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Editor: Wendy Despins
 President

We're on the Web!
www.mahcp.ca

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Diagnostic Services Manitoba

Transfer of Employees to Begin in Early November

DSM consists of all laboratory technology except for Cadham Provincial Laboratory, Federal Viral Lab, Canadian Blood Services and private laboratories and rural diagnostic imaging excluding Winnipeg, Brandon and private facilities.

As of August 4, 2005 the employer(s) have provided the MAHCP with notice of their intent to move to the second phase of the DSM plan, the movement of unionized staff from the current employers to DSM in the urban sites.

To date a Steering Committee comprised of management and union leaders from the affected sites and bargaining units has been struck. The purpose of the committee is to transfer the employees/members as seamlessly as possible and to protect members' interests.

Identified areas of concern to be dealt with by the committee are:

- bargaining unit structure after transfer
- seniority
- salary
- benefits
- pension
- EFT
- working hours
- location

- job functions
- banks - overtime, income protection
- waiting period for benefits
- vacation - entitlement, banks, accruals
- pre-retirement leaves
- probationary period
- salary increments/anniversary date
- employment policies

A draft transfer agreement has been designed by the Human Resources Department at DSM and proposed to the group. This draft agreement addresses all of the above issues. However it is impossible to anticipate all the site specific questions that may be asked by membership. As a result we are planning lunch hour meetings at the sites to gather and address questions. These meetings will begin this Fall. Questions that we do not have answers for will be submitted to DSM.

The window for discussion is 90 days. After that time the transfer will occur (early November 2005).

I urge you, if you have questions or concerns, to forward them to your Labour Relations Officer or the office for us to look into.

Lee Manning
 Executive Director

MAHCP Executive Council

The MAHCP Executive consists of the following elected membership:

President – Wendy Despina,
SBGH Laboratory

Vice President - Al Saydak
HSC Radiology

**South Eastman RHA -
Michael Kleiman,** Sonographer
Treasurer

**Orthopedic Technology -
Randy Buschau,** HSC
Secretary

CTS - Margrét Thomas, Physiotherapist

Dietitian - Susin Cadman,
Brandon RHA

Laboratory - Gerald Besyk, SBGH

Nor-Man RHA - Bernie Krawchuk,
Resource Coordinator

Pharmacist - Bob Bulloch, HSC

Pharmacy Technician - Cindy Dziadek,
Concordia Hospital

Physiotherapy - Shelley Kowalchuk,
HSC
(Joelle Fillion Kopp on Mat LOA)

Radiation Therapist - Paul Norman,
CCMB

Burntwood RHA - Tanya Burnside,
Pharmacy Technician

Winnipeg RHA - Allan Harlow,
Concordia Hospital Laboratory

Meeting Calendar

Visit the MAHCP Website Calendar for more meeting information -- www.mahcp.ca/pages/calendar.htm



September 1 & 2, 2005

- Staff Rep Training Level I
101-1500 Notre Dame Ave
0830 hrs to 1700 hrs

September 8 & 9, 2005

- Staff Rep Training Level II
101-1500 Notre Dame Ave
0830 hrs to 1700 hrs

September 14, 2005

- Executive Council Meeting
101-1500 Notre Dame Ave
0845 hrs to 1700 hrs
- General Staff Rep Meeting
101-1500 Notre Dame Ave
1830 hours

September 15 & 16, 2005

- Staff Rep Training Level I
101-1500 Notre Dame Ave
0830 hrs to 1700 hrs

September 15, 2005

- HSC Staff Rep Meeting
1130 to 1300 hrs
Rm RR227, Rehab Audit.
- HSC On-Site LRO Meeting
1300 to 1600 hrs
Rm NA227, Isabel Stewart
Call Ken or Michele to
book ahead or drop in

September 22 & 23, 2005

- Staff Rep Training Level II
101-1500 Notre Dame Ave
0830 hrs to 1700 hrs

October 12, 2005

- Executive Council Meeting
101-1500 Notre Dame Ave
0845 hrs to 1700 hrs

October 13, 2005

- MAHCP Annual General Meeting
Clarion Hotel, MB Room
1445 Portage Ave, Wpg
Registration at 1730 hrs

October 19, 2005

- HSC Staff Rep Meeting
Same details as Sept 15th
- HSC On-Site LRO Meeting
Same details as Sept 15th

November 9, 2005

- Executive Council Meeting
101-1500 Notre Dame Ave
0845 hrs to 1700 hrs
- General Staff Rep Meeting
101-1500 Notre Dame Ave
1830 hours

November 17, 2005

- HSC Staff Rep Meeting
Same details as Sept 15th
- HSC On-Site LRO Meeting
Same details as Sept 15th

December 14, 2005

- Executive Council Meeting
101-1500 Notre Dame Ave
0845 hrs to 1700 hrs
- General Staff Rep Meeting
101-1500 Notre Dame Ave.
1830 hours

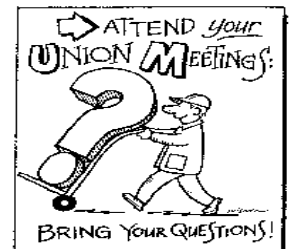
December 21, 2005

- HSC Staff Rep Meeting
Same details as Sept 15th
- HSC On-Site LRO Meeting
Same details as Sept 15th

MAHCP Office Christmas Hours:

December 26 & 27: Closed
January 2: Closed

Bring your Collective Agreement to all Member meetings



Staff Assignments

Lee Manning, Executive Director - lee@mahcp.ca

Barb Johnson, LRO - barb@mahcp.ca: St. Boniface General Hospital, Central Medical Labs, Jocelyn House, Misericordia Health Centre, South Eastman RHA

Ken Swan, LRO - ken@mahcp.ca: Health Sciences Centre (Lab, Diagnostic Imaging, Pharmacy, EEG, Sleep Lab), Deer Lodge Centre, Community Therapy Services, Manitoba Clinic, Winnipeg Clinic

Michele Eger, LRO - michele@mahcp.ca: Health Sciences Centre (all other HSC Members not included under Ken's listing), Concordia Hospital, Tissue Bank Manitoba

Karen Noga, LRO - karen@mahcp.ca: Victoria General, Brandon RHA, Brandon Clinic, Centre Taché Centre, Society for Manitobans with Disabilities, Rehabilitation Centre for Children, CancerCare Manitoba

Armand Roy, LRO - armand@mahcp.ca: Seven Oaks General Hospital, Breast Health Centre, Aboriginal Health & Wellness Centre, Nor-Man RHA, Burntwood RHA

Heather Pappin, Secretary/Receptionist - heather@mahcp.ca

Joan Ewonchuk, Administrative Assistant - joan@mahcp.ca

Central Bargaining 2006 Informational Site Meetings

The Core Negotiating Team of Lee Manning (Lead Negotiator), Wendy Despins, President (Chair, Negotiations Committee) and Karen Noga, Labour Relations Officer will be visiting all sites to discuss the upcoming negotiations.

Agenda items include: upcoming negotiations, plans and processes and questions/concerns.

Thompson

Monday, September 19th
1100 to 1200
1200 to 1300 (repeat presentation)
Thompson Hospital, Priv. Dining Rm

1900 to 2000
2000 to 2100 (repeat presentation)
Rarmada Inn, Selkirk Room

Flin Flon

Tuesday, September 20th
1100 to 1200
1200 to 1300 (repeat presentation)
Flin Flon Hospital, Boardroom

1900 to 2000
2000 to 2100 (repeat presentation)
Flin Flon Victoria Inn, Northern Room

The Pas

Wednesday, September 21st
1100 to 1200
1200 to 1300 (repeat presentation)
The Pas Hospital
Primary Health Care Centre

1900 to 2000
2000 to 2100 (repeat presentation)
Kikiwak Inn, Constant Room

Brandon

Wednesday, September 28th and
Thursday, September 29th
1100 to 1200

1200 to 1300 (repeat presentation)
Brandon Hospital, N246 N247 N248

1900 to 2000
2000 to 2100
Victoria Inn, Brandon, Room 117

St. Boniface General Hospital

Wednesday October 19th
1100 to 1200
1200 to 1300 (repeat presentation)
SBGH Izzy Asper Centre CR1107

Victoria General Hospital

Friday, October 21st
1100 to 1200
1200 to 1300 (repeat presentation)
Bea Dunstone Room, Rehab Centre

South Eastman RHA

Tuesday, October 25th
1100 to 1200
1200 to 1300 (repeat presentation)
Bethesda Hospital, Conf Room 1
Lower Level

Concordia Hospital

Tuesday, November 1st
1100 to 1200
1200 to 1300 (repeat presentation)
Concordia Hospital, Lecture Room 1

Deer Lodge Centre

Monday, November 7th
1100 to 1200
1200 to 1300 (repeat presentation)
DLC - Large Life & Learning Centre

CancerCare Manitoba

Wednesday, November 16th
1100 to 1200
1200 to 1300 (repeat presentation)
CCMB - Executive Boardroom

Misericordia Health Centre

Friday, November 18th
1100 to 1200
1200 to 1300 (repeat presentation)
Misericordia Auditorium

Health Sciences Centre

Thursday, November 23rd
1100 to 1200

1200 to 1300 (repeat presentation)
U of M Theatre F
Basic Medical Sciences Building

Seven Oaks General Hospital

Wednesday, November 30th
1100 to 1200
1200 to 1300 (repeat presentation)
Room 2SS27

Centre Tache Centre

Meeting date to be announced.

Breast Health Centre

Meeting date to be announced.

Bargaining Updates

Society for Manitobans with

Disabilities - MAHCP and SMD are vigorously working towards achieving a first Collective Agreement and both parties will be requesting the assistance of Conciliation Services towards that end.

Central Medical Laboratories - Bargaining is on-going. Meetings to be scheduled in the near future.

Aboriginal Health & Wellness Centre - Bargaining is progressing.

WRHA - Critical Care Transport Team - Proposals have been submitted for a first Collective Agreement.

Concordia Hospital - Pharmacists have been rolled into the existing contract with discussions planned to address any specific issues relative to the Pharmacists.

Community Therapy Services - We are currently in Conciliation. Management is preparing an offer that we expect to receive shortly. The main roadblock has been the WRHA funding piece of CTS's budget.

MAHCP Member Retirees

You will notice in our change of address ad that we have added "retiring" to our list of changes. If you are retiring or know of someone who is retiring we would like to hear from you. We have no way of knowing who is retiring without you contacting us. Neither the Employers nor HEPP provide us with that information so we are counting on you to let us know. You may contact us through email, phone, fax, through your staff representative, board member, on the web site or the 1-800 number.

Thank you for notifying us of the retirees and we would like to congratulate and wish each and every one of you all the best on your retirement.

- **Marilyn Beltz**, a Laboratory Technologist in The Pas
- **Lynn Dohie**, a Physiotherapist and a Staff Rep Deer Lodge Centre
- **Lester Brandt**, a Lab Technologist at St. Boniface Hospital
- **June Thomson**, an Occupational Therapist at Community Therapy Services.
- **Art Ladd**, a Physiotherapist at Community Therapy Services.

Our sincere apologies for anyone that has not been included in this list, we know that there are many more retirees out there. Please contact us if you know of anyone that has or is retiring.



MAHCP Membership Working on Location *At the Manitoba Marathon*

In June several of our members from St. Boniface Hospital Biochemistry worked at the Manitoba Marathon. Their day began at 0500 and ended around 1430. You might be wondering what they were doing. A study was being conducted by Dr. Sharma and this team from Biochemistry had a phlebotomy station set up, including a bank of centrifuges, fridges and freezers and dry ice to transport samples to the laboratories. They had some shade as they were set up under the bleachers, and yet the heat still had a huge impact on them and their equipment.

They spent the day collecting over three hundred samples from volunteer participants in the study. Each marathoner had blood drawn and urine samples collected prior to the marathon, immediately upon completion and one hour post. Batteries of tests were being performed by both the Biochemistry and Hematology Laboratories at St. Boniface General Hospital. The team had fun; interacting within the community in such a different venue and the marathoners were very interested in the process and were looking forward to learning the results of the study. It was a great opportunity for some of our membership to raise the visibility of one of our professional groups.

We look forward to hearing from others of you when you are participating in similar activities or events.

MAHCP Bursary Award Recipients 2005

MAHCP awards five (5) four hundred (\$400.00) bursaries to graduating high school students.

Candidates must be dependents of members and meet the criteria established by the Communication Committee.

There were 9 applicants for the **MAHCP Bursary Fund** this year and all were screened as per the MAHCP Bursary guidelines.



The 2005 recipients are:

Recipient	Parent
Jennifer Bachynsky	Mike Bachynsky, St. Boniface General Hospital
Tim Loewen	Sandy Loewen, St. Boniface General Hospital
Samantha Hupe	Lisa Burns, Health Sciences Centre
Elizabeth Allen	Diane Pearce, St. Boniface General Hospital
Jessica Locke	Ellen Locke, Deer Lodge Centre

There was one successful applicant entering the allied health profession. The **Monique Wally Memorial Bursary Fund** recipient is Umesh Sharma, whose mother Uma Sharma is a Respiratory Therapist at the Misericordia Health Centre.

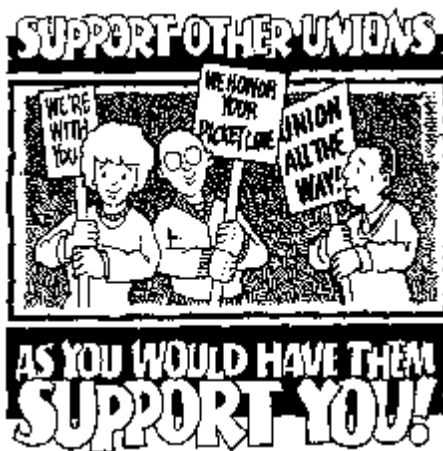
Congratulations! We wish all applicants good luck in their future endeavours.

Helping Out

We can lend our support to other unions in a variety of ways. One of those is to help out on their picket lines. For example several of our members have been out in support of the **Canadian Media Guild** during the lock out by **CBC**.

If another union is out on strike and you have some time, please don't hesitate to stop by and help.

Contact the MAHCP Office for more information.



Welcome Aboard!

Recently the **Pharmacists at Concordia Hospital**, and the **WRHA Critical Care Transport Team** voted to join MAHCP. Everyone at MAHCP wishes to extend a warm welcome to our newest members.



MAHCP Career Profile

Emergency Medical Technician

Submitted by Members of The Pas EMS

“911 what is your emergency?”

respond quickly, with the skills necessary to attend to any emergency.

“My dad just collapsed and I think he’s stopped breathing...”

A career of a paramedic can be full of many highs and lows. From saving a grandmothers life to watching a child’s slip away. Any shift can be physically, mentally, and emotionally draining.

Paramedics are your initial front line health care providers.

Paramedics are called to a variety of incidents, ranging from a heart attack, a child choking, epileptic seizure, car accident, a violent stabbing or to deliver a new born baby. These dedicated members of the Emergency Medical Services have gone through extensive training to

The life of a paramedic is one that is very challenging, but highly rewarding. There is nothing better than going home at the end of a day knowing you have made a difference.

A Manitoba Paramedic



Some MAHCP EMTs from around the Province

Staff Rep Training Seminar Level I

June 2005

The Level One Staff Rep Training was well received by the participants. They learned more about their role in the workplace as well as the importance of the position not only as the eyes and ears of the Association, but as leaders in the workplace and in the union.

There was active participation from all those who attended in learning about various basic practical applications to their role such as investigations, Communication techniques, collective agreement language, interpretation concepts and grievance writing.

The level Two Staff Rep Training will be focusing on further developing the basic skills learned in level one.

Some quotes from members who attended the June Staff Rep Training Seminar Level I:

“Review of communication/leadership skills helpful good reminder! I didn't have any understanding of grievances prior to this session – now have better understanding of what they are and my role & process. Appreciated learning MAHCP'S values/expectations as given during discussions – eg: taking the higher road, etc. – reinforce union interactions more in keeping with today's workplace environment to the “old stereotyped approaches.”

“Super Job! 2 full days would be nice.”

“I have a clearer idea of my role as a Staff Representative, as well as the “bigger picture” of how the union works. Eg. LRO'S etc.”

“I thought that the session was very informative and extremely helpful. I am looking forward to Level 2.”



President's Report

By Wendy Despins

Many of you will have noticed the theme running through the last three issues of the newsletter. Beginning with the December 2004 issue; in my president's report I focused on a question raised by one of our members: "What has the Union ever done for me?" Answers were researched from a number of different perspectives including: the President of St. Boniface Hospital, a Federal Government Organizational Development Consultant, a union member who had grown up in a union household prior to the introduction of Medicare, an MAHCP member from the perspective of being a patient with Coronary Artery disease, and a Labour Relations Officer delving into a historical perspective. So as you can see we have approached this issue from a number of different views and angles. I would like to offer one more perspective, the perspective of union versus non union, and changes within Collective Agreements over time.

I have spoken to a number of individuals in the private sector who work in non-unionized environments. Some very key points began to emerge as we discussed salaries, benefits, pensions, overtime rates, compassionate leave and a number of other items we enjoy as unionized employees.

It soon became apparent to me that there are no standards of practice between employers or even within the same employer. I was often told that salaries and benefits are not discussed between co-workers. That type of information is between the employer and the employee. This of course varied from organization to organization; some had very clearly defined salaries and basic terms and conditions of employment, while others did not.



Wendy Despins

Vacation packages range anywhere from 2 weeks increasing to 3 weeks after a varied number of years. Some are capped at three weeks, some at four weeks after 20 years.

One individual I spoke with, after nineteen years with the same employer was required to use a vacation day to attend her Grandmother's funeral.

Salary increases again varied and are often linked to performance appraisals.

Income protection ranged from 10 days per year to 12 days per year and some employers have a cap of 90 days. Many employers only have unpaid sick time and no provisions for medical leave, such as doctor's or dentist appointments.

Many non-unionized employers are not paid either shift or weekend premiums and have forced overtime.

Most employers do not have pre-retirement leave or sick time pay out.

Maternity leave in Canada is 1 year at EI rates (without salary top up), and depends on provincial or federal employment standards whether or not you return to the same job. In MAHCP'S collective agreement while on leave you have salary top up and

you return to the same or comparable position.

Most non-unionized employers do not have a mechanism to deal with grievances or issues in the work place. Many employers do have Human Resource departments, where issues may be taken. If not resolved there the next option is that the employee can hire a lawyer and/or represent themselves at the Labour Board. If the grievance is about a dismissal and is successful, in most non-union environments the individual is generally awarded damages, in unionized environments, the individual is re-instated. According to an employment standards report put out by Statistics Canada in the fall of '03, access to a grievance system is much higher in the unionized environment, up to 95% versus a range from 22.9% to 61.3% in the non-unionized sector. It goes on to state that access is more common in larger firms. Grievance/arbitration can and do cost in excess of \$100,000.00.

When I began to look outside of Canada I discovered even greater variations. For example maternity leave with some organizations doesn't exist; average is three months, often without pay.

I know a nurse who worked in Vancouver until the Campbell government closed the hospital where she was employed. Subsequently she has gone to work in Washington State commuting from home in Canada. It has been quite an eye opener for her. At her current employer, holiday time is earned based on the number of hours worked, it is not a predefined amount. If the employee is ill the sick time is deducted from the earned time, and the sick time bank is not drawn on until all of the earned time is depleted. There is no coverage for maternity or paternity leave; once again earned time off

is used. As a result many expectant mothers do not go on maternity leave until the last possible day, working as much overtime as possible prior to delivery in order to build up more earned time. The average nurse at this hospital is back to work within three weeks of the delivery of their child. The maximum vacation entitlement is 10 days the first year and 15 in the second. Compassionate leave is also deducted from the earned time. One nurse has to work till age 67, in order to have adequate medical coverage in later life. If she retires before this age to purchase coverage will cost her \$1000.00 per month.

A former MAHCP member also left Canada seeking employment in the United States and her experience has been very similar. With her employer her earned time off (ETO) in addition to vacation and sick time must also cover statutory holidays; there are seven in the United States versus eleven in Canada. If she arrives at work and only has two patients booked for the day, her employer can and does send her home, without pay or benefits accruing. She must punch a clock whenever she arrives or leaves the workplace and her ETO is calculated based on this and is adjusted each pay period. There is no pension plan and no medical after retirement. For her to have adequate medical coverage she will have to work into her seventies. In addition the medical coverage and benefits is only valid at the facility she currently works at. So if she requires medical care elsewhere she would have to use private insurance.

As I have done this research it has reinforced my opinion and my general appreciation for living and working in Canada in a unionized environment. It has also reinforced my belief of the importance of unions and their contribution to the overall standard of

living in a country and the likelihood of higher standards and more social programs and initiatives.

And as one last point I would like to take you through a current real time MAHCP example about a specific topic relating to the subject of Attendance Management and a “program” that was recently implemented in one particular workplace by the management of that site.

In September 2004 an “attendance Management” Program was implemented in this workplace. The supporting document to this program was 72 pages in length.

The summarized description stated they were committed to providing reasonable levels of support to employees, in particular, by providing assistance and consideration to those who are ill or experiencing personal problems by monitoring and managing emerging attendance concerns, or potential concerns, unacceptable attendance and absenteeism by utilizing the Attendance Management Program (AMP”).

The premise and purpose of this program was based on “assumptions” and not hard data. One assumption is as follows: “Although most employees do not abuse sick or other leave, a small percentage of employees do.”

Some examples of the type of monitoring of the employees are as follows;

- People standing at the door documenting “tardiness” resulting in placement in the program for being 1 minute, 2 minutes or 3 minutes late.
- Requirement of “advance notice” of situations that may affect attendance.
- Stating in the program document that the employee may voluntarily provide personal medical

information so that management can evaluate whether the time off is being used appropriately.

There were over 18 items contained in the program document that were either a violation of the collective agreement or Human Rights Legislation or Workplace Safety and Health or the Labour Relations Act.

In April of this year MAHCP filed a grievance against this employer. That resulted in the program being removed.

So, back to the question of “What has the union done for me?”

The employees that work in this kind of environment know what this union has done for them and what this union will continue to do for them. The fact is there is still a need for unions in the workplace right here and now. The fact is there is still a need for unions in the future. The fact is there are still employers like this today....

The fact that employers still exist that practice this type of management style is reason enough for one to understand the need for unions to represent the interests of workers in Health Care.

* * * * *

Do You Have a Question or Suggestion for the MAHCP President?

If you have a question or suggestion for the President of MAHCP, please call the MAHCP office to have a copy of the Contact Form mailed or faxed to you, or you can access a form through the MAHCP website at www.mahcp.ca/pages/contactus.htm.

MAHCP Computer Network Security

MAHCP's mandate is to ensure that membership data is secure

The executive at MAHCP recognizes that network and computer security needs to be a primary focus to ensure personal information compliance. Thus, in the fall of 2004, **Clear Concepts** was contracted to implement new technologies and proven security policies that would ensure the privacy of all electronic information entrusted to our organization.

When asked about network security and the solutions they have provided, Scott McKenzie, President of Clear Concepts, had this to say:

“Security is one of the cornerstones of proper network design. Without well-defined deployment procedures which incorporate refined security policies, corporate networks become unstable and ultimately collapse. Changes in technology are brisk and security compromises designed to attack these new technologies are pervasive and un-remitting. With the implementation of professionally managed solutions, the risks associated with improper security can virtually be eliminated”.

MAHCP now has an advanced, secure network in place. Here are just a few of the security considerations built into the design of the network:

Hardware/Software Solutions:

- Enterprise Level 2003 Server with Redundant RAID5 drive

technology

- Secure XP Pro client platforms
- Managed Linux Firewall Router – with Intrusion Detection & Content Filtering
- Norton Corporate Edition – Centralized Virus Management Console
- FrontBridge Enterprise Anti-Spam Mail Filtering Services
- GFI Email Content Filtering Technology
- Anti-SPYware Management Software
- MSUS Remote Administration & Security Patch Management

Security Management Solutions:

- Security Policy Implementation and Compliance
- User & Group Security: Permissions on all resources
- Complex Password Policies: Accounts are locked out after failed attempts
- Security/Resource Auditing: notification of attempts to access network resources
- No Local DATA – Centralized Server Data with NTFS ACLs

MAHCP's mandate is to ensure that membership data is secure and cannot be compromised by internal or external threats. If you have any questions or concerns, please don't hesitate to contact our systems administrator Scott McKenzie @ 943-4777 or email scott@clearconcepts.ca.



MAHCP uses **UnionWare Direct** - a web-based membership system (database).

Ryan Colp, Network Specialist, UnionWare Inc explains, “All of our UnionWare Direct and many of our UnionWare Enterprise clients host their systems at our hosting facility. We have gone to great lengths to protect their data and to provide multiple levels of safeguards against fire, power loss, data loss, and physical access. The location of the facility is never released.”

“In addition to the physical security that our facility provides, we have taken additional steps to protect our servers from virtual threats on the internet. Behind our firewall, the database servers are kept on a separate network segment from the web and application servers so that they cannot be accessed directly from the outside. All servers have been configured using established security best-practices, and are kept up-to-date with current security patches as they become available. Security and disaster recovery procedures are reviewed on a regular basis.”

Member Feedback

Karen & Barb: We would like to take this opportunity to Thank you for your hard work on our behalf. The standardization Wage Adjustment goes a long way to improving staff morale and feeling valued. Please extend this Thank You to anyone else that helped with this process. Again Thank You, Brandon Community Mental Health Workers.

Barb & Karen: We appreciate your hard work on our behalf in obtaining the market adjustment increase. Thanks! Community Mental Health Nor Man RHA.

I wanted to thank Lee, Barb, and Ken for all their hard work during this period of negotiations for recreation facilitators at DLC. I really appreciate that you folks come in person to answer our questions as well as keep us updated. Thank you again. Sincerely, Ellen Locke B.A., BRS.

Barb and Karen: Thank you for your hard work! (and for patiently

answering our nagging phone calls, etc!)

Dear Barb, Thank you for all you have done for securing us the Market Adjustment Fund. Thank you for your visits, your guidance and always returning my phone calls. I always felt very supported by you & appreciate you. Wishing you well.

Barb, Do you hear that? That's us screaming with JOY! Thank you so much for all that you've done and all the hard work! It is greatly appreciated!

Thanks so much for the effort you put in for the market adjustment for wages for mental health!

Many many thanks for all you hard work – don't often see the people working for us "behind the scenes".

THANK YOU! THANK YOU!
THANK YOU!

MEMBER LEGAL ASSISTANCE PLAN

Inkster Christie Hughes and MAHCP have renewed the Legal Assistance Plan for another year. This involves providing the membership of MAHCP with reduced legal costs.

Upon comparison with rates charged by other firms, some of the rates offered by Inkster Christie Hughes are as low as 50% less on Real Estate, Wills and Domestic Law and also includes a reduction on "Other Services" of 20% off their regular rates.

For more information, please contact the offices of Inkster Christie Hughes directly:


700-444 St. Mary Avenue
Winnipeg MB
R3C 3T1

Phone: 204 947-6801
Fax: 204 947-6800

THANK YOU

To all those members around the province who sent us thanks for the work we have been doing on the Market Adjustment/Wage Standardization initiative. Your words of encouragement and support mean a great deal to us. Karen & Barb, LRO's

Do your patients have Asthma or COPD?



THE LUNG ASSOCIATION™
Manitoba

204-774-5501 (Winnipeg)
204-725-4230 (Brandon)
1-888-566-5864 (Toll-free)
www.mb.lung.ca

Improve your clinical management and educational skills with professional training from The Lung Association, Manitoba. The AsthmaTrec and COPDTrec programs provide CEU credits.

For more information and course dates:
a) visit us online at www.asthmaTrec.org, or
b) call Jenna Kleyh at 774-5501, ext.231.

MAHCP ANNUAL GENERAL MEETING

**Clarion Hotel, Manitoba Room
1445 Portage Avenue
Thursday, October 13, 2005**

Registration of Members: 1730 to 1800 hrs

Meeting: 1800 to 2000 hrs

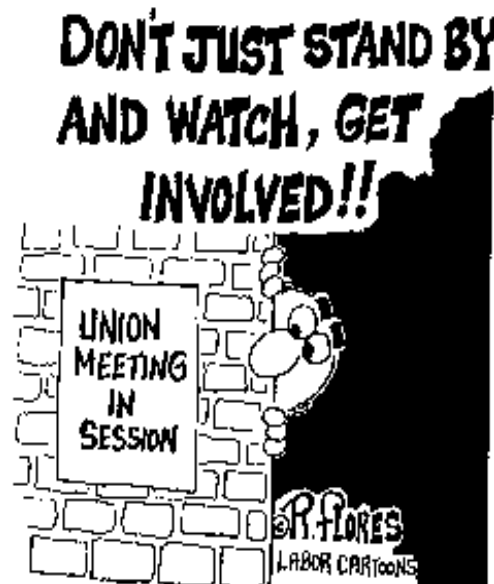
Wine & Cheese Reception: 2000 to 2300 hrs

Guest Speaker: James Clancy, NUPGE

Teleconferencing is being arranged for Brandon, Burntwood and Nor-Man RHA's. Sites to be announced once arrangements are confirmed.

For more information contact Wendy Despins, President at the MAHCP Office, 772-0425 or 1-800-315-3331, ext 215.

(PLEASE BRING YOUR AGM PACKAGE WITH YOU!)



How Well Do You Know Your Collective Agreement?

A general question will be posed in every MAHCP newsletter. One correct entry will be drawn each issue and the recipient will receive a gift.

Question: _____

Send your response to: CA Contest, 101-1500 Notre Dame Ave, Winnipeg, MB R3E 0P9; fax 775-6829; or email joan@mahcp.ca with "CA Contest" in the subject line. Good Luck!!

The winner of the last contest was _____ of Health Sciences Centre who correctly answered that "If you are on vacation when a general holiday occurs, it is a paid general holiday."

Moving? Name Change? Retiring? New MAHCP Member? Please let us know!!

In order to keep our database current, please keep us informed of any information changes. Do not assume that your Employer will automatically pass this information on to MAHCP.



Is one of your co-workers retiring in the near future? Let us know so MAHCP can acknowledge them.

If you have not been receiving regular mail-outs or have a change of information, contact Joan at the MAHCP office by calling 772-0425, extension 201 or 1-800-315-3331 (press "0" to talk with someone during office hours of 8:30 am to 5:00 pm) or email joan@mahcp.ca. Thank you!