

WINTER 2020

In Touch

REGISTERED NURSES' UNION NEWFOUNDLAND & LABRADOR

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Message from the President

DEBBIE FORWARD, RN



It's hard to believe we are now into a new decade! I hope you had a great holiday season and a Happy New Year. This year, RNUNL has set just one New Year's resolution — to pressure government and employers to improve workplace conditions for our over 5,300 members.

We recognize that significant work is required to address the mounting concerns in the workplace around staffing, overtime, violence, sick leave, vacancies and vacation time. I want to share the ongoing efforts of your union over the last number of months, as well as where we intend to go from here.

Violence Forum

By the time you read this newsletter, the violence forum will have already taken place on January 16. This forum was negotiated in our recent collective agreement as a way to address the growing incidents of workplace violence being reported by our members and within the nursing profession. This fall, we worked with the Provincial Government and regional health authorities to create an event that would be both informative and productive. Our hope is that this forum ignites the conversations and actions necessary to better protect frontline workers and reduce incidents of workplace violence.

Branch Visits

This past fall, your executive team visited 16 branches throughout Eastern Health, Western Health and Labrador-Grenfell Health, bringing the total number of visits in the past year to 24. We will visit the 20 remaining branches before July 31, 2020, with a priority given to sites in Central Health as we have yet to visit that region.

These visits provide your leadership with an opportunity to meet with members face-to-face and listen to their concerns and challenges. There is no doubt that common themes of critical issues are weaved throughout all of our branches —



RNUNL President Debbie Forward meets with members of Branch 16 in Placentia on October 16, 2019.

mainly related to staffing and workload. These issues are systemic, which can make them more challenging to address. But we are up to this challenge.

What we have heard through these visits is alarming. Vacancies, burnout, overtime, scheduling issues, inability to secure leave, high sick leave and the list goes on. There are many contributing factors. One area of concern I would like to focus on are vacancies. We are living through a national nursing shortage, however the factors creating this situation appear to be different than we have faced before.

There is an evident shift in the workforce: an inability to recruit casual employees/new grads into full-time positions. We know through consultation and preliminary surveys that one significant reason for this shift is due to workplace conditions. Casual staff, especially new grads, are not willing to accept a position that will

deteriorate their quality of life due to an inability to secure leave, mandated overtime, high workload, working alone and other stressors. We need to know more about this trend so we can address it and improve recruitment and retention of registered nurses.

Meeting with the Minister — 24-Hour Shifts

Armed with the information collected during branch visits and knowledge of our members' growing workplace concerns, we met with the Minister of Health and Community Services on November 14, 2019.

The many issues identified by our members that are impacting workplace conditions were discussed.

At the meeting we told your stories and presented a number of recommendations. One of which called for immediate action to address 24-hour shifts. We told the Department

that guidelines to reduce 24-hour shifts (negotiated in our last collective agreement) must be agreed upon ASAP. These guidelines must include "teeth" if they are to be effective, such as the requirement for a report to the Minister when a shift greater than 16 hours is required to be worked. We told the Minister it was imperative that a strong message be sent to employers. Overtime resulting in shifts of 16 hours or more is not an acceptable solution to address staffing shortages.

We are pleased to report that immediate action was taken by the Department of Health and Community Services on this recommendation. Effective Monday, November 25, 2019, all 24-hour shifts must be reported to the deputy minister of the Department of Health and Community Services. Reports must be filed within 24 hours of the start of the shift and must identify all steps taken to avoid



RNUNL Secretary-Treasurer Tony Moores meets with members of Branch 36 in Bonavista on October 24, 2019.



Message from the President (continued)

the 24-hour shift. Employers have been provided a form for reporting incidents, which requires the employer to identify all steps taken to avoid the 24-hour shift. The Department's goal is to gather information that will assist them in developing appropriate solutions to address this issue and reduce instances of 24-hour shifts.

While we would have preferred the baseline for this reporting form to be 16+ hour shifts, this is a positive step and will send a message to employers that 24-hour shifts are never acceptable. We also believe it will motivate employers to exhaust all other options before turning to 24-hour shifts.

We do ask that members advise a branch executive or shop steward volunteer should they work a 24-hour shift. We will continue to monitor overtime and evaluate how this action impacts instances of 24-hour shifts.

We will continue to work towards the implementation of other recommendations put forward to the Department of Health and Community Services and will keep our members updated as information becomes available.

Looking Forward

We hear our members' frustrations and are taking all steps necessary to relieve the pressures that are rising in the workplace. We are developing a long-term strategy to bring light to these issues and demand actions that will help improve the situation. It's time to move away from band aid fixes and work more strategically to find lasting solutions. This will not be easy, but we are committed to applying pressure to achieve progress.

Of course, we also have the core staff review on the horizon. I will be watching the roll out of this review

very closely to ensure government is diligently looking at the details and managing the project effectively. This is a positive step, and we are moving closer to having the information we need to create quality staffing solutions.

As we move forward, I encourage you all to keep an eye to myRNU and our social media accounts for updates. Of course, we encourage you to reach out and ask questions and/or raise concerns while we navigate the growing frustrations in the workplace. We can only do this together.

In solidarity,

Debbie Forward, RN
PRESIDENT



RNUNL Vice President Yvette Coffey meets with members of Branch 26 in Roddickton on November 26, 2019.

Stay Connected.

Download the *myRNU* App.

***myRNU* provides members with direct access to need-to-know information!**

Access your collective agreement, news, events, and more.



We are Improving *myRNU*

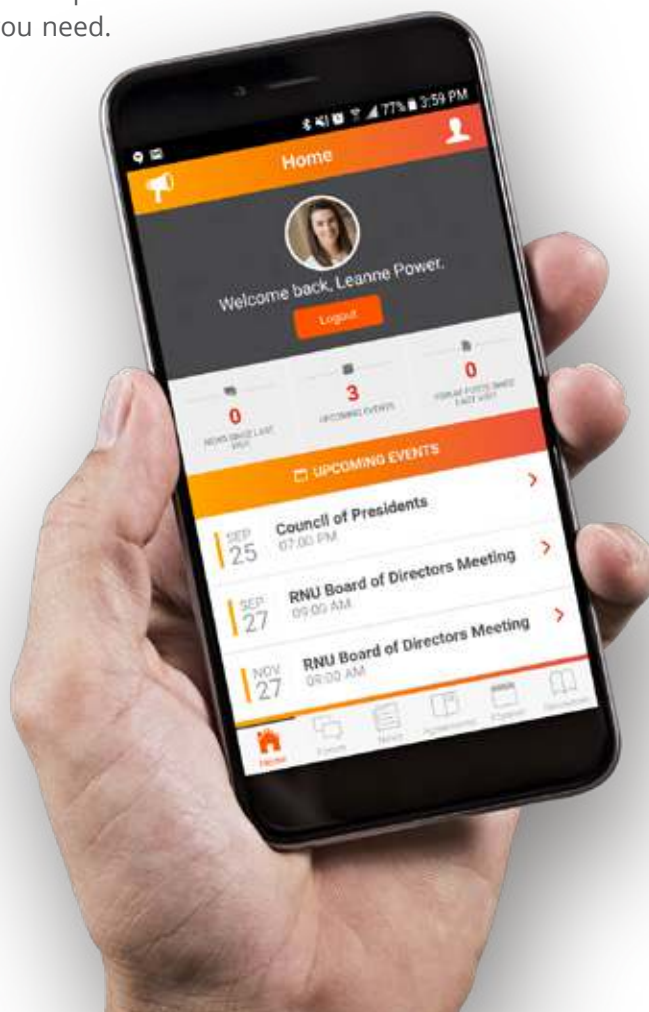
The *myRNU* website and app are being redeveloped to make it easier to find the information you need. Some highlights include:

An improved browsing experience for your collective agreement

Push notifications for the app

An RNUNL shop with your favourite swag and apparel

Improved search function, including a searchable forum and news section





Message from the Executive Director

JOHN VIVIAN, QC



We have been very busy since the signing of the collective agreement at the end of July 2019. Our team is working hard to educate members on language changes and keep members up to date on the impact of the agreement.

We will also be looking at opportunities to hold further shop steward sessions and branch executive training in the new year.

Volunteer Education

We were pleased to revise our materials for volunteer education to reflect new language changes in our collective agreement. We held our first series of education sessions last fall utilizing this new information, including Council of Presidents and shop steward education sessions for all regions.

JES

In our most recent collective agreement, Government committed to release the results of all RN Position Description Questionnaire (PDQ) reviews filed up to December 31, 2018 no later than August 31, 2019. Approximately 1,300 RNs were awaiting these results. Government met their commitment of releasing the reviews to employers, however the length of time it took for this information to reach our members varied from site to site.

By now, our members should be aware of their results. While many may be happy, we know others were certainly disappointed with the results. The only course of action is to file an appeal. We shared information to help members with the process in August. One item we have yet to confirm with government, despite repeated requests, is a timeline for the turnaround of appeals. We have been advised the Classification Appeal Adjudicator is diligently completing appeals in the order they were received. However, government is unable to provide a timeline for the completion of these appeals.

We know this does not bring much comfort to those who have filed appeals and understand your concerns and frustrations. We will continue to monitor the process and keep our members updated on any information we receive. Please feel free to reach out directly if you have further concerns.

For those who received an increase in their rate of pay through this process, we are pleased to report that adjustments have been made and retroactive payments distributed at both Central Health and Labrador-Grenfell Health. Eastern Health and Western Health are awaiting some clarifications from government before implementing new rates and moving forward with the retroactive payout. It is anticipated that payroll adjustments

will be made by the time you read this, and that retroactive payments will be distributed by March 2020.

Severance

Severance has been a hot topic since the signing of the agreement. By now, members with 15 years of service or greater have received their payout. The remainder of members will receive their payout in March 2020. We know there was frustration around the proposed timelines and two payout dates. While having two separate dates is not ideal, it was the best option we could negotiate.

General questions can also be asked in our forum on our member-only website, myRNU.

We do appreciate that calculating service is a complicated and lengthy process that requires significant resources by employers, and as such, payouts could not be accomplished in a timelier manner. The release of JES results further complicates this process and we ask that members review their payout information carefully to ensure they are being paid at the correct rate. If you feel an error was made in your calculation of service and/or payout, we encourage you to talk to the employer and touch base with your RNUNL either through a branch volunteer or your LRO.

Bargaining Update

Our current collective agreement expires June 30, 2020. Much work is happening to implement the new language secured in the latest contract. We are also beginning preparations for the next round of bargaining. The board of directors began strategic discussions at the December board meeting. Those discussions will continue into the new year. We will keep members updated regarding bargaining preparations on myRNU.

Collective Agreement Education

We continue to keep members updated through myRNU and our RNUpdates on any news, including announcements related to collective agreement language. We are also in the process of updating the myRNU site to improve the collective agreement section and other areas of the site so that members can find the answers they need as efficiently as possible. This edition of In Touch will further support our communication and education efforts around the new collective agreement language for all of our members. Happy reading!



2019 Council of Presidents Meeting



Education Corner

Why Nurses Should Be Concerned About the Climate Crisis

It's time for nurses to take action on climate change.

This is the take-home message of a discussion paper exploring the impacts of climate change and Canadian health. The paper was authored by nursing researchers Dr. Wanda Martin and Lindsey Vold and released by the Canadian Federation of Nurses Unions this summer.

Climate change is on track to deliver dire and distinct challenges for everyone's health and wellbeing, particularly with Canada's aging population and a health care system already stretched thin.

So, how exactly will health care be affected?

In general terms, according to the World Health Organization, climate change will negatively impact the social and environmental determinants of health, including access to clean air, safe drinking water, sufficient food and secure shelter.

Some of the specific health impacts are expected to include higher rates of heatstroke and stress, increased allergens, exacerbated conditions for asthma sufferers, physical displacement, mental distress, cardiorespiratory distress, more respiratory ailments and widespread food insecurity.



(Left-right) Yvette Coffey, RNUNL Vice President; Kim Parsons, Board Member; and Debbie Forward, RNUNL President joins thousands of people at the first Fridays for Future Climate Strike on September 27, 2019.

With such grave impacts on the way, the need for swift action is imperative.

Globally, it is estimated that we only have 12 years to prevent a catastrophic rise in temperatures, according to the Intergovernmental Panel on Climate Change. Meanwhile, a report on Canada's changing climate released this year found that temperatures in our own country are rising more than two times faster than global averages, due to our large bodies of water and ice mass.

As children and young people lead a global movement for serious climate action to defend our future, how can nurses and health care workers act?

The report provides several recommendations that serve as a starting point.

Recommendations for nurses include: work with stakeholders for more sustainable workplaces; learn the science of climate change and help educate others; join the call for

meaningful government action; help plan for the emerging needs of patients resulting from climate change; be prepared for extreme weather events; and promote local healthy agriculture and food systems.

In 2020, look for information on how to get involved in new CFNU Green Teams, which aim to spark efforts to bring this issue to workplaces.

As the report notes, we all share the duty as health care workers, parents, community members and citizens to learn more about the coming challenges and do everything possible to mitigate the negative impacts of the coming crisis.

The full paper, titled *Climate Change and Health: It's time for nurses to act*, is available on the CFNU website nursesunions.ca/research.

Additional resources on this topic are available from the Canadian Association of Physicians for the Environment website cape.ca.



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



Understanding Your Contract

Implementing New Language

Your new Provincial Agreement was signed on July 30, 2019. Now what?

RNUNL's newest Provincial Collective Agreement has an unprecedented number of language changes. The agreement contains new language that aims to improve workload, staffing and work environments, as well as commitments to

maintain existing contract benefits. While some changes and actions require additional time for implementation, the majority of language came into effect on the day of signing.

To help break it down, here are highlights of language changes we believe will impact you the most.

Addressing Workload and Staffing

Core Staffing Review

RNUNL was thrilled to secure a commitment from the Provincial Government to conduct a core staffing review in select work areas. This will be the first review of core staff in over 18 years.

While not every unit or site in the province will be part of the review, much of the information collected will be comparable and offer valuable information to achieve safe staffing and reasonable workloads.

This review will be completed by an objective external consultant and provide us with an evidence-based approach to real and effective change. Many factors will be considered through the collection of data and analysis, leading to recommendations for change that will benefit RNs and our patients, residents and clients.

Naturally, a review of this scale will take time and resources. The Provincial Government has agreed to complete it by July 31, 2021.

33.02 Casual Guaranteed Hours

Under this contract, a new category of casual employment was created which guarantees the employee 600 hours of work a year. In return, employees commit to working a certain per cent of those hours during hard to fill shifts/periods. Here is what you need to know:

- A current casual employee has the option of accepting a position under this language. It will not be a requirement.
- If the employer does not meet the 600-hour guarantee, the employee will be paid the lost hours.
- The casual employee will indicate to the employer when they are available to work.
- A specified per cent of the 600 hours must be worked on either a night/evening shift, weekend and/or during summer.
- There are requirements to work a specified number of shifts over Christmas or New Year's. The casual employee will indicate their preference to the employer for consideration with scheduling.
- Casuals can still turn down a specific shift and have no obligation to work unless they previously committed to work a shift, with the exception

of Christmas and New Year's. If you turn down a shift, the hours are counted towards the 600-hour guarantee.

We believe this new casual status will support permanent RNs in terms of workload, working short staffed, receiving requested time off and reducing required overtime on weekends or nights. This is a new concept and the impact will not be immediate. The implementation of these positions has begun. If it is something that interests you please talk to your employer. We believe it is a step in the right direction but are committed to evaluating how effective this new casual status is over time.

2.01 (y) Definition of Temporary Employee

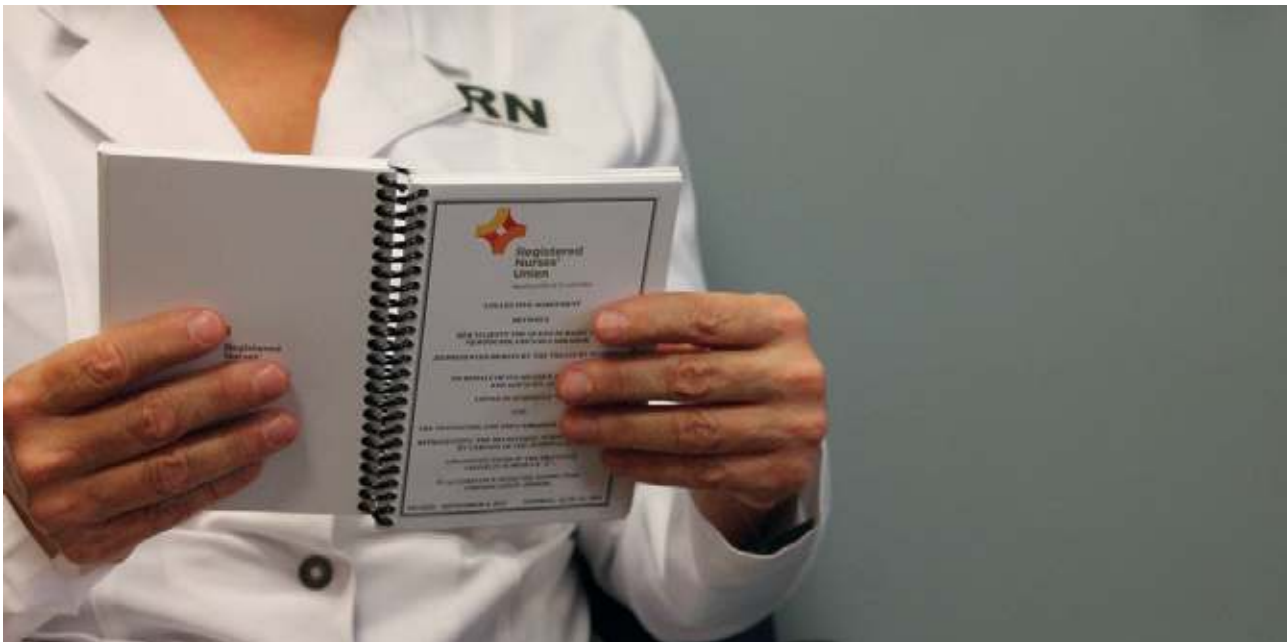
Under previous contract language, temporary employees could only be hired to replace absent permanent employees. We expanded this definition in the new contract to allow the creation of temporary positions to perform specific work, such as summer relief or time-limited projects.

All temporary positions of this nature must be greater than three months in duration and a minimum of half-time hours. This will ensure these members will be eligible to participate in the group insurance plan. Previously, transition language across the province required the posting of temporary vacancies exceeding anywhere from 12 weeks to six months. We have standardized the requirement at 20 weeks to create consistency for the entire province.

23.12 Temporary Employee Commitment

In an effort to limit turnover and provide stability, new language was added in the contract to limit movement between temporary positions only.

Employees accepting temporary positions will not be able to apply for other temporary positions until two months prior to the end date specified in their letter of appointment. The two-month restriction does not apply to opportunities for permanent positions, other temporary positions that provide for additional hours or higher rates of pay or temporary opportunities without a scheduled night shift.





Understanding Your Contract

Implementing New Language (continued)

Supporting Quality Work Environments

23.09 Portability of Seniority

We are pleased to introduce language into this contract that allows portability of seniority between employers covered by the collective agreement. Effective July 30, 2019, employees who resign their position with one employer can regain the seniority they left behind once they have obtained a permanent position and have completed their probationary period with the new employer.

19.07 Group Insurance While on Maternity/Adoption/Parental Leave

The new language reflects the extension of maternity, adoption and parental leave from 52 weeks to 78 weeks. Additionally, employers will pay their portion of group insurance premiums for the extended leave period, which is a cost savings to our members. Seniority, service for step progression and service for annual leave entitlement will also be based on 78 weeks.





33.08 (iv) Improvements to Seniority for Casual Employees

Under our new contract, casual employees who are off on maternity/adoption/parental leave or because of a workplace injury for which they are in receipt of Workers' Compensation benefits will continue to accumulate seniority. Previously this benefit was only available to our permanent and temporary members and we are thrilled to see this expansion in scope.

23.11 End of Temporary Employment: Retaining Benefits and Sick Leave

Under previous language, a temporary employee reverting to casual status was paid out for their unused annual leave, statutory holidays, overtime or compensatory time off. Any unused sick leave was lost. Under the new language, sick leave will be frozen for use the next time they obtain a temporary or permanent position. The employee can opt to have all other benefits paid out if they wish, or they can also retain them.

20.05 Improved Position Protection for Permanent Employees Awarded Temporary

Our new contract has identified specific parameters around when position protection is guaranteed for permanent employees awarded a temporary position:

- Employee has a minimum of two years of service in their current position;
- the temporary position has a higher rate of pay, or an increased number of bi-weekly hours, or no scheduled night shifts; and
- the temporary position is of a nine-month duration or greater.

In other instances, position protection may be granted by the employer. The new language also requires the employer to provide an explanation to any member who is denied position protection, if requested.



Understanding Your Contract

New Dispute Resolution and Grievance Process

Our new collective agreement has helped standardize the dispute resolution and grievance process across the province, providing a timely response to workplace issues in every regional health authority.

In our previous agreement, an Early Intervention Process was piloted at Eastern Health and Western Health. The pilot was

deemed a success and as such has been expanded to all regional health authorities in the new collective agreement. Due to the changes, a new grievance form has also been created (available on myRNU), which makes it easier for members to follow the dispute resolution steps and timelines (see diagram on next page).

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**Registered
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Newfoundland & Labrador

Dispute Resolution Timelines Guide

STEP 1



Informal Discussion

Informal discussion between the employee and management representative within **7 calendar days** of the occurrence or discovery of facts giving rise to the dispute.

Parties have a further **7 calendar days** following the informal discussion to attempt to resolve the issue.

If no resolution...



STEP 2



Initiate Early Intervention Process

Early intervention meeting between the employee and management representative within **7 calendar days** of the step 1 outcome.

A local union and/or HR representative may also be present if requested.

If no resolution...



STEP 3



File Formal Grievance

Employee submits a grievance form to the employer within **14 calendar days** of the Early Intervention meeting.

A copy of the form should also be shared with your RNU Labour Relations Officer (LRO).

Management must provide a written response within **7 calendar days**. Note: a meeting may occur if requested.

If no resolution...



STEP 4



Referral to Alternate Dispute Resolution.

The LRO will refer the grievance to the alternate dispute resolution process within **14 calendar days** of receiving the written response from management.



What You Need to Know about the Revised Professional Practice Language



For RNUNL, providing an effective avenue to address professional practice concerns continues to be a top priority. Recognizing the workplace issues that continue to plague our membership, your negotiations team fought to strengthen this process. The result is a significantly revised article 48.01: Professional Practices Committee (PPC). There are several new and revised clauses to address the following feedback and strengthen the professional practice process.

"I'm afraid to be perceived as making a 'complaint' against my employer."

Engaging in the professional practice process is a professional, ethical and legal responsibility of a registered nurse and demonstrates a member's commitment to providing quality care. The process is not about blame, in fact, it is mutually beneficial to members and the employer. Nonetheless, we recognize that members may be reluctant to bring a concern to their employer's attention. To challenge this perception and highlight the role of collaboration in resolving concerns, the revised process begins with discussion between the member and manager. Open communication encourages problem solving at the lowest, most informal level and has proven effective. We are optimistic that adding this step will facilitate early, collaborative problem solving between the member and manager when professional practice concerns arise.

"I don't have enough time to fill out the form"

Our past research shows that many members don't engage in the professional practice process due to a lack of time. Leaving a concern unresolved could be a risk to patients and staff. We understand that time constraints are a realistic concern, which is why we implemented new language to improve the reporting process. To help make the process as easy as possible, the member has seven calendar days to bring the concern forward for discussion with the manager and to complete a professional practice form, if required. As well, RNUNL will collaborate with employers to develop a standardized provincial reporting form. Our goal is to ensure this form is accessible and incorporates check boxes to make it easier and quicker for a member to report compromised standard(s) of practice, regardless of their practice area. Remember, documentation is the key to building the case for change in your workplace. Although the creation of a new form is underway, considering the number of parties involved, it will take some time before it is available to members.

"I've filled out professional practice forms in the past and never heard back."

We know that our members want to hear back when they engage in the professional practice process. The revised article 48.01 (h) introduces new timelines which reinforce the importance of the PPC reporting back to member(s) who submitted the concern. We are hopeful that new timelines will increase responsiveness and subsequently motivate our members to engage in the professional practice process.

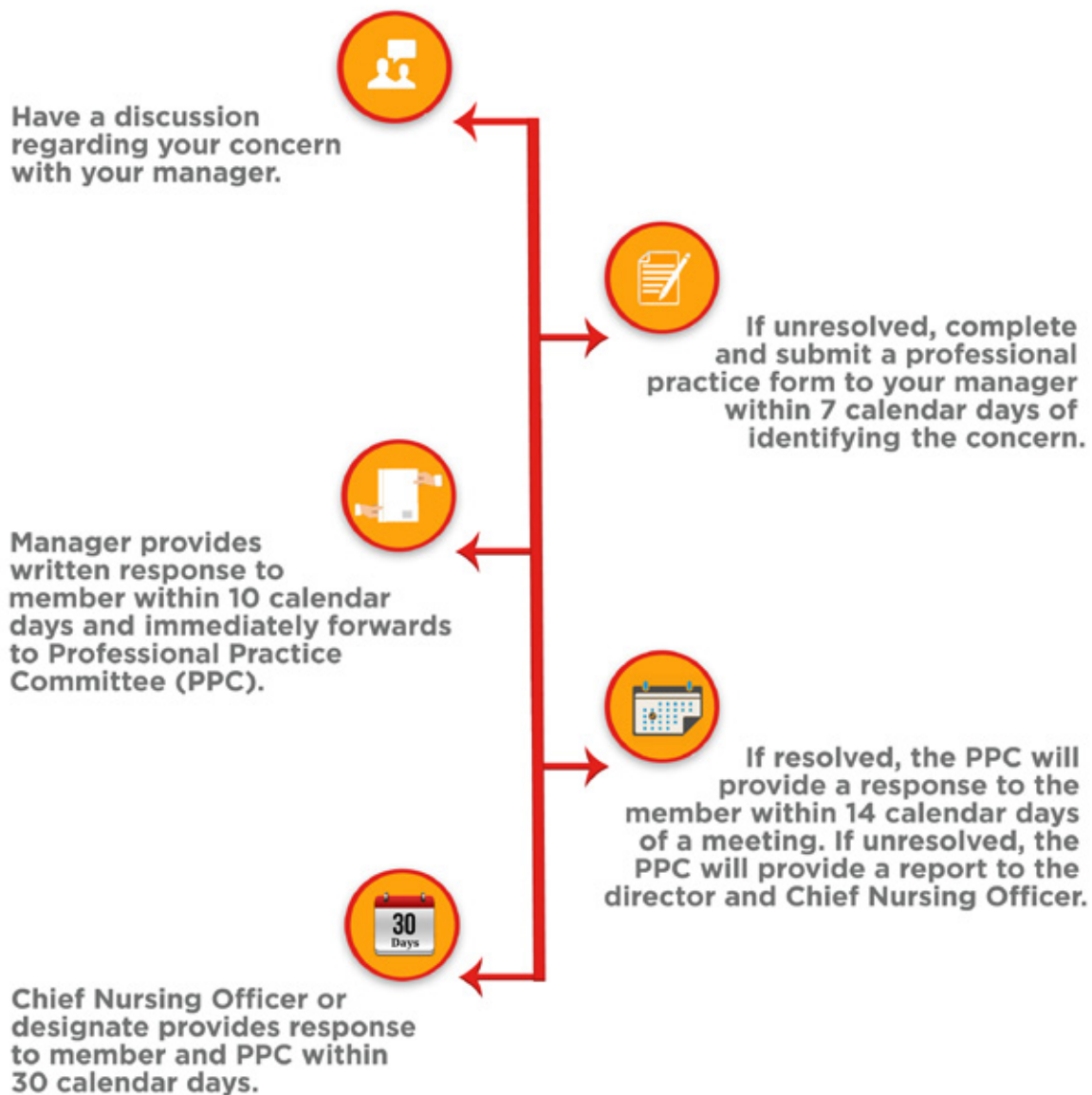
"No one seems to have an answer to my concern."

Unresolved professional practice concerns are a major frustration of members. Under the new language, strict timelines are applied to ensure the process remained in motion (see graphic on next page) and unresolved concerns are elevated to the director and chief nursing officer at the regional health authority if required.



Registered Nurses' Union
Newfoundland & Labrador

Professional Practice Process Timelines





Professional Practice Success Story

Your Contract in Action: New Permanent Float Positions Helping Address Professional Practice Concerns

During a time when government was pushing so many concessions, we were thrilled to secure 35 new float positions (0.6 full-time equivalent or greater) in our new contract. These positions will translate into scheduled relief in areas where it has been absent, and in fact, are already providing hope to areas that are experiencing critical staffing challenges.

It should be understood that extensive analysis was completed by each regional health authority to determine the number of permanent floats they could create. Based on this analysis, the new positions will mainly be in the St. John's area, as most parts of the province already have permanent relief positions in place. Just as importantly we were successful in building a review mechanism that could result in additional positions being created.

While the positions are still in the process of being created, posted and/or filled, RNUNL has been advised that relief positions will be added to a number of areas. The following are just a couple of examples of how contract language worked together with the professional practice process to get results.

Branch 3 Dialysis Units (Health Sciences Centre / St. Clare's Mercy Hospital / Kidney Care Centre) 6 New Permanent Part-time Float Positions

Dialysis units in Branch 3 advocated for over a year for action to be taken by the employer to address the mounting issues surrounding staffing, scheduling and working conditions. In fact, since November 2018, over 200 professional practice forms were submitted to the Branch 3 Professional Practice Committee outlining these issues.

We are pleased to report that the hard work put in by branch volunteers, advocacy by dialysis staff and utilization of the professional practice process has paid off. After many meetings and correspondence, the employer committed to add six permanent part-time float positions (0.6 FTEs) to help address challenges within the units.

Branch 2 Janeway Critical Care Units (PICU/NICU): 6 New Full-Time Float Positions

We were pleased to learn that the PICU/NICU at the Janeway Children's Health and Rehabilitation Centre will receive six new full-time float positions. Due to patient acuity, the PICU has been plagued by staffing concerns for years, resulting in 24-hour shifts,

mandated overtime, patient diversions and safety concerns. The issues in the PICU were brought to the attention of the media by a concerned parent last spring, at which time RNUNL President Debbie Forward disclosed the extent of the staffing crisis and demanded immediate action.

In addition to media attention, staff were also raising concerns through the professional practice process. In just one month during 2018, staff filled out over 30 professional practice forms — that's at least one a day — related to staffing issues.

A huge bouquet goes out to our frontline RNs and RNUNL volunteers who have persistently advocated for additional resources in this unit. Their voices were heard and securing these positions is a huge accomplishment for this group.

Other Areas with Confirmed Float Positions:

- Case room and 5NB at the Health Sciences Centre/Janeway – 4 full-time float positions
- Janeway Emergency Department – 4 part-time (0.6 FTE) float positions
- Placentia Health Centre – 1 full-time float position

Additional Peace of Mind: The Canadian Nurses Protective Society (CNPS) Supplementary Protection Program

Did you know that as a CNPS beneficiary you also have the option to apply for CNPS Supplementary Protection?

This optional additional program expands the circumstances in which you can seek assistance from the CNPS. Registration in the Supplementary Protection program extends your eligibility for CNPS assistance with the College of Registered Nurses of Newfoundland and Labrador (CRNNL) investigations and includes the following:

- **Legal assistance with complaints to your nursing regulator:** Registrants of the Supplementary Protection program are eligible to receive legal assistance if they are the subject of an investigation that arises from a complaint filed against them with their regulator. Assistance is made available on a discretionary basis.
- **Legal assistance with disciplinary hearings:** Registrants of the CNPS Supplementary Protection program who have received assistance with investigations before a nursing regulator are eligible to receive additional assistance if those complaints are referred to a Disciplinary Committee, Board of Inquiry, Fitness-to-Practice Committee or another equivalent tribunal. There is a limit of \$50,000 for this assistance provided through a partnership with an insurer.

To be eligible for assistance with an investigation before a nursing regulator, you must be a registrant of the CNPS Supplementary Protection program when the conduct giving rise to the complaint took place and when the complaint is filed with the nursing regulator.

You must also have beneficiary status with the CNPS. Registered Nurses and Nurse Practitioners in Newfoundland and Labrador have beneficiary status with the CNPS as a requirement of licensure.

How much does it cost?

The annual cost of the program is \$105, which is generally less than the cost of one (1) hour of legal advice, if you needed to personally retain a lawyer.

How do I register for the program?

You can choose this option when you renew your CNPS beneficiary status at the time of your licensure renewal.

To learn more about the full eligibility requirements, visit www.cnps.ca/supp.



**Canadian Nurses
Protective Society**



Students Explore New Members' Experiences with Workplace Violence

Heather Hoskins, Alicia Lawlor and Reilly Lundrigan, fourth year BN students from the Centre for Nursing Studies, recently completed a clinical placement at RNUNL for Nursing 4501: Community Health Nursing Practice II. Under the direction of faculty member Holly LeDrew, the students were tasked with conducting a needs assessment on a specific aggregate and then developing a resource to address the identified need.

The students were interested in violence in healthcare, specifically the perceptions of novice RNs and their experiences with violence in their workplaces. As soon to be graduate nurses, they wondered whether novice RNs felt prepared to respond to incidents of aggression. To find some answers, the students developed a survey which was distributed to new members of RNUNL (2 years or less).

Armed with the data and insight from the survey, the students developed a brochure to provide clarity on the realities of violence in health care, give useful preventative tips and outline the importance of reporting violent acts. Despite having a target audience of novice RNs, the brochure contains information useful to any member of RNUNL. The brochure is available on myRNU.

If you are struggling with what steps to take after an encounter with workplace violence, reach out to your union for support.

Survey Findings:

- **81% encountered workplace violence** in the previous six months.
- **55% of RNs that experienced violence** did not report it.
- **69% did not feel prepared** to deal with the violence they experienced.
- **70% have dreaded returning to work** as a result of an experience with workplace violence.

Common Themes from Survey Narrative Data:

- Verbal abuse is not considered serious enough to report.
- Many new members have not been educated on how to report violence.
- RNs feel an obligation to be there even if it means putting their own safety and well-being at risk.
- Perpetrators are not just patients — but families as well.

Congratulations and best wishes to Alicia, Reilly and Heather!



(Left to right) Alicia Lawlor, Reilly Lundrigan and Heather Hoskins, fourth year BN students from the Centre for Nursing Studies.

Registered Nurse Spotlight

Meet A Member of Your Negotiating Team: Carolyn Rideout, NP



Carolyn Rideout is a nurse practitioner (NP) at the Notre Dame Bay Memorial Health Centre in Twillingate. She has been an NP for 21 years and an RN for 29 years. Carolyn is also an active volunteer with RNUNL. She was president of Branch 17 for many years and also served two terms on the provincial Board of Directors. She is currently vice-president of Branch 17 and most recently was a member of your negotiating team. We asked Carolyn to share her negotiations experiences — check out what she had to say!

1. Why did you put your name forward for the negotiating team?

I believe that RNUNL is a strong voice for RNs, NPs and for health care in general. I knew this past round was going to be a challenge considering the provincial deficit, but I wanted to be a part of that challenge. I wanted to ensure that our working conditions

and benefits were equitable to other provinces and to keep our RNs and NPs here.

2. Was the bargaining process what you expected? Any surprises?

For the most part, the process was what I expected. I was surprised to see the different practices of each regional health authority. Their interpretation of articles in our collective agreement varied; even variability between sites within a health authority.

It was also interesting to see that as things got closer to the end, any decisions with monetary attachments had to go outside the meeting room before we were given an answer.

3. What were the biggest challenges you felt the team faced?

Of course, any proposal that had financial cost associated with it was a challenge. No information or argument we put forth regarding wages, severance payout or retirement benefits was going to change their mind. Also, the team fought to the end to get compensation for equal work of NPs but the employer team wasn't willing to give, no matter how much information was provided.

Sometimes, I felt there was a challenge around getting information back from the employer. For example, the number of 24-hour shifts worked, number of casual hours worked, number of casuals, number of float positions, etc. Each site didn't track the information the same way. This made it more difficult when we argued to get more positions created, either casual, temporary, float or permanent.

4. What do you feel are the biggest accomplishments from this round of bargaining?

For sure, one of the biggest accomplishments is getting the Core Staffing Review. Although currently it is in selected areas, it is a big gain. Another would be changes in our casual and temporary language that allows for guaranteed hours for casuals and more access to benefits for temporary employees. Improvement in position protection language will allow permanent RNs to take temporary positions with more security. Other big wins include changes in professional practice language and the workplace violence forum.

Considering what we faced with the provincial deficit and the state of the economy, any gain was a great accomplishment. Good luck in the next round of negotiations!



#WearWhiteWednesday

Why wear white and black?

Wearing the RN uniform is just one way we can distinguish the profession and promote the important role RNs and NPs play in the health care system. The blur of a busy hospital becomes a little clearer when the white and black uniforms are visible. Thanks to everyone who has shared their #wearwhitewednesday photos this past year and demonstrated RN and NP pride in the workplace.



Options RN style. (ARE IN)

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not so black & white.



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It's not one size fits all.

A lab coat is another great way to show your RN
pride if you wear business casual or street
clothes to work.





Newfoundland and Labrador Federation of Labour (NLFL) Convention

RNUNL attended the NLFL's Triennial Convention for the first time this past December. RNUNL sent 26 delegates to the Convention and also attended a rally calling on government to increase minimum wage to \$15.00.







RNUNL in the Community

Kids Eat Smart



Big thanks to RNs Lesley, Jennifer and Ruth for volunteering to answer the phones for an hour at the radiothon!



RNUNL Vice President Yvette Coffee presented a \$5,000 donation to Kids Eat Smart at their annual radiothon on November 6, 2019.

Community Food Sharing Association



In December, RNUNL donated \$6,000 to the Community Food Sharing Association to support those in need over the holidays and throughout the year.

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