



Special issue on  
negotiations

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# en Action

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## FROM OUR DIVERSITY let's build our unity

"I hope you rested well during the summer, because the year ahead will be very busy." With these words, Jennie Skene, President of the FIIQ, opened the Special Federal Council on the Negotiations, held at St-Hyacinthe on October 19 and 20. She wasn't exaggerating. The waves of votes on the bargaining unit mergers will continue in 2005, thus allowing the Federation to welcome new members. The Negotiation Sector has a lot of work ahead. First, it will have to complete the tabling of our draft collective agreement by formulating the job classification demands that will be adopted at this Federal Council into collective agreement clauses. It will then have to continue preparing for the negotiation of the collective agreement by harmonizing the demands of the health professionals the Federation will represent and to support the local negotiations that will begin in certain institutions.

"Fortunately," she added, "this fall also brings good news." The President then announced the first results available on the bargaining unit mergers. The delegates learned that out of five institutions, four had voted for FIIQ-affiliated unions. "Our teams are working extremely hard and their efforts are being rewarded. This gives us the energy to continue in the waves of votes that are ahead of us. Even when we believe we won't win, we mustn't give up," Jennie Skene insisted.

The President also pointed out that the summer sun did not have a positive effect on the Charest Government. "The fall political season will particularly feature Bill 61 on public-private partnerships (PPP). We are radically opposed to a bill that would weaken Government control over public and parapublic services. The Government has to do more than just hand out contracts. The counter-forum organized by the *Réseau de Vigilance* conveyed this message well." This Forum brought together activists from different fields who decided to continue and strengthen the mobilization against the Charest Government's neoliberal practices. In a similar vein, the President stated that the Federation did not want a tax cut before having a guarantee that adequate investments are injected into health-care, education and poverty reduction, among other priorities.



Jennie Skene also appealed for a show of solidarity in the nursing job classification process. "Let's take this issue as an opportunity to open the way to a more interesting career for our members and full recognition of their experience and expertise."

She concluded by emphasizing the importance of avoiding rifts between current and future members. "Let's find what brings us together instead of dwelling on our differences. Let's find a common denominator. It's important to develop greater cooperation among nurses, nursing assistants, respiratory therapists and the other health professionals who will make FIIQ+ a major union force. From our diversity, let's build our unity."

## A petition to counter violence against women



**Amnesty International** is currently conducting a vast worldwide campaign to pressure governments to make a long-term investment in awareness and education campaigns to counter violence against women. In Quebec, the **Fédération des femmes du Québec** decided to respond to this invitation by circulating the petition as well. The goal was to collect thousands of signatures that will be deposited with the Government of Quebec on December 6, the anniversary of the Polytechnique massacre in 1989.

Lise Martel, the Executive member responsible for solidarity, made the appeal to delegates. She reminded them that the Federation has worked for years to counter violence against women and must continue to do so. "Let's show we care about other Quebec women and sign this petition in large numbers."

To sign the petition, contact your local team before the November 30, December 1 and 2 Federal Council.

# Job classification

## FOR A NURSING PRACTICE RICH IN POSSIBILITIES

Nursing practice is at a turning point in its evolution and the job classification demands should reflect workplace realities. This is the conviction that motivated the members of the team who worked on this issue.



One of the objectives pursued through the development of this first professional career path model was to recognize the place of college and university trained nurses, not only through a job title but especially through the related roles, tasks, functions and responsibilities. This meant recognizing each nurse's place as objectively as possible.

The approach of determining job titles based on roles, tasks, functions and responsibilities instead of the place of practice is also intended to allow the establishment of a fairer and more equitable salary structure for all nurses in the network. This is the reason for the elimination of the Baccalaureate Nurse job title. Far from negating the value of the Bachelor of Nursing Degree, this will allow nurses with this academic training to benefit from the university salary scale, as is currently the case for some of them, or to benefit from another salary scale based on the job title in which they could be reclassified.

Finally, on the whole, the proposed model will assure a nursing practice rich in possibilities and challenges, a stimulating and attractive nursing practice for all Quebec nurses.

*Lina Bonamie, Executive officer responsible for the negotiations*

a new  
model

objectives  
pursued

The nursing job classification issue is the final stage in the preparation of the draft collective agreement which the Federation intends to defend in the next round of negotiations. We should remember that the demands are based on six priorities, that is the *restructuring of work time, stabilization of positions, maintenance and development of competencies, prevention of violence, accelerated settlement of disputes, and access to child care in the work environment*, that were already tabled in July 2003, and that the salary and pension plan demands were deposited in March 2004.

Since June, a fourth and final consultation of members was held on the basis of the 45 recommendations proposed by the Executive Committee at last May's Federal Council. Following this consultation, more than a hundred amendments and new resolutions were received and debated at the Federal Council, in addition, of course, to the recommendations that had been proposed by the Executive Committee.

The delegates adopted the proposed model almost in its entirety, thus, completing the draft collective agreement.

Before going any further, it is appropriate to recall the objectives pursued and the guiding principles behind the development of the clinical professional career path model for nurses.

We should remember that the nursing job classification study results from the mandate prescribed in the *Letter of Understanding on the classification of nursing jobs* in the collective agreement, the requirements giving access to the different job titles and the match between nursing functions and the academic training acquired. The recommendation adopted by the delegates in November 2002, to review the process of awarding positions so that nurses' experience and expertise are considered at their fair value, also had to be translated into demands.

In the performance of these mandates, the Federation adopted the objective of making corrections to the difficulties identified in the past several years. Thus, the implementation of solutions to the problems related to access to positions and recognition of the value of each type of knowledge (knowledge, know-how, savvy) in the process of awarding positions became imperative. It also appeared very important to assure more judicious use of nurses' competencies and increase the remuneration for additional education and in-service education.

For the Federation, the achievement of these objectives, in addition to providing solutions to recurring problems, would make it possible to increase the clinical career opportunities for all nurses, thus heightening the attraction and retention of nurses on the job market.

This clinical professional career path model was produced on the basis of the findings regarding the trends in nursing practice, the literature review, data collection based on nearly 1500 job descriptions and job postings, and the job classification survey questionnaires.

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# 6 principles

After this work, it appeared essential to illustrate concretely the clinical career path possibilities that could be available to nurses. This model had to correspond to the realities of the work environments, meet nurses' concerns and take into account the evolution of the nursing profession. Six guiding principles were then identified and became the cornerstone of the model.

taking into account the evolution of the nursing discipline, nursing practice, professional review and new training programs. This reality gave rise to the idea of consolidating nursing practice into two main families: generalist nurses and specialist nurses.

## Second Principle

THE MATCH BETWEEN THE ROLES, TASKS, FUNCTIONS, RESPONSIBILITIES AND KNOWLEDGE ACQUIRED BY NURSES FOR EACH JOB TITLE. There should thus be a concordance between the requirements formulated by the employers and the nature of the roles, tasks, functions and responsibilities specific to each job title. The adequate use of the nurses' full potential should also be favoured. This is why some job titles were grouped together and new ones were introduced.

## Third Principle

IMPROVEMENT OF ACCESS TO THE DIFFERENT JOB TITLES. Gateways between job titles were introduced to avoid segmentation, division and compartmentalization of nursing practice. The notion of equivalency of experience to compensate for missing years of education is suggested when awarding positions in certain job titles.

## First Principle

THE CONSOLIDATION OF JOB TITLES BASED ON THE DIVERSIFICATION OF NURSING PRACTICE. This means

## Fourth Principle

PREPONDERANCE OF SENIORITY IN AWARDING POSITIONS. The aim is to limit management arbitrariness and make the position granting process more objective by minimizing and in some cases eliminating the subjective, exaggerated, abusive and unjustified criteria.

## Fifth Principle

REMUNERATION FOR ANY ADDITIONAL EDUCATION, REGARDLESS OF WHETHER OR NOT IT IS REQUIRED BY THE EMPLOYER. Since nurses integrate their knowledge into their everyday practice, this added value in care delivery should not only be recognized and revalued, it should also be remunerated.

## Sixth Principle

ESTABLISHMENT OF SALARY SCALES BASED ON ROLES, TASKS, FUNCTIONS AND RESPONSIBILITIES. This way of determining salary scales would eliminate any unfairness between two nurses who, in fact, perform the same roles, tasks and functions and assume the same responsibilities. However, for the job titles of Nurse Assistant to the Immediate Superior and Care Counsellor Nurse, for which the notion of equivalency of experience is introduced, it is still important to specify that for remuneration purposes, the recognized level of academic education is the Bachelor of Nursing degree.



## CLINICAL CAREER PATH MODEL

GENERAL NURSE		SPECIALTY NURSE
<b>Nurse</b> <ul style="list-style-type: none"> <li>• CEGEP degree</li> </ul>	<b>Assistant to the immediate superior</b> <ul style="list-style-type: none"> <li>• Bachelor's degree</li> <li>• Evaluation grid</li> </ul>	<b>Specialty nurse clinician</b> <ul style="list-style-type: none"> <li>• Master's degree</li> </ul>
<b>Nurse team leader</b> <ul style="list-style-type: none"> <li>• CEGEP degree</li> </ul>	<b>Care counsellor nurse</b> <ul style="list-style-type: none"> <li>• Bachelor's degree</li> <li>• Two years experience</li> <li>• Experience equivalence</li> </ul>	<b>Specialty nurse practitioner</b> <ul style="list-style-type: none"> <li>• Master's degree</li> </ul>
<b>Outpost/northern clinic nurse</b> <ul style="list-style-type: none"> <li>• CEGEP degree</li> </ul>	<b>Clinical counsellor nurse</b> <ul style="list-style-type: none"> <li>• Bachelor's degree</li> <li>• Four years experience</li> </ul>	
	<b>First surgical assistant nurse</b> <ul style="list-style-type: none"> <li>• Bachelor's degree and certificate in peri-operation care</li> <li>• 3 years experience in O.R., including one year in the surgical field in point</li> </ul>	

## A BROAD CONSENSUS

Fundamentally, the proposed professional career path model was the object of a very broad consensus. All the recommendations proposed by the Executive Committee were adopted by a very large majority of the delegates after discussion.

However, some recommendations were amended. This essentially involved clarifying the definitions of certain job titles, establishing that the specific training costs required would be assumed by the employer, and assuring union monitoring during the process of reclassification and integration of employees into one of the projected job titles.

All these demands will therefore translate into the draft collective agreement and then be tabled, in the next few weeks, with the Comité patronal de négociation du secteur de la santé et des services sociaux. For the Federation, the conclusions of the nursing job classification issue undoubtedly respond to the collective interests of Quebec nurses.

## EQUITY



## THE WORK RESUMES

Richard Beaulé, spokesperson for the negotiations, and Sophie Fontaine, responsible for the pay equity issue, explained to delegates that since the return from vacation, regular meetings have been held between the Intersyndicale and the Conseil du trésor to determine the legal and functional framework that will allow resumption and conclusion of the work on pay equity, under the best possible conditions and as soon as possible.



## Government and employer "OFFERS": Unanimously REJECTED

Sharing their completely justified disappointment, Richard Beaulé, spokesperson and coordinator of the national negotiations, and Linda Perron, also coordinator of the negotiations, presented the "employer offers" for the renewal of the members' collective agreement.

### Employer demands

Linda Perron, coordinator of the negotiations, explained the offer tabled by the *Comité patronal de négociation du secteur de la santé et des services sociaux (CPNSSS)*. The employer associations, represented by the CPNSSS for the purposes of the negotiations, set out their demands without really being concerned about responding to those the Federation had deposited in July 2003. Divided into five main themes, the employer proposals are to the following effect:

### A contestable financial framework

Beginning with the financial aspect, Richard Beaulé explained that the overall financial framework adopted by the *Conseil du trésor* for this round of negotiations provides that, over a six-year period, the adjustment of remuneration cannot exceed 12.6%. This 12.6% includes, in particular, the general percentage of increase, pay equity corrections, premium adjustments and improvements to working conditions and pension plans.

TABLE 1: THE PROPOSED WAGE RAISE:

April 1, 2004 to March 31, 2005	To be determined
April 1, 2005 to March 31, 2006	To be determined
April 1, 2006 to March 31, 2007	2%
April 1, 2007 to March 31, 2008	2%
April 1, 2008 to March 31, 2009	2%
April 1, 2009 to March 31, 2010	To be determined

For the "To be determined" years, the *Conseil du trésor* explained that the applicable rate will be established according to the amounts spent for equity, pensions, etc. This *Conseil du trésor* proposal could thus be a freeze for the years 2004, 2005 and 2009.

### A pernicious combination

This government proposal heinously combines two distinct issues: pay equity and salary increases. For the Federation, it would be inconceivable for the correction of salary discrimination to limit the rights of all employees, both men and women, to fair salary increases that protect them against inflation and give them a share of the growth of collective wealth. By combining these two issues, the Government is denying the right to pay equity and reducing it to a bargaining issue. It is clearly showing that it does not intend to pay the fair costs of pay equity.

### Persistent vagueness

The Government also proposes to limit the use and level of availability premiums, psychiatry premiums and other similar premiums to the inconvenience suffered. It also wants to revise the regional disparity plan with the objective of facilitating the attraction and retention of a sufficient number of competent staff. Finally, regarding the RREGOP, the Government is satisfied to put off its response until after the tabling of the RREGOP actuarial valuation, expected for this fall.

#### Look for ways to improve the supply of work

No concrete means are proposed by the CPNSSS. At most its representatives invite the Federation to engage in exchanges and discussions on the means to be favoured to promote greater presence at work by the personnel in the network. There is reason to fear that the means preferred by the employers to achieve this goal will differ from those put forward by the Federation.

#### Simplify the application of the collective agreement

For this purpose, the CPNSSS proposes, in particular, the amalgamation of the collective agreements (CHP – CLSC – CHSLD – EPC – CR – CPEJ – Local network development agencies), standardization for all collective agreements in the network of major plans such as job security, parental rights, social rights and recognition of managers' seniority. On the other hand, nothing guarantees that this standardization will be favourable to the employees.

#### Review the salary insurance plan

For this purpose, the CPNSSS proposes to extend from 15 to 130 working days the period required for an employee to requalify for salary insurance benefits. It also proposes that the return to work procedure be initiated by the employer simply on the basis of a doctor's opinion. The tighter control the employers would like to exercise over employees on salary insurance is disturbing.

#### Favour more efficient management of human and financial resources

Always looking for ways to reduce the costs, the CPNSSS is asking, among other measures, that deferred payment leave can only be taken at the end of the contribution period, that arbitration expenses be shared equally between the employer and the union, and that the prices of meals taken at the institution be indexed. On the pretext of managing public funds adequately, the employers would like to pick away at acquired rights and make union members and their unions bear the costs of the employers' mismanagement.

#### Review and update the job titles

The CPNSSS has not formulated specific demands on these matters. However, it has stated its intention to adapt the nomenclature of the job titles in the light of Bills 30 and 90. It also questions automatic reclassification in the Baccalaureate Nurse job title. It is important to point out that the CPNSSS had not yet studied the professional career path model which the Federation will table shortly.

### ... and decentralization?

A few hours before the Federal Council began, the CPNSSS had presented a document to the Federation presenting its vision of decentralization. The employer associations are seeking to take maximum advantage of Bill 30. They are proposing to carve large slices out of the collective agreement to give the local parties the responsibility to negotiate, institution by institution, provisions that have been the object of historic gains, such as travel, prohibition of split shifts, stability of shifts, etc.

Lina Bonamie, 4<sup>th</sup> Vice-President and Executive member responsible for the negotiations, expressed the following conclusions on the "offers" presented by the Government and the employers. "Despite the Government's fine speeches about the importance of human resources in the health and social services network, we can clearly see that it proposes nothing that would improve nurses' working conditions and conditions of practice. Ignoring all the work done on nursing workforce planning, the employers propose nothing that could favour attraction and retention of nurses. Let's send them a clear message: No to even greater deterioration of our working conditions, no to financing the cost of pay equity from our salary increases, no to smashing our collective gains."

The Federal Council delegates then unanimously rejected the monetary proposal made by the Government of Quebec on June 18 and the demands tabled by the CPNSSS on June 21.