to where I was in 2014. I understand what bipolar disorder is and how I need to treat it. I am caring for myself and my mental health, which is critical to my overall wellbeing.

I have also created a strong support system, where I feel safe and comfortable asking for help when I need it.

Now my focus is on educating people about mental wellness and how important self-care is. As RNs our job is stressful. We have the lives of patients in our hands every day, and if we aren't taking care of ourselves how can we effectively care for others? That's my message.

## Welcoming Randy, Our Newest LRO



The Registered Nurses Union is excited to formally welcome Randy Clarke, our newest Labour Relations Officer (LRO). Randy began working with RNU in June 2018. He is the LRO for Branch 2 and 5 and Region 1 (Branch 14, 15) and Region 2 (Branch 13, 18, 26, 50, 51).

Randy comes to us following 10 years of employment with Eastern Health. While working with the regional health authority, Randy grew interested in the lives of healthcare workers and their unique work environments.

Throughout his career, Randy has searched for a position in which he can make a difference and advocate for workers, rather than a corporation. Randy found that job at RNU. "This, honestly, is my dream job," Randy explains.

As an LRO, he aspires to be a resource and offer services that RNs can rely on. "Working in this position gives me the opportunity to work directly with members, to learn their stories and see what options and resources there are to help them."

In his pursuit to learn more and be an effective LRO, Randy was eager to participate in our recent convention.

"Having the opportunity to participate as a Labour Relations Officer at the Biennial RNU Convention filled me with a source of pride as an employee of the RNU," he says. "Convention really brings people together and gives us an opportunity to get to know each other on a real level—to talk, to laugh and to sometimes even share a story and perhaps a few tears along the way. It is gatherings like this that I feel unite us and really invigorate us as a membership and staff."

Randy prides himself on upholding union values and bettering the lives of RNU members. He has several months under his belt as an LRO now and is eager and optimistic for the future. He is excited to continue learning and seeing the many ways he can help RNs on their journey to better and safer workplaces.



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**Registered Nurses' Union**  
Newfoundland & Labrador