



CUPE 4848 and NB EMS
 Monday, March 14, 2016 in Moncton
 11:00am – 5:00pm



In Attendance

CUPE	Kim Cail	Greg McConaghy
	Yanick Mongeau	Judy Astle
	Bill Cameron	Pat Hepditch
	(BY) Brian Harris	
NB EMS	Beth Simkins-Burrows	Jacques Charest
	Robin O'Hara	Yvon Bourque
	JP Savoie	Lise Despres
	Paul Boudreau	

Absent

CUPE	Chris Kennedy	
NB EMS	Michel Gravel	
	Caroline Lumsden	
Invited Guest		
Recording Secretary	Lise Despres	

1. Meeting Called to Order at 10:58 am
2. Introduction of New Members
3. Approval of Minutes from November's Meeting
4. Approval of Agenda
 - a. Follow Ups from November's Meeting
 - i. **Floater Agreement:** NB EMS stated they were still reviewing the document based on the comments that CUPE provided.
 Follow up: Beth to provide update next meeting
 - ii. **Meal Periods and Off load delays:** NB EMS stated that there are still issues with off load delays in particular at the Saint John Regional Hospital and the Moncton City Hospital. Yvon is working with the two RHAs to develop a provincial plan to address the issues. Our Risk Manager at NB EMS is also working on the issue with the Risk Managers at the RHAs. Yvon stated it is an issue that is causing major problems with our responses to 911 calls and the RHAs agree it is a liability. A meeting is scheduled with all RHA VPs next week to review options such as keeping the ambulance in service for 30 minutes, putting in a holding area (Vitalite), trying to get patient's medical tests planned



for early in the mornings. NB EMS provided some options to Horizon as well such as having the nurse triage the patient upon ambulance arrival. CUPE suggested a "patient swap" type of system may work. The RHAs want to work on workflow. All parties realize you cannot just leave a patient unattended as there is a liability factor involved.

- iii. **Linguistic profile scheduling:** NB EMS and CUPE agree issue has been resolved with new January Scheduling Guidelines (version 7).
- iv. **Call back time in Telestaff:** NB EMS spoke to Mike Simpson and the only way to review the concern is to look at each situation on a case by case basis.
Follow up: CUPE will forward specific case to be reviewed
- v. **Fatigue Management Policy:** NB EMS anticipates it will be ready in the next few weeks.
Follow up: Yvon will provide a copy for review to CUPE by April 8, 2016
- vi. **8 week temps – NB EMS:** NB EMS suggests that we send this to the small group scheduling team to review. CUPE was in agreement with this. CUPE inquired as to how many 8 week temps we have
Follow up: Beth will provide number of employees in 8 week temp and book a meeting for the scheduling group through doodle.
- vii. **Island Staff to switch with Others Outside of Island Stations:** NB EMS needs to review the option of allow exchanging of shifts for the same duration between the Island staff with those staff not assigned to the Islands. The suggestion is that this be added to the small group scheduling team. CUPE is in agreement.
Follow-up: Beth to add this item to the schedule group meeting.
- viii. **The 3/8th rule in Miramichi:** NB EMS stated this issue has been resolved. CUPE is in agreement.
- ix. **Shift Extension process in all regions:** RMs have ensured the process is being followed.
- x. **Shift exchanges – four week block vs. two consecutive pay period:** No movement from either the Employer side or the Union side on this issue. Issue to be tabled for now.
Follow up: Tabled for now.



- xi. **Designation copy:** NB EMS is 100% designated. If CUPE requires a copy of the designation they will need to contact Anne Craik at DHR.

- xii. **Extra Mural Referral Program in the Peninsula:** CUPE is looking for guidelines/process. NB EMS stated that basically when a paramedic is assessing patients in their homes, usually from a 911 response, they may notice things that may alert them to patients who have needs that are not being met or risks that are present. If paramedics identify some of these things and think that the patient could benefit in receiving support to assist them being safer or healthier in their homes, then they now have a form they can fill out that is check box format to identify their concerns. They scan either scan to email the form to Extra Mural if the patient refuses transport and is not transported, or they can leave a copy of the form with the PCR at the hospital if the patient is transported. This way, the hospital staff receives the additional information about the patient's environment at home that may affect the discharge process and have Extra Mural do an assessment. NB EMS stated that the intention is to launch this program province wide. NB EMS has received very positive feedback on the pilot to date.

- xiii. **Training expenses in South region:** NB EMS stated a training session for Grand Manan was set up at City Road to accommodate those working on the Island but living on the mainland by hosting the training closer to them as they would have had to travel to their station on Grand Manan. Instead of the majority having to travel to GM and personal cost he paid the three Islanders mileage to cut down on their personal expenses. Since he moved the training away from the Island he covered the expenses for the other three medics who lived on the Island including mileage and accommodations. A discussion was held about employees required to attend sessions in other areas. NB EMS explained that the only way that may happen is if an employee signs up last minute and the session is full.

- xiv. **OT pay for PT/Casuals:** NB EMS stated an agreement was signed in 2010 between CUPE and NB EMS.
Follow-up: Beth will send a copy of the 2010 agreement to CUPE and RMs.

- xv. **Mock disaster:** NB EMS stated were no medics in attendance in the mock disaster at Point Lepreau because none signed up as a volunteer. We always ask for their attendance in mock disasters.



xvi. **Posting Issues:** CUPE stated that there seems to be a lot of positions awarded during the posting cycle then they have to be removed as they were awarded incorrectly. NB EMS stated this does happen as human error comes in to play sometimes. Awarding positions is a complicated process and very manual. NB EMS will be looking at the posting schedule versus scheduling shifts. The timeline is very strict and it takes HR a full week or more to award all positions.
Follow up; Beth to tag Jackie and Karen to review the posting schedule and move it back by a few weeks.

xvi. **Cancelling Shifts:** A discussion was held regarding the policy of 48 hours to cancel shifts and it was stated that it has been signed off by CUPE.
Follow-up: Beth will review what happens if an employee decides to cancel a yearly vacation.

b. CUPE Topics

- i. **Budget News Update:** NB EMS provided an update on ACPs as well as the EMP project. An MOU has been signed between DH and Medavie EMS to explore the possibility. This is not a done deal by any means. A project team has been created of NB EMS employees, including Beth, JP & Michel to work with the RHAs and DH. NB EMS stated the goal of the EMP project is to get the best resources to the right person.
- ii. **Scheduling:** As agreed a small group scheduling team meeting needs to get organized.
Follow-up: Beth will schedule a meeting.
- iii. **Terminations:** Kim and Beth will discuss off line. CUPE wants it noted that they feel 150 hours suspension without pay is too severe of a financial penalty for the employees. The system has changed this year with PANB which has caused some of the delays. NB EMS stated, no matter what, it is still the responsibility of the paramedics to ensure they renew their license yearly. Reminders were sent out several times to employees. Bottom line, if you are not licensed by PANB, you cannot be employed by ANB. CUPE stated that they will be communicating to their members that if you do not get your licensed you will be terminated.
Follow-up: Beth will look at the payroll deduction to see if we can send the money to PANB sooner.
- iv. **Meetings with Union Representation:** CUPE stated the employee determines who they want as a CUPE rep to the attend meeting. NB EMS stated that they give sufficient notice for regular discipline meeting so the employee can decide whom they want with them. On some occasions, such as termination, it may be done quickly.



- v. **Withdrawing of shifts:** Already discussed above
- vi. **Mandatory EAP:** discussion taken off line.
- vii. **Cancelling yearly vacation:** discussion taken off line.

c. NB EMS Topics

- i. **VPs signing grievances:** NB EMS is receiving a high number of grievances many of them which have no merit. NB EMS is wondering if all VPs are aware of the grievances which are coming in from their area. CUPE stated a discussion was held around the option of having the VP sign off on the grievance. For now CUPE stated no changes will be made but they will get back to NB EMS.
Follow Up: CUPE to update NB EMS.

- ii. **Cc on Letters:** Agreed by all that the letters should include cc as follows: Judy Astle, Area VP (Yanick Mongeau, Bill Cameron, Pat Hepditch), Kim Cail, assigned CUPE Coordinator (Denis Brun, Monique Desroches, Pat Roy, Mary Fougere).

- iii. **Remediation Process:** NB EMS stated that a revised remediation process has been implemented and will now be 20-40 days. It is not a punitive process, same as always. NB EMS explained that an RTP and remediation are two separate things. RTP are required if employee has not worked one shift in 60 days. CUPE stated they disagree with the two policies and find them punitive.

Beth explained that TQA has a firm process where the RMs do not sit in it. But the RM, OM are advised. TQA will provide employee with documentation but, we can't provide them with education as we are not an educational institution.

- iv. **Health & Safety Reps:** NB EMS advised CUPE that we are still missing rep.

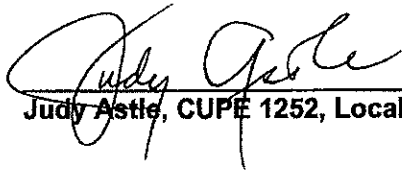
c. New Items

- i. **Internal Shuffles (CUPE):** CUPE would like the ability for their members to shuffle between an 8 hr truck to a 12 hr truck. NB EMS stated that we can't do that as an 8 hr truck is viewed as a prime post and should always be posted. This was a discussion and agreement that was held years ago and was agreed to between the Employer and CUPE.
- ii. **New Inventory System & Radio System:** NB EMS provided an updated on upcoming new items such as the new inventory system and new radio system. MCMC will begin implementation of changes and will move to the hospital for a three week or so at the end of March to allow for the new equipment to be installed at MCMC John Street. The new radio system will be rolled out in a 3-4 month timeframe across province. Training will be required for all employees.



d. **Next Meeting:** June 14, 2016 at 10am, NB EMS Offices, Moncton (Rooney Crescent).

Respectfully submitted and approved by:


Judy Astle, CUPE 1252, Local 4848


Beth Simkins-Burrows, NB EMS