

Questions & Answers

WHY DOES THE BCNU WANT TO BRING LPNS UNDER THEIR UNION?

The number of LPNs working in B.C. has increased by 69 per cent since 2001. The last year alone has seen a 25% increase in LPNs.

It is clear that LPNs are becoming an increasingly important solution to the nursing shortage as they provide more and more bedside care. As a result, LPNs have more bargaining power than ever before.

Over the years, BCNU has repeatedly lobbied government to limit LPNs' independent practice. But in the last year or more, government has insisted upon increased collaboration along with the expanded utilization of LPNs.

Having failed in their attempt to restrict LPNs' role, BCNU has now switched tactics from one of limiting LPNs in the workplace to trying to attract LPNs to the RN-dominated union.

There are a lot of questions as to the motivation behind BCNU's outreach to LPNs. Please read on to find out more.

WHAT IS BCNU'S OFFER OF “ASSOCIATE MEMBERSHIP” ALL ABOUT? SHOULD LPNS SIGN UP?

The offer to join BCNU as “associate members” is not as innocent as it looks. It is actually a device to get LPNs' personal information so they can use it to contact LPNs about joining BCNU.

Moving LPNs out of the Facilities and Community Bargaining Association, and into the BCNU, will require an amendment to the Health Authorities Act from the provincial government.

The BCNU will likely use the “associate membership” list to demonstrate LPNs' support for a change in bargaining associations.

In a May 13 letter to BCNU members – “Increasing BCNU's Professional Influence by Offering Associate Memberships” – the BCNU made it very clear that their motivation is “managing change” to benefit their current members. Of course, the change they are referring to is the growing influence of LPNs, who have their own independent voice through other unions like the BCGEU. In the letter, BCNU emphasized that the “needs of our dues-paying members will always come first.”

The services BCNU is offering through “associate membership” are all services that BCGEU provides to its LPN members – access to training and professional development, assistance with the regulatory colleges, and advice on professional practice issues.

It's important to note that in BCNU, RNs get first priority in accessing training and professional development opportunities. LPNs are a secondary priority.

Among other things, the BCNU is also offering “expert advice” on grievance and arbitration issues. This constitutes direct interference in the collective bargaining relationship and is both reckless and irresponsible. BCNU does not have the legal authority, the experience, or the expertise to dispense grievance and arbitration advice on the facilities or the community health collective agreements– and could damage an individual's case.

Before agreeing to become an “associate member” of BCNU – think twice. There's a lot more to the associate membership than meets the eye.

DOES BCNU SUPPORT ADVANCED PRACTICE ROLES AND/OR INCREASED UTILIZATION OF LPNS IN ACUTE AND RESIDENTIAL CARE?

BCNU has gone on record, time and again, opposing LPNs moving into advanced practice roles. They object to LPNs working in team leader roles in long-term care, and have consistently tried to limit the

scope of operating room LPNs in acute care.

In submissions to the Ministry of Health on the legislation and regulations that govern LPNs, BCNU has argued that LPNs should have no independent or autonomous practice.

That position has not changed, and it is NOT addressed in any of their outreach to LPNs encouraging them to become “associate members” and/or to join BCNU.

BCNU’s solution for LPNs is to upgrade them to become RNs. BCGEU supports ladder-ing between nursing professions for those LPNs who wish to become RNs. But what happens to the many LPNs who want to remain LPNs – with greater access to leadership and advanced practice opportunities – given that BCNU does not support LPNs in leadership and advanced practice roles?

WILL LPNS GET MORE MONEY IF THEY JOIN BCNU?

Although BCNU is telling LPNs that they will get them more money, they are in no position to guarantee such an outcome. BCNU has concluded negotiations for their current collective agreement. They will not be able to bargain again until 2012.

On the other hand, BCGEU is preparing for bargaining and will be pressing government to deal with the compensation issues affecting LPNs in 2010.

Where BCNU already represents LPNs, they have not advocated for the same wage increase and increments steps for LPNs as RNs. For example, BCNU has a contract for LPNs and RNs in the prison with a private company. In that contract, BCNU negotiated a 14 per cent increase for RNs and an 8 per cent increase for LPNs. They also negotiated nine increment steps for RNs and three increment steps for LPNs – two of these increment steps are below the current Facilities Bargaining Association (FBA) rate for LPNs of \$24.76 an hour. The third increment step is 77 cents higher; but the pension component is much

less secure – and very inferior – to the FBA pension plan. There are also fewer sick days with much less ability to accumulate sick time.

WILL BCNU PROTECT THE SENIORITY OR BENEFITS OF LPNS?

As with wage increases, there are no guarantees that BCNU can or will protect or improve the seniority or benefits for LPNs.

In the event of layoffs, or if RNs convince the government to reduce LPN utilization in acute and long-term care, LPNs in BCNU would have nowhere to bump.

LPNs would lose access to their current seniority list, as well as posting and bumping opportunities. Without question, this would severely limit LPN options in the case of displacement or return-to-work.

LPNs’ current benefit plan could also be put at risk with a change of unions.

WHY IS IT IMPORTANT FOR LPNS TO REMAIN WITH BCGEU?

The government will be reviewing the regulations that govern LPN practice over the next six months to a year. They will be deciding whether or not to remove the language about LPNs working under the supervision of an RN, and making a determination of what “restricted activities” LPNs can do with and without an order.

BCNU’s timing is very interesting as these regulations could set the stage for the full recognition of LPNs as professional nurses. However, up until now, both the College of Registered Nurses of British Columbia (CRNBC) and the BCNU have adamantly opposed LPNs doing anything without an order from an RN.

Clearly, this is a very crucial time for LPNs to have an independent voice at the provincial level.

LPNs can find that voice with the BCGEU.

BCGEU has developed a very positive relationship with senior nursing leaders in the health authorities and the Ministry of Health Services through our independent policy tables, negotiated in the last round of bargaining.

When the government consults on LPN regulations, LPNs will continue to need a strong, experienced, independent advocate at the provincial level who is not accountable to an RN leadership. And who takes its direction from LPNs, not RNs.

CAN THE BCNU BE TRUSTED TO ADVANCE LPNS' INTERESTS?

Currently, there are about 7,000 LPNs in the province and 26,000 RNs in the BCNU. It is hard to imagine any situation where the BCNU leadership can, or will, put the interests of LPNs ahead of their RN-dominated membership.

Organizing LPNs is just the first step. According to BCNU's own documents, their main goal is not to remain a "nursing union", but rather to organize as many job categories as they possibly can to grow their union. LPNs are the lynchpin.

BCNU launched this strategy in late December, but it has been in the works for some time. All efforts by BCGEU and HEU leaders to meet and discuss the situation have been rejected.

WHAT IS RAIDING?

Raiding is when one union tries to take members away from another union. It undermines solidarity, weakens the labour movement, and drains union resources.

Raiding goes against all trade union principles and is not tolerated by the Canadian Labour Congress (CLC).

BCNU belongs to the CLC through the

Canadian Federation of Nurses Union (CFNU). As a member, it must comply with the constitutional requirement to respect the established collective bargaining relationships of all other affiliates. Article 4, section 5 (a) states: "No affiliate will try to organize or represent employees who have an established bargaining relationship with another affiliate or otherwise seek to disrupt the relationship."

The CLC has found that BCNU's plans to sign up LPNs from other unions as associate members of BCNU violates Article 4, which is the raiding provision of the CLC constitution. On May 14, CLC- president Ken Georgetti wrote BCNU's national union – the CFNU – informing them that BCNU was preparing to take actions that would be in violation of Article 4 and ordering them to cease all actions against HEU and BCGEU.

If BCNU/CFNU refuses to comply with the CLC directive, BCNU/CFNU representatives could face a series of escalating sanctions – being barred from participation at CLC, B.C. Federation of Labour and local labour council functions – which may lead to full expulsion.

IS THE BCNU CAMPAIGN GOOD FOR THE HEALTH CARE TEAM?

Everyone working in health care relies on a cooperative health team in order to provide the best care possible.

In the face of heavy workloads, BCNU's actions are highly disruptive to the delivery of care. Instead of building collaborative practice, they are creating additional stress, and an atmosphere of conflict in nursing units and other health care settings.

Please contact a BCGEU steward or your local BCGEU area office for more information. Or email us at lpn@bcgeu.ca.

