



# ENACTION

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Special Provincial Council on March 30  
Special Provincial Council on April 12

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## INTERSECTORAL COMMITTEE'S WORK ON MOT AND IL THE FIQ AND FIQP WILL SURVEY YOU IN MAY

The intersectoral committee on mandatory overtime (MOT) and independent labour (IL) gave the delegation an update on the provincial action plan on MOT. The committee stated that MOT is still at the centre of the FIQ and FIQP's battles and that the pressure must be maintained and actions to eliminate it continued.



Though the objectives of Minister Dubé's plan to overhaul the health network are to end MOT, no means to achieve this have been announced yet. Is this just another electoral promise? Time will tell.

### INTENSIFY THE PRESSURE TACTICS

Not being able to remain mere spectators of Dubé's plan, the FIQ and FIQP will survey you in May to find out your opinion on different actions which could be taken for us to be heard and for the use of MOT to finally stop.

Since MOT does not affect all the institutions, the survey will also

deal with actions to counter MOT, contingency plans, non-replacement of absences and the substitution of job titles, as well as interventions for forcing the passing of a law on ratios. All these problems add to the healthcare professionals' workload and provincial actions must be able to respond to the full range of affiliated union realities.

The survey will be conducted by the Léger firm and widely publicised. The survey results, analysis and recommendations, if applicable, will be presented at the Provincial Council in June.

### CREATION OF AN AD HOC COMMITTEE

To continue the actions set out in the provincial action plan and build bargaining power around common objectives, the delegates adopted a recommendation to create an ad hoc committee composed of seven union reps from institutions dealing with MOT, including one union rep from an institution dealing with non-replacement and substitution of job titles. This committee will work in close collaboration with the FIQ intersectoral committee to finally put an end to using MOT. ■



THE ELECTION FOR NEGOTIATING COMMITTEE MEMBERS WAS HELD ON APRIL 12, 2022. THEIR MANDATE WILL BEGIN ON APRIL 25.

Left to right:

Jérôme Savard, Licensed Practical Nurse, CIUSSS du Saguenay-Lac-Saint-Jean, Stella Laroche, Nurse, CIUSSS de l'Est-de-l'Île-de-Montréal, Pascal Beaulieu, Nurse, CHU de Québec, Cindie Soucy, Nurse, CISSS du Bas-Saint-Laurent, Nathalie Perron, Nurse Clinician, CIUSSS de la Mauricie-et-du-Centre-du-Québec, Mylène Durocher, Respiratory Therapist, CHUM, Julie Côté, Respiratory Therapist, CISSS de la Montérégie-Centre.



**WORD FROM THE PRESIDENT**

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**WHY NOT TRY WORKING TOGETHER?**



You have a front-row seat to see that the issues affecting working conditions, as well as the supply and quality of care provided in the health network, are numerous and complex. In fact, all the reform, reorganization and redesign projects of the health network, which have been developed in a vacuum, without working with the stakeholders, have ended in failure. Why? Because they were simply not in touch with the reality in the field.

It's not always easy working together, but it's the only way to get results. However, the government seems to have forgotten this basic principle.

It is tempting to be cynical when we hear the Minister of Health making the same promises today as he did after the 2018 election. Vague promises on MOT or on independent labour, which he says he wants to achieve as part of another reform of the health network.

In many respects, the unions' input and in-depth knowledge of the field would have been beneficial in targeting the right measures and ensuring that staff remain in the public health network. But the government did not want to give us a seat at the table.

As a union, it is our responsibility to make your voice heard and to defend your interests in the public arena. Putting forward your demands and structuring solutions

for the network is a team effort that we accomplish every day in consultation with your local representatives and our other partners.

This is what prompted us to agree on a solidarity protocol with the CSQ, CSN and FTQ. With no raiding period this summer, each labour organization can focus on the work of democratically agreeing, with its members, on the priorities for the next provincial negotiations.

We are stronger together. It may seem like a cliché at first, but it is a principle even children are taught. This principle is also the basis of mobilization and building bargaining power.

It is in this context that we are continuing the ultramarathon to force the government to urgently address the work overload in the network through structural and permanent measures, such as passing a law on safe ratios.

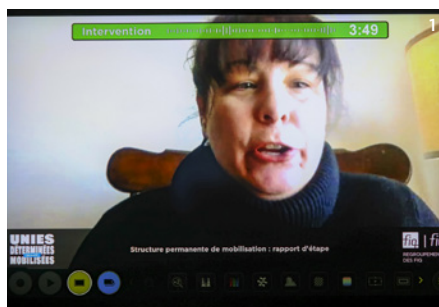
Unfortunately, it often takes patience to bring about change in the health network.

Whether it is MOT, non-replacement, reassignments or the substitution of job titles, all the issues of work overload, organization of work and lack of respect for your expertise have negative impacts on your physical and mental health and are detrimental to the quality of care. Over the coming weeks, we will continue to conduct our actions in the field, and we ask you to participate in local initiatives.

The battles we are waging for a more humane workload, for respect of the work contract and workday and for access to true work-family-personal life balance are essential. They are the foundation of your working conditions, but also a step towards better quality of care for the population. ■



Every year, in solidarity with millions of other workers across the world, there's a walk to celebrate International Workers' Day. This year's theme is "For a good quality of life." One of the demands this includes is the opportunity to have quality jobs in which workers are respected. For healthcare professionals, this means more humane workloads, sufficient periods of rest and real access to work-family-personal life balance, all of which should be fundamental to working conditions.



**PERMANENT MOBILIZATION**

There are many challenges to improving the working conditions of healthcare professionals. These challenges have grown with the COVID-19 pandemic. The delegation wanted to hold discussions to develop new tools, training, and places for discussion to increase its power to defend its members' working and practice conditions.

The considerable scope of contact with members, as well as the importance of solidarity and union battles, led by and for the 76,000 healthcare professionals represented by the FIQ and FIQP, were reiterated during a progress report presentation on the permanent mobilization structure. Affiliated unions are more united, determined and mobilized than ever to strive for strong, permanent mobilization.

1. Jacynthe Bruneau, Syndicat des professionnelles en soins de la Mauricie et du Centre-du-Québec  
 2. Myriam Desrochers, Syndicat des professionnelles en soins de l'Outaouais  
 3. Cyril Gabreau, Syndicat nordique des infirmières et infirmiers de la Baie d'Hudson