



# NOTICE

## **IT Transition Update: May 13, 2022**

On May 2, 2022, SEIU-West transition team members met virtually with our IT members who are affected by the proposed transfer of SHA IT staff to eHealth. In attendance for the transition negotiations team were Barb Cape, President; Bob Laurie, Director of Contract Bargaining and Enforcement (CBE); Russ Doell, Deputy Director of CBE; Ravi Doshi, Curtis Firomski and Janice Gaspers.

We reviewed the details of the meeting we had with SAHO, SHA and eHealth on April 20.

- eHealth provided a presentation on how their classification plan works (think about JJE but not as good) – but we didn't receive a copy of any of the assessments done nor the classification plan itself. Without this information, it's impossible to assess the accuracy of the review. eHealth also noted that they only consulted with managers – not staff and they didn't partner with the eHealth union, SGEU on this work.
- eHealth provided an update on pension options – stay with SHEPP or transfer pension over to the Regina Civic Pension plan. And a presentation on the benefits that eHealth provides to its staff.
- We talked about SAHO and SHA's desire to transfer staff to eHealth and their lack of interest in discussing options for layoff under the collective agreement if staff weren't interested in transferring; the status of temporary and casual staff; and the accuracy of their data.

The following are the questions/comments that were asked during the meeting.

- 1. Does the pension follow the person, or is it tied to the position? If someone moves to eHS and keeps SHEPP, what happens if that person moves into a higher position in eHS does the pension have to change at that point?**
  - a. The pension selection would be a one-time option upon transfer. You would make your selection and then stay with it until the end of your career.
- 2. When you say "last hire date", if you moved positions is it last position date?**
  - a. This is the latest date that you were hired by SHA – not when you moved positions.
- 3. So Temporary role will not be transferred to eHS ?**
  - a. That is SAHO/SHA's/eHealth's position at this time.
- 4. I've run across the issue where EHS won't support employment from someone located out-of-Province without requiring relocation. As a result, I'd likely be**



# NOTICE

**forced to consider a departure package. So, to hear that the plan is to "work with the employee" instead of offering packages makes me wonder how the result would be different than what I've already encountered.**

- a. We have language in our collective agreement that addresses where there is a layoff – this will be adhered to. Also, it's the employer (SHA's) obligation under the collective agreement to meet the requirements of the collective agreement.
- 5. So if you're on LOA when the transition finally occurs you'd be considered not actively at work and there would not be a position for you and you'd be terminated?**
  - a. The term 'actively at work' during our discussion dealt solely with benefits and the waiting period for eligibility. Not the issue of being offered a position with eHealth.
  - b. And no, you would not be terminated.
- 6. Is there still talk that some staff will not be moving over to eHS and stay with SHA?**
  - a. We've been told that Digital Health is not moving over to eHealth. But we want clarity about what duties and work is included so there is no 'drift' of work over to eHealth.
- 7. Can you elaborate more about what is in the current Personnel Files? Based on the fact that these files will not be moving over**
  - a. In members' personnel files are such things as discipline, medical/return to work or accommodations, resume, criminal records checks, etc.
  - b. These will not be moving over to the new employer, eHealth, unless there is a specific request for your medical records to move over to address disability or accommodation issues.
- 8. Can you explain the 5yr hold back again on if I choose to cash out my SHEPP pension?**
  - a. During the meeting, we discussed the current state of the SHEPP plan and the 5yr holdback in place due to regulatory funding requirements.
- 9. Can you clarify the wage structure and comment on lowering of wages?**
  - a. This is in reference to the confidential document that identifies the staff that are moving over to eHealth and their preliminary classification. This is a confidential document that SEIU-West committed to not sharing.



# NOTICE

- b. Any placement of staff is based on where they were evaluated by eHealth's classification plan consultant. It remains our demand to see the classification plan and the evaluations of the jobs.

**10. Will severance be paid if a person does not elect to move to eHealth, and if so how many weeks?**

- a. This would be part of the layoff process under our collective agreement. Severance is one option under the Layoff language in the collective agreement.

**11. If EHS (as an organization) fails and the Province changes the legislation to allow the SHA to use a different service provider (or self-service), is there any way that we'd fall back into the SHA?**

- a. If the eHealth fails and the SHA decides to re-assume responsibility for the service provided by eHealth and wishes to employ eHealth staff, there would be negotiations, much like these ones, over the terms and conditions of the SHA becoming the new Employer of eHealth staff. If eHealth fails and another or private sector provider is chosen, there is no opportunity for you to fall back to the SHA, other than as a new hire.

**12. Can eHS employer make you move to different cities with in SK permanently ?**

- a. The current intent, as stated by eHealth, is that you will work in the city where you currently are. But there is field work that they can assign to you and/or if they move the position in the future, then you would need to decide if you wanted to move with it.

**13. Has any position list has been shared to union so far of what positions with SHA mapped to what positions at eHS?**

- a. We have received a position list and the mapping, but we are bound by the confidentiality of the negotiations and cannot share it at this time.

**14. Do you have any sense that there is an underlying timeline to complete this move (e.g. mandated move)?**

- a. This process is driven by the same health system review that created the SHA. In that report, there was a recommendation to consolidate the provision of IT services in the health system. The government chose to interpret the recommendation to move IT services to eHealth.
- b. There have been a number of complicating factors to these negotiations. Obviously COVID, but also a massive privacy breach at eHealth, the complete removal of the CEO and Board of Directors of eHealth. And the lack of any



# NOTICE

employer information that would inform the discussions. But we continue to ask for clarity, follow up on our members' questions until they get it right.

**15. If one is a "top performer" you might get the same or less as someone classified lower than you? where is the motivation to go above and beyond? some of us are supporting everything from a to z and for multiple former Regions. I'd like to have a discussion on where I'd fit.**

- a. The eHealth process for classifying those transferring from the SHA was not done transparently or within the basic processes of consulting with those doing the work. eHealth claims they relied on managers to provide input into the job evaluation done by a consultant.
- b. As well, getting a copy of the actual classification plan will help us advise our members on appeal mechanisms if they dispute where they have been classified.

**16. They take our duties away and "cheapen" our jobs and then claim "you are no longer doing x or y so you no longer qualify for this higher paid role".**

- a. During the meeting, we advised members that if their duties have been taken away and are being done by eHealth now, then they need to contact the Member Resource Center to file a grievance. (1-888-999-7348 Ext2298 or [MRCinfo@seiuwest.ca](mailto:MRCinfo@seiuwest.ca)). This does not pertain to management or supervision – but your actual job duties.
- b. De-skilling or de-valuing the jobs is our major concern as well.

**17. Many of the systems and networks that the former Region's self-managed have migrated (or are migrating) to the EHS environment which former Regional staff no longer have the same rights to manage. Which pre-loads a bias to de-worth their role.**

- a. See #16 – if your work has been taken away and is being done by eHealth – contact the MRC to file a grievance...now.

**18. What does bumping look like if an employee does not accept the eHS offer?**

- a. Bumping and layoff options are covered under article 12 of the collective agreement. You would be eligible to bump into a classification that you have the qualifications for.

**19. If I have to move to eHealth. If my job duties are different. If my wage is lower. I would think I should be able to take a termination package if that is my choice. It's an important option the union should fight to include I feel.**



# NOTICE

- a. The SAHO/SHA/eHealth process is focused on transitioning all staff over to eHealth.
- b. SEIU-West agrees that if you do not accept the offer of transitioning, then there needs to be options outlined under Article 12 of the collective agreement and we are fighting for this.

**20. What if we are already denied a JJE reclass? we would just see the same at eHealth. does eHealth have a similar reclass process like JJE?**

- a. Within the last 6 months, there has been a review of the IT family of jobs. The outcome of that provincial review hasn't been finalized.
- b. We don't know what the classification (or reclassification) plan or processes are for eHealth. We have asked for this information since the beginning of these discussions.

**21. Just want to make sure you're aware that we're getting shuffled around like crazy in our duties already. Half of us are being put on specialized teams with eHS folks working on other former regions systems. Others have been shunted to "Operational" roles and most of our duties and work has evaporated to be replaced by work that is often part of another teams responsibility and generally dead end jobs with no ability to gain experience necessary to further your career.**

- a. See question #16 – if your work has been moved to eHealth – this is a violation of our collective agreement. Contact the MRC to discuss filing a grievance.
- b. This doesn't mean that you can file a grievance if you are receiving direction from an eHealth manager directly your work.

**22. They're taking the people they (think) they need already and slotting them into teams rather than solving the merger problem. Seems to me they're already bargaining in bad faith**

- a. We agree that they are not dealing directly with the issue of transferring staff – we need our members to be more assertive when asking the question about bargaining unit work.
- b. When people are slotted into these teams, we are not notified – contact the MRC when this happens so that we can address this issue asap.

**23. Can we fight to transparently release slotting structures? I don't feel that is bargaining in "good faith", if they intend to leave it to the last minute to release to staff**



# NOTICE

- a. We want our members to have all the information in advance in order to properly make their decision about accepting a transfer offer to eHealth, that includes the structure for where people were classified.
- b. We are not releasing this now because we are still in the bargaining process – this is NOT an agreed-to document and, from our position, is full of errors and inconsistencies.

**24. Considering the speed which eHealth is working with the unions - will SEIU and other unions have to do another collective bargaining agreement before Transition? Or will it occur before the next deadline?**

- a. We hope that this process will resolve before the next Collective Agreement is negotiated.

**25. Is there any word on how OOS employees in non-management roles within IT will be moved into eHS?**

- a. This is not a subject of our negotiations and has not been addressed.

**26. We weren't told these JJE evals we filled would be used for this. I have issues with the JJE descriptions anyways. they are so broad, they simultaneously cover all duties yet don't describe very well the nuances of our duties. they don't reflect the natural tiers that are in IT. there is a definite difference in real life between a 10 year analyst and a 2 year one or even a new 1 year Sr analyst yet the 2 analyst get paid the same and on paper do the same duties.**

- a. The JJE job evaluations were part of a provincial review in order to confirm the contents of the job descriptions that describe your work with the SHA. We do not believe they were not used to compare SHA positions to eHealth positions. We understand eHealth did their own review without consultation with line staff in these positions.
- b. JJE job descriptions are purposely designed to be broad, not specific, in order to encompass the general nature of the duties being done in that job classification.

**27. Does eHealth get the message of how frustrated we are with them and how close they are to losing staff due to their incompetence? We have far more experience and skills that we bring to eHS than they will ever have themselves but they might lose it and burn it all to the ground with staff fed up and leaving.**



# NOTICE

- a. The meeting and discussion was very helpful for the SEIU-West negotiations team to get questions and understand the quantum of the frustration our members are feeling. We will share this with SAHO/SHA/eHealth.

**28. I don't know about everyone else, but we do see value in merging everything and efficiencies. It is all about efficiencies, so we have just gone along with it. we have been taken advantage because we care about the work we do and are too proud and care about our systems/coworkers/patients to let things suffer to "stick it to eHealth/SHA" and grieve things.**

- a. Filing a grievance isn't about 'sticking it to' anyone—it's about holding employers, members and the union to the collective agreement language that has been negotiated.
- b. The movement of work has happened over time, subtly and stealthily – very few grievances have been filed, but those that have been filed have been successful.
- c. Do not assume the union is consulted about any of these changes – always contact the MRC to raise this issue so SEIU-West can follow up.
- d. Employers have always banked on the fact that employees are optimistic that their good work will be recognized, and they will be “taken care of” by the Employer, despite the number of times that this recognition just does not happen.

**29. It's a maneuver used by for profit corporations during take over - removal of work here and there - and creating a work environment that isn't conducive for keeping people.**

- a. We agree!

**30. Yes. I think Joe Schmo Analyst at eHS isn't aware of what their employer has been doing as well. they do what they are doing / have been lied to, to do.**

- a. Not sure about this, but when eHealth admitted to contracting out the classification review and not consulting with the SGEU local at eHealth – it strikes me that they are not transparent and accountable for their actions at any level.

**31. An in person town hall to do grievances, collectively would be very effective. - not a meeting - a do-ing.**

- a. Don't wait for a meeting (or a 'do-ing') contact the MRC at [MRCinfo@seiuwest.ca](mailto:MRCinfo@seiuwest.ca) or 1-888-999-7348 Ext 2298 in order to address a



# NOTICE

grievance. Grievances are time sensitive, so contact the MRC if you have a question or concern.

**Note: in the course of the discussion, a sub-committee was struck to identify the SHA IT work that has been transitioned to eHealth. Logan Meijer, Matthew Sawatzki, Kulwinder Singh, and Guy St. Pierre have been named to the committee and will be providing a list of changes to the SEIU-West bargaining committee. If you have any questions about this, don't hesitate to contact us.**

We didn't include the chat verbatim, but this covers the questions that were asked. We don't have a follow update yet for the next meeting with the SHA and eHealth—SAHO has asked for some time to gather the information that we've asked for.

If you or your co-workers want to be on our email list for updates, use the 'contact us' link on the SEIU-West website and ensure that you receive any information related to the IT Transition to eHealth.

There was a discussion about having more townhalls – we'll continue to do these after bargaining sessions.

Thank you for the lively and thorough discussion on the townhall – great questions and we'll follow up on them and seek the answers.

Respectfully,

***Your SEIU-West IT bargaining committee:***

Ravi Doshi, Curtis Firomski, Janice Gaspers, Russ Doell, Bob Laurie, Barbara Cape