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Federal Council

A CALL to carry on the struggle

After having warmly greeted delegates and welcomed new members within our ranks, the President of the Federation, Jennie Skene, briefly reviewed the questions that were to be addressed during the Federal Council meeting.

"Two months have gone by since the closing of the Convention at which delegates decided not to affiliate to the FTQ and to work instead at developing a FIIQ organization that would be stronger, renewed and adapted to meet the challenges to which nurses, women and workers are confronted. It is clear that after the period of change of union allegiance that we have gone through, the trust which nurses have shown for their union organization encourages us and stimulates us to adopt orientations that respond to nurses' expectations and to equip ourselves with even better tools to deal with the problems that nurses face everyday, while continuing to promote their participation and their union involvement."

The President also recalled that delegates at the last Convention decided that the implementation of the policy to counter violence at work would be a priority in the coming year and, consequently, an awareness-raising tool for all nurses would be launched at the Federal Council.

Mrs. Skene quickly reviewed a number of important questions on which delegates would be called to vote. "The plan of action for the year 2002 that we will present today reflects the orientations adopted at the last Convention, the general context in which we are today and the actions needed to continue improv-

ing nurses' living and working conditions. We will also adopt the financial forecast for the year 2002 which will give us the financial means to carry out the mandates you have entrusted to us."

Concerning the renewal of the group insurance contract, she mentioned that the effects of the deterioration of nurses' health was affecting insurance premiums. Proposals regarding short-term actions to be taken were presented to delegates.

The President also indicated that, during this Federal Council, delegates would receive information and reports on negotiations, pay equity and the nursing workforce plan. Information was also given on the revision of professional practice, with a presentation by the President of the OIIQ on the views of the Order of Nurses on this subject.

In closing her opening address, the President urged delegates to take an active part in these important debates, to work at developing the FIIQ for tomorrow and to pursue together the struggle to defend the right to health and to deliver care.

To work in dignity

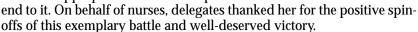
At the Federal Council, a pamphlet was launched in the context of the Federation's information and awareness-raising campaign for the establishment in each institution of a general policy to counter violence at work.

Since the tragic events of December 6, 1989 at *École Polytechnique*, the Federation commemorates this day and invites its members to reflect on violence against women. This year, the FIIQ invites nurses to take advantage of December 6 to do awareness-raising work on the issue of violence at work.

Sent out to each institution, the pamphlet is a good way to begin this awareness-raising work; it defines the various types of violence that exist, thus enabling nurses to better identify them.

Since countering violence is a priority for the FIIQ, all activities and events, such as March 8, May 12, the Annual Health and Safety Week, Federal Council meetings, training sessions ... will be occasions to highlight the determination of the Federation and of its members to put a halt to violence at work and to support the establishment of the policy in the different institutions.

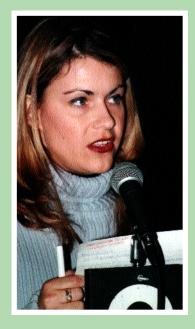
Delegates also took advantage of this discussion on violence at work to pay tribute to a nurse of the CHSLD Trèfle d'Or, Laprairie, Lucie Laroche, who died of cancer on November 12, and who led a difficult battle, in the last year of her life, against the violence faced by nurses in her institution. Her battle was not waged in vain since, after having testified from her hospital bed, before a video camera, stenographer and lawyers, on what she had experienced at the long-term care centre, the employer finally acknowledged the situation of violence that prevailed and took appropriate measures to put an



Delegates also gave their support to the nurses' union of the *Centre hospitalier Anna-Laberge* in their attempt to establish a policy to counter violence at work. Nurses of this institution experienced and decried several cases of harassment and violence in the workplace.



Happy Holiday Season!





Priorities

for 2002

On the first day of the Federal Council, delegates questioned and debated priorities for 2002 in addition to the regular activities of each of the sectors and services of the Federation and then adopted them on the last day of the meeting. Today, in the difficult context that prevails, it is increasingly clear that the FIIQ, as a union organization, must expand and enrich its field of intervention to better meet future challenges and to continue to improve the working and living conditions of its members as women, nurses and citizens. It is in this perspective that the plan of action proposes that all levels of the organization begin examining how the FIIQ's capacity for intervention could be increased.

The plan of action proposed is presented in a context where nurses have reiterated on two occasions, in the course of the past year, their will to remain strong and united under the FIIQ banner. The first time, at the 6^{th} Convention, when delegates dismissed the proposal for affiliation to a central labour organization and mandated their organization to work to expand and enrich its field of intervention. The second time, during the raiding period which has just ended, nurses demonstrated without a shadow of a doubt their feeling of belonging and their attachment to their union organization.

On the other hand, the actions identified as priorities for 2001 must continue during 2002 given the important issues at stake. This is the case for our actions regarding violence against women, and more particularly against nurses, which is increasingly acute in our workplaces. It is also the case for actions concerning the recognition, protection and expansion of the nurse's role. Finally, we will have to devote energy to counter the nursing shortage in Quebec and its serious consequences, in particular on the workload.

Thus, in line with the work done and the struggles waged, the delegates voted in favour of actions and interventions, on the one hand, in an external context marked by globalization, by an increasingly difficult and precarious economic situation and by a climate of fear engendered by the US-Afghan war and, on the other hand, in an internal context where nurses have greater and greater difficulty delivering care, where they are confronted with situations of unacceptable violence, where they feel that their work escapes them more and more. The priorities are therefore aimed, among other things, at allowing nurses to obtain true recognition for their work; to work in dignity; to regain the right to deliver care, and to preserve and broaden their field of work. The delegates therefore mandated the Federation:

- to pursue the work with other unions on pay equity, to determine the pay adjustments needed in order that the true value of nurses' work be recognized;
- to pursue the work around the question of the nursing shortage and the field of practice, in order to promote a better organization of care and better organization of work, while respecting the conditions of practice and working conditions:

concerning the shortage:

- to work intensively at carrying out the nursing workforce planning operation at the local level;
- to continue participating in the work of the Forum national sur la planification de la main-d'œuvre infirmière and the groups working on the follow-up;
- to organize local action on the organization of work and continue to build workload cases in order to influence the factors behind the problems of attraction and retention of the nursing workforce at the local level;
- to play a decisive role in the field of the organization of work in order to expand the scope of union action in the field of labour relations;

Concerning the field of practice:

- to make known to the government the viewpoint of nurses on proposals being considered for the modification of the legislation and regulations;
- to exercise political pressure and speak publicly in order to obtain acknowledgement of how nurses could contribute to the health-care sector by the expansion and enrichment of their role and field of practice.
- to establish a general policy, accompanied by a operational strategy, in view of countering all forms of violence at work suffered by nurses:
 - to give material to local union representatives to help them develop awareness of the question of violence at work by training sessions, informative documents: brochures, pamphlets, posters, buttons...
 - to develop a plan of intervention and mobilization, on an annual basis, by using special moments like December 6, March 8,
 May 12, the Annual Occupational Health and Safety Week and Federal Council meetings.
- to draw up and present at a Federal Council meeting a thought-provoking project for the FIIQ tomorrow in order to launch a process that will call on all the levels of the organization, and that will enable it to meet the current and future challenges.

Nursing workforce planning an urgent task

At the Quebec level

To begin, Daniel Gilbert informed delegates of the outcome of a meeting of the Forum national, that was held last October 26, to take stock of the work planned at the Quebec level. At this meeting, the Federation presented its vision of a true nursing workforce planning process, reiterated its disapproval of the use of an outside firm to carry out the work pertaining to the revision of the organization of work, and repeated that it was opposed to the substitution of nursing personnel by other categories of employees. As a matter of fact, the latter point of view was shared by all the participants at the meeting. Finally, the Federation was informed that three research studies would begin shortly:

 a study that would determine the factors which influence nurses when they choose between a full-time job, a part-time job or the availability list, and then propose strategies to take action on these factors;

- an exploratory study to determine what nurses perceive as advancement or promotion during their career in view of arousing their interest:
- research-action to better understand the issue of young nurses who tend to leave the profession during the first five years of practice. This research would also question nurses at the end of their careers on ways of putting their proficiency to good use.

The FIIQ will be involved in these studies and will follow them closely. It was at this meeting that the AHQ proved to be highly interested in the ILOT (Taking Action on the Organization of Work) material drawn up by the Federation. It will be presented to them very shortly

At the regional level

Generally speaking, in regional boards, work begins very slowly and respects the mandate stipulated in the plan of action drawn up by the Forum national. However, difficulties are encountered in five regional

Nursing workforce planning is a very important question for the Federation, and this issue was on the agenda on the last day of the Federal Council. Daniel Gilbert and Lina Bonamie, both members of the Executive Committee, presented an overview of the question to delegates

boards, three of which have a serious nursing shortage: Montreal, Montérégie, Laval, Lanaudière and Abitibi. The Federation intends to exercise political pressure in these regional boards.

At the local level

Without going over all the elements of the local plan of action presented in the Forum national in great detail, the executive officer in charge of the question, Daniel Gilbert, reminded delegates that the current situation experienced by nurses would only improve if all the elements of good quality of life at work were ensured. Thus, he urged delegates to go over the organization of

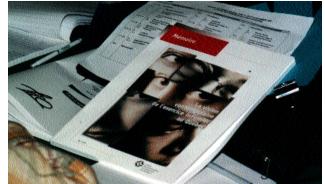
Thus, he urged delegates to go over the organization of work extensively and to fight for lasting and quality solutions, even if presently certain elements unfortunately interfere with workforce planning at the local level. Just think of the anti-deficit legislation and the resulting budget cuts, the improvised reorganization of centres of activities, the substitution of nurses by other categories of employees ...

In order to have a common mobilization strategy in all health-care institutions where the FIIQ is present, delegates adopted the following actions:

- send a letter to all employers requesting a moratorium and a meeting of the Committee on Nursing in order to begin the nursing workforce plan at the local level;
- contestation of the measures implemented by the employer, if necessary;
- use all the seats of power to uphold nurses' viewpoint
- regional meetings of union representatives and unions to share the information on the nursing workforce plans

When adopting priorities for 2002, nursing workforce planning at the local level was identified as being a priority for the organization. Thus, members of local teams will be offered the tools and all the support they need to carry out this mandate. The success of the workforce planning process depends on the involvement and true determination of all parties in the process to settle the problem of the nursing shortage.





A vision for the future of the nursing profession

In the context of the discussions surrounding the future of the field of practice of the nursing profession, the President of the President of the Ordre des infirmières et infirmiers du Québec, Ghyslaine Desrosiers, delivered a speech to the delegation. She presented the major elements of the OIIQ's brief on the contemporary vision of nursing practice in Quebec, a brief presented to the ministerial work group on the health professions and human relations, in the framework of the updating of the professional code.

This brief, available at the office of the OIIQ, deals with the evolving context of the regulation of nursing care, the professional activities provided for in sections 36 and 37 of the Nurses Act, the legalization of the practice of the specialized nurse and nurse practitioner, the cooperation with nursing assistants and nursing care delivered by non-professional caregivers.

In general, delegates reacted warmly to Mrs. Desrosiers' talk and agreed on the importance

of taking part in the discussions on the modernization of the field of practice of the nursing practice. They also recognized the need to update the professional system, though they were concerned by the fact that nursing acts would eventually be granted to other professionals.

The President of the Federation ensured the OIIQ of her cooperation on this question and promised that the FIIQ would keep a close eye on all future developments.

Adoption

of the financial forecast

The Treasurer of the FIIQ, Lise Martel, presented the financial forecast for the year 2002, which was unanimously adopted by delegates. Since the membership has increased, the FIIQ will have a higher revenue next year. However, to fulfill the mandates voted at the Convention, the expenses of the Federation will nevertheless be slightly higher than its revenues.

Remember that, at the last Convention, delegates decided to raise the Negotiation, Solidarity and Federal Council/Convention reserve funds.

The rise in expenses can be explained by the will to respond even more to the needs of members, more specifically by way of the Labour Relations. Indeed, temporary consultant positions were created to help local teams in drawing up local nursing workforce plans. Moreover, to respond to the growing demand for the defence of nurses in occupational health and safety cases, two permanent consultant positions will be added to the existing OHS team.

The Executive Committee will continue to keep a close eye on expenses in order to have a balanced budget. The Treasurer also presented the financial statement as of June 30, 2001. The audited financial statement for 2001 will be presented at the June Federal Council meeting.



Renewal

he fall Federal Council is always the time of the renewal of the group insurance contract, and on the second day of the meeting, the executive officer in charge, Lina Bonamie, and the consultants, Aline Michaud and Francine Tisseur, presented a portrait of the situation to delegates.

At the time of the last renewal of the insurance contract, some of the factors responsible for the rise of the cost of nurses' group insurance plans were identified: for example, the health-care reform, government policy regarding the drug industry and the number of nurses who retire. These factors still have a major impact on the rising cost of the insurance plans today.

Thus, on the issue of drugs, unless there us an important shift in government policy with regard to innovative drugs, that is the adoption of a policy that would promote the production of generic drugs, it is hard to imagine that in the more or less long term the cost of drugs will not continue to rise, pointed out Lina Bonamie.

The executive officer also indicated that the deterioration of working conditions was not unrelated to the increased use of the services of healthcare professionals. The state of fatigue and stress that engender physical and mental problems inevitably lead nurses to make more frequent use of treatements such as massage therapy, osteopathy, physiotherapy and psy-

chotherapy. As for dental care, any upward trend in the current context can only be attributable to incidental elements. Moreover, the benefit most affected by contextual factors, in particular the working environment, is long-term disability.

After a brief review of the various elements of the general context, delegates concluded that the renewal of the nurses' group insurance plan requires that we take into consideration the general context, in addition to the factors directly related to the group insurance plans such as inflation, the aging of the population and the drop in the interest rate for its impact on the return on financial reserves.

Basic drug insurance plan

The Federation's analysis and negotiation with the insurer brought the premium hike down from 28.6% to 23.2%. Remember that since the financial statement (surplus/deficit) for the Basic Drug Insurance plan and Extended Plan III for the year 1999-2000 indicates a \$7,884,090 deficit, there was no bargaining leeway to reduce the premium any further.

On the other hand, there will be no slow-down in the rise of the cost of drugs unless the government takes stiff action and introduces a true drug policy in order to have better control over pharmaceutical companies. Finally, the improvement of nurses' work environment would unequivocally contribute in a significant way to reducing the consumption of drugs by our members.

Basic Extended Plan III

The premium for Extended Plan III, which covers health professionals, hospital rooms, travel insurance as well as the cost of an ambulance, therapeutic equipment, etc., is increased by 24.1%. An analysis of the data indicates that the rise of the cost of this plan is attributable for a large part to the fact that members make great use of the services of health professionals, and in particular those of massage therapists, osteopaths, orthotherapists and kinesiologists for whom the use of services rose by around 30%.

As for psychologists and physiotherapists, the rise is respectively 15% and 10%. Concerning chiropractors and acupuncturists, there is a slight rise in demand for services of around 5%. However, the past experience of the nurse group indicated that chiropractors and acupuncturists were consulted more often than the other health-care professionals.

All these data demonstrate a change in practice among nurses with regard to health professionals which, according to us, better respond to the needs of nurses. In our opinion, this process of change should stabilize and lead to a decrease in the use of the services of other professional groups. In the medium term, this would stabilize the cost of this benefit. Once again, we cannot ignore the fact that the deterioration of disability is also a factor that explains the increased cost of this benefit. Consequently, the rate of increase proposed by the insurer that was initially 24.1%, was reduced to 21.5%.

Extended Plan I: dental care

The dental care plan has been one of the most stable plans to date; however, there is a considerable increase of 21.6% in the contract renewal. After analysis of this information, there is no contextual element that can explain this hike. In this case, the rise in the disability rate cannot explain the greater use of the dental care plan. We can therefore suppose that this hike is incidental or attributable to the use of more costly dental treatments. A more in-depth analysis, on our part, of the data regarding this benefit leads us to the same conclusions as the insurer with regard to the requested adjustment of the reserve.

Despite clear data, the insurer agreed, following representations by the Federation to reduce the premium hike from 21.6% to 19.9%. Note that this benefit has a deficit of \$721,853.

The resource persons also pointed out that an important part of the deficit concerns more particularly the Basic Drug Insurance plan and Extended Plan III, which are affected by government policies: protection of new drugs, budget cutbacks, etc., as well as the situation of nurses on disability.

Extended Plan II: Life Insurance

Basic life insurance

The hike in the cost of life insurance is generally affected by the aging of the participants and by the number of incidental deaths, including the annual suicide rate, and the number of disability cases who are exempted from contributing.

After having proposed a 19.2% rise of the premium, the insurer reviewed our experience over the last three years and agreed to reduce the level of the reserve, therefore reducing the percentage of increase to 10.7%.

Additional life insurance

In the case of this benefit, the factors that explain a 15% increase are the same as the ones of that affect the Basic Life Insurance plan. Thus, for the same reasons as those previously mentioned, the insurer proposed to bring the percentage down to 6.8%.

of the insurance contract

Life insurance for dependent children

Since the experience of the past years does not point to any deterioration justifying a hike of rates, the insurer decided to maintain the rate currently in effect.

Extended Plan II : long-term disability

In order to have a better understanding of the reasons that explain the premium hike for this benefit, the resource persons briefly reviewed the evolution of the premium rate for long-term disability, indicating that in 2001, for example, the renewal of the insurance plan took place in a context where the cost of the drug insurance plan was sky-rocketing. On the other hand, the rate proposed by the insurer for the long-term disability plan was around 0.919% considering the definite upward trend in the number of disability cases. To limit the costs, our claims were that these were probably contextual rather than permanent factors. The insurer therefore consented to bringing the premium rate down to 0.89%. Nevertheless the deterioration trend observed at the time of that renewal, pushed the FIIQ to propose the integration of the RREGOP into the long-term disability benefit, which made it possible to reduce the premium rate from 15% to 0.757%.

The insurer concludes that there was a considerable increase in the rate of disability in the nurses' group. This data justifies, according to the insurer, a 89.5% increase, establishing the new premium rate at 1.434%. Besides statistical data, the insurer also used all the information in the media, studies and public statements by the FIIQ on nurses' dramatic working conditions to support his forecast, elements which we could not really deny.

With the integration of the RREGOP plan in the calculation of the payable pension benefit, we expect that there will be an improvement of the group's experience in the middle term. The application of this new clause will begin in January 2004, and will affect nurses on disability since January 2001 since it is only after three years on disability that the link of employment terminates and that a nurse may be eligible for a RREGOP pension. For the time being, the 15% reduction related to this clause is purely theoretical.

Moreover, the insurer has agreed, from now on, to ensure a follow-up of the situation of new disabled nurses by way of a questionnaire designed to find out on what conditions they return to work. Until now, this was done by the FIIQ and nurses responded to the questionnaire on a voluntary basis. Since only 25% to 30% of the questionnaires were returned, we could not draw any credible conclusions on the proportion of nurses who return to work either progressively with rehabilitation measures or without any measures whatsoever.

Considering that the insurer bears responsibility for long-term disability, besides shouldering in the short term the burden of the premium leave for nurses on salary insurance, the Federation agreed that the insurer require that nurses on disability complete the questionnaire, and that this be compulsory, which will have the advantage of validating the data collected. We hope that this data will confirm a more positive trend of return to work. It is important to point out that the FIIQ will have access to this data, regularly updated, at all times.

Finally, in view of reducing the long-term disability rate and facilitating reintegration in the workplace, it would be pertinent, as soon as nurses benefit from short-term insurance, to agree with employers, the insurer and local representatives on conditions that would promote rehabilitation.. To do this, we will first have to convince the government of the importance of paying for the costs of rehabilitation equipment provided by the insurer and subsequently conclude an agreement on the conditions for the application of the rehabilitation process.

Delegates found it difficult to accept a premium increase for all insurance plans. However, they observed that these increases are based on various factors, several of which are outside our control. In particular, the basic drug insurance plan and the long-term disability insurance plan, are largely dependent on government policies that favour pharmaceutical companies at the expense of consumers, and on the difficult working conditions that result from the acute shortage of nurses. It is thus in this context that delegates accepted the conditions for the renewal of the insurance contract and mandated the Federation to consult nurses in spring 2002 in order to re-examine the content and conditions of the insurance plan.



RATES IN EFFECT AS OF JANUARY 1, 2002

PLAN	RATES	RATE AS OF 01-01-20021	VARIATION
Basic Plan			
Basic drug insurance plan	1^2		
Individual	\$13.76	\$16.95	
Single-parent	\$22.39	\$27.58	+ 23.2%
Family	\$33.57	\$41.36	
Basic Extended Plan III			
Individual	\$3.92	\$4.32	
Single-parent	\$5.73	\$7.00	+ 21.5%3
Family	\$8.47	\$10.33	
Extended Plan I : dental care Individual	\$8.68	\$10.41	
• Single-parent	\$14.34	\$17.19	+ 19.9%
• Family	\$21.27	\$25.50	
Extended Plan II Life insurance and Basic ADD	\$0.31/\$5,000	\$0.34/\$5,000	+10.7%
• Life insurance for dependent children (\$3,000/ children)	\$0.08	\$0.08	0%
Additional life insurance and ADD (per 1,000 \$)	\$0.078/\$1,000	\$0.083/\$1,000	+ 6.8%

Average weighted increase of 40%

- 1 Rate per 14 days excluding the 9% tax.
- 2 Rate including the employer's participation (\$0.92 for an individual plan and \$2.31 for a single-parent or family plan).
- 3 The adjustment does not apply to the cost of travel assistance which is \$0.039.

Agreement on the estimation of pay differences

On December 20, 2000, almost one year ago, the Pay Equity Commission deliv ered a decision ruling that the job evalua tion plan and its application, produced by the Quebec government during the 1990s, complied with the principles contained in the Pay **Equity Act. This** decision stipulated however that the method for the esti mation of the pay differences 1 used by the Conseil du trésor needed to be revised before November 21, 2001 because it had a sexist bias and it did not allow for a fair comparison of the pay scales of female job categories with those of male job categories.

In order to abide by the Commission's decision, the Conseil du trésor proposed that a committee be set up, composed of employer representatives and representatives of the FIIQ, FTQ, CSN, CSQ and SFPQ, to determine a method for the estimation of pay differences that would be discrimination-free.

On October 19, after several months of talks and a very busy fall, the inter-union coalition met the minister in charge of the Conseil du trésor, Mr. Sylvain Simard. The inter-union coalition asked the Conseil du trésor to only table before the Pay equity Commission the guiding principles for the calculation of pay differences, principles to be agreed upon by the inter-union and the Consel du trésor, and to postpone the payment of pay adjustments to the time when the new job evaluation exercise would be completed.

There were different reasons for this request made by the five organizations of the inter-union coalition. For the FIIQ, it was out of the question to ask for pay equity adjustments on the basis of an discriminatory evaluation plan that generated rankings with which it did not agree. All the more so since intensive work is currently being conducted to revise and improve the evaluation plan in order to make it more consistent with the principles contained in the Pay Equity Act.

Moreover, the inter-union coalition did not want the government to pay adjustments on the basis of the current evaluation plan and then publicly assert that pay equity has been achieved. Since all jobs will be re-evaluated on the basis on the revised evaluation plan, it was preferable not to make any adjustment before the process is completed. This would have required two pay adjustment processes and generated a certain confusion among government employees.

In the week of November 5, the Conseil du trésor stated that it was prepared to consider the union proposal and table only the principles behind the method for

the estimation of pay differences. Intensive talks led to the conclusion of an agreement on November 16 and to the tabling of a complementary report by the Conseil du trésor on November 21, 2001.

This new method of estimation represents a major breakthrough for pay equity. While, previously, the Conseil du trésor used the lowest male salary for the purpose of the adjustment of female salaries, henceforth all make salaries will be taken into consideration to calculate the male job pay line. This pay line will be used to compare female job salaries, according to the ranking obtained. The hourly rate, at the maximum of the scales, will be used to compare the salaries. Thus, for example, if the adjustment to be paid at the top of the scale is 1,9%, all the echelons of this scale will be adjusted by the same percentage. With the accord of the inter-union, the Conseil du trésor gave itself until December 31, 2002 to calculate the adjustments to be paid to female job categories

The question of job categories and their gender predominance was also discussed. For the FIIQ, the six job categories are all predominantly female. They are the following: Nurse, Baccalaureate Nurse, Assistant Head Nurse, Baccalaureate Assistant Head Nurse, Nurse Team Leader and finally, Nurse in Outposts or Northern Clinics. This list of job categories was also tabled before the Pay Equity Commission.

Something to follow closely ...

1 For more information on the method for the estima tion of pay differences and its use, we refer you to the insert published in the post-convention issue of FIIQ en Action, Vol. 14, No 3, which is also avail able in PDF format on the FIIQ website at the fol lowing address www.fiiq.qc.ca/equite.html



The FIIQ, still deter mined to review the job evaluation plan used by the Conseil du trésor, is taking an active part in the work of the inter union coalition with the Conseil du trésor. Thus, on October 2, a complete proposal of the evaluation plan (factors, sub-factors and measure) was presented by the FIIQ, the CSN, the CSQ, the FTQ and the SFPQ. It was a first. Indeed, these five organizations had never agreed among themselves on an evaluation plan.

Pay equity making good progress

While the Conseil du trésor analyzed the proposal, talks continued in the inter-union coalition on the weighting of factors and sub-factors (e.g.: should the weight of academic training be 150 or 200 points out of a total of 1000 points for the complete evaluation plan?), and on the investigation methodology (interviews, questionnaires, etc.).

The Conseil du trésor presented a counter-proposal on November 14. The evaluation of this counterproposal was completed by the organizations that are still present in the coalition, inter-union namely the CSN, the FIIQ, the FTQ and the SFPQ. Indeed, the CSQ did not take part in the work on account of the dispute between it and the Conseil du trésor on the question of teachers. It is expected that the pace of meetings

will pick up in the coming weeks in order to complete the work directly related to the plan. Afterwards, the questions related to the inquiries (method of inquiry, sampling, questionnaire) will be discussed and determined.

An agreement for the pursuit of the work on pay equity

For several union organizations, including the FIIQ, the time limits in the letters of understanding on the evaluation of positions were passed or about to be. Following the talks on the method for the estimation of pay differences, an agreement was reached with the Conseil du trésor for the pursuit of the talks until June 29, 2002.

Despite the fact that the Pay Equity Act sets November 21 as the deadline to begin pay equity adjustment payments, it was agreed with the Conseil du trésor that this date did not dispose of the date of the coming into effect of pay adjustments (retroactive pay) nor of the conditions for the payment of these (January 1, 2001 in four equal annual payments for FIIQ nurses).

Moreover, this letter of understanding stipulates that any modification of pay equity programme (evaluation plan, job categories, intervals, ranking, method of estimation, calculation of adjustment) resulting from the work in progress, will be presented to the Pay Equity Commission for approval.

Convinced that the new evaluation plan will make it possible to really take into consideration the specific characteristics of women's work in general, and that of nurses in particular, a strong majority of delegates at the Federal Council ratified agreement.

We must never lose sight of the fact that the former evaluation plan of the Conseil du trésor, that is the one that served to establish the value of nurse and Bacclaureate nurse positions and which the CSQ uses today to demand a new ranking for teachers, does not do justice to several mainly female job categories. This is why it is important to maintain and pursue the current work on the revision of the plan. The FIIQ will work on this issue of crucial importance throughout the year 2002.



Talks with the CPNSSS

In addition to the work on pay equity, the Negotiation Sector conducted discussions with the CPNSSS in order to amend the collective agreement on questions related to parental rights and specific units.

Leave of absence

One of the main amendments concerns clause 22.28 on the maternity leave without pay. In

order to harmonize this leave with the new employment insurance parental rights plan, the employee who avails herself of this maternity leave without pay after her maternity leave will have the choice between receiving immediately her annual vacation leave indemnity or postponing it. Indeed, an employee who began her maternity leave on the date of birth and who later benefited from a maternity leave without pay, could be deprived, for a period of four weeks, of employment insurance benefits,

which can be paid only during the 52 weeks following birth.

Prosthetic Units

The list of institutions offering services on a specific unit was updated in the context of the exchanges with the CPNSSS on the prosthetic units in CHSLDs (Letter of Understanding No. 11, CHSLD agreement). As for the particular conditions for employees on prosthetic units, the CPNSSS definitely refuses to consider any particular conditions despite its commitment to-

wards employees working on these units.

Assistant Head Nurse position

The CPNSSS refuses to extend the effect of the Letter of Understanding on access to Assistant Head Nurse and Assistant to the Immediate Superior positions. It argues that the situation is different from one institution to the other. It claims that in certain institutions this letter of understanding was not applied because, to this day, no assistant head nurse position was posted

while in others the local parties have already agreed on new conditions for the granting of these positions.

In closing her presenta tion, Lina Bonamie stat ed that the talks on the
question of the particu lar conditions for
employees working on a
prosthetic unit and that
of access to positions
will therefore have to be
taken up again and pursued in the context of the
renewal of the collective
agreement.

Neoliberal globalization

BEWARE

In the context of the activity entitled "A minute on globalization", Mr. Robert Jasmin, President of the A ssociation québécoise pour la taxation des transactions financières pour l'aide aux citoyens (ATTAC-Québec), spoke to delegates, eloquently illustrating the strategies used by the supporters of neoliberal globalization to impose their vision of the world and serve their own interests.

Economic exploitation and violence: closely linked

Mr. Jasmin first drew attention on the fact that, in contrary to the views often upheld by neoliberals, violence and terrorist acts cannot be dissociated from the impacts of the globalization of the economy, the will of a state or of those who hold a large part of the world's wealth to impose their vision of economic development on other countries and their habitants. The extreme poverty affecting the entire population of certain regions of the world and the economic exploitation of which they are victims mean that it is impossible for millions of human beings to believe in or hope for a better world, for themselves or for their descent. This harsh reality creates a context conducive to acts of violence and to the development of extremist or terrorist groups.

Putting an end to poverty: possible

If they so wished, the supporters of neoliberal globalization could put an end to poverty in the world. According to certain estimates, the application of a 0,5% tax on financial transactions (referred to as the Tobin tax) would represent a revenue of 360 billion dollars each year, and only 40 billion per year are needed to eradicate poverty from the planet. It is therefore easy to see that besides eliminating poverty, it would be possible to offer health and education services to the most deprived peoples



of the earth and thus provide them with the most important levers to ensure their own development and put an end to exploitation. But this is not the will of neoliberals.

Tax havens: a useful tool for organized crime and... the wealthy

Following the September 11 events, all countries were called upon to examine the bank accounts opened in different financial institutions in order to find and freeze any money that could belong to or be available for terrorist groups. However, terrorist groups have an important instrument, namely tax

havens, to shelter financial resources often obtained through criminal activities. So, why not simply abolish tax havens to prevent terrorist or criminal organizations from holding financial resources to perpetrate, with complete impunity, base and violent actions? Because tax havens are instruments created and used by the wealthy people of the world as a tax shelter for their fortune. In short, this means that tax havens enable the well-to-do to deprive citizens of a part of the money they should normally have and which should serve to pay public health and education services, etc., which citizens have decided to set up collectively and from which everyone benefits, including those who literally steal them by not paying their fair share.

Citizens of the world and not merely consumers!

Monsieur Jasmin reminded delegates that in order to be able to take action, we must first know and understand. We have to be able to make up our own minds on world events. We must remind the members of our democratically elected governments that those they govern and serve are not mere consumers, but full-fledged citizens to which they are accountable... rather than to the credit rating agency. More than ever before, it is up to citizens and their organizations, whether unions, community groups or others to impose their vision of the world; that of a world different from the one that neoliberals want to impose, a fairer world where the respect of human rights prevails over economic imperatives

RREGOP

rate of contribution unchanged

An agreement was concluded with the *Conseil du trésor* setting the rate of contribution to RREGOP at 5,35% for the year 2002.

When the negotiations were concluded in December 1999, the rate of contribution to the RREGOP was set to be 6,20% of the salary for the years 1999 to 2001. Since the year 1999 was almost over when this agreement was reached, participants in the plan had their rate of contribution lowered to 5,35% for the years 2000 and 2001.

The performance of the pension plan in the past years was very good. However, the results are not yet known for the year 2001 and the forecast for 2002 indicates that the results will not be as good. It is therefore preferable to be cautious and to maintain the rate at 5,35%.

However, the rate of return of the plan will be monitored closely in order to readjust the rate for 2003.

Solidarity with the nurses at Héma-Québec

Delegates at the Federal Council voted unanimously to support the struggle of the nurses at *Héma-Québec* in Quebec City, who have been without a work contract for over 28 months and whose employer obstinately refuses to come to the bargaining table.



These nurses, members of the SPIIQ union, are currently exercising pressure tactics. A strike vote was held on November 23 and 94% of nurses voted in favour of the strike.

Thus, if the employer still refuses to negotiate and if nurses are obliged to have recourse as a last resort to strike action, the delegates of the Federation decided to pay strike benefits to each nurse for each day of strike. These benefits will be paid by the Union Defence Fund.

FIIQ delegates strongly hoped that *Héma-Quebec* nurses would win their cause and they sent them a letter of support.

The FIIQ, the choice of nurses Affiliation of new unions to the FIIQ

The executive officer in charge of the Union Organizing Service, Michèle Boisclair, presented a factual picture of the Federation at the end of the period of change of union allegiance. She took this opportunity to describe to delegates the vicious attacks of the other union organizations, and more particularly the CSQ, against the FIIQ. It was the first time, since its founding, that the FIIQ had to face such attacks.

The Federation knew that this period of change of union allegiance would be an important test for the will of nurses to remain united under the same banner, the FIIQ. After seeing the result of the period, delegates concluded: mission accomplished. The choice of nurses was very clear and the FIIQ even saw the number of its members increase by almost 400. The Federation remains the choice of more than 90% of unionized nurses in Quebec.

At the opening of the Federal Council, delegates voted to admit the new unions affiliated to the Federation and their official delegations. At the end of the presentation by Michèle Boisclair, delegates warmly thanked all the union representatives, the personnel and the members of the Executive Committee who worked, more or less closely, to make this period a consolidating experience for the FIIQ.

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