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attacking nursing
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Organization of work: from the Quebec table to the steering group

Organization of work is more than ever at the centre of preoccupations for the players in the health and social services network. In fact, it is the most promising route to meet the challenges concerning nursing and cardio-respiratory manpower. There are different work groups to discuss the most pertinent measures to retain on this subject, such as consensus building tables, steering groups, work sub-committees, etc. Obviously, the FIQ, as the representative of care professionals, sits on these work groups.

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RREGOP,
answers to your
questions

2010 World March of Women

Last October, 136 women, from 48 countries, met in Galice, with an eye towards the 2010 World March of Women which will take place across the world from March 8 to October 17, 2010. This march will be held in Quebec from October 12 to 16, 2010 and will close on October 17 with a day of activities. Mark your calendar and start training! Check the FIQ web site for all the details. ■

“We will be marching
until all women
are free!”



JAMES LOVE, HUFFINGTON POST

Economic crisis: an ineffective cure

The lockout imposed by Quebecor on the workers at the *Journal de Montréal* shows that from high in his ivory tower, the emperor, Péladeau has learned nothing from the current economic crisis. The method is well known, it has been used for more than thirty years, by the leaders of businesses who have been able to profit from the increased complicity of governments in order to fill their coffers.



Since the beginning of the lockout of the *Journal de Montréal* employees, many, including the very prosperous Karl Péladeau, have criticized the union asking that it become more “modern” and “adapt to change”. The current crisis however indicates that it is the enterprise that needs to be more modern and adapt to change. Inflicting setbacks on workers in the name of the economic crisis is the same as prescribing two packs of cigarettes a day for a lung cancer patient as part of his care.

And this is another good example of an employer who is trying to run down employees in the name of profitability of his business, as if it is the only solution to staying in business. The logic, as twisted as it is absurd, is the following: reduce salaries and working conditions which will bring more profits, profits which would later be distributed to the employees... never! In the worst of cases, they maintain the privilege of receiving a salary for a few years until it is once again time to reduce it, if not, it will be outsourced where other people will have to accept the same logic before suffering the same results.

It's the thing heard everyday throughout the media, in the studies of supposed experts who all want to sell the idea that unions must become more “modern”, “adapt to change” “follow the prevailing winds or turn into dinosaurs”. This model promoting what is good for business and the private sector is good for everyone is falling apart before our eyes a little every day.

Because, the economic crisis we are currently experiencing is directly related to the societal model that Mr. Péladeau and some naysayers, who are fewer and fewer in numbers, are trying to defend. Thanks to this model, companies have obviously succeeded in making lots of profits by continually reducing the salaries and working conditions of their employees, as well as by seeing that fiscal contributions are blended with the State. The staggering sums thus released are

then steered to the pockets of the elite leaders, to fiscal paradises and to new financial products that should repeatedly multiply the value of the investment. Faced with the perspective of a short term windfall of profits, easily accessible and apparently without limits, the old world masters have however forgotten several small details.

For the wheel to turn, the private sector needs people to use the products manufactured by impoverished workers. However, the salaries and purchasing power of Canadians has stagnated since the 1980's. If, in the short term, consumption can be supported by credit, it has a limit, a limit which seems to have been already reached. The private sector also needs accessible and quality public services in order to benefit from a qualified, educated and healthy workforce.

Now, the private sector is itself managing to doggedly fight to privatize public services and make a profit from still undeveloped human activity sectors. For example, in the United States, the bills from health-care services are the main cause of family bankruptcies and companies are no longer solid enough to pay the group insurance plans of their workforce. Nevertheless, the 1929 economic crisis and the Great Depression that followed demonstrated that the financial world needs guidelines to protect itself and to protect its natural instinct of seeking short term profit regardless of the consequences. To make this reality

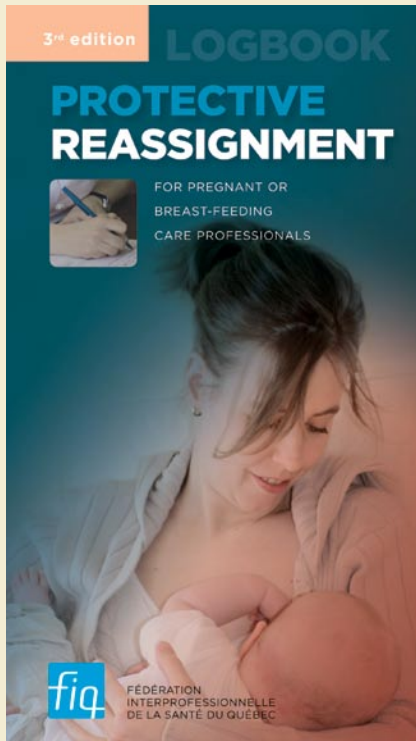
an abstraction can only lead to the emergence of speculative bubbles that will burst sooner or later.

Lastly, for the wheel to turn, the private sector needs a motivated and productive workforce, which cannot happen if their rights, job satisfaction and quality of life continue to be undermined.

In the current context, where the market is slumping a little more every day and drags millions of workers in its wake, many still prosperous enterprises today try to be paid for their own mistakes. On the one hand, from workers, by asking them for new concessions, and on the other hand, from the masses by asking the State to look after them today when they wanted nothing to do with them yesterday.

Now that the myth, “when I take everything the world profits” has been broken down, it is time to turn the page and start a new era. Indeed, the FIQ thinks that the current context is offering an exceptional opportunity to put the values that it shares and defends so ardently into the heart of the priorities of today's world. Moreover, the boycott of the *Journal de Montréal* is an excellent way to start the change. ■

Lina Bonamie
President



Protective reassignment: a new edition of the Logbook!

The Federation recently published the third edition of the *Protective Reassignment Logbook for pregnant or breast-feeding care professionals*. Completely revised and updated, this new edition contains much useful information on the rights and recourses for the worker concerning protective reassignment, assignment and payments. If your work environment contains hazards for you, because of your pregnancy, or your unborn or breast-feeding child, you can make a request for protective reassignment in order that your employer assign you as quickly as possible to duties exempt from all risks. This preventive measure allows you to have a safe work environment. Thus, being pregnant or breast-feeding and continuing to work can be easily reconciled.

Obtain a copy of the Logbook from your local union team for more information. It can help and support you in your steps. You can also download the pdf version on line at www.fiqsante.qc.ca/documents_publications/documents/RPTE-RPTA_carnet_0902_f.pdf. ■

PPP's

Think people are gullible

Monique Jérôme-Forget, Quebec Finance Minister, thinks that the famous public-private partnerships (PPP) have only advantages that we cannot pass up. According to her, the main benefit of the PPP's is that the risks are transferred to the private sector which has to finance, design and operate a public infrastructure for a given period of time. The State is thus content to pay a rent for leasing the infrastructure and services offered by the private institution and does not have to spend a large sum of money on credit to finance the project. Apparently, a solution where everyone would win...

However, must we remind everyone that the one and only objective of private enterprise is to make money? It is well known that those who submit private tenders over-estimate the risks when writing up the contract which increases the State's bill who has to spend more than if it had carried out the project itself. For this reason the current economic crisis considerably reduces the chances that businesses can obtain credit to finance these projects. Interest rates are very high when credit is available. Consequently, the PPP's are now much less attractive for private promoters.

Thus, with regard to the building of the new Montreal Symphony Orchestra chamber within a PPP, the government decided to go into additional debt of 75\$ million to finance... the project of a private promoter! The State's debt is increased to finance a service which will cost more; the State assumes the losses and private enterprise assumes the profits, that is how to steal from the poor and give to the rich!

Determined to permanently bind it to the population, the Charest government intends to increase the number of PPP projects in healthcare, in particular in long term residential care. For example, the PPP project for a centre d'hébergement de soins de longue durée (CHSLD) (long term residential care centre) within the CSSS Champlain turns the screw just a little harder: the institution will not be the property of the public network at the end of the contract and private care will be offered. This new type of CHSLD as a PPP is supposed to happen in Châteauguay, Granby and Saint-Jean-sur-Richelieu, all in the Montérégie region.

The FIQ, in collaboration with opponents of the privatization of health care, intends to step up its efforts to put an end to this deception. Quebec society certainly does not have the means in the current crisis to drain the treasury for an obscure tenderer. ■

International Women's Day

United, mobilized and moving forward! is the theme retained this year by the *Collectif 8 mars* to celebrate International Women's Day. On this occasion, the *Intersyndicale des femmes*, of which the FIQ is a member, is proposing a reflection on the dangers that right-wing policies represent for women and on the importance of being united and mobilized to fight against them.

Why are right-wing policies which have attacked women for some time now dangerous? For the new religious right-wing, which includes such groups as *REAL Women of Canada*, feminism and homosexuality represent WRONG and must be fought against and eliminated. The mission of these groups is to save the family and re-establish society's basic morals.

For the right-wing, the solution to all social woes is the return to traditional values and the "natural" order of things. This means that in the family domain, the man is the head of the family and the woman is the one who works at home. In the social domain, it implies that

State intervention is reduced and that each individual is left the task of making his own way. May the strong survive!

Thus, to celebrate March 8, the *Intersyndicale des femmes* wants to reaffirm that united and mobilized, women are sure to move forward. The struggle against injustice is the engine of social progress. It is because of the past struggles of women that today's women have more equality and benefit from such measures as paid maternity leaves, subsidized daycares, salary equity, abortions and access to professions that were once reserved for men.

WE, the Quebec's women's movement, will not tolerate...

...setbacks on matters of salary equity

United and mobilized we will not tolerate setbacks that the right-wing wants to impose on women concerning equality at work, particularly as concerns salary equity. This is nevertheless the effect of the Harper government proposal, included in his recent budget. They are preparing to abolish recourse to the mechanisms of salary equity for federal civil servants, provided since 1977 in the Canadian Human Rights Act (CHRA). Yet, women's salaries in these sectors are only 70.5% of those of men.

A work group considered this question and arrived at the conclusion that the CHRA be replaced by a pro-active law on salary equity. However, there is no question of this for the Harper government, because women are equal, they do not need a law on salary equity! According to the government, it is the responsibility of employers and unions "to negotiate fair and equitable salaries for all employees". That being said, salary equity is not a negotiable subject. Respect of such a basic right cannot rest on the fate of collective negotiations.

...freedom of choice is threatened

United and mobilized we will not tolerate the announced setbacks in the field of freedom of choice concerning abortions. During the election campaign, Prime Minister Stephen Harper promised not to re-open the issue of the right to an abortion. However, at the November Conservative Party Convention, representatives adopted a motion demanding passage of a law which would

Huguette Latulippe / Promotion inc.
Illustration : Marie-Eve Tremblay, colagene.com



impose heavier penalties on individuals who take the side of pregnant women and cause harm to the foetus. Justice Minister, Rob Nicholson, announced that he would present such a bill.

Remember that in the United States, such bills have been the spearhead of religious fundamental groups and have led to even more repressive legislation. In Texas, for example, where the legal provisions protect the foetus, a young man will serve a double life sentence for having helped his 16 year-old girlfriend abort, when she was pregnant with twins and desperate because she was unable to obtain a legal abortion.

...cutting subsidies to women's groups

United and mobilized, we will not tolerate the various attempts by the right-wing to abolish or cut funding to organizations which have helped women for centuries make gains and improve the situation of women. Organizations, such as REAL Women of Canada, demand the abolishment of Status of Women Canada, maintaining that it serves "to promote feminism".

The Harper government in 2006, already cut funds to women's groups dedicated to the defense of rights, which mainly did research work or lobbying activities to bring about changes in the laws. In Quebec, editorial writer, Claire Ravary, in the September issue of *Châtelaine*, called for the abolishment of the *Conseil du statut de la femme (CSF)*. However, women's groups across Quebec obtained a promise from the Minister on the Status of Women that she would not touch the CSF.

...questioning public services

United and mobilized, we will not tolerate the ideology of the new right-wing in which public services offered by the State are a "socialist" wart within western countries and they should be entrusted to the private sector. The negative effects of privatization of public services, particularly health-care services, are felt chiefly by women.

When the length of the hospital stay is reduced, public services no longer offer home care for the person with a loss of autonomy and private services are too expensive, it is women, in 75% of cases, who are called upon

to meet the needs of the family member. Sometimes this requires them to quit their job which has a negative effect on their financial independence.

UNITED, MOBILIZED AND MOVING FORWARD

Women have made a lot of progress since the Second World War, progress that resulted from collective struggles. Women gather and mobilize in their work place, in their neighbourhood, often for years, in order to bring about changes in laws, to obtain rights that were refused them, to have access to the job market and to be treated with equality.

Yet, twenty-seven years after Canada ratified the United Nations Convention for the elimination of all forms of discrimination against women, women are still not treated equally. Together, we must remain united and mobilized to stop the right-wing trend that is blowing through our societies and which wants to set us back 40 to 50 years in the past. Together, we will move forward towards equality. ■

Martine Éloy, Union Consultant
Status of Women Sector



Organization of work

(cont'd from cover page)

It was in this capacity that the Federation participated in the work of the *Table nationale de concertation sur la main-d'œuvre en soins infirmiers* (Quebec consensus building table on nursing manpower) from September 2007 to March 2008. The mandate of this table was to identify concrete actions that could relieve the shortage. In fact, the objective was to target measures that would reduce recourse to mandatory overtime and personnel from private agencies by intervening in organization of work, both at the Quebec level and the regional or local level. Although the organizations sitting at the table did not agree on the final content of the report due to an obvious lack of thoroughness, nevertheless, some of the proposed solutions are interesting.

The measures announced by the Minister of Health and Social Services on June 17, affect several domains. They provide for the creation of a programme of clinical support for nurses and nursing assistants with less than three years experience (preceptorship), integration of nursing assistants into the scrub nurse role in operating rooms, setting up a training programme in perioperative care and first assistant as well as setting up a nursing workforce plan. There will also be a creation of 115 specialty nurse practitioner positions in first-line care, granting of budgets to purchase small equipment, financing of projects aimed at improving clinical supervision, the determination of optimal ratios concerning incumbency of full-time positions as well as experimenting with the arrangement of work schedules and measures aimed at improving the work climate.

The implementation of these different measures requires a strong presence of the Federation, especially for the follow-up which must be done. This is why the FIQ has been actively participating on the nursing steering group over the last few months. Extension of the consensus building table, the nursing steering group was set up in the fall of 2008 in order to follow through with the discussions and follow-up the implementation of the nursing manpower strategy. Besides the measures and projects announced in June, this group is also examining several additional files, such as the initiation of the work of the sub-group on the roles and responsibilities of the care team, continuing education of nurses, follow-up of the steering group on respiratory therapy and the one on beneficiary attendants, updating of data concerning nursing staff levels, exchanges on news items, etc..

Also, this location enables us to verify the progress of another measure announced at the beginning of last summer: funding of several local and regional projects on organization of work. These projects

ORGANIZATION OF WORK (CONT'D) ACTION AND CONSENSUS

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are supposed to be handled in a parity manner and are aimed at identifying innovative practices which can inspire other institutions, in order to counteract recourse to overtime and agency personnel. They are primarily planned in the home care, critical care and residential care sectors.

Thus, more than twenty projects (also called action fields) have been started or are in the process of being started, and this, throughout most of the regions in Quebec. Here are some examples:

Capitale-Nationale region: optimization of organization of work in the emergency departments of the CHA, particularly concentrating on work of an interdisciplinary nature and the optimal use of the competencies of the contributors, and by reviewing the roles and responsibilities of each one, the work schedules and the admissions and discharge procedures in the emergency department.

Estrie region: regional project aimed at optimizing organization of work in long term care, substantially by reviewing the structure of the care teams as well as sharing the roles and responsibilities between the different contributors and staff involved.

Montréal region: re-organization of work of nursing care in home care at CSSS Sud-Ouest Verdun, for example, by revising the methods of giving care and by introducing nursing assistants.

Lanaudière region: implementation of an interdisciplinary method of organization of care and services in a context of a living environment/care environment, centered on the residents and their families needs, in particular by revising the roles and responsibilities of the contributors, by updating the work processes and clinical tools, by re-examining the structure of positions, by identifying the manpower plan and questioning the clinical role of managers.

Obviously, the proper flow of these projects is not a foregone conclusion in all cases, because the outcome of the discussions surrounding the start-up of the projects and their deployment (for example as to the tools used to analyze the organization of work or still the setting up of committees that are truly representative and parity in nature) is directly related to the quality of the management-union relationship in the institution. In the cases where the discussions have been difficult, the Federation has not hesitated to intervene with the Minister Of Health and Social Services in order that he pressure the recalcitrant employers. It will be the same throughout the 18 months that the projects run. The FIQ hopes that these initiatives, like all the other measures retained, will enable real advances in the challenges that the manpower situation poses. A file to follow. ■

Brigitte Doyon, Union Consultant
Task and Organization of Work Sector

The TRAC'S (Regional action and consensus building tables), do you know about them?

The FIQ and its affiliated unions have worked for several years to implement the regional action and consensus building tables (TRAC). Today, twelve TRAC, covering specific territories, are now active throughout Quebec.

The role of the TRAC is to enable better dialogue between the unions in each territory, to increase mobilization and solidarity and, lastly to give regional colour to the struggles run by the whole organization. It is clear that in the current context, union action must be carried beyond just the work place.

The TRAC's are therefore a place to develop solidarities between the various FIQ unions in the territory and to join in social and community actions with other organizations. The unions, however, cannot campaign on all fronts and it therefore belongs to each table to give themselves a plan of action.

Each of the twelve regional tables have established their priorities. Whether to develop solidarities between the different FIQ unions or to increase the FIQ'S visibility in the region or still to join in citizens' struggles, the actions are moving along.

The FIQ is asking its members to find out about the planned activities by the TRAC in their region through their union. There can never be too much solidarity.



Contribute regularly.
Retire easily.

A small contribution to the Solidarity Fund QFL RRSP with each paycheque is all you need to enjoy the simple pleasures of retirement.

EXAMPLES OF PAYROLL DEDUCTIONS WITH IMMEDIATE TAX REDUCTION FOR A TAXPAYER WITHOUT A DEPENDENT 2009 taxation year* (26 pay periods)					
Taxable income from	Contribution per pay	Tax savings (approx.) Credits + RRSP		Net pay reduction (approx.)	Total invested per year
\$16,000 to \$38,399	\$40.00 \$100.00 \$192.31	\$12.00 \$30.00 \$57.69	\$11.40 \$26.50 \$54.81	\$16.60 \$41.50 \$79.81	\$1,040 \$2,600 \$5,000
\$38,400 to \$38,831	\$40.00 \$100.00 \$192.31	\$12.00 \$30.00 \$57.69	\$13.00 \$32.50 \$62.50	\$15.00 \$37.50 \$72.12	\$1,040 \$2,600 \$5,000
\$38,832 to \$76,799	\$40.00 \$100.00 \$192.31	\$12.00 \$30.00 \$57.69	\$15.36 \$38.40 \$73.85	\$12.64 \$31.60 \$60.77	\$1,040 \$2,600 \$5,000

* Note that the income tax brackets and tax rates used are estimates as of August 14, 2008.

Your local representative (LR) can help you enrol in the Fund's RRSP. Ask your union or **Alain Desrochers**, FIQ coordinator at the Fund, for the name of the LR in your workplace.

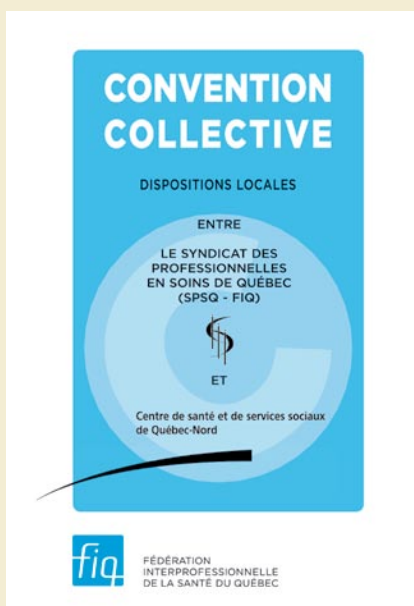


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Share value fluctuates. For detailed information on the Fund's shares, please consult the prospectus available at our offices and on our Web site.

The challenge of local negotiations

The last few years for the Federation and its affiliated unions, have been concentrated mainly on the huge challenge of succeeding in the intensive round of local negotiations imposed by the liberal government of Jean Charest, following the passing of Bill 30 in December 2003. Remember that this law forced the merger of union certifications in the health and social services network and that it decentralized the negotiation of 26 matters to the local level.



Thus, the employers and unions, who had little or no expertise in undertaking a round of local negotiations, had to get up to speed. Although each negotiation legally involved an employer and union of a given institution, the FIQ, for the first time, had to lead and support more than one hundred negotiations within a very short time frame.

This work involved many contributors and required constant vigilance in order to maintain rights and to include the members' demands and the reality of each institution in the local collective agreements. To start their local negotiations on the same foot, all the unions received specific training, the services of a FIQ spokesperson and a draft local collective agreement as a point of departure.

As of the end of February 2009, 138 negotiations have been concluded with agreements, 4 with arbitration decisions, 5 are still ongoing, 3 are in the mediation process and only 1 is in the arbitration process. The status quo was maintained in the majority of institutions and several obtained gains. As with any negotiation which takes its own course, this operation ran smoothly for some while it was more difficult for others.

THE CSSS DE QUÉBEC-NORD: AN EXAMPLE OF A SUCCESSFUL LOCAL NEGOTIATION

The local negotiations for the Syndicat des professionnelles en soins de Québec-Nord (SPSQ-FIQ) lasted one year and ended with an agreement. The members of the local negotiating

committee, Johanne Pearson, Nicole Philippon and Line Simard, say that they are very satisfied with their negotiations. According to them, several factors made the process easier: the employer's intention to sign an agreement quickly, an existing confidence and credibility between the parties, open and respectful discussions, an effective collaboration, proper preparation and good team spirit.

Despite the employer wanting to remove some rights, the union managed to maintain all of them. On one occasion, the negotiating committee decided to stop the negotiations in order to get the employer to act, which turned out to be an initiative that worked.

Contestation of Bill 30

The FIQ and most of the other labour organizations contested Bill 30 in Superior Court and it agreed with them by declaring the law unconstitutional. However, the end of this battle is still not known because the government appealed the decision. The appeal will be heard in mid-April.

INTERESTING GAINS FOR THE MEMBERS

The members of the local negotiating committee are happy with the acquired gains. They allow the care professionals to, in particular:

- split up two weeks of vacation;
- take a leave of absence without pay of four weeks after one year of service;
- take a leave of absence without pay of a maximum duration of one year after three years of service;
- apply for a position during a leave of absence without pay to teach;
- take a vacant position instead of bumping;
- bump in another centre of activities providing they have the capacity to meet the normal requirements of the job;
- end an assignment held for at least six months;
- take overtime hours in time, at time and one-half.

APPLICATION OF THE LOCAL COLLECTIVE AGREEMENT: SOME PROBLEMS

Even though the local negotiations moved well at the CSSS de Québec-Nord, problems arose during the its application and amendments have already been made in order to clarify some points, notably concerning replacements and the incumbency process. For example, the way to do the incumbency process as well as its impacts was not thoroughly analyzed during the negotiations.

In carrying out the incumbency process, the employer created positions of 7 workdays per 14 days for all nurses and nursing assistants, an offer well received by the union. However, the employer granted replacements to these employees, which deprived more senior employees of more interesting replacements. This method favoured attraction but

not retention of personnel, and the union disagreed with the employer's interpretation of the collective agreement. The amendments at that time led to a correction of the disagreement with the employer.

DIFFICULTY IN MOBILIZING MEMBERS

The SPSQ de Québec-Nord has more than 900 members in 22 facilities spread over a large territory. The local negotiating committee's main difficulty was therefore being able to succeed in mobilizing its members. The participation rate at local general assemblies was very low. The quorum was set at 50 members and it was difficult to reach it. The committee had to find ways of attracting and making the members interested, such as holding two assemblies the same day (morning and evening) and

sending the announcement of the assemblies by mail to all members.

On the whole, the conditions in which the local negotiation process took place were good and the initial objectives were achieved. The members of the negotiating committee were able to have an agreeable, enhancing and conclusive negotiating experience. They know their collective agreement well as well as their rights and feel better equipped to defend the working conditions of their members. The challenge was met and contributed to consolidating their local team. ■

For more details on the SPSQ de Québec-Nord, log on to <www.spsq.ca>.

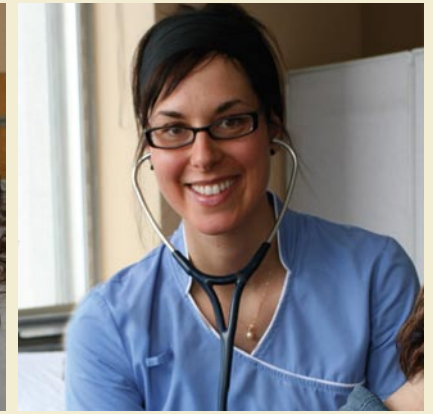
Sara Lapointe, Union Consultant
Communication-Information Service

THE MAIN ACTIONS TO BE CARRIED OUT BY THE SPSQ DE QUÉBEC-NORD

- Complete the incumbency process
- Monitor the application of the local collective agreement
- Attract and retain care professionals
- Increase the number of full-time positions
- Review the arrangement of work hours
- Stabilize the care teams
- Improve the climate at work
- Develop a feeling of belonging
- Mobilize the members
- Set up an effective communication system
- Limit the effects of the nursing shortage



The members of the local negotiating committee of the SPSQ de Québec-Nord, Johanne Pearson (1), Line Simard (2), Nicole Phillippon (3) and Guy St-Hillaire (4), FIQ spokesperson, accompanied by the members of the management negotiating committee and the head of human resources at the signature of the local collective agreement.



THERAPEUTIC NURSING PLAN

An enhancement of the profession

A TNP, different leverages

Besides the form that the TNP is on, it must be seen as an opportunity, as leverage for care professionals.

PROFESSIONAL LEVERAGE: the TNP must enable the role of the nurse to be trimmed and enhanced by using her full potential.

LEGAL LEVERAGE: the TNP becomes the record and proof of nurses' clinical judgment. In the past, this proof was often missing from the files during complaint hearings at the OIIQ.

UNION LEVERAGE: for nurses, the legal obligation to complete a TNP must become an organization of work tool. This legal obligation given to nurses becomes one for employers to provide a workplace conducive to fulfilling the responsibilities for the TNP. The committees on care will therefore be the preferred place to use this obligation in order to arrive at stability within the care teams and care team components which will allow the nurse to have the required time to develop and adjust the TNP.

On February 12, *FIQ Actualités* attended a meeting where the presidents of the affiliated unions and lead representatives were invited. The therapeutic nursing plan and the review of the deployment of Bill 90 and the TPN in the institutions were presented. The participants also watched a video on the implementation of the TNP at the CSSS du Nord de Lanaudière which included comments from the union president, Stéphane Gagnon.

WHAT IS THE TNP?

The therapeutic nursing plan which takes effect on April 1, 2009, is a new professional and documentation standard within the scope of the activities reserved for nurses provided in Bill 90. The TNP is more than a form to complete and must be seen as important lever for recognizing the nursing profession of today and yesterday because it falls within the scope of the activities that only nurses can perform.

The TNP addresses the evolving clinical profile of the client's priority problems and needs and the

nurse is the only one responsible for establishing and adjusting the therapeutic nursing plan of each client. This plan must also include the nursing directives given to nursing assistants, beneficiary attendants, clients, their significant others, etc., in order to insure the clinical follow-up of the client; these directives are, in particular, aimed at clinical monitoring, care and treatment.

The TNP is determined and adjusted by the nurse on the basis of her clinical assessment and is recorded in the client's file. It consists of the nurse's clinical decisions and judgment.

ENHANCEMENT OF THE PROFESSION OR WORK OVERLOAD

The implementation of the TNP is a re-focusing of the nurse's activities on assessment, clinical monitoring and follow-up. This re-focusing, thanks to a professional review, will have certain impacts, such as an enhancement of the profession by the development of the full potential of nurses, enhancement of the professional practice of nursing assistants with their participation in the assessment and clinical follow-up, the re-distribution of some tasks that do not belong to the nurse to other contributors and it will be a

SOME NUMBERS

REVIEW OF DEPLOYMENT OF THE TNP:

- 93 institutions out of 162 answered the questionnaire;
- these 93 institutions represent 50,636 members, which is 88 % of members;
- almost half the institutions have trained 90% of the nurses and nursing assistants in the CSSS, the CHU, the CHA, the institutes and rehabilitation centres;
- nearly 35 % of the CSSS and 14 % of the CHU, the CHA, the institutes and the rehabilitation centres have trained less than 50% of the nursing personnel.

REVIEW OF DEPLOYMENT OF BILL 90:

- for the nurses in the 60 CSSS, CHU, CHA, institutes and rehabilitation centres, 14 institutions state they have converted to the reserved activities in Bill 90, 20 state they have converted to the general field of practice and 19 institutions have not done either one;
- for the nursing assistants in these same institutions, 20 institutions state they have converted to the reserved activities in Bill 90, 22 state they have converted to the general field of practice and a dozen institutions have not done either one;
- for the respiratory therapists in these same institutions, 26 institutions state they have converted to the activities reserved in Bill 90, 29 state they have converted to the general field of practice and 6 to 8 institutions have not done either one.



collaborative professional tool; in short, better organization of work.

Although aware of the positive impact of the TNP, the presidents at the meeting shared their skepticism because the majority of their members are expecting a heavier workload once the TNP is put in use. Also, the training on the TNP will not be completed by April 1, 2009 in many of the health-care institutions.

Bill 90 and the TNP require specific competencies and some members could need some updating in order to assume their full responsibility concerning the TNP. Carole Grant, Executive Officer in charge of the Task and Organization of Work (TOT) Sector and the President, Lina Bonamie, reminded the participants that it is the employer's responsibility to include measures to maintain competencies and professional improvement of employees within the personnel development plan.

POSITIVE EXPERIENCE AT THE CSSS DU NORD DE LANAUDIÈRE

The winning strategy has certainly been to take part in the changes from the beginning of the process which allowed the union to express its concerns. It all started with the setting up of a pilot project where the nurses and nursing assistants received training. Also, a pivot nurse was assigned to accompany the nurses during the implementation of the TNP.

The nurses observed that developing a TNP for a patient was not all that different from their daily practice, but allowed it to be more structured. Mr. Gagnon gave some advice to the unions:

- get involved at the very beginning of the process;
- discuss any problems at the committee on care and with the nurses;

and to the nurses :

- stop doing what you are no longer supposed to do. ■

Micheline Poulin, Union Consultant
Communication-Information Service

Private interests attacking nursing manpower

After the Montreal Economic Institute (MEI), then the *Centre interuniversitaire de recherche en analyse des organisations* (CIRANO) (Centre for Interuniversity Research and Analysis on Organizations) took its turn and published its opinion on the nursing shortage in Quebec. If the interpretation of the data that the authors made is open to debate, the ideas put forth by these authors clearly promotes lowering nurses' working conditions and giving more place to the private sector in providing health care.

AN INFLUENTIAL CROSSROADS TOWARDS MORE PRIVATE SERVICES

Funded by business men from the banking sector and big business, these *think tanks*, such as the MEI and the CIRANO combine their influence to produce and promote ideas which support the neoliberal hegemony, and this, with the purpose of demolishing public services. Thus, they have been considering the future of public services for several years, in particular that of the Quebec health-care system, to direct it towards private funding and delivery of care. Under the cover of alleged scientific work, their publications and their media interventions are growing and receiving positive feedback from the large information publishers

such as Quebecor (*Le Journal de Montréal, Le Journal de Québec, 24 heures*) and Power Corporation of Canada (*La Presse*) to make the measures window dressing aimed at enlarging the hold of the private sector on the health-care field.

The related affinities between the administrators of the MEI and the CIRANO are at a point that some of them do not hesitate to invest time and money to insure a seat on the board of directors of these two interest groups. Without counting on the closeness of some of the known Quebec players who support neoliberalism. This is the case of Claude Castonguay, an enthusiastic defender of user fees in health care, regularly asked to speak at the MEI, and of Claude

Montmarquette, who considered variable remuneration (related to performance) as a strategy to avoid salary by seniority and who co-wrote the recent CIRANO report on the nursing shortage in Quebec.

The FIQ is watching closely the slanted publications of these influential groups who legitimize the purpose of their "investigations" by claiming it is an offer of "undeveloped" work for Quebec nurses, in referring to the private sector. Last year, in a letter published in *Le Devoir*, the president of the Federation sharply criticized the words of Mathieu Laberge, Economist, who, in the name of the MEI and from a study full of methodology bias, stated that 54% of responding



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PRIVATE INTERESTS ATTACKING NURSING MANPOWER (cont'd)

nurses “[...] would have accepted to work in the private sector on days during the week [...]” and that they would have offered, on average, “[...] up to 15 hours per month, which represents almost two additional days!”.

RECURRENCE ON BEHALF OF CIRANO

Mathieu Laberge, in collaboration with Claude Montmarquette, took the reins again by recently publishing¹ a similar argument to his previous “study”. According to the authors, Quebec nurses work less than the nurses in the other Canadian provinces, that is 28 hours per week as compared to 30.9 hours for those in the rest of Canada. All along, according to the authors, the shortage of nurses in Quebec would be over-estimated.

For the FIQ, the results of this study paint only a partial and misleading portrait of the job offers for nurses in the Quebec health-care network because the characteristics linked to the work intensity, such as the physical and mental responsibilities linked to organization of work, have not been taken into consideration in the analysis. A finding that indicates, once again, the real and profound bias of the MEI and the CIRANO concerning the health-care network and nursing manpower.

Added to this adulterated portrait of deceptive data is the absenteeism rate of Quebec nurses. According to the authors, they are absent more (17.5%) than the nurses in the other Canadian provinces (11.4 %). This gap is explained by government

programmes and personal leaves linked to the conditions in the collective agreement which are superior in Quebec over the rest of Canada, in particular the *Régime québécois d'assurance parentale (RQAP)* (Quebec Parental Insurance Plan) and the programmes in the collective agreement for progressive retirement, which are hard won rights, following social and union struggles.

SOLUTIONS WHICH ADVERSELY AFFECT NURSING MANPOWER

This study, like others before it, presents very dangerous “solutions” to curtail the nursing shortage. For example, it encourages nurses to level out their working conditions by lowering them and proposing nothing more than putting up the unfilled shifts in the institutions for auction. According to this formula, nurses who are interested would bid on the shift and whoever has the lowest bid would win!

The authors even propose that nurses “be encouraged to complete their employment assignments with other employers, in particular in the private sector”. For the Federation, it is clear that the solution of increasing the job offers does not include a mixed nursing practice. The solution is to offer full-time positions to nurses working in the public network. Sixty percent (60%) of Quebec nurses in the health-care network work part time. Is this normal in a manpower shortage situation? If the nurses who wanted to, worked full time, the effects would be felt on the shortage, the disproportionate workload that

they carry would be reduced and the profession would become more attractive.

The FIQ believes that it is imperative that the working conditions in the public network be improved and you can count on everything being done for it to be promoted during the next Quebec negotiations. Through the *Table nationale de concertation sur la main-d'œuvre en soins infirmiers* (Quebec consensus building nursing manpower table), at which all the contributors in the health-care network sit, in particular the labour organizations, the *Association québécoise d'établissements de santé et de services sociaux (AQESSS)*, managers of the network, the *Ordre des infirmières et infirmiers du Québec (OIIQ)* and the Minister of Health and Social Services, it reflects that recourse to private agencies represents more of a problem than a solution to the nursing manpower shortage because it adversely affects the stability of the care teams.

As for the Quebec think tanks, the FIQ is closely monitoring the activities of the MEI and the CIRANO and intends to be present to insure a counter-balance to the spiels of those who promote privatization of health care. The FIQ also asks its members to remain vigilant and critical of the attempts of these interest groups who progressively promote that a private health-care system would perform better. ■

Karine Crépeau, Union Consultant Sociopolitical Sector

¹ *Portrait des conditions de pratique et de la pénurie des effectifs infirmiers au Québec*, Mathieu Laberge, Claude Montmarquette, Project Report, CIRANO, January, 2009.



Illustration : Christiane Beauregard

RREGOP, answers to your questions

The FIQ will shortly be publishing an information pamphlet entitled RREGOP, answers to your questions. Previously entitled *Pension Attention and Buy Yesterday for Tomorrow*, this new guide has been re-designed and updated in order to provide the most complete information possible on the pension plan.

This guide is intended for all care professionals, regardless of their age. Whether it is the contribution paid, the benefits received, buying back different leaves, etc., everything is covered with the purpose of being better informed. This guide will be handed out during a RREGOP information evening organized in your institution or a PDF version that can be downloaded will soon be available on line.

To receive an email notice about news and updates on the FIQ web site, you can register directly on the home page in the section *Abonnez-vous*. ■

