

Late Resolutions

LATE NEGOTIATIONS 2018-01

WHEREAS:

There is no clear language around accommodated work for maternity/paternity conditions in the Collective Agreement.

THEREFORE, BE IT RESOLVED:

The negotiations committee attempt to negotiate Collective Agreement language that specifically addresses maternity and paternity accommodations, that gives the employer no more than ten business days to locate suitable modified work for a member when a medically supported request for modified work has been made.

Submitted by: Robert Parkinson

Seconded by: Lindsay Kellosalmi

CARRIED

DEFEATED

LATE NEGOTIATIONS 2018-02

WHEREAS:

As the demand for accommodation and committee work expands, and as the need for representatives and committee members to be more proficient and knowledgeable, as the number of accommodations and committees increases that require union involvement.

THEREFORE, BE IT RESOLVED:

The negotiations committee Collective Agreement language with better compensation language that requires the employer to pay for time to attend committees and to pay for time required to work on or prepare for these committees and;

FURTHER BE IT RESOLVED:

The negotiations committee attempt to negotiate Collective Agreement language for improved compensation language that requires the employer to pay for time to attend any accommodation meetings.

Submitted by: Robert Parkinson

Seconded by: Lindsay Kellosalmi

CARRIED

DEFEATED

LATE NEGOTIATIONS 2018-03

WHEREAS:

As our current Collective Agreement was negotiated with a single entity employer and as we now have an employer that is managed by a Health Authority which is a multiagency employer, and as all committee language and development was created to have predetermined composition with Union appointed participants.

THEREFORE, BE IT RESOLVED:

The negotiations committee attempt to negotiate Collective Agreement language on “committee composition language” that mandates the Collective Agreement establish participant criteria. If subsequent committees are struck after the signing of the next Collective Agreement that the Union be in control of appointing any members of committees within or outside of BCEHS, that have input to developing BCEHS policy, practices, work or that have oversight of activities inside BCEHS and/or involve CUPE 873 members.

Submitted by: Robert Parkinson

Seconded by: Lindsay Kellosalmi

CARRIED

DEFEATED

LATE NEGOTIATIONS 2018-04

WHEREAS:

Since there have been no substantial changes to the mental health components of the Collective Agreement for over 16 years, and since there has been a greater understanding and acceptance of the mental health impacts and needs of our workforce which include substance use disorders (SUD).

AND WHEREAS:

There is no timely, consistent support process for people who require treatment or support for substance use disorders,

THEREFORE, BE IT RESOLVED:

The negotiations committee attempt to negotiate Collective Agreement language that requires the employer have a robust SUD program policy that includes: financial support, expedited access to treatment (when warranted) of no less than 2 weeks, with access to appropriate and comprehensive treatment programs, including a clearly laid out process that gets our members into appropriate treatment within 4 weeks of identifying their request or need being identified.

Submitted by: Robert Parkinson

Seconded by: Lindsay Kellosalmi

CARRIED

DEFEATED

LATE NEGOTIATIONS 2018-05

WHEREAS:

Since there have been no substantial changes to the mental health components of the Collective Agreement for over 16 years, and since there has been a greater understanding and acceptance of the mental health impacts and needs of our workforce, that since there has been a current, updated and expanded CISM program than seen previously;

THEREFORE, BE IT RESOLVED:

The negotiations committee attempt to negotiate Collective Agreement language that requires the employer to have a robust CISM program, paid for by the employer, established in policy and complies with the Collective Agreement.

BE IT FURTHER RESOLVED:

That an oversight committee is established and has Union appointed representative, funded by the employer for their time and work on that committee, established by the Collective Agreement. Similar to the current rehabilitation committee language of our current Collective Agreement.

Submitted by: Robert Parkinson
Seconded by: Lindsay Kellosalmi

CARRIED

DEFEATED

LATE NEGOTIATIONS 2018-06

WHEREAS:

Since there have been substantial changes to the understanding of mental health in the workplace and that since it is well established that for resiliency training to be effective it is vital that the workforce have input into the components or type of mental health training;

THEREFORE, BE IT RESOLVED:

The negotiations committee attempt to negotiate Collective Agreement language that requires the employer to seek Union input—by the PEC and/or the PEB or their delegates—and co-development on the creation or development of any mental health training.

Submitted by: Robert Parkinson
Seconded by: Lindsay Kellosalmi

CARRIED

DEFEATED

LATE NEGOTIATIONS 2018-07

WHEREAS:

As the demand for committee work expands, as does the need for committee members to be more proficient and knowledgeable.

THEREFORE, BE IT RESOLVED:

The negotiations committee attempt to negotiate Collective Agreement language that provides a minimum of 16 hours of employer paid annual training for: the CISM steering committee; the rehabilitation committee; or any committee established in the next Collective Agreement, or subsequently to the signing the next Collective Agreement.

Submitted by: Robert Parkinson

Seconded by: Lindsay Kellosalmi

CARRIED

DEFEATED

LATE NEGOTIATIONS 2018-08

WHEREAS:

There have been no substantial changes to the mental health components of the Collective Agreement for over 16 years. Since then there has been a greater understanding and acceptance of the mental health impacts and needs of our workforce;

AND WHEREAS:

BCEHS has been inconsistent and unreliable in the accommodation support for all employees.

THEREFORE, BE IT RESOLVED:

The negotiations committee attempt to negotiate accommodation Collective Agreement language that is up to date with current jurisprudence and is consistent with what was agreed to under the recent grievance resolve. This places a timeline of two weeks from the date of DTA application to hold an adjudication for the medical by the employer and set up an intake meeting. Suitable temporary work or permanent work will be identified within two weeks of the intake meeting. After these four weeks, if no suitable work is found, the employer will pay the employee their full rate of pay until suitable work is located.

BE IT FURTHER RESOLVED:

That we attempt to negotiate an expedited adjudication process that can be precedent setting for medical accommodations to support the timelines and process in the event it is not followed or is violated.

Submitted by: Robert Parkinson

Seconded by: Lindsay Kellosalmi

CARRIED

DEFEATED

LATE NEGOTIATIONS 2018-09

WHEREAS:

There have been no substantial changes to the mental health components of the Collective Agreement for over 16 years. Since then, there has been a greater understanding and acceptance of the mental health impacts and needs of our workforce;

THEREFORE, BE IT RESOLVED:

The negotiations committee attempt to negotiate increased and improved mental health benefits, language, and supports in the Collective Agreement wherever possible. Language that takes into consideration and incorporates current best practices and understanding of mental health.

Submitted by: Robert Parkinson
Seconded by: Lindsay Kellosalmi

CARRIED

DEFEATED