

What's NU?

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NSNU and NSHA Leaders Provide Progress Report on Workplace Safety

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President's Notebook

Janet Hazelton, BScN, RN, MPA

Nurse Practitioners Offer a Viable Solution for Families Without Physicians Seeking Care for Newborns

As president of the Nova Scotia Nurses' Union, I feel compelled to comment on the difficulties families face when they welcome a newborn but are without a family physician.

There are many reasons why newborns require follow-up care, some more critical than others but none should be dismissed, especially when new parents are in the picture.

In the article published in the Chronicle Herald, Dr. Doug McMillan, who works in the neonatal intensive care unit (NICU) at the IWK Health Centre, cited some of the concerns families with newborns face, particularly those with health issues who have spent time in neonatal care and those struggling with breastfeeding.

Although the IWK is addressing the problem by offering an unattached newborn program which provides a doctor to a child who requires primary care but does not have their own GP, we must not forget our highly skilled nurse practitioners and the role they can play in the care of newborns and their moms.

Workload issues and the doctor shortage are of great concern for all families in Nova Scotia, particularly those in rural areas of the province. Part of the remedy, other than recruiting more doctors and doing more to retain them, should include assigning more newborns to our very competent NPs, of which there are at least six across Nova Scotia accepting unattached newborns from the IWK and their own catchment area.

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On the cover: Janet Hazelton and Carmelle d'Entremont provide a progress report on workplace violence initiatives



NP-led services include prenatal, newborn, postnatal, childhood and episodic care for those without a primary care provider (PCP). In regions faced with PCP challenges, NPs and RNs are working together to help alleviate stresses on the system by providing safe care for patients.

The NSNU believes the province should be doing more to promote the advancement of nursing in community care. In the words of one of our nurse practitioners, there are two gatekeeper groups for primary health care, NPs and MDs.

Given limited doctor availability, we must do more to optimize the scope of practice for our NPs. Utilizing all of our well-educated nurses to their full potential will relieve some of the short-term pressures and uncertainties Nova Scotians encounter daily and deliver long-term solutions that will build better care teams for the future.

Janet Hazelton

NSNU and NSHA Leaders Provide Progress Report on Workplace Safety

On January 25th, NSNU president, Janet Hazelton joined Carmelle d'Entremont, VP of People and Organizational Development for the Nova Scotia Health Authority at a news conference to provide a progress report on recommendations made in the 2017 report, "Improving Workplace Safety in Nova Scotia's Community Emergency Departments". Co-chaired by Janet and Carmelle, the report was drafted by a working group convened in late 2016 to tackle the ongoing issue of violence in health care workplaces.

As some members may recall, the task force was struck in 2016 as the result of an incident in which a man brought weapons into a Middleton emergency department and threatened staff.

Since that time, well over 800 reports of violence in the workplace have been formally received by employers across the province; this number does not reflect the full scope of the problem as many incidents go unreported.

At the news conference, the co-chairs discussed the work that has been done to date, including the twelve recommendations, but also talked about the value of unions and employers working together toward common goals.

"We are pleased with the progress made on the recommendations and the commitment from NSHA to making our workplaces safe," Janet said. "We all agree that there is still work to be done, and I look forward to the day when nurses, and other health care workers, can go to work and not be concerned about facing workplace violence."



Janet Hazelton responds to a question from the media, alongside Carmelle d'Entremont

Much has been done to lay the groundwork for a safer health care system, including a more consistent, standardized approach to dealing with incidents system-wide.

Violence risk assessments and plans have been created for all 25 emergency departments across the province. As well, staff in higher-risk environments have been given communication devices they can use to alert co-workers that they're in trouble. But more must be done to ensure that appropriate levels of security are accessible when help is needed, and there must be a cultural shift.

"The public must begin to understand that it is unacceptable, no matter how frustrated or stressed you become, to take your frustrations out on care providers, the very people who are trying to heal and help you or your loved one," says Janet. "The public must come to terms with this in the same way that employers and workers are now saying, this is not part of the job."

Work is in progress on implementing a system that will red flag potentially violent patients. That patient alert system will be piloted in emergency departments beginning this spring.

The NSNU would like to thank staffer Paul Curry for his work writing the report with others from within the committee.

A full progress report can be found on the NSHA website at www.nshealth.ca/nsha-workplace-safety-progress-report.





Changes to LTC and Community Care PNC Elections

In the December 2017 issue of *What's NU?* an article was published regarding the process of electing the Provincial Negotiating Committee for LTC and Community Care sectors. Since that time, the NSNU has had to revise our approach to accommodate those who may not be able to attend the AGM, which is where voting for the LTC and Community Care PNC election was to have taken place.

Voting for this PNC is being delayed until after these Components meet in Truro at the AGM on April 23. At that time, the process will be discussed and confirmed.

In the meantime, members are still asked to consider putting their names forward as potential representatives on these respective negotiating committees. The structure of this PNC is as follows:

Long Term Care Sector

The composition of the Long-Term Care Provincial Negotiating Committee is as follows:

- i) the President
- ii) The Vice President Long Term Care
- iii) four (4) members at large employed by employers in the long-term care sector, with one member at large from each of the four regions (Central, Western, Northern, Eastern)

Each region should also elect at least one (1) alternate member at large for this sector. If the member at large from this sector needs to be replaced, the alternate with the most number of votes will be appointed and so on.

Community Care Sector (Victorian Order of Nurses)

The composition of the Community Care (Victorian Order of Nurses) Provincial Negotiating Committee is as follows:

- i) the President
- ii) the Vice President Community Care
- iii) four (4) members at large employed by the Victorian Order of Nurses, with one member at large from each of the four regions (Central, Western, Northern, Eastern)

Each region should also elect at least one (1) alternate member at large for this sector. If the member at large from this sector needs to be replaced, the alternate with the most number of votes will be appointed and so on. The NSNU will continue to accept Expression of Interest forms, found at nsnu.ca/FormsandResources, leading up to the AGM. Please return your completed form to the NSNU via lorna.myers@nsnu.ca. Members will be notified about the new voting call after the Annual General Meeting in April.

Court Grants Intervenor Status to NSNU and Other Unions in Bill 148 Review

The Nova Scotia Court of Appeal has granted intervenor status Nova Scotia unions in the court's review of Bill 148. The unions will now be in a position provide oral and written submissions as the court tests the constitutionality of Nova Scotia's controversial legislation, known as the *Public Services Sustainability Act*.

Bill 148 was proclaimed on August of last year, imposing a three per cent cap on wage increases and freezes the long service award.

Having been cautioned that the bill would not stand up to a charter challenge, the government asked the Court of Appeal to review the bill's constitutionality.

The unions await further instruction and information on this matter.

The unions that have been given intervenor status include:

- Canadian Union of Public Employees
- Canadian Union of Postal Workers
- Nova Scotia Government and General Employees Union
- Nova Scotia Nurses' Union
- Nova Scotia Teachers Union
- Service Employees' International Union Local 2
- Unifor
- International Union of Operating Engineers Local 727

Are You Eligible for Retention Incentives?

Recently we received a call from a nurse who should have been eligible for one of the retention incentives but had not applied in writing as per the terms of the collective agreement. Unfortunately, she applied at the end of the period and was no longer eligible. This article is a

reminder to those who may be close to retirement and may be interested in the incentives under the contract. Please make sure you follow the contract and apply in writing if directed by the language in the article.



Acute Care and Long Term Care (see LTC contract for article numbers under Art 19)

19.07 Nurse Retention Bonus

The Employer will provide a Retention Bonus to eligible Nurses who agree to remain employed for the following twelve (12) months. The Retention Bonus shall be equal to two percent (2%) of the gross annual base earnings (exclusive of any premiums). The Retention Bonus will be paid following the completion of the twelve (12) month employment period. To be eligible a Nurse must be able to retire with an unreduced pension under the terms of the NSHEPP Pension Plan. The Nurse must apply in writing to participate in the Retention Bonus. A Nurse may apply for and participate in second and subsequent years.

19.08 Retiree Recruitment Incentive

The Employer will provide a Recruitment Incentive of \$500 per year to any retired Nurse who, after retirement, agrees to return to work for at least twenty-four (24) "relief" shifts in a 12 month period. The Casual Nurse must re-apply in writing in order to participate in the Incentive. The \$500 will be paid to the Nurse after the completion of the minimum twenty-four (24) "relief" shifts. For clarity, the "relief" shifts must be shifts worked on a casual basis and does not include any "relief" shifts worked while holding a regular or temporary position with the Employer.

VON

22.04 Retiree Recruitment Incentive

The Employer will provide a Recruitment Incentive of \$500 per year to any retired Nurse who, after retirement, agrees to return to work for at least twenty-four (24) "relief" shifts in a 12 month period. The Casual Nurse must pre-apply in writing in order to participate in the Incentive. The \$500 will be paid to the Nurse after the completion of the minimum twenty-four (24) "relief" shifts. For clarity, the "relief" shifts must be shifts worked on a casual basis and does not include any "relief" shifts worked while holding a regular or temporary position with the Employer.

22.05 Supplementary Leave Credits - Late Career Registered Nurses

This provision is not applicable to a casual nurse (except a casual nurse while in a Temporary Position).

To encourage Late Career Nurses to continue working, the VON will grant paid leave of up to 37.5 hours per year to a Registered Nurse who is also in receipt of the Long Service Increment. Scheduling of such leave shall be by mutual agreement however scheduled time off shall not be permitted during the Summer Vacation Period and Dec 15th to Jan 7th in each vacation year. Hours not scheduled are not carried from one year to the next. That is time not used shall not be carried past March 31st each year.

2018 Eastern Labour School

The 2018 Eastern Labour School will be held at St. Francis Xavier University in Antigonish, NS, from Monday, June 4th to Wednesday, June 6th, 2018.

Those wishing to attend should consult their local executive regarding sponsorship or apply directly to the NSNU for a sponsored seat at the event.

Registration

Members must register online at www.nsnu.ca/MyNSNU. Registration will be live from Monday, March 26, 2018 until Monday, April 30, 2018 (registration deadline). Visit the Eastern Labour School page on MyNSNU to access the registration form. Most fields on the registration form are mandatory. In order to receive confirmation of your registration, you must enter a valid email address. If you require your MyNSNU login information or assistance with online registration, please contact NSNU.Office@nsnu.ca or call the Union office at 1-800/902-469-1474.

Provincially Sponsored Draws: First-Time Attendee and 35 & Under

If you are a first-time attendee or age 35 and under, you can apply for one or both of these draws (if you meet the criteria). An online Expression of Interest form for these categories will be open between February 16 and March 16. Draw winners will be randomly chosen following the March 16 deadline and winners will be notified shortly thereafter. The forms can be found at nsnu.ca/MyNSNU.

Glenna S. Rowsell Scholarship

The Union will choose one member via blind selection to attend Eastern Labour School. Please apply online at www.nsnu.ca/scholarshipsandbursaries. Expression of Interest applications will be accepted from first-time attendees only between February 16 to March 16. The successful candidate will be notified shortly thereafter, as will the unsuccessful applicants.

Courses

Fundamental courses are recommended for first-time attendees. You will participate in one of the four Fundamentals offered over the course of the event. Members who attend the 90-minute courses will participate in five courses in total (three on June 5, two on June 6). When completing your registration form, please rank your course choice in order of preference. Members applying for a course may not receive their first choice. Classes fill up quickly, so please register as early as possible, bearing in mind that PEINU, NBNU and RNUNL members will be registering for the event as well.

Fundamentals (1.5 days)

- General Labour Relations
- Les relations de travail (course in French)
- Grievance and Arbitration
- The Legal Realities of Nursing

90-minute courses (5 sessions over 1.5 days)

- Social Media
- Respectful Workplaces
- Effective Communications
- Nursing and Addiction
- Workplace Violence
- Domestic Violence
- Facing Management Effectively
- Nursing and Technology
- Workload and Professional Practice

7 Reasons to Come to the NSNU AGM

There are so many great reasons to come to the NSNU Annual General Meeting, taking place April 23-26 at the Best Western Glengarry Hotel in Truro – here are just a few!

1

Take part in debates about health care, policy, governance and solidarity

Passing or defeating resolutions, and determining the Union's stance on complicated issues, are not always accomplished quickly and easily. Discussion and debate is a cornerstone of the NSNU AGM, and members are encouraged to stand up and share their views on complex issues to help inform the Union's position going forward.

Discussion at the AGM can affect policy changes, amendments to the constitution, plans and projects of the Union.

2

Hear from inspiring and informed speakers

The NSNU AGM and Education Day features speakers from diverse backgrounds, sharing their insights on issues that matter to nurses and workers. Guest speakers provide a break from the rigours of the business aspect of the AGM, while offering unique perspectives on issues that are relatable to many.

This year we're looking forward to hearing from Big Daddy Tazz, a comedian and motivational speaker who offers an honest and nuanced look at his experiences living with mental illness. It promises to be an inspiring presentation with moments of sincerity, humility and humour.

3

Have your voice heard at the microphone or on the ballot

Throughout the AGM, members are encouraged to come to the microphone and speak on issues that are important to them. This can include supporting or offering a different perspective on resolutions, asking questions, and sharing personal stories with relation to the topic at hand.

Approximately half of the members who attend the AGM will come as voting delegates. Voting delegates are there to represent the opinion of their local as they vote on resolutions and elect Union leadership.

4

Hear firsthand about the work being done by NSNU and other nurse unions in the country

The AGM provides a venue for the NSNU president to address members about the work that has been done by the Union over the past year, and discuss some of the issues the Union plans to tackle over the next several months. Members also participate in regional and component meetings where they're able to get more targeted updates from their representatives on the Board.

In addition to hearing from NSNU leadership, AGM attendees get to hear from nurse leaders across Canada. It is not unusual to have presidents from several of our provincial counterparts on hand during the event, each of whom take a little time to update members on health and labour issues in their home provinces. The president of the Canadian Federation of Nurses Unions also attends the AGM, and speaks about the work being done federally to improve work life for nurses.

5

Expand on your nursing network and feel supported by professionals across Nova Scotia

One of the best things about the AGM is the comradery between nurses from Sydney to Yarmouth and everywhere in between. Activists and newcomers from locals across the province come together to participate in the AGM business days, education day, meetings and activities. Throughout all of these events, members are able to build their professional networks, and make new friends.

In addition to meeting new people, the AGM provides a great opportunity to strengthen bonds with your colleagues. Away from the daily challenges of the workplace, members have an opportunity to get to know each other better and build stronger working and personal relationships.

6

Strengthen your knowledge of labour and workers' rights

The AGM often serves as an education on the issues facing workers, and the efforts of unions and other labour organizations to improve conditions and work life for all. Representatives from the Canadian Labour Congress, the Nova Scotia Federation of Labour and the Nova Scotia Health Coalition are familiar faces at our event, who take time out of their busy schedules to provide updates on important issues and share the inspiring work being done in our communities and beyond.

7

Earn practice premium points

Each year, members are eligible to earn up to \$1700 by submitting their Practice Premium Points and Leadership Premium Points. Points can be earned by participating in educational endeavours outside of work, like taking a course, attending a lunch and learn, participating in workshops, doing committee work, and attending the NSNU AGM and Education day.

Members who participate in the AGM and Education Day are eligible to collect Premium Points. Attendees are provided with certificates that can be submitted to their employer.

Please refer to your contract for details on how to accrue and submit your premium points.

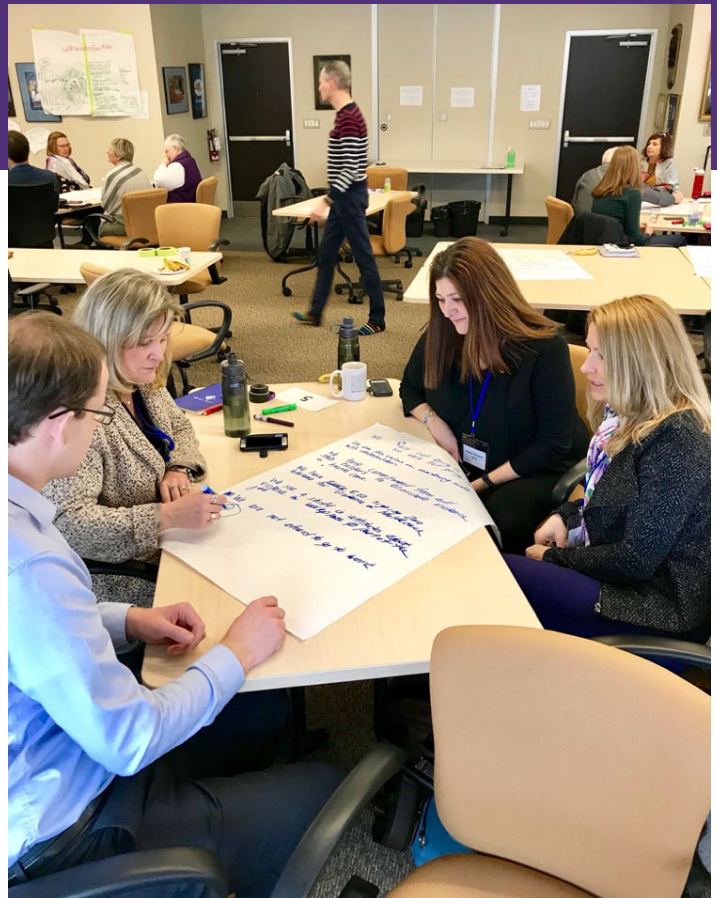
CFNU Roundtable on Workplace Violence

In January, NSNU president, Janet Hazelton and Researcher/Educator and Government Relations Advisor, Paul Curry joined nursing and labour leaders from across the country in Ottawa for a two-day roundtable on workplace violence. The meeting was hosted by the Canadian Federation of Nurses Unions (CFNU).

The roundtable featured speakers who are experts in occupational health and safety. They talked about facilities across the country that have undertaken comprehensive efforts to prevent incidents of violence, with notable success. Following those discussions, participants formed collaborative groups to talk strategy for dealing with violence in health care.

Conversation about workplace violence has ramped up in recent years. Nurse unions across Canada, including the Nova Scotia Nurses' Union, have been outspoken about the need to protect nurses and all health care workers. In Nova Scotia, the NSNU has partnered with the Nova Scotia Health Authority and other stakeholders to take an active approach when dealing with this issue in community emergency rooms – just one of many examples of the work being done locally to reduce incidents of workplace violence.

But the problem persists across the country. In a recent CFNU poll, 61% of nurses reported a serious problem with violence in the past year, including bullying, emotional or verbal abuse, racial or sexual harassment, or physical



Janet Hazelton, Paul Curry, NBNU president, Paula Doucet and SUN 1st VP, Denise Dick form a collaborative group, envisioning a violence-free Canadian healthcare sector

assault. A full two thirds (66%) pondered leaving their job to work for a different employer or in a different occupation.

"It's a pressure cooker out there for workers on the frontline," said CFNU president, Linda Silas. "Violence is intensifying as staff is cut to the bare bones and left to manage more and sicker patients than ever before."

The number of violence-related lost-time claims for frontline health care workers has increased by almost 66% over the past decade, three times the rate of increase for police and correctional service officers combined.

Violence in health care workplaces is an ongoing issue without a clear-cut solution. In a follow-up to the roundtable, CFNU will be summarizing the input provided by participants of the collaborative groups, and using it to further inform its own messaging, and that of its member organizations. With collaboration and cooperation between many institutions at all levels of care, we hope to see significant improvements going forward.



CFNU president, Linda Silas addresses participants of the Roundtable on Violence

A Tough Flu Season Means Closer Attention to Prevention

On a stormy Tuesday, January 22, Janet Hazelton dropped by the CTV Morning Live studio to chat with host, Heidi Petracek about this year's nasty flu strain.

Overall, influenza activity in Canada is very high. The majority of influenza detections continue to be A(H3N2), although 37% of detections were influenza B. Influenza B began circulating much earlier than usual this season; detections are substantially greater this season compared to previous years.

To date, the majority of lab confirmations, hospitalizations and deaths have been among adults 65 years of age and older. When this publication went to print in late January, close to 85 flu-related deaths had been reported in Canada compared to 49 at this point last year. Typically, it is estimated that influenza causes approximately 12,200 hospitalizations and 3,500 deaths in Canada each year.

In Nova Scotia, more adults 45-64 years of age have been contracting the virus than in previous years, although highest severity is still seen in 65+.

There have been 99 lab-confirmed cases of Influenza A this year, 21 Influenza B for a total of 120 so far. At this point last year there were a total of 80 confirmed cases. Also, at this time last year there were no reports of Influenza B, but there are over 21 thus far. Influenza B tends to be less severe and usually appears later in the season.

There have been over 10 ICU admissions for flu this year, and six deaths. This year's total number of hospitalizations, ICU admissions and deaths is higher than this point last year (73 cases compared to 49).

Getting vaccinated against influenza each autumn is the best way to help prevent influenza infection. Nova Scotia provides a quadrivalent vaccine (immunizes against H1N1 virus and H3N2 virus as well as two strains of Influenza B). Experts report that it is too early to determine the effectiveness of this year's vaccine; last year's vaccine was 42% effective against H3N2. Vaccination rates (how many Nova Scotians received the vaccine) are compiled towards the end of the season.

In addition to the vaccine, how do we prevent getting and spreading the flu? Nurses know the answers.

- 1) Still time to get your shot
- 2) Try to prevent getting and spreading the flu – hand wash
- 3) Use coughing and sneezing etiquette
- 4) Keep shared surfaces clean, especially if someone in your household or at work is ill
- 5) If you do become ill, stay home, rest – see your doctor or NP if your symptoms worsen



Janet Hazelton speaks to CTV's Heidi Petracek about flu prevention

Holiday Cheer: NSNU Staff Toy Drive

NSNU staff held their annual Secret Santa toy drive on December 15th, a favourite holiday tradition at the office. Each year staff members buy a gift that they believe their colleague's "inner child" would love. Opening the gifts together is always great fun, with big laughs, a couple "oohs" and "awws" and lots of good cheer.

Following the exchange, all of the gifts were packed up and NSNU president, Janet Hazelton brought them to Kent in Bayers Lake for the FM 101.9 toy drive, with proceeds going to the YWCA Halifax. The folks from the radio station were thankful for the donation, and took a few minutes to chat with Janet on air about the NSNU toy drive, and thanked nurses who would be working through the holidays.

Though it can be tough to give up some of those wonderful gifts – giant teddy bears are especially hard to part with – it is always an honour to be able to make the holidays just a little brighter for children in need within our community. Thanks to Kent and FM 101.9 for getting our donations to a great local charity.



Janet and FM 101.9 personality Amanda Misner pose with the NSNU contribution to the toy drive



Janet Hazelton addresses participants online and in-person from the NSNU office

2018 Webinar Series Off to a Strong Start

NSNU hosted the first installment of our 2018 Webinar Series on January 15th. It focused on the issue of Violence in the Workplace, and was presented by NSNU president, Janet Hazelton. The two-hour long event covered a broad range of topics around workplace violence, with one central theme: Violence is Not Part of the Job. The presentation prompted many insightful questions and comments from participants.

The great thing about the webinar series is that it opens up education opportunities to the full NSNU membership in one shot. The first webinar had 110 participants online and in-person, including several locals who live streamed the presentation at their facilities for groups of members to watch together.

For more information about upcoming webinars in the series, or to view videos of past webinars, visit nsnu.ca/webinars. Registration for each event will open one month in advance to give members lots of time to sign up.



From time to time we invite NSNU staff members to submit articles that highlight the work they do, who they serve, and what role they play within the framework of the Union. This piece was submitted by Lilo Wessels, Labour Relations Representative and Mental Health and Addictions Consultant.

NSNU Staff Update: *Lilo Wessels*

They say that as you get older time passes more quickly. I can't believe that I'm in my 18th year with the NSNU; I have a few more fine lines etched on my face and few more grey hairs – and a whole lot more experience as an LRR! It's been a fabulous time.

My portfolio includes work with the Cape Breton Health Authority, as well as long-term care facilities on the Island and the Provincial Shannex Group. The role of an LRR also includes representing nurses before their respective Colleges, and as such, I have participated in numerous or College hearings.

In both the acute and long-term care sectors, we struggle continuously with the nursing shortage and the resulting impact on nurses: short notice call; closures of departments and units; reduction of staffing levels and displacements; and schedule changes, to name just a few. These staffing shortages also delay nurses who are starting new positions.

In 2017 we were able to resolve many job posting grievances in which the Employer, the Cape Breton Health Authority, required a Nursing Degree. The Employer conceded and removed the requirement and now allows for compensatory experience.

Last year I was successful with an organizing drive for Shannex's Lewis Hall in Dartmouth. The subsequent round of negotiations was challenging, to say the least, as it is an extended care facility which is 100% non-funded. However, due to the persistent work of the Negotiations Committee, we now have a Collective Agreement in place, thanks in large part to the work done by committee members, Julie Slaunwhite and Karyn Heissler.

I was again invited by the CFNU to attend the Biennial Convention and facilitate the course, "Addictions and Mental Health – Tough on the Problem, Easy on the People". The course was well attended and received very positive evaluations. I am excited that this important subject matter is chosen year after year, as it verifies my belief that union and local leadership need this type of education to better represent members who are succumbing to this dreadful illness.



Pictured left: Members at Windsor Elms participate in an Addictions workshop, facilitated by Lilo. As the NSNU Addictions and Mental Health Consultant, Lilo often travels to locals around the province to discuss this very important issue.



Cross Canada Check-In



The NSNU is one of eight provincial nurse unions that makes up the Canadian Federation of Nurses Unions. Periodically, we like to check in and see what health and labour issues are making headlines in other provinces, and how our counterparts are managing those issues.



Prince Edward Island

The Prince Edward Island Nurses Union is calling for more openings to be added to the UPEI nursing program to help resolve an ongoing nursing shortage in the province. The Union points to a 2010 restructuring of the PEI health care model, which prompted nursing jobs to be shifted around, changed or dropped, as the reason for the shortage. The Union says, at present, the province is short at least 70 full and part-time nursing positions.

PEINU explains that the ongoing shortage is causing poor morale among nurses, who are overburdened at work, and are being denied time off for vacations and professional development.

The province says they have steadily added more nursing positions since 2007, but they are committed to the further recruitment and retention of nurses as part of their provincial nursing strategy, released in April 2017.



Saskatchewan

Unions in Saskatchewan are calling attention to the dangers employees face when hospitals and other health care facilities do not meet safe staffing levels. Tracy Zambory, president of the Saskatchewan Union of Nurses spoke to media in December about the issues that nurses face on the job when their unit is understaffed.

As members know, short staffing can have many negative outcomes. Zambory discussed a few of those outcomes, including concerns that understaffing could contribute to more incidents of violence and abuse against health care workers, and the risk of injury when nurses are forced to do two-person jobs by themselves, like moving patients or using lifts.

The situation in Saskatchewan is all too common in Canadian health facilities, which is why safe staffing is a priority for provincial nurse unions across the country.



New Brunswick

After 10 years of lobbying, the New Brunswick Nurses Union celebrated a victory in October 2017, when the government announced they would be amending Occupational Health and Safety legislation to protect workers who face violence on the job.

NBNU president, Paula Doucet said, "We're pleased with the commitment from this government to ensure the proper tools and supports are in place – that risk assessments are done – not only for registered nurses in this province, but for workers across New Brunswick. I think it's a huge win."

In preparation of the new legislation, which is expected to be enacted in April of this year, the government has announced plans to work with labour unions, Work-SafeNB and other stakeholders to help ensure the legislation is well-rounded and comprehensive.



Ontario

In December the Government of Ontario proposed extending the language in existing presumptive PTSD legislation to include all front-line nurses, a move that has been championed by the Ontario Nurses

Association for many years. This came just a few months after similar legislation was passed in Nova Scotia.

If nurses are successfully added to the Ontario legislation, it will be assumed that PTSD diagnosed in nurses is the result of a work-related trauma, making them eligible for the same support currently available to other first responders.

Former president of the Ontario Nurses Association, Linda Haslam-Stroud, was particularly happy with the change, "ONA has always known that nurses are in every way first responders and vulnerable to developing post-traumatic stress disorder. It's a great day for nurses who work so hard to provide quality patient care."



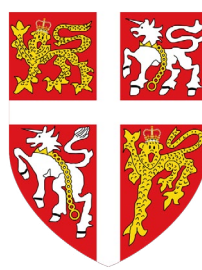
Manitoba

The health care system in Manitoba has been undergoing significant changes in efforts to reduce spending. Under the new system, several emergency rooms have been permanently closed, and hundreds

of nurses have received "position deletion notices". Nurses who were handed deletion notices were given the opportunity, in order of seniority, to select a new position.

On their website, the Manitoba Nurses Union has a comprehensive list of the number of nurses in each facility who have received deletion notices, as well as those who have been reassigned. Although many nurses have found their way into new positions, dozens have been laid off, or remain in limbo.

The Manitoba Nurses Union has been outspoken about how these changes are hurting nurses and patients. In April, MNU held a rally outside the Manitoba Legislature with more than 1000 supporters calling on the government to reverse the cuts. They also launched a petition which garnered more than 9,000 signatures. In December, the MNU Board of Directors met with 40 MLAs to discuss the Union's concerns.



Newfoundland and Labrador



The Registered Nurses Union of Newfoundland and Labrador is in the midst of bargaining a new collective agreement with the province for its members. RNUNL president, Debbie

Forward, has outlined the Union's top priorities as safe staffing and safe workloads.

The main issue for RNUNL is the nursing shortage, which has caused 350 surgeries to be cancelled over the past two years. Additionally, they are concerned about the many nurses who are still being asked to work 24-hour double shifts because there is no one else to cover that time.

In December, the province's deputy health minister, John Abbott, commented that nurses weren't being productive enough on the job, placing the blame for an understaffed, underperforming system back on its workers. His controversial comments caused a great deal of concern for RNUNL and its members, although health minister, John Haggie, quickly responded to say that his opinions weren't shared by others in government. Forward is hopeful that those sentiments will not affect the bargaining process.

Alberta



Early in January, United Nurses of Alberta reached a tentative deal with the government of Alberta that included a two-year wage freeze, on the assurance that there would be no layoffs or reduction of hours for its nurse members. The agreement would be retroactive to April 2017, and is a three-year deal. A pay raise in the third year will be negotiated in February 2019.

There was some good news for members in the tentative agreement, including an extension of maternity leave benefits up to 18 months, and additional leave to care for critically ill loved ones.

UNA believes the deal is fair, considering the current economic climate and the expressed wants and needs of its members. They have recommended that their membership accept the deal when they hold a ratification vote on February 15th.



Screaming Eagles Nurse Appreciation Night

**Friday, March 16 - 7PM
Centre 200, Sydney**



On March 16th, the Cape Breton Screaming Eagles will welcome NSNU members at a Nurse Appreciation Night as they take on St. John Sea Dogs. It's Hockey Night in Cape Breton with a twist as the fans and the franchise show their gratitude to nurses.

From the puck drop to the final buzzer, the NSNU nursing theme will be front and centre. Nurses are encouraged to wear their white and black. Not to be mistaken for linesman or the ref but to bring visibility to our group, make it easier for the NSNU and Screaming Eagles staff to identify members as we hand out prizes and noise makers, and as nurses are called upon to participate in intermission hijinks!

Special rates will apply with the use of a promo code, which will be made available to members via email. Tickets are \$13 for adults (17 years and up) and \$9 for youth (under 17). As per any ticket purchase, service charges may be applicable.

The game starts at 7pm at Centre 200 in Sydney. Be sure to get your tickets for a fun night before they're sold out.

Show your NSNU and Screaming Eagles Pride – March 16th!



#GoEaglesGo

VON Halifax Meets at NSNU Office

VON Halifax held their local meeting at the NSNU office, just prior to the holidays. It is wonderful to be able to host groups like this in the new building, with enough space to accommodate them comfortably.

We hope all of our members at VON Halifax, and across the province, had a very happy and healthy holiday season.



St. Martha's Class of 1978

Where did the time go?

The 40th reunion of the class of 1978 will be holding a celebratory event at The Claymore Motel in Antigonish on Saturday, September 8, 2018.

Optional activities are being arranged for Friday evening and Saturday afternoon. Don't miss out!

For more information and to make arrangements to attend please contact jenniferpertus@ns.sympatico.ca or rcscrivens@bellaliant.net.

NSNU Hosts NSFL Executive Meetings

From January 8-10 NSNU hosted the Nova Scotia Federation of Labour for three days of meetings. Officers and Executive Council members joined together to discuss issues and initiatives related to labour in Nova Scotia. This is the second time the NSNU has hosted the full NSFL executive committee at our new building in Burnside.

With so much happening in labour news here in Nova Scotia, there was no shortage of issues for the group to discuss, including the response to Bill 148, the *Public Services Sustainability Act*, collective bargaining, Federation business and upcoming projects.

The NSFL speaks on behalf of and represents the interests of organized and unorganized workers, fighting for fair collective bargaining and respect for workers. NSNU President, Janet Hazelton is a Vice President-at-Large and NSNU Board members Chris Van Zoost and Jennifer Chapman serve as General Vice Presidents on the NSFL Executive Council.



'Forget About the Stigma': Male Nurses Explain Why Nursing Is a Job of the Future for Men

By Claire Cain Miller and Ruth Fremson

Published by the New York Times, Jan. 4, 2018

Jake Creviston, a nurse practitioner, has been repeatedly mistaken for a doctor.

Adam White says the veterans he cares for as a student nurse at the V.A. hospital feel comfortable around him because, "I'm a big burly guy with a beard."

Glenn Fletcher, after being laid off from a lumber mill during the financial crisis, found a new career in nursing. And with it, "a really good feeling putting your head on the pillow realizing you've helped other people."

The experiences of male nurses offer lessons that could help address a problem of our time: how to prepare workers for the fastest-growing jobs, at a time when more than a quarter of adult men are not in the labor force.

Only 13 percent of nurses in the United States are men, but that share has grown steadily since 1960, when the number was 2 percent, according to a working paper published in October by the Washington Center for Equitable Growth.

"It's not a flood, but it's a change," said Abigail Wozniak, an economist at the University of Notre Dame, who wrote the paper with Elizabeth Munnich, an economist at the University of Louisville. The biggest drivers, they found, were the changing economy and expanding gender roles. We talked to a dozen male nurses, with various career paths and specialties, working in the Pacific Northwest,

where recruitment efforts have focused on bringing men into nursing. Some were drawn to the caregiving, others to the adrenaline of the work. It's a reliable, well-paying job at a time when that's hard to come by, they said, but also one they feel proud of.

Women have been entering male-dominated fields for decades, but it's less common for a predominantly female occupation to have a substantial increase in its share of men. Yet the jobs that are shrinking tend to be male ones, and those that are growing are mostly female.

Nursing is no paragon of gender equality: Even though men are a minority, they are paid more than women. The stigma against men still runs deep, particularly among older patients and in parts of the country with more traditional gender roles, nurses said. (Several said the movie "Meet the Parents," in which Ben Stiller played a nurse whose girlfriend's father wasn't thrilled about his career, didn't help.)

But for some men, the notion that caregiving jobs are women's work is outdated. Progressive attitudes about gender roles, as measured by the General Social Survey, were associated with more men who entered nursing, the new paper found.

"This narrative that men can't provide care in the way that women can is part of that broad cultural narrative that misunderstands what

nursing's about," said Mr. White, the V.A. hospital student nurse, who is earning his nursing degree at Oregon Health and Science University in Portland. "We need to talk with young people about caring as a gender-neutral idea, but also as something that's rooted in skills, in expertise."

The researchers also found that economic factors have played a role — a decline in some jobs because of automation, trade and the housing crisis, and a growth in jobs and wages in health care. Nursing is growing much faster than the average occupation, and wages have increased steadily since 1980. The median salary is \$68,450, about the same as the median salary for college-educated workers over all.

"A lot of those manufacturing jobs and things of that nature just aren't





there anymore,” said David Baca, an emergency department nurse in Medford, Ore. “We get paid a really livable wage, and I think that is now starting to attract more male nurses.”

The paper used census data about men who were born in the United States and turned 18 between 1973 and 2013. They found that the increase in male nurses was largely uniform across the country, although black and Hispanic men and those in rural areas were less likely to become nurses.

Nursing is a career that both men and women often start later in life, in part because it’s possible to become certified midcareer and without a bachelor’s degree. But as hospitals increasingly require nurses to have a four-year degree, it could become a barrier for men who want to enter the field, the researchers said.

“We learned that workers can take a very long time to settle into occupations, but that is not the traditional path that we think of when we think about training our work force,” Ms. Wozniak said.

Male nurses are more likely than females to have worked as emergency medical technicians, military nurses or lab technicians, and to work in acute care in hospitals rather than primary care clinics. Nearly half of nurse anesthetists, one

of the highest-paying nursing jobs, are men.

In interviews, men said they liked the variety of work: Nurses can be bedside caregivers, surgery assistants, educators, technicians or administrators.

Several said they felt an advantage in applying for nursing jobs because men are a minority in the field. Hospitals and patients benefit when nurses more closely reflect the patient population, research shows.

Sometimes patients prefer a nurse of a certain sex, particularly for procedures like inserting a catheter, nurses said, and some men feel more comfortable talking openly with another man.

“I work on this floor with people who just had urology surgery or amputations, and they have told me that when I come in the room and shut the door behind me, they feel more understood and can drop the tough guy attitude,” Mr. White said.

Nursing became a woman’s job because women were seen as natural caregivers, said Patricia D’Antonio, a nursing historian at the University of Pennsylvania. But until the second half of the 19th century, men were assigned nursing jobs that required physical strength and bravery, like caring for patients during a

dangerous epidemic. That began to change when Florence Nightingale brought a group of female nurses to the Crimean War in 1854.

Nursing became such a gendered profession that men were barred from serving in the Army Nurse Corps during the two world wars. Not until the 1960s did the nursing field begin trying to better reflect its patients in terms of both gender and race, Ms. D’Antonio said.

The Oregon Center for Nursing, a work force development group, began recruiting male and minority prospects to nursing in the early 2000s. It started a marketing campaign—“Are you man enough to be a nurse?”—that spread nationwide. Posters showed male nurses carrying a snowboard or wearing a motorcycle jacket.

“It was just rethinking how we describe the work and focusing on the kind of person it takes to be a great nurse,” said Deborah Burton, who founded the center and is now chief nursing officer at Providence St. Joseph Health, a health care system in the West.

More recently, efforts to recruit male nurses have focused less on gender and more on the rewards of the career, with the slogan, “Do what you love and you’ll love what you do.”

Nurses said they welcomed the change. “I don’t think we’re doing any favors to society by conveying this message that nursing is this super masculine thing,” said Mr. Creviston, a psychiatric nurse practitioner and mental health nursing professor in Portland, Ore. “If your motive is to bring the right men into the field, show how rewarding it is to hold the hand of a dying person.”

A large group of women and children posing for a photo in a snowy outdoor setting. Many are holding handmade protest signs. Visible signs include "WOMEN Respect us NOW", "CANADA IGNORES FORTUNE", "EVERY BODY ROADS", "2018 #PresforProgress", "WOMEN'S QUALITY DO NOT FEAR QUALITY", "WOMEN'S UNION", "WOMEN'S BTOGENOUS", and "GIRL POWER". A rainbow flag is also visible.



Women's Marches were held in most major cities across Canada, including one in Halifax that had a great turnout. Truro held its first Women's March, and NSNU president,

The Nova Scotia Nurses' Union is proud to advocate for women. We believe that women's issues are human issues, and that achieving true gender equality will require more activism. After two years of Women's Marches with millions of participants, it seems we are moving in the right direction.

Real-Life Rosie the Riveter Passes Away at 96

The real Rosie the Riveter, an iconic symbol of working women, died on Saturday, January 20th in Washington. She was a California waitress named Naomi Parker Fraley.

Countless North American women have identified with Rosie, the female war worker of 1940s popular culture who became a feminist touchstone in the late 20th century.

Never truly given full credit for her pop status, she went unrecognized for more than 70 years. Her story had been overshadowed by several other



American women who have been identified as the model who inspired Rosie.

It wasn't until recently, 2016, that Fraley, who had worked in a Navy machine shop during the Second World War, was acknowledged as the rightful Rosie. She is said to

have inspired the "We Can Do It" movement.

Fraley, who shunned the spotlight and is believed to have inspired J Howard Miller's Rosie the Riveter poster, was born on August 26, 1921, in Tulsa, Oklahoma.



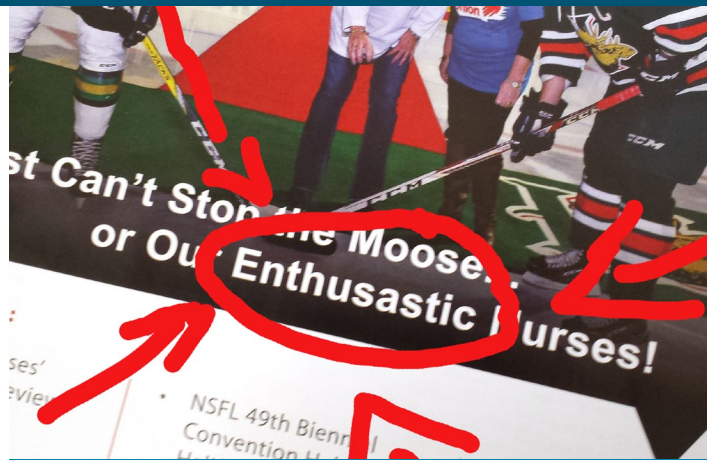
It's A Girl!

Congratulations are in order for one of our longstanding members at the IWK.

Born on Boxing Day – just so she wouldn't miss the sales! – Emily Elizabeth came into the world weighing just over nine pounds. Her proud mama, Mary Beth Rowe, has been on the executive of the IWK local, shop steward, and alternate VP on the Board of Directors for her facility. She is a very familiar face at the AGM, CFNU Biennial events, Eastern Labour School, rallies and much more.

Emily Elizabeth is pretty in pink, wearing an NSNU onesie; a great beginning for a future activist!

We are thrilled for Mary Beth and her partner as they embrace parenthood.



Whoops!

Did you catch our typo? Because we certainly didn't! Maybe it was the hustle and bustle of the holiday season, but somehow we let the December newsletter go to print with a big, bold typo on the front cover.

Keep your eyes peeled in this newsletter – if you find a typo and send us an email (coleen.logan@nsnu.ca), we'll send you a nice, warm NSNU fleece scarf to thank you for keeping us on our toes! We appreciate your "enthusiasm" (that one doesn't count!).



Jennifer Goodwin, Juanita Brannen, Cyril Lunney, Patti Humphries, Jill Houlihan

Star Sighting

While attending to some union business in the South Shore, NSNU LRR, Patti Humphries and legal representative, Jill Houlihan ran into none other than CTV's Cyril Lunney! Always ready to make a fan's day, Cyril was kind enough to pose for a picture.

JOHNSON INSURANCE

Scholarships and Grants

Amid stiff competition, NSNU member Cara Murray has reason to be proud, as her daughter, Beth Murray, was selected to receive a \$1000 scholarship from the 2017 Johnson Scholarship Program. Congratulations to Beth on this wonderful accomplishment.

Each year Johnson Insurance hands out 50 scholarships to children or grandchildren of Johnson affinity group members, employees and customers across the country. Since 1998, they have awarded over 1,500 scholarships valued at more than \$1 million.

Applications for the 2018 Johnson Scholarship Program will open this spring.

Johnson Introduces New Education Grant

For many years, Johnson Insurance has supported the education of NSNU members and their families. This year they have developed a new grant, which will provide \$1000 to five individuals who are enrolled in a college or university program during the 2018-19 academic year.

Those who are eligible to register for the grant include NSNU members, their spouses and children. To receive the grant, applicants must not have received another scholarship or bursary from the NSNU or CFNU.

The deadline to register for the grant is April 1, 2018. Grant recipients will be selected in a random draw on April 9, 2018.

More information about the Johnson scholarship and grant programs can be found on the NSNU website under Education - Scholarships and Bursaries - Johnson Inc.

Johnson Insurance and NSNU Post-Secondary Education Grant Contest



A \$1,000 Grant could be yours!*

Johnson Insurance is proud to offer you a chance to win a \$1,000 post-secondary educational grant.*

This opportunity is exclusive to NSNU members and immediate family (spouse and/or children) enrolled in a nursing program at a post-secondary educational institution during the 2018-2019 academic year.

The deadline for entry is April 1, 2018.

Enter today at johnson.ca/nsnugrant



Johnson Insurance is a tradename of Johnson Inc. ("Johnson"), a licensed insurance intermediary. Home and auto policies primarily underwritten by Unifund Assurance Company ("Unifund"). Johnson and Unifund share common ownership. Eligibility requirements, limitations, exclusions or additional costs may apply, and/or may vary by province or territory.*NO PURCHASE NECESSARY. Open January 2, 2018 to April 1, 2018 to legal residents of Nova Scotia 19+ who: (i) are active members of the Nova Scotia Nurses Union ("NSNU") (each a "Member"), or are the spouse or child of a Member, and (ii) are enrolled in a post-secondary educational nursing program on a part-time or full-time basis at a recognized Canadian university or college for the 2018-2019 academic year, and (iii) have not received a NSNU or Canadian Federation of Nurses Unions scholarship, bursary, or grant for the 2018-2019 academic year (each an "Eligible Person"). Only Members may submit an entry in respect of each Eligible Person. Grand prize available: \$1000 postsecondary educational grant. Odds of winning depend on number of eligible entries received. Math skill test required. Rules: www1-johnson.ca/nsnugrant-rules. If you have any questions please contact us at tharkin@johnson.ca or mail us at 137 Venture Run, Suite 200, Dartmouth, NS, Canada, B3B0L9.

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In the Next Issue of What's **NU**?

NSNU Board Nominees
Elections and Acclamations

AGM Details
Everything You Need to Know

nursing
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(v.) When you're
not sure whether its
Saturday or Tuesday



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