

# report

# Collective Bargaining Advisory Committee Videoconference

April 20, 2020

The National Union of Public and General Employees (NUPGE) is a family of 11 Component and 3 affiliate unions. Taken together, we are one of the largest unions in Canada. Most of our 390,000 members work to deliver public services of every kind to the citizens of their home provinces. We also have a large and growing number of members who work for private businesses.

Larry Brown, President

Bert Blundon, Secretary-Treasurer

# Collective Bargaining Advisory Committee Videoconference April 20, 2020 1:00 pm EDT

## **PARTICIPANTS**

BCGEU/NUPGE Doug Dykens

**HSABC/NUPGE** Jeanne Meyers

Sheila Vataiki

MGEU/NUPGE Michelle Gawronsky

Sheila Gordon

**OPSEU/NUPGE** Roxanne Barnes

Len Elliott Will Larose Neil Martin Daryl O'Grady

**NBU/NUPGE** Susie Proulx-Daigle

Leigh Sprague

NAPE/NUPGE Vina Gould

Elaine Price

**NUPGE** Bert Blundon, Secretary-Treasurer

Len Bush, Managing Director

Andrew McNeill, National Representative Diane Fowles, Administrative Representative

### 1. Welcome and Introductions

Participants introduced themselves.

Bert Blundon, Secretary-Treasurer of NUPGE, began by extending condolences to people in Nova Scotia.

He explained that since COVID-19 struck, NUPGE has been bringing together people from different disciplines. It was important to have the CBAC meet to share information and ideas.

Some of the people on the call have been involved in negotiating good-neighbour agreements to respond to the crisis. There are others who are having to deal with employers trying to take advantage of the pandemic.

Examples of the latter are the governments of Alberta and Manitoba, whose response has been very different from the rest of the country. Alberta is laying off 20,000 workers in education. In Manitoba, the premier is proposing to layoff all "nonessential" employees if concessions aren't made.

It is also difficult for Components to respond to attacks on labour without being able to have the same level of communication with members as they do in normal circumstances. Some governments have been good, but with others, there has been enormous pressure to waive parts of agreements. Of particular concern are agreements that have expired because bargaining without personal contact is much harder.

Members who are working in long-term care homes and the health care sector are on the front lines. Components now have to look at collective agreements and negotiate provisions on personal protective equipment (PPE). There are struggles in the workplace over who gets PPE, with different unions and different classifications pitted against each other.

As we come out of crisis, things need to change.

It is time to bring many services that have been privatized back into the public sector. There have been horror stories with what happened with contracted-out services, particularly in long-term care. Things can't go back to the way they were.

# 2. Updates from Components

#### **BCGEU**

Things have gone fairly well in British Columbia, with a couple of hiccups.

HSABC will be able to provide more information: prior to the crisis, nurses negotiated a working-short provision in collective agreements. Under this provision, if staffing levels fell below pre-set levels, working-short provisions are supposed to kick in. What the staffing levels were to be had not been resolved prior to the crisis, so the British Columbia government invoked working short in all areas.

The problem is that it wasn't applied to other workers in the same facilities.

The BCGEU is continuing to advocate for PPE for areas where it is warranted.

British Columbia is moving to single-site working, where workers are allowed to work in only one facility. This will be a challenge, as many unions have members working in different sites to build up hours and income. Among the challenges will be scheduling. For people who used to work in multiple facilities and are now working in only one, the British Columbia government has moved them to the higher of the wage grids of the facilities in which they worked.

The BCGEU is avoiding the term *danger* or *hazard pay*, because that puts a price on safety. However, the BCGEU has been calling for increases in pay where workers are not able to observe social distancing 100% of the time in their work.

The BCGEU will be pushing for services to be "socially governed," as opposed to contracted out.

For workers in the private sector, some work places are shut down, while others are still open. Some employers have bumped up increasepay.

One thing that helped in British Columbia was that because the spring break for schools was relatively late, there weren't a lot of people traveling as the crisis hit.

#### **HSABC**

As mentioned, nurses were able to benefit from the working-short provision as of April 1. It was an extraordinary move by government. Providing extra pay to nurses under the working-short provision was characterized as permitted by collective agreement, but it wasn't. This will continue to be an issue.

Health Science Professionals Bargaining Association has been speaking with government about additional funding for workers in contact with COVID-19 patients. Discussions are well underway, and it is hoped that there will be an announcement soon.

Unions began meeting with the Health Employers Association of BC (HEABC) at the beginning of March. There have been meetings on several different issues. Labour relations meetings are addressing how to handle issues arising under collective agreements and things like timelines for grievances and other matters. There are also meeting on benefits and anything else covered under the collective agreement, except assignment.

There are meetings 3 times a week on occupational health and safety, with PPE being a huge issue. HSABC and NUPGE had a research paper prepared on what protection was needed by health care workers. The paper, done by Dr. John Murphy, looked at how COVID-19 is being transmitted and what equipment is needed.

There had been a shortage of PPE and there have been numerous complaints. HSABC represents respiratory therapists and workers in other disciplines working directly with COVID-19 patients. Even biomedical technicians working on machines and managing samples are at risk.

HSABC is making sure members know when they can refuse unsafe work and what the process has been.

What has made a difference is having a friendly government. If the Liberals had still been in power, collective agreements would have been gutted. However, the mandate of the medical officer of health, and the orders that have been issued, do have an impact on members' rights.

The single-site order is one example, and the expected redeployment order will be another. HSABC spent a long time negotiating the single-site framework, with the Hospital Employees' Union (HEU) playing a major role.

For the HEU and the BCGEU, what was tough was the number of collective agreements with private sector employers.

HSABC believes this interference with collective agreements will be in place for 12 to 18 months. This means restrictions will be in place until they are back at the bargaining table in March 2022.

HSABC is taking the position that the impact on collective agreements of measures to cope with the crisis should be kept to a minimum. An example of where this position is

needed is seen in the duty to accommodate: employers want to scrap provisions in the collective agreement and force people to talk individually to HR managers.

All have provisions in collective agreements allowing people to be redeployed. Some deployments will be across bargaining unit lines, but there will also be cases of non-members or out-of-scope people doing bargaining unit work. If non-members are doing bargaining unit work for a long period, dues need to be paid.

Ministerial order number M105 covers the single-site transition framework. Benefit coverage will be maintained by the employer at the site where workers are restricted from working, but workers can also sign on for benefits at the workplace where they are limited to working.

Another area addressed was how to accumulate seniority, a process that some private contractors don't have.

HSABC will provide documents related to the transition to single-site working so they can be shared with everyone on the call.

HSABC staff are looking at where employers are already redeploying employees. In some cases, employers are trying to use COVID-19 to justify redeployments for shortages that pre-date COVID-19.

#### **MGEU**

Last Friday, the Manitoba government said long-term care workers would be limited to a single site. The MGEU has negotiated redeployment agreements with other unions and regional health authorities that allow workers to be moved. The agreements provide guidance and some monetary provisions for redeployments.

The government has announced it is targeting public sector workers as a way of addressing fiscal problems. The Manitoba government is looking at cuts to the civil service, colleges, and Crown corporations as a way to save money. Measures put forward by the government are ones like the federal work share program, unpaid days, and temporary layoffs.

While the provincial government is threatening to lay off "nonessential" workers, it is refusing to tell the MGEU which positions are nonessential.

#### **OPSEU**

For workers in ministries, OPSEU is in the middle of negotiating redeployment agreements for fixed-term and contract people who don't have a regular number of hours. The Ontario government is proposing to guarantee the average of the hours worked in the last 12 weeks for people being redeployed. The language on how far away people can be redeployed will need to be tightened up, but in general it's good news.

Some seasonal workers at some locations won't be brought back this year. At some summer locations, students won't be hired this year. A lot of seasonal work is still up in the air.

Since Doug Ford became premier, there has been an increase in the use of fixed-term contracts when permanent public service positions become vacant. However, there has been a fairly decent response from government, with no layoffs so far.

There are a lot of health and safety issues. Health and safety inspectors are being redeployed so that they will have to visit homes with outbreaks. This is seen as dangerous for both residents and members.

There have been a considerable number of work refusals at Service Ontario. Service Ontario is now taking measures like installing plexiglass screens at counters and issuing masks.

The Ontario government is trying to keep the courts open, but it has been very difficult to get health and safety concerns addressed, though it has gotten better. Judges were doing their own thing, and the management of the courts was following what judges were saying. This meant no protection for people working in courts who are in contact with the public.

Some redeployment has been suggested for enforcement workers to be enforcing emergency management and civil protection orders.

Some support staff have been redeployed to helplines. Some nurses have been redeployed to telehealth.

Some finance people are back working in their offices.

There has been a problem with the Minister of Labour requiring that all orders be approved centrally and go through lawyers, leaving no discretion for inspectors. Until a week ago, orders were going against the union.

There was some success in an order a week ago that addressed the issue of the employer being unable to protect workers from droplet-based exposure to mucous membranes. The order didn't specifically require PPE.

OPSEU want workers in correctional facilities to be wearing N-95 masks at all times, but there have been a lot of roadblocks from the Ministry of the Solicitor General. This is even though workers are frequently in close contact with inmates and often don't have time to put on protective equipment when responding to problems.

There is also an issue with language being slipped into regulatory orders that undermines collective agreements. People need to watch for the phrase "despite any policy or collective agreement" in emergency acts or policies being put in place.

Another issue is getting employers to consult through joint health and safety committees. In a lot of workplaces, the employer is issuing directives and passing them out with no consultations.

#### **NBU**

Collective bargaining is on hold, because the New Brunswick government doesn't have the resources to both bargain and deal with the COVD-19 crisis. The provincial government could probably manage surface bargaining, but the union isn't interested in that.

So far, workers in long-term care aren't being restricted to working only at a single site.

The NBU has a PPE agreement in place with other unions and health care employers. This deal mirrors the agreement HSAA signed a few weeks ago. It gives workers a say in what type of PPE they can use based on assessments.

The NBU does have a redeployment agreement under which home-agreement provisions apply.

There have been no layoffs, but there are concerns that the government will try to lay off nonessential workers. The NBU is encouraging workers to be as useful as possible so that they are not targeted.

This is a concern in other provinces. Concerns were expressed by other Components that calling for all workplaces to be shut down for health and safety reasons makes it easier for provincial governments to lay off large numbers of workers.

#### **NAPE**

NAPE has negotiated good-neighbour agreements. Membership service officers are keeping a close eye on how redeployments are taking place and making sure redeployments are actually in response to COVID-19.

There is one large committee dealing with issues that includes all unions, the health authorities and people from the Department of Health and Community Services.

NAPE is currently dealing with rules restricting people to one site. A lot of people are employed in private health care—in nursing homes or in people's homes. The single-site order has caused people to lose jobs at other sites. There is nothing in agreements compensating people for loss of work.

Any changes to deployment, or having to stay in one place, will be covered for loss of wages and loss of seniority.

NAPE is meeting with employers about PPE to determine if there is enough supply and what the burn rates are. Special guidelines have been issued on PPE and how people are deployed.

Another issue is people being sent home because they have symptoms. For people sent home due to coughs or sneezes that are making others nervous, but who don't have COVID-19, the issue is whether they have to use sick leave when normally they wouldn't be off work.

Home care workers found that when people using home care were told to use social media to stay in touch with relatives, these workers were having to spend time, in addition to their usual duties, teaching people how to use social media. There are now people specifically assigned to that task.

There are so many changes that people don't understand everything that is happening. HR people are running redeployments past union reps.

There are meetings twice a week on collective bargaining. Earlier this year, there was an agreement to extend all of the existing public sector agreements. The 2% increase due on April 1, 2020, went ahead.

Delivery of core government services has been reduced. There has been a move to electronic transactions, with less face-to-face contact with the public.

The vast majority of people are on rotating shifts. Many people working from home and others were sent home with full pay.

Parks and museums are closed, and seasonal employees who staff those sites won't be recalled. This means they won't be able to earn hours for EI.

Work is continuing on the summer road maintenance program, but it is slower than usual due to COVID-19 restrictions.

Marine services are operating with a reduced schedule at 50% of capacity. Colleges are closed, with faculty teaching online.

Social workers are considered essential but are providing essential services only in areas like child protection.

Group homes are a mix of privately run and publicly run homes. An issue for group-home workers is clients not adhering to social distancing.

So far things seem to be going well in corrections. NAPE is working to put an alternative staffing model in place if there is an outbreak in a correctional facility.

Schools closed, but student assistants and support staff are still getting their regular pay—the usual Easter layoff took place.

A couple of classrooms in St. John's are still open and are being used for child care for essential workers.

There have been layoffs at some municipal councils and all municipal recreation facilities.

In the last collective agreement, NAPE negotiated a provision that people can't be laid off in the public sector for budgetary reasons (that includes school boards and health care).

In response to a concern that restrictions for workers in long-term care on working at multiple sites may be in place for some time, NAPE is looking at what will happen if restrictions are extended.

# **FOLLOW-UPS**

ISSUE	NUPGE Responsibility	Component Responsibility	Task Completed
Share information on the Labour Adjustment Process under the Single-Site Transition Framework			

























# NATIONAL UNION OF PUBLIC AND GENERAL EMPLOYEES

- B. C. Government and Service Employees' Union (BCGEU)
- Health Sciences Association of British Columbia (HSABC)
- Health Sciences Association of Alberta (HSAA)
- Saskatchewan Government and General Employees' Union (SGEU)
- Manitoba Government and General Employees' Union (MGEU)
- Ontario Public Service Employees Union (OPSEU)
- Canadian Union of Brewery and General Workers (CUBGW)
- New Brunswick Union of Public and Private Employees (NBU)
- Nova Scotia Government and General Employees Union (NSGEU)
- PEI Union of Public Sector Employees (PEI UPSE)
- Newfoundland & Labrador Association of Public and Private Employees (NAPE)

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