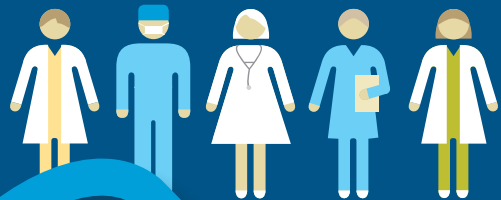


Organization of Work

Special Edition

Act on
organization
of work at the
local
level



This brochure is intended for FIQ local teams. It has been created by the Communication-Information Service in collaboration with the Task and Organization of Work Sector.

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Act on organization of work at the local level

Over the last several years, organization of work has been the constant target of many researchers and decision-makers in the health-care network as the major key likely to correct the recurrent multiple problems afflicting the functioning of the healthcare system in Quebec.

At the founding convention, the new federation (FIIQ), formed from the merger of the three federations (FQII/FIIU/FSPIIQ), announced that the experience acquired through its union practices over the years has demonstrated that collective negotiation and its resulting collective agreement has its limits as a means to improve certain fundamental problems linked to the environment and the organization of its members. Faced with this finding, the Federation had to work to define a different approach in its demands concerning the task and organization of work and lead its members at the local level to develop tools that would enable them to retake control over their work. The goal of taking back control was to develop another power centre other than collective negotiations, that of the workplace itself, where collective relationships are normally the private domain of management prerogatives.

The information presented in this special edition is aimed at making local teams and care professionals aware of the importance and the means to intervene at the local level on the various components of organization of work and to form Committees on Care to act on organization of work at the local level.

A glance at nearly 20 years of struggles

The Federation has made organization of work one of its main battle themes for nearly 20 years ; without a doubt, the FIQ has demonstrated it is a visionary in this respect. Here is a historical synopsis of an indefeasible and dyed-in-the wool belief in the importance of being concerned with and dealing with organization of work at the local level, a belief that has been reinforced within the Federation over the years.

1990

- At its 1st convention, the Federation included the mandate to pursue activities concerning task and organization of work in its plan of activities in the same direction as the objectives set out in its founding convention (1987). Among others, these objectives were to get the members at the local level to take over control of their work, notably by the Federation's participation in the setting up of Committees on Nursing (CON), by developing and giving the training to the members on these committees.
- The Federation designed the first training manual on Committees on Nursing (CON), which was updated in 1994, and then held training sessions on the ins and outs of these committees. This manual, entitled "The CON, power to seize", as well as training sessions aimed at demonstrating the importance of locally securing the workplace where, collectively, the members of the Federation could influence changes in organization of work and propose innovative, lasting and structured solutions directed towards their interests and those of the Federation.

1993

- Under the theme, “Taking part in change”, the Federation makes organization of work the subject of its 3rd convention and presents its thoughts on this matter in a document entitled “Organization of Work. From the traditional model to a renewed model”. The Federation produces a theoretical model to help members of the local CON’s carry out a systematic analysis of the local problems submitted to them that deal with organization of work. This model, entitled “Integrated framework of intervention in organization of work”, has been frequently used since then, which indicates its pertinence and usefulness. Through its choice of theme for the convention, the Federation wanted to demonstrate and share with the delegation its keenness for having a specific field of intervention, that of organization of work.
- The delegates resolutely accept the approach of investing in the field of organization of work. Decisions are then taken in order for the Federation to implement some of the actions which will lead to a measurement of the opportunities that could provide such a field of intervention for its members. It is within the scope of this approach that the delegates mandate the Federation to see to the implementation of pilot projects dealing with organization of work in a certain number of targeted institutions.
- It is also during this 3rd convention that the delegates unequivocally demonstrate their commitment to hold committees on nursing (CON), a preferential place for interventions and discussion to deal with everything that affects organization of work locally, a key place to negotiate organization of work.
- Within the framework of the renewal of the collective agreement, the first priority for the Federation in its draft collective agreement was that of giving its members better control over the organization of their work. This choice of priority met the members’ commitment to participate in the decision-making process concerning everything that could have an influence, particularly on their autonomy, their workload and their quality of life at work.
- The members also demanded a better structure for the measures aimed at the daily allocation of organization of work. Two measures are favoured for this: 1st – To provide that the committee on nursing can examine any issue concerning organization of work and work with the nurses involved in order to find avenues of solution in accordance with the collective agreement and 2nd – To reduce the delays in appointing an arbitrator in disputes in order to speed up the solving of problems.

1996

- The 4th convention of the Federation, held in January 1996, also targeted organization of work. The delegates met in plenary committees and worked on two themes:
 - the role and place of the nurse: “Nurses: From yesterday to tomorrow, a key role”;
 - organization of work: Taking charge of organization of work.
- It is during this convention that the delegates committed to the importance and necessity of refocusing local union action on participation in the redefining of the parameters of organization of work, to use this field of intervention and to accomplish this, it is essential that local teams take over the interventions in organization of work. The message was the following: “The actions in this specific field must come from the local level because it is the realities that are experienced on a daily basis that are the determining factors in organization of work” and that “this new challenge cannot be met without the backing and support of local initiatives by the Federation.” The Federation was given the mandate to plot the guidelines that would equip local teams with the means to take over organization of work and to support any local initiative which concerns this large takeover or which concerns defining the parameters. A review of the Federation’s consultant practices was then initiated in order to meet this objective.”
- It was also at this convention that a report, dealing with 20 pilot projects on organization of work developed in targeted institutions, entitled “Taking part in change in the organization of work pilot projects”, was presented to the delegates.
- Many local teams, within the context of the reconfiguration of the health-care network, demonstrated a need and a desire to receive training in organization of work due to the announced changes or the changes already initiated in their institution. This situation led the Federation, in December 1996, to undertake the development of the content of training sessions on the ins and outs of organization of work, entitled ILOT (*Intervention locale en organisation du travail*) (local intervention on organization of work). To resolve the problems, an approach related to the nursing process was proposed. In so doing, the Federation distinguished itself within the network.

1997

- This was, without question, a pivotal year for the Federation in organization of work. The Federation held the first round of training throughout Quebec in which it proposed a new approach of its own devising, an approach designed to support local teams during their interventions on organization of work: ILOT. Within the scope of this training, the union representatives of the Federation were asked to reflect on the pertinence of investing in the field of organization of work in order to find solutions to some of the problems that were more and more difficult to resolve through the collective agreement. The Federation was not only proposing to them a new approach, but also concrete tools that were adaptable to the local scene in order to act on this subject. Using these tools provided by the Federation, many of its members have since developed, presented and defended ILOT files with their employers, resource persons or arbitrators, with the majority of them being resolved successfully.

1998

- Following the refusal of nurses to work overtime, the Conseil des services essentiels (Essential Services Council) ordered the setting up of a system that would speed up and make the settlement of workload problems less legalized until the renewal of the collective agreement. It also ordered that a provincial work group be set up whose mandate would be to supply the provincial and local parties with sufficient knowledge to give the health and social services network a process for strategic staffing plans, organization of work and development of human resources and to propose measures that would attract and retain this labour force. Three representatives from the Federation sat on this work group which tabled its report on March 9, 1999. The report was entitled “Ad hoc report on nursing workforce strategic planning in the short-term (1999 summer period), and medium and long term from the Working Group on nursing workforce strategic planning”.

1999

- Confronted with the growing threat of a serious problem emerging with a shortage in the nursing labour force, the Minister of Health and Social Services (MSSS) created the Quebec Forum on Nursing Workforce Planning to analyze this problematic situation and to develop realistic and attainable avenues of solution on the local, regional and provincial level. The Federation agreed to be represented. It played a major and deciding role in the progress of this file and was the instigator of many of the actions proposed in a detailed report tabled in 2001 by the members of this Forum to solve the nursing shortage. The Forum did not hesitate in this report to declare that not only must more nurses be trained to curb the shortage problem, but that major changes must be made in organization of work. This report was very clear on this by positively stating:

“The situation cannot improve unless a work environment is set up that insures a real quality of life and that gives nurses the chance to achieve their ambitions on both the professional and personal levels. Included among the factors most likely to improve the quality of life at work are an appropriate workload, professional leadership and clinical support, adequate in-service training, a career path, the arrangement of work time, professional respect, protection against employment injuries and illnesses and interesting salaries¹”.

¹ *Forum, 2001, p. 8 and 9.*

2000

- The effects of the nursing shortage were greatly felt within the nursing care teams: the workload was increasing at an alarming rate. Faced with a growing number of workload complaints from its members, the Federation produced a reference document entitled “Workload, an organization of work problem”; this document dealt specifically with this issue. In addition, the Federation then held training sessions on the development of a workload file and it also provided the members with an analysis grid to complete, in order to facilitate and support the proof that a work overload exists, if applicable.
- On the eve of the next round of negotiations, many of the problems identified by the members during the consultation led to retaining, among the avenues of solutions, consideration of corrective actions for organization of work: review of the mechanism to settle a workload problem, the introduction of recourse to a resource person for workload complaints at the Committee on Nursing, the act of conversion of replacement hours into regular positions, etc. Even if, during this negotiation, the process of taking over organization of work proposed by the Federation was not a demand that the management party retained, it is important to remember that the provisions of the collective agreement for the committee on nursing were kept, and this, despite the many efforts of the management party, during each round of negotiations, to weaken or at times threaten the very survival of this committee.

2001

- Faced with a nursing shortage which continued to worsen, the institutions in the health-care network could not carry out a stringent planning of manpower (PMO-workforce planning). In order to familiarize its members with such a practice and to encourage them to participate in it, the Federation produced a document for this purpose, entitled “Nursing workforce planning (PMOI), a structured and integrated process”. The Federation also held training sessions and made a team of consultants from the Federation available to the local teams to support and guide them, as needed. All of these manpower planning exercises made perfectly clear the pertinence and necessity of intervening in organization of work in order to reduce, if not remedy, the labour shortage in the institutions in the health-care network.

2002

- As recommended in the report from the Quebec Forum on Nursing Workforce Planning (2001), a provincial support programme for organization of work was set up in 2002 by the MSSS. This programme has since been renewed and, the government has invested, up to today, significant amounts of money to support intervention projects in organization of work in the institutions, and this, in collaboration with the Federation.

2002-2003

- The Federation actively and effectively participated in the research and writing of the MSSS report entitled *Recherche sur les facteurs d'attraction et de rétention des infirmières du Québec - Statut d'emploi - Disponibilité - Cheminement de carrière* (2003) (Research on the attraction and retention factors of nurses in Quebec - Job status - Availability - Career path). The majority of the recommendations in this report were linked to the content or the context of work, hence at the heart of organization of work; they were directed particularly to workload, arrangement of work time, organization of care, training and professional improvement, supervision and the work environment.

2003-2005

- Within the scope of the work carried out by the Federation for the renewal of the collective agreement, the negotiation priorities retained by the members had close ties to organization of work, notably arrangement of work time, stabilizing positions, maintaining and developing competencies, preventing violence, speeding up the settling of disputes, accessibility to daycares, merger of job titles, creation of new job titles, review of wording in accordance with Bill 90 and modified wording. The Federation made major gains in the normative clauses during these negotiations but unfortunately, they were marred in December 2005 by the passing of Bill 142 under gag order, by the Quebec government. This bill imposed the working conditions and salary of some 450,000 workers in the public sector. In this Decree in lieu of a collective agreement (May 2006-March 2010) several provisions were provided for the Committee on Care (CC- Article 13).

2005

- The Federation, fortified by the arrival of new care professionals in its membership, and as provided in its Constitution and Bylaws held, for the first time, nurse, nursing assistant and respiratory therapist commissions. These commissions were intended to be a place of information, reflection and exchange on the contents of the document entitled "The organization of work in a changing world". Using this document, each commission at the December Federal Council, discussed, in workshops, the impact of the restructuring of the healthcare system on the organization of work of the members. Remember that these discussions pursued three objectives: to adopt a common vision of organization of work, to identify the goals and objectives of the laws passed since 2003 and the changes that arose from them and, lastly, to specify the impact of these changes on the organization of work of the members of the Federation. The results from these discussions enabled the Federation to better define the issues and challenges silhouetted in the network and in matters of organization of work.

2005-2006

- Bill 30, passed in December 2003, moved the negotiation of several matters from the Quebec level to the local level: many of these matters dealt with the content and context of organization of work. In order to support its members in the local negotiation process, the Federation set up a huge training operation for union representatives on the local negotiating committees, the spokespersons from the Federation and the presidents. It also developed several documents and tools for the negotiating committees and the spokespersons.

2007

- During the month of September, the Federation became a member of the *Table nationale de concertation sur la main-d'œuvre en soins infirmiers* (Quebec Forum on Nursing Workforce Planning) whose mandate was to find concrete solutions to reduce the use of overtime and private agency personnel. The Federation also participated in the work of three sub-groups of this Forum; one dealing with organization of work, another with the conditions of practice and the development of competencies and the third one with working conditions. Many of the recommendations and solutions proposed by the Forum and these sub-work groups in a final report tabled in June 2008, ordered targeted interventions on several of the content and context elements of organization of work.

2008

- In the wake of the work led by the *Table nationale de concertation sur la main-d'œuvre en soins infirmiers* (Quebec Forum on Nursing Workforce Planning), several pilot groups were created to work more specifically on certain care fields (mental health and social services, rehabilitation, etc.) or targeted personnel categories (ex: beneficiary attendants, management personnel, nursing, respiratory therapy) in order to study different measures that could be used to solve the various problems affecting the functioning of the health-care network. Several of these measures deal with the reorganization of care and work at the local level. The Federation sits on two of these pilot groups, the one on nursing care and the one on respiratory therapy.
- At the December Federal Council, one of the three priority actions retained by the Federation was the re-appropriation of organization of work. The objective pursued by this orientation was to consolidate and to make known its vision on organization of work to carry out a provincial, regional and local leadership. To accomplish this, five actions were targeted:
 - the drawing up and implementation of an action plan on organization of work ;
 - the distribution of a special feature publication - Organization of work ;
 - the production of FIQ tools for the union consultants and the local teams -ILOT grid, Workload, Committee on Care ;
 - support, for the union consultants and local teams, as needed ;
 - supporting and developing the implementation of innovative local projects on the organization of work.

2009

- For several years the MSSS has renewed its “*Programme national de soutien à l'organisation du travail*” (Quebec Programme of Support for Organization of Work). This programme financed several local and regional projects in organization of work. The Federation ensured the necessary support of its members involved in these projects, watched over their actual progress, made interventions, if needed, with the MSSS in order that they apply pressure on the employers who appeared reluctant to allow the members of the Federation to really be involved in these projects.

This historical reminder shows, without question, that the Federation's interest in the field of organization of work has never waned since its creation. Its advances in this field, its expertise and the gains secured over the years, have made the Federation the best equipped and most credible on the subject of organization of work.

All of these actions and these demands in organization of work from the FIQ have always had the same objective: give the members better control over their work by taking an active role in resolving problems linked to organization of work in their respective workplaces. The Federation's goal has always been to develop an organization of work which promotes, not only a quality of life at and outside work for its members, but also a quality of services within the health-care network.

The Committee on Care, the place of preference to intervene

Following the passing of Bill 30 in 2003, which moved matters that were historically negotiated at the Quebec level to the local level, the Federation and its members were heavily involved in the process of local negotiations. The main local interventions on organization of work were focused on workload problems due to lack of time and means. Due to such a context, the advances in organization of work that have been the fruit of efforts doggedly deployed with determination over the years, were slowed down over the last few years.

That negotiation process now being over, it is essential and urgent to refocus union action in this area, in the workplace itself, where the health-care institution administrations have always considered task and organization of work as being part of management prerogatives. Although some administrators sometimes show some latitude towards the local union teams, several demonstrated resistance to share this power with the employees and their representatives as they feel it belongs exclusively to them.

Act locally to influence decisions

The effective democratization of the workplace requires a change in the organizational culture, in the ways of thinking and doing. Such a change cannot be imposed: it is a slow process, difficult to take root. It is however, possible to accelerate this process through union actions and interventions in order to benefit from its fallout as soon as possible. Concretely, this can be done by using certain formal and informal places, structures and mechanisms which exist in the institutions locally, in order to participate in the research of solutions and to influence decisions: the centres of activities, pilot projects, Council of Nurses, nursing assistant committees, multidisciplinary committees, Committee on Care.

These places, these structures and these mechanisms are all, except one, a form of participation in management of a consultative nature, but are not decision-making. Only the Committee on Care (CC) is a decision-making body and if the employer's decision is not satisfactory to the employee or the union, it is always possible to appeal to a resource person and as a last resort to ask for arbitration.

The existence of a committee on care is embedded in the collective agreement (article 13). The purpose of this parity committee is to study employees' complaints of workload; it can also look at any issue directly concerning care. This committee enables the parties to discuss and argue all the components of organization of work (content and context) in order to come to a decision which will satisfy both parties.

Because it is a decision-making body and part of the collective agreement, the Federation believes that the Committee on Care must be the preferred place of intervention and discussion to deal with everything that affects organization of work at the local level, a place to negotiate organization of work. Besides the specific mechanisms provided in the collective agreement, the employees' representations are still often little or not associated with the decision-making process on these issues that affect them locally and daily; it is essential to use the Committee on Care as a preferred means to improve the conditions which impact work and the quality of life at work for care professionals.

Taking back control of organization of work to improve working conditions

In this era of continual change in all sectors of activities, using means of influence and power appear to be determining factors in the improvement of working conditions and life at work for care professionals. Their participation in the decisions which concern them is not only desirable, but necessary for the local union to take back organization of work, to consolidate the gains in this field and to increase their local power and to obtaining minor or substantial gains.

The reorganization of structures, services and practices which have taken place in the health-care network since 2002, following the passing of a multitude of laws, generated major changes, mainly at the local level. Some changes are far from over: redefinition of the roles and the place of care professionals, the sharing of their roles, duties and responsibilities, introduction of new approaches and new methods of providing care. All of these ongoing changes must be discussed at the local level and it is essential that the care teams, local teams and the representatives of the employees on the Committees on Care mobilize, participate and get involved in their daily routine and the most promising and winning structures in order to do this. It is a question of the redefinition of their work, the practice of their profession, the organization of work, their quality of life.

For the Federation, the implementation and effective use of the Committees on Care are the key factor which promote an effective democratization of the workplaces.

The Committee on Care must be the preferred place of intervention and discussion to deal with everything that affects organization of work at the local level, a place to negotiate organization of work.





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