



ENACTION

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Provincial Council on December 6, 7, 8 and 9
FIQ Federal Council on December 6
FIQP Federal Council on December 6

REGROUPEMENT DES FIQ | fiqsante.qc.ca | fiqp.org



MESSAGE FROM THE PRESIDENT

THE FIQ: 35 YEARS OF STRUGGLES

On December 2, 2022, the FIQ celebrated its 35th anniversary. The Provincial Council was an opportunity for me to mark the highlights of our great and beautiful organization.

We have come a long way since 1987. We've had adventures: special laws, mobilizations, blocked highways and bridges, austerity, cutbacks...

Today, in 2023, we still need to fight to improve our working conditions. And I am determined to fight alongside you in the coming struggles, including the one we will have to wage in the context of the negotiation of our next collective agreement.

Because we deserve to feel a sense of accomplishment when we go home after our shift, because we want to be recognized for our full value and because we are entitled to work-life balance!

The healthcare professionals' expectations, like those of the population and patients, are especially high for these negotiations. In fact, expectations are commensurate with the enormous sacrifices that have been made, for too long, by those who devote themselves body and soul to the health of Quebecers.

A MISSED OPPORTUNITY

Unfortunately, in December the government missed the opportunity to begin the negotiations with a message of hope for the healthcare professionals. Instead, it made offensive employer offers.

The government's salary offers are only 9% over 5 years, while the FIQ's demands are 12% over 3 years with a protection of purchasing power and an upgrade to make up for the inflation in recent months. It's simple: what the government is serving up is impoverishment. This dismal wage offer is also accompanied by setbacks for pensions.

Once again, the government is proposing countless discussion forums on a wide range of topics. It wants to create a range of committees to deal with issues like the stability of teams, MOT and organization of work time. This approach is totally ineffective in addressing the problems of the health network quickly.

This is not the time to look for solutions that we already know. Instead, we invite

the government to implement the proposals we have submitted to it. We have concrete, feasible and quickly applicable solutions to save the health network. The network is broken, we must act and quickly!

If there is one observation to be made about the government's offer, it is that, like the other struggles waged by the FIQ, we will still need to mobilize to be respected.

I will end by wishing you a good 2023. May it be filled with happiness, health and victories of all kinds. ■

To learn more about our union demands and the employer offers, go to:
fiqsante.qc.ca/nego

BRIEF HISTORY OF THE FEDERATION:
fiqsante.qc.ca/en/about/history/



1. Amélie Plourde, Syndicat interprofessionnel de la santé de l'IUCPQ
2. Anusree Nath, Syndicat des professionnelles en soins de santé du Centre-Sud-de-l'Île-de-Montréal
3. Caroline Girard, Syndicat interprofessionnel de Lanaudière

PRIORITY ACTIONS

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Julie Daignault, Syndicat des professionnelles en soins des Laurentides

STRATEGIC PLANNING AND PRIORITY ACTIONS KNOWING WHERE WE ARE COMING FROM TO UNDERSTAND WHERE WE ARE GOING

At the FIQ and FIQP's last Convention in 2021, the organizations chose to bank on the mobilization of members and take collective action to better support them. It was this principle that then guided the strategic planning exercise. At the Provincial Council in December, the delegates took stock of the actions carried out to date and identified the priority actions to be undertaken in the coming year.

While we are witnessing a polarization of the political and social dialogue, the importance of being united, determined and mobilized is crucial: the survival of the public health network depends on our ability to improve the healthcare professionals' working conditions. Providing care is a political gesture. This sentence takes on its full meaning in the 2023 priority actions: succeed in negotiating a collective agreement that meets the expectations of healthcare professionals and obtain, in the long term, a law on safe ratios.

PROGRESSIVE WOMEN

The politicization of the members and union reps is at the heart of the 2021-2023 action plan for the ratios campaign, whether by giving the

"Safe ratios: a rallying advocacy project!" training or holding webinars. The actions taken as part of the last Québec election campaign were also focused on the ratios. Thanks to three major consultations on mandatory overtime, initial training and the provincial negotiations, the Federations know the members' concerns and will align their actions with them.

WOMEN OF ACTION

The new union rep mobilization structure is the Federations' main tool for organizing union action in the field, especially for provincial negotiations. More and more, the members are also invited to participate in the committee on care's work or to meet directly with the employer. To act, you need to be

informed and the circulation of information will be a constant concern in the coming year.

WOMEN FIGHTING AGAINST SYSTEMIC RACISM

Now that the FIQ and FIQP have adopted Joyce's Principle, which includes the objective of ensuring equitable access to all health and social services for Indigenous people without discrimination, there is a need to go further. We need to be trained, we need to spend time on this issue and, above all, we need to agree to review our union practices in order to be more inclusive. Creating the Ad Hoc Anti-Racism Committee last fall is the first step towards meeting this major challenge. ■



THE PRIVATE SECTOR IN HEALTHCARE: A BAD SOLUTION TO A REAL PROBLEM

Worried by the increasing talk about the private sector's role in healthcare, the FIQ felt it was important to draw up an overview of the situation. How do we strengthen the foundational principles of the *Canada Health Act*? How do we ensure the universality and quality of care for the whole population? The Federation wanted to address and discuss this social justice issue with the delegation.

Alternatives to the public network in Quebec are multiplying: private hospitals, private healthcare employment agencies, family medicine groups and private CHSLDs. What's worse is that private companies are positioning themselves more as a solution to the public health network which has been broken down by the same logic of privatization. Just like its members, the FIQ is extremely worried about the use of a parallel private system that is encouraged by the CAQ government, as well as previous governments.

PRIVATE CLINICS, HOSPITALS AND CHSLDS

Whether totally private or subsidized, private CHSLDs, clinics and hospitals have two things in common:

1. Part of their financing comes from the government through the Régie de l'assurance maladie du Québec or the Ministry of Health and Social Services.
2. They siphon away financial and human resources from the public network, whether it be nurses, licensed practical nurses, respiratory therapists, clinical perfusionists, or doctors and other healthcare professionals.

INDEPENDENT LABOUR

Independent labour is probably the most evident method of privatizing healthcare services and the most harmful for healthcare professionals on a daily basis. Workers for private agencies enjoy advantages like flexibility, better pay and more attractive schedules. This worsens the staff shortage in the health network, which Minister Dubé claims he wants to turn into a choice employer!

DIFFICULT BUT NECESSARY QUESTIONS

Many questions arise around the increasingly frequent examples of privatization in the health network. Who is profiting from these businesses? How did we come to see health as a commodity?

The delegation also brought up a difficult question: how do we fight against privatization and avoid using it when our loved ones are sick?

Here are some difficult questions that need answering by our guiding principles: equity and accessibility.

ACCESS TO SOCIAL AND HEALTH SERVICES REGARDLESS OF ONE'S ABILITY TO PAY

To stop the hemorrhaging, it is essential that we denounce the potential dangers of this privatization and that we demand a global healthcare approach, including a social approach, rather than a medical approach to illness. We must also demand concrete government action to improve living conditions. We need to have the courage to demand that hiring labour from private employment agencies ceases, as well as for the refunding and decentralization of the public system.

While the role of the private sector in healthcare raises several questions, everyone agrees on the same principle: the right to health is an inalienable right. It is non-negotiable. ■

PROVINCIAL NEGOTIATIONS

Guidelines for preparing mobilization



From left to right: Jérôme Rousseau and Nathalie Levesque, Vice-Presidents, Amélie Séguin, Union Consultant, Cindie Soucy, Negotiating Committee member, Sara Lapointe, Union Consultant, and Stella Larochelle, Negotiating Committee member

GUIDELINES FOR PREPARING MOBILIZATION

The Negotiating Committee presented the mobilization and communication guidelines to the delegates that they will rely on in building a mobilization plan to support their work at the bargaining table. Two elected union reps on the committee, Stella Larochelle and Cindie Soucy, are responsible for mobilization.

The committee analyzed all the decisions and consultations of the last year to identify the guidelines. They also reviewed the action plans from the last negotiations. For these negotiations, mobilization and communication will be oriented towards the members and the issues that concern them. The committee wants the union demands to take root and to build bargaining power through actions for and by the members.

The guidelines were adopted by the delegates. Mobilization and communication actions will therefore be turned towards the members in the institutions. They will be organized in such a

way as to build an escalation of pressure tactics that can lead to a strike and are deployed on issues that affect the membership.

Membership participation in the mobilization actions is the ultimate key to reaching a tentative agreement. By orienting the mobilization and communications towards the members, the FIQ and its affiliated unions will force the government to come to their playing field, to listen to the healthcare professionals, to respect them and not make choices for them. The Negotiating Committee can be the spokesperson with the government on behalf of healthcare professionals.

STRONG, UNITED and COMBATIVE are the words that will qualify all of us in the coming months to achieve significant gains in the next provincial collective agreement. ■

You can show your support for the draft collective agreement and Negotiating Committee now on the FIQ website: fiqsante.qc.ca/nego

WHAT ARE THE NEXT STEPS?

JANUARY: Provincial Negotiation Council
 ■ Employer offers

FEBRUARY: Provincial Negotiation Council
 ■ Mobilization plan
 ■ Local negotiation of essential services

MARCH: Local general assemblies
 ■ Employer offers
 ■ Mobilization plan
 ■ Essential services
 ■ Union solidarity pact among the members

ESSENTIAL SERVICES: A KEY STEP

After we submitted our 60 demands to the government, the provincial negotiations entered the active phase. A key step in the bargaining process is adopting essential services. This step is mandatory in obtaining the legal right to strike in the health and social services network.

According to the law, essential services must be negotiated with each institution in the network and then approved by the Administrative Labour Tribunal. Remember that adopting essential services is not a strike vote, but a prerequisite set out in the *Labour Code* for obtaining the legal right to strike during negotiations.

In fact, to safeguard public health and safety, the *Labour Code* stipulates the union and employer parties' obligation to determine the

level of essential services to maintain in their institution in the event of a strike. The delegates therefore adopted an essential services policy which defines the orientations and guidelines for these negotiations.

The policy includes the process of an eventual strike, creating strike schedules, the obligation for managers to help in maintaining essential services on the units and, above all, the level of services to maintain by classes of care during a strike. These levels vary from

40% to 100% based on the critical nature of the care and services offered in each of the centres of activities.

Adopting the essential services policy kicked off the negotiation of these guidelines with the network employers. The results of these negotiations will be presented to members at local general assemblies by mid-March so that all lists or essential services agreements can be submitted to the Administrative Labour Tribunal in early April. ■



1. Elise Champoux, Syndicat des professionnelles en soins infirmiers et cardiorespiratoires de l'ICM
 2. Jean-Sébastien Blais, Syndicat interprofessionnel en soins de santé de l'Abitibi-Témiscamingue

UNION SOLIDARITY PACT BETWEEN MEMBERS

Once the mobilization plan is deployed to support the provincial negotiations, that means that members carry out pressure tactics. This pressure, or bargaining power, is useful for getting the government to grant healthcare professionals' union demands to improve their working conditions. Escalating pressure tactics can lead to making the decision to go on strike. This decision belongs to the members.

To be prepared for any situation, the delegation adopted the solidarity pact, which aims to "equitably compensate the salary loss during a strike" if one occurs during the negotiations. This statement of principle will also be submitted to members at their local general assemblies. It is a regular step in the process of preparing provincial negotiations.

ORGANIZATION OF WORK AND PROFESSIONAL PRACTICE

Initial training: the FIQ is keeping an eye on it



Jennie Rhee, Syndicat des professionnelles en soins infirmiers et cardiorespiratoires du CUSM

INITIAL TRAINING: THE FIQ IS KEEPING AN EYE ON IT

The FIQ is closely following the developments in the initial training of its members. And since changes are expected in the requirements for access to the various professions, an update was presented to the provincial council delegates so that all are aware of the issues surrounding this file.

SEVERAL ELEMENTS STAND OUT

- The college nursing and respiratory therapy techniques programs are currently being revised.
- The report from the Groupe de travail national sur les effectifs en soins infirmiers (Provincial Working Group on the Nursing Workforce), set up in March 2021 by Christian Dubé, Minister of Health and Social Services, states that more knowledge is needed and that there are gaps in the initial training of nurses and licensed practical nurses. The action plan that should follow is still pending.
- Some of the professional orders, like the Ordre des infirmières et infirmiers du Québec (OIIQ) and the Ordre professionnel des inhalothérapeutes du Québec (OPIQ), and the Association des perfusionnistes cliniques du

Québec (APQI) are applying pressure to increase the level of initial training required for future healthcare professionals.

The issue of initial training is complex because each of the nurse, licensed practical nurse, respiratory therapist and clinical perfusionist professions is distinct in terms of the additional requirements or training put forward. Moreover, the processing of requests for upgrading diplomas is subject to a multi-step government process.

WHAT ARE THE FIQ MEMBERS' PRIORITIES?

In March 2022, the FIQ wanted to get its members' opinions on the issues linked to organization of work and professional practice. A majority of respondents clearly identified getting a law on safe healthcare professional-to-patient ratios as a priority. In contrast, they indicated that adap-

ting educational training was the least urgent priority. And even if about half the respondents reported a problem related to educational training, they did not identify it as a priority in the current context.

Therefore, the FIQ is keeping an eye on developments. It is, and will always be, present to make the voice of healthcare professionals heard in order to defend them, in this matter as in many others. ■

OTHER UPCOMING ACTIONS

The action plan that the delegation adopted at the June 2021 provincial council will be updated in the coming months to boost this battle and carry out certain actions that were waylaid by the pandemic. Obtaining a law on ratios remains a priority for healthcare professionals. Quebec needs to have enough care teams to guarantee safe, quality, humane health care.

The healthcare system is sick and healthcare professionals are overloaded and exhausted. Healthcare professional-to-patient ratios will enable them to provide safe, quality care and to enjoy a better personal life-work balance, which will in turn boost staff attraction and retention.

A LAW ON SAFE RATIOS: THE FIGHT WILL CONTINUE ON ALL FRONTS

As planned in the 2021-2023 ratios campaign action plan, the FIQ and FIQP delegates were brought up to speed on the work in progress. They discussed upcoming actions and remembered important moments from the last months, including the fall provincial election campaign.

Before going over the actions set out in the action plan they adopted in June 2021, they discussed a new line of attack that was added to obtain ratios: negotiations. After a broad member consultation that was part of the preparation for renewing the collective agreement, healthcare professionals widely requested that a specific demand for safe healthcare professional-to-patient ratios be in the union demands submitted to the government of Quebec on November 7, 2022. However, that in no way eliminates the need for the action plan to obtain a law on ratios, so the work will continue.

VISIBILITY DURING THE ELECTION CAMPAIGN

The provincial election campaign was an important opportunity to force

potential candidates and their respective parties to commit to implementing safe healthcare professional-to-patient ratios in the health network. In addition to the electoral kit posted on social media networks, the FIQ held the second edition of a healthcare election debate at which all of the main parties, including the Coalition Avenir Québec and its Health Minister Christian Dubé, were represented.

It was an opportunity to question the candidates for over 90 minutes on various important issues for healthcare professionals. While some parties clearly stated that they were in favour of a law on ratios, the Coalition Avenir Québec never wanted to make such a commitment. Since François Legault's party was

voted into power again, it is all the more necessary to continue this battle on all fronts.

THINGS ARE HAPPENING IN SEVERAL REGIONS

Determined, and still as sure as ever that a law on ratios is the best solution for the health network, union representatives all across Quebec have organized several important actions in recent months. A campaign to denounce the teleconsultation project in CHSLDs was conducted, regional election debates were held, a complaint was filed with the Ombudsperson and many mobilization and awareness-raising actions were held in several regions, giving high visibility to the fight to obtain a law on ratios. ■

FIQP FEDERAL COUNCIL

Group insurance: A renewal under the banner of solidarity

\$6.35 million from the government's additional contribution will be used to offer a premium holiday of about 3.6% of the health insurance plan's premiums for 2023. The additional contribution was paid for 2015 to 2021.

**GROUP INSURANCE
A RENEWAL UNDER THE BANNER
OF SOLIDARITY**

The delegates at the provincial council learned about the results of the negotiations with the insurer, Beneva, for 2023. This negotiation wasn't easy, especially for the health and disability insurance coverages for which there are accumulated deficits since the group went into effect in 2019. Therefore, it was under the banner of solidarity and with the goal of ensuring the sustainability of the group insurance plan that the delegates made decisions.

DID YOU KNOW YOU CAN HELP LIMIT THE COSTS OF GROUP INSURANCE?

Tip 1: Compare the cost of your prescribed medication at several nearby pharmacies

You can do this using the price comparison tool in the Client Centre, on the app or the Beneva website.

Tip 2: Have your prescription filled for 90 days and save on pharmacist fees

(when the prescription so allows)

For example :

- Average fees: \$18/month or \$216/year
- Average fees: \$28/3 months or \$112/year

As such, you can lower the annual pharmacist fees by about 50% a year, which represents about 30% of the costs of the drug insurance plan.

Tip 3: Those receiving CNESST, IVAC or SAAQ benefits: claim care-related expenses from these bodies

By making claims to the appropriate body, the insured's medications will be reimbursed at 100% and their cost is not absorbed by our group insurance plan. ■

Like the last few years, this one has been a difficult one for healthcare professionals. The global COVID-19 pandemic has contributed significantly to an increase in the number of members on disability. This increase has therefore had significant impacts on the long-term disability insurance plan and the health insurance plan. Note however, that the life insurance and dental insurance coverage are doing well financially.

For 2023, the delegates voted in favour of redistributing premiums to abolish the waiver of premium clause, so that all insureds contribute to paying the premiums, even when they are on disability. The delegates also agreed to use the government's additional contribution to offer a partial premium holiday for the health insurance plan.

These difficult, but necessary, decisions will help mitigate the

impact of too high a premium increase. As of next year, it will be necessary not only to ensure that premium rates no longer create deficits, but also to begin to repay them. It is imperative to restore a balance between the benefits payable to insured persons and the premiums they have to pay. ■

FIQP FEDERAL COUNCIL

Just before the holidays, Health Minister Christian Dubé said in the media and in a letter posted on Facebook that "we won't make our health network attractive by pointing out what is going badly [...] Of course, there are things that aren't going so well, for sure, I recognize that. But we cannot only always talk about what is going wrong, we are discouraging the people we need."

Discouraging the people we need... Did the minister just notice this? How can he say such inept things?

He needs to take responsibility for himself. The people who are working flat out need to hear that their government will do everything in its power to make the health network a choice employer and, really, the only healthcare employer. It is time to realize that enough sacrifices have been made. We have given enough!

In 2023, our priority has to be negotiating the next collective agreement. Unfortunately, the employer offers do not live up to our expectations. The proposals we

submitted in November 2022 are legitimate and lay the groundwork for truly improving healthcare professionals' working conditions. However, clearly the government has paid very little attention to them.

So, to get the government to hear us, we will have to be visible and mobilized in the coming months. Negotiating a collective agreement is, as the name says, collective. Mobilization is everyone's business! ■

FIQP AT A CROSSROADS

The FIQP is turning five. When it was created, we wanted to expand the FIQ's representation in the private sector to offer all healthcare professionals a union that reflects them.

Last December, after the overview of the last five years was presented, the FIQP Federal Council delegates mandated the Executive Committee to study the organization's future outlook. Their main concern is protecting the organization's bargaining power and ensuring FIQP members receive the best possible services.

The FIQP Executive Committee will keep you informed of any updates in the coming weeks.



STATUS OF WOMEN



Cindy Lapointe, speaker



Sylvie Vanasse, former participant

If you are a victim of domestic violence and need support, someone to listen, or advice about what steps to take, call SOS domestic violence at **1 800 363-9010**

Reparative justice – Together, repairing what violence has broken

REPARATIVE JUSTICE – TOGETHER, REPAIRING WHAT VIOLENCE HAS BROKEN

Cindy Lapointe, from the Crime Victims Assistance Centre (CAVAC) in Montreal, and a former correctional services officer, along with Sylvie Vanasse, who participated in the reparative justice program, explained how reparative justice is a promising approach.

Violence and crime leave deep marks on victims and their community. Violence breaks relationships and confidence. Victims have long carried the burden of the consequences of this violence. Many of them hesitate to file a complaint. When they do, it comes with the price of waiting and uncertainty.

While the traditional justice system is currently handling the majority of complaints, several organizations are exploring complementary approaches that are more focused on victims' needs than on a ruling and sentence.

HOW IS REPARATIVE JUSTICE DIFFERENT FROM CRIMINAL JUSTICE?

This approach stands out with the idea that an assault or crime goes far beyond a legal matter. Based on the observation that violence affects whole communities and alters the relationships within it, it is about rebuilding the confidence of individuals. Reparative justice, which is voluntary, is based on certain criteria: a position of equality and preparing the parties, as well as caring support and guidance throughout the process.

The reparation principle is rolled out according to the pace and sensitivity of the person and is complementary

to criminal justice. Instead of putting the emphasis on the accused and the punishment, it takes into account the experience of the victims and communities who were affected by the offence or crime.

The reparative justice model could be an approach for union teams to explore because it offers an adapted approach that is more flexible than what the legal system offers, and it humanizes conflicts. ■

To learn more about victim assistance and reparative justice:
cavac.qc.ca, csjr.org,
quandpunirnesuffitpas.com.



1. Marie-Claude Lévesque, Syndicat des professionnelles en soins de la Capitale-Nationale 2. Nancy Hogan, Syndicat interprofessionnel du CHU de Québec
 3. Carole Mercier, Syndicat des professionnelles en soins de Chaudière-Appalaches 4. Cyril Gabreau, Syndicat nordique des infirmières et infirmiers de la Baie d'Hudson 5. Diane Morissette, Syndicat des professionnelles en soins du Saguenay-Lac-Saint-Jean 6. Manon Reed, Syndicat des professionnelles en soins de l'Est-de-l'Île-de-Montréal

- Geneviève Bergeron
- Hélène Colgan
- Nathalie Croteau
- Barbara Daigneault
- Anne-Marie Edward
- Maud Haviernick
- Barbara Klucznik-Widajewicz
- Maryse Laganière
- Maryse Leclair
- Anne-Marie Lemay
- Sonia Pelletier
- Michèle Richard
- Annie St-Arneault
- Annie Turcotte

COMMEMORATION OF DECEMBER 6, 1989

In keeping with a tradition they have been carrying out for 33 years now, delegates observed a minute of silence in memory of the fourteen young women who were students at the École Polytechnique and whose lives were taken by a killer who hated them because they were women. Some healthcare professionals experienced this tragedy close by, while others were not yet born.

The president, Julie Bouchard, said that, unfortunately, much violence is still perpetrated against women today and we need to think about it all year long. ■

FINANCIAL FORECAST

**2023 Financial Forecast:
In keeping with previous years**



**2023 FINANCIAL FORECAST
IN KEEPING WITH PREVIOUS YEARS**

The Federation presented the financial forecast to the delegation. With all of the economic uncertainty and the COVID-19 pandemic, the 2023 budget is sound, in continuity with previous budgets.

In 2023, the Federation's budget targets two priorities:

- Updating provincial negotiations
- Healthcare professional-to-patient ratios

It goes without saying that these two priorities and the implementation of the 2022-2025 strategic planning will put pressure on the Federation's finances.

AN ENVIRONMENTALLY RESPONSIBLE ORGANIZATION

Over the last two years, as an environmentally responsible organi-

zation, the Federation managed to reduce its travel-related expenses by over 21%, which represents \$305,000 annually. Despite the resumption of in-person meetings and activities, this budget was not increased for 2023. We will need everyone's cooperation, at every level of the organization, to stay within it.

We are nearing the end of a third year in a COVID-19 pandemic and 2023 will be a pivotal year with major challenges. We will need to be vigilant while providing quality services and meeting the needs of

healthcare professionals and affiliated unions. ■

The 2023 budget relies on the organization's financial stability despite rising inflation.

It's a responsible budget that will ensure the longevity of the Federation.
— **Roberto Bomba, Treasurer**



1. Amélie Mercier, Syndicat interprofessionnel du CHU de Québec
2. Stella Larochelle, member of the Negotiating Committee
3. Luc Laporte, Syndicat des professionnelles en soins infirmiers et cardio-respiratoires du Bas-Saint-Laurent

CAR, HOME AND BUSINESS INSURANCE

The FIQ offers its members group car, home and business insurance with The Personal General Insurance. The company is authorized to solicit members by phone. However, The Personal has agreed not to divulge the list of FIQ and FIQP members to anyone. Under the *Act Respecting the Protection of Personal Information in the Private Sector*, members may refuse that their name and contact information (address, phone number) be sent to service providers. Therefore, **members who do not want their contact information sent to The Personal** must complete and return the form below to the address on the form before March 2, 2023. ■



I, the undersigned, explicitly refuse the use of my personal information held by the FIQ for marketing or solicitation purposes as regards the agreement it has with The Personal for its members.

Name: _____

Address: _____

City: _____ Province: _____ Postal code: _____

Telephone (home): _____ Telephone (work): _____

Signature: _____ Date: _____

Return to FIQ Bas-St-Laurent—Gaspésie, c/o Andrée-Anne Chambers, 84, rue St-Germain Est, bureau 219, Rimouski (Québec) G5L 1A6, by fax at 418 723-7928 or send this information by email to aachambers@fiqsante.qc.ca

UNION BATTLES

UNITED DETERMINED MOBILIZED



Marsha Niemeijer is a union rep for a New York nurses union and an instructor for the American organization Labor Notes.

SUCCESSFUL ORGANIZING: DOING NOTHING ISN'T AN OPTION

While public health networks are under pressure across the world and the healthcare worker shortage is worsening, it takes guts and a whole lot of work to defend the future of the nursing profession, says American union organizer Marsha Niemeijer.

In her conference, given in French, she said that the FIQ chose to be bolder in how it builds mobilization for the renewal of the provincial collective agreement. Based on three examples of American strike movements, she spoke with the FIQ and FIQP delegates about essential factors that allow you to obtain tangible gains for members.

First, it is important to fight for a common vision. Improving working conditions, focusing on the quality and safety of care and ensuring the survival of the public health system are all facets of the same battle. Not everything will be won in one collective agreement, obviously. But the victories gained will help

to guarantee the involvement of members and the community for future battles.

Choosing to fight differently means having a clear, bold vision and not being afraid of the consequences of our actions. It's remembering that it's possible to aim high and to not compromise until you've tried all of the mobilization tactics at your disposal.

The union should be seen as a group of intelligent, hard-working people who energize each other, have high expectations, but who understand the risks and are able to plan the various actions. Straight-forward, transparent discussions are an

excellent way to garner member support for the negotiation strategy and to push them to take action. After all, if the government's actions created problems in the health network, then it also has the power to solve them. ■



1. Joëlle Bilodeau and Cassandra Massé, members of the Education-Animation Committee
2. Stéphanie Goulet, Syndicat des professionnelles en soins des Cantons-de-l'Est
3. Suzanne Légaré-Bédard, Syndicat des professionnelles en soins de l'Est-de-l'Île-de-Montréal

35 YEARS OF UNION INFORMATION FOR HEALTHCARE PROFESSIONALS

Like the FIQ, the En Action newsletter is celebrating its 35th anniversary this year. To thank you, loyal readers, you have the chance to win a variety of prizes. Check the contest page for details: fiqsante.qc.ca/en/contest/w

Be quick, you only have until February 28 to register!

