



Ambulance Paramedics

of British Columbia - CUPE 873

CONVENTION 2017

OCTOBER 24 - 26, 2017

Emergency Dispatchers of BC

911

CUPE Local 873-02



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Table of Contents

AGENDA	3
VOTING DELEGATES TO CONVENTION 2017	6
LIST OF UNION OFFICERS	9
LIST OF COMMITTEES	10
ELECTIONS 2017	11
Provincial Executive Committee	11
Standing Committees	11
2017 ELECTION CANDIDATES	13
Provincial Executive Committee	13
Standing Committee	13
All Candidates Forum.....	16
Notice to Candidates	16
All Candidates Forum – Accepted Invitation to Participate	19
PROVINCIAL EXECUTIVE REPORTS	21
Provincial President’s Report.....	21
Provincial Vice-President’s Report.....	81
Provincial Secretary Treasurer’s Report.....	142
Provincial Recording Secretary’s Report.....	163
Emergency Dispatchers of BC – Local 873-02 Report.....	173
REGIONAL REPORTS	180
Region 1 North Report	180
Region 1 South Report.....	184
Region 2 East Report	186
Region 2 West Report	188
Region 3 Report.....	191
Region 4 Report.....	194
Regions 5-8 Report	196
COMMITTEE REPORTS	198
Union Trustee’s Report.....	198
Public Education Committee Report.....	203
Benefit Trust - Supplemental Pension Report.....	205
Superannuation Report (PSP)	207
Critical Incident Stress Management Report	208
Health & Wellness Report.....	212
Provincial Safety Program Report	226
RESOLUTIONS.....	234



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

AGENDA

Welcome – Monday, October 23, 2017

19:00 - 21:00 New Delegates Reception / Information Session

Day 1 – Tuesday, October 24, 2017

08:30 - 09:00 Registration

09:00 - 09:15 **Convention Start – Roll Call – Adopt Agenda**

09:15 - 10:45 Provincial President's Opening and Report - Bronwyn Barter

10:45 - 11:00 Morning Break

11:00 – 12:00 Provincial Vice-Presidents' Report - Dave Deines / Sherman Hillier

12:00 – 13:15 Lunch

13:15 – 14:00 Provincial Secretary Treasurer's Report – Cameron Eby

14:00 – 14:15 Guest Speaker: Paul Faoro, President, CUPE BC

14:15 – 14:30 **Afternoon Break**

14:30 – 15:00 Provincial Recording Secretary's Report – Jason Jackson

15:00 – 15:30 Local 873-02 - Emergency Dispatchers of BC Report - Shari Thomas

15:30 – 15:45 Wrap up, Conclude day 1

18:00 Annual Retirement Dinner Reception



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Day 2 – Wednesday, October 25, 2017

09:00 – 09:05	Convention Start Day 2 - Roll Call
09:05 – 09:30	Committee Report - Trustees - Ernie Mothus
09:30 – 10:00	Guest Speaker: Amanda Rogers, Barrister & Solicitor / Law Corporation
10:00 – 10:30	Resolutions
10:30 – 10:45	Morning Break
10:45 – 11:00	Committee Report – Public Education – Annemarie Byers
11:00 – 11:30	Resolutions
11:30 – 11:45	Committee Report – Supplemental Pension – Gerry Harris
11:45 – 13:00	Lunch
13:00 – 13:30	Resolutions
13:30 – 14:00	Committee Report – Superannuation Pension (PSPP) – Elizabeth Grant
14:00 – 14:30	Resolutions
14:30 – 14:45	Committee Report – Critical Incident & Stress Management – Lindsay Kellosalmi
14:45 – 15:00	Afternoon Break
15:00 – 15:15	Committee Report – Health & Welfare – Bob Parkinson
15:15 – 15:30	Resolutions
15:30 – 16:15	Committee Report - Provincial Safety - Corey Viala
16:15 – 16:30	Resolutions
16:30 – 16:45	Wrap up, Conclude Day 2
18:00 – 22:00	ALL CANDIDATES FORUM (held in convention hall)



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Day 3 – Thursday, October 26, 2017

09:00 – 09:05	Convention Start Day 3 - Roll Call
09:05 – 10:30	Elections
10:30 – 10:45	Morning Break
10:45 – 11:05	Guest Speakers: Chris Hood, President, PAC
11:05 – 11:45	Resolutions
11:45 – 13:00	Lunch
13:00 – 14:30	Resolutions
14:30 – 14:45	Afternoon Break
14:45 – 15:15	Resolutions
15:15 – 15:30	Old Business - Motion from 1 South, PEB -September 22, 2017 follow up. Motion tabled to Convention.
15:30 – 16:15	New Business
16:15 – 16:30	Good of the Union
16:30	Adjournment



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

VOTING DELEGATES TO CONVENTION 2017

EXECUTIVE

PROVINCIAL PRESIDENT.....BRONWYN BARTER
PROVINCIAL 1ST VICE-PRESIDENT.....DAVE DEINES
PROVINCIAL 2ND VICE-PRESIDENT.....SHERMAN HILLIER
PROVINCIAL SECRETARY-TREASURER.....CAMERON EBY
PROVINCIAL RECORDING SECRETARY.....JASON JACKSON
CHAIR, EMERGENCY DISPATCHERS OF BC.....SHARI THOMAS

REGIONAL DELEGATES

FULL-TIME, REG PT

ON-CALL

REGION 1 NORTH:

STEVE BOLEY (RVP)
 AGNES PRINGLE
 KEITH MORAES
 STEVEN BREMER
 DAVE HUTTON

GREG HEYES (RVP)
 JACOB NICKEL
 BROOK LEWIS
 DAVID MARTIN
 ANDREW FLETCHER
 JESSICA OKELEY
 TOBIAS HOLDING

REGION 1 SOUTH:

SCOTT SYWAKE (RVP)
PAXTON GRILL (RVP)
 TYRONE TROTTER
 MAREK FRANO
 STEVE WARD
 VIRGINIA BURGESS
 KYLE KLINT
 BRIGHAM SMITH
 MICHAEL SUGIMOTO

RYAN KEELER
 JOSHUA HENSHAW
 LISA KEELER

REGION 2 EAST:

JESSICA CHILTON (RVP)
 ANNEMARIE BYERS
 CATHARINA GOOSSEN
 STEVEN MORRIS
 COREY FROESE

CYRUS MURRAY (A/RVP)
 TYLER LINDAL
 JENNIFER SUTCLIFFE
 LAWRENCE KENNEDY

REGION 2 WEST:

DUSTIN JACKSON (A/RVP)
LORRAINE TILL (RVP)
KATRINA KWOK-BOWLAND (RVP)
TERRY MCMANUS (RVP)
 JADE MONRO
 ANDREW BILLING
 DAVID HILDER

MELISSA HANSLER
 STEPHAN ABBOTT
 SPENCER WOOD
 JAMES MACPHAIL
 DALE HEGGTVEIT
 AMY BUTLER
 LOIS GORY



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

REGION 2 WEST cont'd:

FULL-TIME, REG PT

ON-CALL

BRIAN TWAITES
BRINTON DELUCA
RYAN STEFANI
ANDREW MILLS
DAVE LEARY
ROBERT SCHLAMP
ELIZABETH GRANT
MARTIN KEEN
ALLEN PRUDEN
CANDIS VISSER
ANDREA SEYMOUR
ERIC ENQUIST
LEA LEMKY
SARAH PATCH
ADAM GREENE
MEGAN ARNOTT
TYLER HANCHEROFF
JOHN BONE
REBECCA KROEKER
KELLY BUDWAY
DARREL HUNSBEDT
DARYL SCHLEPPE
FRASER FORSYTH
KEVIN LAMBERT
TIMOTHY LEHMAN
JODI BUTTERMAN
DANIEL DOAN
ENRICO RUFFY
DANIEL MCLEOD
AMANDA BILLIING
TERESA PASCUZZO
CHARMANE LEARNING
STEVEN GREEN
ROSS CHUTE

REGION 3:

KEITH TAYLOR (RVP)
JAMES TOWLE (RVP)
THOMAS RATCLIFFE
SHANE THAIR
LINDSAY KELLOSALMI
ANTHONY PARKIN
ALLAN MACIAK
TIMOTHY ROBERTS
HARDEEP DHALIWAL

BRADFORD FRASER
ELIZABETH WILLIAMS
PAUL MACLEOD
SAMANTHA LINGREN
DIANNE WRIGHT
TAMARA JENSEN
TREVOR DAY
LARRY JEIDER



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

REGION 4:

**COREY VIALA
CHRISTOPHER NIELSON**

**AMY CHRIS (RVP)
GRANT FARQUHAR (RVP)
AMBER PASULA
IAN JOHNSTON
GRETCHEN BONEGARDENER
ANNE HARRIS**

REGIONS 5-8:

**ANDRE LEDOUX (RVP)
TINA LOC
BYRON SKETCHLEY
KEVIN CRAWFORD
SAM RADONS**

**TANIS DOUGLAS (A/RVP)
MICHAEL LARSEN
SASHA BEER
GLEN MACDONALD
JAIDEN WARD
EUGENE JAMIN
BENJAMIN TEDDER
KAREN WILSON
PETER SINCLAIR**

873-02:

**ASHTON PARADIS (VICE-CHAIR)
SYLVIA FERGUSON
SHELDON MILLER
VANESSA MACKENZIE
YAM HO (HARRISON) KWAN
CAROLYN MACDONAD
HEIDI FRITSCH
TARA-LEE PRICE
STEFANO AZZUOLO
ROB KENNEDY
CHRISTOPHER WITHERS
MATTHEW BORDEWICK
MARILEE CHERRIS WILDING**



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

LIST OF UNION OFFICERS

PROVINCIAL EXECUTIVE

PRESIDENT.....	BRONWYN BARTER
1 ST VICE-PRESIDENT.....	DAVE DEINES
2 ND VICE-PRESIDENT.....	SHERMAN HILLIER
SECRETARY-TREASURER.....	CAMERON EBY
RECORDING SECRETARY.....	JASON JACKSON

REGIONAL VICE-PRESIDENTS

REGION 1 SOUTH	SCOTT SYWAKE
	PAXTON GRILL
REGION 1 NORTH	STEVE BOLEY
	GREG HEYES
REGION 2 EAST	JESSICA CHILTON
	CYRUS MURRAY
REGION 2 WEST	KATRYNA BOWLAND-KWOK
	LORRAINE TILL
	DUSTIN JACKSON
	TERRY MCMANUS
REGION 3	KEITH TAYLOR
	JAMES TOWLE
REGION 4	GRANT FARQUHAR
	AMY CHRIS
REGION 5 – 8	ANDRE LEDOUX
	DAVE WOLCZUK

873-02 EXECUTIVE

CHAIR.....	SHARI THOMAS
VICE-CHAIR.....	ASHTON PARADIS
RECORDING SECRETARY.....	MARILEE CHERRIS WILDING
CHIEF SHOP STEWARD.....	STEFANO AZZUOLO



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

LIST OF COMMITTEES

BYLAWS & RESOLUTIONS COMMITTEE

ROSS CHUTE (CHAIR)
DAVID HILDER
AGGIE PRINGLE
BROOK LEWIS
VACANT

HEALTH & WELLNESS

BOB PARKINSON

NEGOTIATING COMMITTEE

TIM LEHMAN (CHAIR)
ANDREW BILLING
TANIS DOUGLAS
AL BOULIER

UNION TRUSTEES

ERNIE MOTHUS (CHAIR)
TROY CLIFFORD
GERRY HARRIS

PUBLIC EDUCATION DIRECTOR

ANNEMARIE BYERS

CISD COORDINATOR

LINDSAY KELLOSALMI

CONVENTION COMMITTEE

LILLIAN GAUTHIER (CHAIR)
AGGIE PRINGLE
RICHARD MACKENZIE
JACQUI WARD
TERRY BROWNE

PROVINCIAL SAFETY

COREY VIALA

BENEFIT TRUSTEES

GERRY HARRIS (CHAIR)
KEVIN LAMBERT
TROY CLIFFORD
ERNIE MOTHUS

SUPERANNUATION COMMITTEE

ELIZABETH GRANT (CHAIR)
GORD MAFATOW

PMLC (Provincial Medical Leadership Council)

MELISSA HANSLER
GENE BENOIT

LICENSING

BILL LEVERETT



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

ELECTIONS 2017

Provincial Executive Committee:

Provincial President	1 vacancy, 2-year term, ending 2019
Provincial 1st Vice-President	1 vacancy, 2-year term, ending 2019
Provincial 2nd Vice-President	1 vacancy, 2-year term, ending 2019
Provincial Secretary-Treasurer	1 vacancy, 2-year term, ending 2019
Provincial Recording Secretary	1 vacancy, 2-year term, ending 2019

Standing Committees:

Negotiating Committee	3 vacancies, 4-year term, ending 2021 1 Full-time/Regular Part-time only 2 On-Call only 1 vacancy, balance of 4-year term, ending 2019 1 On-Call only
Convention Committee	4 vacancies, 2-year term, ending 2019 2 Full-time / Regular Part-time only 2 On-Call only
Superannuation Committee	1 vacancy, 3-year term, ending 2020 Full-time / Regular Part-time only 1 vacancy, balance of 3-year term ending 2019 On-Call only
Bylaws Committee	5 vacancies, 2-year term, ending 2019 2 Full-time / Regular Part-time only 2 On-Call only 1 either Full-time/Regular Part-time or On-Call
Benefit Trustees	2 vacancies, 4-year term, ending 2021 Plan Participating Beneficiaries
Union Trustees	1 vacancy, 3-year term, ending 2020
PMLC Representative (Provincial Medical Leadership Council)	1 vacancy, 2-year term, ending in 2019 ACP/CCP/ITT members only
Health & Wellness Director	1 vacancy, 2-year term, ending in 2019



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Public Education Director	1 vacancy, 2-year term, ending in 2019
Provincial Safety Director	1 vacancy, 2-year term, ending in 2019
CISM Coordinator	1 vacancy, 2-year term, ending in 2019

Election Results:

Please be advised that the following members were **elected by acclamation**:

Elizabeth Grant - **Superannuation Committee** - **3 Year Term**
Lindsay Kellosalmi - **CISM Coordinator** - **2 Year Term**

Please be advised that the following positions received no valid nominations, and will **remain vacant**:

Convention Committee - **2 vacancies - 2-year term ending 2019. On-Call only**
Bylaws Committee - **1 vacancy - 2-year term ending 2019. On-Call only**



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017 ELECTION CANDIDATES

Provincial Executive Committee

Position:

Provincial President- 2-year term, ending 2019
Provincial President- 2-year term, ending 2019
Provincial President- 2-year term, ending 2019
Provincial President- 2-year term, ending 2019

Provincial 1st Vice-President- 2-year term, ending 2019
Provincial 1st Vice-President- 2-year term, ending 2019
Provincial 1st Vice-President- 2-year term, ending 2019
Provincial 1st Vice-President- 2-year term, ending 2019

Provincial 2nd Vice-President- 2-year term, ending 2019
Provincial 2nd Vice-President- 2-year term, ending 2019
Provincial 2nd Vice-President- 2-year term, ending 2019
Provincial 2nd Vice-President- 2-year term, ending 2019
Provincial 2nd Vice-President- 2-year term, ending 2019

Provincial Secretary Treasurer- 2-year term, ending 2019
Provincial Secretary Treasurer- 2-year term, ending 2019

Provincial Recording Secretary- 2-year term, ending 2019
Provincial Recording Secretary- 2-year term, ending 2019
Provincial Recording Secretary- 2-year term, ending 2019
Provincial Recording Secretary- 2-year term, ending 2019
Provincial Recording Secretary- 2-year term, ending 2019

Nominee Name:

Cameron Eby
David Hilder
Joshua Henshaw
Terry Rempel

David Deines
Joshua Henshaw
Tracy Christensen
Wade Paul

Sherman Hillier
Sarah Patch
Sean Penner
Katrnya Bowland Kwok
Wade Paul

Lorraine Till
Stephen Carter

Jason Jackson
Amanda Billing
Eric Enquist
Kevin Lemay
Wade Paul

Standing Committee

Position:

Negotiating Committee- 2 vacancies, 4-year term ending 2021. On-Call only
Negotiating Committee- 2 vacancies, 4-year term ending 2021. On-Call only
Negotiating Committee- 2 vacancies, 4-year term ending 2021. On-Call only
Negotiating Committee- 2 vacancies, 4-year term ending 2021. On-Call only

Negotiating Committee- 1 vacancy, Balance of 4-year term ending 2019. On-Call only
Negotiating Committee- 1 vacancy, Balance of 4-year term ending 2019. On-Call only
Negotiating Committee- 1 vacancy, Balance of 4-year term ending 2019. On-Call only
Negotiating Committee- 1 vacancy, Balance of 4-year term ending 2019. On-Call only

Negotiating Committee- 1 vacancy, Balance of 4-year term ending 2021. FT/Reg PT Only

Nominee Name:

Chris Daoust
Joshua Chafee
Tamara McNay
Tanis Douglas

Chris Daoust
David Martin
Ian Johnston
Tamara McNay

Agnes Pringle



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Negotiating Committee- 1 vacancy, Balance of 4-year term ending 2021. FT/Reg PT Only
Negotiating Committee- 1 vacancy, Balance of 4-year term ending 2021. FT/Reg PT Only
Negotiating Committee- 1 vacancy, Balance of 4-year term ending 2021. FT/Reg PT Only
Negotiating Committee- 1 vacancy, Balance of 4-year term ending 2021. FT/Reg PT Only
Negotiating Committee- 1 vacancy, Balance of 4-year term ending 2021. FT/Reg PT Only
Negotiating Committee- 1 vacancy, Balance of 4-year term ending 2021. FT/Reg PT Only

Amanda Davies
Brent Monsieurs
Dustin Jackson
Katryna BowInd Kwok
Kelly Budway
Michael Peric

Convention Committee- 2 vacancies, 2-year term ending 2019. FT/Reg PT Only
Convention Committee- 2 vacancies, 2-year term ending 2019. FT/Reg PT Only
Convention Committee- 2 vacancies, 2-year term ending 2019. FT/Reg PT Only
Convention Committee- 2 vacancies, 2-year term ending 2019. FT/Reg PT Only
Convention Committee- 2 vacancies, 2-year term ending 2019. FT/Reg PT Only

Agnes Pringle
Brent Monsieurs
Janine Nadeau
Keith Moraes
Lillian Gauthier

Convention Committee- 2 vacancies, 2-year term ending 2019. On-Call Only

No Valid Nominations Received

Superannuation Committee- 1 vacancy, 3-year term ending 2020. FT/Reg PT Only

Elizabeth Grant

Bylaws Committee- 2 vacancies, 2-year term ending 2019. FT/Reg Pt Only
Bylaws Committee- 2 vacancies, 2-year term ending 2019. FT/Reg Pt Only
Bylaws Committee- 2 vacancies, 2-year term ending 2019. FT/Reg Pt Only

Agnes Pringle
Miguel Campo
Patrick Harrison

Bylaws Committee- 1 vacancy, 2-year term ending 2019. FT/Reg Pt or On-Call
Bylaws Committee- 1 vacancy, 2-year term ending 2019. FT/Reg Pt or On-Call
Bylaws Committee- 1 vacancy, 2-year term ending 2019. FT/Reg Pt or On-Call

Anges Pringle
Jason Perry
Patrick Harris

Bylaws Committee- 1 vacancy, 2-year term ending 2019. On-Call Only

No Valid Nominations Received

Benefit Trustees- 2 vacancies, 4 –year term ending 2021. Plan Participating Beneficiaries only.
Benefit Trustees- 2 vacancies, 4 –year term ending 2021. Plan Participating Beneficiaries only.
Benefit Trustees- 2 vacancies, 4 –year term ending 2021. Plan Participating Beneficiaries only.

Ernest Mothus
Miguel Campo
Troy Clifford

Union Trustees- 1 vacancy, 3-year term ending 2020
Union Trustees- 1 vacancy, 3-year term ending 2020
Union Trustees- 1 vacancy, 3-year term ending 2020
Union Trustees- 1 vacancy, 3-year term ending 2020
Union Trustees- 1 vacancy, 3-year term ending 2020
Union Trustees- 1 vacancy, 3-year term ending 2020
Union Trustees- 1 vacancy, 3-year term ending 2020
Union Trustees- 1 vacancy, 3-year term ending 2020

Allen Pruden
Bradford Fraser
Jason Perry
Jodi Butterman
John Farquhar
Keith Moraes
Michael Shillington
Tamara McNay

PMCL Representative- 1 vacancy, 2-year term ending 2019. ACP/CCP/ITT members only
PMCL Representative- 1 vacancy, 2-year term ending 2019. ACP/CCP/ITT members only
PMCL Representative- 1 vacancy, 2-year term ending 2019. ACP/CCP/ITT members only
PMCL Representative- 1 vacancy, 2-year term ending 2019. ACP/CCP/ITT members only
PMCL Representative- 1 vacancy, 2-year term ending 2019. ACP/CCP/ITT members only

Adam Green
Geoffrey Taylor
Kyle Klint
Michael Sugimoto
Wesley Bihlmayr

Health & Wellness Director- 2-year term ending 2019
Health & Wellness Director- 2-year term ending 2019

Robert Parkinson
Garth Dinsmore

Public Education Director- 2-year term ending 2019
Public Education Director- 2-year term ending 2019

Annemarie Byers
Scott Sywake

Provincial Safety Director- 2-year term ending 2019
Provincial Safety Director- 2-year term ending 2019

Brent Monsieurs
Corey Viala



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**

CONVENTION 2017



Provincial Safety Director- 2-year term ending 2019

CISM Coordinator- 2-year term ending 2019

Steven Bremer

Lindsay Kellosalmi

Unadopted: for review only



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017

All Candidates Forum
Notice to Candidates

October 5, 2017

Attention: Provincial Executive and Standing Committee Candidates
CUPE Local 873

Dear Candidates;

Re: All Candidates Forum at Convention 2017

Consistent with the motion from Convention 2015:

Move that bi-annually during election year's, or annually if deemed necessary, the convention committee make available the Convention room for an all candidates meeting so that all the candidates can be properly heard. – Billing / Munroe – Carried

I would like to advise you of a change to the format of the candidate information forums at this year's Convention. Unlike past Conventions, when candidates broke into different groups, this year we will be providing space for an All Candidates Forum. The forum will allow 3 minutes for candidates to address members and participation in a Q&A session.

All nominees will have the option to address the membership for 3 minutes or they can choose to forego the 3-minute address to the members and opt to solely participate in the question period.

If a nominee is unable to attend the All Candidate's Forum, they will be allowed to submit a 500-word statement that will be read aloud to all members attending the All Candidate's Forum

The event will take place as follows:

Date: Wednesday October 25, 2017

Time: 6:00pm

Location: Sheraton Hotel YVR, following Convention, in the Convention Hall

If you would like to participate, please advise APBC @ info@apbc.ca before end of day on Sunday October 15, 2017 so the timeline can be finalized.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Please respond via email with Candidates Forum in the subject line, as well, please identify if you will be making an address to members and answering questions, only participating in questions or if you are unable to attend convention let me know if you wish to submit a 500 word written statement.

Should you have any questions or comments, please contact myself or the office.

Sincerely,

Jason Jackson
Provincial Recording Secretary
Ambulance Paramedics and Emergency Dispatchers of BC
CUPE Local 873

JJ/km/MoveUp

Unadopted: for review only



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

October 18, 2017

Dear Members;

Re: Convention Elections & All Candidate Forum

I have received many inquiries from candidates who are not delegates as to when the elections at our annual convention take place. In view of this, and in accordance with Article B.2.3 of our Constitution, I am writing to inform the membership of CUPE Local 873 and 873-02 that our elections will begin following the roll call of Convention at approximately 0905 hours on Thursday, October 26, 2017 in the main Convention Hall.

I also would like to take this opportunity to inform you we have also scheduled an all candidate's forum on Wednesday October 25, 2017 from 1800 to 2200 in the main Convention Hall.

All members are welcome to attend the all candidate's forum, and Convention as guests.

Convention will be held at:
Sheraton Vancouver Airport Hotel
7551 Westminster Highway
Richmond, BC V6X 1A3

Thank you and good luck to all.

Sincerely,

Bronwyn Barter
Provincial President
Ambulance Paramedics and Emergency Dispatchers of BC
CUPE Local 873

BB/sw/MoveUp



CONVENTION 2017

All Candidates Forum – Accepted Invitation to Participate

Below outlines the 2017 Election Candidates that have confirmed their participation in the All Candidates Forum on October 25, 2017 @ 18:00 in the Convention Hall

Candidate Name	Address to Members	Q & A Session	Written Statement
Provincial President			
Cameron Eby	Yes	Yes	No
Terry Remple	Yes	Yes	No
Provincial 1st Vice-President			
Dave Deines	Yes	Yes	No
Wade Paul	Yes	Yes	No
Provincial 2nd Vice President			
	Yes	Yes	No
Sherman Hillier	Yes	Yes	No
Sarah Patch	Yes	Yes	No
Wade Paul	Yes	Yes	No
Katryna Bowland Kwok	Yes	Yes	No
Provincial Secretary Treasurer			
Lorraine Till	Yes	Yes	No
Provincial Recording Secretary			
Jason Jackson	Yes	Yes	No
Wade Paul	Yes	Yes	No
Negotiating Committee			
Ian Johnston	Yes	Yes	No
Brent Monsieurs	Yes	Yes	No
Dustin Jackson	Yes	Yes	No
Katryna Bowland Kwok	Yes	Yes	No
Convention Committee			
Brent Monsieurs	Yes	Yes	No



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Health and Wellness Director

Bob Parkinson	Yes	Yes	No
Garth Dinsmore	No	No	Yes

Public Education

Scott Sywake	Yes	Yes	No
--------------	-----	-----	----

Provincial Safety

Brent Monsieurs	Yes	Yes	No
-----------------	-----	-----	----



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

PROVINCIAL EXECUTIVE REPORTS

Provincial President's Report

Welcome everyone to Convention 2017. Congratulations to all of those who were elected as Delegates to represent your regions, and many thanks to the committee members, Trustees and other attendees for your commitment over the years.

Once again, it's been an extremely busy year, we have a lot to report and we will be doing so through our various presentations from the Board and various Committees. As President of this Union, my Convention report touches on some of the key issues we have been dealing with on a day-to-day basis, throughout the last year. I'm involved with, and responsible for, all aspects of our Union and am involved with all issues at some level.

Strategic Public Relations Plan

Through direction from the membership, key stakeholders, and with a view to enhancing our administration of the negotiated Collective Agreements, the Provincial Executive Committee (PEC) undertook a comprehensive review of our organization. This review included consideration of the position of CUPE 873 with related national and provincial professional organizations and with respect to municipal, provincial, and national levels of government.

The PEC analyzed the prior strategic plan to identify completed, outstanding and new strategic key objectives. The result of this process is the update and renewal of our two-year strategic plan.

The global advancement of the interests of our members, and of our Union, continues to be the predominant focus of our PEC. In our strategic plan this is summarized with five business areas identified as key objectives: member services; communications, political action; professional advancement and labour relations.

In October 2016, Convention carried a motion, which adopted our Union's 2017-2019 strategic plan.

Please review our unions strategic plan which identifies our key objectives and our strategic priorities, guiding your executive in the administration of our Union.

Notice of Potential Ambulance Service Audit

In January 2017, we were contacted by the office of the Auditor General to advise us that we had been named as a stakeholder in a potential performance audit. We were advised by the Auditor General's office that it was not a financial audit and that it is a performance audit which tends to look at the wider program, system, and management issues. We were advised that they were currently looking to learn more about emergency medical services in BC, including the role of, and coordination with, fire first responders. What's working well, what isn't, and how could a performance audit lead to positive change.

We were told that it was very preliminary and that the Union's input would be appreciated. We had an initial meeting February 17, 2017. The Union is considering doing written submissions going forward.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Communications Director Position

As per a motion passed at a past Provincial Executive Board (PEB) Meeting, in line with a motion passed at Convention 2016 the Provincial Executive Board elected Communications Director Carolyn Nikodym.

Carolyn quickly launched into her new role attending meetings with the PEC, unfortunately due to unforeseen personal circumstances, Carolyn was unable to continue in the role as Communications Director. Absent bylaws surrounding the Communications Director position, the PEB reviewed the position at a PEB meeting, decided to call for interim nominations and ultimately Jessica Chilton was elected as Communications Director.

Jessica has produced a number of newsletters enhancing our communications with the membership and attended UBCM to promote our issues and profession amongst the various levels of government. The Executive looks forward to working with Jessica in her role.

PSPP Update

As previously advised, the Public Service Pension Plan (PSPP) Partners (BCGEU and Government) signed an AIP in June of 2016. Included in this AIP was the elimination of the rule of 80 which allows for early retirement on a full pension for full time Paramedics.

Your Executive was made aware of the contemplated changes in August of 2016. We found eliminating the early retirement provisions for Paramedics unacceptable and challenged the Plan Partners on it. With the financial assistance of CUPE National, your Executive retained legal counsel specializing in pension law.

As noted in previous updates, an actuary was also retained. Our legal counsel and actuary identified that the changes to the early retirement provisions significantly impacted Paramedics in a negative way. Again, unacceptable to Paramedics who need the ability to retire at 55 without a reduction in their pension given the nature of our profession and its toll on us physically and mentally.

Since being retained, our counsel has worked aggressively on the issue. I met with senior employer and Health Ministry representatives voicing our objections to changes in the early retirement benefits we currently enjoy; early retirement benefits Paramedics have negotiated and paid for.

This latest news from the Plan Partners is good for Paramedics and other plan members. Thank you to our lawyer, actuary, CUPE National and many others that have been working to ensure the early retirement provisions of our plan are maintained.

At this point, we are cautiously optimistic that the proposed changes that would have negatively impacted Paramedics and certain other Public Service Pension Plan members will not go ahead. We are also hopeful that with continued dialogue with the Member Plan Partner (BCGEU) and the PSPP, we will have an opportunity to closely examine and rationalize (if necessary) the way in which the Plan delivers benefits to Paramedics. The Executive continues to work with our lawyers and actuary to this end, and in the event the Partners resurrect the AIP in the future. Your Executive continues to monitor this matter,



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

It is important to note that members should not make decisions on their pension or retirement based on this communication, or any speculation as to what the Plan Partners were negotiating.

\$91.4 million Funding

In March 2017 we saw the BC Ministry of Health recently announced an additional \$91.4 million over the next three years for the BC Emergency Health Services to hire 60 paramedics, 20 emergency dispatchers and buy six new ambulances.

This announcement was an important step in the right direction.

It will begin to provide much needed resources towards BC paramedics, so families across the province can be confident that, in an emergency, they will get the care that they need when they need it.

We value our relationship with government, who, through our work together, strongly advocated for Community Paramedicine. This program is an example of how government can effectively utilize the ideas and solutions of BC paramedics to better serve our province.

Our hope is that the announcement of this funding will further support paramedics - BC's overextended frontline medical professionals - as well as rural and remote communities across the province.

It's important to recognize that, by funding Community Paramedicine, we are making an investment towards healthier communities, a healthier province, and a stronger rural economy.

Public Awareness Campaign: *A World with More Paramedics*

CUPE Local 873 (APBC), launched a multi-platform, province-wide public awareness campaign designed to bring the public's attention to the calls answered by BC's Emergency Dispatchers every day.

The campaign brought the public up close and personal to BC's most common public issues and medical emergencies, seen through the eyes of BC's paramedics. It is intended to raise awareness around the essential services provided by BC paramedics and emergency dispatchers, and our need for more government support and resources.

Given their superior level of training and equipment, BC Paramedics are the only frontline medical professionals qualified to handle BC patients during a medical crisis for early assessment, critical intervention, treatment, monitoring, transport and continuum of care to the emergency room and hospital.

Although the provincial government added \$91.4 million¹ in additional funding over the next three years for emergency health services², that was not enough for paramedics to properly service the residents of British Columbia. Currently, the national average response time goal is **8 minutes 59 seconds**. In British Columbia, it had



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

been reported that this goal is only being met 30% of the time.

Over the past 15 years, we've seen call volume increase. With that comes an increased demand for resources. The Government has not kept up with the demand for more resources and funding for our members. This means our front-line staff are now being stretched thin.

Through our campaign we were asking for the public's and the Employer's support in our request for adequate resources to ensure all British Columbians receive the proper care they deserve.

The great success of this campaign would not have been possible without the generous financial support of CUPE National, as they undertook the cost-shared campaign.

As a part of the campaign, three television commercials were produced and were aired across several platforms, including television and social media:

- Texts can wait, patients can't: <https://www.youtube.com/watch?v=LnSpOmT7bOs>
- Choking - the sudden killer: <https://www.youtube.com/watch?v=vwebpT1eJwM>
- Overdose - anywhere... anyone: <https://www.youtube.com/watch?v=zbZpRjeSBuo&t=4s>

Our *Imagine a World with More Paramedics* campaign has achieved the following views and impressions:

YouTube video views:	129,000
Twitter impressions:	135,000
Website visits:	18,000
Social Media video views:	360,000
Social Media post reach/views:	325,000

Thank you to the Paramedics that volunteered their time to take part in the campaign, also to our Director of Public Education, Annemarie Byers, and the Provincial Executive Committee.

Our PR campaign was a success! *More Paramedics* highlighted this deficiency and the current government is listening, hence the Premier's mandate to the Ministry of Health to "invest in more paramedics." A copy of the mandate has been attached for your reference.

Kilo Car Guarantee

On June 13, 2017 we came to agreement with the Employer and essentially ended the era of our members having to carry a kilo pager for days and weeks on end and not actually receiving pay. This four-hour guarantee will be paid to any kilo shift which does not receive at least one other call out. We see this as a positive step in the right direction.

The specifics and particulars are outlined within the agreement, which is available on the member's side of our website at www.APBC.ca



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

A few key points:

- Employees will NOT be required to attend the station to sign into the CAD, car check, etc., in order to claim the pay.
- This agreement is in place until either a new delivery model is agreed to, or the next round of bargaining, whichever may be first.
- Details about how to submit for the pay will be provided before July 1, 2017.
- The guaranteed 4 hours is pensionable time which counts towards benefit eligibility and the 84 hr limit in the pay period, prior to attracting over time rates as per the collective agreement.
- Employees assigned to work a Kilo shift and who complete the shift without a call out, shall receive a supplementary 4hrs pay.
- Employees shall continue to receive pager pay as per the current practice.
- Employees who work a partial Kilo shift, or split a Kilo shift with another employee, i.e. do not work the complete Kilo shift, shall not receive the 4hrs pay.
- The employer reserves the right to activate employees for up to four hours in substitution of the above guarantee, for the purposes of training, which would occur no more than 10 times per year.
- In the event employees are activated for the purpose of training the following will apply:
 - Any call out received within the first 2 hrs of the training activation will not attract a second call out and will be considered a continuation of the training activation;
 - If this call exceeds 4 hrs from the start of the training activation, employees will be paid as per current practice.
 - Any call out received within the second 2hrs of the training activation will be considered a separate call out and attract a 4hr minimum payment.
 - The employees' supervisor shall notify employees at least 7 days prior to the training day and the need to report for training.

Kilo shifts will continue to be assigned as per the current practice and the Collective Agreement.

2017 Wage Increase

We now know the numbers for the 2017 Economic Stability Dividend (ESD). The 2017 ESD will result in a 0.35% wage increase. Added to the other general wage increases, the 2017 wage increases will be:

- First pay period after February 1, 2017: 1.35%
- First pay period after April 1, 2017: 0.5%
- TOTAL 2017 GENERAL WAGE INCREASES: 1.85%

Universal hourly rate (UHR) will also be implemented on April 1, 2017. This will result in a further increase for Part Time employees, ranging between 16% and 40%. Detailed and updated UHR wage grids will be released in January 2016.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

873-02 Ratification Vote

The Emergency Dispatchers of BC, Local 873-02 ratified their new Collective Agreement in January 2017. 873-02 had their biggest turn out of voters to date with 59% voting in favour of the new Agreement. Special thanks to thank Ashton Paradis, Corey Kelso, David Buxton and John Strohmaier for all of their hard work during the bargaining process - and to Carolyn McDonald and Jolene Tregilges for their organization and assistance with the meetings.

Special thanks to Dave Guscott, former President and CEO of E-Comm, who recently retired. We welcome to his successor, Oliver Grüter-Andrew, we look forward to continuing a productive working relationship between E-Comm and the Union. You will be hearing more from Chairperson of Local 873-02, Shari Thomas's and her report.

Fire and Police Services Collective Bargaining Act

Inclusion into the *Fire and Police Services Collective Bargaining Act* is an issue that arose directly following the close of last year's convention. We look forward to bringing this topic to the fore front via a resolution at this year's Convention, as convention is the appropriate venue for you as members to have informed discussions, debates and direct your executive and the Ambulance Paramedics and Emergency Dispatchers of BC's strategic priorities and plans going forward.

We have asked our internal Union counsel Amanda Rogers to address convention as a guest speaker, one of the topics that Amanda will be touching upon includes but is not limited to the police and fire services bargaining act.

In the last year we were made aware on several occasions that misinformation surrounding past bargaining and related to the the police and fire services bargaining act. The misinformation prompted a lot of inquiries to the union from the public, the Paramedics and Dispatchers, politicians, the media and other allied unions and affiliations. Below are some of the most frequently asked questions including the answers provided:

Q: HAVE WE EVER BEEN LOCKED OUT?

A: No.

Q: ARE WE AN ESSENTIAL SERVICE IN BC?

A: Yes. Section 72 of the BC Labour Code designates us as such. In a previous labour dispute more than 100% of our services were deemed essential.

Q: DOES INCLUSION INTO THE *FIRE AND POLICE SERVICES COLLECTIVE BARGAINING ACT* GET BC PARAMEDICS AND EMERGENCY DISPATCHERS WAGE PARITY WITH POLICE AND FIRE?



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

A: No, the *Fire and Police Services Collective Bargaining Act* gets you a process other than a strike or lockout to break impasse at the bargaining table.

Q: DOES INCLUSION INTO THE *FIRE AND POLICE SERVICES COLLECTIVE BARGAINING ACT* MEAN OUR MEMBERSHIP LEAVES CUPE FOR ANOTHER UNION?

A: No

Q: WHAT HAPPENS IF PARAMEDICS AND EMERGENCY DISPATCHERS REACH IMPASSE AT BARGAINING AND THE *FIRE AND POLICES SERVICES COLLECTIVE BARGAINING ACT* COVERS THEM?

A: Either the Union or the Employer can apply to the Minister of Labour to have the dispute resolved by arbitration.

Q: IF WE'RE INCLUDED IN THE *FIRE AND POLICE SERVICES COLLECTIVE BARGAINING ACT* CAN WE STILL BE REQUIRED TO OBSERVE THE PUBLIC SECTOR BARGAINING MANDATE SET BY THE GOVERNMENT?

A: Yes, the Minister of Labour sets the Terms of Reference for arbitration. In other words, the government can still mandate our wages and benefits.

Q: WHAT IS THE INTEREST ARBITRATION PROCESS?

A: If the Minister of Labour orders the dispute be resolved by arbitration the Minister has the option of specifying the type of interest arbitration.

Typically, there are two types of interest arbitration:

- 1) Each party submits their written proposals and arguments on the outstanding issues and the arbitrator crafts a decision on the basis of the party's submissions.
- 2) Final offer settlement interest arbitration - again each party submits their written/ proposals and arguments and the arbitrator must select one or the other.

Q: HAS CUPE LOCAL 873 EVER DONE INTEREST ARBITRATION IN THE PAST?

A: Yes, three times. In 1997 CUPE Local 873-02 Emergency Dispatchers of BC were seeking wage parity with fire dispatchers. They reached impasse and launched a legal strike. The government ordered them back to work, appointed an Industrial Inquiry Commissioner and set the Terms of Reference as binding interest arbitration. The resulting settlement did not come close to what 873-02 was seeking at the bargaining table.

In 2008 our wages were subject to interest arbitration. The Union argued the interest arbitration was not restricted by the Public Sector Employer's Council (PSEC) wage mandate. The interest arbitration disagreed and ruled his settlement could not exceed the PSEC guidelines for wages.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Recently, we were engaged in interest arbitration to resolve a dispute over 1) shift patterns, 2) implementing regular part time and 3) the requirement for unit chiefs. The arbitrator issued his award in February 2017 and we were bound by his decision.

Due to misinformation spread amongst the membership, surrounding the unions involvement and or communications related to the grass roots initiative, I have included a summarized chronology between the Ambulance Paramedics and Emergency Dispatchers of BC and Joshua Henshaw, the lead in the Grassroots Initiative seeking inclusion of the BC Paramedics in the *Police and Fire Services Collective Bargaining Act*.

(Please note, the majority of the communication was done via email.)

October 7, 2016 – just days following the close of Convention 2016, the Union was contacted by Joshua Henshaw advising us of his personal efforts to have BC's public-sector paramedics included under the *Fire and Police Services Collective Bargaining Act* and further that he planned on achieving this via BC's *Initiative Act*, which was only available to private citizens, not to organizations.

Joshua Henshaw advised the Union that he had personally retained counsel and that counsel had already done initial research and had reviewed the viability of Joshua Henshaw's plan.

Joshua advised the Union that he had a small team of about ten paramedics steering the Initiative, as well as a broader base of support that he would become active once the application became public. He communicated his plan, which included a target of 2,200 volunteers throughout BC's 85 electoral districts, and a very exact and deliberate timeline that would see him, and his team, petitioning through the winter/spring BC election season.

Joshua Henshaw further communicated to the Union that considering it was a private citizen's initiative, he wanted to be thoughtful of whom he and his team associated with, and how they associated with them. He expected to have support from BC's labour community, but before he was planning any official engagement he and his team had some internal work to do.

Joshua Henshaw communicated that it was his intention to share the legal opinion he expected to obtain the following week along with as much disclosure as the Union wanted, while maintaining enough distance to keep Union officer's names from appearing on any of our organizational or operational documentation. Joshua Henshaw advised that he was meeting with his legal counsel on October 17, 2016 and invited the Provincial Executive Committee to meet with him following that meeting.

October 11, 2016 - Joshua Henshaw sent the Union the legal opinion he had acquired.

October 17, 2016 - The Union met with Joshua Henshaw and some of his team members. Where at which time Joshua summarized the Initiative and his plans and that going forward he would be seeking financial assistance. We asked him to provide the Union with his strategic plans including budgetary forecast breakdown costs to execute the Initiative for review, consideration possible support.

October 19, 2016 - The Union invited Joshua Henshaw to attend our November 2016 Provincial Executive



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Board Meeting to address the PEB, introduce the Initiative, answer questions and seek support.

October 26, 2016 - Joshua Henshaw advised the Union that the application regarding the Initiative had been submitted in person to elections BC and that there would be an undefined waiting period while elections BC would vet the application prior to granting approval in principle and further made public record.

November 1, 2016 - Joshua advised the Union that he had been informed by elections BC that approval in principle would be given to him November 10, 2016.

November 1, 2016 - The Union communicated to Joshua Henshaw to address the Provincial Executive Board on November 17, 2016.

The Union followed up on our October 17, 2016 request for strategic plans including budgetary forecasts, breakdown costs to execute the Initiative for review, consideration possible support.

The Union communicated with Joshua Henshaw, advising him of a 1400hrs timeslot to present to the Provincial Executive Board and entertain questions. Joshua Henshaw communicated to the Union that he was not interested in making any presentations to the Provincial Executive Board (PEB) or the Provincial Executive Committee (PEC), and further that after careful consideration, he felt it was important to present his Grassroots Initiative directly to the members of 873, and that the members in turn could then decide whether to direct the PEB and the PEC in regards to what if any level of support they would like to see.

The Union communicated to Joshua Henshaw that it was his decision whether he addressed the PEB, however that addressing the PEB would be a great start to introducing, seeking input and vetting any issues or concerns, considering that the PEB and the Chairs were elected by the "grassroots" membership provincially and that not addressing the PEB could potentially be a lost opportunity to gain support.

The Union further advised Joshua Henshaw that if he attended or not, that the Union would be raising the Initiative with the PEB to make them aware of the current matters and issues so they could respond accordingly to any questions so they could respond to any questions arising from the membership. The Union advised Joshua to let me know if he reconsidered our invite.

November 14, 2016 - The Union communicated with Joshua Henshaw to see if he had given anymore thought to addressing our PEB on November 17, 2016.

November 15, 2016 - Joshua Henshaw communicated to the Union that he would not be attending and that if we had any questions he would do his best to answer them and that he would send a pre-prepared statement to the PEB through his RVP.

The Union communicated with Joshua Henshaw that we would be connecting him with John Verde of the 10-7 Association.

November 17, 2016 - the Union communicated with Joshua Henshaw that the discussions at the PEB had gone well and asked him could discuss over the phone the following day.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

November 28, 2016 - Province-wide Member update sent out by CUPE Local 873 supporting Grassroots Initiative in principle.

December 19, 2016 - Joshua communicated with members of the PEC that more than a few questions had been sent his way asking why the Union wasn't paying for the Initiative and that he would provide members a spiel regarding wanting to stay arms length away from the Union, and that if they wanted the Union to contribute that they could direct the Union to do so. Joshua further advised that at the request of one of the Victoria members, that he had provided financial information to accompany a money motion that the member wanted to put forward and that he had understood that the motion had been forwarded to the PEC and that he was happy to answer any questions regarding the motion.

Joshua further communicated that he had support of 873 members as volunteers and canvassers and challenged the PEC and PEB to register as canvassers.

The Union corresponded with Joshua Henshaw that we were unaware of anyone sending a financial motion to the PEC and that I would need to discuss with our legal counsel being arms lengths away and potential Union donations/funding conflicts as well as whether association of the Union would help or hurt the initiative. I further sought Joshua Henshaw's input prior to speaking to Union legal counsel.

Joshua Henshaw responded to the Union that he wanted to make it clear that in his view that there was nothing in the Act that would preclude contributions by CUPE - whether monetary or time volunteered - Joshua Henshaw further expressed that he wanted to make it clear that it was clearly optics. Joshua Henshaw provided the Union with the financial information that he provided the Victoria member to accompany the member's motion. Joshua advised that he would be reaching out in the new year to other Unions and agencies for support.

Joshua requested a link from the APBC website to his campaign website. He further corresponded to the Union a correction that the money motion had been sent to his RVP and that it would be forwarded to the PEC and that in the meantime that he hadn't done anything more than passive collection of contributions and that he was confident that he would be able to meet his funding requirements by actively pursuing contributions.

Joshua also confirmed that he would be able to provide an updated overview of where the campaign was at prior to the next PEB, as he expected the bulk of his expenses to be funded at that point.

January 11, 2017 - PEB Board Meeting (conference call): the PEB voted in favor of making a \$5,000 donation in support of the Grassroots Initiative.

January 13, 2017 - PEC members received a communication from Joshua Henshaw stating that he, and a few members from his team were available to present to the PEB and asked if we have any time slots available.

January 16, 2017 - The Union communicated with Joshua Henshaw that we have an available PEB timeslot from 1600hrs to 1700hrs.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

January 17, 2017 - Joshua Henshaw communicated to PEC that he believes that there was confusion with regards to what we were communication to members on kilo/pager pay being allowed to canvass.

The Union communicated to Joshua Henshaw seeking clarification regarding Josh's communication with regards to the confusion, the Union was unaware of any communications involving the matters Joshua raised.

January 20, 2017 - The Union communicated with Joshua Henshaw and sent \$5,000 cheque donation to campaign.

January 30, 2017 - The Union communicated to Joshua Henshaw a summarized version of the Union's preliminary message box surrounding the Initiative.

BC paramedics are not deemed an essential service as the police and fire services are - the police and fire services are covered under the *Police and Fire Services Bargaining Act*.

This grassroots campaign is seeking to get the BC Paramedics and paramedic dispatchers included in the *Police and Fire Services Act*, which takes us out of the collective bargaining process and puts us in interest arbitration.

January 31, 2017 - Joshua Henshaw communicated with the Union that he acknowledged our message box in the media.

Joshua Henshaw advises he just spoke with the speaker and that he will be set up on between 10am-4pm on budget day on the legislature lawn.

February 8, 2017 - Joshua Henshaw attended the PEB. In summary, the Union invited him to do a presentation to the Board. Joshua Henshaw declined the opportunity to make a presentation about the Initiative and offered to take questions and comments from the Board.

February 9, 2017 - Joshua Henshaw communicated with the Union that he understood that a motion was put forward by a member of the PEC requesting a donation from CUPE National for \$5,000 towards the Paramedic initiative. Joshua Henshaw advised the Union that he was not interested in having the Executive of Local 873 fundraising on his behalf, and that he would not accept such a contribution.

February 10, 2017 - The Union communicated to Joshua Henshaw, that we really appreciated his attendance at our PEB meeting on February 8, 2016.

Further that his attendance at the PEB proved to be a great opportunity for the Board to ask him questions arising from and surrounding the initiative, including things Board members had been hearing in their various regions province wide from our members.

The Union further communicated with Henshaw that on February 9, 2017 the Board debated a motion brought forth by Region 1 South to donate money to assist with the Initiative that he was championing. The PEB discussion was not limited to, but did include some frustration that Joshua Henshaw was unwilling to provide any plans, projected costs or breakdowns related to the Initiative and that on more than one



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

occasion, Joshua Henshaw commented that he was not seeking the Union's financial support.

The Union also reiterated in a communication to Joshua Henshaw that the PEB's discussions included, but were not limited to, his response surrounding the unfavorable media towards the Facilities Bargaining Association (FBA) and the various Union's professions within the FBA, which include HEU and CUPE.

We advised Joshua Henshaw that the PEB ultimately defeated the motion, which included a financial donation, to assist him with the Paramedic Initiative.

We communicated to Joshua Henshaw that generally; the PEB supported him and the Initiative, but struggled with his unwillingness to disclose the information as requested. The Board did pass a motion to write to CUPE BC, and request they match the donation already provided to Joshua Henshaw by CUPE Local 873 and that we would be making that request in the near future.

The Union communicated to Joshua Henshaw that the Union Executive was available to speak with him should he have any further questions surrounding the motion.

The Union also advised Joshua that should he wish to reconsider providing the PEB with his projected costs, or cost break downs related to the Initiative, so we can make an informed decision on behalf of our members, that he could call the President directly.

February 10, 2017 - Joshua Henshaw communicated with the Union in summary; that it was his opinion that there was only one instance that one of his team members had made unfavorable comments towards CUPE and the FBA. He reiterated that he wasn't asking for money, he didn't feel supported by CUPE Local 873 and that attending the Board meeting was not a good use of his time, and that he would not be investing anymore time corresponding with the Board.

APBC Agreements between BCEHS and APBC - Precedent Setting Arbitration Award

In the matter of an arbitration between BCEHS and APBC, the policy grievance not only set a precedent on solicitor client privilege, it also illuminated who within the union should have the authority to negotiate terms of settlement on the behalf of the Ambulance Paramedics of BC and the potential liabilities for the Ambulance Paramedics of BC.

Considering the foregoing and in order to protect the interests of our members I have put BCEHS on notice that all agreements between the parties need to be signed off by a member of the Provincial Executive Committee Member.

This notification should not discourage Regional Vice Presidents from entering discussions surrounding labour relations with the Employer, the notification is intended to protect the members, APBC and the union officials.

A copy of Arbitrator Pekeles decision is attached to this report. A copy of the notification to the Employer has also been attached to this report.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Grievances / Arbitrations

We have a numbers of grievances / policy grievances on the go and queued up for arbitration, we have all hands-on deck processing and preparing the grievance matters to go forward. These grievances range from terminations, to the implementation of Universal Hourly Rate (UHR). Please stay tuned for more updates on specific matters as they are resolved. Many thanks to our CUPE National Staff Representatives John Strohmaier for his wise counsel and advice along with CUPE staff Representative Kevin Tilley who has been a huge assistance with Arbitrations and Labour Relations.

Political Actions: Provincial Elections

Following the May 9, 2017 Provincial Election, were left in some times of uncertainty with the election of the minority government, potential re election and non confidence vote.

Pre- election various parties and independents candidates made the following commitments to the questions we posed. We posed the following questions to each of the 369 B.C. electoral candidates.

1. If your party forms government, will you commit, to the Ambulance Paramedics and Emergency Dispatchers of BC, the creation of a sixth separate, stand-alone bargaining unit?
2. If your party forms government, will you commit that you will make an investment in rural community pre-hospital medical care by converting all standby paramedic shifts to paid positions?
3. If your party forms government, will you commit to improve mental health support for BC Paramedics and Dispatchers?

Response from B.C. New Democrats (NDP)

1. The B.C. New Democrats (NDP) party have committed verbally to moving the Ambulance Paramedics out of the FBA bargaining unit and giving us a stand-alone bargaining unit.
2. The BC NDP has long championed the rural community paramedic model, and we intend to invest and implement it across BC if we form government. This will involve fully utilizing paramedics currently working in rural areas, which in turn will stabilize staffing and improve both response times and health care delivery in smaller and remote communities across BC.
3. The New Democrats have tabled legislation that recognizes PTSD as a presumed workplace injury. We are also committing increased mental health supports for emergency responders. Such support is critical to protecting paramedics from mental health injury, especially in the wake of the overdose epidemic.

Candidates that responded (available to review on our APBC website);



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

- Justin Greenwood, BC Conservative MLA Candidate - Langley
- Leon David Dunn, Independent - Vancouver-West End
- Eric Kolotyluk, BC Green Party - Vancouver-Fraserview
- Josie Bleuer, BC Green Party - Chilliwack
- Arthur Alexander Green, BC Green Party - Fraser-Nicola
- Beat Klossner, Communist Party of BC - Kamloops-South Thompson
- Richard Percival Pattee, The Vancouver Island Party - Saanich South
- Duncan Boyd MacLeod, Independent - Columbia River-Revelstoke
- Jerry Kroll, BC Green Party - Vancouver-Mount Pleasant
- Julian Fell, BC Conservatives Party - Mid Island-Pacific Rim
- Adam Olsen, BC Green Party - Saanich North and the Islands
- Roy Sakata, BC Green Party - Richmond-Steveston
- Michelle Stilwell, BC Liberal Party - Parksville-Qualicum

We also met and had discussions with a number of candidates from various parties and reiterated our core issues. Following the election and the signing of the accord between the NDP and the Greens, the NDP contacted me and reiterated their commitment should they form government.

Since the NDP formed government, we have had a number of meeting with the various Ministers and MLA's and we intend to hold them to their commitments. We continue to promote our profession and pursue our priorities as outlined within of strategic plan.

UBCM

At the end of September 2017 APBC members and the Executive attended the annual Union of BC Municipalities (UBCM) conference in Vancouver. It is an annual event that we regularly attend because it provides a unique opportunity, over the course of the four-day conference/trade show, for our team to connect with mayors and councillors from communities across the entire province. It gives us the chance to hear directly from leaders in rural and larger communities about their specific concerns and needs with regard to ambulance service and community healthcare in their areas. We also get the chance to tell them what we are working on through our own advocacy efforts with the government and discuss how they can support us.

The three main issues we discussed were:

1. Downloading of emergency response to firefighters
2. Opioid addiction, abuse and death in both rural and urban communities
3. Community Paramedicine Initiative

We are attaching copies of the advocacy documents we developed and distributed at UBCM. One is tailored for urban communities and the other for rural communities.

You can see that we've also included a call to action in each section. It was important for us at UBCM to invite community leaders to communicate with government themselves to amplify our message and confirm the needs or service shortages of paramedics in the communities we serve. We know that by working together we can achieve good solutions, as we saw with the initial implementation of the Community Paramedicine Initiative last year.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

At UBCM, our executive leadership had the opportunity to liaise directly with Ministers, MLA's, council members, as well as other key government representatives. Many thanks to our Executive Political Liaison Sophia Parkinson, who has worked hard with the executive to build key relationships with government and our partners.

PMLC

For some time now, the Employer has been less than engaged with PMLC. Recently, at a Strategic Practice Advisory Council (SPAC) meeting, BCEHS informed us that they were moving forward with a plan to replace PMLC with another committee. This is a departure from what we discussed at previous meetings, which was a re-purpose of PMLC to focus on implementation of practice changes flowing from SPAC.

The new committee will be the Pharmacy, Therapeutics, Research and Practice Advisory Committee (PTRPAC). This committee will have a newly created Director of Paramedic Practice, which we have been informed will be a paramedic.

We await the final terms of reference, mandate and composition of the new committee. The only concrete information that we know right now is that the committee will align itself like other health committees under the Quality structure and that it will have practitioner input. We currently do not know how the practitioner representatives will be appointed or what type of function they will serve.

Unfortunately, there is no Collective Agreement language establishing a right to a PMLC and thus, we believe, the Employer can create, disband or modify committees under their right to manage article. Accordingly, we have no choice but to disband PMLC. Despite this, we remain committed to Paramedic practitioner involvement in both our quality and professional advancement processes.

As you may be aware, there is currently nominations for a position on the PMLC committee. Our Union bylaws define this position, and thus this nomination and election must continue until the bylaws are changed. A resolution to Convention was submitted to address this situation.

Team Canada - Rallye Rejviz International Medical Rescue Competition

Congratulations once again to Team Canada, Ontario took first place once again winning the gold medal at Rallye Rejviz, with Team Hungary Air Ambulance winning the silver medal, and Team Austria taking the Bronze. Our Team Canada BC placed a very respectable 6th place out of a field of 27 teams, from more than 14 countries.

Team BC consisted of: Alex Mattes, Will Riordon, Ron Van Houten and Gene Benoit.

Both Canadian teams represented our country and profession admirably. Clarke McGuire, Manager of Team Canada BC, was presented with an award for promoting our profession, and Rallye Rejviz worldwide. Special recognition should be given to Clarke, who puts countless hours every year towards managing the team, seeking sponsorship, and developing and coordinating complex training programs in preparation of the event. Thank you, Clarke - your award is very well deserved.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Congratulations Team Canada BC, Team Canada Ontario, and Clarke McGuire!

In Closing

I announced several months ago, that I decided it was time for me to move on and that I would not be seeking re election as the President for the Ambulance Paramedics and Emergency Dispatchers of BC.

It was by no means an easy decision, nor one that I made lightly. The last 19 years of serving the Union have been fulfilling, we've shared great triumphs and worked through some challenging times together. I sincerely wish the best to my successor, and will continue to be available following Convention to ensure a seamless transition.

No matter what the outcome of the Provincial Executive Committee election, I am confident in the resilience of the Ambulance Paramedics and Emergency Dispatchers of BC to persevere and continue to build on our profession with government and our various partners.

I would like to take a moment to thank the various members, current and past, of the Provincial Executive Committee, and Provincial Executive Board, the trustees as well as the committee members I worked alongside. Additional, thanks to our office staff Stacey, Kari and Sat, who make the wheels turn for us on a day to day basis.

I have had the privilege of working with a very cohesive team on the Provincial Executive team- while we're all focused on the responsibilities of our specific positions, it was to our advantage with the experience and knowledge base, we were interchangeable within our positions. I have been lucky to work with such a great group throughout my tenure.

Thank you all to all members for the great opportunity to represent the Union, while advocating on behalf of the Paramedics and Dispatchers has truly been a passion of mine, I'm looking forward to the next phase of my life and career.

I move adoption of my report.

Respectfully submitted,

Bronwyn Barter
Bronwyn Barter
Provincial President
CUPE Local 873

BB/sw/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Ambulance Paramedics

of British Columbia - CUPE 873



Tel: 604-273-5722 | Fax: 604-273-5762 | Toll Free: 1-866-273-5766 | Toll Free Fax: 1-866-273-5762
105 - 21900 Westminster Hwy., Richmond, BC V6V 0A8
info@apbc.ca | www.apbc.ca

June 20, 2017

Ms. Linda Lupini
Executive Vice President
BC Emergency Health Services
PO Box 9600 Stn Prov Govt
Block C, 2261 Keating X Road
Victoria, BC V8W 9P1

Dear Linda;

Re: Officers Authorized to Negotiate and Sign on Behalf of CUPE Local 873

As you may be aware, during the exclusive bargaining agency arbitration proceedings, the issue of senior labour relations persons and managers negotiating directly with shop stewards and others was in issue before Arbitrator Pekeles.

In view of conduct disclosed in the hearing I am compelled to write to inform you, that while we encourage discussion of issues at the local level, any proposed agreements arising from these discussions must be forwarded to the Provincial Executive of the Union for ratification.

Accordingly, we trust you will communicate to your managers that CUPE Local 873 Shop Stewards, Regional Vice-Presidents and other local representative do not have unilateral authority to negotiate or enter into agreements on behalf of CUPE Local 873.

Thank you for your attention to this matter. If you have any questions or need clarification, please contact me.

Sincerely,

Bronwyn Barter
Bronwyn Barter
Provincial President
Ambulance Paramedics of BC
CUPE Local 873

BB/sw/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017



July 18, 2017

Honourable Adrian Dix
Minister of Health
Parliament Buildings
Victoria, British Columbia V8V 1X4

Dear Minister Dix:

Congratulations on your new appointment as Minister of Health.

It has never been more important for new leadership that works for ordinary people, not just those at the top.

It is your job to deliver that leadership in your ministry.

Our government made three key commitments to British Columbians.

Our first commitment is to make life more affordable. Too many families were left behind for too long by the previous government. They are counting on you to do your part to make their lives easier.

Our second commitment is to deliver the services that people count on. Together, we can ensure that children get access to the quality public education they need to succeed, that families can get timely medical attention, and that our senior citizens are able to live their final years with dignity.

These and other government services touch the lives of British Columbians every day. It is your job as minister to work within your budget to deliver quality services that are available and effective.

Our third key commitment is to build a strong, sustainable, innovative economy that works for everyone, not just the wealthy and the well-connected. Together, we are going to tackle poverty and inequality, create good-paying jobs in every corner of the province, and ensure people from every background have the opportunity to reach their full potential.

These three commitments along with your specific ministerial objectives should guide your work and shape your priorities from day to day. I expect you to work with the skilled professionals in the public service to deliver on this mandate.

.../2

**Office of the
Premier**

Web Site:
www.gov.bc.ca

Mailing Address:
PO Box 9041 Stn Prov Govt
Victoria BC V8W 9E1

Location:
Parliament Buildings
Victoria



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2

As you are aware, we have set up a *Confidence and Supply Agreement* with the B.C. Green caucus. This agreement is critical to the success of our government. Accordingly, the principles of “good faith and no surprises” set out in that document should also guide your work going forward.

As minister, you are responsible for ensuring members of the B.C. Green caucus are appropriately consulted on major policy issues, budgets, legislation and other matters as outlined in our agreement. This consultation should be coordinated through the Confidence and Supply Agreement Secretariat in the Premier’s Office. The secretariat is charged with ensuring that members of the B.C. Green caucus are provided access to key documents and officials as set out in the agreement. This consultation and information sharing will occur in accordance with protocols established jointly by government and the B.C. Green caucus, and in accordance with relevant legislation.

British Columbians expect our government to work together to advance the public good. That means seeking out, fostering, and advancing good ideas regardless of which side of the house they come from.

Our government put forward a progressive vision for a Better B.C. that has won broad support with all members of the legislature. There is consensus on the need to address many pressing issues such as reducing health-care wait times, addressing overcrowded and under-supported classrooms, taking action on climate change, tackling the opioid crisis, and delivering safe, quality, affordable child care for all. As one of my ministers, I expect you to build on and expand that consensus to help us better deliver new leadership for British Columbians.

As part of our commitment to true, lasting reconciliation with First Nations in British Columbia our government will be fully adopting and implementing the United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP), and the Calls to Action of the Truth and Reconciliation Commission. As minister, you are responsible for moving forward on the calls to action and reviewing policies, programs, and legislation to determine how to bring the principles of the declaration into action in British Columbia.

In your role as Minister of Health I expect that you will make substantive progress on the following priorities:

- Prioritize the provision of team-based primary care by establishing urgent family-care centres across the province.
- Improve rural health services and expand the medical travel allowance for those who must travel for care.
- Work with the Parliamentary Secretary for Seniors to improve and strengthen services to ensure seniors receive dignified and quality care.
- Invest in more paramedics.
- Work to reduce wait times and implement province-wide co-ordination to manage and actively monitor waitlists.

.../3



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

3

- Provide the Therapeutics Initiative with the resources it needs to do its job effectively.
- Work with the federal government towards a national Pharmacare program and work with the B.C. Green caucus to develop a proposal to implement an essential drugs program.

All members of Cabinet are expected to review, understand and act according to the *Members Conflict of Interest Act* and to conduct themselves with the highest level of integrity. Remember, as a minister of the Crown, the way you conduct yourself will reflect not only on yourself, but on your Cabinet colleagues and our government as a whole.

I look forward to working with you in the coming weeks and months ahead.

It will take dedication, hard work, and a real commitment to working for people to make it happen, but I know you're up to the challenge.

Sincerely,




John Horgan
Premier



AMBULANCE PARAMEDICS OF BC EMERGENCY DISPATCHERS OF BC CUPE LOCAL 873



CONVENTION 2017

		<h3>Ambulance Paramedics Community Solutions</h3>
URBAN COMMUNITIES	VISIT US AT BOOTH 617	UBCM 2017
<p>Let's work together to find solutions to the most critical public healthcare issues facing BC's Urban Communities:</p> <ol style="list-style-type: none">1. Opioid addiction, overdose and death2. Downloading paramedics' work to fire fighters3. Community Paramedicine Initiative	<h3>Challenges in BC's Urban Communities</h3> <p>Emergency department overcrowding and paramedic delays in response time remain serious and potentially life-threatening concerns for residents of BC's larger communities. According to Statistics Canada, the population of the metro Vancouver area has increased by 6.5% between 2011 and 2016 (outpacing the national growth average) and in most urban centres the number of ambulances serving these areas has had little or no increase over the same period.</p>  <p>With the backlog in hospital emergency departments, paramedics often find they need to stay to care for the patients while they await assessment. Another challenge facing urban communities is increasing ambulance call volumes – some of which are 'frequent callers' or other types of requests that do not actually require treatment at an emergency ward. Ambulance paramedics are obliged to respond to these non-urgent calls and this aggravates the problem of delayed response times.</p> <p>On forming the new government, in his mandate letter to the new Minister of Health, Hon. Adrian Dix, Premier John Horgan listed seven key priorities for the Minister; one of them reads: "Invest in more paramedics". The Paramedics of BC are grateful for the acknowledgement of the urgency of this need in our communities and we look forward to supporting the Minister as he takes action in this regard. You can read the Premier's Mandate Letter to the Minister of Health, Hon. Adrian Dix here: https://goo.gl/4yWCEm</p> <h3>Dealing with Opioid Addiction, Overdose and Death</h3> <p>Opioid addiction, overdose and death are tragically part of our new reality in both urban and rural communities and we need to find new solutions to this devastating phenomenon. Paramedics are working collaboratively with government and other emergency responders to aggressively explore better ways to help. The Premier has mandated a greater investment in paramedics and that's an important first step but we urgently need to see more paramedics out on the front line now.</p> <p>According to B.C.'s chief coroner overdose fatalities increased from 414 to 780 during the period between January and June from 2016 to 2017. Fentanyl was detected in almost 80 per cent of fatalities between January and May 2017.</p> <h3>TAKE ACTION! How Mayors and Councillors can help:</h3> <ul style="list-style-type: none">• Speak to government about the Premier's mandate to "invest in more paramedics", ask when you can expect to see additional paramedics in your community.• Let them know how urgently your community needs more paramedics.• Provide them with the specific and unique situation in your area.• Share this information with other community leaders and members and urge them to reach out to government.	
<p>Did you know...?</p> <p>The national benchmark for ambulance response times to urgent calls is 9 minutes. Currently the BCAS averages approximately 13 minutes in urban areas and significantly longer in rural areas.</p> <p>Response times suffer due to high workload in urban areas.</p> <p>Most other Provinces in Canada have implemented new community-based paramedic services to address falling response times and workload issues.</p>		



AMBULANCE PARAMEDICS OF BC EMERGENCY DISPATCHERS OF BC CUPE LOCAL 873



CONVENTION 2017

As a municipal leader, you know the unique health care needs and health-related emergencies in your community. Your constituents are counting on you to mobilize and work with our Ministers and APBC to bring about the changes and improvements in health services they desperately need.

Patients deserve access to front-line medical professionals, paramedics and the continuum of care to the hospital.

**Let's talk
about your community
health concerns and how
paramedics can help.**
**Bronwyn Barter, President
APBC – booth 617**

Contact Resources:

**Hon. Adrian Dix,
Minister of Health**
adrian.dix.MLA@leg.bc.ca
Ph. (250) 953-3547 or
Vancouver constituency
office (604) 660-0314
<https://goo.gl/WRM428>

**Hon. Judy Darcy,
Minister of Mental Health
and Addictions**
judy.darcy.MLA@leg.bc.ca
Ph. (250) 952-7623 or New
Westminster constituency
office (604) 775-2101
<https://goo.gl/mfjNWb>



**Ambulance
Paramedics of BC**
Ph. 604 273 5722
Fax 604 273 5762
E-mail info@apbc.ca
Web www.apbc.ca

Downloading Ambulance Service to Firefighters is dangerous and costly

Given their superior level of training and equipment, BC Paramedics are the only frontline medical professionals qualified to handle BC patients during a medical crisis for early assessment, critical intervention, treatment, monitoring, transport and continuum of care to the emergency department.

By downloading emergency medical response to firefighters communities take on increased liability for those medical responses. In addition, we put patients and their communities at risk and overlap the use of valuable resources, which risks to over-load and exhaust our firefighters who have their own crucial role to play in keeping us safe.

TAKE ACTION! How Mayors and Councillors can help:

- Speak to government about the Premier's mandate to "Invest in more paramedics"; ask when you can expect to see more paramedics in your community.
- Express your concern to Government and to your constituents about the risks to communities and to firefighters that come with downloading. Seek their commitment to oppose this trend with clear legislation.

Community Paramedicine Initiative (CPI)

The CPI launched in April 2015 in nine prototype communities, followed by a provincial rollout that began in April 2016 with the inclusion of the first rural and remote communities. So far, the CPI has been implemented in 76 communities across the province, with more to come by March 2018. The further expansion of the CPI is on the horizon, including establishment of Advanced Care Paramedic CP's, which will be able to provide an even higher level of in-home care. Quite simply, Community Paramedicine makes sense for BC's rural and urban communities, both economically and also in terms of improving safety and the quality of healthcare we provide for our communities.

Benefits of the Community Paramedicine Initiative to the people of BC:

- CPI mainly serves patients 65 years and older who are living with chronic conditions such as heart failure, chronic obstructive pulmonary disease (COPD) and diabetes, or are at risk of falls.
- CPs assess/triage patients in their homes and transport to hospital only if needed, helping to alleviate ED overcrowding.
- The CPI is a sensible and cost-effective way to retain emergency responders on duty who can also make drop-in home visits to ensure the safety and health status of the elderly or infirmed.
- The CPI integrates CPs into the healthcare system without displacing other healthcare professionals.
- According to the March 2017 evaluation and snapshot report on the CPI, the initiative is making substantive progress in reaching its goals:
- Helping stabilize paramedic staffing in rural and remote communities by introducing community paramedics.
- Bridging health service delivery gaps in communities as identified in collaboration with local primary care teams.
- Reducing the number of 911 calls and emergency department visits.

TAKE ACTION! How Mayors and Councillors can help:



- Speak to government about the Premier's mandate to "Invest in more paramedics" and ask when you can expect to see more paramedics in your community.
- Inform government about your community's specific need for Community Paramedicine and ask when the CPI can be rolled out in your community.
- Share this information with other community leaders and constituents and urge them to reach out to government.



AMBULANCE PARAMEDICS OF BC EMERGENCY DISPATCHERS OF BC CUPE LOCAL 873



CONVENTION 2017

		<h3>Ambulance Paramedics Community Solutions</h3>
RURAL COMMUNITIES	VISIT US AT BOOTH 617	UBCM 2017
<p><i>Let's work together to find solutions to the most critical public healthcare issues facing BC's Rural Communities:</i></p> <ol style="list-style-type: none">1. Opioid addiction, overdose and death2. Downloading paramedics' work to fire fighters3. Community Paramedicine Initiative	<h3>Challenges in BC's Rural Communities</h3> <p>Many small- to medium-sized British Columbia communities are facing serious Paramedic recruitment and retention problems. Low emergency call volumes prevent adequate funding to justify the expense of full time Paramedic staffing. The withdrawal of locally funded Paramedic training has resulted in a steep decline of applicants for rural communities. Today, we face critical staffing shortages across the province.</p> <p>This staffing shortage leaves many communities facing long periods of time with reduced or no ambulance service at all. With an aging population, it is even more important that all British Columbians have an active and reliable ambulance service in their community.</p> <p>Along with staffing shortages, the regionalization of more healthcare services means patients face longer travel times to receive the care they need.</p> <p>The BC Ambulance Service must respond to these challenges by adapting to local needs and ensuring a reliable service to connect patients to the care they require.</p> <p>Healthcare costs continue to grow and the need to find efficiencies within existing budgets is becoming increasingly important. In order to maximize efficiencies, we need to consider new healthcare delivery models on a specific, community-by-community basis.</p> <p>The implementation of new ambulance delivery models requires all key stakeholders to work together. The existing bargaining structure prevents these discussions and means the issues facing the BC Ambulance Service are difficult to address.</p>	
<p>Did you know...?</p> <p><i>The national benchmark for ambulance response times to urgent calls is 9 minutes. Currently the BCAS averages approximately 13 minutes in urban areas and significantly longer in rural areas.</i></p> <p>Response times suffer due to staffing shortages in rural areas.</p> <p><i>Most other Provinces in Canada have implemented new community-based paramedic services to address falling response times and workload issues.</i></p>	<h3>Dealing with Opioid Addiction, Overdose and Death</h3> <p>Opioid addiction, overdose and death are tragically part of our new reality in both urban and rural communities and we need to find new solutions to this devastating phenomenon. Paramedics are working collaboratively with government and other emergency responders to aggressively explore better ways to help. The Premier has mandated a greater investment in paramedics and that's an important first step but we urgently need to see more paramedics out on the front line now.</p> <p>According to B.C.'s chief coroner overdose fatalities increased from 414 to 780 during the period between January and June from 2016 to 2017. Fentanyl was detected in almost 80 per cent of fatalities between January and May 2017.</p> <p>TAKE ACTION! How Mayors and Councillors can help:</p> <ul style="list-style-type: none">• Speak to government about the Premier's mandate to "Invest in more paramedics"; ask when you can expect to see additional paramedics in your community.• Let them know how urgently your community needs more paramedics.• Provide them with the specific and unique situation in your area.• Share this information with other community leaders and members and urge them to reach out to government.	



AMBULANCE PARAMEDICS OF BC EMERGENCY DISPATCHERS OF BC CUPE LOCAL 873



CONVENTION 2017

As a municipal leader, you know the unique health care needs and health-related emergencies in your community. Your constituents are counting on you to mobilize and work with our Ministers and APBC to bring about the changes and improvements in health services they desperately need.

Patients deserve access to front-line medical professionals, paramedics and the continuum of care to the hospital.

Let's talk
about your community health concerns and how paramedics can help.
Bronwyn Barter, President
APBC – booth 617

Contact Resources:
Hon. Adrian Dix,
Minister of Health
adrian.dix.MLA@leg.bc.ca
Ph. (250) 953-3547 or
Vancouver constituency
office (604) 660-0314
<https://goo.gl/WRM428>

Hon. Judy Darcy,
Minister of Mental Health
and Addictions
judy.darcy.MLA@leg.bc.ca
Ph. (250) 952-7623 or New
Westminster constituency
office (604) 775-2101
<https://goo.gl/mfjNwb>



**Ambulance
Paramedics of BC**
Ph. 604 273 5722
Fax 604 273 5762
E-mail info@apbc.ca
Web www.apbc.ca

Downloading Ambulance Service to Firefighters is dangerous and costly

Given their superior level of training and equipment, BC Paramedics are the only frontline medical professionals qualified to handle BC patients during a medical crisis for early assessment, critical intervention, treatment, monitoring, transport and continuum of care to the emergency department.

By downloading emergency medical response to firefighters communities take on increased liability for those medical responses. In addition, we put patients and their communities at risk and overlap the use of valuable resources, which risks to over-load and exhaust our firefighters who have their own crucial role to play in keeping us safe.

TAKE ACTION! How Mayors and Councillors can help:

- Speak to government about the Premier's mandate to "Invest in more paramedics"; ask when you can expect to see more paramedics in your community.
- Express your concern to government and to your constituents about the risks to communities and to firefighters that come with downloading. Seek their commitment to oppose this trend with clear legislation.

Community Paramedicine Initiative (CPI)

The CPI launched in April 2015 in nine prototype communities, followed by a provincial rollout that began in April 2016 with the inclusion of the first rural and remote communities. So far, the CPI has been implemented in 76 communities across the province, with more to come by March 2018. The further expansion of the CPI is on the horizon, including establishment of Advanced Care Paramedic CP's, which will be able to provide an even higher level of in-home care. Quite simply, Community Paramedicine makes sense for BC's rural and urban communities, both economically and also in terms of improving safety and the quality of healthcare we provide for our communities.

Benefits of the Community Paramedicine Initiative to the people of BC:

- CPI mainly serves patients 65 years and older who are living with chronic conditions such as heart failure, chronic obstructive pulmonary disease (COPD) and diabetes, or are at risk of falls.
- CPs assess/triage patients in their homes and transport to hospital only if needed, helping to alleviate ED overcrowding.
- The CPI is a sensible and cost-effective way to retain emergency responders on duty who can also make drop-in home visits to ensure the safety and health status of the elderly or infirmed.
- The CPI integrates CPs into the healthcare system without displacing other healthcare professionals.
- According to the March 2017 evaluation and snapshot report on the CPI, the initiative is making substantive progress in reaching its goals:
- Helping stabilize paramedic staffing in rural and remote communities by introducing community paramedics.
- Bridging health service delivery gaps in communities as identified in collaboration with local primary care teams.
- Reducing the number of 911 calls and emergency department visits.

TAKE ACTION! How Mayors and Councillors can help:

- Speak to government about the Premier's mandate to "Invest in more paramedics" and ask when you can expect to see more paramedics in your community.
- Inform government about your community's specific need for Community Paramedicine and ask when the CPI can be rolled out in your community.
- Share this information with other community leaders and constituents and urge them to reach out to government.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

IN THE MATTER OF AN ARBITRATION
BETWEEN

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES
(the "Employer")

-and-

AMBULANCE PARAMEDICS OF BRITISH COLUMBIA, CUPE LOCAL 873
(the "Union")

ARBITRATOR: Robert Pেকেles
COUNSEL: Gabrielle Scorer, Julie Menten and Sarah Dickson, for the
Employer
Patrick Dickie and Michael Shapiro, for the Union
DATE OF DECISION: March 10, 2017



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2

INTRODUCTION

The Union applies for the production of the following documents and particulars:

- i. All documents concerning or touching upon the review conducted by Lisa Southern for the Employer in 2014 including, without limiting the generality of the foregoing, the following
 - (a) Any retainer agreement or retainer letter regarding the review;
 - (b) Any terms of reference for the review;
 - (c) Ms. Southern's report;
 - (d) Any correspondence or emails to or from Ms. Southern;
 - (e) Any notes of meetings or telephone conversations with Ms. Southern;
 - (f) Any internal correspondence, emails, notes of meetings, or notes of telephone conversations concerning or touching upon the review or any report or recommendations issued by Ms. Southern; and
 - (g) Any documents reviewed by Ms. Southern.
- ii. Particulars of the names of any other employee that the Employer contacted in regard to any possible apology or settlement related to Ms. Southern's investigation or her report.
- iii. Particulars of the negative consequences experienced by Ms. Christensen and Ms. Muller and the Employer's reasons for concluding same; and
- iv. Particulars of the ways in which the internal investigations conducted by the Employer did not meet expected standards of procedural fairness and the Employer's reasons for concluding same.

The matter was presented by means of lengthy submissions, statutory declarations, and a day of oral argument.

BACKGROUND

The Union's policy grievance dated November 19, 2014 (the "Grievance") concerns the Employer's unilateral investigation conducted by Lisa Southern and the Employer's subsequent payment of \$15,000 to each of bargaining unit members Tracy Christensen and Lorie Muller. The Union alleges, among other things, that the Employer's actions



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

3

were contrary to the Collective Agreement's provisions concerning procedures for investigating and resolving disputes and contrary to the Union's exclusive bargaining agency pursuant to the Collective Agreement and the *Labour Relations Code* ("the Code") and contrary to the Code's prohibition against interference with the administration of a trade union.

The Union asserts as follows:

1. In 2013, the Employer conducted an investigation pursuant to Article 31.03 into harassment complaints that bargaining unit employees Chad Swanson and Tracy Christensen had made about each other (the "First Investigation"). These complaints concerned conduct at the Employer's Station 257 in Maple Ridge.
2. On November 8, 2013, the Employer issued a report as a result of the First Investigation. The Employer also issued a written warning to Ms. Christensen (the "Christensen Discipline").
3. In late 2013 and early 2014, the Union filed four grievances regarding the First Investigation and the Christensen Discipline (collectively the "Christensen Grievances").
4. In May 2014, the Employer retained the Investigator to investigate a number of unspecified workplace complaints at Station 257 (the "Second Investigation").
5. On September 10, 2014, the Investigator delivered her findings and recommendations (the "Report") to the Employer.

The "Investigator" referred to by the Union was Southern. In this decision, I too will refer to her report dated September 10, 2014 as the "Report". I note that some 24 ½ of the Report's 32 pages dealt with the Christensen and Muller investigations.

On September 18, 2014, Jodi Jensen, the Chief Operating Officer of the Employer, with other representatives of the Employer had separate meetings with Christensen and Muller.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

4

Alan Boulier, a bargaining unit employee and steward, who was chosen by Christensen and Muller to be present, attended each meeting. The Union asserts that Boulier did not have authority to negotiate a resolve to the Christensen Grievances and that the Employer was aware of this. The Union further asserts that:

9. Mr. Boulier did not disclose his involvement in these negotiations or the findings and recommendations of the Report to the Union, contrary to his duties as a steward. Mr. Boulier also sought to structure the agreement between the Employer and Ms. Christensen so that information would not be disclosed to the Union, contrary to his duties as a steward. The Employer was aware of Mr. Boulier's conduct in this regard, but nonetheless continued to deal with him as if he was an authorized representative of the Union and agreed to structure the agreement between the Employer and Ms. Christensen so that information would not be disclosed to the Union.

10. On October 19, 2014, the Employer advised the Union that it wished to offer compensation to Ms. Muller and Ms. Christensen.

Jensen provided a statutory declaration which states in part as follows:

7. On September 18, 2014, representatives of BCEHS, including me, had separate meetings with Lorie Muller and Tracy Christensen. Mr. Al Boulier, the union representative chosen by Ms. Muller and Ms. Christensen to be present, attended each meeting.

.....

9. The purpose of the meetings was to acknowledge the personal hardship suffered by both employees which resulted from mistakes made by the Employer in how it had handled previous employment situations involving each of them. I offered an apology to each employee on behalf of the Employer.

10. I recall that in each meeting I was mindful of the fact that Ms. Southern's report was a privileged and confidential report and I was careful not to speak to any specific findings, conclusions or recommendations made by Ms. Southern in her report.

.....



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

5

15. Towards the end of each of the meetings on September 18, 2014, Kristy Child, who was Acting Director, Human Resources, BCEHS at that time, stated that the Employer recognized that each of the employees had experienced hardship and negative impact as a result of the Employer's prior actions involving them. Ms. Child said something to the effect that the Employer would like to discuss with each of them and Mr. Boulier what the Employer might be able to do to make each of them whole. She asked each employee to consider this and get back to her.

Bronwyn Barter, the President of the Union, was not in attendance at the meetings held with Christensen and Muller on September 18, 2014.

On October 30, 2014, the Union and the Employer met. John Strohmaier, a Union representative, provided a statutory declaration which states in part as follows:

2. On October 30, 2014, the Union and the Employer held a meeting to discuss various labour relations issues. Present for the Union were myself, Dave Deines, Provincial First Vice President of the Union, and Sherman Hillier, Provincial Second Vice President of the Union. Present for the Employer were Kristy Child, Director of Labour Relations, and Julie Wengi, Executive Director of Human Resources.

3. After discussing other issues, Ms. Child advised that the Employer would like the Union's agreement to pay money to Tracy Christensen and Lorie Muller to avoid a human rights complaint. Ms. Christensen and Ms. Muller are paramedics in the Union's bargaining unit who worked at the Employer's Ambulance Station 257 in Maple Ridge, BC. One of the Union representatives asked what it was about. Ms. Child advised that employees had bombarded the Employer with complaints. One of the Union representatives asked the Employer representatives to elaborate on the complaints but they refused to do so.

4. Ms. Wengi advised the Union that the Employer had hired a lawyer, Lisa Southern, to do an investigation following the complaints and that Ms. Southern had informed the Employer that a previous investigation it had done regarding complaints by Ms. Christensen was flawed, the Employer had a human rights liability, and the Employer should pay money to the two employees in return for a release.

.....



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

6

8. Ms. Child made it clear that the Employer was going to pursue the settlements with Ms. Christensen and Ms. Muller regardless of the Union's objections. The meeting ended with Mr. Deines advising the Employer representatives that the Union was not going to sign off on any settlement based on what they had been told thus far.

I pause to note that both Wengi and Child no longer work for the Employer.

On or about November 3, 2014 Linda Lupini, the Executive Vice President of the Provincial Health Services Authority (the "PHSA") and of the Employer, telephoned Barter. According to Barter's statutory declaration:

13. On or about November 3, 2014, Ms. Lupini telephoned me. Ms. Lupini advised me that Ms. Southern had done a re-investigation of complaints Ms. Christensen had previously made at Station 257 and had issued a report, as a result the Employer wished to make payments to Ms. Christensen and Ms. Muller, and that she needed me to agree to these payments. Ms. Lupini further advised me that there had been a lot of mistakes made in the original investigation of Ms. Christensen's complaints by past leadership of the Employer, and that a big issue in Ms. Southern's report was the Union's conduct in the original investigation of Ms. Christensen's complaints. I asked Ms. Lupini what she meant and she said that the Union had one person representing a number of different employees during the original investigation. I advised Ms. Lupini that this was the Union's longstanding practice in such investigations and that I could not agree to the payments to Ms. Christensen and Ms. Muller without seeing Ms. Southern's report. Ms. Lupini advised that she would get back to me.
14. On November 5, 2014, Ms. Lupini telephoned me again and advised that she was mistaken when she said Ms. Southern had done a re-investigation of Ms. Christensen's complaints and that instead Ms. Southern had reviewed the original investigation, that the Employer was not going to show me Ms. Southern's report, and that there were human rights issues, the Employer did not need the Union's agreement, and the Employer was going to make the payments to Ms. Christensen and Ms. Muller.

By contrast, Lupini's statutory declaration dated May 2, 2016 states in part as follows:

4. While I do not have a detailed recollection of these calls, my recollection is that I advised Ms. Barter that Ms. Southern had provided BCEHS with a



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

7

report regarding her review of Station 257. I believe I would have reiterated the privileged nature of the report. I told her I could not discuss the content of the report with her.

5. During my conversations with Ms. Barter I was always keenly aware that the Employer had committed to those employees who shared information with Ms. Southern that it would keep their information confidential.

6. My conversations with Ms. Barter are typically high level and strategic. To my recollection we have never discussed the details of any particular grievance. All grievances are discussed formally at the Provincial Joint Labour Management Committee which I have never attended.

For the purpose of this decision, I need not resolve the differences between Barter's and Lupini's statutory declarations.

On November 19, 2014, the Union filed the Grievance. On November 26, 2014 the Employer made payments of \$15,000 to each of Christensen and Muller.

Christensen pursued an unsuccessful Section 12 complaint against the Union under the *Code*. I note that in her complaint to the Labour Relations Board, Christensen referred to, among other things, the investigation conducted by Southern. Among other allegations, Christensen alleged that the PHSA had agreed to provide her with restitution and that Union officials did not assist her with restitution: see page 19 of her complaint. The Board ultimately dismissed Christensen's Section 12 complaint: see *Tracy Christensen*, BCLRB No. B233/2015.

In the course of Christensen's Section 12 proceeding, the Employer filed a written submission to the Board dated July 30, 2015. The Employer wrote in part as follows (the reference to the "Investigator" is a reference to Southern):

Ms. Christensen's complaint against CUPE Local 873 (the "Union") under section 12 of the *Code* is a matter between the Union and Ms. Christensen and BCEHS takes no position on the merits of the section 12 complaint.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

8

That said, we are of the view that some factual background may be of assistance to the Board in making its decision.

. . .

External Investigation

15. On or about April 28, 2014, BCEHS engaged an external investigator (the "Investigator") to conduct an investigation, in part, into workplace concerns that gave rise to the June 22 Incident (the "External Investigation").
16. The External Investigation identified several flaws in the initial investigative process. These were identified as follows:
 - (a) assessment of credibility
 - (b) failure to interview other key witnesses and take into account similar events;
 - (c) bias or perception of bias; and
 - (d) application of the law.
17. With respect to bias or perception of bias, the Investigator noted that a number of individuals raised a concern throughout the investigation process about Mr. Towle's representation of all witnesses, including Mr. Swanson and Ms. Christensen. The Investigator characterized Mr. Towle's participation in that role as "unusual" and found that his participation in all meetings would have made his ability to fulfill his role in properly representing the members throughout the process "impossible". The Investigator further concluded that Mr. Towle put himself in a conflict of interest by advising individuals with diverging interests.
18. With respect to the application of the law, the Investigator found that, even accepting the findings of the initial investigation, Ms. Christensen's behaviour was not sufficiently egregious to meet the legal definition of harassment. In particular, there were insufficient facts to support a conclusion that Ms. Christensen had engaged in a pattern of conduct designed to belittle and humiliate Mr. Swanson. As a result, the resulting disciplinary outcomes from the initial investigation could not be sustained.
19. The Investigator's report (the "Report") included recommendations relating to Ms. Christensen and the initial investigation.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

9

On November 25, 2015 the Union requested production of documents that are the subject of this application. On December 23, 2015 the Employer refused production on the basis of solicitor-client privilege.

On February 12, 2016 I issued a consent order for the production of a redacted Report, without prejudice to the Employer's position that the entire Report is covered by solicitor-client privilege. The Union was free to apply for production of the redacted portions of the Report and other documents concerning Southern's investigation and Report, but was not to rely on production of the redacted Report as waiver of solicitor-client privilege.

Lupini's statutory declaration dated April 11, 2016 states in part as follows:

4. At the material time I was employed as the Chief Human Resources Officer of PHSA and on April 10, 2014, I was appointed the Executive Vice President with PHSA and BCEHS. As part of my job duties, I provided management and oversight of the Human Resources Departments of BCEHS and PHSA.
5. At the material time, Julie Wengi was employed as the Executive Director of Human Resources, BCEHS. Ms. Wengi is no longer employed with the Employer.
6. In or around early 2014, Ms. Wengi approached me regarding a number of concerns among employees involving potentially sensitive labour and employment issues at Station 257.
7. In my experience some workplace concerns raised by employees are complicated and sensitive, in particular where they involve a number of employees in the same workplace.
8. It is my practice to seek legal advice when dealing with a workplace issue or concern that I conclude is of this nature.
9. After speaking with Ms. Wengi, I contacted Ms. Lisa Southern to inquire about her services as legal counsel. Lisa Southern is a lawyer with special expertise and experience in the field of labour relations, employment law and workplace issues.
10. I attended a meeting on April 28, 2014 with Ms. Wengi and Ms. Southern. Ms. Wengi and myself, on behalf of the Employer, requested that Ms. Southern provide legal advice to the Employer with respect to the workplace issues and employee concerns at Station 257, and to assess the Employer's compliance with workplace laws and obligations and provide recommendations to ensure these obligations were met at Station 257.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

10

11. Ms. Southern and the Employer agreed that she would investigate these concerns, acting as legal counsel for the Employer throughout the investigation.
12. Ms. Southern and the Employer agreed upon the terms under which she would investigate and signed an agreement titled Terms of Reference for an Investigation on April 28, 2014 (the "Terms"). The Terms are attached as Exhibit "A" to this statutory declaration.
13. It was my expectation and understanding that as legal counsel for the Employer, Ms. Southern at all times would conduct herself with the interests of the Employer in mind and provide legal advice to me with respect to the Employer's interests.
14. I did not have full knowledge of the facts concerning the workplace issues and employee concerns at Station 257. I knew that it would be necessary for Ms. Southern to gather information from employees, in order to be able to provide appropriate legal advice to the Employer in respect of its legal obligations regarding any workplace issues.
15. It is my belief and understanding that throughout the Investigation Ms. Southern and Ms. Wengi communicated about the investigation process and Ms. Southern provided her advice as legal counsel to the Employer about how the investigation should be conducted, in all respects.
16. The Employer relied on Ms. Southern for her legal advice regarding what steps were necessary for Ms. Southern to take in order to perform the investigation of the workplace issues, and in respect of other workplace issues of concern at Station 257.
17. At all times it was my expectation and understanding that all communications I had with Ms. Southern about the investigation and anything to do with the investigation of the workplace issues were subject to solicitor client privilege as she was the Employer's legal counsel providing legal advice about the workplace issues and investigation.
18. At all times it was my expectation and understanding that all materials prepared, obtained, relied on or created by Ms. Southern in her investigation would be subject to solicitor client privilege since she was acting as legal counsel to the Employer during the investigation of the workplace issues.
19. On completion of the investigation, Ms. Southern provided the Employer with a written report of her findings, opinions, recommendations and related legal advice, which report was clearly marked privileged and confidential (the "Report").
20. At all times it was my expectation and understanding that the Report was subject to solicitor client privilege as it reflected legal advice provided to the Employer by Ms. Southern.

Southern also provided a statutory declaration. In it she states that she is a labour and employment lawyer operating a legal practice. She further states that:



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

11

2. In my capacity as a labour and employment lawyer I am often retained by clients as legal counsel to conduct workplace investigations for the purpose of providing legal advice.
3. Provincial Health Services Authority ("PHSA") is an existing client of mine, and I have an ongoing and continuing solicitor-client relationship with them.
4. Through BC Emergency Health Services ("BCEHS"), PHSA oversees the BC Ambulance Service.
5. In early 2014 Linda Lupini, who was at that time the PHSA's Executive Vice President, contacted me to inquire about retaining my services as legal counsel.
6. I met with Ms. Lupini and Ms. Julie Wengi, then the Executive Director for Human Resources for BCEHS at that time, on April 28, 2014. Ms. Lupini and Ms. Wengi requested that I provide legal advice to PHSA and BCEHS (the "Client") with respect to concerns at a particular worksite. I was asked to conduct an "environmental scan" of the workplace; in other words, to gather information about employee concerns at the workplace, to consider whether the workplace was in compliance with applicable workplace laws and obligations, and to provide legal advice and recommendations regarding these matters.
7. The Client instructed me to conduct a fulsome confidential and privileged investigation to establish the factual foundation for the legal advice I would provide to the Client (the "Privileged Investigation").
8. The purpose of the Privileged Investigation was specifically to provide legal advice to the Client.
9. It was clearly, specifically and unequivocally understood between me and the Client that all communications between us, the Privileged Report, my work product including notes and documents created by me for the purpose of providing legal advice and all legal advice I provided to the Client during the Privileged Investigation would at all times and for all intents and purposes remain confidential and was protected by solicitor-client privilege.
10. On or around April 28, 2014, I prepared the Terms of Reference for the Privileged Investigation and delivered them to the Client for review, approval and execution (the "Terms"). Attached to this Statutory Declaration as Exhibit "A" is a copy of the Terms.
11. The Terms reflected my intention that the Privileged Investigation was protected by solicitor-client privilege and that the information collected by me during the course of the Investigation would be collected and treated as privileged and/or personal information supplied in confidence for the purposes of the *Freedom of Information and Protection of Privacy Act*, [RSBC 1996] Chapter 165.
12. I acknowledge that the Terms do not explicitly state I was retained as legal counsel for the purpose of conducting the Privileged Investigation. At the time I drafted the Terms I did not have a practice of including the fact that I was retained as legal counsel in the terms of



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

12

reference for an investigation. However, my intention and unequivocal understanding was that I was retained by the Client as legal counsel to conduct the Privileged Investigation, and that the purpose of the Privileged Investigation was to provide legal advice to the Client.

13. As the Client's legal counsel, I at all times had the client's legal interests in mind as I conducted the Privileged Investigation.
14. During the Privileged Investigation I interviewed some of the Client's employees to establish the factual foundation necessary to provide legal advice to the Client.
15. The employee interviews I conducted were purely voluntary on the part of the Client's employees; no employees were required to attend an interview with me.
16. The sole purpose of communicating with each employee I interviewed was to establish a factual foundation for the purpose of providing legal advice to the Client.
17. Prior to asking any questions I informed each employee I interviewed that I was legal counsel for the Client and had been retained to conduct a privileged and confidential investigation on behalf of the Client.
18. Prior to asking any questions, I informed each employee I interviewed that the information disclosed to me during the interview would be received in confidence, would be treated by me as strictly confidential, and would only be disclosed to the Client, or as required by law, or to ensure the fairness of the investigation.
19. I believe that due to the sensitive workplace issues being discussed, the employees I interviewed would not have been forthcoming with me had they not been assured that their identities and the information they disclosed would be received in confidence and would be treated by me as strictly confidential.
20. The questions I asked each employee I interviewed were fundamentally shaped by my knowledge of the applicable law and heavily informed by my role as legal counsel to the Client.
21. The notes I took of each interview were for the sole purpose of providing legal advice to the Client.
22. The Privileged Investigation involved my application of the civil standard of proof and my assessment of each interviewee's credibility against the appropriate legal test.
23. In the process of conducting the Privileged Investigation and throughout the process of the Investigation I provided legal advice to the Client, in the mutual expectation that all communications, written and oral, would always remain privileged and confidential.
24. On completion of the Privileged Investigation I provided a written report of my findings, and related legal advice, and recommendations to the Client, which report was clearly marked privileged and confidential (the "Privileged Report").
25. All written notes and documents relating to the Privileged Report were made for the purpose of providing legal advice to the Client.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

13

Before concluding these background facts, I note that I have set out these facts based upon the statutory declarations, as well as submissions, provided by the parties. None of the declarants were cross-examined on their declarations. The present application addresses the Union's preliminary application for the production of documents and particulars. In terms of the hearing of the merits, the parties are free to provide oral evidence with respect to any alleged facts. My point here is that the merits will be decided on facts that are established in oral testimony at the hearing (except to the extent that the parties agree about any of the facts).

RELEVANCE

The Union takes the position that the entire Report and all related documents are relevant to this proceeding. It sets out its position in the following terms in its submission:

7. We say that all of the requested documents are clearly relevant. These documents concern Ms. Southern's investigation and report. The Grievance concerns Ms. Southern's investigation, and whether that investigation is contrary to the collective agreement and the Labour Relations Code. The requested documents go directly to this central issue. (I will refer to this as the "first ground")

8. The Grievance also concerns the Employer's provision of compensation to Ms. Christensen and Ms. Muller, and whether that compensation is contrary to the collective agreement and the Labour Relations Code. It is clear that the Employer provided this compensation as a result of Ms. Southern's investigation and report. The requested documents go directly to this central issue as well.

9. Finally, the Grievance concerns the Employer's negotiating the compensation with Mr. Boulier when the Employer knew that Mr. Boulier did not have the authority to do so and that he was seeking to conceal information from the Union. To whatever extent the requested documents may speak to Mr. Boulier's involvement, they go to this central issue as well. (I will refer to this as the "third ground")

The Employer's position is as follows:



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

14

204 The Union's allegations in this grievance focus on two issues: 1) whether the Employer breached the collective agreement by unilaterally retaining Ms. Southern to conduct the Investigation, and 2) whether the Employer breached the Union's exclusive bargaining agency with members of the bargaining unit.

205 In order to be relevant to this dispute, the Redacted Information must go towards proving or disproving a material fact relating to one of those two issues.

206 There are three types of information in the Report. These include:

- (a) Information pertaining to Ms. Christensen, Ms. Muller, the Christensen Investigation, and the Muller Investigation that does not include identifying or personal information about other employees;
- (b) Information pertaining to Ms. Christensen, Ms. Muller, the Christensen Investigation, and the Muller Investigation that does include identifying or personal information about other employees; and
- (c) Information about workplace concerns not related to Ms. Christensen, Ms. Muller, the Christensen Investigation or the Muller Investigation.

207 The information in category (a) has already been disclosed to the Union.

208 It is the Employer's position that the information in category (b), while arguably relevant to the allegation that the Employer breached the collective agreement investigation/complaint processes, is protected by confidentiality privilege and FIPPA. The Employer submits this information is not relevant to the Union's allegation that the Employer breached the Union's exclusive bargaining agency.

209 The Employer submits that the information in category (c) is not relevant to the grievance and ought not to be disclosed.

The Union notes that the only difference between information in categories (a) and (b) is the presence of identifying or personal information about other employees. The Union argues that has no bearing on relevance. With regard to information in category (c), the Union notes that the Grievance concerns the Employer's unilateral investigation of complaints at Station 257. It expressly asserts that the Grievance is not limited to matters concerning Christensen and Muller. The Collective Agreement contains procedures for conducting workplace investigations. The Union alleges that the entire investigation was done contrary to the Collective Agreement. Consequently, the entire Report is relevant to



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

15

this arbitration and should be produced to the Union, subject of course to any valid claim of privilege.

In order to require that it be disclosed, the redacted information must be such that it could be used to prove or disprove a material fact, subject of course to any valid claim of privilege.

One of the issues before me will be whether by making those payments to Christensen and Muller, without the agreement of the Union, did the Employer interfere with the administration of the Union contrary to Section 6(1) of the *Code* and/or did it breach the Collective Agreement. Section 6(1) of the *Code* provides as follows:

Except as otherwise provided in section 8, an employer or a person acting on behalf of an employer must not participate in or interfere with the formation, selection or administration of a trade union or contribute financial or other support to it.

Relevant to that issue will be the reason the Employer made those payments. While I acknowledge the Employer's written submission that it does not intend to rely on the Report in responding to the Grievance, that is not determinative. There are two parties to the arbitration, the Union and the Employer. It is the Union's Grievance. Moreover, in oral argument before me, the Employer asserted that the payments to Christensen and Muller were good faith remedies for the two employees. The question for the Union remained: remedy for what? In the context of the present case it is entirely relevant for the Union to question the basis upon which the Employer made the payments to Christensen and Muller. The Report explains that in great detail. It is not sufficient for the Employer to provide the Union with Southern's conclusions. It must also fully disclose the bases for those conclusions.

Substantial portions of the Report have been redacted. The Employer's reasons for those redactions were to 1) protect the "Wigmore" confidentiality of the Employer-employee relationship, particularly by redacting those portions that dealt with employees other than



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

16

Christensen and Muller and 2) exclude information about workplace concerns not related to Christensen, Muller, the Christensen investigation or the Muller investigation. I will address the issue of Wigmore confidentiality later in these reasons. Strictly in terms of relevance, however, I have no doubt that the redacted information with respect to Christensen and Muller is relevant to an issue in the arbitration before me. It all goes to explain the factual underpinning of Southern's conclusions regarding the Christensen and Muller investigations, which is what caused the Employer to provide a remedy to those two women. The portions of the Report regarding the Christensen investigation and the Muller investigation resulted in the Employer's decision to provide monies to Christensen and Muller: see para 113 of the Employer's May 2, 2016 submission referred to below in the Waiver section of this decision, as well as Strohmaier's statutory declaration, at para. 4.

Having carefully reviewed the brief remainder of the Report under the overall title "Other Issues and Recommendations", I conclude that the information under the heading "Application of Various Policies and Tools" is also relevant to the Christensen matter.

With respect to the remainder of the Report I am prepared to assume, without deciding, that it is relevant. However, my conclusions and reasons below regarding the extent of waiver must be read in order to understand why this approach does not matter in terms of my conclusions in the Union's present application.

SOLICITOR-CLIENT PRIVILEGE

Solicitor-client communications are excluded however, not because the evidence is not relevant, but rather because there are overriding policy reasons to exclude this relevant evidence: *R. v. Gruenke*, [1991] 3 S.C.R. 263, at para. 26.

The Union acknowledges that the statutory declarations of Southern and Lupini provide some support for a claim of solicitor-client privilege: see Union's submission dated April 25, 2016, at para. 26. It submits, however, that a party's characterization of a relationship



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

17

is not necessarily determinative. While I agree with that submission, I easily conclude that the relationship between Southern and the Employer was one of solicitor and client and that the Report was the giving of legal advice by Southern to the Employer. The statutory declarations of both Southern and Lupini lend substantial weight to that determination. At the Parties' invitation, I have reviewed the unredacted Report. Having done so, it is clear that Southern was not just fact finding, but was giving her client legal advice with respect to, among other things, both the Christensen and Muller investigations and what the Employer should do to remedy the flaws in those investigations.

The Union relies on *Gower v. Tolko Manitoba Inc.*, 2001 MBCA 11 at paragraph 18:

Thus, the onus is on the person seeking to claim the privilege to establish three factors in connection with any particular document:

1. that the document was the giving or obtaining of legal advice;
2. the presence of a solicitor and the presence of a client; and
3. the existence of the solicitor-client relationship.

On the basis of Southern's and Lupini's statutory declarations and my review of the unredacted Report, I conclude that the Report was the giving of legal advice, that Southern, the lawyer, and the Employer, the client, were in a solicitor-client relationship. I conclude that Southern was acting as legal counsel to the Employer, and was not acting solely as a fact finding investigator. I note that Southern relied upon both court and arbitral authorities in providing her legal advice to the Employer in the Report.

As stated by the BC Court of Appeal in *College of Physicians of British Columbia v. British Columbia (Information and Privacy Commissioner)*, [2002] B.C.J. No. 2779:

31...Because legal advice privilege protects the relationship of confidence between solicitor and client, the key question to consider is whether the communication is made for the purpose of seeking or providing legal advice, opinion or analysis...

32...Legal advice privilege arises only where a solicitor is acting as a lawyer, that is, when giving legal advice to the client. Where a lawyer acts only as an investigator, there is no privilege protecting communications to or from her. If, however, the lawyer is conducting an investigation for the



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

18

purposes of giving legal advice to her client, legal advice privilege will attach to the communications between the lawyer and her client (see *Gower* at paras. 36-42)...

42. In my opinion, the Commissioner and the chambers judge erred in finding that the College's lawyer was not acting in her capacity as a lawyer when she investigated the Applicant's complaint. She was acting on her client's instructions to obtain the facts necessary to render legal advice to the SMRC concerning its legal obligations arising out of the complaint. As such, she was engaged in giving legal advice to her client.

As stated in *Gower*, at para. 19:

With respect to the first factor, the communication must be connected to obtaining legal advice, but legal advice is not confined to merely telling the client the state of the law. It includes advice as to what should be done in the relevant legal context. It must, as a necessity, include ascertaining or investigating the facts upon which the advice will be rendered. Courts have consistently recognized that investigation may be an important part of a lawyer's legal services to a client so long as they are connected to the provision of those legal services. As the United States Supreme Court acknowledged:

The first step in the resolution of any legal problem is ascertaining the factual background and sifting through the facts with an eye to the legally relevant.
[Upjohn Co. v. United States, 449 U.S. 383 (1981) (S.C.) at para. 23]

Based on both the case law, and the facts as set out in the Southern and Lupini statutory declarations, as well as my review of the unredacted Report, I have concluded that the relationship between Southern and the Employer was one of solicitor and client and that solicitor-client privilege attaches to the Report.

WAIVER

The next issue is whether or not the solicitor-client privilege has been waived. Both parties rely on a decision of Madame Justice McLachlin, then of the British Columbia Supreme Court, with respect to waiver of solicitor-client privilege in *S. & K. Processors Ltd. v.*



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

19

Campbell Ave. Herring Producers Ltd., [1983] B.C.J. No. 1499 (B.C.S.C.) (“*S. & K. Processors.*”):

Waiver of privilege is ordinarily established where it is shown that the possessor of the privilege (1) knows of the existence of the privilege, and (2) voluntarily evinces an intention to waive that privilege. However, waiver may also occur in the absence of an intention to waive, where fairness and consistency so require. Thus waiver of privilege as to part of a communication, will be held to be waiver as to the entire communication. Similarly, where a litigant relies on legal advice as an element of his claim or defence, the privilege which would otherwise attach to that advice is lost: *Hunter v. Rogers*, [1982] 2 W.W.R. 189. (at para. 6)

I have concluded that the Employer waived solicitor-client privilege with respect to at least part of Southern’s advice regarding Christensen and Muller when 1) it filed its submission to the Labour Relations Board dated July 30, 2015 in respect of Christensen’s Section 12 complaint under the *Code*, in the passages that I have quoted above in the Background section of this decision, combined with 2) the information set out in Strohmaier’s statutory declaration.

Lupini’s statutory declaration makes clear that she, on behalf of the Employer, knew of the existence of the privilege. As stated therein, she and Wengi met Southern on April 28, 2014 and requested that Southern provide legal advice to the Employer with respect to the workplace issues and employee concerns at Stationn 257, to assess the Employer’s compliance with workplace laws and obligations and to provide recommendations to ensure these obligations were met. Southern and the Employer agreed that she would investigate those concerns, acting as legal counsel for the Employer throughout the investigation. It was her expectation and understanding that the Report was subject to solicitor-client privilege as it reflected legal advice provided to the Employer by Southern: see paragraphs 10, 11 and 20 of Lupini’s statutory declaration.

The Employer’s submission to the Board was clearly voluntary. The Employer itself expressly noted that Christensen’s Section 12 complaint was a matter between the Union and her. The Employer took no position on the merits of Christensen’s complaint.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

20

Nevertheless, it was of the view “that some factual background may be of assistance to the Board in making its decision.”

Christensen’s Section 12 complaint referred to Southern’s investigation and the Union’s lack of assistance regarding the PHSA’s offer of restitution to her. The present Grievance, of course, concerns Southern’s Report and that same offer and payment of money to her, as well as to Muller. The Board proceeding and the Grievance are clearly related proceedings. Once a party waives solicitor-client privilege in one proceeding, that waiver applies to a second related proceeding in which the party who waived privilege is also a party: see *Camosun College v. Levelton Engineering Ltd.*, [2014] B.C.J.No. 1353, at para. 28. The Employer, as well as the Union, was a party to Christensen’s Section 12 complaint. The Employer, as well as the Union, is a party to the present arbitration.

The Employer voluntarily disclosed the Report’s critical conclusions about the Christensen investigation in its submission to the Board, which submission it properly copied to counsel for the Union. In particular, it disclosed Southern’s critical conclusions as follows:

16. The External Investigation identified several flaws in the initial investigative process. These were identified as follows:
 - (a) assessment of credibility
 - (b) failure to interview other key witnesses and take into account similar events;
 - (c) bias or perception of bias; and
 - (d) application of the law.

...

18. With respect to the application of the law, the Investigator found that, even accepting the findings of the initial investigation, Ms. Christensen’s behaviour was not sufficiently egregious to meet the legal definition of harassment. In particular, there were insufficient facts to support a conclusion that Ms. Christensen had engaged in a pattern of conduct designed to belittle and humiliate Mr. Swanson. As a result, the resulting disciplinary outcomes from the initial investigation could not be sustained.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

21

I conclude that the Employer voluntarily evinced an intention to waive solicitor-client privilege with respect to at least part of Southern's advice about Christensen, and indeed a critical part of it.

The Strohmaier statutory declaration makes clear that the Employer's disclosure was not merely with respect to Southern's conclusions regarding Christensen, but also with respect to her conclusions regarding Muller. At the October 30, 2014 meeting between representatives of the Employer and the Union, the Employer advised that it would like the Union's agreement to pay money to Christensen and Muller to avoid a human rights complaint. It further advised that it had hired Southern to do an investigation and that Southern had informed the Employer that a previous investigation it had done regarding complaints by Christensen was flawed, the Employer had a human rights liability and the Employer should pay money to the two employees in return for a release: see Strohmaier's statutory declaration at paras. 3-4.

The advice that the Employer got from Southern's Report resulted in the Employer's provision of a remedy to them. As stated in the Employer's submission dated May 2, 2016:

113. The Redacted Report provides sufficient disclosure of information about the only issues which were allegedly disclosed, which, generally speaking, involve alleged mistakes made in the Original Investigation and the finding that Ms. Christensen's conduct did not meet the legal definition of harassment, providing the basis for the conclusion that the Employer possibly faced human rights liability and resulting in its decision to provide monies to Ms. Christensen and Ms. Muller. The Redacted Report, already provided to the Union by order of the Arbitrator, sets out sufficient information about these specific issues, and fairness does not require disclosure of any further content of the Investigation Report. (emphasis added)

As noted earlier, one of the issues before me will be whether by making those payments to Christensen and Muller, without the agreement of the Union, did the Employer interfere with the administration of the Union contrary to Section 6(1) of the *Code* and/or did it breach the Collective Agreement. One of the central issues in that determination will be



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

22

why the Employer paid money to Christensen and Muller. That is very much a matter of substance, and indeed a vital issue, between the parties in this arbitration.

The advice that the Employer received from Southern in her Report, which resulted in the Employer's providing monies to Christensen and Muller, addresses one of the central issues in the arbitration before me namely, why did the Employer make the payments to Christensen and Muller. Moreover, Southern's recommendations resulting from her conclusions regarding Christensen and Muller also have an important bearing regarding the issue of the Union's exclusive bargaining authority. The Employer had already disclosed to the Union Southern's conclusions about the Christensen investigation in its submission to the Board regarding Christensen's section 12 complaint. The Strohmaier statutory declaration makes clear that the Employer's disclosure was not merely with respect to Southern's conclusions regarding Christensen, but also with respect to her conclusions regarding Muller. It did not, however, disclose the factual foundations of those conclusions or Southern's precise recommendations resulting from those conclusions which have an important bearing on the present arbitration. In short, the Employer has expressly waived privilege over part of Southern's advice regarding Christensen and Muller. Fairness and consistency require a conclusion that privilege has been waived over the entirety of Southern's advice regarding them. Put another way, as a matter of fairness and consistency, the Employer should not be permitted to disclose only to the extent that it wished to with respect to Southern's advice regarding Christensen and Muller, and then cloak itself in solicitor-client privilege to withhold the remainder of the Report with respect to them.

The Employer relies upon the B.C. Court of Appeal's decision in *Doman Forest Products Ltd. v. GMAC Commercial Credit Corporation*, [2004] B.C.J. No. 2045 ("*Doman Forest Products*"). Before quoting passages from *S. & K. Processors*, including the one quoted above, the Court of Appeal wrote:

12. Solicitor-client privilege, which protects the fundamental civil and legal right of citizens to communicate in confidence with their lawyers, will not be lightly abrogated: *Descoteaux v. Mierzwinski*, [1982] 1 S.C.R. 860 at



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017

23

875. It will, however, be considered waived when a party makes its state of mind material to its claim or its defence in such a way that to enforce the privilege would be to confer an unfair litigation advantage on the party claiming it...

The Court of Appeal went on to state:

18. Thus, in *Rogers v. Bank of Montreal*, supra, the privilege was waived because the elements of waiver were present. By its pleading, the bank put in issue its knowledge of the law that was at the heart of the dispute. Since the information sought was vital to the receiver's defence against the bank's claim that it had relied on the receiver's advice, fairness and consistency required that the privilege be waived.

19. On the other hand, a mere allegation as to a state of affairs on which a party may have received legal advice does not warrant setting aside solicitor-client privilege. This Court's decision in *Pax Management Ltd. v. C.I.B.C.* (1987), 14 B.C.L.R. (2d) 257, [1987] 5 W.W.R. 252 [cited to B.C.L.R.] makes that clear...

20. In the *Pax Management*, supra case, the material facts pleaded by the bank were that the alleged representations were not made or, if they were made, they were true. These were questions of fact to which any advice received by the bank, legal or otherwise, would have been irrelevant since it had not made its state of mind a material fact by its pleading. By way of contrast, in *Rogers v. Bank of Montreal*, supra the material fact pleaded was that the bank relied on the receiver's advice as to its legal position. That was a question of fact on which it was necessary to know whether the bank had received any legal advice from another source on the same subject for, if it had, it might not have relied on the receiver's advice.

...

25. In my view, the chambers judge erred in her statement of the applicable principle in this passage of her reasons.

...

27. Next, Doman did not make its state of mind material by pleading that the parties conducted themselves as if no Event of Default had occurred... (emphasis added)

The Employer argues that a mere reference to a "state of affairs" is not sufficient to warrant setting aside a legal right as important as solicitor-client privilege. It argues that its disclosures of Southern's advice would be in the nature of general statements made to convey a "state of affairs" and are not vital to the merits of the Grievance. I do not agree



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

24

that the Employer's disclosures of Southern's advice are not vital to the merits of the Grievance. As indicated earlier, they are vital to the merits of the Union's Grievance and particularly to the alleged breach of section 6(1) of the Code.

Moreover, returning to *S & K Processors*, recall that Madame Justice McLachlin referred to two examples where waiver may occur in the absence of an intention to waive where fairness and consistency so require. First, waiver of privilege as to part of a communication will be held to be waiver as to the entire communication. Second, where a litigant relies on legal advice as an element of his claim or defence, the privilege which would otherwise attach to that advice is lost. The Court of Appeal's decision in *Doman Forest Products*, and particularly its reference to "a mere allegation as to a state of affairs on which a party may have received legal advice" in the *Pax Management* case addressed the second example of implied waiver, and more particularly that implied waiver would not be found in those circumstances. That is not at all the basis upon which I have concluded that the Employer has waived privilege over Southern's advice regarding Christensen and Muller. The present case fits within the first example of implied waiver set out in *S & K Processors*. The basis of my conclusion is set out earlier namely, that having expressly waived privilege over part of Southern's advice regarding Christensen and Muller, fairness and consistency require a conclusion that privilege has been waived over the entirety of Southern's advice regarding them.

As indicated earlier though, even had I concluded that the reasoning in *Doman Forest Products* regarding "a mere allegation as to a state of affairs on which a party may have received legal advice" is applicable to the very different circumstances before me, the importance of the Employer's disclosures of Southern's advice regarding the alleged breach of section 6(1) of the Code would preclude me from concluding that it was a "mere allegation as to a state of affairs" on which the Employer received legal advice.



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017

25

EXTENT OF WAIVER

The Employer argues that when privilege has been waived, the question that must be asked is: to what extent? It goes on to argue that where waiver has occurred, solicitor-client privilege should only be interfered with "to the extent absolutely necessary in order to achieve a just result." The Employer goes on to argue that waiver only occurs to the extent that fairness requires it.

As stated by the B.C. Supreme Court in *Weir-Jones v. Taylor*, [2013] B.C.J. No. 1957 regarding the extent of the waiver of privilege:

68. In *Descoteaux et al. v. Mierzwinski*, [1982] 1 S.C.R. 860 at 875, the Court confirmed that solicitor-client privilege should only be interfered with to the extent absolutely necessary in order to achieve a just result. See also *Pacific Concessions, Inc.* at para. 13.

As further stated by the Court in *Biehl v. Strang*, [2011] B.C.J. no. 274:

47. Limiting the waiver of privilege to the matters put in issue is also consistent with the proposition in *Descoteaux* that the degree of interference with issues of privilege should be limited to what is necessary to ensure fairness. (emphasis added)

The Court in that case referred at length from *Pacific Concessions Inc. v. Weir*, 2004 BCSC 1682. In that case, the Court considered the scope of the waiver to flow from the defendant attaching an email between himself and his solicitor to an affidavit. The Court in *Pacific Concessions* held that: "I am satisfied that when Mr. Weir appended the email between himself and Ms. Holman to his affidavit filed at the summary trial, he waived solicitor-client privilege with respect to the matters contained in that email." (para. 15; emphasis added). The Court in *Biehl* went on to quote the following passages from *Pacific Concessions*, among others:



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017

26

26. In *Chow v. Maddess*, [1999] B.C.J. no. 2236, the plaintiff swore an affidavit which included as an exhibit a copy of a handwritten statement that she had prepared for her solicitor regarding a conversation between herself and an employee of one of the defendants. The defendants argued that solicitor-client privilege had been waived and sought all the documents in the solicitor's possession relevant to the action.

27. Coultas J. allowed the motion for production. He concluded that when the plaintiff waived privilege over her handwritten statement by exhibiting it in her affidavit, she also waived privilege over the documents and notes produced by her solicitor with respect to that statement. Citing the relevant principles stated in *Wigmore*, he observed, at para. 7, that "[T]he plaintiff cannot choose what will be produced and withhold the remainder – it would be unfair to allow this, as the plaintiff could choose the evidence most favourable to her and withhold the rest". Nonetheless, the court limited production to those documents in the solicitor's file that dealt with the matters raised by the handwritten statement, namely the conversation between the plaintiff and the employee.

28. A similar result was reached in *Murao v. Blackcomb Skiing Enterprises Limited Partnership*, 2003 BCSC 558, which arose out of a claim for personal injuries resulting from a snowboarding accident. The solicitor for the plaintiff swore an affidavit in which he set out statements that the plaintiff made to him describing the accident. The description in the solicitor's affidavit was not consistent with the plaintiff's version of events. The defendants brought an application for disclosure of the solicitor's file.

29. Sinclair Prowse J. concluded that solicitor-client privilege had been impliedly waived and ordered that certain materials in the solicitor's file be disclosed. However, she confined her order for disclosure to those communications or parts thereof that were pertinent to the matters mentioned in the affidavit. (emphasis in *Biehl*)

As noted above, in its submission dated May 2, 2016, the Employer wrote:

113. The Redacted Report provides sufficient disclosure of information about the only issues which were allegedly disclosed, which, generally speaking, involve alleged mistakes made in the Original Investigation and the finding that Ms. Christensen's conduct did not meet the legal definition of harassment, providing the basis for the conclusion that the Employer possibly faced human rights liability and resulting in its decision to provide monies to Ms. Christensen and Ms. Muller. The Redacted Report, already provided to the Union by order of the Arbitrator, sets out sufficient information about these specific issues, and fairness does not require



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

27

disclosure of any further content of the Investigation Report. (emphasis added)

The Union, by contrast, argues that the entire Report is relevant and that the Employer's reliance on the Report in this arbitration and in the related Board proceeding have put the entire Report at issue and that principles of fairness demand disclosure of the entire Report.

Having carefully reviewed the unredacted Report, and having compared it with the redacted Report, I have concluded that all of the Report relating to the Christensen and Muller investigations must be disclosed in full, subject to the exception set out below [and subject, as I explain later in this decision, to the type of conditions referred to by the Supreme Court of Canada in *A.M. v. Ryan*, [1997] 1 S.C.R. 157, ("*Ryan*"). I will refer further to the *Ryan* case in the Wigmore Confidentiality section of this decision.]

Reading just the redacted Report it is not possible to fully understand the substantive basis underlying Southern's conclusions regarding the Christensen and Muller investigations, which in turn caused the Employer to provide a remedy to those two employees. A central issue before me will be whether by making those payments, without the agreement of the Union, did the Employer breach the *Code* and the Collective Agreement. Not just relevant to that issue, but critical to it, will be the reason the Employer made those payments. The Employer made those payments based on the advice that it received from Southern: see para. 113 quoted above from the Employer's May 2, 2016 submission, as well as Strohmaier's statutory declaration, at para. 4. Moreover, Southern's recommendations resulting from her conclusions regarding Christensen and Muller also have an important bearing regarding the issue of the Union's exclusive bargaining authority. In my view, it is simply not fair for the Employer to state that the Report's conclusions resulted in the Employer's providing monies to Christensen and Muller, and at the same time assert that the Union should not be permitted to fully see the factual bases for those conclusions and Southern's recommendations resulting from her conclusions regarding Christensen and Muller. Accordingly, I have concluded that it is absolutely necessary for those portions of the Report to be disclosed to the Union in order to achieve not only a just result, but also a



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

28

fair hearing. Similarly, the information under the heading “Application of Various Policies and Tools”, which pertains to the Christensen matter must be disclosed.

In this connection, I note the obligation of an arbitration to provide a fair hearing as expressly set out in Section 99(1)(a) of the *Code* which provides as follows:

On application by a party affected by the decision or award of an arbitration board, the board may set aside the award, remit the matters referred to it back to the arbitration board, stay the proceedings before the arbitration board or substitute the decision or award of the board for the decision or award of the arbitration board, on the ground that:

- (a) a party to the arbitration has been or is likely to be denied a fair hearing, or
- (b) the decision or award of the arbitration board is inconsistent with the principles expressed or implied in this Code or another Act dealing with labour relations.

The exception to my conclusion above is the last 3 sentences in the middle paragraph on page 23 of the Report and Tab 6 of the Report, which do not have anything to do with Christensen, Muller and their respective investigations. In my view it is not absolutely necessary to disclose them in order to achieve a just result, nor would there be any unfairness to the Union by not disclosing them. I must add that those 3 sentences are, at best, only marginally relevant to the issues raised by the Grievance.

I do not agree with the Union that principles of fairness demand disclosure of the entire Report. The Employer’s waiver of solicitor-client privilege was exclusively with respect to Southern’s advice regarding Christensen and Muller. The Employer has not waived privilege with respect to the remainder of the Report. Consistent with *Biehl v. Strang* and the caselaw cited in that decision, the remainder of the Report which is protected by solicitor-client privilege, and which has not been waived by the Employer, should not be disclosed.

I pause to address the statement in *S & K Processors Ltd.* quoted above that “waiver may also occur in the absence of an intention to waive, where fairness and consistency so require. Thus waiver of privilege as to part of a communication, will be held to be waiver



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

29

as to the entire communication.” That second statement flows from the first statement. Hence, Madame Justice McLachlin’s use of the word “Thus”. Accordingly, where fairness and consistency so require, a party will not be permitted to waive privilege as to part of a communication, and yet seek to maintain privilege over the remainder of the communication. Where, however, fairness and consistency do not require the disclosure of the remainder of the privileged communication, it need not be disclosed: see, for example, *Power Consolidated (China) Pulp Inc. v. British Columbia Resources Investment Corp.*, [1988] B.C.J. No. 1960 (B.C.C.A).

Solicitor-client privilege is fundamental to the proper functioning of our legal system: see, for example, *Canada (Privacy Commissioner) v. Blood Tribe Department of Health*, 2008 SCC 44, at para. 9. Given the fundamental importance of solicitor-client privilege, I do not see the remainder of the Report (including Tab 10, which is irrelevant to the arbitration), the privilege with respect to which has not been waived by the Employer, as being necessary to disclose. Nor will there be any unfairness to the Union, in the sense contemplated by *S & K Processors* regarding waiver of solicitor-client privilege, by not disclosing the remainder of the Report. Rather, it would be unjust and unfair for the Employer to have to reveal the remainder of the Report, which was protected by solicitor-client privilege and which was not waived by the Employer.

I should note that, although not the basis of my decision regarding the extent of waiver, all references to Boulrier in the Report and attached Tabs (i.e. relating to the Union’s third ground) are included in those portions of the Report and attached Tabs that, as I have already held, must be disclosed to the Union.

WIGMORE CONFIDENTIALITY

In the alternative, the Employer opposes the disclosure of the documents on the basis of the Wigmore test of confidentiality. This type of case by case privilege was adopted by the Supreme Court of Canada in *Slavutych v. Baker*, [1976] 1 S.C.R. 254. The B.C.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

30

Supreme Court outlined the requirements of this test in *Cimolai v. Hall*, [2004] B.C.J. No. 187 in the following terms:

44. The test for such a privilege against the disclosure of communications is derived from that propounded by Wigmore, *Evidence*, McNaughton revision, Vol. 8 (Toronto: Little Brown and Co., 1961) at 2285. Four conditions must be met:

1. The communications must originate in a confidence that they will not be disclosed
2. This element of confidentiality must be essential to the full and satisfactory maintenance of the relation between the parties
3. The relation must be one which, in the opinion of the community, ought to be sedulously fostered, and
4. The injury that would inure to the relation by the disclosure of the communications must be greater than the benefit thereby gained for the correct disposal of litigation.

All four conditions must be met. Whether or not the conditions are met depends on the circumstances of each case: see, for example, *Cimolai v. Hall*, at para. 48.

I agree that on the evidence before me, the first Wigmore condition is met. As set out in Southern's statutory declaration at para. 18, prior to asking any questions, Southern informed each employee that she interviewed that the information disclosed to her during the interview would be received in confidence, would be treated by her as strictly confidential, and would only be disclosed to the PHSA and the Employer, or as required by law, or to ensure the fairness of the investigation.

In terms of the second Wigmore condition, in the particular circumstances of the present case, I conclude that it too has been met. I note para. 15 of Southern's statutory declaration which indicates that the employee interviews which she conducted were purely voluntary on the part of the employees. In light of the sensitive workplace issues being discussed, I conclude that Southern's belief, as expressed in para. 19 of her statutory declaration, was well founded. In that paragraph she declared: "I believe that due to the sensitive workplace issues being discussed, the employees I interviewed would not have been forthcoming with me had they not been assured that their identities and the information they disclosed would be received in confidence and would be treated by me as



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

31

strictly confidential.” Southern, as counsel for the Employer, was acting on behalf of the Employer in the interviews that she conducted. Given the sensitive workplace issues, I conclude that the element of confidentiality was essential to the full and satisfactory maintenance of the relation between the Employer and employees - at least, and particularly, in the context of the Employer’s investigation.

In terms of the third Wigmore condition I am prepared to assume, without deciding, that it too is met. I note that the Union relies on the B.C. Court of Appeal’s decision in *Hacock v. Vallanincourt*, [1989] B.C.J. No. 1860 for the proposition that the third Wigmore condition is not met in the present case. The Employer seeks to distinguish that case from the present one. In view of my conclusion on the fourth Wigmore condition, I need not resolve that issue.

I turn to the fourth Wigmore condition. I begin by carefully noting the following statements of the majority of the Supreme Court of Canada in *Ryan*:

31...For privilege to exist, it must be shown that the benefit that inures from privilege, however great it may seem, in fact outweighs the interest in the correct disposal of the litigation.

32. At this stage, the court considering an application for privilege must balance one alternative against the other. The exercise is essentially one of common sense and good judgment. This said, it is important to establish the outer limits of acceptability. I for one cannot accept the proposition that “occasional injustice” should be accepted as the price of the privilege. It is true that the traditional categories of privilege, cast as they are in absolute all-or-nothing terms, necessarily run the risk of occasional injustice. But that does not mean that courts, in invoking new privileges, should lightly condone its extension...

33. It follows that if the court considering a claim for privilege determines that a particular document or class of documents must be produced to get at the truth and prevent an unjust verdict, it must permit production to the extent required to avoid that result. On the other hand, the need to get at the truth and avoid injustice does not automatically negate the possibility of protection from full disclosure. In some cases, the court may well decide that the truth permits of nothing less than full production. This said, I would venture to say that an order for partial privilege will more often be



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

32

appropriate in civil cases where, as here, the privacy interest is compelling. Disclosure of a limited number of documents, editing by the court to remove non-essential material, and the imposition of conditions on who may see and copy the documents are techniques which may be used to ensure the highest degree of confidentiality and the least damage to the protected relationship, while guarding against the injustice of cloaking the truth.

...
37. My conclusion is that it is open to a judge to conclude that psychiatrist-patient records are privileged in appropriate circumstances. Once the first three requirements are met and a compelling prima facie case for protection is established, the focus will be on the balancing under the fourth head. A document relevant to a defence or claim may be required to be disclosed, notwithstanding the high interest of the plaintiff in keeping it confidential. On the other hand, documents of questionable relevance or which contain information available from other sources may be declared privileged. The result depends on the balance of the competing interests of disclosure and privacy in each case...

In terms of the injury to the relationship between the Employer and employees in question by the disclosure of the communications, I note that the redacted information is personal or identifying information that was provided to Southern on the understanding that it would remain confidential between the employee and the Employer. Some of this information is personal and sensitive, including information about relationships between employees. In my view, disclosure of the information would cause some injury to the relationship between the Employer and the employees in question, in that the employees will note that the information that they provided to Southern, and hence to the Employer, will have been disclosed. I do note, however, that Southern advised each employee, prior to asking any questions, that the information disclosed to her during the interview would be disclosed, among other things, "as required by law". I therefore reject the Employer's submission that there would be "irreparable damage" to the employees' trust in the Employer if the redacted information were disclosed. I also note that the investigation conducted by Southern was a one-off investigation at one worksite namely, Station 257 in Maple Ridge, as opposed to an ongoing human rights process such as the one considered in *Cimolai v. Hall*. In this respect, the disclosure of the documents will have less of an impact than it would if the investigation were part of a regular ongoing process, or if the investigation were province-wide.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

33

I pause to note that the Employer relies on the *Freedom of Information and Protection of Privacy Act*, [RSBC 1996] Chapter 165, but expressly acknowledges that an arbitrator is not bound by the disclosure rules under that Act and agrees that that Act does not bar an arbitrator from ordering disclosure of any particular document. Indeed, Section 33.1 (1) (t) of that Act expressly permits a public body to disclose personal information “to comply with a subpoena, a warrant or an order issued or made by a court, person or body in Canada with jurisdiction to compel the production of information.” (emphasis added). I agree with the Union’s submission that that Act does not prevent me from ordering production of the Report, nor does it assist in determining whether or not the documents are privileged. The latter determination in the present context is to be made under the Wigmore conditions, and particularly under the fourth condition balancing the injury caused by the disclosure against the benefit that would be gained for the correct disposal of the litigation. That depends upon the particular factual circumstances of each case. I have already concluded that the disclosure of the information would cause some injury to the relationship between the Employer and the employees in question.

As against that injury to the relationship between the Employer and the employees in question, however, must be weighed the benefit that would be gained for the correct disposal of the Union’s Grievance. As set out earlier in the Extent of Waiver section of this decision, I have concluded that it is necessary for the majority of Report, as set out in that section, to be disclosed to the Union in order to achieve a just result, as well as a fair hearing as required by the *Code*. As stated earlier, the factual foundations of Southern’s conclusions regarding Christensen and Muller, as well as her recommendations resulting from those conclusions, are important in terms of the issues in this case including the alleged breach of section 6(1) of the *Code* and the Union’s exclusive bargaining agency. I have concluded that in the particular circumstances here, the benefit to be gained for the correct disposal of the Union’s Grievance outweighs the injury that would inure to the relation by the disclosure.

However, the remainder of the Report protected by solicitor client privilege (as set out in the Extent of Waiver section of this decision) need not be disclosed to the Union.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

34

Moreover, the imposition of *Ryan* conditions including who may see the Report and limits on copies of the Report, would be a useful additional way to balance the competing interests under the fourth Wigmore condition in the particular circumstances of the present case. I leave it to counsel to work out the *Ryan* conditions (as per their agreement in the oral hearing). Failing agreement, I reserve jurisdiction to hear from them and resolve whatever condition(s) they are unable to agree upon.

DOCUMENTS AND PARTICULARS TO BE DISCLOSED

With respect to the Terms of Reference for the investigation, I agree with the Employer that it has not waived privilege over them by virtue of its production of them in this preliminary hearing. As stated in the terms of counsel for the Employer's letter dated February 12, 2016, which formed part of my consent order:

The Employer shall produce to the Union a redacted version of Ms. Southern's report, without prejudice to the Employer's position that the entire report is covered by solicitor-client privilege.

The Employer has relied on the Terms of Reference in this preliminary hearing as part of its onus to establish the factual foundation of its claim that the Report is covered by solicitor-client privilege. The disclosure was not voluntary, and does not meet the test for express waiver as set out in *S & K Processors*. The same is true for Southern's retainer letter. As I concluded earlier, the Report is covered by solicitor-client privilege. So, too, are the Terms of Reference and retainer letter.

However, in its submission to the Labour Relations Board, the Employer stated, among other things, that it had "engaged an external investigator (the "Investigator") to conduct an investigation, in part, into workplace concerns that gave rise to the June 22 Incident..." Strohmaier declares in his statutory declaration, among other things, that: "Ms. Wengi advised the Union that the Employer had hired a lawyer, Lisa Southern, to do an investigation following the complaints..." I earlier concluded that fairness and consistency require a conclusion that privilege has been waived over Southern's advice relating to the Christensen and Muller investigations. So, too, do I conclude that fairness and consistency



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

35

require a conclusion that privilege has been waived over the Terms of Reference of Southern's hiring and Southern's retainer letter. However, in terms of the retainer letter, all that needs to be disclosed is the fact that it is between Southern and Wengi of the Employer and the first two sentences ending in the words "on the following terms". The remainder of the letter simply sets out the financial terms of her services, which are irrelevant to the issues before me.

In terms of the documents in (i) (d) through (g) sought by the Union, I have not seen them (apart from the Tabs attached to the Report). The Employer argues that they are subject to solicitor-client privilege. For the reasons set out above, along with the cases cited by the Employer, I agree that they are subject to solicitor-client privilege. However, for the reasons set out above, I have concluded that the Employer has waived solicitor-client privilege with respect to Southern's advice regarding Christensen and Muller and that the majority of the Report, as set out in the Extent of Waiver section of this decision, must be disclosed. The Employer is to produce those of the documents in (i) (d) through (g) which are consistent with my conclusions in this decision. I retain jurisdiction to resolve any issue(s) regarding those documents that the parties are unable to resolve on their own. This order for disclosure will equally be subject to *Ryan* conditions as set out earlier.

With respect to the particulars sought by the Union, the Employer advised in oral argument that in terms of the negative consequences experienced by Christensen and Muller and the Employer's reasons for concluding same, the Employer adopts the information provided by Christensen at Exhibit D of Barter's statutory declaration and the information provided by Muller at Exhibit E of Barter's statutory declaration. The provision of those parts of the Report, and documents, that I have ordered to be disclosed will provide the particulars sought by the Union under items (ii) and (iv) of its request for particulars.

I retain jurisdiction to settle the *Ryan* conditions, if need be, as well as to resolve any other dispute between the parties that may arise out of this decision.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

36

Dated at the City of Vancouver, in the Province of British Columbia, this 10th day of March 2017.



Robert Pেকেles
Arbitrator



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Provincial Vice-President's Report

Hello everyone, and welcome to Convention 2017. We have had a busy, but very productive year. The following is a brief outline of the key indicatives and projects that we have been involved with over the last year. The Employer continues to disregard the Collective Agreement and in some cases, their own policy and procedures. We have made a significant impact on the grievance backload while at the same time are proceeding to multiple arbitrations. The professional advancement activities are plentiful and this is a very exciting time for the profession.

As we proceed into the new year, we are on track for a record arbitration year and busy time with both labour relations, and support to the Provincial Executive Board.

As always, we have cross-referenced the following topics with the strategic plan for your information.

Opioid Crisis (SP 2.1.1, 2.1.4, 2.1.5)

Upstaffing:

The Union and the Employer met to discuss the temporary staffing EOIs the Employer has been utilizing. We were able to address a few of the items and come to an agreement to proceed. The Region will be working with the Area Directors to address issues as they arise.

- The Halo Units were staffed by UC in the post, and due to posting concerns, they have now been shut down.
- 49 Oscar; We asked our Provincial Safety Director, Corey Viala to review the deployment of this unit for any safety issues.
- The ACP/PRU/TA remains a contentious issue, the Union has filed a policy grievance regarding the posting and the selection. The Employer has now filled these positions as Paramedic Specialists. Read further in the report on the Specialist issues.

Media:

We continue to do media interviews on the issues around the opioid crisis and the impact on ambulance responses. This is not an unpredictable issue now and the Employer is failing to add the required resources to mitigate response time delays. We are working with our media firm to develop further strategies.

Training/other collaboration (SP 2.3.5)

We gave a presentation to the CUPE Health Presidents Council in November around Opioid dangers and required training for other CUPE locals. In addition, were asked to participate in the National workshop to discuss awareness, access, and administration of Naloxone in Canada. This is in collaboration with PAC, The SOONER study and the Canadian Centre on Substance Abuse (CCSA).



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Arbitrations (SP 2.2.2)

We have concluded approximately 12 arbitrations this year. 2 were Termination grievances, those individuals are back at work. 5 of the Arbs were Duty to Accommodate, 2 were Conduct issues, and 3 Policy grievances. The Policy grievance issues; Universal Hourly Rate, Ready MOU, Deemed Resigned.

We currently have 5 ongoing and 2 scheduled for 2018. It seems that Arbitration dates are getting harder and harder to find so we are widening our selection of arbitrators.

2018 will no doubt be a busy year for arbitrations and LR matters in general. We are trying to work with the Employer to reduce the number of arbitrations and hopefully reduced costs, however, the reality is some matters cannot be solved without a 3rd party.

Thank you to John and Amanda for all their work on our arbitration files.

Grievances (SP 2.2.2)

We have had multiple grievance caucuses since our last year. Our grievance caucuses continue to be productive for 873 and 873-02. We will be scheduling more of them in the coming months and plan to hold a week-long caucus in November to address the outstanding issues from the 2013 & 2014 file reviews. We continue to address the grievance backlog with both the Regions and the Employer.

We have completed a three-day review of all the 2013 files and have either withdrawn, advanced or marked for caucus each file. RVP Lorraine Till, James Towle and Staff Rep Kevin Tilley recently did the same review of the 2014 files with BCAS LR. We wanted to specifically mention the hard work done by RVP's in helping with this backlog.

As of the date of this update, the active file total is 993. It should be noted that not only does this represent a significant reduction in files, but this also includes multiple files that are waiting to be withdrawn through the caucus process.

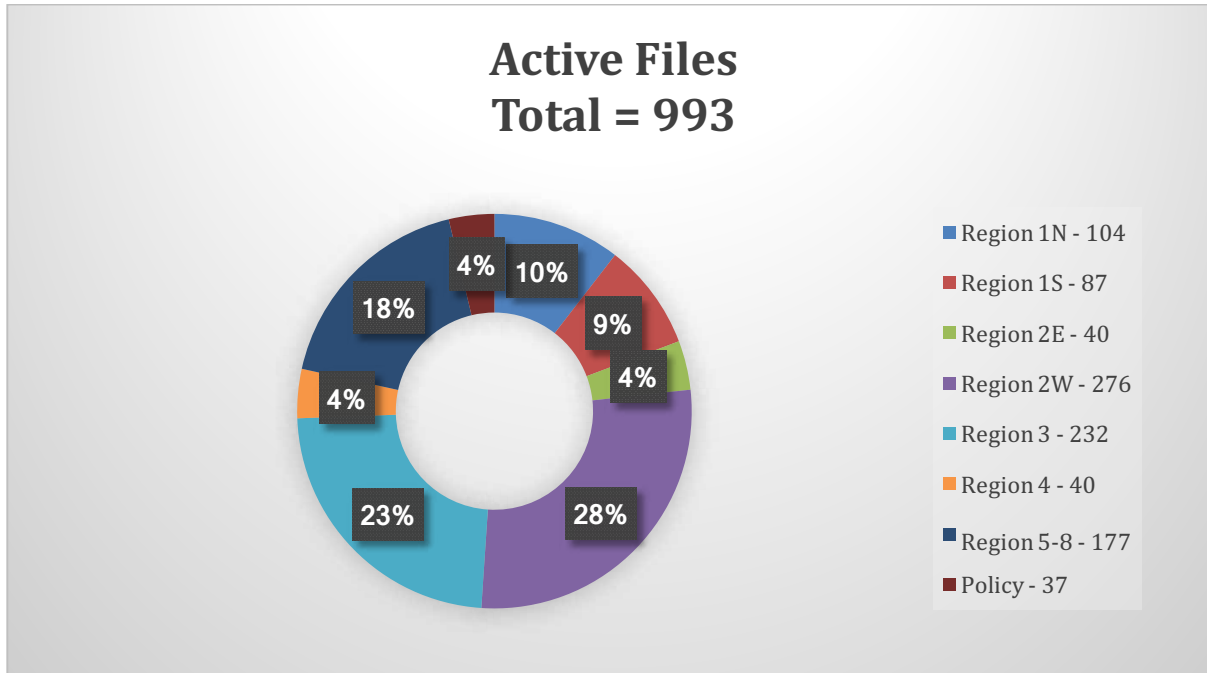


**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

The breakdown of files is as follows:



Scheduling/Payroll/Talent Acquisition (SP 2.5.3, 2.5.5)

During the last several months, the above topics have been the three main issues that continually require union intervention. Thank you all for the specific issues that you are forwarding to keep us informed on the regional impacts. We brought all of these issues forward at the last PJLMC. Sadly, the Employer offered a less than robust solution to these problems.

Until BCEHS is willing to admit that their contractor (PHSA) needs to be fired and replaced with what used to work for us, the complaints are falling on deaf ears. Continue to file grievances and keep letting us know of new issues through your Regional Vice Presidents. We have been invited to participate on a joint scheduling committee, which we will report on any progress.

The Employer has also attempted to introduce a new scheduling complaint form, which would appear to be a lot like a Step 1 grievance form. Please make sure to let the superintendents know that you are considering these forms as the Step 1 process contemplated under Article 9.13.

Collective Agreement (SP 2.5.1)

We have completed the Unions submission on the new Collective Agreement and are waiting for the Employer to sign off on the draft of the new C/A and send out to print.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Duty to Accommodate (DTA) (SP 2.1.4)

We reported earlier this year that we have been working with Bob and Employer representatives to build an accommodation process and road map. Unfortunately, that process has not moved forward as we had hoped, as a result we proceeded forward to arbitration with multiple files. The pressure of arbitration has been helpful in highlighting the need for a fulsome process. It is our hope that the parties will be able to map out a process and ensure that our members are not falling through the cracks. The ultimate goal is to have a road map and a 3-party intake and ongoing DTA process that is agreed to by the Union and the Employer and that will assist our members to return to meaningful work.

In the meantime, the parties agree that the Foley Award, DTA process will be used until some other agreement has been reached. Please take the time to familiarize yourself with the Foley award. It sets out a step by step process when requesting accommodation.

Canadian Standards Association Community Paramedic (CP) Standard (SP 2.3.3, 2.4.1)

Dave completed the last CSA CP standard technical committee. The committee met to address all the public review comments on the draft standard. The standard has now been completed and has been published by the CSA as Z1630. Although this is a voluntary standard, subject matter experts from coast to coast to coast and the United States agree that this should be adopted by all CP programs. The intent is to make this a North American Standard for Community Paramedic programs.

Canadian Standards Association Paramedic Standards work (SP 2.3.3, 2.4.1)

Bob Parkinson and Lindsay Kellosalmi are working on a Paramedic Specific mental health standard on behalf of APBC/EDBC and PAC. CSA Z10003.1, will address the unique environments and job functions of paramedics and help build a foundation for a National Mental Health Strategy. We are waiting for a call for support on a national ambulance design and infection control standard from the CSA, which we will be involved with.

We have just written a letter of support to the CSA to partner with PAC on, "*Education and awareness of climate-driven infectious diseases for Canadian Paramedics and Communities*" and "*innovative Paramedic solution for the health promotion, prevention, harm reduction and treatment of opioid addiction and overdose in out-of-hospital emergency and community settings.*" These Public Health Agency of Canada (PHAC) and Health Canada research indicatives will, once again, put our local at the leading edge of professional advancement.

Provincial Practice Committee (SPAC) (SP 2.4.2, 2.4.3)

As a result of our submissions and discussion with government on the Naloxone and Epi-Pen issues, the Union now has two seats on a Provincial Practice Committee. This committee is comprised of the APBC, Government, The Regulator and BCEHS.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

It will provide a strategic overview and planning for paramedic practice in BC and is a stepping stone to eventual self-regulation. We have had multiple meetings and are optimistic that this will prove to be a better system than just being told what is going to happen with the profession.

Recently, at a Strategic Practice Advisory Council (SPAC) meeting, BCEHS informed us that they were moving forward with a plan to replace PMLC with another committee. This is a departure from what we discussed at previous meetings, which was a re-purpose of PMLC to focus on implementation of practice changes flowing from SPAC.

The new committee will be the Pharmacy, Therapeutics, Research and Practice Advisory Committee (PTRPAC). This committee will have a newly created Director of Paramedic Practice, which we have been informed will be a paramedic.

We await the final terms of reference, mandate and composition of the new committee. The only concrete information that we know right now is that the committee will align itself like other health committees under the Quality structure and that it will have practitioner input. We currently do not know how the practitioner representatives will be appointed or what type of function they will serve.

Unfortunately, there is no Collective Agreement language establishing a right to a PMLC and thus, we believe, the Employer can create, disband or modify committees under their right to manage article. Accordingly, we have no choice but to disband PMLC. Despite this, we remain committed to Paramedic practitioner involvement in both our quality and professional advancement processes.

As you may be aware, there is currently a call for nominations for a position on the PMLC committee. Our union bylaws define this position, and thus this nomination and election must continue until the bylaws are changed. A resolution to Convention 2017 has been submitted to address this situation. Stay tuned for updates.

Critical Incident Stress Management Positions (SP 2.1.2)

We are happy to report that we now have three (3) regular part time positions to co-ordinate the CISM program. Two (2) of the positions were posted and filled through the standard posting process and one was recently awarded through the DTA process. While there are still kinks in the program we have worked through the bulk of the LR issues. We still have some outstanding items such as scheduling and pay for callouts.

These issues are being addressed through the grievance procedure. Thanks to Lindsay for her years of work and dedication designing and implementing the CISM program.

Ceremonial Unit (SP 2.4.5)

The Ceremonial Unit continues to proudly represent the APBC & EDBC. We have just concluded a successful intake and boot camp training of five (5) new Ceremonial Unit members. They are currently in the process of being outfitted and we are excited to add new members to our family. In addition to monthly practices, the unit has represented the profession at many events. Some recent events include: Paramedic Ride Closing



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Ceremonies, RCMP LODD service for Constable Richer Dubuc, Brother Bob Knezacky's service, Brother Terry Moore's service and Cache Creek Fire Chief Cassidy's LODD service.

For the last two events, the Ceremonial Unit was able to have two (2) members in Prince George and eight (8) members in Cache Creek, all with only one shift covered and for the first time, we had members from all regions represented.

Other events include the 9/11 memorial service, the Chilliwack Chief's Memorial Hockey Game, the Telethon for Nanaimo Child Development Centre and many more.

We are happy to report that our Ceremonial Units Policy and Procedures have been adopted by the PEB and will be incorporated into the local bylaws. We conducted the Unit's first elections this year and Dave Leary, James Towle and Mark Gaudio were elected to the executive positions of the Ceremonial Unit.

A big thank you to the executive, our drill instructors Mark Gaudio and Drew Hilland, and all of the Honour Guard members who volunteered their time to proudly represent us.

Canadian Paramedic Profile (CPP) (SP 2.4.1)

I am happy to report that the first major milestone of the CPP is now complete. The new profile (which replaces the previous NOCP's) is a roles based document and follows the CanMed outline. The Paramedic Roles, Standards of Practice and Code of Ethics are all now approved after broad stakeholder consultation. The above documents will drive the production of the educational framework, all with a goal of vision 2025. You can view the New Profile, Code of Ethics and Practice Standards attached to the end of this report.

Canadian Paramedic Memorial Project (SP 2.4.5)

Dave had a conference call with the project managers of the National Memorial. The plan is to have the project completed by 2020. Thank you to Grant Ross for his leadership on this important project and looking forward to assisting with the goal of raising \$2.5M.

Lobby Days (SP 2.3.3)

Dave attended the Paramedic Association of Canada's (PAC) annual Lobby Days. This year, just over forty paramedics from Coast to Coast lobbied over eighty Members of Parliament and Ministers (including Health Minister Philpott and Public Safety Minister Goodale.)

This year, the four topics discussed on the Hill were: the need for more robust data collection nationally and more funding for expanded treatment options for the opioid crisis, a National Institute for research and data collection for paramedic mental health and wellness, increased utilization of community paramedics on First Nations Reserves and Federal Government support for the National Fallen Paramedics Memorial project. We have attached the backgrounders to this report to give you an idea of how the profession presents issues to government. This was a very successful event and PAC continues to get follow up correspondence from MP's and Ministers. Thank you to Amy, Tamara and Keith for your participation and expertise.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Shop Steward Training (SP 2.1.3)

We were able to provide a Shop Steward Course to members in Region 1 on March 15th and 16th, and in Region 3 on May 2nd and 3rd. We also held a course in Region 4 on June 28th and 29th and in Region 2 on 13th & 14th of September. The Region 5-8 course was scheduled for July 20th and 21st, but due to the wildfire situation, we had to postpone it. Our plan is to complete the 5-8 course before the end of the year so that every region in the province had training in this last year. We continue to update the training and appreciate any feedback you may have.

Critical Care Paramedic Duty Supervisors (SP 2.1.2)

We are currently in discussions with the Employer on the creation of CCP DS positions to assist with the supervision of critical care programs. In our preliminary discussion, it would appear that we were looking at three (3) FT CCP DS spots. Unfortunately, with the move of critical care programs back to the regional management, these discussions have stalled. We will keep you updated on any progress.

Alliance of Paramedic Honour Guards Roundtable (SP 2.4.5)

We were able to send two representatives from our Ceremonial Unit to the annual Honour Guard roundtable. This is an excellent opportunity to network and set common standards with Paramedic Honour Guards from Coast to Coast to Coast.

Public Safety Sacrifice Medal and Order of Merit (SP 2.4.5)

Dave was asked to represent the profession by the Office of the Secretariat for the Governor General. Part of the mandate letter from the Prime Minister to Minister Goodale was to consider the feasibility of the creation of two new public safety honours.

A national working group was established under the guidance of the Governor General, who oversees all national honours. A national survey was conducted by six public safety groups (paramedic, fire, police, coast guard, corrections & peace officer).

The working group informed the Office of the Secretariat for the Governor General (OSGG) on specific questions related to the national survey results. Inclusion criteria, administration, exclusion criteria and specific concerns were addressed.

The need for administrative oversight will be paramount and should be national in nature.

Next steps: The OSGG will go and draft regulations for review. Those regulations then go to two separate committees. If the committees approve the regulations, it will go to the PMO for approval. If approved, it goes back to the OSGG for honours design and draft of a letters patent to be signed by The Queen.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Paramedic Association of Canada (PAC) National Awards (SP 2.3.3)

This year, The Paramedic Association of Canada (PAC) held its inaugural national awards program. The ceremony was held in conjunction with the national conference (PACE) and was a big success. Our own retired ALS Paramedic Clark McGuire was one of the recipients of this prestigious honour. These awards, including a presidential commendation, will be an annual event, so please watch for next year's nomination information. A big thank you to Tom Zajac for his work on the development and execution of the awards program.

DRDC Community of Practice (SP 2.4.1)

We continue to participate in the national paramedic community of practice meetings, hosted by the Canadian Safety & Security Program, which falls under Defence Research & Development Canada (DRDC). This group sets the national research agenda for the profession and we have gained several key relationships through this group.

International Board for Specialty Certification (SP 2.4.1)

Dave was part of the team that developed the new Tactical Paramedic & Tactical Responder exam and cut score with the IBSC. There are three (3) paramedics from Canada on this board; Brent Winchcomb from Ontario, BC's Rob Schlamp representing CCP's and Dave.

With the movement to a baccalaureate entry to practice in 2025, the IBSC is a possible solution to the specialty areas of the profession like CBRNE, Tactical, Community Paramedic, etc.

PAC Board of Directors (SP 2.3.3)

At the beginning of this year, Dave was elected to the position of Chairman of the Board for PAC. Lots of work has already been done for the PACE conference, the National Monument project, a national strategy for Paramedic mental health & wellness and other key initiatives. You can review the PAC 2017-2019 strategic plan at the following link for more information on the key priorities we are working on.

<https://pac.in1touch.org/document/3518/PAC2017-2019StrategicPlan.pdf>

Paramedic Chiefs of Canada Forum (SP 2.3.3)

We attended the PCC forum in early June and had the opportunity to discuss common issues within paramedic services across Canada. With the current announcement by Ontario to enhance fire - based medical response, lots of good discussion on strategies around this common issue.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

11.04/11.05 issues (SP 2.5.1)

The Employer is continuing to object to the 11.04 language of the contract. The bulk of the 11.04 letter's recently fail to meet the requirement set out in the Collective Agreement. We are working with Amanda to formulate a litigation strategy to deal with this issue, again.

In the meantime, please continue to object to the Employer's refusal to utilize a Collective Agreement right each time they fail to provide a proper 11.04 letter. Contact your Regional Vice President for guidance on how to proceed.

Compassionate Transfers (SP 2.5.1)

The Union does not get sign off or get involved in compassionate transfers. We opted out of these requests years ago. Members should put up their hand and request an official accommodation based on the appropriate grounds.

New Classifications (SP 2.1.1, 2.5.1)

The Employer has put the Union on notice that they are implementing 3 new classifications. The Paramedic Specialist, Paramedic Practice Educator and the Patient Care Communication and planning practice Educator. The Employer has the right to implement new classifications but unless otherwise agreed upon, they are subject to the terms of the Collective Agreement. We are taking issue with the role out of the Educator positions and have served the Employer with a Section 54 adjustment plan notification. We expect to hear form the Employer soon.

The Paramedic Specialist positions have been posted and filled in Vancouver. We do not have a fulsome view of these positions yet. The Employer failed to provide the Union with a job description and truing outline for the positions.

We will continue to discuss these positions with the Employer and have the right to challenge the wage should we believe the wage rate is inappropriate.

Retire Rehire (SP 2.5.1)

The Employer has informed the Union that they intend to delete the retire-rehire LOA in bargaining 2019. To date the Employer has been interpreting the LOA several different ways. We have a member who recently retired; the Employer has initiated an investigation after their retirement date to determine if they will be rehired.

Section 12 status (SP 2.5.1)

Brother Declan Lawlor has filed two judicial reviews and recently served them on the Union. One relates to the dismissal of his Section 12 complaint that alleged the Union had violated its duty of fair representation by not pursuing a harassment grievance filed on his behalf. The Board in that case accepted the harassment grievance had been resolved as part of his arbitration settlement. The second is an application arising from



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Vince Ready's compensation award. The Union is represented by CUPE National for both of these JRs, and replies have been submitted. Neither have been scheduled for hearing yet. Brother Mathew Starchuk filed a complaint with the LRB, under Section 12 of the Code, claiming that the Local had acted in a dissimulatory, arbitrary and bad faith manner. This was in relation to a grievance caucus decision to not advance a rejection of probation grievance. Brother Starchuk appealed that decision to the PEB which defeated a motion to reconsider. In LRB decision B172/2017, the board upheld the Union's decision not to pursue the matter to arbitration. We have attached the award to this report for your information.

Job Share Agreements (SP 2.1.4, 2.5.1)

We have a significant increase of request for job share agreements. Currently, we have no language in the C/A regarding sharing of positions, they are granted at the sole discretion of the Employer. The Employer is quite open to job shares. In the event you are seeking a job share, contact your RVP to discuss. All job shares must be signed off by the Union.

Family Status (SP 2.5.1)

We have had several inquires about the law and how it relates to "family status" and the requirement for the Employer to accommodate members based on this ground. The following is Amanda's legal brief on the issue and a great summary of the test and burden:

The law in BC has required employees to demonstrate that there has been a "serious interference with a substantial parental or other family duty" to give rise to a duty to accommodate.

Under this test, successful discrimination complaints have been made out, for example, where an employer failed to accommodate an employee whose child had a disability, and where the medical evidence demonstrated that due to his unique needs, the child required after-school care from the parent specifically.

In 2014, the Federal Court of Appeal was provided with the opportunity to review the question of what constitutes discrimination on the basis of family status in Canada (*Attorney General v. Johnstone*, 2014 FCA 110 ("Johnstone")). Ms. Johnstone, a mother of two young children, was employed full-time as a Border Services Officer by the Canada Border Services Agency (CBSA).

She worked rotating shifts which included weekends, days, evenings and nights. Her husband also worked for CBSA on a rotating schedule. Claiming that her shift work made it difficult for the couple to secure child care for their two children, Ms. Johnstone requested that she be moved to a fixed, full-time schedule. The employer was able to partially accommodate her request by offering her a fixed schedule on a part-time basis. However, Ms. Johnstone wished to maintain her full-time status as a Border Services Officer. Ultimately, CBSA decided that it was unable to accommodate her request, despite other alternatives suggested by the employee. Ms. Johnstone filed a claim of discrimination on the basis of family status with the Canadian Human Rights Tribunal. While the Tribunal noted that having children is a personal choice, it found that the Canadian Human Rights Act granted protection against discrimination based on such personal choices. The Tribunal found that the ground of "family status" was included to provide protection against discrimination based on the identification of one as a parent or on a familial relation and the needs and



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

obligations that naturally flow from those relationships. The Tribunal found that rotating shift work was not a bona fide occupational requirement for the Employer and accommodating the employees request would not have caused CBSA undue hardship. On judicial review of the Tribunal's decision, the Federal Court agreed with the determination that Ms. Johnstone was discriminated against based on family status as defined by the Tribunal. Of significance, the Federal Court noted that while the CBSA had demonstrated a willingness to accommodate other employees on a full-time schedule for religious or medical reasons, the CBSA had failed to consider this alternative to accommodate this employee's childcare obligations. On appeal, the Federal Court of Appeal also agreed that Ms. Johnstone had established a case of discrimination, though it varied the award to Ms. Johnstone for lost wages:

Although the case of Ms. Johnstone suggests that there may be a duty for employers to accommodate childcare obligations, the Federal Court noted that the employee may also have an obligation to make reasonable efforts to find suitable childcare before requesting accommodation. As noted by both the Tribunal and the Federal Court of Appeal, the requirement that Ms. Johnstone and her husband both work rotating shifts that included weekends, overtime, and different days or nights, was "one of the most difficult childcare situations" imaginable.

It must be noted that the Federal Court decision in Johnstone is not binding on the Human Rights Tribunal or courts in BC.

Unless a human rights complaint were taken up to the BC Court of Appeal, the BC Human Rights Tribunal and BC Superior Court are bound to follow the higher threshold test set by the BC Court of Appeal. The present law in BC requires something usual or particularly demanding about the employee's family situation before a finding that discrimination on the basis of family status will be made. Although the Johnstone case, and the BC Tribunal cases cited above demonstrate a trend towards finding an obligation on employers to accommodate employee' childcare obligations, this obligation to date has only been found in the most onerous of circumstances, and with substantial evidence of the significant efforts (and failure) to secure childcare by the parents.

So, in sum, it is unlikely that you will be able to establish an obligation on the Employer to accommodate the member's childcare situation (unless it meets the "serious interference" test noted above). The Employer may be agreeable to a "Compassionate" transfer or change to her working hours if such is requested, but it is not legally obligated to do so. That would be my recommendation – to make a case for a compassionate accommodation rather than one based on family status. Employers are concerned about "opening the floodgates" with respect to family accommodations, so are very unlikely to agree.

CIPSRT (SP 2.1.4, 2.1.5, 2.2.6, 2.3.3, 2.3.5, 2.4.1)

We were able to attend and secure a position on the Public Safety Steering Committee for the Canadian Institute for Public Safety Research and Treatment (CIPSRT) Network.

CIPSRT is a national network operating within the governance structure of the Collaborative Centre for Justice and Safety at the University of Regina that responds to the urgent needs of the Tri-Services and Public Safety sector to provide the best practical scientific evidence that will lead to real and imminent positive impact on the mental health of all public safety personnel.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

PACE 2017 (SP 2.2.6, 2.4.1)

The National Educational Conference – Paramedics Across Canada Expo (PACE) was held this year in Quebec City. Mark your calendars for PACE 2019 – September 19-21, 2019 in Winnipeg.

Public Safety Broadband Network (SP 2.2.6, 2.3.3, 2.3.5, 2.4.1)

In 2012, the Government of Canada allocated 10MHz of the 700MHz spectrum for the public safety community. It announced the intention to allocate an additional 10MHz of the spectrum in 2015 for the PSBN project.

Public Safety Broadband Networks are secure high-speed wireless data communications networks.

These can be used by emergency responders and public safety personnel to communicate with each other in emergency situations and during day-to-day operations, and hold the potential to improve the effectiveness and safety of first responders and the public safety community.

New technology offers the potential to improve the safety and security of Canadians, including through improved communications infrastructure for first responders and governments.

The Government of Canada, through a newly-created Federal PSBN Task Team, is consulting provincial, territorial, and municipal governments, first responders, and the private sector on implementation models for a potential PSBN in Canada.

This Federal PSBN Task Team is comprised of representatives from Public Safety Canada, Innovation, Science and Economic Development Canada, and Defense Research and Development Canada's Centre for Security Science (DRDC CSS) to advance work on this file.

The multi-disciplinary Task Team will help ensure that all relevant stakeholders are engaged and that future decisions around potential PSBN options are evidence-based.

PEB Training (SP 2.1.3)

In June, the PEB held its regular session and we were able to integrate a RVP educational day as part of the board meeting. This was the first time that we had attempted something like this and from the feedback, it was well received. We are in the planning stages for the next educational day and hope to have a call for topics out to the board soon.

Paramedic Ride (SP 2.4.5)

On June 9-12, 2017 twenty riders from across Canada cycled from Osoyoos to Kamloops in the inaugural BC Paramedic Ride. The ride took place to raise funds to create a national paramedic monument in the Nation's Capital. A big thank you to all the participants who made this worthy ride possible and to Lindsay Kellosalmi for all of her tireless work championing the BC ride. Nationally, the ride took place in BC, Alberta, Ontario, Quebec, New Brunswick, PEI and Nova Scotia.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

PSO LODD benefit (SP 2.3.3, 2.4.1)

The federal government announced in Budget 2017 a grant payment that will be directed to support families of public safety officers (police officers, paramedics, fire fighters) who are killed in the line of duty. This announcement was a result of the lobby efforts of the Paramedic Association of Canada and relates back to the hard work of APBC members Ernie Mothus and Bryon Longeway on the PSO project. The compensation package is in the planning and consultation phase right now, however, we expect that the amount will be somewhere around \$300,000 per member.

DO TO CHARGE LOA (SP 2.1.2)

Early in the summer, the Employer advised that they wished to reclassify all Dispatch Officer's (DO's) to Charge Dispatchers. The reason given was to align the supervisory structure in all three communication centres. We were able to successfully create a Letter of Agreement (LOA) that grandfathered all existing DO's into Charge positions as well as create five (5) new full time Charge Dispatcher spots.

Shift Coverage Committee (SP 2.1.3)

In September, several Regional Vice Presidents, the Staff Representative, the Trustee's and Dave convened a committee to review shift coverage practices and to see if there were any recommendations we could make to the Provincial Executive Board. At the time of writing this report, that committee is still ongoing and we will report any recommendations.

BC LOBBY DAYS (SP 2.3.1)

The executive is in the planning phase of conducting the first lobby event for BC. We have been intimately involved with the National Professional Lobby since its inception. The incredible results of these efforts are ten-fold in returns. We are looking to duplicate these efforts with our Provincial government in the late spring.

Deemed Resigned (SP 2.5.1, 2.5.3, 2.5.5)

As you know, the Employer has taken a new position on the application of F4.01. At the heart of the dispute is the new language from 2014 "where work is available". The Employer believes that means they can force employees to work, even if they have not submitted availability.

We have filed a policy grievance, to which the Employer has not responded to. On July 12th, the Union filed a Section 86 application with the LRB to have an arbitrator appointed due to the lack of response from BCAS. As part of that application, we agreed to have a LRB appointed mediation officer appointed, which is the normal practice.

On August 9th, we agreed to meet at the LRB. Amanda, Katryna and Dave were disappointed to hear that BCAS showed up with no one from operations, after assuring us they would the day before.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

To summarize the meeting, BCAS wasn't willing to mediate at all and even made statements that expanded the Employer's belief around deemed resigned. It was very evident that BCAS LR has a very myopic view of deemed resigned as it relates to Metro Op's. When we brought up issue around rural/remote and urban and how the BCAS view would be very detrimental to operations in these communities, the response from BCAS was "We are willing to accept that risk" (of shutting down cars).

Arbitrator Sullivan will be hearing the matter, which bodes well for us as trying to educate a new arbitrator on our complex scheduling system would take days. The parties have agreed to exchange written submissions on this, and only call oral evidence if a factual dispute arises in the written submissions. The schedule for submissions is as follows:

Union submission – October 16

Employer reply – October 30

Union final reply – November 6

We will keep you posted on the outcome of the arbitration.

CUPE National (SP 2.3.4)

We were able to attend the National Convention with a large delegation this year. Lots of extensive debate on resolutions including the issues with union trials. We are happy to report that Mark Hancock was re-elected as President and Charles Fleury was re-elected as Secretary-Treasurer, both of whom are great supporters of the EDBC/APBC.

Temporary Full Time and Acting Unit Chief Postings (SP 2.5.1, 2.5.3)

Recently, the Employer posted for temporary full time Unit Chiefs and Acting Unit Chiefs in the Vancouver Post.

The expression of interest states the following: The British Columbia Ambulance Service is looking for Unit Chiefs currently attached to the Vancouver post who are interested in career development in front line supervision. Reporting to the Manager, Patient Care Delivery, the Unit Chief will provide front line supervision and support to Irregularly Scheduled Employees in the Vancouver Post. The interim positions will be created as follows: Unit Chief Responsible for Irregularly Scheduled Employees – West based out of Station 248 Cordova Unit Chief Responsible for Irregularly Scheduled Employees – East based out of Station 249 Surrey Unit Chief roles will have a focus of direct supervision and support, and will be scheduled following the Delta shift pattern for a 12-month period.

These postings are a violation of the Collective Agreement and related jurisprudence. We do not have any language on temporary supervisory positions. We also have a long-standing practice for selection of Acting Unit Chiefs that resulted out of an arbitration. The process can be reviewed in the "Acting Unit Chief" award, under the "arbitration" section on the APBC web. In addition, the Employer is attempting to circumvent the language on "clustering" Unit Chiefs, in violation of the recent Vince Ready arbitration.

It is clear that the Employer has no interest in working together to resolve issues by their complete lack of collaboration on issues such as this. We will keep you advised of the progress of the policy grievances.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Pension Grievances (SP 2.5.1, 2.5.3, 2.5.5)

Policy Grievance: 16030004

This grievance was filed as the Employer's payroll contractor was not correctly calculating pensionable salary. While on STIIP, Public Service Pension Plan (PSPP) payments are based on normal regular wages. Payroll hadn't factored in the shift adjustment as regular wages. As a result, they were calculating PSPP on 75% of shift adjustment. Base salary was being calculated correctly.

The Employer and payroll admitted this error and attributed it to a payroll programming error. The grievance was resolved with the Employer and they assured the Union retroactive adjustments would be made and the program corrected going forward.

The Union hasn't been advised if the retroactive PSPP payments have been made. As a result, we are in contact with the PSPP. It is the PSPP Trustees fiduciary duty to ensure correct pension payments are made.

Policy Grievance: 16030003

This grievance is similar to the PSPP grievance. However, it relates to incorrect calculations of union supplemental pension payments for full time members. This is shown as RSRP on employee pay advice slips. The Employer under contributed to this plan as well. However, it was on more than just shift adjustment.

Again, the Employer has admitted their error and attributed it to software issues. The grievance was resolved. While we know some retro payments have occurred, the Union has not been provided with a breakdown. As well, it appears there are still programming errors in calculating the RSRP for LTD members.

The settlement agreement provides for a third party to review the payments if not processed in a timely manner. The Union is currently waiting for a breakdown of all retroactive payments made to the Union's pension administrator. At the writing of this report, a third party will likely be needed to make the Employer provide this list and amounts paid.

Policy Grievance: 090103 26 versus 27 pay periods

This resulted from BCAS continually calculating 11.96 pensionable service including a 27 pay period in fiscal year 2005/06. The grievance also alleged BCAS withheld a PSPP payment. However, we have been advised that all pension deduction payments were made. The issue has been corrected going forward from 2005/2006 and we have noted calculations in excess of the 11.96 in the appropriate years.

PSPP Rule Changes.

This is not a grievance as the Union cannot file one against the Public Service Pension Plan (PSPP) partners, BCGEU and Government. However, the Union has retained legal counsel in challenging the PSPP plan changes that negatively impact CUPE 873 members. The legal expenses are being funded by CUPE National.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

This legal challenge is in relation to a move by the PSPP plan partners (BCGEU & Government) initiated in June 2016 to change various aspects of the plan. While there are some positive changes envisioned, one of the negative rule changes was the elimination of the 80 formula for Full Time CUPE 873 members. The 80 formula (age plus years of service) allows most Full-Time members the opportunity to retire at age 55 without a penalty. One of the contemplated changes would have resulted in significant penalties for members retiring before age 60.

We are pleased to report that the plan changes were not adopted. We have no doubt this is due to the work of our lawyer and political action by President Barter. While the planned changes have not gone through at this time, it is a situation your Executive continues to monitor.

As you can see, this year has been busy, but productive. We continue to address the grievance backlog issues and are making great progress. This is a very exciting time for paramedics and dispatchers and we are excited to keep the local on the cutting edge of change.

Move for adoption of our report.

In Solidarity;

Dave Deines
Provincial 1st Vice President
CUPE Local 873

Sherman Hillier
Provincial 2nd Vice President
CUPE Local 873

DD/SH/sd/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017



**Paramedic Association of Canada
Association des paramédics du Canada**

Canadian Paramedic Profile

Code of Ethics

**Board of Directors' approval for consultation
2016 September 24**

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30
Approved for stakeholder and public consultation



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017



**Paramedic Association of Canada
Association des paramédics du Canada**

Overview

The purpose of the Code of Ethics is to promote, guide, and direct professional paramedic practice.

The Code of Ethics is an integral part of the Canadian Paramedic Profile, which includes the Paramedic Roles and the Standards of Practice guidelines. All paramedics are expected to adopt this Code of Ethics in conjunction with the Paramedic Roles and the Standards of Practice to understand the expectations inherent to a paramedic. The Code of Ethics applies to all paramedics across clinical, education, evaluation, research, management, and operational settings.

The Code of Ethics provides the guideline through which the public can judge professional practice. The Code of Ethics lists, defines, and describes the values of the paramedic and provides guidance for how these values are to be enacted. These statements are intended to provide a guide that enables paramedics to make appropriate decisions and to understand what actions to take when exercising professional judgment as part of their duty.

Each paramedic has the responsibility to adhere to the Code of Ethics upon entering the paramedicine profession. Paramedics are accountable to behave ethically. As health and public safety professionals, paramedics are expected to apply these values in professional practice and, where it has an impact on professional practice, in life.

Paramedics have a responsibility to the *patient and others*, to the *profession*, to *self*, and to *society*.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation

2



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

Responsibility to the Patient and Others

A paramedic provides person-centred care:

1. Demonstrating patience, compassion, and courtesy
2. Advocating in the best interest of the patient
3. Acting in a manner that ensures the patient's dignity, safety, and privacy
4. Maintaining confidentiality
5. Working collaboratively with others
6. Communicating respectfully with others
7. Maintaining appropriate professional relationships
8. Respecting the rights of the patient and others

Responsibility to the Profession

A paramedic demonstrates professional conduct:

1. Practicing in accordance with the Standards of Practice
2. Promoting and upholding the Code of Ethics of the profession
3. Fostering professional working relationships
4. Creating a respectful and positive learning environment
5. Providing leadership to others
6. Learning, sharing, and constructing knowledge
7. Recognizing professional limitations
8. Consulting with others for the benefit of the patient
9. Reporting, stopping, or redirecting unethical or incompetent conduct
10. Refraining from impugning the reputation of peers and the profession

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation

3



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

Responsibility to Self

A paramedic maintains a high standard of professional integrity:

1. Recognizing that self-regulation of the profession is a privilege
2. Maintaining mental and physical fitness to practice and clinical proficiency
3. Maintaining good character and reputation
4. Maintaining professional accountability for actions in practice
5. Utilizing peer review to reflect, evaluate, and self-direct professional development
6. Crediting work done by others
7. Fostering a professional identity at work
8. Recognizing conflicts of interest and maintaining impartiality
9. Being accountable for conduct that meets the requirement of the medical, legal, and professional boundaries of the profession

Responsibility to Society

A paramedic demonstrates service to society:

1. Prioritizing the public interest
2. Recognizing the social determinants of health in practice
3. Committing to improving society through the development of the profession
4. Fostering innovative care for the benefit of society
5. Ensuring professional development aligns with public interest

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

COPYRIGHT

The contents of this publication are protected by copyright in Canada and throughout the world and must not be reproduced in whole or in part in any manner, including in print, online or by other electronic means, without the permission in writing of:

The Paramedic Association of Canada.
201-4 Florence Street
Ottawa Ontario, K2P 0W7



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017



**Paramedic Association of Canada
Association des paramédics du Canada**

Canadian Paramedic Profile

Paramedic Roles

**Board of Directors' approval for consultation
2016 September 24**

Copyright © 2017 Paramedic Association of Canada
Final draft: 2016 September 30
Approved for stakeholder and public consultation



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

Overview of the Integrative Paramedic Role

Definition

Paramedics integrate the six following roles to provide safe, compassionate, and patient-centred care in the varied settings and contexts of paramedic practice: clinician, professional, educator, advocate, team member, and reflective practitioner.

Description

Paramedics embody professionalism and commitment in the care they provide, actively seeking opportunities to improve patients' health, their own well-being, and the system in which they function. They tolerate ambiguity and are ready to move from the routine to the unexpected. They recognize that a patient contact is influenced by the patient's health history, personal setting, and social and cultural context. They advocate on behalf of their patients for appropriate care and resources. They contribute to the development and effective functioning of multiple teams, engaging short- and long-term relationships with patients, family members, bystanders, colleagues, health care providers, and responders. They are self-reflective and aware of their own limitations, integrating their experience, best practice, and evidence-informed research while functioning within their medical, legal, and professional boundaries.

Core Concepts

1. Integrate *clinician, professional, educator, advocate, team member, and reflective practitioner* roles.
2. Integrate social determinants of health into assessment and treatment.
3. Manage and provide care to patients where the primary or underlying problems are unclear.
4. Tolerate ambiguity and function well in an unsupervised and unpredictable environment.
5. Adapt to a variety of practice settings.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017



**Paramedic Association of Canada
Association des paramédics du Canada**

Paramedic Capabilities*

Key Capabilities	Enabling Capabilities
1. Provide safe, compassionate, and patient-centred care that recognizes patient circumstances, health history, social and cultural context, and factors associated with the location and environment of patient encounters. ^{1-3,5}	1. Employ and adapt clinical, technical, and interpersonal skills to gain access to the patient and to assess, monitor, treat, refer, and/or transport. 2. Obtain, interpret, and analyze information in order to identify and prioritize patients' medical and social needs. 3. Develop and employ critical thinking and clinical judgment to implement, monitor, and revise safe, compassionate, and patient-centred care. 4. Manage patients who have yet to receive a definitive diagnosis, and provide ongoing care and transport.
2. Employ and adapt communication skills, professional knowledge, collaborative strategies, effective team dynamics, and teaching and learning practices to foster and maintain effective interpersonal relationships and safe work environments. ¹⁻⁵	5. Function as the primary attendant and as a supporting team member, providing clinical support while managing equipment, documents, family and bystanders, the scene, and communications. 6. Practice in diverse settings to provide care in nonurgent and emergency situations. 7. Adapt care and procedures to deal with a dynamic, unpredictable environment and complex situations.
3. Embody professional behaviours, ethical decision making, and compassionate care, actively seeking opportunities to improve patients' health, their well-being, and the systems in which they function. ¹⁻³	8. Integrate the roles of clinician, professional, educator, advocate, team member, and reflective practitioner. 9. Use a range of integrated skills and self-awareness to manage clinical challenges independently and effectively in dynamic, unpredictable environments and complex situations. 10. Practice as an autonomous professional, exercising professional judgment. 11. Work within their medical, legal, and ethical boundaries, while maturing professionally. 12. Improve processes and advance the profession through experience, self-reflection, continuing professional development, current research, and evidence-informed practice.

*The citation numbers in this table refer to the corresponding Core Concepts listed on page 2.



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

Paramedic Role: Clinician

Definition

Paramedics integrate their skill, knowledge, and clinical judgment to provide safe, compassionate, and patient-centred clinical care within the medical, legal, and professional boundaries of the profession.

Description

Paramedics are skilled and knowledgeable clinicians, demonstrating technical skill and sound clinical reasoning and judgment in assessing, managing, referring, and transporting patients. Their decisions are guided by clinical sciences, knowledge of current practice and best practice, ongoing examination, and evaluation and interpretation of research evidence. Their practice involves care and transport of the ill and injured in the out-of-hospital environment and a wide range of care in the community and health care facilities. They maintain a holistic and adaptable approach that focuses on patient need.

Core Concepts

1. Provide safe care in a variety of practice settings.
2. Develop and maintain clinical and technical knowledge, skill, and judgment.
3. Practice within medical, legal, and professional boundaries.
4. Promote safe care by other care providers.
5. Innovate and adapt to meet unique needs of each situation.
6. Employ effective communication to ensure safe clinical practice.
7. Apply clinical judgment in the application of skill and knowledge.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

Clinician Capabilities*

Key Capabilities	Enabling Capabilities
1. Use foundational knowledge and skills. ^{1,2,5,7}	1. Support clinical practice with literacy, numeracy, and technological and written knowledge and skills. 2. Apply knowledge of biology, psychology, and social sciences in clinical practice. 3. Demonstrate effective and efficient performance of clinical, technical, and interpersonal skills. 4. Adapt skills and procedures to meet patient characteristics, clinical findings, and situational factors.
2. Develop and employ clinical reasoning and judgment in decision making. ^{1,2,5,7}	5. Incorporate clinical findings and environmental considerations into decision making. 6. Exercise prudent and reasonable clinical judgment to make safe and effective decisions regarding diagnosis, treatment, transport, and disposition planning. 7. Contribute to effective interprofessional decision making for patients, at the scene and across the continuum of patient care.
3. Provide safe, compassionate, and patient-centred care in a variety of practice settings. ¹⁻⁷	8. Innovate and adapt health and social care to meet patients' health and social needs, and practice settings. 9. Incorporate clinical findings and social determinants of health into decision making, clinical care, transportation, and disposition for one or multiple patients. 10. Engage personnel, and use equipment and information to provide appropriate, safe care.
4. Perform and promote safe clinical care practices. ^{1,3,4,6}	11. Work within interprofessional teams to create and maintain work environments that optimize patient care. 12. Continuously monitor own and others' practices to ensure safe, compassionate, and patient-centred care. 13. Stop or redirect unsafe care. 14. Determine and monitor the clinical competence of other responders when assigning aspects of patient care. 15. Report and encourage others to report patient safety incidents, errors, and near misses. 16. Contribute to improving clinical care through a just culture of safety.
5. Foster a culture of safe practice and quality improvement. ^{1,3,4,6}	17. Apply the science of quality improvement in practice. 18. Contribute to an operational culture that promotes patientsafety.

*The citation numbers in this table refer to the corresponding Core Concepts listed on page 4.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017



**Paramedic Association of Canada
Association des paramédics du Canada**

Paramedic Role: Professional

Definition

Paramedics embody high personal and ethical standards, demonstrating personal and professional leadership and work within their medical, legal, and professional boundaries. They serve the patient, profession, and society by maintaining their proficiency through ongoing professional development and fitness to practice.

Description

Paramedics are trusted health care providers who typically practice outside the confines of a health care facility. They encounter the patient in their environment often when most vulnerable. They frequently serve as the patient's first point of entry to the health care system and fill gaps in the community's health and social network. They behave ethically, morally, and with integrity. They respect the patient and ensure no further harm. They take responsibility for their actions with the goal of maintaining public trust and confidence. They embody core human traits of honesty, care, compassion, empathy, altruism, and respect for others.

Core Concepts

1. Honor the profession through accountability to oneself, the public, and the profession.
2. Demonstrate an understanding of the patient's social, communication, and cultural needs.
3. Act ethically, responsibly, and with integrity.
4. Demonstrate a commitment to excellence, quality, and safety.
5. Advance and advocate for the profession.
6. Practice personal leadership and advocacy.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation

6



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017



**Paramedic Association of Canada
Association des paramédics du Canada**

Professional Capabilities*

Key Capabilities	Enabling Capabilities
1. Practice within the medical, legal, and professional boundaries of paramedicine. ^{1,3,4}	1. Practice according to relevant legislation, within the legally prescribed authority and according to the code of ethics and standards of practice. 2. Comply with employment and operational policies and guidelines. 3. Work safely in challenging and unpredictable environments, and take appropriate action to mitigate risk.
2. Demonstrate leadership in personal and professional practice. ¹⁻⁶	4. Demonstrate leadership to improve patient care and the health care system. 5. Promote change in health care and paramedic practice to enhance service and patient outcomes. 6. Promote a culture of quality improvement and patient safety. 7. Manage their career and professional practice. 8. Ensure that personal and professional relationships are based on mutual respect and trust. 9. Maintain a high standard of care at all times.
3. Maintain fitness to practice. ^{1,4,6}	10. Maintain professional appearance and hygiene. 11. Maintain a high standard of professional effectiveness by adopting strategies for physical and psychological self-care and critical self-awareness and by maintaining a safe work environment. 12. Set priorities and manage time to balance professional and personal life. 13. Promote a culture that supports, recognizes, and responds effectively to colleagues in need.
4. Maintain proficiency through continuing education and professional development. ^{1,4}	14. Continuously improve performance by seeking and maximizing learning opportunities in practice. 15. Participate in continuing education and professional development activities. 16. Seek and be receptive to professional feedback.
5. Enhance and promote the profession of paramedicine. ^{1,4-6}	17. Demonstrate a commitment to excellence in all areas of practice. 18. Participate in quality assurance and quality improvement. 19. Develop the profession through coaching, mentoring, preceptorship, and instruction. 20. Contribute to the advancement of paramedic practice through formal and personal research activities. 21. Ensure knowledge sharing contributes to safe practice.
6. Maintain public trust and confidence in the profession. ¹⁻⁶	22. Demonstrate accountability to the patient, profession, and society. 23. Exhibit professional behaviours and relationships in practice, reflecting honesty, care, compassion, empathy, altruism, and respect for others. 24. Demonstrate respect for diversity and maintenance of confidentiality. 25. Recognize and appropriately manage potential and actual conflicts of interest. 26. Assist others to act in an ethical manner and to demonstrate integrity. 27. Understand and respect patient vulnerability and confidentiality.

*The citation numbers in this table refer to the corresponding Core Concepts listed on page 6.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017



**Paramedic Association of Canada
Association des paramédics du Canada**

Paramedic Role: Educator

Definition

Paramedics promote patient health and safety, provide clinical support, and enrich the profession through teaching, coaching, collaborating, and mentoring.

Description

Paramedics recognize and engage in teaching and learning opportunities in dealing with the patient and colleagues. They seek opportunities to teach and learn from their own experience and that of others. They share their knowledge by coaching, collaborating, and sharing information with the patient, their partners, other responders, and health care providers. They integrate experience and evidence to develop and share professional knowledge. They contribute to the development of the profession through coaching, preceptorship, and mentorship. They promote the health of the patient and community through ongoing education.

Core Concepts

1. Commit to lifelong learning and professional development.
2. Facilitate learning of others.
3. Generate and share knowledge.
4. Educate, coach, precept, and mentor others.
5. Provide and promote health teaching to the patient.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017



**Paramedic Association of Canada
Association des paramédics du Canada**

Educator Capabilities*

Key Capabilities	Enabling Capabilities
1. Provide clinical practice support for the patient, colleagues, and the public. ¹⁻⁵	1. Create effective relationships, promote effective communication, and build trust. 2. Maximize teachable moments and promote safe, compassionate, and patient-centred care. 3. Communicate information, advice, instruction, feedback, and professional opinion to support learning. 4. Share relevant knowledge with the team to ensure safe and high-quality care. 5. Promote new health care system safety knowledge and practice.
2. Enhance professional practice by teaching others. ¹⁻⁵	6. Seek out and take advantage of teaching opportunities. 7. Provide ongoing feedback and continuing education to colleagues. 8. Promote the role of the paramedic to others. 9. Advance health education within the community and patient care setting.
3. Perform as preceptor and mentor. ¹⁻⁴	10. Perform optimally in the role of peer, preceptor, and mentor. 11. Understand how the student learns. 12. Develop and maintain effective and appropriate communication as a preceptor and mentor.

*The citation numbers in this table refer to the corresponding Core Concepts listed on page 8.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation

9



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

Paramedic Role: Advocate

Definition

Paramedics work collaboratively with the patient and health, public safety, and social service providers to include the patient's health and social needs in determining appropriate care, access services, and navigate the health care system.

Description

Paramedics serve as health champions and social advocates. They provide care in privileged and often isolated places, meeting patients in unique settings and having immediate access to health and social information that may not be available to other health providers. They are entrusted with the opportunity and responsibility to look beyond the immediate incident or encounter, consider the patient's broader social and cultural circumstances, and address specific needs in a timely and relevant manner. They contribute to collaborative leadership in their interaction with the patient, the patient's family, other responders, and health care providers. They serve as a health care navigator, working with the patient and other health professionals to treat in place, refer, and/or transport the patient to appropriate resources and services. They advocate for the patient's access to the most appropriate health care and social service resources.

Core Concepts

1. Respect the privileged and unique access to information about the patient's social and cultural environment.
2. Investigate the immediate medical situation to consider the social determinants of health.
3. Support patient access and navigation through the appropriate health care and social services.
4. Balance resource stewardship and patient need.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation



CONVENTION 2017



Paramedic Association of Canada Association des paramédics du Canada

Advocate Capabilities*

Key Capabilities	Enabling Capabilities
1. Respond to patients' health needs and social well-being through ongoing assessment and advocacy. ¹⁻³	<ol style="list-style-type: none">1. Include social determinants of health in clinical assessment, care, transportation, and disposition planning.2. Identify potential health and social requirements for the patient that extend beyond the immediate patient encounter.3. Advocate for the patient to gain access to and navigate through appropriate health and social service resources.4. Advocate for the patient and the patient's family and caregivers to improve the patient's health and social well-being.
2. Advocate for and provide appropriate safe, compassionate, patient-centred care related to access and system navigation. ¹⁻⁴	<ol style="list-style-type: none">5. Provide stewardship to access and effectively use resources that support safe, compassionate, patient-centred care to address the patient's immediate and broader health and social needs.6. Understand the opportunities and limitations in practice settings while addressing the patient's health and social needs.7. Work within health care and social services to increase access to safe, compassionate, patient-centred care and improve patient health and well-being.8. Improve clinical practice through ongoing participation in disease prevention, injury prevention, health promotion, and health surveillance activities.

*The citation numbers in this table refer to the corresponding Core Concepts listed on page 10.



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

Paramedic Role: Team Member

Definition

Paramedics work with the patient, peers, and others to create an environment that fosters safe, compassionate, and patient-centred care.

Description

Paramedics form part of the extended team of interprofessional health care and social service providers, contributing to the patient's overall health and well-being. They are part of a network that interacts with the patient at different times and in different locations, while developing and implementing a safe, efficient, and effective care plan. They lead, share leadership, and function as team members. They act quickly to form and work within high-functioning teams in the clinical and field environment. They build short- and long-term relationships with the patient, family members, other responders, and health providers. They develop relationships through effective team behaviours and attitudes, professional etiquette, and collaboration. They communicate effectively, listen actively, share leadership, and demonstrate mutual trust and respect.

Core Concepts

1. Function within multiple types of teams.
2. Integrate across various levels of health care and social service networks.
3. Adapt personal practice to work effectively within multiple types of teams and settings.
4. Acknowledge the patient, family members, and bystanders as components of the team.
5. Enhance team dynamics through collaboration and documentation.
6. Make decisions as part of a team.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation



CONVENTION 2017



Paramedic Association of Canada Association des paramédics du Canada

Team Member Capabilities*

Key Capabilities	Enabling Capabilities
1. Form effective teams and function within them to provide safe, compassionate, and patient-centred care. ^{1-3,5,6}	1. Form and function within teams at multiple levels, from preplanning and direct patient care to management of organizations. 2. Work within an interprofessional team as leader, shared leader, and member. 3. Establish and maintain effective team-based relationship for the short- and long-term. 4. Promote new and emerging best practice and evidence-informed research into team-based care. 5. Negotiate shared and overlapping responsibility with other responders and health care providers. 6. Foster effective decision making within the team.
2. Integrate patient, family, and caregivers into team decision making. ⁴⁻⁶	7. Include the patient's family and caregivers in team decision making as appropriate. 8. Actively seek patient participation in identifying and choosing care, transport, and disposition options. 9. Respect and integrate patient and family contribution into decisions regarding patient care, transport, and disposition.
3. Communicate effectively with the patient, bystanders, other responders, and health care providers. ^{1,3-6}	10. Share information with the patient, other responders, and health care providers. 11. Incorporate cultural and personal factors in individual and team interactions and communications. 12. Prevent, manage, and resolve conflict. 13. Provide and receive feedback to improve individual and team performance. 14. Ensure that all appropriate and relevant patient information is included or accessible to health care providers during and after transfer of care.

*The citation numbers in this table refer to the corresponding Core Concepts listed on page 12.



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

Paramedic Role: Reflective Practitioner

Definition

Paramedics are self-aware in the provision of care, constantly assessing and addressing gaps in personal health, well-being, and professional performance.

Description

Paramedics learn and work within their communities of practice, which include their peers, practice settings, regulatory bodies, and professional organizations. They are accountable to provide evidence-informed and best practice within their medical, legal, and professional boundaries. They are self-monitoring and self-directing, aware of their own proficiency and limitations. They foster a culture of curiosity and engage in lifelong learning, integrating their ongoing experience and evolving their professional acumen. They conduct research to address proficiency gaps, maintain currency, and extend their expertise. They attend to their own personal health, well-being, and professional performance.

Core Concepts

1. Integrate experience and evolving practice to guide professional development.
2. Assess proficiency and limitations through self-reflection, self-awareness, consultation with peers, and participation in continuing education and professional development.
3. Understand the influence on others, and promote effective interpersonal and professional relationships.
4. Create a culture of curiosity, questioning, and self-directed learning.
5. Develop and maintain personal health, well-being, and professional performance.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation



CONVENTION 2017



**Paramedic Association of Canada
Association des paramédics du Canada**

Reflective Practitioner Capabilities*

Key Capabilities	Enabling Capabilities
1. Develop and maintain effective relationships with others. ^{2,3}	1. Understand the potential to influence others. 2. Appreciate and respond appropriately to the patient's, colleagues', and others' expectations. 3. Appreciate and positively employ influence on partners, colleagues, preceptors, mentors, and role models. 4. Reflect and modify behaviour to create positive interpersonal and professional relationships.
2. Develop and maintain personal health, well-being, and professional performance over time. ^{2,5}	5. Exhibit self-awareness of internal and external influences on personal health, well-being, and professional performance. 6. Develop and implement strategies to ensure personal health, well-being, and professional performance. 7. Balance personal and professional demands and requirements.
3. Develop and use effective strategies to address learning needs and practice gaps. ^{1,2,4}	8. Seek to identify learning needs and practice gaps. 9. Participate in formal and informal personal and professional activities to maintain proficiency, incorporate change in practice, and address learning needs and practice gaps. 10. Incorporate evidence-informed and best practice through critical appraisal of research and literature.
4. Foster professional expertise through ongoing monitoring and self-assessment of knowledge, abilities, and performance. ^{1,2,4}	11. Understand that complexity and uncertainty is inherent in practice. 12. Understand individual proficiency and limitations. 13. Develop strategies to monitor and improve personal and professional effectiveness. 14. Assess performance and experience in relation to professional and employment expectations. 15. Develop expertise by integrating and synthesizing professional knowledge and experience.

*The citation numbers in this table refer to the corresponding Core Concepts listed on page 14.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

COPYRIGHT

The contents of this publication are protected by copyright in Canada and throughout the world and must not be reproduced in whole or in part in any manner, including in print, online or by other electronic means, without the permission in writing of:

The Paramedic Association of Canada.
201-4 Florence Street
Ottawa Ontario, K2P 0W7

Copyright © 2017 Paramedic Association of Canada



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

Canadian Paramedic Profile

Standards of Practice

Board of Directors' approval for consultation
2016 September 24

Copyright © 2017 Paramedic Association of Canada
Final draft: 2016 September 30
Approved for stakeholder and public consultation



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017



**Paramedic Association of Canada
Association des paramédics du Canada**

Overview

Paramedics are bound to act and perform in a specific manner. The Standards of Practice relate to the six roles (plus the integrative *paramedic* role) in the Canadian Paramedic Profile: *clinician, professional, educator, advocate, team member, and reflective practitioner.*

Clinician

1. Apply foundational knowledge to evidence-informed practice, including paramedicine, clinical sciences, social sciences, leadership, management, health and social services, and public safety systems.
2. Acquire informed consent and assess the patient's medical, mental health, and social needs.
3. Remain accountable for ongoing advice, assessment, treatment, diagnosis, administering or dispensing of medication, and referral.
4. Demonstrate proficiency in psychomotor skills required to provide health services.
5. Apply critical thinking and clinical judgment in practice.
6. Apply quality assurance and quality improvement processes.
7. Demonstrate an informed approach to patient access, assessment, treatment, treatment in place, referral, extrication, transfer and continuity of care, immobilization, and transport.
8. Ensure mental and physical fitness to practice, and seek advice and intervention when reasonable and prudent.

Professional

1. Apply clinical and professional judgment to ensure informed consent, informed refusal of care, and informed referral of care.
2. Practice in a manner consistent with applicable policy and procedure.
3. Report unsafe practice, alleged unprofessional conduct, and/or potential criminal activity to the appropriate authority, and cooperate with investigation.
4. Comply with applicable regulation and legislation.
5. Ensure timely, accurate, legible, and complete documentation.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

Educator

1. Seek opportunities to translate knowledge: teach and be taught.
2. Provide coaching, preceptorship, mentorship, leadership, and direct and indirect supervision to students and colleagues.
3. Remain accountable for the provision of care.
4. Ensure patient safety when considering the knowledge and ability of students and colleagues while overseeing provision of care.
5. Remain accountable for documentation and communication to ensure accuracy, clarity, and timeliness.
6. Share knowledge and expertise with others.
7. Maintain professional relationships and contribute to collaborative learning.
8. Provide and promote health teaching to the patient.

Advocate

1. Participate in regular review of clinical, administrative, and operational policy and procedure.
2. Question policies and procedures that may be inconsistent with patient needs and safe health care practice, and suggest and implement improvement.
3. Apply risk mitigation strategies to prevent or minimize adverse events through identification, reporting, monitoring, and follow-up.
4. Participate in maintaining competence and professional development opportunities.
5. Seek assistance, consultation, referral, or other actions when in the patient's best interest.
6. Promote quality and safety in medication dispensing, administration, inventory management, and system oversight.
7. Engage in research to identify and disseminate best practice.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation

3



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

Team Member

1. Inform peers of the paramedic regulatory framework.
2. Ensure peers understand operational requirements and practice limitations.
3. Develop and maintain professional relationships.
4. Listen attentively, provide feedback, and communicate effectively.
5. Manage conflict respectfully and effectively.

Reflective Practitioner

1. Remain accountable for actions in practice.
2. Apply valid information derived from research, guidelines, policies and procedures, consensus statements, and expert opinion in practice.
3. Review decisions and critique personal performance.
4. Appreciate personal performance gaps.
5. Participate in continuing professional development and lifelong learning.
6. Demonstrate respect, continuous learning, and feedback in the delivery of safe care.
7. Reflect upon the privilege and responsibility of being a paramedic.

Copyright © 2017 Paramedic Association of Canada

Final draft: 2016 September 30

Approved for stakeholder and public consultation



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

COPYRIGHT

The contents of this publication are protected by copyright in Canada and throughout the world and must not be reproduced in whole or in part in any manner, including in print, online or by other electronic means, without the permission in writing of:

The Paramedic Association of Canada.
201-4 Florence Street
Ottawa Ontario, K2P 0W7

Copyright © 2017 Paramedic Association of Canada



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017-09-27 15:54

LRB 604 660 1418 >> 6042735762

P 4/25

BCLRB No. B172/2017

BRITISH COLUMBIA LABOUR RELATIONS BOARD

M.S

(the "Complainant")

-and-

AMBULANCE PARAMEDICS OF BRITISH COLUMBIA -
CUPE LOCAL 873

(the "Union")

-and-

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

(the "Employer")

APPEARANCES: M.S. for himself

CASE NO.: 71078

DATE OF DECISION: September 27, 2017



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017-09-27 15:54

LRB 604 660 1418 >> 6042735762

P 5/25

- 2 -

BCLRB No. B172/2017

DECISION OF THE BOARD

I. NATURE OF APPLICATION

1 The Complainant applies under Section 12 of the *Labour Relations Code* (the "Code") alleging the Union breached its duty of fair representation to him when it declined to pursue a termination grievance on his behalf.

2 Under Section 13 of the Code, I must determine whether the complaint discloses a case of an apparent contravention of Section 12.

II. BACKGROUND

3 The following background information is drawn from the complaint and attached material submitted by the Complainant.

4 The Complainant was hired by the Employer as an Emergency Medical Calltaker ("EMCT") in September 2016 and began the required training program (the "Training Program") for the position on September 22, 2016. The Training Program consists of two orientation days and three weeks of classroom training, followed by a 200-hour practicum.

5 As part of their orientation, EMCT trainees are issued an evaluation document and are briefed on the training and evaluation process. There are four exams or evaluations during the Training Program, and students are required to obtain a score of at least 80% on each exam or evaluation in order to continue. In addition, students must have a total average of at least 85% on all four exams/evaluations by the end of the Training Program in order to be considered to have achieved a successful completion.

6 The Complainant completed his classroom training from September 22 to October 14, 2016 and his practicum from October 23, to December 2, 2016. His EMCT Training Summary Report dated December 15, 2016 (the "Report"), prepared by a Regional Dispatch Training Officer, noted that he was "successful in both of his class evaluations", and was assigned to a practicum team with a "very experienced preceptor" (coach). Part way through the practicum, the Complainant requested a new preceptor and was re-assigned a different one.

7 On November 22, 2016, the Complainant and his preceptor met with the Instructor for the Training Program to fulfil a scheduled "student progress check-in". During the meeting, the three discussed the Complainant's progress to date and created a learning plan to address areas of weakness which needed improvement. The Report stated that it was "documented and discussed in the learning plan and through the program, [the Complainant] showed little or no progression concerning the core skills and competencies required of him in the role of EMCT". The Report further described five competencies the Complainant "continued to struggle with" at the completion of his practicum.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017-09-27 15:54

LRB 604 660 1418 >> 6042735762

P 6/25

- 3 -

BCLRB No. B172/2017

8 Under the heading "Evaluation Details", the Report next stated:

On Friday, December 2, 2016, [the Complainant] completed his written exam and was prepared to perform his Live-Calltaking evaluation for his next shift on December 3, 2016. On the Friday before [the Complainant] wrote his exam, I sat down with him to confirm that he didn't have any last minute questions, concerns or requests. [The Complainant] did state that he felt nervous about his current performance and questioned his chances of being successful in his evaluation. I offered [the Complainant] an extension in his training by 37.5 hours if he felt this might alleviate his stress. At this point, however, [the Complainant] was confident that he had received sufficient time, support and coaching to proceed with the evaluation as scheduled. I relayed our conversation to [the Complainant's] Preceptor [B.C.], Supervisor, ... and Instructor, Despite [the Complainant's] lack of progression, all parties were in agreement and were more than satisfied with the support given to [the Complainant] in order for him to evaluate [sic] on December 3, 2016.

9 The Report next set out the Complainant's scores on the four exams or evaluations. He achieved 93% on the Classroom Written Exam, 84% on a Classroom Skill / Scenario Stations Exam, and 95% on the Final Written Exam. Each of those exams were worth 20% of his final score. However, on the Live Calltaking Evaluation, worth 40% of his final score, he achieved 68%, below the required 80%. His exam and evaluation scores resulted in a final Training Program score of 82%, below the required 85% average.

10 The Report concluded:

Upon grading and reviewing [the Complainant's] Live-Calltaking Evaluation, it was clear that [the Complainant's] weaknesses were still prevalent and all of the feedback and support given to him was either not being absorbed or willfully ignored. Upon further review of all preceptor fluid survey submissions, learning plan documentation and targets as well as evaluation scores[,] I am confident that [the Complainant] was given the best possible support available and fell short in meeting the core competencies, skills, and knowledge expected of him to be a successful Emergency Medical Calltaker.

11 On December 16, 2016, the Employer's Manager, Vancouver Dispatch Operations Centre met with the Complainant and provided him with a letter which advised him that, as a result of his failure to successfully complete the Training Program, his employment was at an end. The letter stated in part:

As detailed in your letter of offer, your continued employment was dependent on successfully completing the training. It is with regret we advise you that you have been unsuccessful in your training requirements.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017-09-27 15:54

LRB 604 660 1418 >> 6042735762

P 7/25

- 4 -

BCLRB No. B172/2017

You will not be eligible to apply for any dispatch position with BCEHS for a period of three years.

- 12 Pursuant to the Collective Agreement between the Union and the Employer, a shop steward attended the December 16, 2016 meeting between the Employer and the Complainant. The Complainant says it was "agreed" that he and the shop steward, K.B., would meet an hour before the meeting time so that he could "provide her need to know information and pertinent details", but that K.B. arrived only a half-hour before the meeting time, spoke with someone else for 15 minutes of the time before the meeting, texted on her phone while he was speaking with her, and "made no attempt to gain the facts or circumstances surrounding this file".
- 13 The Complainant states that K.B. was "ill prepared" for the meeting, adding: "Needless to say, I found [K.B.'s] level of attention, professionalism, and mere superficial presence inadequate", and he requested the Union re-assign him to another shop steward. He also requested that the Union file a grievance of his dismissal by the Employer.
- 14 The Union's process for filing a grievance involves the submission of a "Grievance Fact Sheet" to the Union's Grievance Caucus. The Complainant's Grievance Fact Sheet was submitted on January 3, 2017.
- 15 On February 8, 2017, the Union wrote to the Complainant, advising him that his Grievance Fact Sheet had been reviewed by the Grievance Caucus and a decision had been made not to proceed with a grievance. The letter, signed by the Union's Vice-President, Dave Deines ("Deines"), stated in part:
- The Union has reviewed the Fact Sheet with particular attention on the fact pattern of the file, relevant Collective Agreement language, jurisprudence and the reasonable likelihood of success should the matter be advanced to a formal grievance.
- The grievance caucus advanced a motion on your behalf to advance the fact sheet to a formal grievance.
- Of particular note was the fact that, as a probationary employee, the test or threshold for continued employment is much lower than for a tenured member. As you were deemed unsuccessful in probation, the employer terminated your employment. On review of the facts surrounding this matter, the grievance caucus concluded that the likelihood of success would be minimal at best. As such, the motion to advance was defeated.
- 16 Deines' February 8, 2017 letter on behalf of the Union advised the Complainant that if he disagreed with the decision not to proceed with the grievance, he had 30 days to appeal the decision to the Union's Provincial Executive Board ("PEB") under the Union's grievance appeal process. The Complainant says he filed a written appeal on February 21, 2017 "with all references and supporting material that supported the appeal that I had at that time". He says he "followed up" with K.B. and another Union official, L.T., "on 5 separate occasions to ensure that the documentation from the employer was received". He says the documentation was obtained from the Employer



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017-09-27 15:55

LRB 604 660 1418 >> 6042735762

P 8/25

- 5 -

BCLRB No. B172/2017

on June 18, 2017, and on June 22, 2017, he sent the Union "all new and relevant information for the [Union] to consider before ruling on my grievance".

17 The Complainant's June 22, 2017 email indicates the material he submitted in support of his appeal included a grievance appeal letter ("Grievance Appeal Letter") setting out his arguments for proceeding with the grievance. The Grievance Appeal Letter also attached documentation from the Employer regarding the Training Program, the Report, and material arising from his training including five incident performance reviews and 11 "fluid surveys". The fluid surveys comprise pages of preceptors' detailed evaluations of the Complainant's performance during call taking practicum shifts. All of this material, which the Complainant submitted to the Union, is also attached to his complaint.

18 In his Grievance Appeal Letter to the Union's PEB, the Complainant stated in part:

First and foremost I want to recognize the diligent work of [L.T.] for walking me through the process. Her level of knowledge and professionalism has been stellar throughout this process. It's important to note that although we may have come to different conclusions on the outcome, we are both on the same team in regards [sic] to finding a mutually beneficial solution.

19 The Complainant then argued that the Employer "failed in its duty to adequately train and prepare me for this role" through the Training Program. On this topic, he stated in the Grievance Appeal Letter:

[The Employer] states they are committed to educational excellence in the development and delivery of its educational programs. I am going to use this opportunity to provide some open and honest constructive criticism. The purpose of this feedback is to be transparent in identifying some key areas that I feel limited my ability to learn and deliver on the required knowledge and skills expected of me. This ultimately led to my un-successful [sic] completion of the program.

20 The Complainant's Grievance Appeal Letter went on to identify areas of the Training Program that the Complainant felt were deficient or not delivered properly. Generally, the Complainant complained that the Training Program was not administered as the written Program Overview described. In his Grievance Appeal Letter, the Complainant quoted an email he had written on November 22, 2016 to the Training Program Instructor, which stated in part:

Thank-you for the opportunity to sit down and have an open and honest conversation in regards to my training experience, which started on October 2nd. I believe to create an optimal and safe learning environment for a student to excel the goal of the preceptor should be to provide valuable teaching and learning experiences and serve as a positive resource. A preceptor should foster growth in a supportive environment where new students will feel comfortable asking any and all questions, clarify procedures,



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017-09-27 15:55

LRB 604 660 1418 >> 6042735762

P 9/25

- 6 -

BCLRB No. B172/2017

and help with understanding reasons behind task. As [sic] stellar preceptor must demonstrate patience, understand[ing], and professionalism and act as a role model for the student.

Unfortunately, this has not been my experience. In my opinion, I was meet [sic] with frustration, impatience, and agitation. Statements such as "How many times" and "I don't understand why your [sic] not getting this" and "You should" created a hostile learning environment. Continually being told what I was doing wrong, without being reinforced with what I was doing right was not a positive experience. I believe this limited my ability to learn and understand the required skills necessary to be proficient in this role.

- 21 The Complainant went on in his November 22, 2016 email to the Instructor (quoted in his Grievance Appeal Letter to the Union) to make clear that his complaints were with respect to his first preceptor, and that he felt another preceptor to whom he was re-assigned "created an optimum-learning environment for me too [sic] feel safe, comfortable, and encouraged. He truly was there to facilitate my success. I cannot thank him enough for his patience, understanding, level of professionalism and ability to identify my areas of weakness while at the same time reinforcing my strengths".

- 22 After making other comments and observations with respect to the Training Program, the Complainant concluded his Grievance Appeal Letter:

In summary, I believe [the Employer] has an extremely well researched, job oriented, reproducible, and effective Education Call Taking Program. It[']s clear a lot of hard work, energy, and effort was taken to design this program. This program has been created with a variety of evaluation methodologies that have the capacity to assess, identify and correct deficiencies. I'm confident it has the ability to give each student the best opportunity for success. If executed properly, I believe the employer will get the outcome they are looking for. My impression is there was a disconnect with what the employer ensured. Specifically, the level of support, accountability and assistance, and what were actually delivered. I feel, had the [Employer's] Education Program followed its curriculum, my outcome could have been different.

It is important for [the PEB] to know that I relocated from Calgary, Alberta to Vancouver, BC when I accepted this position. An event that significantly caused both emotional and financial hardship. With the understanding that [the Employer] was an employer that truly was going to provide me with the tools and support to succeed. [The Employer's] Code of Ethics states that they are committed to strengthening individual capabilities and encouraging professional development by providing support and encouragement. They failed. As such I am requesting Provincial Executive Board grant my request to file a grievance in relation to this termination and hold this employer accountable. I thank-you for your time.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017-09-27 15:55

LRB 604 660 1418 >> 6042735762

P 10/25

- 7 -

BCLRB No. B172/2017

23 Deines on behalf of the Union wrote to the Complainant on July 20, 2017. His letter stated:

Please accept the following as a final update to the above captioned grievance matter.

On the 18th of July, the Union conducted a special Executive Board meeting to review several grievance caucus decision appeals. This meeting included multiple Regional Vice Presidents, the two Provincial Vice Presidents, our National Staff Representative and our legal counsel. One of the appeals discussed was [the Complainant's].

A motion to advance the file was made on your behalf and extensive discussion followed, including an overview of the file, the fact pattern of the grievance and the information that [was] provided in support of the appeal.

As a result of the debate, the motion to reconsider the original decision of the grievance caucus was defeated. This means that the original decision of the caucus to not proceed with the file still stands. We will now be closing our files accordingly.

While I know that this was not the outcome that you had hoped for, please know that the Executive Board considered every piece of evidence in an attempt to reach a favourable outcome.

Feel free to contact me via the Union office if you have any questions.

24 On August 11, 2017, the Complainant sent an email to Deines, asking for "clarification" of the Union's decision. He sought the names of the individuals who attended the July 18, 2017 PEB meeting and copies of the documentation that was considered. He stated: "Essentially, I am trying to fully understand the policies, process, and criteria that led the board to conclude their decision".

25 Deines and the Complainant exchanged follow-up emails on August 14, 2017, in which Deines stated, in part: "As the grievance is the property of the union, it is not our practice to disclose names or documents from grievance caucus or appeal meetings". He also stated that if the Complainant had a complaint about the grievance appeal process, he could file a complaint about it with the Union's president. The Complainant responded by email, indicating this was not satisfactory and he continued to seek further information about the Union's decision.

26 In an email to the Complainant on August 14, 2017, Deines wrote:

...I am responding on behalf of President Bronwyn Barter as I am the union's chief grievance officer.

On February 8th, 2017, the union sent you correspondence advising you that a grievance caucus had defeated a formal motion to advance the fact sheet, which was filed on your behalf, to a formal grievance. Of particular note in that correspondence, were the reasons for the motion being defeated, which stated in part "Of particular note was the fact that, as a probationary employee, the



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017-09-27 15:55

LRB 604 660 1418 >> 6042735762

P 11/25

- 8 -

BCLRB No. B172/2017

test or threshold for continued employment is much lower than for a tenured member. As you were deemed unsuccessful in probation, the employer terminated your employment. On review of the facts surrounding this matter, the grievance caucus concluded that the likelihood of success would be minimal at best. As such the motion was defeated".

It should also be noted that you entered into the grievance manager *"**As I have had to relocate to Calgary, Alberta as a result of being terminated and am no longer in Vancouver, I am not requesting re-instatement as it is not logistically possible**"*

As reinstatement would be one of the only resolves that the union could pursue in front of a 3rd party, the above statement was also taken into consideration during the grievance caucus deliberations.

On February 21st, you sent the union an appeal letter. In that letter, you did not provide any new specifics or particulars that the caucus would have not considered in its original decision. In point of fact, you requested to be re-instated in that correspondence which is inconsistent with the statement above captured in the grievance document.

On July 20th, the union wrote to you outlining that the motion to reconsider the actions of the grievance caucus had been defeated. This decision would have been based on all of the material that you had forwarded in support of your appeal request, the original decision of the caucus, the relevant collective agreement language and jurisprudence.

We have closed our files on this matter and will not be proceeding any further.

I trust that this answers your questions. (Italics in original)

- 27 In an email to Deines on August 16, 2017 complaining of the Union's refusal to disclose the names of those who attended the meeting and the documentation that was before them, the Complainant stated in part:

This lack of transparency and continual desire to operate in the shadows causes substantial doubt in this union. Not being privy to the decision making process causes me to believe that the union has indeed failed to carefully examine the merits of this grievance. Has this union been fair, genuine and not merely apparent? Has this union only given superficial attention to the facts or matters in issue? Unfortunately, two generic, non-specific template letters from you does not suffice.

- 28 The Complainant filed his Section 12 complaint on August 24, 2017.

III. COMPLAINANT'S SUBMISSIONS

- 29 The Complainant alleges the Union acted arbitrarily "by disregarding my interests". He says it "did not take a reasonable view of the problem before it" and



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017-09-27 15:55

LRB 604 660 1418 >> 6042735762

P 12/25

- 9 -

BCLRB No. B172/2017

"failed to ensure it was aware of all relevant information and as such failed to make a reasoned decision". He also alleges the Union acted in bad faith, adding: "Specifically, I assert that [the] union was not honest with its claim that extensive discussion and a detailed overview of the file took place in the July 18, 2017 meeting", and that the Union "flat out lied in-regards [sic] to who was in attendance in the decision making Executive Board Meeting".

30 The Complainant further submits that the Union "has not put its mind to the merits of my claim", adding:

Since I have not been privy to the decision making process I don't have confidence that the union has carefully examined this grievance. Nor do I believe the union has considered the significance of this case and its consequences it has on my well-being. The representation by this union has not been genuine. I believe the union prematurely concluded based on my probationary employee status alone, that a grievance would not be successful. I do not believe that the union investigated the circumstances of this termination. I do not believe based on the union[']s inability to show due diligence, that they have acted with integrity and competence. I am still uncertain if the union authentically tried to discover and review the key facts of this case? Perhaps if the union was more transparent with its rational conclusion of exactly how and why they concluded a grievance was ill conceived then I could have more confidence. Of course I understand that is not within the authority of this Board to dictate how a union chooses to operate. I have given this union several avenues to clarify this issue. However their silence has been deafening. I assert that this union did not consider important and relevant information, did not make a reasoned judgment and carried out representation with reckless disregard.

IV. ANALYSIS AND DECISION

31 Section 12 requires that a union must not act in an arbitrary, discriminatory or bad faith manner in representing employees in its bargaining unit. As long as it meets this requirement, a union may exercise its right to represent bargaining unit employees in the manner it believes serves the interests of the bargaining unit as a whole. This includes decision-making with respect to individual grievances. As explained in *James W.D. Judd*, BCLRB No. B63/2003, 91 C.L.R.B.R. (2d) 33 ("*Judd*");

Once employees have chosen a union as their exclusive bargaining agent, any decisions regarding the negotiation and administration of the collective agreement are the union's to make. Thus, for example, if an employee feels he was denied a promotion in violation of the collective agreement, or disciplined or dismissed without just and reasonable cause, it is up to the union to decide what to do about that. Generally, it is up to the union to decide whether to file a grievance against the employer on behalf of an employee. Once a grievance is under way, it is up to the union to then decide whether to abandon the grievance, try to negotiate a



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017

2017-09-27 15:56

LRB 604 660 1418 >> 6042735762

P 13/25

- 10 -

BCLRB No. B172/2017

settlement with the employer, or take the grievance to arbitration.
Such decisions are not up to the employee... (para. 34)

- 32 As further explained in *Judd*, the fact that an individual grievor is dissatisfied, or disagrees, with a union decision not to pursue a grievance does not in itself establish a breach of Section 12:

When a union decides not to proceed with a grievance because of relevant workplace considerations -- for instance, its interpretation of the collective agreement, the effect on other employees, or because in its assessment the grievance does not have sufficient merit -- *it is doing its job of representing the employees*. The particular employee whose grievance was dropped may feel the union is not "representing" him or her. But deciding not to proceed with a grievance based on these kinds of factors is an essential part of the union's job of representing the employees as a whole. When a union acts based on considerations that are relevant to the workplace, or to its job of representing employees, it is free to decide what is the best course of action and such a decision will not amount to a violation of Section 12. (para. 42, emphasis in original)

- 33 Thus, an assessment by the union that a grievance does not have sufficient merit is a legitimate basis for deciding not to proceed with a grievance, as long as the assessment is not done in an arbitrary manner. In *Judd*, the Board explained what the Section 12 prohibition against arbitrariness means in this context:

...In the Section 12 context, the Board has held that a union's decision to abandon a grievance is not arbitrary if the union "makes sure it is aware of the circumstances, of the possible merits of the grievance, puts its mind to the case and comes to a reasoned decision whether to proceed": *Donato Franco*, BCLRB No. B90/94, p. 13. (para. 58)

- 34 In his complaint, the Complainant alleges the Union acted arbitrarily because it "did not take a reasonable view of the problem before it" and "failed to ensure it was aware of all relevant information and as such failed to make a reasoned decision". He further says that because he was not "privy to the decision making process" of the Union, he does not have "confidence that the Union has carefully examined this grievance" and does not "believe the union has considered the significance" of his case and has "prematurely concluded based on my probationary employee status alone, that a grievance would not be successful".

- 35 The Union's letter to the Complainant of February 8, 2017 does identify the Complainant's probationary status as a primary reason why the Union decided the grievance was unlikely to succeed, stating:

Of particular note was the fact that, as a probationary employee, the test or threshold for continued employment is much lower than for a tenured member. As you were deemed unsuccessful in probation, the employer terminated your employment. On review of



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017

2017-09-27 15:56

LRB 604 660 1418 >> 6042735762

P 14/25

- 11 -

BCLRB No. B172/2017

the facts surrounding this matter, the grievance caucus concluded that the likelihood of success would be minimal at best. As such, the motion to advance [a grievance] was defeated.

36 There is no dispute the Complainant was a probationary employee in the sense that his continued employment depended on his passing the Training Program. He does not dispute that the Employer had the right to terminate his employment if he did not pass, and there is no dispute that he did not pass the Training Program. In his Grievance Appeal Letter, he expressed approval of the contents of the Training Program ("I believe [the Employer] has an extremely well researched, job oriented, reproducible, and effective Education Call Taking Program") but criticized the Employer's execution or delivery of it. He complained of alleged impatience and negative comments by his first preceptor (coach) in the Training Program, but he praised another preceptor to whom he was re-assigned as having "created an optimum-learning environment for me". He asserted the Employer "failed" in delivering the training to him, and appeared to suggest that the Employer, not he, was responsible for his failure to successfully complete the Training Program.

37 The Union considered the Complainant's grievance appeal at its July 18, 2017 Provincial Executive Board meeting, and on July 20, 2017, Deines advised him the "motion to reconsider the original decision of the grievance caucus was defeated". In his subsequent email to the Complainant of August 14, 2017, Deines noted the explanation previously given in the Union's February 8, 2017 letter – that the Complainant was a probationary employee who had failed his probation – and further noted that the Complainant had initially indicated to the Union that he was not seeking reinstatement. Deines stated that, as reinstatement was "one of the only resolves the union could pursue" at arbitration, the Complainant's statement that he was not seeking it "was also taken into consideration during the grievance caucus deliberations". Deines in his August 14, 2017 email to the Complainant noted that subsequently in his February 21, 2017 Grievance Appeal Letter, the Complainant had requested reinstatement, but this was "inconsistent" with his earlier statement.

38 Thus, the Union provided an explanation to the Complainant for the Grievance Caucus's decision not to proceed with the grievance. It is not as fulsome an explanation as might have been possible in the circumstances. For example, the Union could have explained in greater detail why the Complainant's probationary status meant that the Employer had a much lower test or threshold to meet in justifying his termination than it would for a "tenured member". However, the succinctness of the explanation does not establish that it was based on an inadequate consideration of the circumstances. The explanation, although succinct, is rational and consistent with the undisputed nature of the Complainant's employment and its dependency on successful completion of the Training Program, as well as with the Union's limited ability to challenge an Employer determination that a trainee has failed its Training Program.

39 In *Judd*, the Board stated:

Typically where a union gives reasons for its decision it will not be arbitrary. Although it is possible for a union to consider a matter and give "reasons" for rejecting a grievor's position that are



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017

2017-09-27 15:56

LRB 604 660 1418 >> 6042735762

P 15/25

- 12 -

BCLRB No. B172/2017

so unresponsive to the topic or so divorced from reason that they amount to arbitrariness, it is rare. (para. 66)

- 40 I find the reasons given by the Union in this case were not so unresponsive to the topic or so divorced from reason that they amounted to arbitrariness. The Union identified a rational basis why the Complainant's grievance was unlikely to succeed: his employment was "probationary" in the sense that it was dependent on his passing the Training Program, and he was terminated because he did not pass the Training Program. In his Grievance Appeal Letter, the Complainant criticizes the Employer's delivery or execution of the Training Program; however, the Union was entitled to conclude that his criticisms did not provide a basis on which a grievance of his termination was likely to succeed. Although the Complainant asserts the Union did not investigate the matter sufficiently and did not make a reasoned decision, I find his complaint does not disclose an apparent case that the Union's decision not to grieve was made in an arbitrary manner.
- 41 The Complainant complains that the Union declined to give him the names of those who attended the July 18, 2017 PEB meeting and that he was not made "privy to the decision making process". I find, however, that the Union provided him with sufficient information about its process, and was not required to tell him the names of those who attended the PEB meeting. He also complains the Union "flat out lied" regarding who was in attendance at the meeting, but this complaint is inconsistent with his complaint that the Union refused to tell him who attended. In any event, I find it does not establish "bad faith" or any other apparent breach of Section 12.
- 42 In *Judd*, the Board noted:
- ...when assessing a union's conduct in representing an employee, the Board considers the union's conduct as a whole, from the beginning to end of the grievance process. That is because the issue under Section 12 is whether the union has *represented* the employee in a manner that is arbitrary, discriminatory or in bad faith -- not whether it has committed isolated acts that may fit one of those descriptions. (para. 45)
- 43 In addition to his complaints about the Union not disclosing, or lying about, who attended the PEB meeting, the Complainant also complains about the allegedly inadequate conduct of a Union representative, K.B., at the December 16, 2016 meeting. I find these complaints must be considered in the context of the Union's conduct as a whole. In that regard, I note the Complainant stated, in his Grievance Appeal Letter, that he wanted to recognize the "diligent work" of another Union representative, L.T., "for walking me through the process" and that her "level of knowledge and professionalism has been stellar throughout the process". In addition, it is evident that Deines communicated with the Complainant in a regular and timely way, and that the Union gave the Complainant an opportunity to file a written appeal of the decision not to grieve, which was considered by the Union's PEB before a final decision was made.
- 44 Looking at the Union's conduct as a whole, I find it is evident that the Union gave sufficient consideration to whether a grievance of the Complainant's termination for having failed the Training Program should be pursued, and came to a reasoned



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017-09-27 15:56

LRB 604 660 1418 >> 6042735762

P 16/25

- 13 -

BCLRB No. B172/2017

decision that it should not because it was unlikely to succeed on its merits. I find the Complainant has provided no evidentiary basis to reject the assertion in Deines' February 8, 2017 letter that the Union reviewed his Grievance Fact Sheet in light of "the fact pattern of the file, the relevant Collective Agreement language, jurisprudence and the reasonable likelihood of success". Having done so, the Union came to the reasoned conclusion that the grievance was unlikely to succeed because the Complainant's employment was probationary and conditional upon him passing the Training Program, and the Employer would have a low threshold or test to meet in justifying its decision that he had failed the Training Program.

45 I note that the material attached to the Section 12 complaint shows there was voluminous documentation generated by the Training Program regarding the Complainant's progress and performance. While the Complainant believed the Employer failed to provide him sufficient support or assistance to pass the Training Program, the Union was not required to adopt the Complainant's view of the matter. It was entitled to review the relevant material, including the material documenting the Employer's ongoing evaluation of the Complainant's progress and performance in training, and come to its own view on the merits of a grievance and whether it was likely to succeed. As stated in *Judd*, the Board does not second-guess such assessments under Section 12:

Section 12 is not an avenue of "appeal" of the merits of union decisions. Rather it is designed to ensure the union exercises its judgment and acts based on proper considerations. If it does, it has done what it is required to do by Section 12 and the Board has no jurisdiction to overturn or change the union's decision. (para. 44)

46 In his complaint, the Complainant states he moved from Calgary to Vancouver to become employed and trained by the Employer as an EMCT. His scores on the written exams in the Training Program were high (93% and 95%). However, the Training Program preceptors identified weaknesses and deficiencies in his performance in practicum shifts which ultimately were reflected in an unsuccessful score (68%, below the required 80%) in his Calltaking Evaluation. The Complainant expressed his belief in his Grievance Appeal Letter to the Union that his failing the Training Program was due to the Employer having "failed" in delivering it to him. He wanted the Union to grieve his termination, apparently on that basis.

47 The Union, however, concluded the Employer would have had a very low threshold or test to meet in defending its termination of the Complainant's employment for failing the Training Program, and that a grievance of the termination was therefore unlikely to succeed. The Union also took into account the Complainant's initial advice that he was not seeking reinstatement, when it decided not to pursue a grievance. I find these constituted relevant considerations and adequate reasons for its decision not to grieve. Looking at the Union's conduct as a whole, I find the complaint does not disclose an apparent case that the Union's conduct was arbitrary, made in bad faith, or otherwise in breach of Section 12.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2017-09-27 15:56

LRB 604 660 1418 >> 6042735762

P 17/25

- 14 -

BCLRB No. B172/2017

V. CONCLUSION

- ⁴⁸ For the reasons given, I find the complaint does not disclose a case of an apparent contravention of Section 12, and accordingly it must be dismissed.

LABOUR RELATIONS BOARD

ELENA MILLER
VICE-CHAIR



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017



Paramedics are at the front line of Canada's epidemic in opioid use and abuse.

The Paramedic Association of Canada participated in the Opioid Summit highlighting our commitment to take action on combating opioids on the streets of our communities.

Paramedics support the Government of Canada's 5 step opioid action plan. Health Canada's action on Opioid Misuse must include front line paramedics.

REQUEST:

- That Government invest in improving pre-hospital overdose data collection
- That Government support better treatment options for patients using opioids

Canada must improve data collection on the drugs users are using, numbers of people presenting to emergency rooms and numbers of users treated by paramedics prior to arriving at emergency rooms. We do not have standardized reporting across Canada.

Paramedics Support:

- An Act to Amend The Controlled Drugs and Substances Act
- Good Samaritan Drug Overdose Act

British Columbia Paramedics alone have experienced:

120 suspected drug overdose deaths in March 2017
This is a 51.9% increase over the number of deaths occurring in March 2016 (79)

The number of illicit drug overdose deaths in Vancouver in March 2017 (120)
equates to about 3.9 deaths per day for the month



@PAC_PARAMEDIC



PACPARAMEDIC

WWW.PARAMEDIC.CA



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

COMMUNITY PARAMEDICS

Paramedics believe all Canadians will benefit from the addition of Community Paramedics to existing health care programs within the country. Paramedics have the knowledge, skills and abilities to provide non-urgent health care services.

Paramedics can provide care:

- To rural and remote communities
- To indigenous communities
- In times of crisis and disaster, refugee care, immunization, and end of life care

REQUEST:

- That the Federal Government invest in Community Paramedic initiatives
- That the Federal Government employ community paramedics in indigenous communities across Canada

In addition to our delivery of urgent and emergency care, Paramedics provide:

- Home visits to seniors and high-needs patients
- Follow-up care to patients discharged from hospitals
- Education for patients managing their chronic diseases
- Referrals to local services in the community like Community Care & Health Centres
- Emergency Department triage

Community Paramedic programs have been part of the health care landscape for over two decades in countries such as Australia, New Zealand, the UK and the US. Canadian Paramedics are able to improve health care delivery for all Canadians.



@PAC_PARAMEDIC



PACPARAMEDIC

WWW.PARAMEDIC.CA



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017



Paramedic Association of Canada
Association des paramédics du Canada

PARAMEDIC MENTAL HEALTH & WELLNESS

Paramedics are exposed to psychological stress and/or traumatic events everyday. Paramedics support the 16 recommendations from the Standing Committee on Public Safety and National Security (SECU) study on Operational Stress Injuries and Post-Traumatic Stress Disorders in Public Safety Officers and First Responders.

REQUEST:

- That Government establish a new **Canadian Institute for Public Safety Officer Health Research**
- That Government support organizing a **national mental health prevalence survey** by the new Canadian Institute for Public Safety Officer Health Research in collaboration with Statistics Canada

Canada's paramedics play a critical role in maintaining the health and safety of our communities. Paramedics risk their own health to protect our communities.

The SECU's Report recommendations should be actioned immediately to support our paramedics who have dedicated their lives to ensuring the health and safety of our communities.

2016 PAC Mental Health & Wellness Survey of over 6000 paramedics:

- ~30% of paramedics have contemplated suicide
- ~60% of paramedics know of a paramedic colleague that has contemplated suicide
- ~70% of paramedics are concerned that a paramedic colleague is at risk for suicide



@PAC_PARAMEDIC



PACPARAMEDIC

WWW.PARAMEDIC.CA



AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873



CONVENTION 2017

Paramedic Association of Canada
Association des paramédics du Canada

**A NATIONAL MONUMENT
TO HONOUR PAST, PRESENT
AND FUTURE PARAMEDICS**

Projected cost of Monument Project – \$5 MILLION

The Canadian Paramedic Memorial Foundation (CPMF) is a national organization created in 2012 that became a charitable organization in 2015. It was established for the purpose of building a national monument in Ottawa to honour paramedics who have lost their life in the line of duty and to highlight the role and history of paramedics in the health, safety and welfare of all Canadians.

REQUEST:

- That the Government support the creation and building of a Paramedic Monument in Ottawa
- That the Government endorse this project through Heritage Canada in order to assist in the funding of the Monument Project

INTERESTING FACTS

- There are 40,000 paramedics across Canada.
- Paramedics are available 7 days/week, 24 hours/day.
- Paramedics provide primary, advanced and critical care, as well as community care, and are the link between the home and the hospital.
- 95% of Canadians will need the presence of paramedics at some point in their life.
- Paramedics are at high risk of injuries, contagion and hazards on their physical and mental health.
- Since the first records in 1980, 39 Canadian paramedics have lost their life during their line of duty.
- The Canadian Paramedic Memorial Foundation, a charitable organization since 2015, was established to honour paramedics who have lost their life in the line of duty and to highlight the role and history of paramedics in the health, safety and welfare of all Canadians.



 @PAC_PARAMEDIC

 PACPARAMEDIC

WWW.PARAMEDIC.CA



CONVENTION 2017

Monument Project Briefing notes

39 LODDs have been recognized, so far, since 1980.

Most recent is Master Cpl. Alfred Barr – SAR Tech – based in Winnipeg but from Lethbridge, Alta. Killed during a training exercise in Yorkton, Sask.

Breakdown of LODDs by region:

- Ontario – 14
- BC – 11
- Alberta – 5
- Quebec – 4
- Nova Scotia – 2
- Manitoba – 2
- New Brunswick – 1

- Canadian Forces Medics – 9

These LODDs have all occurred while the members were on the job – responding to or returning from a call for assistance, or during training exercise.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Provincial Secretary Treasurer's Report

The Secretary Treasurer's Report focuses primarily on the finances of our Union. In addition, I will touch on some of my extra activities since last Convention, in relation to the Union Strategic Plan objectives. I won't report on all my roles, as some things, like political actions, are covered by other executive reports.

Financials

Our financial reporting year is July 1st, 2016 through June 30th 2017. This report covers the entire fiscal year. Full details of the Union's finances are provided in the attached *Independent Auditors Report, Financial Statements* and *Committee Expenditures* breakdown.

For the 2016-2017 fiscal year, we report a deficit of \$245,445. This deficit is based on a simple comparison of income vs expenses, and is not reflective of our position within our annual budget. As reported previously, this deficit position was expected, due to higher than normal expenditures related to political action, PR campaigns, professional fees and increased number of arbitrations. Additionally, this deficit fails to recognize one major source of income: the sale of our old union office, which generated an additional \$331,363. After taking this into account, we are in a surplus of \$85,918. Given this, it was a decision of the PEC not to trigger any member assessments, and simply draw from the sale proceeds to offset the deficit.

When looking at our expenditures compared to our annual budget, we completed the year at 123% of our projected budget. Revenues for the year were 117% of our projected budget. Again, this position was to be expected, as there were several additional expenses related to the provincial election and increased labour relations activity. Some major expense categories were reduced this year, including shift coverage at almost \$175,000 below last fiscal. These cost savings helped offset the additional expenses for the year. The attached *Committee Expenditures* report details our spending in greater detail, with a breakdown of the common committees. For even greater detail, please refer to the *Independent Auditors Report, Financial Statements, Income Statement* and *Balance Sheet*, also attached.

In summary, although our spending exceeded our revenue for the year, we remain in a strong financial position. These extra expenditures were well allocated in relation to our political actions and several prominent arbitration conclusions in the year. We continue to hold well over \$2 million in cash reserve, which means we're financially secure for the years ahead.

Investing - We currently hold approximately \$2.5 million in cash reserves. Previously these funds have been held in term deposits, which yield about 1.4% interest, and lock the money in for specific periods. Believing that we could achieve a better rate of return with our savings, I began looking for alternatives. After consultation with the CUPE BC Secretary Treasurer, I learned that their returns on their savings have been between 6-8%. An increase such as this would provide our local with a significant new income source. Given this, the PEC has elected to invest \$1.75 million with Seamark Asset Management Ltd., the same financial manager used by CUPE BC and many other CUPE locals.

Our funds are now invested in a balanced portfolio, which based on prior performance, will provide our local with regular dividends and capital growth. This new income could be used to address the issue of increasing shift coverage costs, without needing to increase union dues. The investment is low-risk and being a CUPE



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

local, we're eligible for a very low management fee rate. With close oversight, our investments will perform better for our members than they have in recent years.

Union Shift Coverage Rates – A question has been raised from a few areas of the province- Will union shift coverage rates be increased to address the larger disparity between our rates and the new UHR rates? This is a very difficult question to answer. Of course, any increase to the shift coverage rates requires more money from the budget. Allocating more of the budget to shift coverage costs means one of two things: Either funding to another business area is reduced, or the union dues rate must be increased to provide more income to the union. Without one of these two actions, we'd be unable to balance our budget. There are several bylaw resolutions to convention this year, which seek to increase the union shift coverage rates.

I have attached a snapshot of the 2016 union shift coverage costs, and three examples (based on the pending resolutions) of how increases will impact the annual costs. The first is Bylaw #4 - A simple \$3/hr increase, which meets or exceeds the 'base' UHR rates. The second is Bylaw #5 – A further increase that comes close to UHR 3yr rates. The third is matching the 3yr UHR rates of pay for the classifications. I look forward to discussing this situation and options with the PEB and Convention 2017 delegates.

Projects & Initiatives

Universal Hourly Rate (UHR) – UHR has finally been implemented. There were a few issues scheduled to be arbitrated in April, as the Employer and Union disagreed. I led these discussions, as part of the team with our legal counsel and executive, and over two days of mediations with Arbitrator Sullivan we resolved all aspects by way of a consent order. This resolve secured increases for full time employees, by way of their part time service counting for pay calculation, and many more aspects. Overall, it was a positive outcome for our membership. I continue to work with the employer as implementation issues / questions arise on the UHR project.

Ready MOU Process – As I previously reported, we completed the arbitration process with Arbitrator Vince Ready in February 2017. His decision was issued, and the Union / Employer are now working to implement the changes that may flow from it. A working group has been convened for this, and I am one of four union officers participating.

While we're in the early stages, some significant changes are being discussed:

- Regular Part Time positions will be first considered in larger centres, targeted at demand periods (afternoon shift change, weekend nights, etc). Target for initial postings is winter 2017.
- Evaluating a new type of staffing model, to replace Kilo in rural / remote stations. 'Core Flex' is the model being discussed. This model is used in other provinces and we're reviewing the pro's and con's.
- Evaluating existing post configurations, to see if changes would allow better deployment, staffing and supervision. Deployment discussions are currently happening in five areas: Nanaimo, Vancouver, Williams Lake, Dawson Creek and Trail.

We're engaged in these discussions and hope to be able to report more details about possible changes soon.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Community Paramedicine – The Community Paramedicine (CP) program is now entering the final deployment phase, of the initial 80 FTE positions. I am proud to have envisioned this program for BC, authored the resolution to convention to advocate / negotiate for it, been a part of the team to lobby both municipally and provincially for its implementation and been the union lead through its implementation.

Thus far, 76 communities have received the program through 106 new regular part-time positions. These positions equal 57 FTE's implemented, so far. Between now and March 2018, the remaining 23 FTE's will be posted.

There will be two new aspects to the remaining positions to be posted: Many of the positions will be full-time and the first ACP based CP positions will be implemented. Both the full-time and ACP CP positions will be targeted at rural designated stations. This means new full-time positions and ACP positions in stations who've never before had this opportunity.

As the CP program continues to grow, its providing new work opportunities for our members, while also having a significant impact in the communities they serve. Reduced number of 911 calls, better in-home health monitoring and community safety awareness are just some of the results seen so far. This program is an example of what can be achieved through strong municipal and provincial lobbying from the Union and forming a collaborative partnership with the employer to do it right. In the years to come, we expect the CP to continue to grow, well beyond the initial 80 FTE's already committed.

Public Relations Campaign – I was once again heavily involved in the production and launch of our newest significant public relations campaign – More Paramedics. In consultation with our PR firm, creative advertising agency, the PEC, our Provincial Public Education Director and new Social Media Director, we worked very hard to meet a tight timeline to get the campaign launched.

The campaign goals were to raise the issue of paramedic resources and response times, and have these issues become an election issue. In the end, we launched six television commercials, 3 radio commercials, 6 billboard images, and numerous online ads. Online, we achieved over 1 million views. Television viewers were also in the millions. The campaign certainly made an impact. We received many messages from the public, some good some bad. It was very clear that we got people's attention! We also heard from many of the election candidates on our key issues.

Unfortunately, our ads were deemed 'election advertising' by Elections BC. This meant that we were significantly limited in how we could run them during the election period (Apr 10 – May 9). As a result, we focused all media to the period before Apr 10, and then focused on online ads during the election period.

Thanks to the efforts of Bronwyn Barter and Dave Deines, we had our cost share application for the campaign approved by CUPE National. They covered 50% of the campaign, or \$225,000.

Big thanks to everyone involved in making this project a reality. The volunteer paramedics in the shoot, the production crew, the PEB / PEC and our PE / SM directors. Job well done everyone!



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Communications Directors – Two new positions have been established in the past year, the Social Media Director and Communications Director. Paul Alberts is now in place as Social Media Director and Jessica Chilton as Communications director. I'm encouraged by the potential of both positions, as they continue to define the new roles. Already we have seen some new ideas implemented (APBC FB Group and Monthly Newsletter), which benefit members. Thanks for stepping up and welcome to the team Jessica and Paul!

New Collective Agreement Document – As I've reported previously, the long road to a new collective agreement has been a frustrating one. Much to our surprise, our 'Addendum' was left out of the 2014-2019 FBA Collective Agreement when it was published two years ago.

After much work and many revisions, APBC and BCEHS has finally agreed to a final version of a new 2014-2017 CUPE 873 Collective Agreement Addendum document. Construction of this document was a massive undertaking, as the 2001 12th Collective Agreement, the 2004 MOA, hundreds of LOAs and the newest language from the 2014 round of bargaining, as well as, recent arbitration awards had to be incorporated into a single document. The final version has also been reviewed and approved by the Facilities Bargaining Association (FBA), and we expect the last sign-off by the Health Employers Association of BC (HEABC) shortly.

Once all parties have signed-off on the document, it will proceed to the formatting and printing process. We anticipate that this new, single, collective agreement document will greatly simplify member's ability to know and understand their rights. Additionally, it will assist the union and the employer in various labour relations avenues.

Once finalized, the new collective agreement document will be distributed both electronically and in print format. Please stay tuned for further updates about when it will become available.

Strategic Practice Advisory Committee / PMLC – Myself and Dave Deines have sat on the newly formed 'Strategic Practice Advisory Committee (SPAC). This committee is currently comprised of Ministry of Health officials, BCEHS, EMALB and CUPE 873, and flows from our discussions about the previous Provincial Medical Leadership Council (PMLC).

That SPAC has a mandate to review possible paramedic practice changes, and make decisions about their benefits and possible implementation. For example, the "Treat & Release" initiative. Through this committee, we have a voice in the development of our profession, and can help align our progress with that of the Paramedic Association of Canada.

There has been much discussion about the continuance of the PMLC committee. Recently, the employer informed us that PMLC would be transformed into a new committee: Pharmacy, Therapeutics, Research and Practice Advisory Committee (PTRPAC). This committee will have a newly created Director of Paramedic Practice, which we have been informed will be a paramedic.

We await the final terms of reference, mandate and composition of the is new committee. The only concrete information that we know right now is that the committee will align itself like other health committees under the Quality structure and that it will have practitioner input. We currently do not know how the practitioner representatives will be appointed or what type of function they will serve.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

The Months Ahead

There is much work ahead. I remain optimistic that we can achieve many successes on our key business areas. I look forward to doing my best to improve the workplace for Paramedics and Dispatchers around the Province. Following Convention, I'll be working with the new Treasurer to hand-over the role.

I do want to make a special mention and thank-you to our retired treasurer, Tom Manz. Tom has been invaluable as I transitioned into the new role and continues to answer my endless questions! Thank you, Tom!

As always, I remain available to the membership for all things within my portfolio. I can be best reached by email at cameron.eby@apbc.ca.

I move adoption of my report.

Respectfully submitted,

Cameron Eby
Provincial Secretary Treasurer
CUPE Local 873

CE/sd/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

CANADIAN UNION OF PUBLIC EMPLOYEES LOCAL 873
(Ambulance Paramedics of British Columbia)
Financial Statements
Year Ended June 30, 2017

**santos
& co.**



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

CANADIAN UNION OF PUBLIC EMPLOYEES LOCAL 873
(Ambulance Paramedics of British Columbia)
Index to Financial Statements
Year Ended June 30, 2017

	Page
INDEPENDENT AUDITOR'S REPORT	1 - 2
FINANCIAL STATEMENTS	
Statement of Financial Position	3
Statement of Operations	4
Statement of Changes in Net Assets	5
Statement of Cash Flows	6
Notes to Financial Statements	7 - 11



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

**santos
& CO.**
chartered professional accountants

236 - 5589 Byrne Road
Burnaby, B.C.
V5J 3J1
Telephone 604.430.1661
Fax 604.430.1541

Joe F. Santos Inc.
Robert F. Santos Inc.

INDEPENDENT AUDITOR'S REPORT

To the Members of Canadian Union of Public Employees Local 873 (Ambulance Paramedics of British Columbia)

We have audited the accompanying financial statements of Canadian Union of Public Employees Local 873, (Ambulance Paramedics of British Columbia), which comprise the statement of financial position as at June 30, 2017 and the statements of operations, changes in net assets and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's responsibility for the financial statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified audit opinion.

Basis for qualified opinion

The Canadian Union of Public Employees Local 873 derives a significant portion of its revenues from dues and assessments, the completeness of which is not susceptible to audit verification. Consequently, we were unable to obtain sufficient appropriate audit evidence to support the completeness of dues and assessment revenues, and we were unable to determine whether adjustments were necessary.

(continues)



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Independent Auditor's Report to the Members of Canadian Union of Public Employees Local 873 (continued)

Qualified opinion

In our opinion, except for the possible effects of the matter described in the Basis for qualified opinion paragraph, the financial statements present fairly, in all material respects, the financial position of Canadian Union of Public Employees Local 873, Ambulance Paramedics of British Columbia, as at June 30, 2017, and its financial performance and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Burnaby, British Columbia
September 19, 2017


CHARTERED PROFESSIONAL ACCOUNTANTS



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**





CONVENTION 2017

**CANADIAN UNION OF PUBLIC EMPLOYEES LOCAL 873
(Ambulance Paramedics of British Columbia)
Statement of Financial Position
June 30, 2017**

	2017	2016
ASSETS		
Current		
Cash	\$ 2,258,835	\$ 1,089,976
Term deposits	-	1,060,447
Strike fund (Note 6)	99,334	99,334
Accounts receivable (Note 3)	559,666	498,333
Prepaid expenses	69,046	51,455
	<u>2,986,881</u>	<u>2,799,545</u>
Tangible capital assets (Note 4)	<u>1,605,288</u>	<u>1,970,760</u>
	<u>\$ 4,592,169</u>	<u>\$ 4,770,305</u>
LIABILITIES		
Current		
Accounts payable and accrued liabilities	\$ 339,922	\$ 272,613
Due to related party (Note 5)	3,748	3,748
	<u>343,670</u>	<u>276,361</u>
NET ASSETS		
Strike fund (Note 6)	99,334	99,334
Unrestricted	4,149,165	4,394,610
	<u>4,248,499</u>	<u>4,493,944</u>
	<u>\$ 4,592,169</u>	<u>\$ 4,770,305</u>

Lease commitments (Note 7)

Approved by the executive committee

 Director

 Director

See notes to financial statements
3

**santos
& co.**



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

CANADIAN UNION OF PUBLIC EMPLOYEES LOCAL 873
(Ambulance Paramedics of British Columbia)
Statement of Operations
Year Ended June 30, 2017

	2017	2016
Revenues		
Death benefit assessments	\$ 16,475	\$ 68,871
Dues	4,493,378	4,307,765
Expense recovery	265,772	113,054
Interest	21,013	10,534
Miscellaneous income	12,024	6,413
	<u>4,808,662</u>	<u>4,506,637</u>
Expenses		
Accommodations	367,706	315,316
Advertising and promotion	587,605	62,632
Amortization	23,972	26,216
Area labour councils	10,937	12,615
Bad debts	24,054	-
Bank charges and interest	111	95
Child care	35,098	24,863
Death benefits and bereavements	16,475	68,871
Equipment lease	31,889	31,050
Flowers, gifts and donations	59,721	113,624
Meals and out of pocket	169,362	155,955
Office and general	75,483	35,179
Officers' stipend	4,500	3,000
Per capita assessments	1,662,167	1,430,856
Postage and courier	13,801	18,345
Professional fees	416,037	378,761
Property taxes	15,339	20,592
Repairs and maintenance	24,402	23,359
Seminars and education	27,202	37,458
Shift coverage	819,021	991,883
Stationery and supplies	28,809	54,832
Telephone	72,054	76,989
Travel	375,027	378,759
Utilities	6,535	8,295
Wages and benefits	153,126	178,688
	<u>5,020,433</u>	<u>4,448,233</u>
Excess (deficiency) of revenues over expenses from operations	(211,771)	58,404
Other		
Loss on disposal of tangible capital assets	(33,674)	-
Excess (deficiency) of revenues over expenses	\$ (245,445)	\$ 58,404

See notes to financial statements

4

**santos
& co.**



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

CANADIAN UNION OF PUBLIC EMPLOYEES LOCAL 873
(Ambulance Paramedics of British Columbia)
Statement of Changes in Net Assets
Year Ended June 30, 2017

	Strike Fund	Unrestricted	2017	2016
Net assets - beginning of year	\$ 99,334	\$ 4,394,610	\$ 4,493,944	\$ 4,435,540
Excess (deficiency) of revenues over expenses	-	(245,445)	(245,445)	58,404
Net assets - end of year	\$ 99,334	\$ 4,149,165	\$ 4,248,499	\$ 4,493,944

See notes to financial statements
5

**santos
& co.**



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

**CANADIAN UNION OF PUBLIC EMPLOYEES LOCAL 873
(Ambulance Paramedics of British Columbia)
Statement of Cash Flows
Year Ended June 30, 2017**

	2017	2016
Operating activities		
Excess (deficiency) of revenues over expenses	\$ (245,445)	\$ 58,404
Items not affecting cash:		
Amortization	23,972	26,216
Loss on disposal of tangible capital assets	33,674	-
	<u>(187,799)</u>	<u>84,620</u>
Changes in non-cash working capital:		
Accounts receivable	(61,333)	(190,943)
Prepaid expenses	(17,591)	413
Accounts payable and accrued liabilities	67,307	41,059
	<u>(11,617)</u>	<u>(149,471)</u>
Cash flow used by operating activities	<u>(199,416)</u>	<u>(64,851)</u>
Investing activities		
Purchase of tangible capital assets	(23,535)	(3,114)
Proceeds on disposal of tangible capital assets	331,363	-
Proceeds on maturity of term deposits	1,060,447	-
Cash flow from (used by) investing activities	<u>1,368,275</u>	<u>(3,114)</u>
Increase (decrease) in cash	1,168,859	(67,965)
Cash - beginning of year	1,189,310	1,257,275
Cash - end of year	\$ 2,358,169	\$ 1,189,310
Cash flows supplementary information		
Interest received	\$ 20,913	\$ 10,534
Interest paid	\$ 111	\$ 96
Cash consists of:		
Cash	\$ 2,258,835	\$ 1,089,976
Strike funds	99,334	99,334
	<u>\$ 2,358,169</u>	<u>\$ 1,189,310</u>

See notes to financial statements



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

CANADIAN UNION OF PUBLIC EMPLOYEES LOCAL 873
(Ambulance Paramedics of British Columbia)
Notes to Financial Statements
Year Ended June 30, 2017

1. Nature of operations

The objects of Canadian Union of Public Employees Local 873, (Ambulance Paramedics of British Columbia), ("the Local") are:

- a) To secure adequate remuneration for work performed and generally advance the economic and social welfare of its members and all workers;
- b) To support C.U.P.E. in reaching the goals set out in Article 2 of the C.U.P.E. Constitution;
- c) To provide an opportunity for all its members to influence and shape their future through free democratic trade unionism;
- d) To encourage the settlement by negotiation and mediation of all disputes between members and other employees; and
- e) To affiliate with the Paramedics Association of Canada (PAC) at the discretion of the Provincial Executive Board.

2. Summary of significant accounting policies

Basis of presentation

These audited financial statements of the Local have been prepared in accordance with Canadian accounting standards for not-for-profit organization (ASNPO). The significant policies are detailed below:

Cash

Cash is defined as funds on hand, bank accounts held in Canadian chartered banks, treasury bills and guaranteed investments with a maturity of less than 90 days at date of acquisition.

Term deposits

Term deposits are defined as guaranteed investments with maturity of more than 90 days at date of acquisition.

(continues)



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

**CANADIAN UNION OF PUBLIC EMPLOYEES LOCAL 873
(Ambulance Paramedics of British Columbia)
Notes to Financial Statements
Year Ended June 30, 2017**

2. Summary of significant accounting policies (continued)

Tangible capital assets

Tangible capital assets are stated at cost or deemed cost less accumulated amortization. Tangible capital assets are amortized over their estimated useful lives at the following rates and methods:

Buildings	1%	straight-line method
Motor vehicles	30%	declining balance method
Office equipment	20%	declining balance method
Computer equipment	30%	declining balance method

Tangible capital assets are amortized at one-half the normal annual rate in the year of acquisition. No amortization is recorded in the year of disposal.

The Local regularly reviews its tangible capital assets to eliminate obsolete items.

Tangible capital assets are tested for recoverability whenever events or changes in circumstances indicate that their carrying amounts may not be recoverable. An impairment loss is recognized when their carrying value exceeds the total undiscounted cash flows expected from their use and eventual disposition. The amount of impairment loss is determined as the excess of the carrying value of the tangible capital assets over their fair value.

Tangible capital assets acquired during the year but not placed into use are not amortized until they are placed into use.

As at June 30, 2017, no events or changes in circumstances had occurred which indicated that the carrying amounts of tangible capital assets would not be recoverable.

Income taxes

In accordance with subsection 149(1) of the Income Tax Act, the Local is exempt from income taxes in Canada.

Contributed services

The Local and its members benefit greatly from donated services in the form of volunteer time. Donated services are not recognized in these financial statements.

Revenue recognition

The Local follows the deferral method of accounting for contributions.

Unrestricted contributions including membership dues and assessments are recognized as revenue when received or receivable if the amount can be reasonably estimated and collection is reasonably assured.

Internally restricted contributions are recognized as revenue in the year in which the related expenses are incurred.

Investment income is recognized as revenue when earned.

(continues)



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

**CANADIAN UNION OF PUBLIC EMPLOYEES LOCAL 873
(Ambulance Paramedics of British Columbia)
Notes to Financial Statements
Year Ended June 30, 2017**

2. Summary of significant accounting policies (continued)

Measurement uncertainty

When preparing financial statements according to ASNPO, management makes estimates and assumptions relating to:

- reported amounts of revenues and expenses;
- reported amounts of assets and liabilities; and
- disclosure of contingent assets and liabilities.

Estimates are based on a number of factors including historical experience, current events and actions that the Local may undertake in the future, and other assumptions that management believes are reasonable under the circumstances. By their nature, these estimates are subject to measurement uncertainty and actual results could differ. In particular, estimates are used in accounting for certain items such as accounts receivable, useful lives of tangible capital assets and revenue recognition.

3. Accounts receivable

	2017	2016
Provincial Health Services Authority	\$ 504,639	\$ 425,998
Emergency Communications for British Columbia Incorporated	47,798	37,138
CUPE National	7,229	24,054
SN Transport	-	6,836
Miscellaneous	-	4,307
	\$ 559,666	\$ 498,333

During the year, \$24,054 of impairment related to accounts receivable was charged to the statement of operations (2016 - \$nil).

4. Tangible capital assets

	Cost	Accumulated amortization	2017 Net book value	2016 Net book value
Buildings	\$ 1,608,600	\$ 64,683	\$ 1,543,917	\$ 1,917,039
Office equipment	201,390	169,859	31,531	36,165
Motor vehicles	3,920	588	3,332	-
Computer equipment	221,538	195,030	26,508	17,556
	\$ 2,035,448	\$ 430,160	\$ 1,605,288	\$ 1,970,760



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

**CANADIAN UNION OF PUBLIC EMPLOYEES LOCAL 873
(Ambulance Paramedics of British Columbia)
Notes to Financial Statements
Year Ended June 30, 2017**

5. Due to related party

The advances from Ambulance Paramedics of B.C. (Local 873) Holding Corp. under common control, are unsecured, non-interest bearing and do not have specific terms of repayment. Management has confirmed that they will not request repayment of this amount within the next fiscal year. Accordingly, this amount has been classified as a non-current liability in the accompanying financial statements.

6. Strike fund

The strike fund is not available for unrestricted purposes without approval of the Executive Board of Directors of the Local.

7. Lease commitments

The Local leases printers under a long term lease that expires on June 30, 2019. Under the lease, the Local is required to pay a base rent of \$5,050 per year. In addition to the base rent, the Local must pay for other printing costs related to the use of the printers. Future minimum lease payments as at year end are as follows:

2018	\$	20,200
2019		20,200
	\$	<u>40,400</u>

8. Financial instruments

Financial assets and liabilities are initially measured at fair value. Subsequent measurement of financial assets and liabilities are fair value or at amortized cost. Financial assets measured at amortized cost are assessed at each reporting date for indications of impairment. If such impairment exists, the asset shall be written down and the resulting impairment loss will be recognized in the statement of operations for the period.

Financial assets measured at amortized cost include cash and accounts receivable. Financial liabilities measured at amortized cost include accounts payable and accrued liabilities.

The Local has a comprehensive risk management framework to monitor, evaluate and manage the principal risks assumed with financial instruments. The principal risks assumed by the Local are credit risk and liquidity risk.

Credit risk

Credit risk arises from the potential that a counter party will fail to perform its obligations. The credit risk related to the accounts receivable is not considered significant because the receivables are due from affiliated parties and members with no history of default.

Liquidity risk

Liquidity risk is dependent on receipt of funds from assessments and continued access to sufficient credit facilities to be able to pay the Local's liabilities as they become due. The Local manages its liquidity risk by monitoring its operating requirements. The Local prepares cash forecasts to ensure it has sufficient funds to fulfill its obligations.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

CANADIAN UNION OF PUBLIC EMPLOYEES LOCAL 873
(Ambulance Paramedics of British Columbia)
Notes to Financial Statements
Year Ended June 30, 2017

9. Comparative figures

Certain of the prior year's comparative figures have been reclassified where applicable to conform to the current year's financial statement presentation.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

**Canadian Union of Public Employees Local 873
INCOME STATEMENT
Income Statement - June**

	Actual	%	Current Period Prior	Variance	%	Actual	%	Year To Date Prior	Variance	%
Revenue										
Income - Dues and Assessments	\$ 3,953,292.82	0.00	\$ 3,744,173.01	\$ 209,119.81	5.59	\$ 3,953,292.82	0.00	\$ 3,744,173.01	\$ 209,119.81	5.59
Income - Ecomm Dues	517,584.99	0.00	477,678.96	39,906.03	8.35	517,584.99	0.00	477,678.96	39,906.03	8.35
Income - Dues SN Transport	22,500.52	0.00	85,912.83	(63,412.31)	(73.81)	22,500.52	0.00	85,912.83	(63,412.31)	(73.81)
Special Assessments	16,474.64	0.00	68,870.71	(52,396.07)	(76.08)	16,474.64	0.00	68,870.71	(52,396.07)	(76.08)
Income - Interest	21,013.07	0.00	10,533.65	10,479.42	99.49	21,013.07	0.00	10,533.65	10,479.42	99.49
Income - Miscellaneous	12,024.25	0.00	6,413.11	5,611.14	87.49	12,024.25	0.00	6,413.11	5,611.14	87.49
Expenses Recovery	265,771.99	0.00	113,054.43	152,717.56	135.08	265,771.99	0.00	113,054.43	152,717.56	135.08
Total Revenue	4,808,662.28	0.00	4,506,636.70	302,025.58	6.70	4,808,662.28	0.00	4,506,636.70	302,025.58	6.70
Expenses										
Accommodation	367,706.38	0.00	315,315.72	52,390.66	16.62	367,706.38	0.00	315,315.72	52,390.66	16.62
Advertising	587,604.54	0.00	62,631.59	524,972.95	838.19	587,604.54	0.00	62,631.59	524,972.95	838.19
Bank charges and Interest	112.00	0.00	96.00	16.00	16.67	112.00	0.00	96.00	16.00	16.67
Death Benefits	16,474.64	0.00	68,870.71	(52,396.07)	(76.08)	16,474.64	0.00	68,870.71	(52,396.07)	(76.08)
Equipment Purchase and Lease	31,889.19	0.00	31,050.27	838.92	2.70	31,889.19	0.00	31,050.27	838.92	2.70
Meals & Out of Pocket	169,361.90	0.00	155,954.78	13,407.12	8.60	169,361.90	0.00	155,954.78	13,407.12	8.60
Office and General	75,483.13	0.00	35,179.15	40,303.98	114.57	75,483.13	0.00	35,179.15	40,303.98	114.57
Per Capita Assessments	1,662,166.93	0.00	1,430,855.62	231,311.31	16.17	1,662,166.93	0.00	1,430,855.62	231,311.31	16.17
Postage and Courier	13,800.94	0.00	18,345.45	(4,544.51)	(24.77)	13,800.94	0.00	18,345.45	(4,544.51)	(24.77)
Professional Fees	416,037.37	0.00	378,760.53	37,276.84	9.84	416,037.37	0.00	378,760.53	37,276.84	9.84
Repairs & Maintenance	24,401.83	0.00	23,358.70	1,043.13	4.47	24,401.83	0.00	23,358.70	1,043.13	4.47
Child Care	35,098.20	0.00	24,863.06	10,235.14	41.17	35,098.20	0.00	24,863.06	10,235.14	41.17
Area Labour Councils	10,937.17	0.00	12,615.11	(1,677.94)	(13.30)	10,937.17	0.00	12,615.11	(1,677.94)	(13.30)
Seminars and Education	27,201.87	0.00	37,458.12	(10,256.25)	(27.38)	27,201.87	0.00	37,458.12	(10,256.25)	(27.38)
Stationery and Supplies	28,808.75	0.00	54,831.74	(26,022.99)	(47.46)	28,808.75	0.00	54,831.74	(26,022.99)	(47.46)
Officers' Stipend	4,500.00	0.00	3,000.00	1,500.00	50.00	4,500.00	0.00	3,000.00	1,500.00	50.00
Telephone	72,053.57	0.00	76,988.79	(4,935.22)	(6.41)	72,053.57	0.00	76,988.79	(4,935.22)	(6.41)
Travel	375,027.06	0.00	378,759.29	(3,732.23)	(0.99)	375,027.06	0.00	378,759.29	(3,732.23)	(0.99)
Utilities	6,535.22	0.00	8,294.70	(1,759.48)	(21.21)	6,535.22	0.00	8,294.70	(1,759.48)	(21.21)
Property Taxes	15,339.17	0.00	20,592.01	(5,252.84)	(25.51)	15,339.17	0.00	20,592.01	(5,252.84)	(25.51)
Wages and Benefits - Staff	119,242.55	0.00	132,785.57	(13,543.02)	(10.20)	119,242.55	0.00	132,785.57	(13,543.02)	(10.20)
Wages - Shift Coverage	819,021.46	0.00	991,883.32	(172,861.86)	(17.43)	819,021.46	0.00	991,883.32	(172,861.86)	(17.43)
Employee Deductions	33,883.41	0.00	45,902.12	(12,018.71)	(26.18)	33,883.41	0.00	45,902.12	(12,018.71)	(26.18)
Flowers, Gifts and Donations	59,720.64	0.00	113,623.60	(53,902.96)	(47.44)	59,720.64	0.00	113,623.60	(53,902.96)	(47.44)
[NEW] Bad debts expense	24,053.69	0.00	0.00	24,053.69	0.00	24,053.69	0.00	0.00	24,053.69	0.00
Amortization	23,971.87	0.00	26,216.31	(2,244.44)	(8.56)	23,971.87	0.00	26,216.31	(2,244.44)	(8.56)
Total Expenses	5,020,433.48	0.00	4,448,232.26	572,201.22	12.86	5,020,433.48	0.00	4,448,232.26	572,201.22	12.86
Income (Loss) from Operations	(211,771.20)	0.00	58,404.44	(270,175.64)	(462.59)	(211,771.20)	0.00	58,404.44	(270,175.64)	(462.59)
Other Income										
Gain (Loss) on sale	(33,673.66)	0.00	0.00	(33,673.66)	0.00	(33,673.66)	0.00	0.00	(33,673.66)	0.00
Net Income (Loss) Before Income T	(245,444.86)	0.00	58,404.44	(303,849.30)	(520.25)	(245,444.86)	0.00	58,404.44	(303,849.30)	(520.25)
Net Income (Loss)	\$ (245,444.86)	0.00	\$ 58,404.44	\$ (303,849.30)	(520.25)	\$ (245,444.86)	0.00	\$ 58,404.44	\$ (303,849.30)	(520.25)



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Committee Expenditures 10 Months Ending Apr 30, 2017

	2016 - 2017 Budget	30-Jun-17 Full Year	Percentage
Revenue			
Total Revenue * <i>Dues, Recoveries Death Asses & other</i>	\$ 4,078,000.00	\$ 4,808,662.00	117.92%
Expenditures			
CUPE National * Increased dues, increase per-cap	\$ 1,350,000.00	\$ 1,357,061.00	100.52%
CUPE BC * Increased dues, increase per-cap	\$ 210,000.00	\$ 223,457.00	106.41%
PAC Membership Fee * \$15./mbr Paid in Feb each Yr.	\$ 58,500.00	\$ 58,310.00	99.68%
34 Executive Committee	\$ 36,000.00	\$ 32,806.00	91.13%
35 Provincial President	\$ 120,000.00	\$ 129,893.00	108.24%
36 Provincial Vice-President	\$ 75,000.00	\$ 46,153.00	61.54%
70 2nd Provincial Vice-President	\$ 75,000.00	\$ 75,339.00	100.45%
37 Provincial Secretary-Treasurer	\$ 75,000.00	\$ 40,729.00	54.31%
38 Provincial Recording Secretary	\$ 75,000.00	\$ 65,780.00	87.71%
98 Emergency Dispatchers 873-02 * Negotiations & Conference	\$ 100,000.00	\$ 143,930.00	143.93%
96 873 - 03 SN Transport	\$ 5,150.00	\$ 4,470.00	86.80%
39 Provincial Executive Board	\$ 200,000.00	\$ 181,681.00	90.84%
60 Region 1 South * Bill-back shift coverage	\$ 67,000.00	\$ 80,394.00	119.99%
61 Region 1 North	\$ 62,000.00	\$ 55,489.00	89.50%
62 Region 2 East	\$ 40,000.00	\$ 26,248.00	65.62%
57 Region 2 West	\$ 115,000.00	\$ 126,550.00	110.04%
58 Region 3	\$ 57,000.00	\$ 54,363.00	95.37%
59 Region 4	\$ 57,000.00	\$ 41,840.00	73.40%
55 Regions 5 - 8	\$ 72,000.00	\$ 38,524.00	53.51%
97 Arbitrations & Arbitrator Fees * Increased Arb's and Legal on retainer	\$ 280,000.00	\$ 334,070.00	119.31%
91 Paramedics Assoc. of Canada * PAC Lobby days in Ottawa	\$ 15,000.00	\$ 25,078.00	167.19%
40 Negotiating Committee * MOU Discussions / V. Ready Process	\$ 3,000.00	\$ 41,681.00	1389.37%
42 Union Trustees	\$ 7,000.00	\$ 7,603.00	108.61%
43 31:03 Harassment Arbitrator Fees	\$ 2,000.00	\$ -	0.00%
44 Critical Incident Stress * Position partially transitioned to BCEHS	\$ 36,000.00	\$ 15,053.00	41.81%
46 Safety Committee	\$ 48,000.00	\$ 58,366.00	121.60%
47 Health and Wellness Committee	\$ 100,000.00	\$ 100,015.00	100.02%
49 Communications Committee * New Comm - Not Budgeted	\$ 1.00	\$ 2,076.00	207600.00%
53 Public Education Committee * PR Firm Fees, advertising	\$ 90,000.00	\$ 114,591.00	127.32%
41 PR Campaign * PR Campaign & PR / Creative Firm Fees	\$ 60,000.00	\$ 262,583.00	437.64%
45 Joint Labour Management Centre	\$ 8,000.00	\$ 5,238.00	65.48%
51 Bylaws & Resolutions Committee	\$ 3,000.00	\$ 1,670.00	55.67%
52 APBC / EDBC Web Site * Website upgrades finished	\$ 18,000.00	\$ 9,076.00	50.42%
48 LODD * Mbrs Passing,/Ceremonial Unit (HG)	\$ 20,000.00	\$ 28,150.00	140.75%
56 Community Paramedicine * CP Program launched, reduced role	\$ 10,000.00	\$ 2,534.00	25.34%
66 Political Action Committee * UBCM / Donations / Prov Election	\$ 48,000.00	\$ 193,865.00	403.89%
63 Annual Convention * Increased retirees / travel, higher 2018 deposit	\$ 230,000.00	\$ 276,938.00	120.41%
68 CPR PROJECT * Entire budget in single donation	\$ 2,500.00	\$ 2,500.00	100.00%
85 BC Federation Convention	\$ 12,000.00	\$ 3,849.00	32.08%
86 CUPE National Convention * CUPE EMS Sectoral	\$ 5,000.00	\$ 9,296.00	185.92%
87 NDP Convention	\$ 1,500.00	\$ -	0.00%
88 CUPE BC Division Convention	\$ 20,000.00	\$ 13,748.00	68.74%
ALL OTHER - Captured in full Convention Financial Financials	\$ 209,349.00	\$ 729,436.00	348.43%
TOTALS:	\$ 4,078,000.00	\$5,020,433.00	123.11%



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

2016 CUPE 873 Shift Coverage vs Proposed Increases

Classification	Current Rate	Annual Hours	Existing Cost	Res Bylaw #4	Projected Cost	Difference	
PCP	\$ 24.00	21891.82	\$ 525,403.68	\$ 27.00	\$ 591,079.14	\$ 65,675.46	12.50%
DISPATCH	\$ 27.00	214.50	\$ 5,791.50	\$ 30.00	\$ 6,435.00	\$ 643.50	11.11%
PCP/EMD UC/DS	\$ 29.00	1095.30	\$ 31,763.70	\$ 34.00	\$ 37,240.20	\$ 5,476.50	17.24%
ACP	\$ 31.00	1076.00	\$ 33,356.00	\$ 32.75	\$ 35,239.00	\$ 1,883.00	5.65%
CCP/ITT	\$ 31.50	12.00	\$ 378.00	\$ 37.00	\$ 444.00	\$ 66.00	17.46%
ACP/CCP/ITT DS	\$ 32.50	230.00	\$ 7,475.00	\$ 41.00	\$ 9,430.00	\$ 1,955.00	26.15%
TOTALS		24519.62	\$ 604,167.88		\$ 679,867.34	\$ 75,699.46	12.53%

Classification	Current Rate	Annual Hours	Existing Cost	Res Bylaw #5	Projected Cost	Difference	
PCP	\$ 24.00	21891.82	\$ 525,403.68	\$ 32.00	\$ 700,538.24	\$ 175,134.56	33.33%
DISPATCH	\$ 27.00	214.50	\$ 5,791.50	\$ 36.00	\$ 7,722.00	\$ 1,930.50	33.33%
PCP/EMD UC/DS	\$ 29.00	1095.30	\$ 31,763.70	\$ 38.00	\$ 41,621.40	\$ 9,857.70	31.03%
ACP	\$ 31.00	1076.00	\$ 33,356.00	\$ 38.00	\$ 40,888.00	\$ 7,532.00	22.58%
CCP/ITT	\$ 31.50	12.00	\$ 378.00	\$ 38.00	\$ 456.00	\$ 78.00	20.63%
ACP/CCP/ITT DS	\$ 32.50	230.00	\$ 7,475.00	\$ 39.00	\$ 8,970.00	\$ 1,495.00	20.00%
TOTALS		24519.62	\$ 604,167.88		\$ 800,195.64	\$ 196,027.76	32.45%

Classification	Current Rate	Annual Hours	Existing Cost	Match UHR - 3yr	Projected Cost	Difference	
PCP	\$ 24.00	21891.82	\$ 525,403.68	\$ 31.39	\$ 687,184.23	\$ 161,780.55	30.79%
DISPATCH	\$ 27.00	214.50	\$ 5,791.50	\$ 36.25	\$ 7,775.63	\$ 1,984.13	34.26%
PCP/EMD UC/DS	\$ 29.00	1095.30	\$ 31,763.70	\$ 35.42	\$ 38,795.53	\$ 7,031.83	22.14%
ACP	\$ 31.00	1076.00	\$ 33,356.00	\$ 38.94	\$ 41,899.44	\$ 8,543.44	25.61%
CCP/ITT	\$ 31.50	12.00	\$ 378.00	\$ 44.92	\$ 539.04	\$ 161.04	42.60%
ACP/CCP/ITT DS	\$ 32.50	230.00	\$ 7,475.00	\$ 42.98	\$ 9,885.40	\$ 2,410.40	32.25%
TOTALS		24519.62	\$ 604,167.88		\$ 786,079.26	\$ 181,911.38	30.11%



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Provincial Recording Secretary's Report

Welcome to Convention 2017. Since transitioning into my new role as Provincial Recording Secretary in Mid-December 2016, I have spent a significant amount of time learning the role and full scope of the position. I want to thank the PEC & PEB for their assistance in helping me learn this new position. I have gathered a sense for the workload and dynamic work that needs to be addressed to support our members.

In my new role, I have been working with a number of our members and executive on various projects and initiatives. My activities are linked to the strategic plan by the numbers in the titles.

Vince Ready Arbitration Process (2.5.2)

In January, I had the opportunity to join executive members, FBA and our Negotiations Committee in binding arbitration with the Employer. We met with Vince Ready to resolve the 3 outstanding issues from 2014 bargaining; Unit Chief, Regular P/T and Shift Patterns.

It was interesting to participate in the arbitration process, the days were long, it was great to see our Negotiations Committee work to finalize the details and engage on our member's behalf. I learned firsthand how important attention to detail is when writing contract language and exchanging proposals.

WSBC Claims (24.04) Policy Grievances (2.2.2, 2.1.1, 2.1.4)

About 18 months ago we had a tragic event occur that devastated two crew members in Northern BC and was further compounded by the Employers change in WSBC payments. I drafted a letter to Linda Lupini to address this hardship, and my actions, to ensure our members received full pay. Linda in turn listened to my concerns and directed BCEHS Labour Relations to resolve the outstanding WSBC issues or get them to arbitration.

We have advanced Policy Grievance # 15070019- Calculation of WSBC payments/ OT and Policy Grievance # 14030026- Placing members on STIPP to arbitration.

Ken Saunders has been chosen as a mutual arbitrator. Background information has been exchanged with the Employer and we have dates secured for February 14-18, 2018 to hear the matter.

Currently we have drafted a resolve to the settle file # 14030026- Placing members on STIIP and the Employer has advised us they are just finalizing the process with payroll, I am optimistic we will finalize the agreement prior to our arbitration dates.

The Employer also advised us an agreement was reached for payment calculations of WSBC Payments. Oddly, we don't have a record of such discussion or agreement. It was great to hear that the Employer feels they have solved their error so we have requested the signed agreement they are referring too, however, they have yet to provide it. The Employer does seem interested in resolving both files prior to arbitration, we are engaging the Employer to resolve the issue but it has been a slow process.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

EMCT – Vancouver Dispatch (2.5.4, 2.1.1)

At PJLMC in January 2017, the Employer advised APBC that they intended to eliminate all four-on four-off Bravo/Charlie EMD shifts in all Dispatch Centers. The Employer was looking to downgrade all positions to EMCT. Through discussion with the Employer we signed off a Letter of Agreement that focuses on VDOC, with no immediate changes to KDOC or ViDOC. The LOA protects a number of the EMD positions and mutually attritions select positions, preventing layoffs. We also secured green circling of wages and benefits for all members who currently occupy a position set for attrition which is a huge gain for our members. The Employer has agreed that EMD positions will only attrition by mutual choice.

A copy of the Dispatch LOA is attached for your reference at the end of my report.

Joint Scheduling Committee – Improvement/review (2.5.4)

I have been working with various RVP's on the Joint Scheduling Committee, we met with LR - Kevin Payne and Paul Valley in early February. We had lengthy discussions to improve scheduling issues from around the province. Subsequent to our initial meeting, the Employer has not arranged any further meetings. We have raised the committee at PJLMC in March, June and September 2017; the Employer has advised they support the committee and will provide dates for subsequent meetings however to date the Employer has not responded with dates.

If regions have outstanding provincial scheduling issues please send them to me with a background on the issue, I will ensure we continue to address the issues.

Community Paramedicine in Northern BC (2.1.2, 2.2.6, 2.4.2)

I continue to support the North with CP development as the Northern CP Lead. A number of posting and selection violations have developed with CP positions which led to a meeting at the LRB in April 2017.

As part of the CP implementation group we have been working with the Employer to address and review issues that have arisen out of CP development.

CP implementation is well underway, we recently met with the Employer to discuss the final rollout of the remaining 80 FTE equivalent positions, finalizing the last CP communities is almost complete. The projected rollout of all 80 FTE is set to complete March 2018, 1 year ahead of time.

One significant change to Community Paramedicine is the removal of the 3-year lock in. We entered into discussions with the Employer and now have an agreement to end the 3-year lock in period for all Community Paramedicine positions provincially. Community Paramedics will only receive a paid move once every 3-years.

We have had discussions about expanding the CP program including:

- CP relief staff – How and when will they be used?
- Hard to recruit communities – How to attract qualified staff to these positions?



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

- Expansion of CP into Urban / Metro settings
- Development of ACP Community Paramedic positions.

Grievance Processing and management (2.2.2)

I have assisted PVP's with a number of grievance meetings with the Employer to work on resolving 2013 grievance files. We have had significant success closing out a large amount of the 2013 files.

I have been assisting RVP's and PVP's with grievance files in the North and the CP program to help advance issues through the grievance process including:

- Policy Grievance – U/C selection
- Policy Grievance- 880 staffing
- Policy Grievance- U/C postings
- Policy Grievance- CP Work assignments

Elections

Elections are a significant item in my portfolio.

Station level elections have been completed. We have communicated an updated list of SS and Safety Reps to the Employer.

Our elections for Regional positions have closed, with a number of new executive members elected.

Delegate elections, PEC & Standing Committees and Call for Resolutions have closed with a significant increase in participation from candidates and delegates. We have also received submission of nearly 90 resolutions.

MOU Liaison Working Group (2.1.1, 2.1.2)

A working group has been struck with the Employer to discuss the implementation of the Feb 2017 Vince Ready Ruling. Lorraine Till, Steve Boley, Cam Eby and I are APBC representatives on this group. We met with the Employer for the first time on June 7th, 2017 with a subsequent meeting on October 11th 2017. The Employer has brought several ideas forward for discussion including:

- Development of Regular Part-time positions in Metro locations
- Change of staffing models within posts for better utilization of resources
- Development of a Core-flex model
- Expansion of CP roles

As the working group is in the early stages, we are still working through implementation details and hope to report out on these items and possible changes soon.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Wildfire Payroll Issues

As many of you are aware we were impacted by one of the worst wildfire seasons in recent years. The Employer was not prepared for the impacts to our members and service, they scrambled to deal with staffing and logistic issues.

I worked on the frontline during the wild fires and our members from all over the province did an amazing job to step up and provide exceptional service during the wildfires, then, the Employer decided to not pay everyone! another “payroll issue”

Currently the Employer is doing a full payroll audit of members impacted. The Employer apparently issued two directions for staffing cars during the wildfire, which has drastically complicated payments.

- 1) The Employer advised On-call paramedics to activate at the start of each shift, report to the station and they would be paid per the Collective Agreement including overtime rates.
- 2) The second direction was On-call paramedics at certain stations would be paid pager pay equal to their hourly rate of pay in addition they would pay pager pay and callouts as well?

I have had discussion with the Employer about why the Employer would make an offer that clearly is not consistent with our Collective Agreement. There is certainly a disconnect between provincial and regional management.

As this payroll issue has been ongoing for 3 months now, I have made resolve suggestions to chunk off payroll issues for members that can be addressed quickly, however the Employer has declined all resolves as they want to do a full review and payout all monies owed at one time.

During discussion of this issue at PJLMC the Employer was unsure of expense coding for funds and responsibility, this issue is not a payroll issue, this lies with management actions.

Political Action (2.1.1, 2.3.1, 2.3.2)

Political Action is a new aspect of our Union’s work that I have started engaging in.

On September 25th-28th I had the opportunity to attend UBCM. Members of the executive committee, joined by RVP Chilton and Provincial PR Director Byers, worked to advance our agenda through interactions with both provincial and municipal governments, participating in forums and discussions with a wide audience of MLA’s, Mayors and Council.

On October 1st - 6th a group of APBC executive attended CUPE National in Toronto. It was a great learning experience to see how our national structure works and impacts our Local. I had an opportunity to learn about candidate’s forum. I believe we must remain active and consistent in our messaging to governments.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

It was interesting to participate in these political events and be part of the team providing a consistent message to all levels of government. Political action continues to be a large aspect of our Local's work as we strive to achieve a separate bargaining unit.

All Candidates Forum (2.2.1)

Consistent with the motion from Convention 2015:

Move that bi-annually during election year's, or annually if deemed necessary, the convention committee make available the Convention room for an all candidates meeting so that all the candidates can be properly heard. – Billing / Munroe – Carried

I would like to advise everyone of a change to the format of the candidate information forums at this year's Convention. Unlike past Conventions, when candidates broke into different groups, this year we will be providing space for an All Candidates Forum. All Candidates were contacted prior to convention and invited to participate.

The forum will allow 3 minutes for candidates to address members and participation in a Q&A session.

All nominees will have the option to address the membership for 3 minutes, they can choose to forego the 3-minute address to the members and opt to solely participate in the question period or abstain from participation.

If a nominee is unable to attend the All Candidate's Forum, they will be allowed to submit a 500-word statement that will be read aloud to all members attending the All Candidate's Forum

This will be our first time taking on a task so large and I am open to feedback about the process. The All Candidates Forum will occur Wednesday, October 25th @ 1800, following Convention, in the Convention Hall.

APBC Office

I continue to learn various aspects of our office processes, Staff Collective Agreements, workload, asset management and Strategic Plan initiatives.

Office Break-in

On July 22, 2017, our office was broken into between 2am and 4am. The thieves gained access to the outside electrical room and turned off the power to our office, they then drilled the door lock to our file room gaining access and stealing the following items:

- AV equipment
- Mobile TV/Road Case
- Mobile Office Equipment
- Ceremonial Unit Toast Kit
- Miscellaneous equipment



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

In total, approximately \$7,000.00 of our property was stolen.

I am happy to report that on August 17th, 2017 the Surrey RCMP located some of our equipment while performing a search warrant in Surrey. Our Ceremonial equipment was clearly marked so the RCMP contacted us immediately through the Sierra group and brother Andrew Billing.

With our asset management system in place, I was able to send an audit list directly to the RCMP members at the home and they confirmed a large portion of our equipment to be on site and recovered. We recovered approx. \$4,500.00 of our equipment including the Ceremonial Unit Toast Kit, a significant item with sentimental value and memories of our fallen Brothers and Sisters.

New Office Staff

With the ever-increasing workload of our PEC/PEB members the office has also seen a significant increase in workload. We have reviewed the distribution of work, reorganized the office team and hired a new office assistant over the last few months. Sat Dhillon will be working part-time on Mondays and Fridays 8:30 to 4:00. Please introduce yourself and welcome her when you speak with her.

- Stacey Wessling will be focusing on PEC/Executive support
- Kari Mazzone will be focusing on PEB/Admin support
- Sat Dhillon will be focusing on PEB/Admin support

Office Process Manual

With the recent retirement of Rosanna, Kyoko and Tom Manz we have lost a vast amount of experience and knowledge.

Working with the office staff, we have focused on streamlining office processes and developed a standardized process manual. The new office process manual will assist with continuity in our office work and business practices.

Strata – I will be taking on regular involvement with strata council for the Union building, and have no major issues to report.

Assets - Asset tracking is in place and running effectively. I have completed a full office inventory audit in September and all property is accounted for. I had an opportunity to participate in the Trustee Audit Feb 27-28, 2017 and September 20-21, 2017. I took several items away to work on to further improve tracking our office and local inventory, it was a great experience to learn from our Trustees.

APBC Training (2.1.3)

This past June we arranged 2 days of training for our Provincial Executive Board. The training covered various topics identified by our board members that they felt would be beneficial and support them in their roles supporting members.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

With the election of Shop Stewards and Station Safety Representatives this year many regions have been busy arranging Shop Steward training programs to increase the effectiveness of the RVP's and Stewards and assist our new members in their roles. To date all regions have completed SS training programs with the exception of Region 5-8 which was cancelled. The cancellation due to the wild fires was a mutual decision to free up the hotel and meeting space for those in need. I had an opportunity to assist with the SS training in Region 3 and it was great to meet a number of enthusiastic APBC members.

The total expense for training in the 2016-2017 fiscal year, for all Regions combined, was \$28,278.49, this total is up from \$20,039.83 for the 2015-2016 fiscal year.

I encourage the Regions and Committees to utilize their training dollars to advance their education and make our Union more effective for our members. Each region is allotted \$5,000.00 in training budget annually; education is a key part to being a successful union. Each region is permitted to allocate their funds and explore various training areas of interest. APBC training Request forms can be found on our intranet site for any member who wishes to apply for a training program.

Unit Chief Training/Development (2.1.1, 2.4)

In fall of 2016 a member of APBC was significantly impacted by a lack of training and support as they took on the role of a new U/C in Northern BC, so much so the member resigned. I wrote a letter to Linda Lupini to address the serious concerns and engaged the Employer in discussions around the lack of training provided to Unit Chiefs and Frontline Supervisors.

We are pleased to report the Employer struck a development group including representatives of APBC and a new multi-level Unit Chief training program is under development with roll out projected for later this fall with a target completion date of March 2018. The program includes online learning, multiple face-to-face training days for all levels of supervisors and will include continuing education for supervisors.

Unit Chief training was halted in 2001. The development of a new supervisory training program will provide a solid base for all supervisors in the organization.

Provincial 4-hour Kilo Callout Guarantee (2.1.2)

As many of you are aware the Northern District has been receiving a callout for each kilo shift worked since January 2017. The northern callout was developed in collaboration with BCEHS Northern Management due to staffing issues in Northern BC and the Opioid crisis. With a guaranteed callout, we saw a significant increase in staffed units throughout the north.

During PJLMC in March 2017 we advanced a proposal to the Employer for a provincial rollout of this initiative. We have come to a collaborative agreement with the Employer regarding Kilo car 4-hrs guarantee of pay which rolled out effective July 1, 2017. Every kilo car in BC will now receive a 4-hr guarantee for every shift worked through 2019 and the next round of bargaining.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Looking Ahead

It has been a very busy number of months transitioning. I am looking forward to the challenges ahead in my role as a member of the PEC and PEB to improve the workplace for Paramedics and Dispatchers around the Province. One of my focus's will be business continuity/process.

I am committed to being available to the membership for all things within my portfolio.

I can be reached at jason.jackson@apbc.ca or 250-983-8535.

I move adoption of my report.

Respectfully submitted,

Jason Jackson
Provincial Recording Secretary
CUPE Local 873

JJ/km/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

BRITISH COLUMBIA EMERGENCY HEALTH SERVICES

(the "Employer")
and:|

AMBULANCE PARAMEDICS OF BRITISH COLUMBIA C.U.P.E. LOCAL 873
(the "Union")

(Collectively the "Parties")

EMCT Positions in VDOC Dispatch Center

AGREEMENT

Preamble:

WHEREAS BCEHS has advised over the past three years and more, the dispatcher centres have struggled to reach full establishment of staff. As a result, there is a huge strain currently being put on the current staff within the centres due to an increase in workload. The current schedules within the centres are for Dispatchers (EMDs) which has a long training programme and also has a high rate of failure due to their lack of knowledge of the dispatch systems. Due to all these factors, it also increases the rate of attrition due to a lack of satisfaction and burn out;

AND WHEREAS the Parties wish to improve the current establishment and career progression opportunities in the dispatch centers.;

NOW THEREFORE the Parties agree as follows:

1. The Employer will formally notify the Union and all Vancouver Dispatch Center Staff (VDOC) of the EMD platoon positions it intends to transition to Call Taker Positions through attrition.
2. As part of re-designing the VDOC schedule, currently there are 6 Bravo/Charlie positions per Platoon A/B/C/D and two Bravo positions on platoon A/C. It is agreed that 3 Bravo/Charlie positions per platoon will remain as EMD Qualified positions (specifically positions: B1: 0600-1600,1300-2300 B2: 0600-1600, 1400-0000 and B7: 0600-1600, 1300-2300). Qualifications for the remaining 3 Bravo/Charlie and 2 Bravo Platoon shift patterns will transition to that of an Emergency Medical Call Taker (EMCT) through attrition.
3. EMD qualified staff currently in Bravo and Bravo/Charlie platoon positions will be grandfathered (green circled) and may remain in these positions at their EMD rate of pay and status until they choose to vacate the position. For greater clarity, this means



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

employees who are qualified as EMD's maintain EMD status, ability to work O/T as an EMD, all benefits, wage rate and applicable increases/raises until the position is voluntarily vacated by the incumbent.

4. For the period of time an EMD is assigned to an existing Bravo or Bravo/Charlie shift pattern and grandfathered as point 3 above, the EMD will remain available to transfer between platoons on a lateral movement maintaining the grandfathered agreement until such time they transition out of their current platoon shift pattern to a Team position.
5. Team EMD qualified staff will be able to transfer between Team and Platoon EMD designated positions on a lateral movement to fill vacancies.
6. Once a designated platoon EMD position is vacated by the EMD, it will transition to a EMCT qualified position.
7. For the purpose of "lock in" under Article 13.04(b), the date of the "initial appointment to a Dispatch position" is the date an employee is signed-off to work independently as a Call Taker for EMCT Postings, or the date an employee is signed-off to work as an EMD for EMD Postings.
8. Nothing in this Agreement precludes the Employer from adding new EMCT or EMD positions to the VDOC Dispatch Center.
9. In the event further clarifications are required during transitioning EMD platoon positions, the Employer must advise the Union of the matter and consult with the union to resolve issues. The Employer agrees not to implement any changes until consultation with the union has occurred.

Jason Jackson
Prov. Rec Secretary – APBC

March 29, 2017
Date

Barb Fitzsimons
Chief Operating Officer – BCEHS

March 29, 2017
Date



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Emergency Dispatchers of BC – Local 873-02 Report

Welcome everyone to Convention. It's nice to see a lot of familiar faces and encouraging seeing so many new faces this year. I believe we have a record number of delegates and this Convention should prove to be very interesting.

This year has proven to be full of change for all of us. Since last year we've had changes in our executive that has seen 2 returning members and a new addition to our team. I'd like to congratulate Ashton Paradis, Vice-Chairperson, Marilee Cherris-Wilding, Recording Secretary and Stefano Azzuolo, Chief Shop Steward, on their appointments.

I'd also like to thank Carolyn MacDonald, David Buxton and Jolene Tregilges for all their hard work and dedication over the years. Carolyn and David continue to help serve our members as shop stewards and Jolene has started a new adventure in Kelowna. We wish Jolene all the best in this new chapter in her life. As always, I'd like to thank the PEC, PEB, office staff, Amanda Rogers, Kevin Tilley and John Strohmaier for all their support over the past year. A special thank you to Bronwyn Barter for all your dedication and support over the past 19 years. Your expertise and dedication to this local will be missed by everyone.

Bargaining

At convention last year, I had reported that we were in bargaining. I'm happy to announce that we did come to an agreement with the Employer and ratified a new Collective Agreement in January of 2017. In preparation for bargaining, we put out a survey to all members early in 2015 and had numerous union meetings to ensure we had information on the will of the membership for the bargaining round.

The new agreement found gains not only in wages but also in medical, dental and various language. While this agreement had the best gains we've seen in years, our membership was not happy and voiced their concerns emphatically during our resolution meetings that were held in December 2016. The executive was not prepared for the anger and accusations that came during the meetings. We did end up having lively discussions and had a lot of information come forward. In these discussions it was noted that a clear majority of members were upset at the wage raises offered by the Employer. The members didn't feel this was enough given the jobs we do and the agencies we are responsible for.

One of the things we were sure to do in this last round of bargaining was to ensure that the Collective Agreement ended prior to 2019 as we were advised and knew about the South Island transition.

Victoria, Saanich, Central Saanich and Westshore Police departments have all decided to consolidate their Police Dispatch services and have E-Comm run the Dispatch Centre. They started building a consolidated Dispatch Centre and are due to have it operational in early 2019. With this in mind, we felt that it would be advantageous for the Union to be in bargaining prior to the South Island transition. This is new territory for us as this is a second centre in a different location. We felt that we needed to ensure that there were provisions in the next collective agreement that dealt with moving members from one site to another, taking calls for each centre and what those provisions would look like.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Our Collective Agreement now ends December of 2018 and we are preparing now for bargaining next year. We will be holding nominations late this year for the bargaining committee and once those members have been chosen, I'll be looking to send them to bargaining school early next year. We will then start working throughout the year on our proposals for the next round with specific focus on the South Island transition and also the issues surrounding staffing at work.

New Agencies

In January, 2 weeks after we ratified our Collective Agreement, E-Comm came out with the news that we would be taking on another new agency, Abbotsford Police Services. Our membership was extremely angry at the announcement. During bargaining, we asked if E-Comm was contemplating or expecting any changes to our bargaining unit during the term of the new collective agreement. E-Comm advised they were not, except for South Island, which we knew about. The membership was extremely angry and felt they were lied to by the corporation. At first, the members thought that the Union and bargaining team had known about the Abbotsford transition and thought we hid the information from them until the ratification of the contract. Once the news came out, Dave Buxton and I decided we should go to E-Comm and try to help to calm people down. I had advised the Director of Human Resources we were coming in to speak to members on the floor. She spoke with Dave and I just as we got to E-Comm and advised that we could sit in the cafeteria and if members wanted to come to us, on their breaks, they would be allowed but we were not allowed to go onto the floor and speak with the members. Essentially, she banned the Union from the floor. I made this known to a couple of members at work that day and this news spread like wildfire. Essentially, this was the best thing E-Comm could have done for the Union as it directed all the members' anger towards management and the members realized we were just as surprised at the news as they were.

Abbotsford has since transitioned to E-Comm in September. It seems as they are fitting in quite well except for the long drive for those members that live out that way. The issue with the transition was not about the dispatchers coming to E-Comm but about the work being shouldered by the members already there. E-Comm continually keeps bringing in new agencies with minimal help and we have a high rate of attrition there. We cannot keep people in the building due to the high amount of call volume and lack of down time along with many other issues.

Shortly after the Abbotsford announcement, we were advised that Coquitlam Fire had decided to transition to E-Comm as well. This was met with not as much anger but anger still because this meant our Fire Dispatchers and Call-takers were taking on more work without any type of compensation. We found out quite early that the Coquitlam dispatchers who were working there were not intending to move to E-Comm. This is largely due to the fact that the dispatchers at Coquitlam fire are part of the IAFF and are paid quite a bit higher than the dispatchers at E-Comm. Coquitlam Fire is due to transition in November of this year.

New CEO

Early 2017, David Guscott announced that he would be retiring from E-Comm in August. He advised he was giving quite a bit of notice as he wanted there to be a transition period between him and the new CEO. E-Comm hired a company to conduct the search for a new CEO and this took quite a while. Our new CEO has just been announced and he is Oliver Gruter-Andrew. Oliver comes from PHSA and was the head of the



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Information Technology department. Even though he has an IT background, we've been advised that Oliver's focus is on the human factor. We will see.

FOI

Shortly after we were advised of the Abbotsford Police Dispatch transition, the Union submitted 3 separate Freedom of Information requests. We requested documents pertaining to the Abbotsford Police transition from Abbotsford Police Department, Abbotsford City Council and E-Comm. The membership believed that E-Comm knew prior or during bargaining that Abbotsford Police was planning on transitioning their dispatch services and felt that E-Comm had lied to the bargaining team and to the membership. With this in mind, we have received information from Abbotsford City Council and Abbotsford Police and are waiting on E-Comm for the request. Once we obtain the information, we will have to decide how to proceed.

Grievances

Last year, I had David Buxton, the chief shop steward at the time, take a 3-month full time leave as we had an extreme number of grievances and we needed to get a handle on them. With Dave's help, we slogged through them all and have resolved most of them in some way.

We currently only have a couple of grievances on the books at this point, with one slated for arbitration in November. This grievance is still ongoing from prior to last convention. It is regarding the 1st person who was terminated on a non-culpable basis due to a disability.

One thing we have done this year is change the way we deal with our probationary terminations. We had previously immediately sent every probationary termination to Step 3 of our grievance procedure. Originally, E-Comm was not good about providing documentation on why they were terminating someone. Over the past few years, they have been getting much better at providing this information to the Union and now usually provide it up front prior to a termination meeting. Because of this, and because of our probationary language, we have made the decision, along with the PEC and our CUPE reps, that we don't need to grieve each probationary termination, especially if the member does not wish to grieve.

Staffing Issues

We continue to have issues with staffing and workload. After the ratification of the Collective Agreement and the Abbotsford announcement, E-Comm decided they needed to get a handle on the issues and try to address them. E-Comm has since decided to have job evaluations done in all areas of the ops floor and Ryan Lawson has begun having 1 on 1 conversations with all the call takers on the floor. He's advised the Union that he has begun putting the issues addressed together into one document and will share this with the Union once he is finished. I've been asking when he thinks he will be finished and he keeps advising next week or soon. He's been advising this for a couple of months now so I'm hoping we get this before the end of the year.

The Union also decided to form our own staffing committee to address the issues that were being brought forward by the membership. The committee has met once and we are trying to schedule another meeting. We would like the information from management on the 1 on 1 talks to see if they align with what the membership has been advising the Union and we are hoping that not only has the membership expressed their ideas to



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

alleviate the workload with management but us as well. Currently, call takers and report agents have to take the calls for 16 police agencies as well as the 911 queue. This potentially puts a call taker on 33 different queues at any given time. These call takers and report agents need to know the policies and procedures for each jurisdiction and while some of the p's and p's are aligned, most are not.

Call takers do not have the time on an emergency call to look up policies. On the non-emergent calls, they do have the time but our system that houses this information is cumbersome at best. This leads to taking longer on calls or guessing and this can lead to a call taker doing the wrong thing on a call. This leads to call takers being spoken to, possible discipline and added stress on our already stressed out call takers.

Mental Health

Even though we have a CIS (critical incident stress) team and they do a phenomenal job, the Union has felt that we need more in terms of mental health and positive mental health for our members. Some of the executive has been attending different mental health workshops and courses learning how to identify and manage mental health issues in the workplace.

We felt strongly about the mental health of the membership and with the membership receiving calls from 16 police and 18 fire agencies, we felt it was imperative that we have some kind of mental health program in place at work. We brought this forward in bargaining. The Union felt we should have a committee that looks at and focuses on mental health strategies and programs for the membership. E-Comm disagreed and would only agree to mental health being a standing agenda item on the Joint Occupational Health and Safety Committee (JOHSC).

E-Comm has sent their leadership team and now their lower level managers to the Road to Mental Readiness (R2MR) training and will be providing this training to all staff at some point. While this is a great first step, the Union would like to see more and more of a commitment from E-Comm.

Strategic Plan

Staffing Committee:

As stated above, we have created a staffing committee to look at the staffing issues at work and come up with some solutions we can provide to management. We have had 1 meeting and are working on having a 2nd meeting. The members of the staffing committee are Jacqueline Lai, Kristine Schwartz and Bree Driedger.

Communication Committee:

We have created a communications committee to look at ways we can communicate with our membership and the public better. We currently have a closed group Facebook page where we update the membership as well as our Union Website but are looking at ways to communicate to and involve the membership more regularly. The members of the communications committee are Donald Grant, Matthew Bordewick and Bree Driedger.

Member Services

We have begun swearing members into the Union at the New Employee Orientation sessions that every new employee is required to attend. We are regularly scheduling union meetings at both our Still Creek and



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Pender Street addresses. As of early 2019, we will have to look at scheduling union meetings at the new South Island location. I am also looking at working on Union business at E-Comm once every couple of weeks in our cafeteria area. This will give members the ability to come and see me, speak to me about any issues they have and allow me to connect more with the membership.

Union Meetings

The Executive has had discussion surrounding topics for union meetings and possibly having guest speakers to discuss topics of interest for members. Will be discussed at the next executive meetings but topics so far include, pensions (including a pension committee), Morneau Shepell Management Services and the Attendance Management program, Grievance procedure (how to submit a grievance and what it actually means) and mental health.

Shop Steward Course

We held a shop steward course in 2017 and had 3 people attend. Welcome to Donald Grant, Sheldon Miller and Jacqueline Lai. We still have room for 1 more shop steward and are looking at holding a course in November.

Member Health and Wellness

Shari continues to sit on the JOHSC committee.

E-Comm has implemented a staff driven health and wellness committee with efforts to continue to promote healthy lifestyles. The Union will continue to encourage these efforts and offer support where needed.

The Union continues to be involved in the promotion of mental health. E-Comm is currently in the process of rolling out the Road to Mental Readiness (R2MR) program for all employees. We are hoping for this to start in early 2018.

Our Union executive continues to work with Bob Parkinson and Lindsay Kellosalmi on Worksafe and Mental Health issues. We are very excited to see the new website: WWW.BCFIRSTRESPONDERSMENTALHEALTH.COM and look forward to being a part of this initiative in the future.

Communication

We continue to hold regular union meetings with information on selected topics to help with member engagement. In addition, we are excited to see what the Communications committee will bring forward. We are hoping to have our communications committee work closely with the new Communications Advisor for the Union as a whole. We have also added Paul Alberts as an admin on our Facebook page so he can help us with our social media presence.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Union newsletter

We had put out one newsletter and it was well received by the membership. We will continue to put out newsletters for the membership and this will be a responsibility of the Communications Committee.

Grievance file

Our grievance files are now manageable and we continue to work on solving grievances in a timely fashion.

Social media

We currently have a closed Facebook group for general questions and information. We have added Paul Alberts as an admin to this group to help with Social Media presence. We are also going to connect with Paul with respect to other social media outlets and how to use them appropriately.

Political Action

Labour Affiliates:

Meghan Valli now sits on numerous district labour councils and will attend these meetings when possible. Meghan has also gone to numerous fundraisers and political functions and will continue in this role into 2018.

National Advocacy:

The 02 Executive is looking forward to attending the 2017 APCO conference in Windsor, Ont. in November this year. The focus is once again on mental health and also on next generation 911. There are numerous changes coming to 911 services in the coming years and we want to ensure we are on top of those changes for our members.

Labour Relations

Our Collective Agreement ends in December 2018. We will be preparing for bargaining starting late this year and into next year. We have the addition of South Island police dispatch services in early 2019 and wish to bargain in language that speaks to having 2 separate sites in 2 separate areas of the province.

We are awaiting the information on our Freedom of Information request to E-Comm regarding the Abbotsford Police dispatch transition. Once we obtain this information, we will be making decisions on what to do with the information and what it means to our members. Our members were very angry about the announcement of the transition 2 weeks after ratification of the last Collective Agreement and believed that E-Comm hid the information from the membership until after ratification. The membership feels they are extremely overworked and underpaid for the work they do and this will be the main focus in the next round of bargaining.

The Union continues to work closely with E-Comm management for the betterment of our members and is looking forward to working with the new President and CEO, Oliver Gruter-Andrew.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

I respectfully move adoption of my report.

Shari L. Thomas
Shari Thomas
Chairperson
CUPE Local 873-02

ST/km/MoveUp

Unadopted: for review only



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

REGIONAL REPORTS

Region 1 North Report

Good Day Brothers and Sisters,

Another year has passed and we are back again. Sadly, this convention we are saying goodbye for now to Bronwyn. Thanks for your years of service to move us forward and better ourselves by your endless energy and dedication to this Union and its members. Your efforts and presence will be lacking but we still know where we can find you. As for the rest of the PEC, again thanks for your patience and assistance with our issues and new reps. It is greatly appreciated.

As for 1 North, its been a fairly steady year for us and we are enjoying the tasks.

RVP's

This year we saw a new face come into the RVP role. With John Hosie stepping down and taking his much needed and earned retirement, we saw Steve Boley step into the RVP role as a fill in for John and then win the spot in the Regional Election. Working alongside long standing RVP, Greg Heyes, Local Recording Secretary Keith Moraes and Chief Steward Mike Egli we are trying to serve our Region to ensure our members have active and engaged Reps, as we always have had. And look after their concerns in a timely fashion.

Shop Stewards

This year was also the local level Shop Steward Elections in our stations province wide. We have this year, seen some new faces and returning members take on the role of station level stewards. Dave and Sherman helped us out this year by offering a 2 day course for stewards to get them engaged and educated in the ways of the role and a refresher to the returners on items and procedures. It was well attended and informative for our stewards and was well received. Greg and I are engaging our stewards more and more and getting them active in their roles with assistance from us where and when needed. We have had one teleconference which we figured would be beneficial to aid in any questions or needs for the stewards and have them in contact with the RVPs. We are planning to have another soon.

Union Meetings

This is an area that I am sure we all struggle in. We have yet to have a quorum for a meeting. Keith Moraes is very diligent about getting our venues booked and out to the stations at least a month in advance of the meetings to try and ensure all have adequate notice of meetings. We have engaged door prizes and swag at the meetings but are still lacking. We are planning to try a better way to engage our members and are looking at the video broadcast route again to try and obtain quorum as our region is very spread out and hard for some to attend.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Public Relations

This year we saw a new, but familiar face step into the tireless role of Public Relations. Aggie Pringle, who already works hard for convention and resolutions, is now the new face of the Region 1 North PR group, replacing Stuart Myers who we thank for his last 2 years of assistance in this role. Aggie has started things rolling with parades, mini ambulances and Bear-A-Medic in attendance. She is also in the midst of career days and school tours planning to have our presence made known and looking at more with the PARTY Program, as it is an important program to inform and educate our youth. She is always ready to have anyone who wants to assist and donate some time. Well done Aggie.

RJLMC

We continue with the RJLMC Meetings and have been very well received with the Employer who has shown a great amount of respect and willingness to discuss and work with the local reps of the Union. We are able to approach beyond the meetings with any issues we have and have an open discussion.

Grievance Caucuses

We have also been working hard with the grievance load. We have managed to resolve a fair load of grievances at Caucus and get the much needed resolves for our members. The Employer has been exceptionally reasonable when presented with the facts to resolve. We are also working with the local level stewards to try and prevent unwarranted or non feasible grievances from making the system by having them meet with the members and discuss the issue and see if there in fact is anything to proceed forward with. This seems to be making a difference for us in the amount that are hitting the system and allowing us to get the amount we have down to a few left outstanding. The PVP's have been working hard with the older ones to get them resolved in higher level Caucus meetings.

NEO

This year we have had the opportunity we have been seeking to attend NEO and get the Union involved in the beginnings of the new hires. Our Recording Secretary has revamped a power point presentation that we use at the sessions. These have been very well received and we have actually helped out members having issues at the courses by stepping in or giving general information to figure their issues out. We also are signing the new hires into the Union site and email, expressing the importance of attendance at meetings and the access to their email to stay informed. We have been handing out swag to the new recruits and answering any questions they may come up with.

Community Paramedics

The CP program is in full swing within our Region. It is proving to be a beneficial program to get our members into regular work and to provide the much needed gap coverage in medical care and assessments to remote communities and the people therein. New positions are starting soon within our region and there is talk of increasing their work and possibly their description.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Deployment Strategy

With the implementation of the READY MOU, we are starting to have the Nanaimo Deployment meetings with the managers. The Union has been informed that they look forward to our participation and insight in these meetings and we are happy to oblige. There seems to be good intention and involvement from the manager side of this and a willingness to be transparent and include rather than just act. We are looking forward to the continued interaction and participation in these meetings.

Disciplinary Meetings

The 11.04/11.05 process is always a spot of contention in our Region. We have selective usage of this and time and time again reiterate the fact that the process is there, please use it and not the Non Disciplinary “chats” that they like to have with or without Union Reps there. We are slowly hoping to change this process and seem to now be getting the invites into the Non Disciplinary meetings to ensure the member is protected. The amount of meetings we are having are sporadic, and we are trying where possible to use the local level stewards to deal with them. We have sat with our new stewards until they feel comfortable and then they are handling some of these meeting on their own unless the meeting seems to get the feel that the RVP need be present, in which case Greg or I attend to assist.

Staffing Levels and Scheduling

This is always a problem. The outlying stations are still struggling with retention and recruitment. The new Kilo Guarantee is helping in some of the spots but not all. With the Chronic Hiring in Vancouver, this causes a shift in staff to the busier centres and depleting the outlying areas. The new hires are slow to get on car due to the orientation process and it can take up to 60 days to get them as functional on car. This causes the cars to be shut down, depleting the area of service and placing a heavier burden on the surrounding crews. We are still seeing issues with provincial scheduling and they are one of the major sources of our grievances due to chronic errors and improper backfilling and allotment of shifts to crew members. This issue we are working on at the RJLMC meetings.

That about concludes our report. We are looking forward to another busy year of work aiding our members and moving forward.

We respectfully move adoption of our report.

Steve Boley
Regional Vice President, Region 1 North
CUPE Local 873

Greg Heyes
Regional Vice President, Region 1 North
CUPE Local 873



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Keith Moraes
Recording Secretary

Mike Egli
Chief Shop Steward

SB/GH/sd/MoveUp

Unadopted: for review only



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Region 1 South Report

Welcome everyone to Convention 2017. The Union Reps have been working many long hours providing the best support we can for all of our members in 1 South. I know the hard work is paying off as our relationship with the Employer is improving and we are accomplishing more and more. As we approach the end of 2017, and move in to 2018, we hope to get our members even more involved and keep them informed throughout the next year.

Fireside chats

It is obvious the Employer has no intentions of using the 11.04/11.05 language “unless there is likely discipline to follow”. We are obviously concerned about this trend and it is a clear violation of our Collective Agreement. It is also concerning that members continue to meet with the Employer and are not offered, or requesting any Union representation. We strongly urge members to seek advice from the RVP’s and/or Shop Stewards before providing occurrence reports or speaking with the Employer on any issue that they feel unclear about.

Meal Breaks

This issue continues but certainly not to the same level that it was. Members are reminded to speak with their DS prior to clearing the hospital or scene if they are in need of a meal. The call volume keeps increasing and everyone is aware we need more resources but crews must look out for themselves first. A reminder that it is not recommend to store food in the vehicles as there is no separate storage area safe to do so.

Bike Squad

Our Bike Squad has been very busy since starting in February 2017. The members of the squad have provided a quicker response to calls in the downtown area especially to our local Safe Injection Sites. The team often is the first on scene, arriving before Fire or Paramedic Units can arrive. We are hopeful that permanent positions are created at the end of the Oct 31st trial. They have more than proved their effectiveness providing rapid response to patients, improving our community profile and relationships with the communities we serve.

Dispatch

There are still staffing issues in the center here, but a new class of EMCT members is well into training (good luck to all) and should be signed off early in 2018. We have heard concerns about transfers coming out of Tofino after midnight that should NOT be happening, and we have spoken with Lance Stephenson and have been advised that Amy Poll is looking into this matter and that the Employer is also concerned. A reminder to all crews that if you are put into what you believe may be an unsafe situation please contact your Unit Chief or DS.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Public Relations

We now have our own Union Ambulance for the island and it's already booked for numerous upcoming events including 3 parades, some school visits and some care facility info sessions. Bear-A-Medic had a really busy year and will be hibernating for a short time while she goes in for some repairs and maintenance. If you need the ambulance or Bear-A-Medic please contact us asap so we can make sure they are available for your events. Also we ask that any event you attend in your community, you let Kathy Sywake know about so we can keep track of the number of events and add pictures to our Facebook sites.

We are also happy to report that our Employer has agreed to provide us with some medical equipment for our new ambulance. We recently received our new AED LP 1000 for the car provided by APBC. I'd like to thank Cam Eby, Annmarie Byers, Phil Woods, Joanne Nielsen, Rob Howland and Jason Little, Lance Stephenson and Brad Cameron for all their assistance getting 873 here and operational.

Union Meetings

We recently had a quorum for our Union meeting, but it continues to be important to get as many members out as possible. During the meeting we had many good debates and certainly received direction from our members with what they would like to see happen at Convention. We will be holding another meeting in November to discuss Convention issues and also to deal with other local items and/ or concerns. We have also recently tried having our shop steward meeting by teleconference with great success, we look forward to further improving communication between our local Union Reps and the membership.

We move adoption of our report.

In solidarity,

Scott Sywake
Regional Vice President, Region 1 South
CUPE Local 873

Paxton Grill
Regional Vice President, Region 1 South
CUPE Local 873

PG/SS/sd/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Region 2 East Report

Communication

Communication and membership engagement has been a focus for our Regional Executive in 2 East. Following RVP elections this year, we distributed a communication survey to the members of our region. The feedback we received indicated that we needed to do a better job of engaging our membership and communicating. It was important for us to respond to the information we had solicited and demonstrate our commitment to the membership by using their feedback to create a positive change. As a result, we decided to create a monthly regional newsletter. The newsletter has been well received, and has since become a part of our larger new monthly membership newsletter. With the production of our newsletter, we hope the members felt like their feedback was valuable and taken seriously. We continue to encourage engagement and participation and are committed to ensuring our membership feels supported and influential.

Regional Deployment

As has been the case in other regions, our Area Director has indicated the desire to restructure deployment and introduce significant changes to the current models we are familiar with. She indicated the Valley (Mission, Abbotsford and Chilliwack) was of particular interest and in desperate need of change. There have been a lot of rumours regarding the creation of a central reporting station (CRS), which has led to much speculation and concern. Informal discussions indicate that management recognizes that we have outgrown many of our stations, and the need for sustainable solutions. However, the geography of the Valley will require creative solutions as the distance between our communities is prohibitive to the creation of a CRS. We look forward to meeting with the Employer in the future to further discuss deployment.

Superintendent involvement

We have been having issues getting our superintendents to address concerns that have arisen, to the point of making jokes about the situation. Whether it be safety, harassment, or the general well being of crews, we find there seems to be a lack of concern. We have found it to be extremely beneficial to go over their heads straight to the Area Director.

Recently a safety concern arose regarding the temporary location of station 202. Wendy Machana and Barb Fitzsimmons jumped on the issue and within a few hours of seeing the conditions, plans were put in place to have us moved. We also enlisted the help of the PEC.

The lack of care reflects in the membership. They see their superiors not caring therefore they figure why should they. News of the move quickly spread and we watched as crews went from feeling beat down to feeling like someone cared.

Scheduling

Scheduling continues to be a complete nightmare in the Fraser Valley. Especially if you are on call or an irregularly scheduled employee; let's be honest if you are an employee of BCEHS in general it's a nightmare.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

With the introduction of the universal hourly rate, scheduling seems to be unaware that 7 hours is not equivalent to 12 hours. In turn we see allotment of shifts becoming unfair with employees working less but making more than others who are working 2-3 more shifts.

In the Abbotsford post we are seeing irreg employees being scheduled erratically while PTIP are receiving full blocks. The schedule is released 3-4 times and is still full of mistakes with members scheduled to work multiple shifts in one day or completely forgotten and left off the schedule. Although this has been better the past two months.

Scheduling and superintendents also don't seem to grasp the concept of why a Fox car is going down when there is an additional full-time unit being staffed. It apparently is mind boggling why the members attached to 206 are dumping their Fox shifts at the start of the month and it can't be staffed. But the Juliet is fully staffed with PTOP on call employees.

We honestly had the conversation with management that the Fox car will go down unless you activate it or get rid of it and they truly believed that it wouldn't happen because their scheduling department would schedule everyone equally (remembering that 7=12).

Scheduling also is still pushing the SSQ form for all investigations regarding scheduling. Bill Rana has clearly stated to the superintendents that they can not and will not do any form of investigation with out that form being filled out.

On the bright side, we have seen the conversion of the 215 (Mission) Fox to a Juliet car for a six month trial. The staff appear to be happier making their full wages. The car is staffed on a regular basis and it reflects into the surrounding areas.

We move adoption of our report.

Respectfully submitted,

Jessica Chilton

Jessica Chilton
Regional Vice President, Region 2 East
CUPE Local 873

Cyrus Murray

Cyrus Murray
Regional Vice President, Region 2 East
CUPE Local 873

JC/CM/sd/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Region 2 West Report

It has been a busy year in 2 West with a lot of changes on both the Union and Employer side.

RJLMC

The Union has attempted to schedule 2 RJLMC's since the summer. The Employer has cancelled on both occasions citing "some key stakeholders have sent their regrets" and were unable to attend. We are continually making ourselves available for this meeting however the Employer is not.

Irreg Scheduling

The Union has filed a policy grievance in regards to irregs owing hours. Currently the Employer is violating the ISE agreement, ISE addendum, as well as UHR. When schedules are being delivered to irregs the Employer is not ensuring that irregs are being scheduled into Alpha shifts first. With that the hours owed for Bravo/Charlie are being made up "their first shift back of the next cycle". Essentially the Employer is bankrolling hours with some irregs currently owing 44 plus hours. The Employer is also denying overtime as a result.

Part Time in Post/Lima Cars

At the 2 West RJLMC meeting in February 2017, the Employer put forward a Lima trial that was to have 8 Lima shifts allotted per platoon. These shifts would be 2 spots at Stn 44, 48, 49, and 59 totalling 8. Lima shifts were to go from 06:30-18:30 for days and 18:30-06:30 for night shifts allowing the Employer to have staff readily available to fill vacancy's that arose.

This trial started in March, and before long issues arose with the Employer moving staff on to delta cars and shorting them hours. These employees then had to work a split shift or finish off an Alpha or Charlie car to get the 12 hours pay or not be paid for 5 hours. Some employees were being scheduled to start later in the day with little to no notice with some shifts running in to evenings causing personal hardship.

The Employer's continued inability to schedule according to the Collective Agreement has meant that full-time Irreg employees are being under-scheduled, and routinely being required to make up hours not scheduled by the Employer, while on-call employees are being scheduled for full-time hours during the same time period, creating division and animosity in the workforce. These are just a few of the many problems arising in this trial.

On June 29th the Employer set out to further violate the Collective Agreement indicating it wishes to reduce the number of guaranteed hours of pay from 12 hours to 10 hours. So as to reduce the amount of wages payable to on-call employees, the Employer chooses to utilize on shorter shifts. The Employer has also unilaterally applied SNE rules to further manipulate the scheduling process and not pay overtime to on-call employees. The Union notes that there is no such shift pattern contemplated in the Collective Agreement, nor is the SNE agreement for full-time Irreg employees applicable to on-call members.

The Union addressed this issue to BCEHS Management on July 8th when the Union withdrew support for the Lima trial. The Employer was put on notice that due to the inability to schedule fairly and equitably as per the WAG and the Collective Agreement, Union support was withdrawn. Even though the Employer was put on



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

notice they continue to utilize Lima shifts and have taken it one step farther to assign shifts to part-time staff with no hours or location attached, simply a Lima day or night shift. A policy grievance has been filed.

Vacation Selection

Full timer members in 2W should have received their 2018 vacation entitlement letter. If you do not agree with the calculations, please contact Employee Support with your concerns as soon as possible.

11.04/11.05 Violations aka "Meeting Invites"

The Employer continues to violate our members' Collective Agreement rights by failing to follow the 11.04/11.05 process and instead issuing "meeting invites" to come to a meeting, often with no notification to the Union, in violation of Article 6.01. In many cases, these invites are extended to the "witnesses" to an event, while the alleged perpetrators are issued 11.04/11.05 letters; meaning that the Employer has already decided who was responsible and who was not prior to any investigation of an event.

Many of these "non-disciplinary meeting invites" have resulted in a member receiving a Letter of Expectation. We remind and encourage all members that if they are asked to meet with the Employer for any reason, they are entitled to union representation. The Employer does not get to choose the representative for them, as has happened in a couple of instances. The members choose their own rep.

Union Meetings

In July the RVPs visited Whistler and held a Sea to Sky Union Meeting. It was well attended and the members engaged in some great discussion. In September we held meetings in both Powell River and Sechelt, both of which were well-attended with lots of good discussions and questions being brought forward.

Regional Elections

The May 2017 regional elections resulted in Lorraine Till, Terry McManus and Katryna Bowland-Kwok elected as RVPs. Sister Bowland-Kwok had been our Regional Recording Secretary, and Brother Dustin Jackson was appointed to take her place.

In June, Brother Andrew Billing decided that for family reasons he was going to step down as RVP. The resulting RVP vacancy was filled by the appointment of Brother Dustin Jackson as RVP, and subsequently the appointment of Brother Dave Leary as Regional Recording Secretary.

Shop Steward Training

In September, 2 East and 2 West held a joint Shop Steward training. The training was well received and we had a great turn out. We will be looking to hold another training session in the new year to capture any missed shop steward training.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

TANGO Units

The Employer has now posted and selected a permanent Tango group. The Paramedic Specialist Group is currently under a policy grievance. The permanent group is currently under training and has raised many concerns as a number of them currently hold Unit Chief positions, one of which is outside the post.

Deployment Meetings

The Employer has engaged with the Union in regards to a deployment model for Vancouver. The meetings are still in progress and no decisions have been finalized.

We move adoption of our report.

In Solidarity,

Lorraine Till
Regional Vice President, Region 2 West
CUPE Local 873

Dustin Jackson
Regional Vice President, Region 2 West
CUPE Local 873

Terry McManus
Regional Vice President, Region 2 West
CUPE Local 873

Katryna Bowland-Kwok
Regional Vice President, Region 2 West
CUPE Local 873

LT/DJ/TM/KB/sd/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Region 3 Report

Welcome to Convention 2017. We want to especially welcome new and returning delegates to what is one of the top vital functions within our Union. This year's convention will prove to be busy with hearing reports from the various areas, committees, and the voting in of various positions. Remember during this time to ensure you sit and listen to the incumbents as they present their platforms.

This year proved a busy one for the Region 3 executive. In June Sister Lindsay K had decided to step down so she could focus on her new role. As per the bylaws the regional executive asked Brother James Towle to join. Many thanks to Lindsay for all her hard work for our members as an RVP. Also, during the election, we welcomed Brother Shane Thair as the elected Regional Recording Secretary. It is important for us, as we welcome the new members, to also recognize the previous as well.

The regional executive has been going at a full pace this year once again. The team has had very little time to sit back and relax as things unfolded and continue to work daily to support our members within the Region.

Communications

This was a big area that has been heard time and time again. We are happy to see the new newsletter come out. Within it is a provincial overview as well as a regional update. Sister Jessica C has been instrumental in keeping this moving forward, many thanks.

Regional Union Meetings

In September we attended a regional meeting in Salmon Arm. The turnout was great and a good opportunity for us to spend time with some of the members. Although we did not have a quorum, there was a lot of information sharing that took place. Due to our vast area it is sometimes difficult to get the quorum needed to conduct the business and most meetings are information sessions only. We are hopeful with more advanced notice and information sharing this will change in the near future.

Grievances

This is a large workload for the RVP group and continues to keep us busy. Currently in Region 3 we have a total of 303 grievances that are being managed at each level. From a provincial overview we have the second largest grievance workload out of all the regions. We have also noticed some patterns with our grievances, the majority range from scheduling to payroll to meal allowances. We are trying tirelessly to work to get the Employer to resolve these at a Step 2 level, to say the least we have been disappointed with the results thus far.

Kamloops Dispatch

This is another area in which we are becoming very busy with issues. The Employer conducted a "trial" to see if Vancouver could handle the overflow from the Interior during the fire season. It was unfortunate that they chose to complete this trial in secrecy and in isolation of the Union. What is of even more concerning is



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

that we are once again back to not filling shifts with recall from holidays. Perhaps this has something to do with the "trial".

Shop Steward Training

We were pleased once again to be able to provide an APBC Shop Steward training session within our training budget. This year we held the 2-day session in Kelowna. Many thanks to Brother Deines and Brother Jackson for attending and assisting in the training process. There is a great amount of knowledge within our group and in the end it makes us stronger as a membership.

Fire Season 2017

No doubt a season that will soon not be forgotten. It is unfortunate that as we write this report we still have a large portion of our members still not paid. Even more so we are still hearing of cases whereas while the Employer was up-staffing units to support the fires they didn't even call the local members.

As our members throughout this fire season stepped up many had to evacuate their families from their homes. Remaining the utmost professionals that we are, once this was done they returned continuously to the frontlines to ensure their local units were staffed. Our thanks to all members who stepped up to assist during these trying times.

Interior Staffing

This topic continues to plague this regional executive and our members. Kamloops and Kelowna are in need of an urgent staffing model increase, one that has been a high level topic for the past several years. Daily out of post units come into these cities to assist with the normal day to day call volumes. To date the Employer continues to not fund new units, in fact, by the time they staff with the old numbers we will be short again. What proves even more frustrating is the continuous staffing increases in other areas with no increase locally. Our members are getting burnt out by trying to hold the seams together and ensure not one patient suffers. We commend our members for continuing to shine with professionalism and commitment each day they work short.

Lastly, we want to take the time to thank everyone that has helped us along the way. A big thank you to the ladies in the office, to the Provincial Exec, and to all our shop stewards, without this team we would be lost daily with our workloads doubled.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

We move adoption of our report.

Sincerely,

Keith R Taylor
Regional Vice President, Region 3
CUPE Local 873

James Towle
Regional Vice President, Region 3
CUPE Local 873

Shane Thair
Regional Recording Secretary
CUPE Local 873

KT/JT/sd/MoveUp

Unadopted: for review only



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Region 4 Report

Dear Brothers and Sisters, we would like to welcome all of the delegates, committee members and chairs to Convention 2017. Here are some of the highlights and updates from around Region 4 over the past year. I would like to start off by thanking Brother Harder for his many years of dedication and commitment to our members. Wayne has stepped down from his role as RVP and will be missed. It is my pleasure to welcome Brother Farquhar as RVP. Grant's experience and knowledge are invaluable and having Grant on board as an RVP will be an asset to our membership.

Training and Education

We are excited to have so many new stewards this year and it is great to see so many stations having representation. With new faces comes renewed enthusiasm, fresh ideas and new perspectives. We certainly saw that with the shop steward course in Nelson last June. Thank you to Brothers Dave Deines and Sherman Hillier for putting together this very informative course and to Brothers Bob Parkinson and Corey Viala for joining us and sharing some valuable information and insight.

Management

The use and non-use of the 11.04 process continues to be a bit of a shot in the dark. There is little consistency around its use, especially around probation extensions. One employee might be called in for an informal chat whereas another might be brought in for an 11.04 meeting for the same issue. We are making sure all of our members have union representation regardless of what management are calling these meetings, and engaging with HR to regain consistency.

Our management russian roulette from years past has stabilized, which has brought some welcome stability and consistency to our Region. However, the management styles vary tremendously between our 3 districts.

Union meetings

We had a union meeting in Nelson last June that coincided with our shop steward training. We did not quite make a quorum, but had some good discussion. We also held a union meeting in Cranbrook October 10th to give our members a chance to talk with our delegates and offer some direction. We discussed resolutions, regional issues and concerns but once again could not reach a quorum. We would like to boost attendance at union meetings and are open to suggestions from our members on how to do this.

Music Festivals and Wildfires

A strange combination, but Shambhala was under evacuation alert this year due to wildfires. Thankfully there was no need to evacuate the festival grounds, and Shambhala came and went without any notable issues. We were hit with a few fires in the Kootenays, faced evacuation alerts and a few evacuation orders, but all in all, came away from such a horrendous fire season fairing quite well. Our thoughts go out to everyone in the Okanagan and the North who experienced so much hardship this fire season. Thank you to our crews and our members for stepping up when needed and helping both here in the Kootenays and around the province.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Community Paramedics

This year has seen the roll out of community paramedics across the province and we have many CP's working in our Region. The roll out has had some extremely frustrating times, but CP's continue to be optimistic about what their job/role can be. Communication has been a big concern for Cohort 3, and we hope some more kinks have been worked out for those in Cohort 4 who are now in their training. Perhaps the biggest hurdle has been on how CP's can receive their referrals. As you know BCEHS took the fax lines out of our stations and as it turns out that is the best way for CP's to receive referrals, so guess what... fax lines have been put back into stations with CP positions. This is another great example of a lack of forward thinking from our Employer.

RJLMC

Our RJLMC meetings have been mostly positive and we enjoy working with Keith, Lindsay, and James from Region 3. Topics of discussion include scheduling, DTA's, Trail vacant positions, HART issues and staffing issues. We have seen the change to 12 hour shift patterns which has caused some major scheduling and staffing issues, particularly when trying to staff 12 hour kilo shifts adjacent to a 10 hour Echo and 14 hour Fox rotation. These challenges have caused a decrease in morale and much frustration across the board.

APBC representation from Region 4

In May, Amy had the honour of being part of a group of our paramedics who went to Parliament Hill in Ottawa to represent APBC and our profession at the Paramedic of Canada Lobby Days. It was an amazing experience that I was proud to be a part of. Amy also had the opportunity to be one of our representatives at the CUPE National Convention held earlier this month. As a first time delegate there, it was interesting to see how CUPE works at a national level and to be a part of an emergency sectoral meeting discussing the issues and concerns of Paramedics, Dispatchers and Police Departments from across the country.

We move adoption of our report.

Respectfully submitted,

Amy Chris
Regional Vice President, Region 4
CUPE Local 873

Grant Farquhar
Regional Vice President, Region 4
CUPE Local 873

AC/GF/sd/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Regions 5-8 Report

Greetings Brothers & Sisters;

We'd like to thank the members of the Executive for their tireless efforts that their respective workloads demand, and the ongoing assistance that they continue to provide.

As we approach the end of the year, we are continuing to face some provincially unique issues, including issues which appear to reflect changes in the Employer's limited knowledge and interpretation of existing contractual language.

We are facing ongoing issues where the Employer's centralized Human Resources Department continues to respond to grievances, instead of their operational managers as required in our Collective Agreement.

On occasion, union correspondence which should be forwarded to the Secretary Treasurer is not sent, or sent only to some union representatives. It appears the Employer is neither sufficiently cognizant nor concerned enough to follow these contractually and traditionally employed practices, as outlined in the Collective Agreement.

We have also had isolated incidents where the Employer has chosen to violate Article 11.04 by responding to complaints, often with disciplinary action, through internal and informal means. In cases of medically-based complaints against crew members, they have on occasion attempted to solicit medical clearance to return to work, again without a formal 11.04 investigative process, to the exclusion of the Union and detriment of the members involved.

Our frustration with the Employer's decision to violate the Collective Agreement with both subtle and sometimes overtly blatant disregard leaves us often compelled to speculate as to why this continues to occur.

On a more positive note, the ongoing usage of the "Kilo Guarantee" has had the beneficial effect of staffing previously vacant Kilo shifts in many stations, and in a few stations with serious staffing issues, seems to completely have resolved their staffing problems. From the perspective of our crews, overall this "Kilo Guarantee" has had a positive impact on staffing, though it would appear that recruitment has been insufficient to fully restore adequate staffing in many northern stations.

However, in discussions with many of our northern On-Call brothers and sisters, there seems to be considerable apprehension and animosity as they await the implementation of the Employer's new deployment and staffing models.

The recent addition of a low acuity Air Evac crew in Fort St. John (880) is a welcome addition to patient care in the north-east corner of BC. However, it would appear that management has set it up to fail. They have done limited and poorly organized training for the members staffing the plane (and it shows). They have violated the WAG to the point where they are increasing staff in neighbouring stations, to provide bodies on the plane. Scheduling seems to be last minute and often effects the duty cars. The inclusion of experienced paramedics in the rollout was not asked for, and people with little or no experience have done all the organizing.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

It continually amazes us that PHSA still exists. If their performance in supervising our Ambulance service is any indicator, they are a waste of taxpayer monies.

We respectfully submit this report for the consideration of the Executive.

We respectfully move adoption of our report.

In Solidarity and with thanks,

David Wolczuk
Regional Vice President, Regions 5 – 8
CUPE Local 873

Andre Ledoux
Regional Vice President, Region 5 – 8
CUPE Local 873

Christian Anderson
Acting Regional Recording Secretary, Regions 5 - 8
CUPE Local 873

DW/AL/sd/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

COMMITTEE REPORTS

Union Trustee's Report

Dear Brothers and Sisters:

On behalf of Union Trustees Troy Clifford, Gerry Harris and myself, we are pleased to present our 2016/2017 report to Convention.

The role of the Union Trustee is to "oversee" the Union. This means we are to be watchful and ensure responsible care. Our role is twofold:

To report on information that may be deemed necessary to efficient and honest administration of the Local.

To act as an Auditing Committee on behalf of the members. We audit the books and accounts of the Local and inspect all assets.

The audit process we follow is long established and clearly laid out in the CUPE Trustees Audit Program, www.cupe.ca. This is an extensive step-by-step process that covers books and records, banking, by-laws, minutes, revenue, disbursements and recommendations. We report our findings to CUPE National, the PEB, and to you the membership.

This year the Union Trustees will report on the following key areas:

- Investigations and Union Trials.
- Inventory.
- Insurance.
- Ceremonial Unit.
- Website.
- Facebook/Social Media.
- Building.
- Financial Audit.

Investigations/Section 12's:

There is currently one Section 12 filed with the Labor Relations Board against the Union. The Union is waiting on a response from the LRB.

Because of some concerns raised about shift coverage the Trustees conducted an investigation. This investigation resulted in several scheduling practices being discontinued by the Local and the current documentation system being strengthened up. In addition, the President, through the PEB has also struck a working committee to review shift coverage, scheduling practices and lieu time/shifts in general. The Trustees have advised this committee and the Local that any changes or implemented processes will need to be



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

supported by the By-Laws and/or applicable policy, and must meet the principles of being transparent, track able and accountable.

Inventory

The Locals inventory continues to be tagged with an extensive bar code system, updated on a continual basis, the list is kept electronically and backed up with a copy held off site. This is an ongoing project and is continually being improved upon.

The Trustees noted that some items were not part of the master list and have recommended that they be part of the master list. Specifically, all Ceremonial Unit uniform kits and operational equipment, APBC ambulances and their content, and all major PR supplies such as the Medic Bears/banners/tents etc.

The inventory list proved to be very helpful with the recent break in of the Union office.

Insurance

We have verified that the buildings and their contents are appropriately insured. We can also verify that the ambulances owned by the Local are also properly insured and currently stored in a secure facility.

The insurance policies received a comprehensive review this past year resulting in a number of efficiencies and a more comprehensive package including applicable Errors and Omissions (E & O) and Directors Insurances.

Ceremonial Unit

The Trustees have reviewed the APBC Ceremonial Unit and recommend that the Local incorporate the Ceremonial Unit within its bylaw's. This will require development and implementation of bylaws to support practices and Operating Policies for the Ceremonial Unit. We have also identified some incorrect coding of expenses/shift coverage that need to be improved upon.

Website/Data

The platform that provides the APBC website was reviewed by the Trustees to appraise what steps are in place for the protection and backup of the server. The Trustees are satisfied that the systems in place are as secure as practical and the Local continually does assessments and improvements to ensure risks are minimized. Given the caveat, and recent system breeches of major companies, no system is 100% safe.

Facebook/Social Media

The Trustees recognize the Local has initiated another social media chat/comment platform. The Local's history is extensive on the matters of hosting our own sites, chat boards and social media. The Local has extensively deliberated on these subjects and issues many times and there are different opinions on the pros, cons and potential liability to the Local. It is our advice, regardless of whether it meets the legal test, that



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

anyone in an official position with the Local be aware that they have a much higher test than regular members when participating in these forums. We would also remind members of their responsibilities under the constitution, oaths, and responsibilities on respectful engagement and comments when participating on these sites.

Building

The security, and physical deterrents of the building have recently been reviewed by the Recording Secretary and security professionals. In addition to this review, the Trustees have made additional recommendations towards the goal of a more secure building and increasing safety for our staff.

Financial Audit

The Trustees do not formally express an opinion on how much or why money is spent. We ensure that any money spent is appropriately authorized by the PEC, the PEB, Convention, as outlined in the APBC by-laws/Policy and Procedures, and the CUPE Constitution.

We can report that all financial assets appear to be accounted for and monies the Local has spent have been authorized. (See attached appendix 1 financial report)

The Trustees have put forward some recommendations regarding the use of Union shifts, scheduling and documentation thereof to increase the transparency, tracking and accountability of this Locals biggest budget expense(s).

This Union has truly seen the end of an era with the retirement of Brother Manz from the Treasurers position. It is through his steady stewardship of this Locals finances that has seen us grow in so many different areas. Taking us from a fragile financial position in 1986 and growing us into a long string of repeated balanced budgets and strong financial reserves/assets, all while increasing the Union's office space and paying off the mortgage on two buildings. It takes a special talent to be able to keep all the balls in the air and deal with the constant pressures to spend in check. Thank you, Tom, for having looked after this Local as well as you have for thirty plus years.

As you can imagine these were some pretty big shoes to fill when Tom left. Brother Eby filled Tom's position by way of a PEB by-election. We would like to commend Brother Eby for stepping into this position and taking on this challenge. The learning curve is steep and he has done a diligent and good job.

We would encourage our Union officers to continue being watchful and mindful of their budgets, and bylaw requirements as we move forward and experience increased financial pressures.

Overall the Trustees believe that the financial administration of our Local continues to be handled well.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

I respectfully move adoption of our report.

Union Trustees:

Ernie Mothus, Chair

Gerry Harris, Trustee

Troy Clifford, Trustee

EM/sd/MoveUp

Unadopted: for review only



CONVENTION 2017

Appendix 1

Trustees' Financial Report to Convention 2017

We, the trustees of CUPE Local 873, have reviewed the books and records of our local for the period from July 1, 2016 to June 30, 2017.

Financial Summary

As at June 30, 2017, we had:

- (a) \$2,258,835 in our checking/savings account(s);
- (b) \$1,605,288 worth of assets.

As at June 30, 2017, the local owed \$343,670 to various entities and/or individuals.

During the period we reviewed, the local spent a total of \$5,020,433 and collected dues, assessments and income of \$4,808,662.

Administration of Finances/Recommendations

It is the opinion of the Trustees that the financial administration of our local continues to be handled well and the Trustees have put forward a number of recommendations as outlined in this report.

Respectfully submitted to the membership of the CUPE Local 873 on September 30, 2017 by,


_____, Trustee, Ernie Mothus, Chair

 For: _____, Trustee, Gerry Harris


_____, Trustee, Troy Clifford



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Public Education Committee Report

It's hard to believe that this will be my 6th report to Convention, time has certainly flown by.

When I look back to where the Public Education Department has come from, over the six years I've held the position, I'm amazed at what we've been able to accomplish.

We now have Regional PE Directors around the province that have helped fill in the gaps between myself, local community leaders and our great volunteers. What a great group of people we have, who's passion for community education is evident in everything they do. I personally want to thank them for their hours of dedication given towards Public Education.

We now have two union ambulances available to all members around the province. 873 is a fully stocked static display unit that has been used in parades, commercials, school visits, education events, career days, political events, provincial campaigns and much more. I'm pleased to say that the island now has one of these great units for their very own. A far cry from the moldy damp 873 I inherited six years ago.

Our mascot is so popular that we commissioned a 2nd one for the island last year. This year it has travelled all over Region 1 North and South entertaining both adults and children alike.

Our SWAG is flying out of the office, as always, it has reached every corner of this province. Reflector zip pulls, whistles, magnets, pens, pencils, cut-outs, stickers and tattoos; all of which are available to all members. If you are having an event in your area, please contact your Regional Public Education Dir. to see if they have a stock of SWAG and also to keep them in the loop of events in the area. The office is also very helpful at getting you what you need. A friendly reminder; we do not use the station mail system, so we will need a personal address and cell number to get supplies to you. Depending on the area we also use Greyhound.

The new Members only Facebook page has been a huge success, with some lively discussions coming from it. We encourage you to keep bringing on the hard questions, suggestions and constructed criticism.



I look forward to hopefully serving you again for another two years.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

We have much more to accomplish together.

A special note to our office staff, they tirelessly help me with more than I deserve. Countless hours have gone into mailing out SWAG and coordinating our Greyhound shipments. Thank you

Bronwyn; it has been a privilege serving alongside you these past 6 years. Although we haven't always seen eye to eye, your mentorship has been priceless. I want to personally thank you for your years of service, sacrificial hours lost away from your family and your great heart to hearts of encouragement when I needed it. On behalf of the membership, I wish you all the best on your new adventures.

I move adoption of my report.

Respectfully submitted,

Annemarie Byers
Provincial Public Education Director
CUPE Local 873
Public.ed@apbc.ca

AB/sd/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Benefit Trust - Supplemental Pension Report

Dear Brothers and Sisters,

This report covers the fiscal year of 2016 and year-to-date 2017 for the Benefit Trust which is the supplementary Union pension fund separate from the Public Service Pension Plan (PSPP), more information on PSPP can be found at: <https://pspp.pensionsbc.ca>

The day to day functioning of this Supplemental Pension Plan is managed by a third-party administrator, Coughlin & Associates (www.coughlin.ca), and our investments are handled by three institutional money managers: Leith Wheeler, Gryphon Investments and ACM Advisors. ACM was recently added and is a manager specializing in commercial mortgages, and have been hired given the current challenging bond market and given historically low interest rates. Mortgages offer a higher yield than bonds, and greater downside protection should interest rates continue to rise. The Trustees and advisors are currently reviewing other strategies to further enhance plan returns and provide for greater diversification in the overall portfolio. The plans investment strategy is guided by an investment policy statement which oversees the risk level of our investments through established maximums and minimums for our exposure to stocks, bonds and other alternative investments. Our role as Trustees is to outline the risks we are prepared to take, we then oversee and monitor the plan and investment manager's performances.

In 2016, the fund returned a net return of 11.0% (i.e. 11.75% minus our 0.75% total Plan expenses including investment management fees). 2016 was a year of surprises for investors, and cascading events followed. First, there was an abrupt sell-off in oil early in the year, leading to one of the worst stock markets starts. Next, interest rates in Europe and Japan went into negative territory to stimulate growth in these areas. Adding to the list of surprises was Brexit – where the UK elected to leave the European economic union. Then the biggest surprise of all – the election of Donald J. Trump. And finally, Canada, which was the worst performing market in 2015, rose to the top to outperform all other domestic markets in 2016. Fortunately, both Leith Wheeler and Gryphon performed very well in this environment, with very strong returns in particular from Canadian Equities. US equities were also quite strong and added to the plan's positive performance following the election of President Trump in November, given anticipation of his pro-growth agenda. Furthermore, the move to invest in mortgages enhanced returns given a challenging year from bonds.

So far in 2017, the year-to-date return to the end of July is net 2.2% after expenses. While the year started off strong, markets have been somewhat challenged in Canada given continued pressure on oil and commodities, and more recently in the US have started to drift lower given concerns with President Trump's inability to move his growth agenda forward.

The Pension Plan ended 2016 at \$63.1 million and have grown to \$66.0 million dollars at the end of August 2017.

Our standard reporting to the members includes the 5-year historical average to the most recent calendar year. In this regard, the return on the fund over the past five (5) years has averaged 9.2% net (after expenses), well in excess of the average rate of inflation (i.e. CPI) at 1.6%.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Terminating and retiring members have benefited through the use of the Plan's option of providing a Lifetime Income Fund (LIF) payment directly from the Plan, leaving their assets in the Plan, as returns have been strong and expenses low (compared to typical mutual funds). Coughlin provides this service as a low cost option to members at 1.5% for total administration, investment management and disbursements. In effect, these terminated or retired members continue to enjoy the benefits of being part of a larger group, however members are not locked in and may transfer the assets out of the Plan at any time if they decide it is not right for them.

We, as Trustees, strongly advise any member who is fifty years of age or older, to contact a financial institution or Coughlin and review their options for retirement. As Trustees, we cannot offer financial advice, but urge those of you who are close to or considering retirement to consider the future, as it will be here before you know it. Coughlin will send you retirement information with your annual pension statement the year you turn 50. The material provides options within this plan as well as other information to assist you and your family with your transition to retirement.

Representatives of Coughlin are pleased to answer any questions you may have about your retirement options and they can easily be contacted toll-free at 1-888-204-1234 or via www.coughlin.ca.

Respectfully submitted from the Board of Trustees, Ambulance Paramedics of BC, CUPE Local 873

We move adoption of our report.

Supplemental Benefit Trust:

Troy Clifford, Chair

Gerry Harris

Kevin Lambert

Tom Manz

Ernie Mothus

TC/sw/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Superannuation Report (PSPP)

Report Pending.

Unadopted: for review only



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Critical Incident Stress Management Report

CISM Peer Team

Every year the activations for our CISM peer team continue to grow; partially because there is more awareness and education, but also because our members have gone without for so long. Our program has been revamped and we have more support for our brothers and sisters than even before. In this calendar year, we have been activated over 650 times. Often the critical incidences we're activated for are only the tipping point for the cumulative stressors Paramedics and Dispatchers are faced with.

With the growing number of activations comes a need for more peer team members. We have another class of peers going through their initial training on November 6th-9th. This group of peers will raise us to a team of about 120 peers. In our newest recruitment we're adding Dispatch, EMR, PCP, ACP and Community Paramedics to our team.

CISM Program Coordination Team

Our local worked very hard earlier this year with BCEHS to move from a volunteer based coordination team to a team of coordinators hired by BCEHS. After the interview process, BCEHS selected two regular part time coordinators and 6 after-hours coordinators. These coordinators were trained in the beginning of May by the BCEHS CISM program manager and Dr. Georgia Nemetz.

Since the training in May, BCEHS brought on one more coordinator and replaced another due to a resignation.

The two regular part time coordinators currently work 7 days/week on a rotating schedule. The after-hours coordinators work every day from 1800-1000.

Like any new position, the new coordination team comes with its own problems and APBC continues to work on those with the Employer.

Lastly, our CISM team just added a new coordinator through the duty to accommodate process. This new coordinator will be a great addition to our team and I'm happy that we're able to support this happening.

Psychological Network

I'm pleased to say that we finally have a considerable place for our members to go for assistance when they're injured or unwell due to the challenges they face as a paramedic or dispatcher.

Our network of clinical counsellors and psychologists has grown to over 50 professionals throughout BC. These clinicians are trained in trauma and must have experience working with first responders.

To date, we have had almost 300 referrals in 2017. Often these referrals happen through our peers and sometimes they're direct from individuals who have requested support.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

BCEHS hasn't formally rolled out a campaign to advertise this program, but myself and Bob Parkinson continue to share it with as many 873 members as possible. Please help us in spreading the word!

Any 873 members can access this support by calling the CISM pager 1-855-969-4321 24 hours/day. You will be referred to a clinician as close to home as possible. BCEHS covers the cost and the process remains confidential.

Mental Health Training

Last year I stood in front of you to let you know that BCEHS was going to adopt the Road to Mental Readiness program and would hopefully roll it out in the early winter. That decision was changed and they decided not to move forward with the program, which came as a big disappointment to us. The Employer stated it was due to cost and a lack of research that they wouldn't be moving forward.

Since that time, they received funding from the government for the Opioid Crisis and they decided to use some of the money to create an in-house Opioid Resiliency course taught by Dr. Mark Davies. The course spends about 5 minutes talking about the Opioid Crisis and the rest of the eight-hour course is spent teaching paramedics about resiliency, burn out and how to manage their stress. Which leaves me wondering how this course is any more researched than the Road to Mental Readiness that was developed by the Canadian Forces. The cost of the course is also quite significant and the funding seems to be coming from an incorrect source.

Overall, I am happy that paramedics are receiving some form of mental health training, but I'm also disappointed that BCEHS doesn't seem to have a plan for this course and they also appear to be limiting it to paramedics working in metropolitan areas.

We continue to explore further mental health training that relates to paramedics and the work that they do. I believe we need education that is consistent across our organization that gives supervisors and front line workers the tools they need to stay healthy, manage their stress, deal with the occupational stress injuries that may happen and to develop communication skills with their loved ones. This training should happen at the beginning of your career and continue until retirement.

BCEHS CISM Steering Committee Meeting

Bob Parkinson and myself represent APBC on the BCEHS CISM Steering Committee. This group meets once per month and, up until now, has been the only venue to collectively come together and talk about the psychological health of our members.

Currently there are CISM team members, BCEHS paramedics, BCGEU, BCNU, BCEHS management and APBC representatives on the committee.

The committee's focus is the CISM program-current initiatives that are working and future goals of the program.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

BCEHS Mental Health Committee

Last year I reported to you a goal that we have been working on for several years now and that is for a Mental Health Committee to be formed. Well it's finally here and we have our first meeting on October 18th to set out the Terms of Reference.

This committee has been a long time coming and we hope that it will be a robust forum to work on current issues and develop plans to better support the health and wellness of our members.

There will be BCEHS senior leadership, front line staff and APBC representation on this committee.

I look forward to reporting to Convention 2018 about the work of this committee.

BC First Responders Mental Health Committee

<http://bcfirstrespondersmentalhealth.com/>

Bob Parkinson and myself have been a part of this committee for the past two years. During that time the committee has developed Best Practices, a Practitioner's Network, Roadmap for Leaders, Stay at Work/Return to Work plans and a website for those looking for help and those looking to help.

The work of this committee has also opened doors to better communication about the claims process with Work Safe BC.

We hope the positive work on this committee continues well into the future.

CSA Z1003.1 Paramedic Psychological Health and Safety in the Workplace Standard

I've been fortunate to represent APBC on a national committee that has been developing a paramedic specific Psychological Health and Safety Standard. This standard is nearing completion and its anticipated to be released in the spring of 2018.

PHSA has been introducing the general workplace CSA Psychological Health and Safety Standard into their workplaces and I'm hopeful that they will incorporate the paramedic specific standard into BCEHS. The Employer did fund Dr. Georgia Nemetz to be a part of the committee developing the paramedic specific standard, so this would lead me to believe that its their intent to adopt the standard.

Resiliency Education Research

Bob Parkinson and myself are in the early stages of collaboration with the Employer on a Work Safe BC funded research project. The research will include 5 advisory groups, work force surveys and data analysis to try and understand what training paramedics need to develop their resilience.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

We're still in the early stages of the project and have some unanswered questions that will determine our support for the project. Our next meeting is the week after convention and at that time the Employer is set to bring some answers to the table for some of the questions we laid out.

Please stay tuned for a member update as this project rolls forward!

Training Opportunities for APBC Members

This fall, I hope to roll out the first of many family involved mental health education seminars. The goal is to work with trauma informed clinicians, in communities that have experience working with paramedics and dispatchers, to put on 2-3 hour events solely focused on family. I'm a strong believer that the more we can educate our families on the challenges we face, the support we require and how they can recognize our needs, the healthier we will be.

If you're interested in hosting one of these events in your community, please connect with me!

Thank you

A huge thank you to the dedicated Paramedics and Dispatchers from across our province who make up our peer team. These team members provide volunteer support to their colleagues in some really difficult times. Thank you to everyone who constantly makes a difference - you do save lives!

I look forward to working with you in the next two years.

I move adoption of my report.

In solidarity,

Lindsay Kellosalmi
Chair, CISM Program
CUPE Local 873

LK/sd/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Health & Wellness Report

As Director of Health and Wellness my primary role is advocacy and representation to assist members and our profession with their diverse health and wellness needs by providing representation, consultation, information, guidance and referrals. It requires working closely with members, allied health professionals, Labour relations, Union officers, Legal, affiliates, WSBC, benefit/treatment providers and government agencies to name a few. Often, we deal with members in unfortunate situations who cannot advocate for themselves and this requires sensitivity, confidentiality and advocacy diligence.

Key Responsibilities include:

- Provide health promotion and health risk reduction information and resources
- Represent and assist members in preparing and processing claims or appeals involving WSCB, CPP, UIC, or any benefit plan carrier.
- Ensure that when a member dies, proper representation is made by the Union, also, all assistance and entitled benefits are given to the spouse, dependent(s) or estate.
- Assist any member who terminates or retires.
- Represent the membership on matters of Health and Wellness, also to ensure the membership has a high level of awareness in matters of Health and Wellness and Critical Incident Stress Management (CISM).
- Undertake studies or projects as directed by the Provincial Executive Committee or Board.
- Attend or assign a designate to attend Joint Provincial Occupational Safety and Health Committee meetings.

In my role, I work closely with Lindsay Kellosami as CISD chair and Corey Viala as Provincial Safety Director; as well as, with Regional VP's and the PEB/PEC. Through this report, I hope to provide a detailed overview of areas that I have been focusing on in my role and share valuable resources for members in the area of health and wellness.

WSBC

Mental Health Claims:

We are continually seeing changes being looked at within the application of section 5.1 of the Act. The creation of new legislation leaves everyone in a position of learning how Policy and Act will be applied. As we are seeing and maybe to be expected, the current Act requires further changes to the wording or defining processes that WSBC uses to adjudicate or process mental health claims. In 2016, I and other stakeholders submitted a request for change to WSBC Policy to the Policy, Regulation and Research Division (PRRD) of WSBC.

It was clear by several of the Stakeholder's submissions we were not the only ones wanting change in the area of mental health claims. Some of the requests were to change the way Permanent Disability Awards were being adjudicated, there were requests to have Presumptive legislation put in place, a less traumatizing process of application, that WSBC look at adjudicating mental health claims in a more similar way to physical



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

claims, increased time to apply for Section 5.1 claims beyond 12 months, changing policy definitions or criteria of having to prove an event was significant enough to cause an injury or outside of normal job activities.

Under the previous Government we were having difficulty meeting with and discussing these issues with PRRD. At that time, we, in the sense of a First Responder Group, were not seen as a true Stakeholder in the eyes of WSBC. This past month we did get a review meeting with them to discuss these issues and concerns that had been submitted. Their response was positive and supportive which led to an open dialogue of how these changes could be implemented. It also came forward that we were being looked at as an official Stakeholder group which would be consulted on a more regular basis. Big steps forward to find more positive, supportive solutions in the area of Section 5.1.

Claims:

Common barriers that keep coming up in the WSBC claims process causing claim denial still are around delayed reporting or medical assessment. This can occur in several ways, it can be a delay in reporting to the Employer, WSBC or a delay in being assessed by a medical practitioner. A common example is the sore back or shoulder due to a lift. While we may think it is no big deal at the time and the thought is “we will wait and see how it feels after my days off” or “I will wait and see if I need to see a Doctor”, that delay may be the difference between claim acceptance or denial.

Another common one is where a claim is accepted for a sprain/strain injury and the Doctor has you off for 4-6 weeks with some rehab. Near the end of that time you aren't feeling any better and in some cases the injury is worse. It is vital to not adopt the wait and see attitude. Get back into your Doctor and start investigating why. Your injury may actually be something like a tear, but delaying further investigation or diagnostics leaves room for WSBC to attribute the “new” injury to other causes. Early reporting to the Employer, WSBC and quick medical assessments are vital to claim acceptance.

Appeals:

We have had many successes in Mental Health appeals both at the Review Board and at WCAT since last convention. I believe this to be due to the fact that Mental Practitioners are starting to understand this new process around these compensable injuries and unfortunately, I am getting a lot of practice. We will continue to support our members in this area as the need arises, my hope is that by next convention report I will be able to talk to substantial new changes to the Worker's Compensation Act and Policy.

Vocational Rehabilitation Meetings:

We continue to schedule weekly DTA intake meetings combined with WSBC all parties' meetings, assisting our members to look at other work and training opportunities when necessary. We are hoping to bolster this process while improving the current DTA process.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

WSBC; BC First Responders Mental Health Committee

After two years of work, development, research and collaboration we are starting to see several of the committee's initiatives rolling out. In 2014, after the new WSBC legislation around mental health was implemented, a group of approximately 100 members from the various First Responder Organizations in BC met with WSBC to talk about difficulties coming from the new legislation. These included representatives from employer and employee groups, senior executives from WSBC and their various divisions, Deputy Ministers from the Ministry of Labour and mental health practitioners. The Government committed to respond to the concerns voiced by creating a steering committee representing the First Responder Groups, aimed at addressing Mental Health issues for the industry.

For the last 24 months, the group has met at least once a month, with extra meetings scheduled as needed, creating a framework of support. The goals of the committee and a Mission statement was agreed to:

Mission:

The mission of the Committee is to actively promote positive mental health and provide the leadership, best practices (resources, awareness, education, training, and supports) that first responders, their communities, and leaders need.

Goals of the Committee:

The Committee developed five goals.

1. Research, share and promote current best practices and relevant studies to support positive mental health among first responders.
2. Develop a network of culturally knowledgeable, competent, credentialed practitioners.
3. Develop and pilot an anti-stigma campaign incorporating champions from various first responder groups.
4. Develop a toolkit of best practices and resources for employers, supervisors and workers to support mental health in the workplace.
5. Identify an evaluation approach for programs and resources developed.

While viewed as multi-year goals, the committee recognizes the need to review these for relevancy on an ongoing basis. Stigma in the workplace was identified as one of the first focuses of committee work. This was done through a research project completed in January of his year.

Objectives of the market research were to understand attitudes to and perceptions of mental wellness, mental health issues, and associated stigma among first responders. As well as, understanding current help-seeking and help-providing behaviors, perceptions of barriers to seeking or offering help and what information and resources first responders use today compared to what they feel they need or want to better equip them to recognize and communicate about mental health issues.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

We wanted to explore the best ways to increase awareness of when and how to seek help, reduce stigma, increase supportive behaviors, and decrease barriers to seeking help. We also looked at testing campaign concepts and exploring best delivery mechanisms to engage on key concepts. Participants were taken from a cross section of the First Responder community. From our organization, we had dispatchers and paramedics participate in the in-depth interviews, online discussions and focus groups.

It was determined that our members wanted assistance in accessing support services. They wanted mental wellness check ins at various times a year, access to mental health professionals who had knowledge of what first responders went through, CISM support services and debriefs, mental health educational opportunities. Again, one of the key concerns and barriers around when help was requested was the stigma that existed in our work place. Stigma from our co-workers, leadership and the self-stigma that we place upon ourselves. Another key message that also emerged was that a poster campaign was not enough, nor a website by itself. Participants wanted the ability to talk with someone, personal contact was important.

bcfirstresponders.com was created and recently launched. The website became a hub for resource information that was meant to assist people looking for help or people wanting to help others such as family members and employers, leaders and organizations.

This committee and the work it is doing is unique from what I have seen across Canada. This is the first time I have seen collaboration and work being done on mental health in a collective, inter-agency voice, as opposed to groups working on the issues of individually. We have created and shared a resource base of mental health professionals who are organizationally competent within our industry. There has been a development of best practice procedures, organizational analysis to measure the needs of organizations, return to work and stay at work programs and peer support outlines are some of the supports. Self-evaluation tools, contacts for support within each of the organizations and the anti-stigma, media platform that is currently being rolled out **“Share it, don’t wear it”**.

We know this is not a perfected process or body of work, nor is it the end of the work of the committee. We have commitment from Government and WSBC to continue to grow and develop the work being done here. Ultimately, we are all aware that we can and need to better for our members.

PHS (Psychological Health and Safety) Steering Committee

I represent our organization on this committee which was struck to create a forum of collaboration and strategies to support the psychological well-being of health care workers in order to create engaged, healthy and well-led workplaces. It was also put into place to support the implementation of the CSA Z1003 standard on psychological health and safety in the workplace. Membership of the committee is from all of the Health Authorities and Health Sectors, Unions and Associations; as well as, the Health Employers Association of BC and the Ministry of Health.

What is the CSA Z1003 standard? “...Psychological Health and Safety in the Workplace is a voluntary standard intended to provide systematic guidelines for Canadian employers that will help enable them to develop and continuously improve psychologically safe and healthy work environments for their employees...” With the ratification of the most recent Nurses CA they were successful in getting the CSA



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Z1003 standard mandated into every workplace their members worked. This meant that all Health Authorities were then responsible to implement the CSA standard into their organization. We are lucky collateral recipients of their win. This standard creates a frame work and structure around workplace mental health programs.

The Ministry of Health struck a committee to assist with the implementation of the standard and we were invited to the table. The goal of the committee is to collaborate on a system that has a unified approach and measurement process that doesn't impede the ability of the smaller organizations to make changes or create processes that would better support their members. We see far too often that the square peg is being forced into the round hole. The committee saw a pause with summer and the changing of Governments, we are starting back up this month.

POSH

Over the last year POSH has been very busy with comprehensive initiatives coming from the safety end of our organization. WSBC has been very active in addressing substantial safety concerns and issues, many have resulted in written orders or sanctions. Training programs such as HRH, Avalanche Safety and violence prevention, MSI reduction strategies, Lone Worker policies; as well as, a myriad of SOP/SOG's being developed for activities that have gone without for far too many years. The CO monitors and power stretcher/power load roll out is an example of how safety issues are getting more of a priority response in injury prevention. We went from a 3-5year plan to a 3year plan no being expedited to 2.

Many of these topics have become standing items on the committee agenda. We have also taken a look at creating a better system of communication between DOSH and POSH committees, looking at addressing long standing items and committee structure. An example of this is addressing the variety of committee structure that exist for the 3 dispatch centres. Integration of mental health as a safety topic is also a new standing item.

As we look at program and policy implementation in the area of mental health we also need to address safety concerns. What it comes down to is that these are injuries in the workplace that need prevention strategies and programs of support similar to physical injuries. This includes being included in the Terms of Reference for POSH, training programs designed to help protect workers and investigation processes that allow for looking at possible workplace root causes while maintaining confidentiality and anonymity where applicable. By next convention I hope to be able to report on this new infrastructure.

CSA z1003 Standard/ Mental Health Steering Committee

The first goal of the standard is to create a psychologically safe workplace which allows no significant harm or injury to an employee's mental health in a negligent or reckless way. In which every reasonable effort is made to protect the mental health of employees.

A second goal could be said to be the creation of a psychologically healthy workplace where all reasonable efforts are put forth to promote employee mental health.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

With these goals in mind the standard helps provide a framework allowing organizations to continually develop and improve their psychologically healthy workplace. Some of the guiding principles are commitment by senior management, a shared responsibility and involvement with all stakeholders, policy and program development focusing on health, safety, awareness and promotion.

The Employer has agreed to form a Psychological Health and Safety Advisory Group, in consultation with us to help implement mental health strategies in our workforce, like this standard. As this is just beginning I hope to be able to report more at the next Board meeting. Again, this is a large forward step towards better health and wellness for all of our members.

Circadian Rhythm Training

For the past two plus years Corey and I have been looking into the area of fatigue and its effects on our members. As we have researched we have realised that the knowledge in this area has been well established for many years. What hasn't occurred is a translation of that knowledge and research to the workplace, particularly for paramedics or dispatchers. After seeing presentations on monitoring devices and companies offering their services for a large price, we connected with the research department from UBC. From this relationship, we started to participate in sleep research studies, which I have presented in earlier reports and some of you may have taken part in.

Since then we have looked at the more practical and beneficial side to this understanding of how sleep affects us and we have developed a training program for our membership with an expert in this area of academia. Shortly after convention this year we will hold our first training program for the Employer and Union leadership that are involved in developing any new shift pattern structures and the fatigue working group that has been created due to recent direction by WSBC.

This is exciting and potentially a whole new direction to help increase our safety, health and wellness. I have attached an outline of the program at the end of my report, there is a mountain of knowledge and information delivered in two days.

Accommodations

Accommodation is defined as a process and implementation of changes or modifications to a job and/or to the environment that in which the job is conducted which allows a disabled person to perform the job productively.

Disability is defined as the loss or reduction of functional ability and activity due to some sort of impairment. When a person's ability to do job related activities or tasks has been reduced.

A disability or accommodation can be a temporary condition with little or no major adjustments needed. This is often seen in RTW's where scheduled work time may start off with reduced hours progressing until the member has returned to full hours or in a modification of duties performed to allow for a work hardening progression such as lifting restrictions over several shifts increasing until full duties are achieved. A larger



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

disability may need a more significant solution as in the changing of job roles or even looking at other work within an organization when immediate searches have not found any meaningful work.

As we are working hard to break down barriers and hurdles making the Duty to Accommodate process (DTA) more supportive for our members many of you will or may have started to see more and more of these in your area. I believe that education and understanding is key to make this a more fair, transparent process as intended by case law, the Human Rights code of Canada.

At the last Board meeting we put on a detailed training program for the RVPs and Board members on the Duty to Accommodate Process. It included the legal obligation that the Employer has to participate and find meaningful work up to the point of undue Hardship, the Employer's requirement to involve the Union and the obligation that the employee and the Union have in this process.

There are two areas of accommodation that is legally required for us to participate in, medical and family status. Family status is an ever-emerging area of case law and not as developed as medical accommodations. I will not go into specific definitions or rules as there seems to be different interpretations in this area; however, family status is an area similar to the medical accommodation where union and employers must participate in.

The BC Human Rights Code define the role of Accommodation as:

"...The 'duty to accommodate' is a legal requirement arising out of human rights legislation and case law in Canada. Although "duty to accommodate" is not found in the BC Human Rights Code, a series of Supreme Court of Canada decisions confirm the duty exists and applies to all provincially regulated employers. Where a barrier exists, or a policy or practice has adverse consequences on an individual in a protected group, the law says that the employer should reasonably accommodate that individual's difference provided they can do so, without incurring undue hardship, or without sacrificing a bona fide or good faith requirement of the job..."

Canadian case law has long established that employers are obligated to accommodate employees with disabilities to the point of undue hardship which is defined as "...an action requiring significant difficulty or expense..." Employers are not required to accommodate if an undue hardship is imposed on the operation of the business and this would be determined by looking at several factors of the organization. One would be the cost of the accommodation compared to the size of the organization, resources available, nature of the work and the organization's structure.

The larger the organization the harder it would be to prove undue hardship. For example: arguably an employer like a Government agency most likely could never reach the point of undue hardship as indicated by law. The impact financially or to the daily operation of their business could not be impacted enough to meet the test. Conversely a small family business like a corner store with 1-2 employees might be greatly impacted by accommodating a single employee where the costs may be such that they could not afford to continue to operate. There are other regulations like employers are not required to create a new position and the position offered is not required to be perfect it must be reasonable and meaningful work.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

There are two areas of accommodation that is legally required for us to participate in, medical and family status. Family status is an ever-emerging area of case law and not as developed as medical accommodations. Specific definitions or rules I will not go into as there seems to be different interpretations in different areas; however, family status is an area similar to the medical accommodation that where union and employers must participate in.

Application/Process:

I am attaching the current DTA process chart to my report. The goal of the process is to meet the legal requirements under the medical Duty to accommodate. A tripartite process aimed at supporting our members and helping them get back workers to meaningful work. While we have seen several improvements in this area within BCEHS we still have a long way to go in order to ensure our members are taken care of in a timely manner.

Several files have recently been advanced to arbitration in order to have the employer follow through with this legal responsibility. The emotional and psychological toll this takes on people who are in some of these compromised situations is enormous. Every one of our members has an expertise, knowledge and skill set that can be used in a beneficial way increasing the quality of our organization and the work that we do.

When I discussed a more transparent process my goal over have last four years has been to create a clearly laid out process of application, job search, work position identification and an agreement written to support the position of offer. This includes long term, temporary and work modifications to meet the accommodation need. It also has in it checks, balances and consultation process with the appropriate PEC members before the accommodation moves to the completion stage of sign off. It is and has been a system the requires continual consultation, collaboration and development between the Union and the Employer.

The accommodation process can sometimes seem confusing and intimidating. Remember, accommodation is a legal right that infers a corresponding legal duty; all parties have a vested interest in achieving a resolution. Often, the best solutions are achieved when those involved cooperate with one another and respect each of their corresponding roles and responsibilities.

Survey/Research

Two documents have recently been published federally directly impacting our industry. One is the results of a First Responder Mental Health survey that was sent out to our membership last year. It was being conducted by the Canadian Institute for Public Safety Research and Treatment (CIPSRT) I have attached a news release summary, there is a link that you can use to access the results of the entire survey. While there are no big new gems of knowledge that I see, what this survey does is re-inforce work that has previously been done by PAC and other organizations. It also creates a more public platform to decision makers at various levels provincially and federally. They are starting to see the breadth and depth of the mental health problem in our industry. One result that did show up was that paramedics were suffering from mental health injuries at higher than that of other first responders. Following is that summary:



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

National survey results underscore mental health concerns for public safety personnel

Today results from a national study on the mental health of public safety personnel were released by a team of researchers with the **Canadian Institute for Public Safety Research and Treatment**, led by University of Regina psychology professor, Dr. Nick Carleton.

Carleton says the survey, entitled “**Mental Disorder Symptoms Among Public Safety Personnel in Canada**,” was designed to clarify the scope and impact of mental health symptoms reported by diverse Canadian public safety personnel, including correctional workers, call centre operators, dispatchers, firefighters, paramedics, and police.

“Substantial proportions of our survey participants self-reported symptoms consistent with one or more mental disorders, proportions that appear much higher than have been found in previous research with the general public.” Carleton says. “This includes a significant number of respondents who reported symptoms of anxiety, depression and post-traumatic stress disorder.”

Other results indicate women may be more likely than men to report clinically significant symptoms, those living in Ontario or Quebec may be less likely to report symptoms than those living in Western Canada, and municipal and provincial police and firefighters may be reporting fewer symptoms than other public safety personnel.

Funded in part by Public Safety Canada, the survey engaged nearly 9000 people and was completed by nearly 6,000 respondents from coast to coast.

“While the results of this research are troubling, the increased reporting among public safety officers is a sign of progress in reducing the stigma associated with post-traumatic stress injuries in public safety officers. This research will help inform our next steps in developing a coordinated action plan to address this issue,” says **Public Safety Minister Ralph Goodale**. “The Government of Canada is pleased to continue to support the research of the University of Regina and its research partners on this issue and I look forward to working with all levels of government and leaders in the public safety community to advance this important work.”

Carleton says the survey results clarify the research team’s understanding of mental health for public safety personnel.

“This is an important step in reducing stigma, raising awareness about how common symptoms are, and building a foundation for critical next steps and I hope this makes it easier for our public safety personnel to seek help when they need to,” says Carleton.

Public Safety Canada has now funded a second phase of research.

“This money,” says Carleton, “will allow us to perform a deeper dive, and find out even more about the prevalence of mental health issues of our first responders and other public safety personnel.”

Another next step for the research team, says Carleton, is a September 2017 release of an on-line anonymous tool specifically for public safety personnel to self-screen, offering an



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

indication of whether they might benefit from professional attention.

“This tool should help bypass stigma and facilitate accessing mental health supports,” says Carleton.

To read the full journal article visit:

<http://journals.sagepub.com/doi/full/10.1177/0706743717723825>

The second release was research that was conducted by Doctors Steven L. Fischer and Renee S. MacPhee, titled “Canadian Paramedic Health and Wellness Project”. The purpose of this research project was to accumulate critical information from the paramedic community relating to current sociodemographics, workforce profile and the health and wellness of the overall paramedic workforce. Summarily speaking the research highlighted threats to our health and over longevity to remain healthy in this profession. Fatigue and burnout, as well as the prevalence of work related injuries and body discomfort were also of central concern.

Five recommendations resulted from this study including a framework for future research aimed at building upon the current one. They are:

1. Coordinated national investment supporting research to understand and improve the health and wellness of frontline paramedics.
2. Development and implementation of a longitudinal study of Canadian paramedic health and wellness.
3. Development of a national paramedic service organization registry.
4. Development of a national paramedic registry.
5. Development of a national paramedic research registry.

Both of these documents have gained attention from the Federal Government and First Responder organizations across Canada.

Training

On top of the creation of Circadian Rhythm training I have been participating in Shop Steward training throughout the province and a recent training session for the RVP's and Board members on the Duty to Accommodate process. I will continue to participate and develop training that helps educate and support our membership in the area of Health and Wellness.

Government/ Events/ UBCM

Prior to this last election I had been working hard to develop relationships that would assist in improving the health and wellness of dispatchers and paramedics. This included meetings with the various Ministers, Deputy Ministers and other government officials. Particularly, with the Minister of Labour and Health. Prior to and during this last election we also met with members of the opposition, keeping them informed of our issues. This has paid dividends with the current change of Government. We are seeing a more responsive and supportive government, already knowing many of our needs and wanting to work with us out of the gate. I am hoping that if we have a bit of government stability going into the new year we will also see some drastic changes to areas of the Worker's Compensation Act and Policy.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Honour House

This program and the tangible benefits that our membership continues to receive is paying dividends. Since its inception Honour House is now well beyond the 5,000-night stay mark approaching 6,000. Monthly usage in the last months has been from 80-100% occupancy. This benefit is enjoyed by not only the men and women of uniform; it is there for their families too. I am proud to participate on the Board of Honour House representing our membership.

Many of you may have seen some of the events that have gone on throughout the Province. Recently I attended the Honour House Hockey Tournament, the event was a great time had by all involved. Organized by one our paramedics Matt Northup, the tournament doubled in size since last year and I hope to see this continue. If any of you have a chance add this to your calendar for next year! A great event for a great cause.

CIS

The CIS program has continued to grow and develop. We have over 100 peer to peer members no on the team with over 40 psychologists who are organizational competent and experienced to help our members. Lindsay has finally gotten some help with her role, I would like to say to program is perfect. However, we are still working on some serious gaps in prevention, education and capture. We need to see more of our CIS team members being used to educate people in the field. The network of psychologists needs to be shared more publically so all paramedics and dispatchers know they are available and how to access them. The sentinel events policy needs to be written into dispatch and supervisory procedures so people and events aren't missed. This needs to include the need for better training of dispatchers and supervisors so that the program is applied and activated with consistency across the province.

I move adoption of my report.

Respectfully submitted,

Robert Parkinson
Health and Wellness Director
CUPE Local 873
604-838-5778
robert.parkinson@apbc.ca

RP/km/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017



Medical Duty to Accommodate Request (Form #1)

Employee's Name:	Employee Number:	Phone Number:
Site:	Department:	Job Title:
Manager/Leader:	Union (if applicable):	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Casual
Currently Working: <input type="checkbox"/> Yes <input type="checkbox"/> No	Nature of Medical Absence: <input type="checkbox"/> Sick Leave <input type="checkbox"/> WSBC Claim <input type="checkbox"/> LTD Claim	First Shift Missed (if applicable):

As Unions are a party to the accommodation process, Employees who are members of a Bargaining Association may wish to consult with their Union when completing this form.

I, _____, formally request a Medical Duty to Accommodate.
(Employee – Print Name)

I have an illness or injury that has resulted in a prolonged or permanent impairment and disability (see definitions below) that interferes with my ability to perform all or some of the required functions of my job.

By submitting this form I am advising my Employer of my need for an accommodation and understand that PHSA will confirm and secure additional relevant information in order to assess my accommodation requirements. This may include a medical assessment that identifies abilities or restrictions related to the request. I agree to participate and cooperate in efforts to secure an appropriate accommodation.

Please describe how your disability or impairment affects your ability to perform your current workplace duties:

Explain the modification or changes you require to assist you to remain at or return to work:

Province-wide Solutions. Better health



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Definitions:

Impairment - The loss of use of, or dysfunction of any part of the body, body system or functions. It can be psychological, physiological, structural or functional. The condition must interfere with normal day to day activities. Permanent impairment must be assessed after normal healing time or after maximum medical improvement has occurred.

Disability – A physical or mental impairment that limits one or more daily activities (personal, social or occupational) or that prevents one from meeting statutory or regulatory job requirements.

I agree to the following responsibilities as the "Employee":

- 1) To provide information required to facilitate accommodation efforts, including relevant medical information which clearly identifies limitations or restrictions;
- 2) To show fitness to return to work;
- 3) To proactively participate in the search for, and assist in, the formulation of a reasonable accommodation;
- 4) To accept an accommodation that provides a reasonable solution.

I understand that my Union, Manager/Leader and Human Resource Consultant will be notified of the request for a **Duty to Accommodate**.

_____ Employee	_____ Signature	_____ Date
_____ Disability Management Advisor	_____ Signature	_____ Date Received

Definition Reference:

Zabrodski, R., Disability vs. Impairment: What's the difference? Canadian Journal of CME, April 1999.

Personal information requested on this form is collected under the authority of Section 26 (c) of the Freedom of Information and Protection of Privacy Act and is necessary for the operations of the PHSA Authority. The information collected will be used for the purpose of accommodating medical disabilities and return to work planning. Due to the sensitivity of medical information, confidentiality of employee health information is fundamental and will only be accessible to those with a program responsibility requiring access to the information.



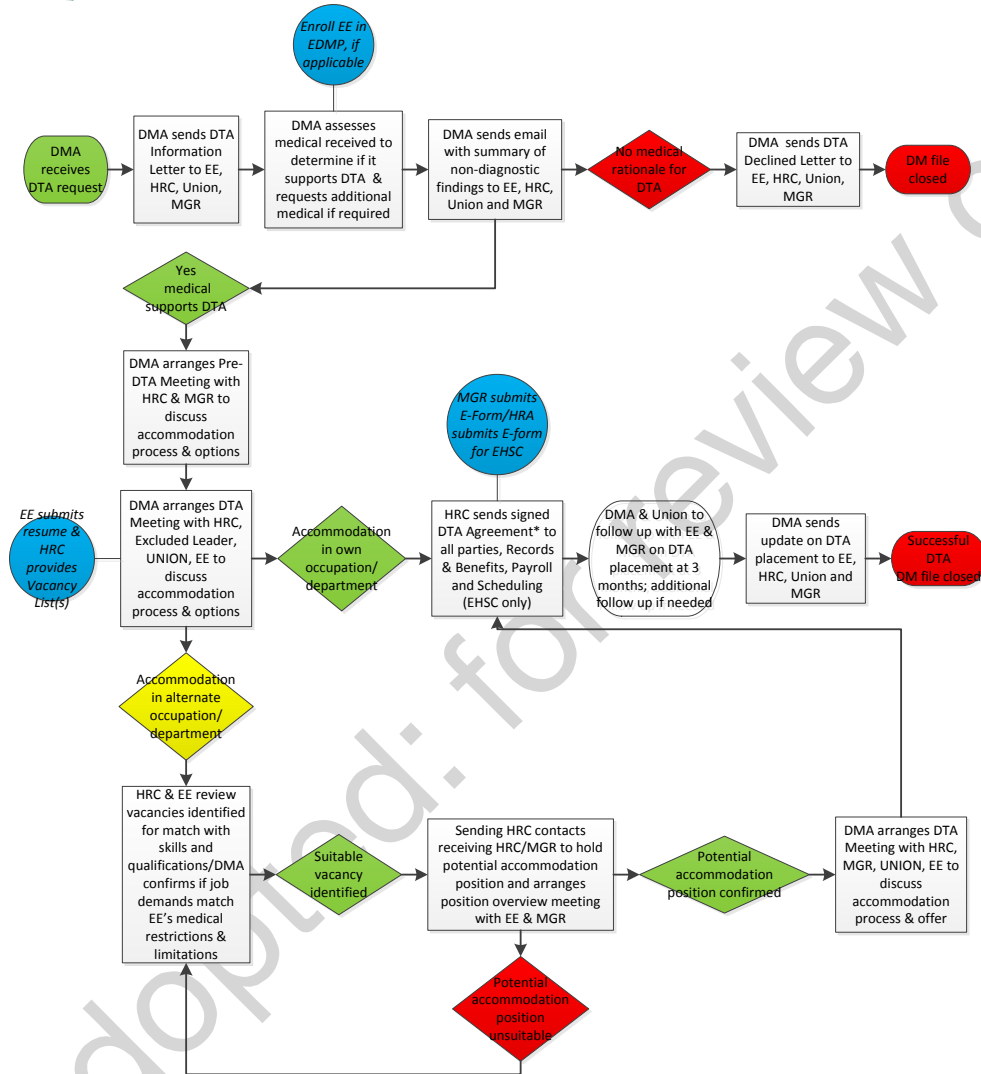
AMBULANCE PARAMEDICS OF BC EMERGENCY DISPATCHERS OF BC CUPE LOCAL 873



CONVENTION 2017



Medical Duty to Accommodate (DTA) Flow Chart
– April 2016



*DMA initiates DTA Agreement draft by completing medical restrictions and limitations and sends to HRC for completion



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Provincial Safety Program Report

I would like to welcome everyone to this Convention, especially to those who were successful in your recent regional elections as well as new delegates.

Vehicle Design Committee

BCEHS Fleet has now selected a successful proponent to manufacture our new ambulances. Crestline Coach Ltd was the successful bidder and I am working with them in the new design.

We will probably see a similar type of product being produced, but with some changes to help in ride and safety.

There are some new chassis styles available in the market, but we are evaluating those ambulances to see how they respond to the day to day wear and tear within the regions of Canada.

Crestline are completing their prototype ambulance right now and we are expected to be visiting their production plant in the first week of November, and the finalized product starting to arrive in BC January 2018.

I know that there have been some conversations around BCEHS developing a strategy for looking at hybrid or electric ambulances. Some of the challenges around this may be where these units could be deployed, availability, initial cost and future repair cost.

Crestline has just released (September 2017) Canadas first Hybrid Ambulance (XL3 Hybrid System), that is offering an increased fuel economy by 25% & lowering CO₂ emissions by 20%.

A one-year (final year of existing contract) extension was given to the previous manufacturer.

Committee members -Rob Howland, Harpreet Bains, Ken Duke and myself.

Violence Training

As some of you have read in my previous reports, I have been striving for some violence training. Over the years, paramedic training regarding violence has been poorly lacking from BCEHS.

WSBC & the Ministry of Health has highlighted violence in the workplace as a priority for all health care workers. The reported statistics from the Provincial Government has shown that health care workers are at a high percentage. But where it really hits home is when the reported violent acts against our BC Paramedics is in the range of 5 times higher than any health care profession in BC.

With that being said, we have finally been receiving some base violence training that started in July (this training is to be completed by all paramedics in the province by the end of December 2017). This will encompass an 8-module online course, followed by an 8 hour face-to-face training.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

I had a chance to see what this training looked like and although it may not be perfect, at least it is a start. The instructors will facilitate this training by reaching out to the paramedics in each class to discuss the effects of both verbal & physical acts of violence.

I am hoping that this type of training will teach the paramedics how to deescalate a violent situation before an event happens, but also how to react when we are faced with these traumatic violent events, and how to report them (a new reporting tool called WebIT is discussed below).

The training within the Violence Course has included information about a province wide use of the Pinel Restraint System (this too is discussed below).

New Restraining Procedure

As mentioned previously with the violence training, we will also be seeing some training with a new device for restraining a psychiatric patient. This "Pinel" type of restraint system was to be in conjunction with spit hoods, unfortunately, BCEHS Medical Program did not complete a restraint policy and procedure for BCEHS to accept the use of spit hoods.

This training was to start in July 2017 as it corresponded with the new violence training. One of the problems that I have heard about the Pinel training was the duration of time given in different courses for the Pinel training. I have been told that 1 hour of training was completed for some courses, and only 5 minutes at other courses. This is unacceptable. My concerns were brought to BCEHS/PHSA about this lack of "new" equipment training time. BCEHS Learning are now looking at developing a separate Pinel training package.

WebIT

WebIT is our new reporting tool.

This reporting tool will help in not only keeping track for all violent acts, but also help with the major back log that happened from the PNITT reporting system. This reporting system will be for reporting all incidences, including near misses.

Earlier this year I attended a recent DOSH committee, the Employer stated that they had over 1,200 safety investigations (from one region only) that were backlogged. It has been very clear to us that the PNITT reporting system did not work and investigations were not completed.

The WebIT system will allow everyone from a manager, to the reporting paramedic, to see where the investigation is. This "dashboard" type system will let the individuals know who to contact, and if any further action is required by the individual or safety committee member. It will also track what investigations need more information and when the investigation is completed. We are hoping that this system will create some closure for paramedics, as well as assist paramedics & dispatchers with a simple and reliable reporting system.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

If the reported event is of a serious matter (a list of serious incidents has been compiled from WSBC Regs), these reports will go directly to BCEHS Safety Program and we (the Union) will be notified right away. These types of notifications have been missing for the past few years and it has been very frustrating to say the least.

Expect to see the WebIT training very soon.

Product Procurement Committee (PPC)

This committee meets on a quarterly basis. This committee is made up of representatives from BCEHS Management, Victoria Central Reporting Station (CRS), regionally selected (from management) Paramedics, Fleet, BCEHS/PHSA Ergonomic Group, BCEHS Medical Programs and BCEHS/PHSA Infectious Control.

The Stryker stretcher will be deployed to your region sooner than later. BCEHS originally had a 5-year plan to roll these stretchers out. Now, they want to accelerate this plan to a 2-year plan.

BCEHS has stated that 189 Power-lift stretchers and 26 Power-load stretchers were purchased before this last "fiscal year". Majority of the Power-lift stretchers will be rolled out into Region 2 for the first stage. The problem that they were having is the low number of paramedics who took the required training. I was told that at the beginning of June, they only had approximately 50% of the staff in Region 2 trained, even though there have been 3 training sessions a day – 7 days a week. I am not sure what the Employer has planned to get the remaining employees trained. This training will also include usage of the Mangar Elk lifting device.



I was a part of the evaluation team for the new stretchers that was held last November (2 weeks).

The Power-load stretchers have already been distributed to parts of the North Island, Transfer Fleet & Kelowna area. BCEHS is heading towards the Power Load Systems for majority of the province. An additional 118 Power Load Systems will be installed into Vancouver/Region 2 by next year.

Since the deployment of the new power stretchers, we have seen over 25 (+20 near miss) incident reports generated from the use of the new stretchers. An evaluation by the Ergonomic Team is being compiled at 30/60/90-day periods.



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

There has been some confusion about who can handle these stretchers. Some Fire Departments were given some training. This training was done on an ad-hoc basis. FD will now be restricted to using the stretchers ONLY when they are empty. Stryker will be tasked with completing the training for the FD.

This is a major change to the way we will do our day-to-day work, but I believe that this is a step in the right direction to help us minimize some of our Musculoskeletal Injuries(MSI).

Uniforms remain as top priorities for the committee. Other items being discussed at PPC; impervious stretcher straps & standardization of ambulance equipment.

I am still waiting to see if a “points” system will be developed for our uniform issue. I understand that no official discussions have happened yet. Sweaters, rain pants & winter boots may be added to our options list of regionally accepted, issued uniform items.

If you would like to make a submission about a piece of equipment or other items for the PPC to look at, you can contact myself, or your Regional Representative from the PPC (this can be found on the BCEHS Intranet site) for that submission form.

Securing Devices Sub-committee

Safety Operating Procedures, or Safety Operating Guidelines, have been developed and are posted on the BCEHS Intranet site. Please make sure that our members adhere to these SOP. In other words, do not allow other Emergency Services or Health Care workers dictate what happens in the back of our ambulances. Our goal is to safely transport everyone who rides in the back of the ambulance, this includes safely securing all additional equipment or personal affects in the ambulance and increasing the safety of the paramedics. BCEHS is also trying to work with different Health Authorities to get them to purchase their own Pac Racks when they are requesting a transfer of a patient with their equipment.

Station Elections

In January/February of this year, all stations held another round of elections for Station Safety Representatives. I would like to thank each member who got involved with filling these positions. If the positions are not filled, we needed to fill via an appointment by Provincial Safety Director as per bylaw 15.b7(i). In these circumstances, I needed to rely on RVP or Regional Safety Representational input.

I have structured a new bylaw that will address the issue of an absent station safety representative before the next round of elections. I will be submitting this new bylaw at our Annual Convention. We currently do not have any language within our bylaws that assist stations who need to hold a by-election midterm.

WSBC & BCEHS

In February 2017, I was invited to attend a meeting with BCEHS & WSBC. This meeting stemmed from concerns from WSBC with our history of major vehicle accidents and fatigue. The Employer was told that



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

their fatigue policy was poorly lacking and needed to put more emphasis and responsibility on the Employer and not the employee.

Because of this, I have been a part of a new BCEHS Fatigue Working Group. This committee is tasked with not only developing a new fatigue policy, but will also be making recommendations to assist paramedics in the field who deal with fatigue, in either acute or long-term basis. I had invited Bob Parkinson to one of our meetings as he had done some preliminary work with a physician from UBC about fatigue. This information about a training course that was developed by Dr. Landry was accepted by BCEHS Senior Leadership and we are expecting to see this 2-day face to face course the first week of November. We have also been approached by a research specialist to complete an evaluation of the membership pertaining to fatigue. This research has been endorsed by WSBC. Bob and I are currently trying to get BCEHS to endorse this research.

We need all members to report any fatigue issues. These types of stats can only be helpful in keeping the safety of our membership at the forefront.

BCEHS and Violence Prevention Advisory Committee (VPAC)

As mentioned before, we finally will be receiving some education and training to assist us when we are faced with violence in the workplace. I have also mentioned that a Pinel style of restraints will be deployed. There are concerns from other agencies from VPAC (like Children's Psychiatric) with when and how these two tools are administered. I have asked that BCEHS Violence Prevention clarify with these other agencies when the new policy & procedure are finalized.

We, over time, have accepted violent acts as part of our daily routine. Therefore, we do not report it. We know that our reporting system now, is not "paramedic" user friendly, but we are hopeful that this will change with the new Web IT reporting system.

A Violence Risk Assessment (VRA) was recently completed within BCEHS. Again, it is these types of surveys that help us show areas of our work where we are exposed to violence in the workplace.

VPAC is a committee of health care worker representatives & some management representatives from PHSA (i.e. BC Children's & Woman's Hospital, BC Cancer Agency, Violence Prevention Advisor & BCNU). We have been meeting (approximately) every 2 months, either teleconference or in person. This committee looks at different violence reports within PHSA/BCEHS.

What has been frustrating for me is that for close to 2 years, no BCEHS Management attended these meetings (even though it was BCEHS who had invited me to these meetings). During a recent reshuffle of BCEHS Management a new manager has been tasked with sitting on this committee, but they still attend sporadically.

We do not need to accept unacceptable behaviour as if it is an inevitable part of our job! Report it!



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

Provincial Joint Occupation Health & Safety Committees (JOHSC)

Bob and I were recently told by BCEHS that some provincial JOHSC committees have been formed. Unfortunately, this was done last year & we were not notified. These committees are responsible for education and training (provincially within PHSA & the Health Authorities) where safety is of a concern (i.e. violence). What we found out is that CUPE (meaning us) was to be invited, but they ended up inviting a CUPE National Staff Rep from another sector. This made no sense to us. So now, Bob and I have attended these committees. I was included in 2 committees that looked after the education and development.

Lone Worker Policy

I have been working with BCEHS on developing a Working Alone Policy (WAP) for paramedics who are working alone. As some of you may remember, the BCEHS made a policy for superintendents & Dispatch Centres to follow, but no policy for paramedics to follow. Within the WAP, I am hopeful that some mandatory training will be available and completed by paramedics who wish to be a lone responding unit.

Since a lot of paramedics are working alone in rural and remote areas of the province and where there could be delay for additional emergency agencies to assist our lone responding paramedics, this WAP would give the paramedics and dispatchers some clear guidelines.

Here are several other examples where paramedics would be responding alone:

1. Community Paramedicine (CP)
2. Bariatric Ambulance
3. YVR Airport Bike squad
4. Primary Responding Unit (PRU)
5. Special Operations ie: large community events like Celebration of Lights (Vancouver)
6. Integrated Tactical Support Unit (ITSU)

Once this policy is accepted by BCEHS Leadership, a training program will need to be established and developed by BCEHS Learning.

POSH

Due to the workload, we have continued to meet almost monthly. BCEHS has been keeping Bob and I informed on the status of their non-compliance issue with WSBC with bi-weekly status reports.

Along with our regular agenda items, we received updates from BCEHS about the Wild Fires in BC. The presentation included the following items:

- Research into the long-term effects of smoke
- Briefing and debriefing of all employees
- Check in and check out procedures



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

- Cleaning of ambulances working in the Fire Zones
- Deep clean of stations within the Evacuation Zones
- Indoor air quality at Kamloops Dispatch Operations Center
- Establish an Air Quality Group with daily updates
- Contact information to all employees effected within the Evacuation Zone for CISM

CISM team members were deployed into the Fire Zone as an employee and not as a volunteer. This covered them under WSBC.

Dave Deines and I were also invited and attended a weekly teleconference call with the Ministry of Health that took place during the State of Emergency in British Columbia. This teleconference was to discuss circumstances and evacuation plans for Health Care facilities and BCEHS who were located within the Fire Evacuation Zones.

As you are aware, CO₂ detectors were deployed throughout the province. Training for these detectors was also rolled out throughout the province. These detectors are “single event” data detectors. Meaning that once you have a specific signal activated, the information must be downloaded before the detector is put back in service. These are only a single gas detection system. These detectors were put in place because of a couple reports of CO₂ exposures when paramedics were responding to an event and they were exposed to high levels of CO₂.

Bob and I have also been trying to attend Region DOSH committee meetings to help us understand some of the ongoing issues at certain DOSH committees and to heighten our communications between DOSH & POSH.

I try to attend both AirOSH & ECOMM Joint Occupation Health & Safety Committees, when I can.

I have also helped create a new data list of all Station Safety Reps throughout the province. Once this list is updated with any changes, it is sent to the Employer.

Public Safety Broadband Network (PSBN)

Recently I attended the PACE 2017 Conference. At this conference I was able to sit in on a presentation concerning the PSBN. What is the PSBN?

The Canadian Government is engaging diverse stakeholders and producing evidence based analysis on implementation models for a potential PSBN, which is a secure, high-speed wireless data communication network that can be used for Emergency Responders and Public Safety Personnel.

This type of network became available when TV was switched from analog to digital services. It is also known as the 700 MHz system.

I see this network being able to assist our members throughout the province of BC and beyond with some of our communication short comings. This type of network is implemented in 14 States and other countries



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

around the world. It would not only improve our communications, but it could create a safer workplace for things like our AVL in the ambulances, or possibly the expansion of the Code 33 procedure that is only available in certain areas of the province. It would also allow BCEHS crews a secured communications system when they are responding or transporting out of province.

This Canadian Federal Government Committee will be holding meetings across Canada over the next few months. They are planning their first meeting, which will be held in Vancouver Tuesday December 12th, 2017 (location to be determined).

I move adoption of my report.

Respectfully Submitted,

Corey Viala

Provincial Safety Director
CUPE Local 873

CV/sd/MoveUp



**AMBULANCE PARAMEDICS OF BC
EMERGENCY DISPATCHERS OF BC
CUPE LOCAL 873**



CONVENTION 2017

RESOLUTIONS

Please see Resolutions Package:

Unadopted: for review only