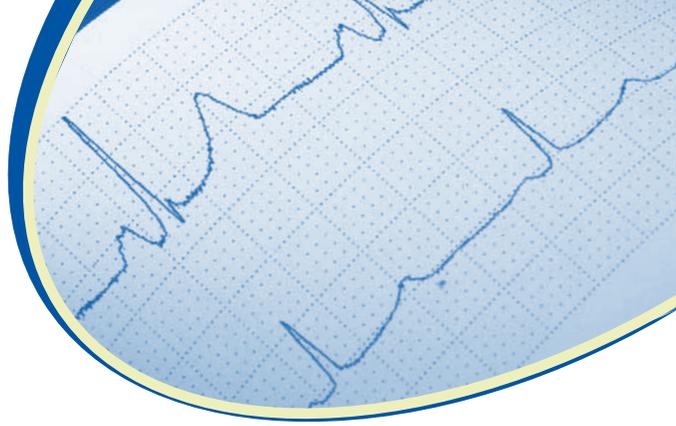




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# WRHA Community Programs *Check Up* Local 220



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## STAFF REPRESENTATIVE

Colin Ghostkeeper

## Committee to determine how wage adjustments are dispersed

In the fall of 2011, our Local ratified (accepted) a new contract after several months at the bargaining table. As part of the negotiated settlement, the RHA identified a process for three Local 220 classifications (Audiologists, Resource Coordinators, and Case Coordinators) to take part in what they called the “Multi-Union Market Adjustment Committee”.

### The Market Adjustment Committee’s Purpose?

The Committee – which is comprised of the Labour Relations Secretariat, representatives from several Manitoba regional health authorities, as well as the unions representing members who’ve negotiated to receive funding from this process – is tasked with figuring out an equitable process to distribute \$3 million for wage adjustments. The unions involved include the Manitoba Association of Health Care Professionals, United Food and Commercial Workers as well as the MGEU Technical Professional Central Bargaining Table, and our MGEU Local.

Starting in July 2012, meetings were held with all parties involved to establish a process for how this \$3 million would be distributed. The process was finalized in December 2012 and the committee determined that the unions would have to present their case for each classification based on the following three factors: **demonstrable recruitment challenges; retention patterns; and wage differentials.** Once this happens, all of the parties involved will review each presentation and agree by consensus on which classifications should receive funding and how much they will receive.

Presentations are set to take place over the next six months, but a finished schedule isn’t in place yet. Obviously, it will take some time to get through every presentation and reach a consensus, so final decisions may not be complete until this fall.



### A Misunderstanding of Process

Making this issue somewhat more complicated is a disagreement about the process: Our bargaining representatives were of the understanding that the process would not be looking at “if” classifications would be considered for an adjustment, but “how much” of an adjustment each would receive.

Once the market adjustment process began, it became apparent that the WRHA disagrees with this interpretation. Their position is that the Committee will determine which classifications merit a market adjustment, *then* it will determine the amount of any adjustment. This means not every classification going into this process is guaranteed to receive an adjustment. Because the MGEU doesn’t wish to hold up the proceedings the union has decided to continue, while reserving the right to challenge the intent of the process if the Committee’s final results do not match the intent of our Local’s negotiated settlement.

We’ll be approaching some members from each classification in the coming months to assist with the presentations. If you’re part of the affected classifications and want to take part, contact any of us) through the MGEU Resource Centre.

- Local 220 Table Officers

## Let's Work Together - Leaders start building bridges between two MGEU Locals

Historically, MGEU Local 220 (RCs, CCs to name a few) and Local 113 (HCAs, HSWs and ISWs) have always been two groups closely working together with common goals and interests. Over the years, we have seen a widening gap in relations between our two groups and most recently we have seen some deterioration in our relations that are now adversely affecting our working relationship.

On November 21, our Local leaders came together to discuss the difficulties each group is facing. After reviewing these issues, we realized that we both have similar challenges in administrating the Home Care program. We were all in agreement that we both feel the pinch of lack of resources and time to provide the quality of care that we want patients and family members to expect of our home care program.

Some of the shared concerns we have heard about are:

- Pressure of getting service to new clients
- Health and Safety in community
- Program shift from focus on relationships to focus on tasks
- Excessive workload interfering with timely communication
- Respectful working relationships
- Challenges with pay administration

While the structure of our working relationships are beyond our control, the way we function and respond within these roles is crucial. It is important that we treat each other with respect and do our utmost to ensure that our interactions – at the very least – are professional in nature and hopefully even better than that, friendly and with genuine concern for each other.

We want to remind you all, including those of you who may not be aware of the issues we are alluding to, that we all work together for a common employer, within a common union and for the common good of our patients and clients. Going forward, we want to shift our collective focus from fighting each

other to working together in order to more effectively push for better working conditions for us all.

We will continue to meet, share ideas and discuss ways we can support each other.

Carl Morden,  
President, Local 220  
WRHA Community Programs

Curt Penniston,  
President, Local 113  
WRHA Home Care/  
Home Support

### Workload remains #1 issue for our Local

Local 220 members have continued to share their concerns with the union regarding significant workload issues. The problem stems from an increase in services to the public and a lack of staffing resources - particularly in covering for scheduled holidays or illness.

Through our Labour Management meetings, the executive has continually brought this issue forward to resolve with the WRHA, but they have repeatedly advised the union the issue is being addressed through workload reviews. Since we have not seen these workload levels improve, the MGEU has held discussions with senior levels of Manitoba Health.

The amount of acute care has increased significantly over the last several years, and with the lack of Personal Care Homes to provide 24/7-care the burden of these services has been placed solely on the Home Care program.

As population demographics change, we are concerned there is little room to expand services, or even maintain service levels for those who currently rely on our Home Care Program.

We will continue to press management on these issues. However, we ask members to do their part by taking scheduled breaks and lunch breaks to reduce stress and force managers to properly address these problems for the long term.

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### contact us...

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