



**CUPE 4848 and NB EMS
Wednesday, November 26, 2014
10:00am – 3:00pm**

In Attendance

| | | |
|---------------|----------------------|-----------------|
| CUPE | Judy Astle | Denis Cogswell |
| | Ralph McBride | Bill Cameron |
| | Trent Piercy | Bryan Harris |
| | Greg McConaghy | Bernard Soucy |
| | Mike Harris | |
| NB EMS | Michelle Breen | Jacques Charest |
| | Beth Simkins-Burrows | Craig Pierre |
| | Michel Gravel | Robin O'Hara |
| | J-P Savoie | |
| | Paul Boudreau | |

Absent

| | | |
|----------------------------|------------------|--|
| CUPE | Chris Kennedy | |
| NB EMS | | |
| Invited Guest | | |
| Recording Secretary | Caroline Lumsden | |

1. Meeting Called to Order
 - Beth Simkins-Burrows called the meeting to order at 10:04 am.
2. Introductions
3. Approval of Minutes from September's Meeting
 - Minutes approved by Trent Piercy, CUPE and Beth Simkins-Burrows, NB EMS
4. Approval of Agenda
 - a. **Follow Ups from September's Meeting**
 - i. **FT Floaters Agreement – NB EMS**
The agreement is complete and Beth provided Judy with a copy and will forward by email as well.
 - ii. **Option to view schedule in Telestaff – NB EMS**



There is no way to view others people's calendars in Telestaff. Maybe in the future, this option can be added but Kronos is not willing to add the option now. NB EMS will commit to looking into this in the future if it is available.

iii. 24 hour limit for entering meals in Telestaff - NB EMS

No matter how much time you give employees to do this, they will wait until the last minute so it doesn't make sense to change it to 48 hours. It also causes a lot of extra work for Payroll and the OMs if it is entered later. CUPE states there are still issues with Telestaff not allowing and/or accepting it. Also there are issues with entering overtime/shift overruns. NB EMS said this is the first they hear that it is not working within the 24 hour limit.

Follow up: NB EMS to follow up with Mike regarding technology issues.

iv. Roadside Post Update – NB EMS

The Fredericton roadside post is in the process of being completed. A six month trial due to the lease arrangements is being finalized for the former former YMCA building. There is no move in date currently but in the works. Michel and Robin to have a discussion offline to determine if there are any changes needed to SSP. CUPE would like to have input as well. There is no further update on the Arthurette roadside post at this time. NB EMS' Facilities Manager is looking into it, however, we still don't know the financial cost.

Moncton post; stats are not available following 2 month trial. Pennfield post; next step is to meet with the village for further discussion. Having some issues regarding which community the post belongs to, Pennfield or Blacks Harbour. Paul B. was meeting with Pennfield Fire Chief but has gone as far as we could. Paul plans to meet with the Blacks Harbour representative.

CUPE states that Waweig post is still an issue.

Follow up: Beth will follow up regarding the Arthurette post. Craig and Michelle will follow up on Moncton stats. Paul to follow up regarding data from Pennfield and Waweig posts.

v. CCTC Qualifications – NB EMS

Recruitment for the Trauma desk will continue until we are able to fill all the vacancies. Until we have applicants the OMs will have to cover the desk. This is a last resort but the desk needs to be staffed. NB EMS is nervous to relook at the CCTC job qualifications as it could cause the pay band to be impacted negatively. NB EMS is looking at medics who no longer want to work on the trucks and/or who are on light duties or need to be accommodated as



possibilities. Most of the OMs that cover are Paramedics, however some are not. NB EMS and CUPE agree that there are senior MCMC staff that would do well on the desk. CUPE asked if senior MCMC employee could staff the desk before having OMs that are not currently active Paramedics by giving them extra training. CUPE asked if NB EMS has a long term recruitment plan. NB EMS states that as long as we have a shortage in the field, we will continue to have a shortage at CCTC. Plus it is difficult to find those that meet the language requirement.

Follow up: NB EMS to discuss how we handle the staffing of the trauma desk.

vi. Shift Switch Policy – NB EMS

Discuss during NB EMS topics.

vii. DH Inspection and Personal Items – NB EMS

NB EMS doesn't have an issue with personal items at the station however they need to put in the locker when the employees are gone. CUPE stated some items do not fit in the locker ie. such as lawn chairs. CUPE stated the DH said it is up to NB EMS what is able to be at the stations. NB EMS states that DH still writes up NB EMS for these items.

Follow up: Michelle or Yvon will talk to Donny Campbell about what the rules are regarding personal items at the stations. CUPE will follow up with DH as well.

b. CUPE Topics

i. Application of Article 31.06 to floater position vs. permanent station positions

Internal shuffles for floaters give them an unfair advantage because they are based out of an admin area, not a station. NB EMS states that on our payroll system they are assigned to a home base. NB EMS states that we could limit the floaters to internal shuffles at the home base. CUPE states then a permanent employee at the home base should be able internally shuffle into the floater position. NB EMS suggests the internal position should be offered to those that are in a 8 or 12 hour position before offering to the floater.

Follow up: CUPE to review floater agreement document and discuss the impact of internal shuffles.

ii. Criminal charges and affects to medics

CUPE states that it appears that as soon as an employee has a charge, the employer is putting employees off work until the court makes a decision. In the past employees would continue working until they were found guilty such as DUI cases. It now appears that employees are considered guilty right away. CUPE doesn't want the employer to make any decision hastily. They see



the issue only increasing. NB EMS states that we don't have rule book in regards to DUIs; an employee could have a medical condition. That is why NB EMS doesn't treat all cases the same. NB EMS states that criminal charges have increased. Employees may be put off work depending on the charge. Paramedics are held to a higher standard and are in a position of trust and based on the charges the company may not be comfortable having the employee to continue working. NB EMS has a responsibility to mitigate risk. In conjunction with the Department of Justice, each case is looked at on a case by case; whether they are put off work, as well as with or without pay.

iii. Mental health updates and lobby of the new government

NB EMS states that wallet cards were sent out to staff with different resources available. However, there was an incorrect phone on them and they have to be redone. NB EMS is working with Medavie Blue Cross on an enhance EAP program and it should be launched in February. There will training sessions conducted in approx. 10 locations each spring and fall. There will be sessions for employees and their family members. Not just covering PTSD but mental health as a whole. We send out electronically any new EAP topics that come out. Based on the research education appears to be the best option. NB EMS has looked at hiring a psychologist that is experienced with PTSD. Difficult to find one with the necessary experience and that are willing to work for us on a contract basis. The goal was for this person to work with HR and management in addressing employees concerns. This person wasn't necessarily going to work directly with the employees since they have the EAP program. The RCMP has a PTSD center however we are not able to attend. The EMS Chiefs of Canada are looking into Veteran's affairs. CUPE and NB EMS need to work on this topic. WorkSafeNB's adjudication of PTSD claims has improved significantly over the years but work still needs to be done with the healthcare system. CUPE suggests that a smaller committee be created. NB EMS agrees and that the Disability Consultant will take this on once hired.

Follow up: Look at creating a small committee once Disability Consultant is hired.

iv. SSP/Deployment

CUPE states that the current SSP has so much yo-yo movement in it. For example one call and seven trucks move. It doesn't make sense that there is one call in the area and so many trucks move. CUPE suggests waiting a little bit before moving crews because calls are often cancelled. The perception is that the medics are being moved for the sake of moving them. The consistent travelling back and forth, is a big fuel cost. You are taking employees out of areas they know and putting them in areas they don't know. Employees are



sometimes told to take longer routes to get back to the home station rather than taking a shorter route to get back to the community they are covering. Doaktown is often left open and is not covered. NB EMS states that we have limited resources at night. CUPE states that perhaps we need more trucks/resources. NB EMS states that we still have a look of weekends not being staffed and trucks out of service. CUPE suggests moving some of the weekend hours to nights. NB EMS states that part of the SSP is preparing for the call that may come in and making sure we meet our time constraints. The probability of where the calls will be is all based on stats. We are always trying to reduce the movement and improve the SSP. CUPE doesn't think concerns in certain areas are being addressed by the SSP. Things from the field are not getting into the SSP document. NB EMS is open to feedback but the requirements to move will not change with this SSP model. NB EMS will look at any issues that CUPE raises. MCMC often meets with the Field to discuss SSP complaints.

v. Ebola

The latest recommendation is no skin exposure. NB EMS states the last items are the hoods and they have been ordered and the masks are in. We are no different than anyone else in Canada. The hoods will protect the neck and side of face. CUPE states that the gown only goes down so far. NB EMS states that extra-long leggings are available. NB EMS states that if the employee isn't covered completely and is called to an Ebola call, they may not go in. Two trucks will be dispatched to the call.

vi. Harassment

CUPE would like to see sensitivity training at the stations.

vii. Casual PC

There was an employee who was FT but also an Acting PC. The employee went to part time and lost her acting PC spot. Casual PC is not a classification, it is based on different reasons why or why not they can keep it. NB EMS and CUPE will take the topic offline to discuss individual cases.

viii. Boots

Discuss under NB EMS section

ix. 24 hour Stations

CUPE would like to know if 24 hour station is an option especially with a new President. NB EMS states that the issue is currently dead.

Follow up: NB EMS to follow up with SMT to see 24 hour stations is possible.



c. NB EMS Topics

i. Work boots and uniform replacement clarification

There is a work boot policy and it is \$150 every 2 years, however if the boots have been damaged at work prior to 2 years we have replaced them in the past. However, they will not be replaced because they are getting soft in the ankle. The policy is there to manage them. Work boots seem to be getting out of hand lately and there are three cases going to adjudication. WSNB will not be making a decision on the payment of work boots. NB EMS isn't required to pay for the work boots. CUPE states they should be evaluated on a case by case basis. One off situations will be dealt with.

ii. Four week block for shift exchange

NB EMS would like to go from two consecutive pay periods to the four week block for shift exchanges. It is causing issues with payroll such as casual and PT employees losing seniority and/or getting OT when they shouldn't. FT employees are potentially losing out on OT. This is an additional cost for the employer (article 22.10). NB EMS is covering more time at OT than before. CUPE doesn't like this because the block sets a definite date. Not fair for the FT employees since the issue is only with PT and casuals who don't level. Don't want to limit the FTs.

CUPE asks if there will be any restrictions to the number of shifts employees are allowed to switch within the four week block. NB EMS states that there are no limits currently, but there will be exceptions depending on the situation. The OMs will manage on a case by case basis with the employee. CUPE and NB EMS agree exchanges are not for permanent switches. NB EMS still currently willing to cover shifts at OT if request made within 2 weeks. It is up to discretion of OMs if short notice absences are approved.

NB EMS states Telestaff can be programed and that if the request is within the perimeters and if it outside it won't be approved but the OMs can override it.

Follow up: NB EMS to see what can be done in Telestaff to make shift exchanges with four week block work but still have OMs the ability to override the system if needed.

iii. Harassment Complaints

There are a lot more complaints being sent in. NB EMS thinks that some are missing the context and what the harassment policy means. NB EMS would like to know if CUPE is willing to work with us to educate staff on what the definition of harassment is.



CUPE Equality Rep (Wendy Johnson) is willing to come to ANB and do training. The rep states that the training will need to be mandatory for employee. CUPE suggest doing it at an in-service would be good. Need to do it face to face. CUPE has all the material in both languages. NB EMS asked that CUPE send any electronic material about harassment so that it can be put on the ANB intranet.

Follow up: CUPE will send Wendy to attend NB EMS next RM meeting to discuss.

iv. Uniform Point System

NB EMS spoke to Uniform Works and it will not work. Uniform Works doesn't recommend moving forward with the system as it can be very costly. CUPE states there has to be some allowance for staff to wear their own personal clothing if needed.

Follow up: NB EMS will follow up in January 2015 regarding the windpants in order to resolve this issue.

v. Daily Check List

A truck didn't have its oil checked and the engine now needs to be replaced. This didn't happen overnight. Staff have to make sure they are doing what is on the daily check list. The daily check list is there for a reason and for the safety of employees. A memo was sent out to ANB staff to show them how to check the oil.

vi. Language Testing

Since September 1, only 29 employees have been tested. NB EMS doesn't understand why people are not getting testing especially since they are paid an hour. The language plan is going into effective in March-April 2015 and if staff are not tested they will be considered unilingual English or unilingual French. English training is the works to start in January 2015.

5. New Items

a. Light Duties (CUPE)

CUPE believes pregnant employees are forced to take all their sick time and have nothing when they come back to work. NB EMS states we do not have light duties however if there are projects available we will bring in medics. Pregnant employees can go on the accommodation list. The accommodation list is available for terms of 6 months or more. Staff can also go on the trauma desk if they meet the language requirements.



NB EMS states that it is possible to ANB staff on light duties to have a term in NB EMS however it would not be an accommodation but a leave of absence. The employee would not accrue seniority while at NB EMS.

6. Next Meeting

The next meeting will be Tuesday, January 13, 2015 at 10:00 am in Fredericton at the CUPE office.

Respectfully submitted and approved by:

Judy Astle, CUPE 1252, Local 4848

Beth Simkins-Burrows, NB EMS