



**I AM  
VOTING  
FIQ!**

**From January 30 to February 24, 2017,  
I AM CONFIRMING my membership in the only union  
Here, we understand health care.**



Vol 29 | No 4 | December 2016

Federal Council of  
December 12, 13, 14 and 15

# ENACTION

FÉDÉRATION INTERPROFESSIONNELLE DE LA SANTÉ DU QUÉBEC | [fiqsante.qc.ca](http://fiqsante.qc.ca)



Your union representatives,  
100% healthcare professionals,  
unanimously adopted all the  
conditions for the renewal of the  
2017 group insurance contract.

## GROUP INSURANCE

# OVERALL DECREASE IN PREMIUMS

At this Federal Council, the delegates endorsed the results of the negotiations of the Federation with *Desjardins Assurances* on the conditions for the renewal of the group insurance contract for 2017. On January 1, 2017, the members of the FIQ will see an overall reduction in their insurance premiums.

With the goal of maintaining responsible management of the basic drug insurance plan and lowering the costs, without reducing the coverage for the members, mandatory generic substitution (MGS) will go into effect as of April 1, 2017. Generic drugs are advantageous, because they are, on average, 35% to 70% less expensive than brand name drugs for equivalent and just as effective treatment and also often produced by the same pharmaceutical company.

So, as of April 1, 2017, when you buy a brand name drug for which there is a generic drug, your reimbursement

will be based on the price of the least expensive equivalent generic drug available on the market, and this, even if your attending physician has indicated "no substitution" on your prescription. You can get the brand name drug if you want, but you will have to pay the difference between its cost and that of the generic drug.

### EXEMPTION FOR MEDICAL REASONS

However, if for medical reasons, you cannot take the generic version of a drug, you can get a reimbursement of your brand name drug by submitting the form designed for this and duly

completed by your attending physician to *Desjardins Assurances*. You can find this form on the *Desjardins Assurances* web site. It is important to inform your pharmacist and/or your physician before this change goes into effect.

Your employer will receive the flyers from the insurer, *Desjardins Sécurité financière*, containing the details on this renewal during the month of January. A new version of the brochure will also be quickly made available.

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In December, the FIQ launched a special report on safe care. To read the electronic version: [fiqsante.qc.ca](http://fiqsante.qc.ca)

## PROVINCIAL COMMITTEE ON SAFE HEALTHCARE PROFESSIONAL-TO-PATIENT RATIOS

This Federal Council helped the delegates to learn about the progress in the work of the provincial committee on safe healthcare professional-to-patient ratios, a major gain obtained by the Federation during the last provincial negotiations.

In fact, as stipulated in Letter of Understanding No. 17 of the provincial collective agreement, a joint committee has been mandated to study the pertinence and the feasibility of safe ratios by setting up pilot projects. There have been four meetings of the committee since early fall. The FIQ has already been able to reach several of their objectives, to position the credibility of the FIQ in this file and to help the employer party to have a better understanding of this project.

The FIQ will deploy all the necessary effort for safe healthcare professional-to-patient ratios to become a reality in Québec as soon as possible. Even if it is too soon to confirm the number of pilot projects and their locations, the FIQ will surely play a major role in the implementation of more humane and safe care in Québec. The committee will resume its work as of January 17.

**WORD FROM THE PRESIDENT**

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**THE FIQ IS FILLED WITH PROJECTS!**

*Régine Daurout*

Our last Federal Council of 2016 was not any different from the others, we worked hard and took important decisions. We continued our work on the major files like the construction of the new FIQ, your new group insurance contract and the safe healthcare professional-to-patient ratios.

2016 has been a particularly intense year. We held a referendum vote on our tentative agreement and adopted our new collective agreement. We also made progress in several major files to improve the healthcare system by relying on the skills of the healthcare professionals. First, after stubbornly refusing, the Minister of Health, Gaétan Barrette, caved in to our arguments and agreed to fund the SABSA Clinic in Quebec City.

This was major progress and a first in Québec. Now, the specialty nurse practitioners (SNP) and nurses can fully practice their field of practice in a clinic funded in part by the public network.

We were also successful with this same exploit in Chénéville, where the *CISSS de l'Outaouais* now assumes the salary of the SNP at the neighbourhood clinic in this town. And now, another project for a neighbourhood clinic is in the process of becoming a reality in *Montréal-Nord*.

With these clinics, we are clearly demonstrating that there is another way to provide front-line care that is more efficient and less expensive for the healthcare network.

On another front, we are working seriously to install safe healthcare professional-to-patient ratios in Québec. The news is constantly reporting outrageous situations where the healthcare professionals find themselves with a number of patients that is far too high. These situations endanger the nurses and the licensed practical nurses and harm the quality of the care given to the patients.

In addition to working with the Ministry of Health on this issue, we are working in collaboration with several international experts. Moreover, we got several of them together in Laval in the fall at the Symposium on Safe Care which we held. In 2017, the file on the ratios will be a priority for our organization.

**100% HEALTHCARE PROFESSIONALS**

For several months already, we have been actively campaigning for the period of changing union allegiance. This voting period is not our choice. The government and Minister Barrette have imposed it on both you and us, but we are taking it on. We believe that the best labour organization to defend the rights and interests of the healthcare professionals is the FIQ. We believe that the bargaining power of the nurses, licensed practical nurses, respiratory therapists and clinical perfusionists will be stronger with a stronger FIQ.

We have the uniqueness and the opportunity to be dedicated only to you. This is why we are doubling the efforts to go and meet all the healthcare professionals in all the regions of Québec. It is an important choice that the healthcare professionals will have to make and we believe that the best choice is the FIQ. In closing, I want to wish you all a very happy 2017. You deserve all the best. ■



The transitional Executive Committee of the *FIQ Secteur privé*, from left to right: Josée Chartré, Martine Tremblay, Geneviève Rouleau, Sonia Mancier and Martine Beaulieu

**CREATION OF *FIQ SECTEUR PRIVÉ* (FIQ PRIVATE SECTOR)**

The delegates received a detailed report at this Federal Council on the Founding Convention of the *FIQ Secteur privé* (FIQP) which took place on October 5 and 6, 2017 in Nicolet. Now, the healthcare professionals who work in the subsidized private institutions have their own federation within the FIQ.

At the founding Convention, several stakeholders came to address the union representatives in attendance. Among them, a professor on the Faculty of Nursing Sciences at the *Université Laval*, Bernard Roy, the first president of the FIQ (FIQ), Diane Lavallée, a professor at the *Université du Québec à Montréal* and Research Chair on citizen aging and diversity, Michèle Charpentier, and the president of the FADOQ, Maurice Dupont. All of them acknowledged the audacity in the creation of the FIQP.

At a time when care of the elderly is in the headlines on a daily basis, the existence of this new federation will be crucial. FIQP is also the new door open for all those working in health care in the private sector and who want to join the FIQ. ■



## OVERTIME AND INDEPENDENT LABOUR

Different actions were conducted over the last few years by the Federation and their affiliated unions to combat the use of overtime and independent labour (IL) by the employers in the healthcare network. Whether it is at the political, public, local or legal level, the actions have helped to reduce their use in several institutions, without however eliminating them to date.

The use of personnel acting through private healthcare employment agencies is more often linked to poor management and to a lack of organization of work on the nursing units. For the delegates, it is a poor remedy to meet the shortage problems which does not help to lighten the workload of the healthcare professionals.

The delegates agreed with the need to continue the battle. The healthcare professionals should be able to work in conditions that allow them to provide quality, safe and humane care to the patients. Over the years, several studies have shown the correlation between the numerous hours worked as overtime and the increased rate of absenteeism, sick leave and injuries, as well as the deterioration in the quality of the care given.

### FABULOUS VICTORIES

Legal decisions have clarified the state of the law, namely that obtained in favour of the *Syndicat interprofessionnel du Centre hospitalier universitaire de Québec* (FIQ). The issue studied by the arbitrator covered determining if the employer had attempted, as much as possible, to not use overtime work as part of a routine practice for filling the absences as stipulated in clause 19.01 in the local collective agreement. The arbitrator responded in the negative, as it was his opinion that the employer carried out their management rights in an abusive and unreasonable manner by using overtime work as part of a routine practice to fill the absences.

In addition, a motion filed under section 39 of the Labour Code demanding that the personnel from the private agencies be included in the FIQ certification unit of *Hôpital Maisonneuve-Rosemont* was accepted by the *Tribunal administratif du travail* (TAT). The latter concluded that the institutional framework of the health and social services network resulted in the real employer of the healthcare professionals working for the private agencies was the public network and that the latter were really only personnel placement agencies.

Other contestations of this issue will be made by the FIQ which is demanding the integration of all the healthcare professionals who work in the healthcare network into the FIQ union certification units.

### FORCE THE ADMINISTRATIONS TO ACT

For the delegates, it is essential to act collectively to end the parallel regime of working conditions so that there is only one class of employees working in the healthcare institutions in Québec and that there be a sufficient number of them. Solutions and tools exist for continuing the battle in this respect:

#### ■ Act respecting labour standards/ethical obligations

The employers in the network must respect the ethical obligations and an Act respecting labour standards when they require their employees to work overtime. The latter stipulates a right for employees to refuse to work more than a certain number of hours, except in cases where there is a danger for the life, health or safety of the workers or the population, or other cases of a force majeure nature, or even if this refusal goes against the professional code of ethics of the employee.

So, the healthcare professionals of the FIQ are each governed by a code of ethics which, on the one hand, includes the duty to refrain from practising in conditions or a state likely to compromise the quality of the services and, on the other hand, an obligation to ensure the continuity of the patient care and to provide quality care.

For its part, an Act respecting labour standards protects the employees who must balance their work and their family. Consequently, the employer cannot require that the healthcare professionals work overtime when they believe they are not able to do it given their state of fatigue or their obligation and the general context.

#### ■ Collective agreement 2016-2020

The gains obtained by the Federation during the last negotiations brings the introduction of a provincial target stipulating an increase in the number of full-time positions for the job title groups of nurses (62%), licensed practical nurses (50%) and respiratory therapists (54%). This progress should help to improve the stability of the work teams as well as a reduction in job insecurity for the healthcare professionals, the use of overtime and independent labour.

#### ■ Safe Staffing Form

The members of the FIQ can now complete an online Safe Staffing Form on the web site of the Federation ([fiqsante.qc.ca](http://fiqsante.qc.ca)) in order to report the situations where their conditions of practice impede them or do not let them give quality, safe and humane care to the patients. Working overtime, or even in the presence of healthcare professionals from the private agencies, are good examples of situations that can be covered by this form.

Although the latter does not replace a grievance, the declaration of a dangerous situation or an incident-accident report, are tools for actions at the local level to support the demands or the implementation of solutions to counteract overtime and independent labour at the local level. The FIQ intends to pool the information obtained thanks to these forms to eventually question the Ministry of Health and Social Services so that they take concrete action on these problems. ■



**FINANCIAL FORECASTS**

**Financial Forecasts for 2017 – A pivotal year for the FIQ Mobilized to stop violence against women**



**FINANCIAL FORECASTS FOR 2017  
A PIVOTAL YEAR FOR THE FIQ**

The delegates learned about the next budget for the FIQ, presented by the treasurer, Roberto Bomba. 2017 will be an important year for the Federation and this budget will help to ensure the financial stability of the organization and to maintain the quality services that meet the needs of the healthcare professionals and the affiliated unions of the Federation.

The 2017 budget, adopted by the delegates, was developed based on the four priorities of the Federation for the next year: the preparation of the activities linked to the voting period stemming from Bill 10, the deployment of the local negotiations, the implementation of the organizational changes associated with Bill 10 and the holding of three Conventions.

The revenue for 2017 accounts for more than 66,000 members. Following the voting period which will be from January 30 to February 24, 2017, several thousand healthcare professionals will become members of the FIQ. Therefore, resources are added to the Labour Relations Sector to take into account the needs linked to the arrival of these new members. This sector already represents nearly half the expenses of the Federation in order to support the affiliated unions and to ensure the defence of the members, namely in arbitration, before the CNESST and the employers.

**OCCUPATIONAL HEALTH AND SAFETY**

The 2017 budget still includes the loan envelope to support the healthcare professionals on a protective reassignment of the pregnant worker (RPTE) who have to contest a decision of their employer.

**SUPPORT OF THE AFFILIATED UNIONS**

In order for the local teams to be able to completely fulfill their role of union representative and meet the needs of their members, significant amounts are allocated for giving new training sessions, namely the one which will be developed for the negotiation of the local collective agreements.

**APPLICATION OF BILL 10**

A part of the budget is also allocated to the application of Bill 10 and its repercussions. The creation of the *centres intégrés de santé et de services sociaux* (CISSS) or the *centres intégrés universitaires de santé et de services sociaux* (CIUSSS) will greatly change the look of the Federation. Therefore, the amounts needed to support the deployment and implementation of the new offer of service of the FIQ have been provided.

**PROVINCIAL NEGOTIATIONS**

With the end of the provincial negotiations amounts are allocated

for making sure that the many committees set out in the 2016-2020 collective agreement which will take up a major part of the activities of the Federation in 2017 can function properly, in particular the committee linked to the *CSSS Haute-Côte-Nord-Manicouagan*, the mandate of which is to analyze the attraction and retention problems of the CSSS, the committee linked to Letter of Understanding No. 18 regarding the specialty nurse practitioners, the committee linked to Letter of Understanding No. 6 regarding the implementation of the upgrading of the positions and the deployment of the updating or professional improvement related to Bill 90 and the *comité national des emplois*.

Lastly, amounts are invested to conduct a study on the pertinence and feasibility of the healthcare professional-to-patient ratios for the implementation of the pilot projects set out in Letter of Understanding No. 17. ■



The members of the Status of Women Committee, from left to right: Lucie Ménard, Patricia Lajoie, Julie Daignault, Caroline Flageol, Claire Alarie and Line Mercier

**MOBILIZED TO STOP VIOLENCE AGAINST WOMEN**

True to tradition, the delegates commemorated the 14 victims assassinated on Decembre 6, 1989 at the *École Polytechnique* at this Federal Council. After observing a minute of silence, the members of the FIQ Status of Women Committee read extracts of the petition initiated by the *Ligue des droits et libertés* demanding a commission of inquiry on police practices regarding aboriginal women.

Christian Nadeau, President of the *Ligue des droits et libertés*, addressed the union representatives in order to ask them to sign the petition in massive numbers. Besides the legal process necessary in the cases of the allegations of sexual assault on the aboriginal women of Val d'Or, the government must shed light on the deeply rooted causes of structural and cultural racism suffered by the aboriginal people.

**THE MEN OF THE FIQ: ALLIES**

Daniel Gilbert and Roberto Bomba, vice-president and treasurer respectively of the FIQ, presented the *"Manifeste des hommes alliés pour l'élimination des violences envers les femmes et les enfants"* (Manifesto of allied men for the elimination of violence against women and children). This demonstration of solidarity took root at the second edition of the *Déjeuner des hommes*, an initiative of the *Fédération des maisons d'hébergement pour femmes*. Following the reading of the extracts of the manifesto, several men in attendance in the delegation spontaneously stood up to add their names to this initiative.

To sign the petition: <https://www.assnat.qc.ca/fr/exprimez-votre-opinion/petition/Petition-6389/index.html>  
To read the manifesto: <http://fede.qc.ca/actualites/manifeste-hommes-allies-pour-lelimination-violences-envers-femmes-enfants>



Christian Nadeau



**PROVINCIAL  
NEGOTIATIONS**

**Training of the nurses – Assessment of the physical and mental condition  
Happy Retirement!**



Véronique Foisy, CIUSSS de l'Estrie/CSSS de la Haute-Yamaska

**TRAINING OF THE NURSES  
ASSESSMENT OF THE PHYSICAL  
AND MENTAL CONDITION**

A report was given to the delegation on the setting up of training activities in the institutions stipulated in Letter of Understanding No. 6 in the collective agreement regarding the nurse's reserved activity on the assessment of the physical and mental condition of the user.

This training is an updating and a professional improvement in respect to the priority of the negotiations aimed at helping the healthcare professionals to occupy all of their field of practice, and with the change of ranking obtained for the nurse who will be put in ranking 19 in 2018. Last October, the *Comité patronal de négociation* (CPNSSS) met with the FIQ to present the logistics of the setting up of this extensive training covering more than 34,000 nurses with a college diploma in all the institutions in Québec. In order to develop the training programme and the content, the Ministry of Health and Social Services (MSSS) partnered with Philippe Voyer of the Faculty of Nursing Sciences at the *Université Laval*.

health who passed the part on the assessment of mental health could be exempt from the training on that aspect. A second evaluation will be done six months after the initial training to compare the results and support the employees who might need some additional coaching.

The nurses with a bachelor's degree or in the process of obtaining a DEC-BAC degree or a DEC in nursing care since 2016 will be excluded from this updating activity, because the training on the assessment of the physical and mental condition of the user is included in the college, DEC-BAC and university training programmes since 2016.

The length of the training, in the form of a mentorship, is 25 hours and is given during work hours. Failing this, the time is paid as overtime. The content of the training includes watching a four-hour video and 21 hours of training accompanied by a clinical coach. These hours are accredited and recognized by the *Ordre des infirmières et infirmiers du Québec* (OIIQ) for continuing education. The scheduled timetable for this training exercise has a target of 40% of nurses trained by 2018 and the rest for 2020.

**DELEGATES' CONCERNS**

Several delegates spoke up during the presentation of the file to question the \$30 fees for obtaining the certificate of training and shared their fears regarding the statements from employers implying that the competence of the employees in the event of a "failure" during the evaluation of the training needs could be challenged. The employees are therefore afraid of administrative measures. The coordination of the negotiation for the Federation reassured the delegation on the shared vision of the MSSS, CPNSSS and the FIQ as to the basic principles of this training: it is aimed at acquiring the skills linked to the assessment of the physical and mental condition of the user as well as to consolidate and entrench this reserved activity listed in Bill 90 in the practice within the institutions.

In no case, should the employers use the results of this training to undertake administrative measures linked to the competence in delivering nursing care. As for the fees for the certificate of training, the FIQ is in discussions with the CPNSSS on the removal of them, because during the negotiation of this subject, it was always clear that this training was without cost for the employees concerned. ■



**HAPPY  
RETIREMENT!**

It was with a lot of emotion that the president, Régine Laurent, marked the retirement of five employees of the Federation. These women are leaving for a well-deserved retirement after having accomplished numerous professional projects with the union teams and the members, always with investment and energy. Their retirement projects will certainly be numerous and we hope that they take full advantage of them.

From left to right: France Beauregard, Lise Steingue, Francine Tisseur, Marie Larochelle, Joanne Poitras and Régine Laurent.

**DEPLOYMENT OF THE TRAINING**

To appropriately identify the training needs of the employees, they must answer a questionnaire and they could be exempt from the training if they get a score of 75%. However, an employee can agree with her superior to receive this training even if she scores higher than the mandatory score. And, an employee who does not achieve this score could be exempt for part of the training. For example, an employee working in mental



At the microphone:

1. Virginie Lambert, CIUSSS de la Montérégie-Est/ CSSS Pierre-Boucher (AIM)
2. Patrick Garneau, CIUSSS de l'Ouest-de-l'Île-de-Montréal/Douglas Mental Health University Institute



**PROVINCIAL NEGOTIATIONS**

**Provincial Labour Relations Committee (CRT)  
2017: towards a new union power in health!  
Group Insurance (cont'd)**

**2017: TOWARDS A NEW UNION POWER IN HEALTH!**

The priorities adopted by the delegates for 2017 will be dictated by the labour and political context, tainted by the upheavals linked to Bill 10. All the organization's energy will be geared towards the union teams and the members during the first few months within the framework of the voting period of union allegiance.

Then, the consolidation of the union teams and the setting up of the local negotiations process will occupy the resources at all levels of the organization, in particular within the framework of the deployment of the new offer of services of the Federation. At the same time as the transitions that will take place on the teams, the Federation will also adapt their offer of services in keeping with the new structures of the healthcare network. Lastly, the holding of three Conventions, two of which oriented on the change of structures of the FIQ and one focused on the major orientations to adopt for the coming years, will help to position the new FIQ.

In this way, the delegates hope to give the healthcare professionals in Québec the opportunity to be together in a single union dedicated 100% to healthcare professionals. The beginning of a major new step for the FIQ will then take off. Note that 2017 will also mark the 30th anniversary of the Federation.

**PROVINCIAL LABOUR RELATIONS COMMITTEE (CRT)**

The delegates learned about the work started in October by the Provincial Labour Relations Committee (CRT) set out in the collective agreement. Two meetings have been held and the next meeting will be in January 2017.

Remember that this committee was created to discuss the problems that come up during the life of the collective agreement. It is composed of three representatives from the FIQ and three representatives from the *Comité patronal de négociation du secteur de la santé et des services sociaux* (CPNSSS).

Among the subjects discussed, there is the issue of the procedures, the setting up of the other provincial committees as well as

certain follow-ups or questions following the collective agreement going into effect.

Also part of the discussions are the recognition of the specific or psychiatric units for certain institutions as well as the application of the new clauses of the collective agreement, in particular Letters of Understanding Nos. 23 (CHSLD) and 24 (SBD -Severe Behaviour Disorders) and the specific critical care premium. This has helped

to settle problems regarding the measurement of occasional or episodic work in a CHSLD and in the SBD centres of activities, as well as the issue of the Recovery Room and the Obstetrical Unit, among others.

To find out more details on the subjects discussed at the CRT, talk to your local union representatives. Other issues or problems will be discussed and a follow-up will be done later at a future Federal Council. ■

**GROUP INSURANCE (cont'd from p. 1)**

**DID YOU KNOW?**

It is your premiums that are used to pay the claims made under the group insurance plan. Each one of you can make a contribution so that the cost of the insurance plans remain at an affordable level for all the healthcare professionals of the FIQ. Here are some tips:

- Send your application for benefits (drugs, all types of treatments, income replacement indemnity) to the right entity. For example, the drugs or treatments needed after a work accident should be reimbursed by the CNESST and not by the group insurance;
- Shop around for your prescription drugs, their prices can significantly vary from one pharmacist to another;
- Renew your prescriptions for three months at a time instead of monthly. You will then save on the professional fees of the pharmacist. This type of claim is accepted by *Desjardins Assurances*.



At the microphone:  
1. Stella Larochelle, CIUSSS de l'Est-de-l'Île-de-Montréal/Hôpital Santa Cabrini (AIM)  
2. Michel Léger, CIUSSS de l'Ouest-de-l'Île-de-Montréal/CSSS de l'Ouest-de-l'Île (UHCP)



**OCCUPATIONAL HEALTH AND SAFETY**

**Occupational health and safety – Profiles to create, issues to target**

**OCCUPATIONAL HEALTH AND SAFETY PROFILES TO CREATE, ISSUES TO TARGET**



The delegates met in nurse, licensed practical nurse, respiratory therapist and clinical perfusionist commissions during the Federal Council to discuss the current and future concerns in matters of occupational health and safety (OHS), related to each one of the job titles groups.

The discussions in the commissions helped the delegates in particular to better understand the impacts that the context can have when seen from an OHS angle, to target the issues that this context raises for the future and to reflect on the tools which could help to preserve the health, safety and physical and psychological integrity of the healthcare professionals.

Very much appreciated by the participants, the commissions brought out the common concerns, such as the psychological distress which can affect the healthcare professionals as well as the sometimes difficult relationships with the patients, physicians or colleagues.

**RECOMMENDATIONS**

Two of the four commissions submitted recommendations which

were adopted by the Federal Council. Actions linked to these recommendations will be proposed by the Federation and presented at a future Federal Council.

**NURSE COMMISSION**

“That the FIQ develop awareness-raising tools so that the members can use the right of refusal and their OHS rights as needed. That the FIQ develop training sessions to support the union teams in connection with the right of refusal and their rights in OHS.”

**LICENSED PRACTICAL NURSE COMMISSION**

“That the FIQ put an emphasis on the OHS file with the provincial inter-union committee on health and safety prevention, in particular on the alarming data regarding the employment injuries of licensed practical nurses; giving

themselves additional tools to supply the committee on Letter of Understanding No. 17.”

“That the FIQ put an emphasis on the psychological aspect of the excessive workload which includes psychological harassment by the employer in order to get this psychological injury recognized as an employment injury.”

“That the FIQ develop tools of prevention to support the licensed practical nurses who experience psychological distress after positions are cut.”

“That an official document be produced by the FIQ on the OHS statistics regarding licensed practical nurses and submitted to all the affiliated unions and produce a document with distinct data for the available job titles.” ■

**+ Newsletter**  
**REGISTER!**  
 To stay informed of the activities at the FIQ, register for our FIQ Express newsletter at [fiqsante.qc.ca](http://fiqsante.qc.ca). (follow the English link)



**PAY EQUITY**

**THE FIQ, A STRONG VOICE, ACTIONS THAT COUNT**

**ELECTIONS**

Elections to the statutory and standing committees were held at this Federal Council. Congratulations to all the newly elected members!



**Election Committee**

**Lyne Guerra**, Licensed Practical Nurse  
*Hôpital de réadaptation Villa Médica Inc. (AIM)*



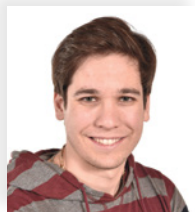
**Status of Women Committee**

**Amélie Barrette**, Nurse  
*CIUSSS du Saguenay-Lac-St-Jean/ CSSS de Lac-St-Jean-Est (SPSS Lac-St-Jean-Est)*



**Status of Women Committee**

**Caroline Rioux**, Respiratory Therapist  
*CIUSSS de la Mauricie-et-du-Centre-du-Québec/CSSS Drummond (SPSIC de Drummondville)*



**Youth Committee**

**Mathieu Lahaie**, Respiratory Therapist  
*CIUSSS de la Mauricie-et-du-Centre-du-Québec/CSSS Drummond (SPSIC de Drummondville)*



**Occupational Health and Safety Committee**

**Sébastien Simard**, Nurse  
*CISSS de la Montérégie-Centre/CSSS Haut-Richelieu-Rouville (SPSHRR)*

**PAY EQUITY THE SUPREME COURT WILL DECIDE**

The delegation were given a follow-up on the government's motion to appeal the decision of the Court of Appeals in the pay equity file to the Supreme Court. On October 12 last, the FIQ welcomed the decision of the Court of Appeals to uphold the decision of Judge Martin quashing certain provisions of the new law on pay equity which amended the initial law of 1996.

The steps on this issue were undertaken by the Federation with the other labour organizations in 2009. In this case pitting the FIQ, APTS, FTQ, and SFPQ against the government, the Superior Court recognized that the gaps could remain between the two periods of the pay equity audit exercise in an enterprise thus causing discrimination for the people holding predominantly female jobs. The law amending the initial law stipulates that no salary correction can be paid to the employees holding predominantly female jobs prior to the pay equity audit exercise.

To fully understand the issues, the initial law of 1996, aimed at correcting the salary gaps due to systemic discrimination based on sex concerning the people who hold jobs in predominantly female job

categories, must be reviewed after ten years. A draft bill was tabled by the legislator in 2009, in order to make major amendments, forcing the recalcitrant employers which had not completed a pay equity exercise to do it and setting up clear guidelines to force the employers to do a periodic pay equity exercise in an enterprise which has already done such an exercise. This period was set at five years.

As for the FIQ in this dispute, they have succeeded in proving that gaps can occur during this period thus depriving women of major salary corrections. Judge Martin of the Superior Court concluded that this period is not unconstitutional, but the lack of salary adjustments that can result from the audit within the five-year period was deemed unconstitutional thus perpetuating a state of systemic

discrimination. Moreover, Judge Martin stated that the posting process and the communication of the information regarding the audit were deemed insufficient to allow the people concerned to adequately understand the process and then to contest, if applicable.

The government appealed the Superior Court decision, namely because the new law does not have the discriminatory effect that the FIQ is claiming. The decision rendered in October 2016 confirmed the conclusions of Judge Martin. However, on December 11 last, the attorney general of Québec announced their decision to appeal the decision of the Court of Appeals to the Supreme Court of Canada. While waiting for the outcome of this saga, the Pay Equity Act continues to apply in its entirety. ■

**CAR, HOME AND BUSINESS INSURANCE**

The FIQ offers their members a car, home and business group insurance plan with The Personal General Insurance. The company is authorized to solicit the members by telephone. However, it is understood that The Personal agrees not to divulge the list of names of the members of the FIQ to anyone. Under the Act respecting the protection of personal information in the private sector, the members can refuse that their name and their contact information (personal address and telephone number) be sent to service providers. Thus, the **members who do not want their contact information to be given to The Personal** must complete the form below and return it to the address indicated before February 28, 2017. ■

**CAR, HOME AND BUSINESS INSURANCE**

I, undersigned, explicitly refuse that my personal information held by the FIQ be used for the purpose of commercial canvassing and solicitation regarding the agreement that they have reached for their members with The Personal.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone (residence): \_\_\_\_\_ Telephone (work): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Return to FIQ Québec, attn. Édith Côté, 1260 du Blizzard St., Quebec City (Québec) G2K 0J1, by fax at 418 626-2111 or by email to [ecote@fiqsante.qc.ca](mailto:ecote@fiqsante.qc.ca)

