



# Central Bargaining

Bargaining news for members of  
OPSEU's Hospital Professionals Division  
Issue 17 - September 19, 2003

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## The Bendel Award - Thanks, we'll take it, and we'll be back bargaining real soon!

Well, it's finally here. The Bendel Award is certainly not the solution we all worked so hard for in this round. It still leaves us far short of where we should be on pay rates and working conditions. But it is nonetheless a very big step forward in addressing the serious problems we face and it gives us a solid foundation on which to build in the next round.

There is no guarantee of the outcome when arbitration is used to resolve a contract. But in light of the OHA's rigid bargaining position and the fact that **the OHA offered even less at arbitration**, this is a good result for us. The award, combined with the agreed issues, puts us further ahead in dealing with our stressful work situations.

What is fundamentally clear is that we would never have achieved as much as we did without your mobilizing support. We can't thank you enough. Without your support and the pressure you exerted, our message would not have gotten through to the employers, the OHA and the government.

Now we have to show employers, the OHA, and hopefully, a new provincial government that cares about health care, that that was just the start. We are coming after them again, real soon.

### What's Next?

Implementation documents are now being prepared by the parties for the monetary and other issues, so hopefully we will all be working under our new central language as quickly as possible.

The next round begins NOW! Your outgoing team will be meeting soon to prepare a bargaining report with recommendations for the next round. In the meantime this bulletin will help you assess what we got, what we didn't get and what we have to achieve in the next round. You should work with your staff reps to hold a meeting of your local to discuss the award and agreed issues, implementation questions and the next round. And, in the meantime, make sure you enforce your contract!

## Highlights of the Bendel Award

- Compounded Wage Increase of 14 per cent over two years for Registered Technologist scales and those above RT. This means that Registered Technologists are closer to the RN maximum than we have been in more than 13 years. Furthermore, the first five steps of the grid are higher than the corresponding steps of the RN grid.
- Compounded Wage Increase of 7 per cent over two years for Technicians, more than the OHA offer (same as SEIU and CUPE increases of 2.5 and 3 per cent.)
- An additional 3 per cent to the maximum rate for Physiotherapists, Occupational Therapists, Pharmacists, Perfusionists, Ultrasound Technologists, MRI Technologists and RRCs effective Apr. 1, 2003.
- Technicians have increased vacation entitlement that will now equal the vacation entitlement of the rest of the bargaining unit members.
- Improved vacation entitlement of 6 weeks after 23 years service.

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- Members in receipt of a layoff notice will be entitled to receive the same training provided to a new employee in order to exercise their displacement rights.
- Increases to shift and weekend premiums (\$1.10/hour for evening shifts; \$1.35/hour for night shifts and \$1.45/hour for weekend shifts).
- Improvement in the credit for experience language (one year for every year of experience, with no maximum entry level and current employees will be paid at the step to which they would have been entitled if this provision had been in effect when they were hired).
- The right for early retirees to continue in the group benefit plans. Retiree pays the full amount of the monthly premiums.

## Summary of agreed issues

The following are issues agreed to by the parties at the table:

### Bereavement Leave

Addition of one day of paid bereavement leave to attend funeral/memorial service of aunt, uncle, niece or nephew.

### Pregnancy and Parental Leave

Removal of 10 month service requirement – now 13 weeks of service.

### Paid Holidays

Removal of the 20 day qualifying period.

### Professional College Leave – (New)

Paid leave of absence for purpose of writing college re-certification exams.

### Union Business Leave

Cap increased from 40 days to 50 days for local bargaining unit members to attend to Union business.

### Seniority/Service Issues

#### *Full-Time and Part-Time:*

- Seniority and service to be retained by the employee in the event of transfer from part-time to full-time status or vice-versa (previously only seniority was retained);
- Removal of deemed termination for disability greater than 30 months;
- Seniority accrual for pregnancy leave of 17 weeks and 35 weeks for parental leave (or 37 weeks if the employee did not take pregnancy leave).

#### *Full-Time Employees:*

- Removal of 30 month cap where employee absence is due to disability resulting in WSIB or LTD benefits; hospital to continue premium payments for 17 weeks while employee on pregnancy leave and 35 weeks while on parental leave (37 weeks if the employee did not take pregnancy leave).

#### *Part-Time Employees:*

- Seniority accrual for absences due to disability, illness or injury in excess of 30 consecutive days; Seniority accrual capped at 1650 hours of seniority in a 12 month period.

### Health and Safety

Creation of a Joint Central Committee on Health and Safety to gather and analyze information of health and safety risks to employees and to make recommendations to the OHA Health and Safety Advisory Committee;

Broadened health and safety language – Member on the Health and Safety Committee to be selected by the Union; Hospital to provide the committee with summary of lost-time claims, health care claims and disease claims for committee's use in discussing ways of reducing injuries and accidents; committee to participate in all inquiries and investigations health and safety committee can discuss health and safety training programs for employees, changes to machines and equipment and the use of personal protective equipment; insertion of work refusal language from legislation.



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## Labour Management Committee

Hospital to inform Union of renovation or construction projects that will affect bargaining unit employees.

## Sick Leave

The parties at the local level may agree to voluntarily cash out existing sick banks. (Note: The decision should be made on the basis of a vote at the local involving members who have sick leave banks.)

## Union Security

Detailed information (job title, status) to be provided by the Hospital to Union, with a copy to the Local, at time of dues remissions.

## Employer Issues

### Letters of Reprimand

Leaves of absence in excess of thirty (30) calendar days will not count toward the 18 month period.

### Sick Leave and Long Term Disability

The Union agrees to encourage an employee to utilize the carrier's Medical Appeal process, if any, to resolve disputes.

# Details of priority issues

| What we wanted | What they offered at the table | Their position at arbitration | What Bendel awarded |
|----------------|--------------------------------|-------------------------------|---------------------|
|----------------|--------------------------------|-------------------------------|---------------------|

## Wage Increases

Wage increases of 25 per cent over a two-year term to achieve RT/RN parity, with maintenance of relative positions for jobs above and below RT pay level, and reclassification of jobs to reflect changes in duties, responsibilities, and comparative rates.

### April 1, 2002

- 2.5 per cent for below RT.
- 3 per cent RT and above (plus additional 2 per cent for employees at the maximum).
- 3 per cent for RTs, Seniors, and Charges, for movement on to a new grid.
- 2 -13 per cent for above RT for movement onto a new grid.

### April 1, 2003

- 3 per cent for below RT.
- 3.2 per cent RT and above.
- As part of package, was willing to do some special adjustments.

### April 1, 2002

- 2.5 per cent for below RT.
- 3 per cent for RT and above plus 4 per cent at the maximum step for RT and above.

### April 1, 2003

- 3 per cent for below RT.
- 3.2 per cent for RT and above.
- Special adjustment of 3 per cent at the maximum pay level for OT-PT, Perfusionist, Pharmacist, Ultrasound Technologist, MRI Technologist, RRCP (Respiratory Therapist).

### April 1, 2002

- 3.5 per cent for below RT.
- 7 per cent for RT and above.

### April 1, 2003

- 3.5 per cent for below RT.
- 6.6 per cent for RT and above.
- Additional 3 per cent to maximum rate for Physiotherapists, Occupational Therapists, Pharmacists, Perfusionists, Ultrasound Technologists, MRI Technologists and RRCPs.



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## Wage Grid

|  |  |   |   |
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| <p>A comprehensive pay grid structure, with:</p> <ul style="list-style-type: none"> <li>• Appropriate relationships between classifications on the wage grid.</li> <li>• No overlap of start rates.</li> <li>• Uniform increases between steps.</li> <li>• Uniform increases between pay bands</li> <li>• Shorten the time it takes to get to the maximum rate.</li> </ul> | <p>Three grid structures, stuck together:</p> <ul style="list-style-type: none"> <li>• A grid for jobs below RT;</li> <li>• A grid for RTs, Seniors and Charges.</li> <li>• A grid for all other jobs;</li> <li>• Elimination of the first two steps on RT scale.</li> </ul> | <p>Opposed to comprehensive wage grid.</p> <p>Elimination of first step for RT.</p> | <p>Status quo except for elimination of first step on scale for RT and above.</p> |
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## Early Retirement Benefits

|   |   |                |  |
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| <p>Employer to provide benefits for those who retire early.</p> | <p>Benefits only if the employee paid both the employer and employee share of the premium; or if laid off employee would pay 50 per cent.</p> | <p>Opposed</p> | <p>The right for early retirees to continue in the group benefit plans, employee pays full premiums.</p> |
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## Call Back

|  |   |                   |                   |
|--|---|-------------------|-------------------|
| <p>Minimum call back period to be increased from two hours to the industry standard of four hours.</p> | <p>The OHA refused to address this issue.</p> | <p>Status quo</p> | <p>Status quo</p> |
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## Family Leave

|   |  |         |            |
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| 10 paid days per year, for family emergencies and medical appointments. | The OHA refused to address this issue. | Opposed | Status quo |
|---|--|---------|------------|

## Contracting Out

|  |                  |            |            |
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| A clear ban on contracting out of work of our members. | The OHA refused. | Status quo | Status quo |
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## Lesser vs. Least on Layoff

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| We tabled bumping language based on lesser seniority instead of the current least senior. | Offered lesser for bumping, but tied to a concession that would restrict number of offers of early retirement in a layoff situation. | Status quo | Status quo |
|---|--|------------|------------|

## Training on Layoff

|  |                  |            |  |
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| Training the same as provided to a new hire to be provided to people who bump. | The OHA refused. | Status quo | Members with layoff notice entitled to receive same training as a new employee in order to bump. |
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## Pregnancy, Parental and Adoption Leave

|   |                  |         |            |
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| Increase SUB amount and extend time employees receive SUB.<br>Continuation of Percentage in Lieu of Benefits and Vacation Pay for Part Time Employees on leave. | The OHA refused. | Opposed | Status quo |
|---|------------------|---------|------------|



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### Equal Vacation

|   |  |            |   |
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| We tabled full equalization of vacation for jobs below RTs with RTs and jobs above RTs. | Offered 3 weeks after 1 year of service, effective March 31, 2004, the last day of the contract. | Status quo | Technicians have full equalization of vacation entitlement. |
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### Implementation of the award

For details about implementation of the contract, keep an eye on the OPSEU web site, [www.hospitalprofessionals.org](http://www.hospitalprofessionals.org).

In the meantime, negotiations for any outstanding local provisions are ongoing. Planning for the next round of bargaining has already begun.


The collective agreements expire Mar. 31, 2004. Watch for information about a pre-bargaining conference that will be held before the end of the year. We have come a long way, but there will be more hard work next round to achieve what we need to resolve the severe shortages that still plague our profession.

Your team salutes you for your energy, your commitment, and finally, your patience in waiting for this award.

In Solidarity,

#### Your bargaining team

Yves Shank Local 659 Chair, Sudbury Regional Hospital  
David Hancock Local 571 Toronto University Health Network  
Robby Hersh Local 583 Baycrest Geriatric Care Centre Toronto  
James O'Leary Local 106 London Health Sciences Centre  
Patty Rout Local 348 Lakeridge Health Corporation Oshawa  
Leslie Sanders Local 348 Lakeridge Health Corporation Oshawa  
Moya Beall Staff Negotiator  
Michèle Dawson Haber Staff Researcher

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| <p>Authorized for distribution:</p>  <p>Leah Casselman, President</p> |
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Thanks to Aimee Axler who chaired the team through these negotiations. Aimee has accepted a position as staff representative for Kingston.