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July 2010

Recently, SAHO and the Health Regions sent out a poster regarding the status of bargaining. This didn't get the required amount of attention they had hoped for, so they subsequently did a direct mail out to **25,000 Healthcare Workers** to really get your attention. We want you to consider the cost that went into that mail-out!

We have been out to the membership to share the struggles and frustrations with the current bargaining process...not once, but three times throughout the last several months. We want to ensure that you receive accurate information in respect to this long-standing process.

Over the past several months we have been struggling to achieve a fair collective agreement for the Health Providers.

### *Let's recap our bargaining experience to date:*

- We were served with notices under the Essential Services Legislation as soon as collective bargaining began.
- We asked for the monetary mandate, SAHO told us we weren't 'ready' to hear it – that's right ..... **for one full year!**
- **SAHO walked away from the bargaining table.** First, they walked away and demanded the conciliation process. Then they walked away from that too. After all that, and after spending less than 8 hours with us over the course of 6 months, they served us with a final offer!
- **SAHO denies that their many rollbacks will have an effect upon you,** yet they adamantly refuse to take these off the bargaining table. If the SAHO rollbacks really are so insignificant, why are they holding onto them?

No other public sector union has received less than 9.5% over the same term as that proposed by SAHO – but yes, others have received more.

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They have accused us of increasing the cost of the package by eighty million dollars – and they have accused us of increasing the cost by 18%. **WE HAVE NOT!** These are proposals that have never left our package since we began this process. In fact, we have tried to be good stewards of the public purse and represent our members and the needs of the healthcare system, by reducing our proposals or phasing them in over time.

The Union's best offer which was tabled in May on behalf of 25,000 Healthcare Providers, was intended to be a fair and reasonable compromise in order to achieve a tentative agreement. SGEU, CUPE and SEIU have always conducted a ratification vote after a **tentative agreement** is reached. We will continue to work hard to get there.

To date, SAHO has spent hundreds of thousands of your taxpayer dollars on misleading ads aimed at distracting you from achieving a fair and equitable collective agreement. Radio and newspaper ads aren't cheap! And neither is a full-color mass mail-out to 25,000 Healthcare Workers. SAHO is spending a considerable amount on negative radio and print ads which would go a long way to addressing parity items.

SAHO is trying to get Union Members to blame their Union for the cut in retro pay – this is their proposal NOT ours. Your Union has proposed a full payment of retro from the time our agreement expired to the time we have a new one. We know that this is not a cost issue – it is a punishment.

**On June 30, SEIU-West, SGEU and CUPE advised SAHO that our memberships were directing us to get back to the bargaining table.** The tri union sent letters to SAHO that we were prepared to bargain through the summer to conclude a tentative agreement that can be recommended to the members. In response, SAHO and the Employers have agreed to two meetings on July 23 and August 12.

**We've met with SAHO many times, and with different degrees of success and progress. We will be very vigilant in these new meetings and will fight for the rights of our union members**

We thank you for your continued strength, patience and for your support of both the bargaining team and your right to a fair collective agreement.

Keep up your lobbying efforts and keep writing those letters and making those phone calls. It's working!

For more information:

SGEU Health Providers Negotiating Committee

**Side-by-side comparison  
of SAHO Final Offer and Provider Unions' Best Offer**

<b>SAHO</b>	<b>Provider Unions</b>
SAHO proposed a 4 year term	Agreed
SAHO proposed a general wage increase of 4%, 2%, 1 1/2%, 2%	Agreed
All employees on staff as of date of signing eligible for retro pay.	Agreed
Retro pay ends as of April 1, 2010	Full retro pay
Retirees eligible for retro, have to apply to Employer within 30 days of signing Collective Agreement	Retirees eligible for retro, Employer will pay out as per past practise
Market wage adjustments for 8 classifications	Agreed, plus market adjustments applied to other classifications in same "family of jobs". Additional classifications use existing market supplement process to adjudicate wage competitiveness, hard to recruit/retain issues
Pay LPN new wage rate when JJEMC adjudicates file. No retro.	Pay LPNs market adjustment equal to new wage rate from April 1, 2008 (date first LPN graduated with new education requirements) until JJEMC adjudicates file
Shift premium - no change	March 31, 2011 - go to \$2.70 March 31, 2012 - go to \$3.75
Weekend premium - no change	March 31, 2011 - go to \$2.35 March 31, 2012 - go to \$3.10
regular standby premium - no change	March 31, 2011 - go to \$2.32 March 31, 2012 - go to \$3.15
day off/stat/OTFT EMS standby premium - no change	March 31, 2011 - go to \$4.25 March 31, 2012 - no change
Transportation Allowance – no change	Transportation rate of 40¢ per kilometre. Rate is adjusted by SPTI, but will not fall below 40¢ per kilometre.
Professional fees – no change	For 2011 and on, reimburse fees based on 2010 occupation fee schedule, or \$175, whichever is greater.

Proposed LOU on LPN utilisation of skills	Agreed
Maintain LOU on EH&EDB up to March 31, 2012	Agreed
JJE maintenance committee – reduce composition to 1 rep from each union and 3 Employer reps	Maintain current composition of committee
JJEMC - Reduce quorum to 2 reps from Unions/Employers	Agree
SAHO pays for JJE now, change to Unions paying costs of Union participation	Maintain current negotiated agreement
Eliminate additional JJEMC appeal process	Maintain additional appeal process, set time limit so that additional information has to be submitted within 30 days of appeal notice
Eliminate mediation stage from JJEMC dispute process	Agree
Eliminate ability of parties to present evidence and arguments in JJE dispute resolution process	Maintain current language
Sole chair for dispute resolution process	Maintain ability to mutually agree on sole chair or panel
Outstanding bundling issues/300 series jobs – eliminate or reduce retro pay	Agree to follow decision of arbitrator
Outstanding JJE files – SAHO only adjudicates	SAHO and Unions small committee adjudicate, as was past practise

# **Health contract impasse: why they can't agree**

## **Unions: SAHO won't bargain fairly**

By Gordon Campbell, Barbara Cape & Bonnie Erickson, Special to The Leader-Post July 22, 2010

The Canadian Union of Public Employees (CUPE), Service Employees International Union (SEIU-West) and the Saskatchewan Government Employees Union (SGEU) are deeply frustrated with the Saskatchewan Association of Health Organizations' (SAHO) approach to this current round of contract talks. Never have we experienced such a continued refusal by SAHO to negotiate fairly and fully. Never have we witnessed such a public campaign to strong-arm our membership to accept a SAHO offer.

As the unions representing 25,000 health-care workers, we have made a very reasonable proposal for settlement of our contracts with SAHO. Our offer would cost the government less than 13% over a four year term compared to the 37% settlement with the Saskatchewan Union of Nurses (SUN). We have agreed to SAHO's proposed general wage increase of 9.5%. In view of the recent economic downturn, we have proposed that needed improvements to premiums and professional fees be implemented late in our contracts to reduce overall costs. We have offered compromises to SAHO's demands for concessions, even though we see no reason why we should accept rollbacks to our members' rights that were not demanded of SUN or of other public sector unions. We have indicated that we are ready to bargain to reach a tentative agreement that we can recommend to our membership.

We estimate that nearly \$2 million in public funds has been spent on the SAHO advertising campaign to sell a bad deal to our members. In addition to SAHO's public advertisements, health-care workers are inundated with SAHO propaganda which is mailed to their homes, displayed at work and even posted inside the bathroom stalls in employee washrooms.

Despite our efforts, we cannot get a straight answer as to the amount spent on SAHO's campaign because the Ministry of Health denies it has any idea how SAHO spends the block funding it provides to SAHO, and SAHO, because of its non-profit status, is exempt from freedom of information legislation.

Health-care workers do not want SAHO's offer because it is tied to major concessions to their rights. These concessions, if implemented, would undermine the quality of health-care services and worsen staff shortages in a growing number of health-care classifications. Health-care workers rejected these concessions in 2009 when they voted in favour of job action and rejected them again in 2010 at hundreds of membership meetings.

SAHO's offer also includes a mean-spirited proposal to cut off the accrual of health-care workers' retroactive pay. Such strong-arm tactics are in part responsible for the current stalemate. As time passes, SAHO's position on retroactive pay makes its final offer increasingly less attractive. Why would anyone care to vote for an offer that robs them of retroactive wages?

SAHO's offer does not address the unequal treatment of our members compared to RNs. For example, prior to the government's recent deal with SUN, our members who work side-by-side with RNs received the same premiums as RNs for working evenings and weekend shifts. Now we are expected to accept less. Why are SAHO and the government playing favourites?

SAHO has mishandled its responsibilities as the representative of health employers and government in these contract negotiations. Its arrogance in this round of talks demonstrates how the Wall government's changes to labour legislation have hurt workers. Incredibly, Saskatchewan is the only jurisdiction in Canada that denies essential services workers the right to strike, but offers no other options for settling a dispute if the parties reach an impasse.

CUPE, SEIU-West and SGEU want to bargain. We hope SAHO, when we finally meet again on July 23, is prepared to do the same.

- Campbell is president, CUPE Health Care Council; Cape is president, SEIU-West and Erickson is SGEU vice-president, Health Sector.