

# what's nu?

February/March 2020

## COVID-19

Nurses, healthcare  
workers and  
communities brace  
for a potential  
outbreak

Year  
of the  
Nurse  2020

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# President's Notebook

Janet Hazelton, BScN RN, MPA

## The Science and Rationale Behind Our Call for Specific Personal Protective Equipment and Training

The pandemic that has finally reached our shores has gravely impacted nurses, doctors, techs, paramedics, administrators, and governments the world over. I want to share information that nurses unions, health organizations and our own leadership feel is important as we brace for our own battle with the novel coronavirus (COVID-19).

Working with public health and following their lead on this rapidly evolving crisis, NSNU has tried to keep members informed via our website and regular Campaigner e-memos. We held a telephone townhall on March 12th to hear your concerns, we created a webpage dedicated to this conversation, we regularly post on social media, and I speak directly with members and media, daily. Your labour relations representatives are at the ready and have been fielding calls since the day the virus made its introduction to North America.

Elsewhere in the world, including south of our border, scores of nurses and other health care workers have been quarantined and hospitalized due to exposure to the virus, which clearly demonstrates the importance of putting the strongest protections in place. Failure to do so severely inhibits our ability to respond to an outbreak. Our union is working

closely with CFNU member-organizations across the country to help keep nurses and patients safe.

We have been talking publicly and internally about preparedness in hospitals, and other care settings, training, fit testing and access to personal protective equipment (PPE) during this extremely rare world event.

It is our contention that nurses and other health care workers must receive the highest level of protection in their workplaces, as determined by the precautionary principle. Nurses need to be safe in order to provide the care they will be called on to deliver.

The full protection of healthcare workers is a fundamental and necessary part of limiting the spread of viruses - this has been proven time and again with SARS, MERS, H1N1, Ebola, and others. It is critical that our nursing workforce is kept safe not only to provide critical care for patients with potential COVID-19 infection, but also to continue caring for other patients.

Healthcare employers should have in place the proper screening protocols, isolation procedures, and PPE to protect healthcare workers caring for possible or confirmed COVID-19 cases, so as to safely respond to a possible surge in patients.



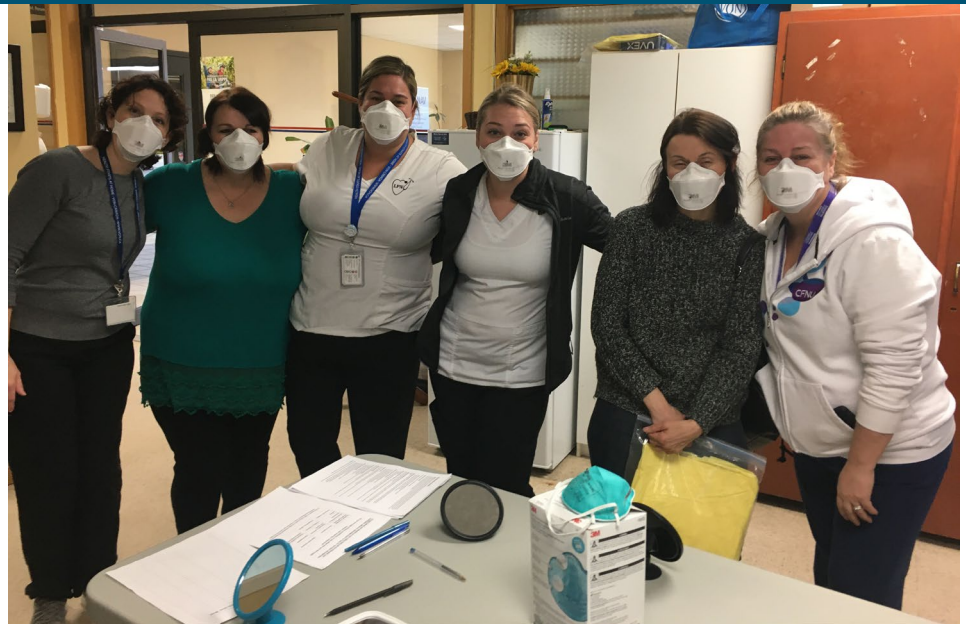
On March 12th the NSNU held a telephone town hall to address members' questions about COVID-19

Employers care about the safety of their employees and have been communicating regularly with nurses and other staff regarding COVID-19 preparedness, protocols, and the many unprecedented changes to both our work and personal lives. Closures, restrictions on travel and gatherings, the hoarding of food and other supplies, and general fears are taking their toll.

Health care unions have been meeting regularly with employers and representatives of the province to do our part and allow changes under the collective agreement to occur. We are committed to the Good Neighbour Protocol, which we signed in 2009. This agreement allows government to require health care workers to work in other facilities or areas during a public health emergency, both protecting workers' rights and ensuring seamless support across the province in times of crisis. It ensures workers will be properly compensated and protected, and it will apply to both workers and volunteers.

Unions are cooperating with employers who must cancel vacations in anticipation of an outbreak in Nova Scotia. Although we understand the hardship this may cause some members, with travel restrictions making it more difficult and potentially unsafe, and with a pre-existing health human resources shortage, our union recognizes that flexibility is in order.

We are more reluctant to compromise when it comes to PPEs. In our view, and that of the US Center for Disease Control, N95 respirators stop the wearer from breathing in airborne particles containing viruses, while surgical masks are only meant to stop the wearer from spreading their germs to others. PPEs and proper training will ensure that all health care workers, first responders,



NSNU members working for VON Yarmouth conducted N95 fit tests in preparation for a potential COVID-19 outbreak in Nova Scotia

and others at risk of exposure are protected.

On March 16th the World Health Organization declared that airborne precautions are likely necessary for medical staff after a new study showed the coronavirus can survive in the air in some settings. Further validation of our claims.

Complicating our call for the use of N95 respirators is a worldwide shortage, creating consternation between the NSNU and others. The NSNU is not arbitrarily asking employers to provide these masks, there is science and historical data behind our position.

On March 15th, the Nova Scotia Health Authority president and CEO Dr. Brendan Carr publicly asked workers in the health system to stop pilfering supplies. Dr. Carr is accusing health care workers of stealing. Even if this were true, making such public accusations does nothing to ensure the trust of patients and their families during these challenging times.

As expected, the NSNU is experiencing a high volume of member inquiries - we appreciate

your patience in the coming days and weeks. We are committed to responding to your calls and emails in a timely manner, while also keeping you informed via e-memos and updates on our website ([nsnu.ca](http://nsnu.ca)).

Be advised that if a nurse is placed on precautionary leave, that leave must last for a minimum of fourteen days and the employer must maintain all pay, seniority, and benefits for the entire length of the leave.

Our hearts and thoughts go out to the people affected by this worldwide pandemic, those who are ill and those who have lost loved ones, and those who are on the front line working to contain this coronavirus.

Nurses are strong and resilient professionals who are not afraid to care for those afflicted with this disease. Know that the NSNU is here for nurses on the front lines and those caring for patients, residents and clients with other health challenges.





## CFNU Message

As the world grapples with the rapid spread of COVID-19, I know that Canada's incredible frontline health care workers are doing everything we can to keep the public safe and healthy.

I want you to know that I have been fighting to ensure health care workers are protected on the job. For weeks, I have been asking the Public Health Agency of Canada to beef up guidelines to protect all health care workers from potential airborne transmission.

With conflicting scientific evidence of how COVID-19 is spread, the precautionary principle – to err on the side of caution – must be followed. This was the lesson of the 2003 SARS outbreak that resulted in the death of 44 Canadians, including two nurses and one doctor.

The WHO has declared COVID-19 a pandemic. Our federal public health agency is realizing we can't stop this if our health care system is not ready and health care workers are not protected.

Our message is simple: safety is not negotiable. If nurses are at risk, then we all are.

We are calling for protections to be strengthened and for the meaningful involvement of health care unions in decisions affecting members' health and safety, including the supply and provision of personal protective equipment.

The time to act was yesterday. Now, together we can work on strengthening our health care system so we can do our job caring for the public.

In solidarity always,

*Linda Silas*

President, Canadian Federation of Nurses Unions

## What we learned from SARS

During the SARS outbreak in 2003, almost half of Ontario's 247 probable SARS cases were nurses and other health-care staff who carried the burden not only of their own illnesses, but also of the risk that they could transmit it to others, potentially vulnerable patients.

Nurses and occupational health and safety experts across the country are indignant that guidance from the Public Health Agency of Canada (PHAC) asks health-care workers to wear surgical masks rather than N95 respirators. They say this leaves them less protected than the American Centre for Disease Control and European counterparts.

CFNU president Linda Silas says those in power are failing to protect health-care workers. We need to do a better job in making sure every health-care facility is provided with the right training, personal protective equipment, and that the policies are up to date.

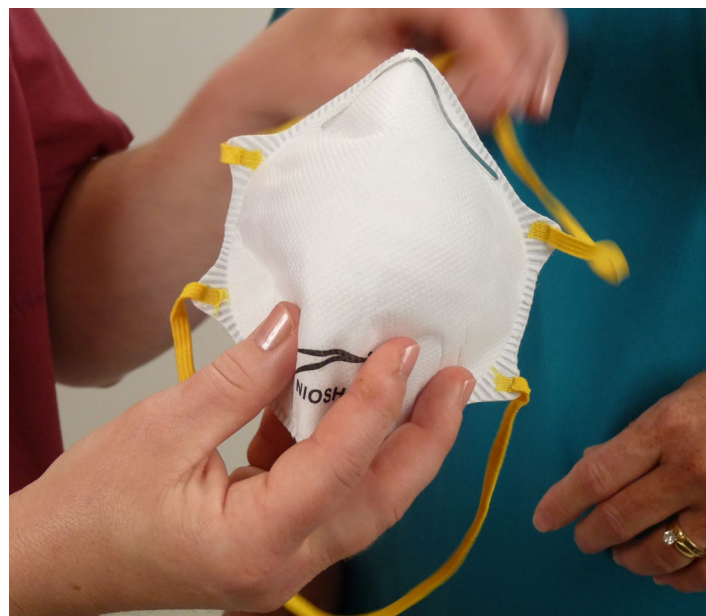
## The science and evidence speak loudly

### ***SARS and health worker safety: lessons for pandemic planning and response***

The outbreak of severe acute respiratory syndrome (SARS) in 2003 provided valuable lessons for protecting health workers during an influenza pandemic or other public

health crises. In its final report, the SARS Commission concluded that a key lesson in worker safety was the precautionary principle. It stated that reasonable actions to reduce risk should not await scientific certainty.

As recommended by the SARS Commission, this principle has now been enshrined in the *Health Protection and Promotion Act (2007)*, Ontario's public health legislation and in Ontario's influenza pandemic plan. Another vital lesson for worker safety involves the occupational hygiene concept of a hierarchy of controls. It takes a



holistic approach to worker safety, addressing each hazard through control at the source of the hazard, along the path between the worker and the hazard and, lastly, at the worker.

Absent of such an approach, the SARS Commission said worker safety may focus solely on a particular piece of personal protective equipment, such as an N95 respirator or on specific policies and procedures, such as fit testing the N95 respirator to the wearer.

The third and final worker safety lesson of SARS is the importance of having a robust safety culture in the workplace in which workers play an integral role.

### Who to call

NSHA staff are NOT to call the 811 hotline for COVID-19 information and screening. Please call the Healthcare Worker Inquiry Line 1-833-750-0632. You will be asked worker identification information to verify that you are a healthcare employee.

Long term care and community care workers should speak with their employers to determine if they have established similar screening processes. Otherwise, use the 811 self-assessment tool ([811.novascotia.ca](http://811.novascotia.ca)) or 811 to determine if you are potentially ill with the virus.

### Travel Insurance

Please be advised that nurses and others who choose to travel internationally during the pandemic, against recommendations from federal health officials, should review their travel insurance policies as they may not qualify for benefits and coverage during the COVID-19 pandemic if you become ill or suffer an injury while out of the country.

As you know, should you choose to travel, you will have to self-isolate for 14 days following your return.

## Thank You to Our Members



As you prepare for a surge of patients, the Nurses' Union wishes to thank you for your courage, commitment and confidence. This pandemic has upended workers, the public, and governments across the globe. We thank our nurses for preparing for the worst while always being at your best.

Thank you to those who are struggling to find childcare. The closure of schools and daycares has been very difficult for families to navigate.

For those who lost their vacation time and trips to warm destinations and elsewhere, thank you. We hope that you will be able to reschedule time away from work when it is safer to travel. The NSNU will do all that we can to work with your employers to ensure that happens.

Thank you to nurses who are juggling; taking on new assignments to help during the pandemic. Whether you volunteered or graciously accepted a reassignment, please know that your actions mean there is continuity of care across the system.

We urge you to take all the precautions necessary to keep you and your families safe. Please practise self-care. Be kind to yourself and reach out when you need a helping hand.





The NSNU office will be closed to visitors until further notice

## COVID -19 Closures and Cancellations

### NSNU Office Adherence to Social Distancing

Until further notice, all meetings and gatherings at the NSNU office in Dartmouth are cancelled to protect staff, members and visitors from the potential spread of COVID-19. NSNU staff will largely be working from home, but will remain available via telephone or email. If staff members become ill or are otherwise unable to work, arrangements are being made to ensure their work is covered with limited interruption. Staff contact information is available at [nsnu.ca/staff](https://nsnu.ca/staff).

### AGM and Education Day Postponement

The Board of Directors of the Nova Scotia Nurses' Union voted unanimously on March 12th to postpone the weeklong Annual General Meeting and Education Day scheduled to take place in April.

The Board made the decision to postpone the events to help keep the 300-plus practising nurses who would normally attend the AGM, and their families, safe from harm and available to care for patients, residents and clients throughout the province in the event of an outbreak.

Board members who planned to retire from their positions in April will have their terms extended until the fall, or their alternate will take their place. An update on the AGM and Education Day and our rescheduling plans will be shared in the coming weeks. Members can expect more information in the next newsletter, via e-memo, and on the NSNU website.

### Other Upcoming Events

For those registered to participate in the Pre-Retirement Seminar, that session will no longer take place. However, members who planned to participate in that seminar are encouraged to watch the recording of last year's event. That content is available on the NSNU website at [nsnu.ca/pre-retirement](https://nsnu.ca/pre-retirement).

The Canadian Labour Congress convention, which was to be held in Vancouver from May 4-8, will be postponed. Eastern Labour School, scheduled for June 1-3 in Fredericton, has been cancelled.

We hope these measures will better protect the health of our members and community during this pandemic and ensure that nurses are able to care for those who may fall ill to the virus.

# NSHA Nurse Seniority Lists

## Registered Nurses, Nurse Practitioners & Licensed Practical Nurses

This is to advise our members that updated seniority lists for the Nurse bargaining unit are now available to view on the NSHA intranet site at the following link: <http://intra.nshealth.ca/peopleservices/SitePages/Home.aspx>

For the Nurse bargaining unit there are four (4) lists published.

- A list for permanent seniority dates for RNs and NPs
- A list for casual seniority hours for RNs and NPs
- A list for permanent seniority dates for LPNs
- A list for casual seniority hours for LPNs

The Nurse Seniority Lists posted on February 25, 2020 include seniority dates and casual seniority hours as of February 1, 2020.

As per the Nursing Collective Agreement (article 11), if there is an issue with the seniority posted, employees have sixty (60) days from the date the lists are posted (February 25, 2020) to raise an issue. Issues are to be submitted in writing using the form and process outlined below. Days for the purposes of this article means Monday through Friday excluding holidays.

**The deadline to raise an issue with the seniority posted is end of day May 22, 2020.**

### MULTIPLE POSITIONS

Employees that hold more than one position will appear multiple times on the same seniority list but will only have the one seniority date.

Casual employees who have more than one casual job will appear on the casual seniority list multiple times

for each job they hold, however the hours posted are the total hours worked in all casual jobs within the bargaining unit.

### INQUIRIES & APPEALS

Employees are asked to complete the "Seniority Appeal Form" if questioning their seniority. The Form is also available at the above link. This form must be returned to the People Services Department by May 22, 2020. It can be emailed as an attachment from your work email to [seniority@nshealth.ca](mailto:seniority@nshealth.ca), faxed to 902-473-8499, dropped off or mailed to your local People Services Department.

A list of Frequently Asked Questions (FAQs) can be found at [nsnu.ca/AcuteCare](http://nsnu.ca/AcuteCare).

Should you have any general inquiries, please contact your People Services Team.

## Provincial Government Invests in Health Care

The Nova Scotia government announced new investments to improve access to health care across the province on March 5th. In addition to adding new seats in the Dalhousie medical program, they will be adding 62 new first-year nursing seats at Cape Breton University, and eight new seats at Dalhousie University's Yarmouth campus. This is the first increase in nursing seats in 12 years.

The government is also investing nearly \$21 million to improve access to prescription medication, bolstering family and senior

pharmacare and low-income family drug support programs. This will be supported by pharmacist prescribing for several common ailments, taking some of the pressure off family doctors, nurse practitioners and family practice nurses.

The Nova Scotia Nurses' Union is pleased to see more investment

in health care across the province, including the addition of new seats in nursing schools for the first time in 12 years.

More information about health investments in this year's provincial budget can be found online at [novascotia.ca/budget/#one](http://novascotia.ca/budget/#one).







# Update: Standard Uniform Policies

Within healthcare and other professions, identifying workers based on their clothing style, the colour of a uniform, branding and other visual cues makes it easier for the public to seek out assistance.

One more category of workers is moving to a standardized look. Dietary staff working throughout the Nova Scotia Health Authority will be wearing all black scrubs starting immediately.

Many nurses have been wearing black tops with their black pants. With this change in attire for other hospital staff, there may be some confusion.

To help minimize any discrepancies, we recommend nurses wear white tops and black pants, as outlined in our collective agreements.

The introduction of the white and black standardized uniform almost a decade ago has been adopted by other nurse unions across the country and elsewhere. The white top, black pants have come to represent nurses in all but one acute care setting in the province, as well as, many long-term care facilities.

The motivation behind the policy has always been transparent; nurses are easily identifiable to patients and their families when dressed alike and, if there are too few white and black uniforms visible on a unit there may be nurse-staffing shortage.

The white and black is now symbolic of our profession and our desire to improve access to care for our patients and their families.

## How to Keep Your White Tops White?

The NSNU is aware of challenges nurses, and non-nurses, face when trying to keep white clothing looking crisp and white. It's an age-old question that our parents, grandparents and great-grandparents struggled with – especially those who were nurses themselves and wore nothing but white dresses and white stockings.

Let's face it, there is no panacea. No cure-all, no remedy, no magic potion that will do the trick.

We can wash whites with white. Add baking soda to the cycle. Try pre-soaking. Avoid natural fabrics like cotton. Skip fabric softener – it can alter colour. Add a little bleach and hope that your white top doesn't take on a yellow hue.

We can adhere to washing instructions and wash items at the right temperature – apparently that helps! And, we can try to avoid the dryer – hanging clothes to dry is said to preserve the integrity of the fabric and colour.

We know you've already tried these tips. You can get this information from the Tide website. The reality is, you are still frustrated that whites don't always look great after a few washes and they show stains faster than other coloured garments.

It's discouraging that you spend more time trying to keep whites white than you do styling your hair. And yet, you want both to look good.

This is a lighthearted approach to a problem that is of importance to nurses, and we understand that. However, you may find some of this information useful. The NSNU encourages you to speak with uniform vendors who may have new products and other solutions that help keep whites looking bright.

# Canada's nurses call on Trudeau to support NDP's new pharmacare bill

On behalf of 200,000 nurses across the country, the Canadian Federation of Nurses Unions is applauding the NDP for their bill to implement pharmacare across Canada. Nurses are calling on Prime Minister Trudeau to support the bill and create a national single-payer pharmacare program for all.

"Nurses applaud the NDP and leader Jagmeet Singh for their bill to create a *Canada Pharmacare Act*, a long-overdue and historic measure that would alleviate the suffering of countless families across our country who struggle to afford their medications," said Linda Silas, president of the CFNU.

The NDP's bill is based on the recommendations of the landmark report by Dr. Eric Hoskins' Advisory Council and is modelled on the *Canada Health Act*. It would legally enshrine the core principles of Canada's medicare for prescription drug coverage: universality, comprehensiveness, accessibility, portability and public administration.

The CFNU and more than 150 national and provincial organizations previously signed a statement calling on Trudeau to implement national pharmacare.

Concluded Silas: "Building Canadian medicare required historic unity across party lines, and we need nothing less to create national pharmacare. Nurses call on Prime Minister Trudeau, and all federal parties, to unite behind the NDP's pharmacare bill and fix the fatal flaw in our public health coverage."



Linda Silas met with Jagmeet Singh on February 19th to discuss the critical need for a national pharmacare program. On February 24th, the provincial NDPs introduced the *Canada Pharmacare Act* in Parliament.





# NSNU Releases Union Education Courses

The Nova Scotia Nurses' Union has prepared a series of online education modules that introduce members to the union, the union's function in the workplace, and the roles that members play within the union.

Part 1 (90min) is entitled **Roles and Leadership in the NSNU**, and consists of three modules: Introduction to Unions and the NSNU, The Union Local and Leadership Skills, and Meetings and Conflict Resolution (30 min).

Part 2 (90min) is entitled **Nurse Rights and Obligations**, and also consists of three modules: The Grievance Process, Professional Practice (CCR Safe Staffing Process), and Occupational Health and Safety Basics.

Please note that, to date, employers have not agreed to award practice premium points for these courses.

The education modules are available on the MyNSNU app, or online at [nsnu.itacit.com](http://nsnu.itacit.com).

For instructions on downloading the MyNSNU App, and for accessing education either on the App or online, please visit [nsnu.ca/MyNSNUAppEd](http://nsnu.ca/MyNSNUAppEd).

If you have any questions about courses or certificates in the MyNSNU App, contact Justin Hiltz at [justin.hiltz@nsnu.ca](mailto:justin.hiltz@nsnu.ca) or Paul Curry, at [paul.curry@nsnu.ca](mailto:paul.curry@nsnu.ca).



## Have You Tried the MyNSNU App?

The MyNSNU app is your hub for NSNU news, education, resources, bargaining updates, polls and more.

The app is available to download the Apple and Google Play stores, and can also be accessed online at **[nsnu.itacit.com](http://nsnu.itacit.com)**.

Learn more at **[nsnu.ca/MyNSNUApp](http://nsnu.ca/MyNSNUApp)**.

# International Women's Day 2020

## "An equal world is an enabled world"

March 8th was International Women's Day the world over. This year's theme was #EachforEqual, appealing to individuals to take action to create a more equal world by challenging bias, broadening perceptions and celebrating women's achievements whenever possible. This creates more opportunities for women to be seen, heard and lifted-up.

On March 6th, the Nova Scotia Federation of Labour celebrated International Women's Day with the 5th Annual IWD breakfast hosted by our Women's committee at the NSGEU Conference Centre.

Numerous accomplished and fabulous women and men shared inspirational stories and celebrated women, including keynote presenter Sheree Fitch, author and literacy

advocate; Mi'qkma Elder, Doreen Elder; Maria Langille, NSNU Board member and NSFL Women's Committee member; labour leaders Janet Hazelton and Jason MacLean; and nearly 75 other amazing women and men who were eager to celebrate women.

Congratulations to Sister Sandra Mullen, NSGEU 1st Vice-President, who was chosen as the Nova Scotia Federation of Labour's "Sister of the Year".

The NSNU is proud to represent thousands of women, whom we commend for their strength, commitment and determination.

Strong women, strong world. Let's celebrate women each and every day.



Maria Langille, NSNU VP LPN/Grad Component speaks at the IWK breakfast



Sister of the Year recipient, Sandra Mullen, at the International Women's day celebrations, with executive members of the NSFL. From left to right: Janet Hazelton, NSNU, Tami Cox-Jardine, NSTU, Christine VanZoost NSNU, Jennifer Thiele, NSNU, Sandra Mullin NSGEU, Rocky Beals, and Jason MacLean, NSGEU.





## Preparing for Nursing Week 2020

Each year we take a week to celebrate the contributions of nurses across the country – National Nursing Week. This year's observance will be from May 11-17, during which time we will also celebrate 200th birthday of nursing pioneer, Florence Nightingale, the event that inspired the United Nations to declare 2020 the Year of the Nurse.

During Nursing Week, locals often give NSNU merchandise as gifts to their members. Unfortunately, due to COVID-19, the Nurses' Union has made the decision to close our office doors to the public. We regret that this year we will not be able to accommodate requests for merchandise to be sent to, or picked

up by locals. Appointments to shop at the office will not be scheduled until after these restrictions are lifted.

During National Nursing Week, the NSNU will offer our sincere thanks to nurses for your hard work and dedication year-round, and especially

during trying times, like those we are facing now. Although our typical Nursing Week campaign will be pared down out of respect for the current circumstances, members can expect to see online content from the Union during National Nursing Week recognizing your incredible efforts.

### Share Your Nursing Week Photos

Even though National Nursing Week 2020 will not be business-as-usual, the NSNU is pleased to provide each local with \$100 to assist with your NNW celebrations. We encourage local executives to use that money recognize your members and raise morale. Be sure to take lots of photos and send them in to [nsnu.office@nsnu.ca](mailto:nsnu.office@nsnu.ca) along with detailed captions so we can feature your celebration in the next issue of What's Nu?.

# Moosehead Nurse Appreciation Night

Once again, the Moosehead hockey franchise asked the NSNU if they could sponsor a Nurse Appreciation Night in 2020. How could we possibly say no when so many of our nurses are hockey fans and big supporters of the Mooseheads?

For one, the Moosehead's administrative staff are second to none. They are welcoming, accommodating and truly thankful for the work nurses do in our communities. And second, it really is a wonderful, and rowdy, opportunity to celebrate nurses.

On Saturday, February 1st the Halifax Mooseheads took on the Shawinigan Cataractes at the bustling Scotiabank Centre. The "Herd" didn't get the win but once again the Mooseheads won over nurses in the crowd.

So why does the NSNU participate in appreciation nights? Recognition is key to any organization, regardless of the job you do. It's important to recognize dedication and hard work whenever possible.

This goes without saying, if you're appreciated and valued, both foster positivity. This positivity has a ripple effect. Appreciated workers pass on their enthusiasm to their team members and work culture improves.

The NSNU is happy to promote these sorts of activities - encouraging our members to have some fun is part of our mantra. Work-life balance has a huge impact on your overall perspective of the work you do. The Nurses' Union routinely acknowledges the importance of a work-life balance. Non-nursing activities provide an opportunity to unwind and forget about the sometimes-harsh realities of nursing - even if only for a couple of hours.

It's important that members socialize, connect and celebrate outside of the work environment. Not only does an appreciation event strengthen existing bonds, but it encourages better relationships between workers, family members, and friends.

Some NSNU staff and family members volunteer to help at the Moosehead's Nurse Appreciation Night events. For that we are grateful.

We hope that nurses see the value in supporting our local teams and the economy by participating in these events, and that members feel valued by our communities as a result of these efforts.

Go Mooseheads - see you next season.



NSNU President Janet Hazelton drops the puck



A member and her daughters show off their NSNU pride with some great merch



NSNU members join in on intermission hijinks



Moosehead's mascot "Mac the Moose" shows a little love for NSNU nurses





Janet with nursing students at NSCC Ivany Campus

## NSNU President Speaks to Future Nurses

NSNU President Janet Hazelton visited the NSCC Ivany Campus on February 25th to speak to nursing students in the professional practice class. Janet appreciates these opportunities to speak to future nurses about the realities of the job, the importance of understanding your collective agreement, and the value of union activism.

A nurse, Janet understands the world nursing students are preparing to

enter. As a union leader, she sees a different side of the profession and the health care industry. When she has a chance to speak to students, she informs them about the broader world that nurses work in, and the need for them to be knowledgeable and engaged so they can work with the union at the local and provincial levels to improve working conditions for nurses at home and across the province.

We feel for students during this difficult time. We understand the hardships you're facing, having your schools closed and convocations postponed. Our thoughts are with students as they navigate these challenges.

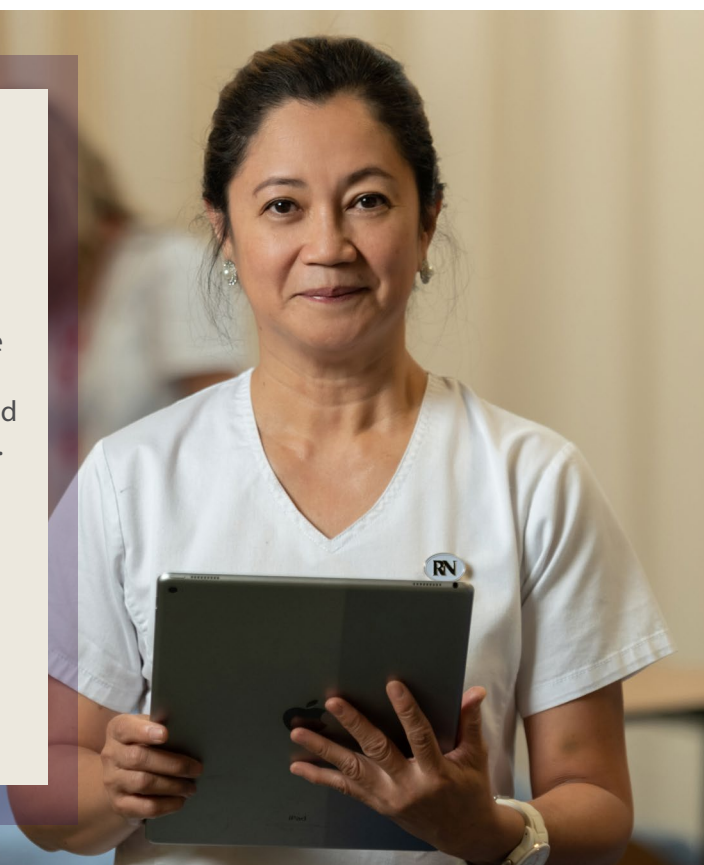
Thank you to NSCC Ivany Campus for inviting Janet to speak in your classroom once again. She looks forward to meeting more nursing students in future visits.

### Are You Paying the Correct Amount of Union Dues?

If you work at more than one NSNU Facility and pay union dues more than once in a pay period, you may be eligible for a refund from the Provincial Office. Members who have been paid for less than 7.5 hours in Acute Care and less than 8 hours in Long Term Care in one bi-weekly pay period may also be eligible for a refund from the Provincial Office.

The Provincial portion of NSNU union dues (\$29.24 for RN's and \$21.48 for LPN's) will be refunded by cheque on a quarterly basis. Your rebate will only be retroactive for a period of up to 12 months prior to contact with the NSNU.

If either situation applies to you, please contact the NSNU Provincial Office c/o B.L. Moran at 902-468-6748 or [bl.moran@nsnu.ca](mailto:bl.moran@nsnu.ca).







## CROSS-COUNTRY CHECK-UP



As the country grapples with COVID-19, nurse unions across Canada have turned significant focus onto this global health crisis. However, as always, there are other issues facing nurses across the nation that unions must address. This cross-country check-up provides a snapshot of some of the issues that our counterparts are managing on the provincial level.



A nursing shortage on Prince Edward Island continues to worsen, as an estimated 160 positions remain vacant despite recruitment and retention efforts by the province and advocacy work by the Prince Edward Island Nurses Union. As with nursing shortages elsewhere, this has led to nurses working more overtime, creating a costly and unsustainable problem for the province.

PEINU is engaged in discussions with government and employers to see what can be done to further entice nurses to make PEI their home. PEINU cited bygone incentives, such as covering relocation costs, as a means of encouraging nurses to move to the province and fill some of those vacancies.

The leadership of PEINU continues its efforts to address shortages by also maintaining strong networks within the CFNU, accessing resources from the federation, exchanging ideas and strategies, and exploring innovative solutions to the problem. Until the shortage is remedied, PEINU prioritizes the health and well-being of nurses and the public.



New Brunswick is facing a significant nursing shortage. With more than 400 unfilled positions, and an additional 40% of working nurses eligible for retirement in the next five years, the problem has been made worse by the province's inability to train more nurses to fill those vacant spots.

In 2019, the Progressive Conservative government cut special funding for the nursing schools, saying they hadn't done enough to enroll students in the nursing program. A review of the expenses associated with the nursing program showed that it was much more expensive to train nurses than students in other specialties, and the current funding wasn't substantial enough to cover the costs of filling up the program. At present, the program only has about 500 students enrolled, far short of the 800 it was built to accommodate.

Health authorities and NBNU estimate New Brunswick needs to hire 520 nurses each year to maintain services. Last year, only 224 students graduated from the province's nursing programs.

A storm of great magnitude wasn't strong enough to dampen spirits as a blizzard dumped some 70-90 centimetres of snow on eastern regions of Newfoundland and Labrador in mid-January 2020.

Health care workers, from doctors and nurses to kitchen and housekeeping staff and other fields, went to work, some ahead of their shifts and the looming whiteout, toiling upwards of sixty hours in some cases before relief could reach Eastern Health facilities.

Through social media and other platforms, the Registered Nurses Union of Newfoundland and Labrador was able to convey the severity of the situation and many positive and powerful stories of resilience to others living in NL, the country and worldwide.

RNUNL reported a social media explosion – gaining 1500 new followers with over one million people viewing posts from RNU on Facebook alone. A classic case of making good of a bad (and inescapable) circumstance.

Nurses, and others, found ways to keep patients safe and cared for as howling winds and heavy snow knocked out power and threatened to halt services. Snowmobiles and other heavy-duty modes of transportation were invaluable in getting workers to hospitals, long term care facilities and to those requiring homecare, all the while RNUNL staff and leadership kept the safety of their members and the public their main priority.





In December of 2019 the Ontario Nurses' Association launched a Charter Challenge against a bill passed by the province's Progressive Conservative government. Bill 124, entitled Protecting a Sustainable Public Sector for Future Generations Act, is intended to allow the government to effectively utilize taxpayers' dollars without adding to the debt. ONA and other labour organizations see it as a wage cap bill intended to slow down wage growth in the public sector.

The Charter Challenge states the Bill ignores workers' rights to collective bargaining, and unfairly targets women-dominated professions, like nursing, while specifically excluding male-majority industries, like firefighting and law enforcement.

ONA also suggests the Bill would worsen hallway medicine, as nurses and other healthcare workers will be forced to accept a wage package that falls below the rate of inflation, recruitment and retention will suffer, and emergency departments will be unable to meet the needs of patients in the country's most heavily populated province.



Nurses in Manitoba's St. Boniface emergency department are sounding the alarm, as job vacancies, overcrowding and mandatory overtime have created unsustainable working conditions, with little hope for improvement.

Early this year, MNU penned a letter outlining some of the more serious issues in their workplace. They highlighted an increased risk of violence, fear of critical errors, and wide-spread burnout as some of their core concerns.

Although the government blames a particularly bad flu season for the increased workload, the Manitoba Nurses Union points out that this is compounded by a 28% vacancy rate for nursing positions in the emergency department. Nurses report feeling like they are drowning under their workload and are unable to do their jobs under the current conditions. The Union says patient care will begin to suffer and patient safety could be at risk if changes aren't made.



Chronic understaffing and overcapacity issues in Saskatchewan hospitals were brought to light in November 2019 following the death of a patient that the Saskatchewan Union of Nurses (SUN) claims resulted from a lack of timely care. The Union said the patient's death was a sign of a much larger issue that needs to be addressed to make it possible for nurses and other health care workers to do their jobs.

Overcrowding in Saskatchewan emergency departments is not a new problem, but it is made worse by a methamphetamine crisis in the province, which sees EDs often overwhelmed by overdoses. SUN is calling for a comprehensive strategy for dealing with the crisis so EDs can adequately serve those patients, and others, in a timely manner.

The government has argued that the patient's death was not the result of the care he received but agrees that overcrowding is a serious issue in emergency departments across the province.



Since the United Conservative Party was elected in Alberta, the province's public sector workers have been under attack by a government determined to tighten up spending on the backs of unionized workers. The United Nurses of Alberta has been challenging the government over breaches of contract, wage legislation, and more over the past year.

Most recently, a review of Alberta Health Services resulted in several cost-saving recommendations, including replacing registered nursing positions with lower-paid employees, a move government says would save up to \$322 million.

Such a move would impact patient care and patient outcomes.

With a UCP majority in Alberta, UNA anticipates many more battles ahead as they work to improve work-life for nurses across the province and ensure patient safety.

# Parental Leave

By Edson Castilho, RN

The NSNU is a majority women's union. The majority of women in this union are mothers or will be mothers one day. Parental leave benefits in our collective agreement is something that recognises the importance of child rearing work.

In Canada, according to Statistics Canada, "female employees aged 25 to 54 earned \$4.13 (or 13.3%) less per hour, on average, than their male counterparts. In other words, these women earned \$0.87 for every dollar earned by men." Rachelle Pelletier, Martha Patterson, Centre for Labour Market Information, Statistics Canada and Melissa Moyser, Centre for Gender, Diversity and Inclusion, Statistics Canada (2018, October 7). *The gender wage gap in Canada: 1998 to 2018*. Retrieved from <https://www150.statcan.gc.ca/n1/pub/75-004-m/75-004-m2019004-eng.htm#correction-notice> on 2020, February, 21.

There are myriad reasons for this wage gap and research shows that women disproportionately lose income when they have children. The vast majority of parental leave is taken by women. This is backed up by many sources, including, as above, Statistics Canada. Even for women in our union the reality is that in the last 8-14 months of parental leave, all they receive is Employment Insurance benefits. Even though the parental leave benefit package is far superior (with 75% top up for the two-week EI waiting period and 93% for 15 more weeks) to what the majority of Canadian women have (because the majority of Canadian women do not work in unionised workplaces), having a child still leads to a loss of income and benefits. In the months after the first 17 weeks of parental leave, not only do women in the NSNU lose a substantial amount of income, but they also lose benefits such as the extended health benefits and pension contributions unless they are able to pay for both their and the employer's contributions for these plans. Even those fortunate enough to afford these added costs and

maintain these benefits end up losing income due to the significant cost of these benefits.

Let's examine another way that this issue impacts our female members negatively: pension. When a member is unable to pay the employer's share of the pension contribution beyond the 17 weeks of parental leave, then that member is reducing their overall pension contributions, thereby pushing their unreduced pension eligibility further into the future. Needless to say, this is not an issue that will be faced by many of our male members. My own personal example here is instructive. When my son was born in 2011, I took 10 weeks of parental leave and during this time the employer continued their contribution to my pension and extended health benefits. After that I returned to work. This had zero impact on my retirement date and a negligible impact on my earnings as they were being topped up to 75% for the first two weeks and 93% for the rest of the next eight weeks. My wife, on the other hand, saw a significant decrease in her earnings after her first 17 weeks of parental leave, which were further reduced because we made the decision to prioritise continuing to contribute to her pension, in order to not impact her retirement date.

This is a form of institutionalised sexism. Women are being penalised for the mere fact of being the ones that give birth. Overwhelmingly, women are the ones that end up staying home, for a variety of reasons such as breastfeeding, partner has a higher paying job, etc. The number of men staying home instead of a female partner is statistically insignificant in Canada. This has an undeniable impact on women's incomes.

The solution here is to pay women for the full length of parental leave in the same way as when they are working outside the home. Within the context of our union,



this issue needs to be a bargaining priority. We need to advocate for full top up for the full 18 months that parents can now take as parental leave. This would allow members, of all genders, to make a choice to stay home to raise their children in the crucial first eighteen months of their lives, without having to worry about loss of income or benefits or a negative impact on their pension.

Of course, we can anticipate a massive pushback on this proposal purely on the issue of cost. But isn't it very interesting how there is always enough money when government deems it a priority? So for example: there is always more money, at a municipal level, to grant police a budget increase far above inflation and to allow them to purchase a completely unnecessary armoured war vehicle; there is always enough money, at a provincial level, to start a \$40 million dollar transition fund for the 800 or so (mostly male) workers affected by the closure of the Boat Harbour pulp mill; there is always enough money, at a federal level, to purchase a climate destroying pipeline to the tune of \$5 billion dollars. But for programs that would materially benefit women, programs like universal daycare or fully funded parental leave benefits, not tied to employment insurance, the question is always: "how can we possibly afford this?". It's almost as if women's priorities just aren't as important as men's.

The fact is that these programs are possible. These programs are affordable. These programs will benefit women and children directly. But these programs will not be given to us without a fight. If we don't start to see them as priorities for our members and for all of the people of Canada, then the status quo will be maintained and women will have to continue to choose between looking after their children or returning to work early, and if they choose not to return to work early, they will have to continue to earn less money than men in a society that still does not value women's contributions in the area

of child care. I want to be part of a union that works to materially improve the lives of its members, and I expect it even more from a union that is comprised mostly of women.

As a union that represents predominantly a female membership, we are well-positioned to act on this issue. It is not good enough to allow the status quo to remain in place. We need to fight for fully funded parental leave benefits and we should make universal child care a priority issue for activism on the part of this union. This is why unions exist. To fight for a fair share of the wealth that workers create, for better working conditions, and for benefits such as fully funded parental leave, universal publicly funded child care and health care. If we do not fight to win these things, we risk making ourselves irrelevant. Fighting for issues like this would help to improve member engagement and would truly improve the lives of our members.

So to the leadership of this union and to members reading this article: make the issue of fully funding parental leave a priority issue for the next round of bargaining. This is an issue of justice for women, and justice for all of our members. I see it as an ethical imperative for our union to do everything it can to achieve this goal. When voting for your bargaining council representative, vote for someone who will fight for this. Choose someone who will commit to fight for what is right, for justice. As the member for the IWK on the bargaining council, my promise to you, our membership, is that this will be a priority issue for me. Together we can all make this happen. Let's commit to working together to achieve this.

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***Edson is a registered nurse working at the IWK. If you wish to contact Edson please email [epiongo@gmail.com](mailto:epiongo@gmail.com)***

# Victorian Order of Home Helpers

## Birth of the VON

James Powell | February 10, 2020  
Adapted from an article published in *Ottawa Matters*



Lady Aberdeen, born Ishbel Marie Marjoribanks

In early 1897 Queen Victoria's Diamond Jubilee was fast approaching. Across Canada, communities and governments were trying to decide on how best to mark this historic event. On February 10, 1897, a public meeting was held under the auspices of the National Council of Women of Canada in the assembly hall of the Normal School to discuss a proposal to establish the Victorian Order of Home Helpers as a means of honouring the Queen's long reign.

The council's president was the Countess of Aberdeen, the wife of the Governor General.

Lady Aberdeen was a woman of extraordinary energy and ability. An early feminist, she had founded a number of charitable organizations

in her native Scotland that focused on poor women. Following her husband's appointment as Canada's Governor General, she founded in 1894 the National Council of Women of Canada, and was the Council's first president.

The meeting was well attended. With the Governor General and senior government officials present, including the Premier, Wilfrid Laurier, Lady Aberdeen addressed the assembly.

She said Home Helpers would need to have a practical knowledge of midwifery, first aid, home-keeping, simple home sanitation, and the preparation of food for invalids. A Home Helper would be "constantly visiting homes in need -- would be giving advice, cheering the home

and doing various acts of mercy and kindness." Successful applicants, who would have to pass an examination set by the medical profession, would be supplied with a uniform and the badge of the Order.

Lady Aberdeen estimated that \$1-million was needed to ensure that funds would be available in perpetuity.

At the meeting, Laurier moved the following resolution:

That this meeting heartily approves of the general character of the scheme described as the Victorian Order of Home Helpers as a mode of commemoration by the Dominion of the Queen's Diamond Jubilee, and that a fund be opened for the carrying out thereof.

Despite governmental support, Lady Aberdeen's Order of Home Helpers met mixed reviews, especially from members of the medical profession.

Although doctors in Montreal, including the dean of McGill's medical school Professor Craik, supported the plan, it was rejected by others, including the Ontario Medical Association, as being impractical and even dangerous.

Many feared that well-meaning but under-qualified women would be sent out to administer to the sick.

In part as a way to alleviate these concerns, the name of the scheme was quickly changed to the Victorian Order of Nurses (VON).

The plan was also tweaked to make it clear that only highly-qualified nurses would qualify for the Order.

The VON's objectives were clarified. They were: i) to provide skilled nurses in sparsely settled regions of the country; ii) to provide skilled nurses to attend sick poor people in their



own homes; iii) to provide skilled nurses to attend cases in cities at fixed charges for persons of small incomes; iv) to provide cottage hospitals or small lying-in rooms in homes; and v) to train nurses to carry out these objectives. Nurse salaries, estimated at \$400-500 per year, would be paid by the Order, with any fees collected by nurses from those who could afford them to be sent to the Order.

Despite these changes, opposition continued.

Lady Aberdeen and other officials worked hard speaking to groups across the country to drum up support for the Victorian Order of Nurses and to dispel rumours that only minimally trained nurses would be hired. They also stressed that instead of replacing doctors, the nurses would, to the extent possible, be working under their direct supervision.

In Ottawa, weekly meetings were held in the Governor General's office to get the VON up and running. A provisional management committee was established, and four trustees were appointed to manage the money that began to flow to the Order.

In late April 1897, the VON was officially endorsed by Ottawa citizens at another public meeting at the Normal School, over which Lady Aberdeen presided.

Slowly the money began to roll in. Subscriptions began at 5 cents. Both the great and small contributed.

Although the scheme came nowhere near reaching the goal of \$1-million, it received enough in donations and pledges, about \$250,000, for it to proceed.

On Jubilee Day, 22 June 1897, Lord Aberdeen, the Governor General



Miss Charlotte MacLeod, First Chief Superintendent of the Victorian Order of Nurses, 1898, Library and Archives Canada

officially announced the formation of the VON as a lasting tribute to Queen Victoria.

Within its first year, Lady Aberdeen had acquired a home in Ottawa for the VON's headquarters. Training homes were also established in Ottawa, Toronto, Montreal and Halifax.

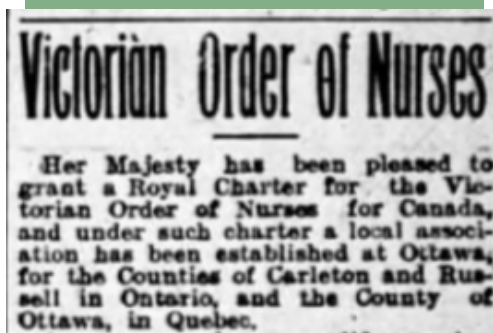
In the spring of 1898, four nurses were sent to help administer to the sick in the Yukon. At this time, tens of thousands of people were travelling to the Klondike in the great gold rush. Disease, owing to poor sanitation, was rampant.

In early June 1898, it was announced that the VON had received a Royal Charter for Canada as well as a local charter for an Ottawa chapter. Quickly, Ottawa had 18 life members and 40 annual members. A meeting was held in the committee room of the Ottawa City Hall to elect a board of management. With Sir Sanford Fleming in the chair, an all-woman, twelve-person board was elected.

In late 1898, Lord Aberdeen's tour of duty as Governor General came to an end. But before the vice-regal couple left Ottawa, Lady Aberdeen received

a letter from the commandant of the Yukon military contingent expressing his and his soldiers' "sincere appreciation" for the services of the Victorian Order nurses. "The work of the Victorian Order in Dawson is a great one, and the opening of the new hospital was providential. Their presence with the force has been invaluable -- I don't know how we should have fared without them."

Today, the Victorian Order of Nurses has 5,000 employees and 9,000 volunteers, and provides 75 home care, support and community services in more than 1,200 Canadian communities.



Newspaper clipping announcing the granting of a Royal Charter to the Victorian Order of Nurses, The Ottawa Evening Journal, 3 June 1898.

*"I want you to know that I feel happy, content, peaceful, calm, capable, and smart for the first time in a very long time. I have built such a strong spiritual connection that it fills me with awe and wonder every day. I feel joy watching the garden grow, while nurturing the smart and stubborn goats, and witnessing the human connection that occurs daily here."*

*- Hope House Graduate*



## A Heartfelt Thanks from Hope House

During the holiday season the NSNU provided charitable donations to organizations doing important work in our communities. One of the recipients was the Hope Project Foundation, with a donation to help support Hope House Recovery & Farm, an organization that provides long-term residential programs to women who are overcoming addictions, focusing on healing the mind, body and spirit. These programs help women return to their families, friends and work, feeling whole again.

After the holidays we received a thank you letter from Hope House with an update on their important work. We always appreciate hearing from the organizations we support indicating how our donations helped them fulfill their mandate. Thank you to Hope House for sharing their successes with us and giving us a peek into the ways they help women overcome their struggles. The following is an excerpt from their letter.

*Reflecting on the New Year, here are some new things at the Hope House:*

*We now have nine beds and they are all filled! So that means 810 meals, 600 goat meals, 144 Alcoholics Anonymous meetings, 108 CrossFit classes, 90 goat milkings, 36 individual counselling sessions, 13 chickens, and 10 goats every month. As you might imagine, our expenses have gone up, yet, our needs are met every month. We are so incredibly grateful for your support!*

*This growth also means that our impact on the community has deepened. We are a beacon for Cape Breton's most broken women. At the Hope House, women are clothed, fed, loved, and given their dignity back. Here they find their worth. It is an awesome responsibility.*







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