



HUMAN RESOURCES PLAN

2017 - 2021

Developed May, 2017

TABLE OF CONTENTS

Introduction

Recruitment and Retention

French Language Services

Indigenous Employment Strategy

Staff Development

Labour Relations

Workplace Safety and Health

Conclusion

CORE VALUES OF SOUTHERN HEALTH-SANTÉ SUD

Our core values, ***integrity, compassion, excellence, and respect*** help to define our organization, guide our behaviour, underpin operational activity and shape the strategies we will pursue in the face of various challenges and opportunities. The development of our vision; ***together leading the way for a healthier tomorrow***, and our mission; ***to support people and communities in achieving optimal health by providing innovative, sustainable and quality health services*** is a reflection of our organization and commitment to achieving health equity.

INTRODUCTION

Southern Health-Santé Sud's Human Resources philosophy, Human Resources plan and policies are designed to:

- Provide an enabling set of standards to guide managers in making decisions about managing their workforce or their human resources.
- Provide a source for all policies related to human resource management.
- Provide managers with a principles-based approach to managing people.
- Guide human resource professionals in advising managers.
- Human resource management includes broad managerial functions such as: human resource planning, organization design and organization development, diversity and equity. It also includes functions related to managing employees: recruitment and retention, workplace health & safety, compensation, labour relations and staff development.

Principles are fundamental beliefs and the principles of human resource management, derived from legislation, management philosophy and organizational values are touchstones which enable managers to exercise judgment in a variety of situations.

The following principles guide human resource management in Southern Health-Sante Sud:

| | |
|-----------------|--|
| Merit | The principle of merit means that decisions about appointments and pay are based on an unbiased assessment of one's competencies (e.g. knowledge, skills and abilities). |
| Fairness | Fairness refers to conduct that is unbiased, just and honest. It may also mean treating employees consistently. The principle of fairness, enshrined in <u><i>The Labour Relations Act</i></u> , is fundamental to employee relations. |

| | |
|------------------------|--|
| Diversity | Diversity recognizes that people have individual characteristics that make them distinct from others, including age, language, culture, ethnicity, skills, gender, abilities, talents and perspectives. Diversity enriches an environment by facilitating the exchange of different perspectives and ideas. |
| Equity | Equity means applying the principles of justice to correct or supplement employment practices to redress disadvantages experienced by individuals in the workplace. Employment equity is achieved when organizations are representative, fair, inclusive, diverse and respectful of differences. Equity sometimes means treating people the same in spite of their differences. It can also mean treating people differently as a means to achieve equality. This principle is enshrined in <u><i>The Manitoba Human Rights Code</i></u> . |
| Reasonableness | Reasonableness means conduct which is sensible, in moderation and based on sound judgment. The principle of reasonableness is a key concept in <u><i>The Labour Relations Act</i></u> and <u><i>The Manitoba Human Rights Code</i></u> . |
| Transparency | Transparency refers to policies that are clear, frank and accessible. It also refers to conduct being free from pretense or deceit. It encompasses the principles of access to information embodied in <u><i>The Personal Investigations Act</i></u> and <u><i>The Freedom of Information & Protection of Privacy Act</i></u> . |
| Natural Justice | Natural justice means that all administrative procedures are fair and are perceived to be fair because due process has been followed. |

Policies are documented as standards of conduct. They are derived from principles and legislation and designed to help managers decide the right course of action for a specific situation. The management philosophy of the Human Resource department of Southern Health-Santé Sud includes the following:

1. People are the most valued asset in Southern Health-Santé Sud. Our employees are managed with diligence and respect. Managers should demonstrate an honest commitment to using the full potential of every employee and encourage employees to realize their potential.
2. Effective management creates a goal-oriented atmosphere resulting in excellent service to our patients and clients. Managers work efficiently with assigned employees to achieve results so that our patients and clients enjoy maximum value and service.
3. Each manager's outlook must be corporate. By looking beyond the boundaries of their specific areas of responsibilities, managers are able to align their efforts with the organizational objectives.
4. Managers are change agents, initiating better methods and managing the process of change.
5. Human resource planning is a key element of strategic planning, resource allocation and operational planning.

There are several legislative frameworks that impact on human resource management:

- *The Manitoba Human Rights Code* (the “Code”) which prohibits unreasonable discrimination on matters relating to employment. The Code prohibits systemic discrimination and requires managers to make

reasonable accommodation of differences related to characteristics prohibited by the Code. It explicitly allows for Employment Equity programs.

- The Employment Standards Act sets out minimum working conditions for all individuals employed in Manitoba.
- The Labour Relations Act promotes fair labour practices.
- The Personal Investigations Act establishes requirements for consent and disclosure in investigations related to employment.
- The Freedom of Information and Protection of Privacy Act provides individuals with rights to access information about themselves and government administration except in specified situations.
- The Workers' Compensation Act.
- The Workplace Safety and Health Act.

In addition, the majority of our employees are governed by applicable collective agreements which outline the terms and conditions of their employment.

All managers in Southern Health-Santé Sud are responsible for applying the human resource policies. If managers need additional guidance in applying these policies, Human Resources will provide technical expertise and policy interpretation.

PROVINCIAL AND REGIONAL CONTEXT

Southern Health-Santé Sud covers an expanse of more than 27,025 square kilometers of southernmost Manitoba stretching from the from the U.S. international border in the south up to the trans-Canada highway from the Ontario border to Winnipeg, and then follows the South-western edge of Lake Manitoba down to the Pembina escarpment in the west. At its heart is the Red River Valley, a natural floodplain, which has been flooded repeatedly through the centuries.

According to the most recently published census (2012) Southern Health-Santé Sud region is home to approximately 190,000 people and growing, with 29 Rural Municipalities, 4 cities, 12 towns and 5 villages. There are 7 First Nation communities, Hutterite colonies, many Métis and Francophone communities, a large and growing Mennonite population as well as many other cultures.

Southern Health-Santé Sud provides the following services along the health continuum:

- ✓ Three Regional Centres
- ✓ Nine acute care facilities
- ✓ Five transitional facilities
- ✓ Eden Mental Health Centre
- ✓ Crisis Stabilization Unit
- ✓ 22 Personal Care Home sites (1,189 beds)
- ✓ 85 Supportive Housing Units
- ✓ Elderly Persons Housing
- ✓ 20 Home Care sites
- ✓ 27 Public Health sites
- ✓ 21 Mental Health sites

- ✓ 20 Ambulance Stations
- ✓ One QuickCare Clinic
- ✓ Karen Devine Safe House
- ✓ One Teen Clinic
- ✓ Primary health care centres and medical clinics
- ✓ Five Community Health Resources Centres
- ✓ 16 Telehealth sites
- ✓ Services to Seniors
- ✓ Four Regional Offices – Southport, La Broquerie, Morden and Notre Dame de Lourdes

No matter what site you choose, you will be part of a collaborative, innovative and close-knit team, and empowered to play an integral role in patient care, community plans and priorities. Our Board, community and medical councils, and inter-disciplinary healthcare teams work together to ensure that efficient, effective and relevant services are delivered.

We are also proud to enjoy the support of a number of foundations, which provide funding for facilities, equipment, programs and educational bursaries. Their work highlights the community's commitment to partnering with us to achieve optimum health for our region.

Our strength is the diversity of our employees. More than 5,700 healthcare and non-clinical professionals – in communication, finance, hospitality, skilled trades and more - collaborate to deliver a full continuum of programs and services.



INDIGENOUS PROFILE OF SOUTHERN HEALTH-SANTÉ SUD

As illustrated in the graph below, it's projected that between 2012 and 2021, the Indigenous population of Manitoba will increase by 29.4% while the non indigenous population will increase by only 8.3%.

Indigenous youth are members of the fastest growing segment of Canada's population. Half of all Indigenous people are under the age of 25. Over the next 20 years about 400,000 youth will enter the job market. Unfortunately, Indigenous People have yet to become such a presence in the health care workforce in the Southern Health-Santé Sud region.

| Table B-7-1 Projected Components of Population Growth, Manitoba's First Nations Population (Projection Scenario = HH) | | | | |
|--|---------------------------|---------------|---------------|-------------------------|
| <i>Period</i> | <i>Initial Population</i> | <i>Births</i> | <i>Deaths</i> | <i>Natural Increase</i> |
| 2012/2016 | 93.2 | 14.0 | 2.3 | 11.7 |
| 2017/2021 | 105.0 | 15.3 | 2.7 | 12.7 |
| 2022/2026 | 117.6 | 16.4 | 3.1 | 13.3 |
| 2027/2031 | 130.9 | 17.9 | 3.6 | 14.3 |
| 2032/2036 | 145.2 | 19.9 | 4.2 | 15.7 |
| 2037/2041 | 160.9 | 21.9 | 4.7 | 17.2 |
| 2042 | 178.1 | - | - | - |

Note: All numbers are in thousands.

DATA SOURCE: CENTRE FOR HEALTHCARE INNOVATION

Currently, the Indigenous population constitutes approximately 10-15% of Southern Health-Santé Sud's total population. There are seven (7) First Nations Communities located in the region which include Sandy Bay, Dakota Tipi, Long Plains, Dakota Plains, Swan Lake, Roseau River and Buffalo Point. In addition, many Indigenous people live in non First Nations Communities.

Below is a table that profiles the six First Nations Communities and non First Nation Communities in Southern Health-Santé Sud region.

| Profile of First Nations Communities in Southern Health-Sante Sud | | | | | | | | | | | | | | |
|---|-----------|------|-------------|------|------------|------|---------------|------|-----------|------|--------------|------|---------------|------|
| First Nation | Sandy Bay | | Dakota Tipi | | Long Plain | | Dakota Plains | | Swan Lake | | Roseau River | | Buffalo Point | |
| | 2012 | 2015 | 2012 | 2015 | 2012 | 2015 | 2012 | 2015 | 2012 | 2015 | 2012 | 2015 | 2012 | 2015 |
| Total Population | 6048 | 6374 | 355 | 383 | 4053 | 4235 | 261 | 267 | 1324 | 1372 | 2460 | 2560 | 118 | 125 |
| | ^326 | | ^28 | | ^182 | | ^6 | | ^48 | | ^100 | | ^7 | (6%) |
| | (5%) | | (7%) | | (4%) | | (2%) | | (3%) | | (4%) | | | |
| On Reserve | 3954 | | 212 | | 2232 | | 178 | | 596 | | 1174 | | 45 | |
| Off Reserve | 2420 | | 171 | | 2003 | | 89 | | 776 | | 1386 | | 80 | |
| On Site Medical Centre | YES | | YES | | YES | | YES | | YES | | YES | | No | |
| Community School | K-S4 (12) | | No | | K-S1 (9) | | K-6 | | K-8 | | K-8 | | No | |
| Source: INAC Population Statistics Report for 2012/15 | | | | | | | | | | | | | | |

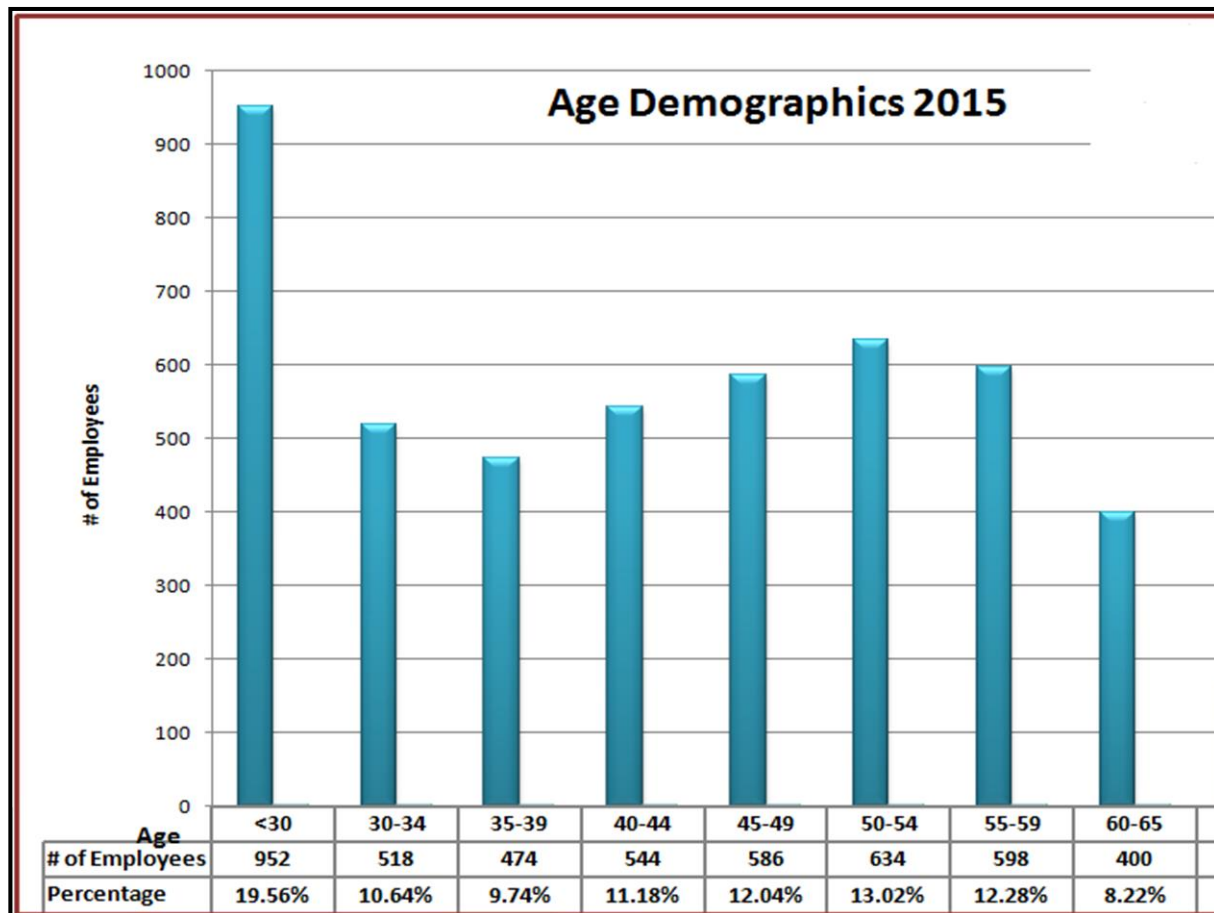
DEMOGRAPHIC PROFILE OF SOUTHERN HEALTH-SANTÉ SUD

Southern Health-Santé Sud is one of five (5) Regional Health Authorities in Manitoba employing approximately 5,700 employees. The average age of those employed with Southern Health-Santé Sud is 44.5 years. Ninety-six percent of our employees are unionized and function under six separate collective bargaining agreements.

The average length of service per employee is 9.6 years. By 2019 over 2350 personnel in the Region will be eligible for retirement

- ✓ 42% of the Region's personnel will be eligible for retirement.....this is 2350 people

Based on the age profile of employees, the region estimates, 42% of all employees will be eligible to retire over the next 5 years, thus creating a human resources shortage in all job classifications within the organization.



DEMOGRAPHIC OF SOUTHERN HEALTH-SANTÉ SUD STAFF AS OF MARCH 15, 2014

| Projected Retirement - Magic 30 And 55 Plus 2 Years Of Service | | | | | | | | | | | | | | |
|---|--------------------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-------|------|-------|--------------------------|---------|------------|
| Age Categories | # Of Projected Retirements 2014-2019 | | | | | | | | | | total | total eligible to retire | | |
| | 2014-1985 | 1984-1980 | 1979-1975 | 1974-1970 | 1969-1965 | 1964-1960 | 1959-1955 | 1954-1950 | 1949- | | | | 5 years | 10 years |
| Year of Birth | 2014-1985 | 1984-1980 | 1979-1975 | 1974-1970 | 1969-1965 | 1964-1960 | 1959-1955 | 1954-1950 | 1949- | | | | | |
| Age | <30 | 30 - 34 | 35 - 39 | 40 - 44 | 45 - 49 | 50 - 54 | 55 - 59 | 60 - 64 | 65+ | | | | | |
| # Of Health Care Aides | 334 | 104 | 122 | 164 | 157 | 201 | 212 | 141 | 67 | 1502 | 621 | <u>41%</u> | 942 | <u>63%</u> |
| # Of Home Care Program | 74 | 53 | 53 | 95 | 109 | 123 | 134 | 114 | 46 | 801 | 417 | <u>52%</u> | 621 | <u>78%</u> |
| # Of Licensed Practical Nurses | 61 | 46 | 55 | 40 | 30 | 31 | 38 | 25 | 8 | 334 | 102 | <u>31%</u> | 172 | <u>51%</u> |
| # Of RN/RPN | 146 | 92 | 69 | 70 | 82 | 84 | 75 | 58 | 19 | 695 | 236 | <u>34%</u> | 388 | <u>56%</u> |
| | | | | | | | | | | 3332 | - | | | |

OVERVIEW RECRUITMENT & RETENTION CHALLENGES

“Health Services are labor intensive. As such, they require a steady supply of well-trained and experienced professionals.”

Toronto District Health Council, Health Human Resource Planning in Ontario, December 2000. Executive Summary

Lack of adequate human resources appears to be consistent in all areas of health care including: Physicians, Registered Nurses, Licensed Practical Nurses, Pharmacists, Laboratory Technologists, Diagnostic Imaging Technologists, Rehab and Support Staff i.e. Home Care Attendants and Health Care Aides. This is not particular to our region, but is a provincial/national/international reality.

The following issues are related to shortages of health care workers in our region:

- a) Aging of the workforce with insufficient workers being trained to replace those that are retiring.
- b) Aging of the population which is creating more demands for health care services.
- c) Educational quotas have been introduced to limit the number of students being trained in particular professions. It is through the education system that the health workforce is renewed and retiring workers replaced. If new workers are not being educated and trained at a rate that matches retirements from the workforce, it is likely that shortages will occur.
- d) Language skills and ability to deal with individuals from a variety of cultures has also become increasing important, particularly with the French speaking and Indigenous communities.

- e) The ability to recruit staff to smaller rural communities is extremely difficult.
- f) Challenges in getting Internationally Educated Health Professionals (IEHP) credentials recognized by Canadian Licensing Bodies.

RECRUITMENT & RETENTION

Our Five-Year Plan

Southern Health-Santé Sud employs over 5 700 staff members with just over 600 of those staff being employed by our ten affiliate organizations. This plan is the compass that will guide our recruitment and retention efforts over the next five years and identify what we hope to achieve. Through extensive information gathering and forecasting, the development of strategic functions will be future based to provide the ability to anticipate and prepare for a range of possible occurrences. Though we cannot predict the future and the influences ahead, we know that having a clear aim will provide the foundation required to address the challenges and to successfully meet our goal of building a sustainable workforce.

CURRENT STATE

A variety of factors influence the environment which cause the organization to constantly evaluate our recruitment needs. These factors include the internal and external influences such as social, political, technological and economic changes.

Currently, the average age of our workforce is **44.5 years** old. Statistics show that over the next five years, 42% will be eligible to retire. The current vacancy rate is 12.5% amongst our unionized positions, Allied Health, Nursing and Support Services.

INTERNAL/EXTERNAL ENVIRONMENT

- Aging workforce.
- Increased pressure on healthcare services
- Shortage of qualified candidates willing to relocate to small rural communities
- College/university graduate's inaccurate assumptions regarding rural living and healthcare experiences
- Limited supply of qualified bilingual (English/French) candidates for Designated Bilingual Positions
- Increased economical pressures and expectations that lead to limited resources
- Close proximity to major urban centre?

GOALS

- Develop initiatives to encourage the aging workforce to extend their time and expertise with the organization
- Increase number of French language applicants/employees to ensure the delivery of health services in both official languages
- Build internal capacity of bilingual (EN/FR) employees to enhance organizational services
- Expand online recruitment efforts through the use of social media
- Promote healthcare professions and opportunities to secondary and post-secondary students, and general public by participating in health fairs, job fairs and campus recruitment events
- Continually build and foster formal and effective partnerships with area universities and community colleges
- Continually seek opportunities to develop and relationships with post-secondary students to increase effective visibility and recognition of the organization as an employer of choice
- Provide practicum and job shadowing opportunities.

- Educate managers on recruitment processes and retention practices to ensure consistency throughout the region
- Increase awareness of opportunities in the health sector for Indigenous people

"With a clever strategy, each action is self-reinforcing. Each action creates more options that are mutually beneficial. Each victory is not just for today but for tomorrow." Max McKeown

NURSING

Nurse Practitioners (NP), Registered Nurses (RN), Registered Psychiatric Nurses (RPN), Licensed Practical Nurses (LPN)

INTERNAL/EXTERNAL ENVIRONMENT

- Difficulty recruiting nurses to rural areas
- Inadequate supply of "casuals" and "relief" pool positions
- High level of Agency Nursing usage
- Lack of qualified applicants who meet the language proficiency (English/French) for Designated Bilingual Positions
- Numerous "term" positions within the region due to various Leaves of Absence
- Aging nursing workforce who prefer lower EFT
- Shortage of available training seats in nursing educational institutions resulting in long wait lists for acceptance into the faculty
- Increased pressure on current staff to accommodate and facilitate clinical placements
- International recruitment registration challenges
- Limited supply of qualified bilingual (English/French) nurses for Designated Bilingual Positions
- Under-representation of Indigenous health professionals according to demographics of clientele

Did you know?
Year after year,
Nurses rank
among the most
trusted
professions.

ACTIONS

- Promotion of the Student Incentive Grant, LPN to BN Student Bursary, Relocation Assistance and Provincial Nursing Grants
- Regular scheduled on-site presentations to local and provincial secondary and post-secondary institutions
- Participate in local, provincial and national health fairs, job fairs and campus recruitment events
- Host "Regional Bus Tours" for 4th year nursing students
- Additional placements for the "Home for the Summer Program"
- Promote summer employment as a Health Care Aide to 2nd and 3rd year nursing students
- Provide practicum and job shadowing opportunities.
- Submit a proposal to Assiniboine Community College for the rural rotating LPN program to be offered in the region
- Participate in IEN Rural Bridging Program through Red River College
- Work provincially and build partnerships with other Regional Health Authorities for better success in recruitment

- Continually build and foster formal and effective partnerships with key stakeholders specific to Internationally Educated Nurses (IEN), Indigenous communities and bilingual recruitment
- Consider the creation of additional “float” and “relief” positions as appropriate and where economically viable
- Advocate for additional nursing education programs to be offered in the region on a permanent basis
- Develop a Social Media platform for recruitment
- Develop recruitment material such as brochures, postcards etc to showcase the region

ALLIED HEALTH

Community Health, Emergency Medical Services, Dietary, Midwifery, Pharmacy, Rehabilitation Services

INTERNAL/EXTERNAL ENVIRONMENT

- Increased competition for human resources due to close proximity to a major urban centre
- Difficulty recruiting allied health professionals to rural areas
- Lack of qualified applicants who meet the language proficiency (English/French) for Designated Bilingual Positions
- Numerous “term” positions within the region due to various Leaves of Absence
- Training and educational programs only available out-of-province for certain allied health professions
- Varying compensation practices throughout the province impact the recruitment for Rehabilitation Services Professionals & Pharmacy in rural areas
- Economic challenges in supporting the need for additional Allied Health professionals to meet the demand in the region

Did you know?
The *Canadian Physiotherapy* profession owes its origins to a group of British nurse-masseuses.

ACTIONS

- Regular on-site recruitment visits to local and provincial post-secondary institutions
- Promotion of the Student Incentive Grant and Relocation Assistance where applicable
- Participate in local, provincial and national health fairs, job fairs and campus recruitment events
- Develop new recruitment initiatives that promote rural opportunities to post-secondary students
- Approval of additional placements for the “Home for the Summer Program”
- Develop Social Media platform for recruitment
- Provide practicum and job shadowing opportunities.
- Develop recruitment material such as brochures, postcards etc. to showcase the region
- Continually build and foster formal and effective partnerships with community employment centers
- Work provincially and build partnerships with other Regional Health Authorities for better success in recruitment

SUPPORT SERVICES

Dietary, Housekeeping, Home Care, Health Care Aide, Maintenance

INTERNAL/EXTERNAL ENVIRONMENT

- Shortage of qualified candidates in rural areas resulting in a large number of underfills

- Filling Designated Bilingual Positions with applicants who meet the qualified language proficiency (English/French)
- Aging support services workforce
- Numerous “term” positions within the region due to various Leaves of Absence
- High turnover rate amongst support services positions
- Numerous casual positions within Home Care resulting in high levels of Home Care Attendant vacancies

Support Services
careers are amazingly rewarding, as they are all about helping people to get better. They plan an integral role at all stages of a patient's care.

GOALS

- Regular on-site recruitment visits to local and provincial post-secondary institutions
- Participate in local, provincial career fairs
- Develop new recruitment initiatives that promote rural opportunities to secondary and post-secondary students
- Build and foster partnerships with various school divisions to offer the dual credit Health Care Aide program in secondary schools
- Build and promote the Aboriginal Health High School Internship Program
- Develop Social Media platform for recruitment
- Develop recruitment material such as brochures, postcards etc
- Build community awareness on how to qualify and apply for vacant positions
- Partner with Staff Development to request support and financial consideration for the Robertson College Health Care Aide Challenge course to be offered in the region
- Host Community Job Fair to fill Home Care Attendant vacancies
- Continually build and foster formal and effective partnerships with community employment centres

RETENTION

The Southern Perks Retention Program includes:

- Welcome to Employees – Greeting Card
- Discount Program
- Promotional Wear
- Employee Appreciation Luncheons
- High 5 Awards
- Quality Service Awards
- CEO Achievement Award
- Service Excellence Team Award
- Years of Service Recognition
- Sector Group Recognition
 - April – Volunteers
 - May – Nurses
 - September – Allied Health
 - October – Support Services
- Retirement Recognition

Employees need to feel valued and appreciated, be given feedback, provided with growth opportunities, be given work-life balance options, and trust and confidence in their leaders. (Branham)

INTERNAL/EXTERNAL ENVIRONMENT

- Shortage of qualified candidates in rural areas results in an increase of overtime affecting work life balance and morale
- Financial constraints affect compensation packages, wages for “hard to recruit” positions
- Surge in demand for certain positions creates recruitment challenges and inability to fill all vacancies
- Shift work does not allow for adequate internal participation in training and education sessions intended to build skills and competencies
- Mentoring program currently provided for new grad nurses is instrumental in retaining our nursing workforce and allows for a transfer of expertise
- Numerous health programs/departments could benefit from a mentorship program developed according to health program and/or services
- Career advancement opportunities
- Aging workforce resulting in the potential of multiple retirements

GOALS

- Build skills and follow career paths that are aligned with organizational needs, drive engagement and increase motivation
- Provide assistance in identifying skill gaps and recognition of high potential employees
- Increase internal membership or representation on advisory committees
- Develop and share resources identifying how to value and recognize employees
- Implementation of mentoring/coaching program for additional healthcare professionals to help improve employee/manager relationships
- Design and implement effective training and development programs in a variety of formats accessible for shift workers to build job proficiencies, increase productivity, knowledge, loyalty and contribution
- Develop and review Position Descriptions to include new and/or higher level of responsibilities
- Enable employees to attend internally offered training sessions which could be offered by the region or by an outside trainer
- Encourage information sharing to disseminate information amongst employees
- Offer commonly needed training and information on the Intranet website
- Promote flexible schedules to allow employees to attend formal education sessions
- Develop, introduce, and promote recognition programs that value and recognize employees to help lower cost of turnover
- Develop a recognition toolkit for managers to utilize to further build trust and confidence in senior leaders
- Promote and instill a positive culture

FRENCH LANGUAGE SERVICES

As a designated bilingual region, and in accordance with the Manitoba Government’s French Language Services (FLA) Policy, Southern Health-Santé Sud is legislatively responsible to provide bilingual health care services (official bilingual languages - English and French) within, but not limited to, designated bilingual areas. The *French Language Services Regulation (46/98)* under the *Regional Health Authorities Act (C.C.S.M. c. R34)* requires that designated Regional Health Authorities (RHAs) in the province of

Manitoba develop FLS plans. The [Southern Health-Santé Sud 2017-2021 FLS Strategic Plan](#) provides a long-term framework for the provision of bilingual health care services to Francophones.

Recent consultations with the communities and staff corroborate studies that demonstrate that the most crucial factor in the delivery of FLS now and in the future is Human Resources. Much work has been done in Southern Health-Santé Sud in the last three years to create a well-designed and effective regional recruitment and hiring process for designated bilingual positions. The integration of FLS in Recruitment and Selection Procedures and having instruments such as the French Language Assessment, letters of offer templates, and other supportive tools strengthen the hiring process. Despite progress in recruitment efforts, the fact remains that there is a shortage of professionals able to provide services in both official languages. In May 2016, 44% of designated bilingual positions were vacant or filled by candidates who do not meet the language qualification.

In its commitment to address this significant challenge, and in partnership with the FLS Unit, Human Resources will work to decrease the vacancy/underfill rate in designated bilingual positions to less than 25% by 2021.

Human Resources actively provides leadership, knowledge and expertise towards creating a sustainable bilingual workforce for current and future needs with a focus on strategic initiatives and approaches such as:

- Implement new, innovative and targeted recruitment initiatives that include collaboration with communities
- Forge strategic partnerships aimed at increasing the number of bilingual graduates in secondary educational institutions to expand recruitment opportunities
- Assist in designing an approach for language training programs tailored to the needs of employees
- Actively engage employees in language training as a shared responsibility throughout the organisation
- Hire candidates who meet the language qualification with intent to provide/support additional training options to meet the other qualifications (i.e. for hard to fill positions including professional and leadership/management positions)
- Develop and implement effective techniques to monitor achievement of conditions of employment for employees not meeting the language qualification and hired into designated bilingual positions
- Develop and implement a formalized tracking and reporting mechanism to monitor and update progress on recruitment and retention efforts
- Continue to develop and evaluate tools/guidelines to support managers
- Continue to develop a work environment that incorporates a francophone culture where bilingual employees are valued and supported
- Provide a platform for Human Resources and FLS Unit to work collaboratively

Southern Health-Santé Sud Human Resources recognizes its vital role in supporting the provision of bilingual health care services.

INDIGENOUS EMPLOYMENT STRATEGY

The Southern Health-Santé Sud Indigenous Human Resources Initiative (IHRI) started in August 2005, in collaboration with Manitoba Advanced Education & Training, Indigenous and Northern Affairs for a one year term position for an Indigenous Recruitment & Retention Coordinator.

The Indigenous Human Resources Initiative was to create an Indigenous Employment Plan incorporating the following elements:

- To create an Indigenous Recruitment and Retention plan for Southern Health-Santé Sud,
- To develop a strategy to more accurately identify the number of Indigenous People employed by Southern Health-Santé Sud,
- To increase the Indigenous workforce across all job classifications in health care, and
- To increase the percentage of Indigenous staff in Southern Health-Santé Sud.

The Indigenous Recruitment & Retention Strategy is to become the basis for a long term strategy for Southern Health-Santé Sud to increase employment opportunities for Indigenous people across the continuum of care and to create a workforce that is more representative of the population that it serves.

Southern Health-Santé Sud's long term goal is to attain the ratio of Indigenous employees to its total workforce at the same rate at which Indigenous people are represented in the surrounding communities. Southern Health-Santé Sud is not federally legislated to meet diversity regulations but rather that we chose to do so out of commitment to employment equity as a principle and from an organization core value perspective – It's the right thing to do - Integrity and Respect.

The report highlights accomplishments to date and creates an Indigenous human resources strategic plan for 2016 to 2021.

INDIGENOUS RECRUITMENT & RETENTION OPPORTUNITIES

Utilizing the Indigenous population as a valued “untapped” resource is an opportunity for the region to ensure we have employees, at the same time we will be achieving our long term strategy of creating a workforce that is representative of the population it serves.

The median age for all Indigenous people in 2011 is 24.4 years, making nearly 50% of the population under the age of 25. Some remote communities report over 60% of their community is under the age of 25. Over the next 20 years about 400,000 youth will enter the job market.

By 2042 it is estimated that the Indigenous population will be two times the size it is today across Canada.

By developing partnership as a recruitment and retention strategy in Southern Health-Santé Sud we have had success in growing our Indigenous recruitment and retention strategy. A historical Indigenous Workforce Partnership Agreement was signed on June 16, 2010 between the region and 23 Indigenous and non-Indigenous organizations, local provincial and federal governments, education/training institutions and unions – this agreement is to promote and develop initiatives undertaken by the region that encourage and support

the development of an Indigenous representative workforce. Partnership is based upon mutual respect, fairness, trust, understanding and open communication.

Southern Health-Santé Sud and partnership stakeholders developed a five-year Strategic Plan with Indigenous peoples for Indigenous peoples. Quarterly partnership stakeholder meetings are held to review workforce progress and strategic goals. Goal of Partnership in Health Sector:

To have a representative workforce where Indigenous peoples are represented at all occupational levels (entry level, middle, and senior management) in proportion to their numbers in the provincial population

Why we need Partnerships:

- Indigenous people are the youngest and fastest growing population.
- In the next 10 years one in four people applying for employment will be of Indigenous descent.
- Need for long-term solutions.
- Build relationships, trust and respect.
- Share resources.
- Need to be innovative and creative to help with Human Resource needs and health determinants.

Why partnerships work:

- Focused approach – need long term solutions.
- Support from Partners - It takes a community to raise a child!!
- Coordinator hired to bring people together. Partnerships with Indigenous community & training/education institutions.
- Build understanding, awareness, commitment and capacity within organization.
- Working together gains Trust and Respect which helps to create a Representative Workforce.
- By sheer numbers Indigenous people in Manitoba are destined to become a political demographic more influential than any we now see.
- Partnerships are preparing for Manitoba's future workforce.
- Improvement of health status
- Increase equity in the workplace

(SOURCE: INDIAN AND NORTHERN AFFAIRS CANADA; AWPI)

Indigenous people who possess the right mix of education, skills and experience should be well positioned to meet the future needs of the Southern Health-Santé Sud workforce.

OUTCOMES

Since Signing of Partnership

- 209 Indigenous (First Nation, Métis and Inuit) people hired. Indigenous employment 4% and growing.
- Work-experience/Job shadowing training provided to over 100 Indigenous youth and adults.
- Indigenous awareness training provided to approximately 300 senior managers, supervisors, and staff and community members.

OUTREACH

Increase awareness of opportunities in the health care sector for Indigenous students and youth through following initiatives:

- Aboriginal (Indigenous) Health High School Internship
- Aboriginal (Indigenous) Adult Health Internship
- Central Region Career Trek Program
- Student employment partnerships
- Volunteer placements
- Presentations/tours.
- Southern Health-Santé Sud Aboriginal Health High School Internship Program (AHHSIP)

The AHHSIP program was recognized in 2012 by Accreditation Canada Innovative Leading Practice. We were also recognized in 2014 by IPAC/Deloitte Public Sector Leadership Award Gold medal in the Health/Education category for the AHHSIP.

GOALS OF AHHSIP

1. Encourage youth to stay in school and graduate.
2. Prepare students for future education and employment opportunities within the health care field.
3. Develop self-confidence and self-awareness.
4. Create a sense of belonging.
5. Develop positive role models.
6. Provide information and educate about early career planning.
7. Give youth a chance and hope for a better future.
8. Increase number of Indigenous employees within Southern Health-Santé Sud.

RETENTION STRATEGY

- Indigenous Employee Support Network.
- Work with employees, unions and managers to address and resolve workplace issues.
- Respectful Workplace Policy.
- Workshop on “Honoring all Cultures in the Workplace; Indigenous Cultures and Diversity Workshop for Managers”.
- Cultural Training and competency building in the workplace for all staff, physicians and board members.

ENVIRONMENTAL SCAN/SITUATIONAL ANALYSIS

The table below gives an overview of the most important factors having an actual or potential impact on the Indigenous HR Strategy in Southern Health-Santé Sud. Based on discussions this analysis provides a foundation for strategic directions.

| Internal situations specific to Indigenous Recruitment and Retention Strategy | |
|---|---|
| Strengths | Limitations |
| <ul style="list-style-type: none">• Program Teams: taking ownership and interest in the recruitment and retention of Indigenous workers | <ul style="list-style-type: none">• Aging workforce• Internal expectations |

| | |
|---|---|
| <ul style="list-style-type: none"> • Support from the First Nations communities in Southern Health-Santé Sud • Support from Indigenous staff • Primary Health Care model/Board Ends • Increased Indigenous staff (0.72 % in one year) • Second Language abilities identified by Indigenous Staff • Implementation of cultural respect presentation for all new employees (regional general orientation) • Access to EAP sessions – cultural diversity • Development of a culturally competent workforce • Bursary program for high demand professions • Practicum opportunities • Educational Programs offered in Southern Health-Santé Sud i.e. LPN-RN, HCA, LPN program • Self Declaration added to application form, new hire packages, exit interview forms, internal application form. • Southern Health-Santé Sud Human Resources Plan and Indigenous Recruitment & Retention Strategy 2017-2021 | <ul style="list-style-type: none"> • Large geographical region with many facilities and programs • Limited funding resources • Meeting the needs of all cultures |
|---|---|

| External situations specific to Indigenous Recruitment and Retention Strategy | |
|--|---|
| Opportunities | Challenges |
| <ul style="list-style-type: none"> • Relationships with other RHA's • Association of Facilities of Medicine of Canada (AFMC) & Indigenous Physicians Association of Canada (IPAC) recruitment and retention strategy to encourage and support students through medicine • Membership to IANE and MAHRS • Support from First Nation Communities • Access to Indigenous Youth population • Schools, and community partnerships • Partnerships with unions | <ul style="list-style-type: none"> • Meeting the needs of all cultures • Meeting expectations with limited resources • Meeting community identified needs • Balancing reality with public expectations • Achieving determinants of Health • Barriers to employment i.e.) transportation, drivers licence, education • Collective Agreement restrictions • Disparity in health of population (growing Indigenous population are the least healthy population) • Poverty and economic stress, often with consequent educational and social implication |

INDIGENOUS RECRUITMENT AND RETENTION STRATEGY 2017-2021

Southern Health-Santé Sud's long term goal is to attain the ratio of Indigenous employees to its total workforce at the same rate at which Indigenous people are represented in the community.

GOAL

Achieve a 12% Indigenous representative workforce across the designated job classifications by 2021.

RECRUITMENT - Recruitment of trained Indigenous health care workers

| | |
|--|---|
| Strategic Priority Issues and Rationale | Identification of Indigenous workers being hired & leaving the organization/classification. |
| Actions | a) On-going promotion of Self Declaration Form with new hires and existing employees b) Continuation of Exit Interview Forms |
| Performance Measures | Number of self-declaration forms received /year from existing employees & new hires Number of self-declared exit interview forms received/number of Indigenous employees |
| Status Completed/In Progress/Long Term | In progress/Long Term |
| Status Description | Continue to promote completion of self-declaration form for existing employees Receive bi-weekly reports from payroll Exit interview forms sent to all employees leaving the organization |

| | |
|--|--|
| Strategic Priority Issues and Rationale | Develop awareness of healthcare employment opportunities with Indigenous students |
| Actions | <ul style="list-style-type: none"> a) Develop partnerships with high school counsellors re: career choices in health care b) Presentations to high school students on careers in health care c) Attend High school career fairs within First Nations Communities d) Visit colleges and universities to recruit Indigenous students e) Encourage students to complete practicums in Southern Health-Santé Sud f) Offer free/affordable accommodations for students g) Develop awareness of funding opportunities/bursaries – external and internal to Southern Health-Santé Sud. h) Promote Relocation Assistance, where applicable |
| Performance Measures | <p>Number of contacts/inquiries with First Nation schools and schools with higher Indigenous student population in Southern Health-Santé Sud/year</p> <p>Number of new Indigenous hires/year</p> |
| Status Completed/In Progress/Long Term | In progress |
| Status Description | <p>Presentation has been developed for grades 5-8 and 9-12.</p> <p>Presentation has been developed for post-secondary institutions</p> |
| | |
| Strategic Priority Issues and Rationale | Increase awareness of Southern Health-Santé Sud Employment Opportunities with the Indigenous Community |
| Actions | Increase placement of job ads specific to the Indigenous community i.e. local newspapers, specific websites |
| Performance Measures | Number of Indigenous job ads placements/Indigenous hire per year |
| Status Completed/In Progress/Long Term | In progress |
| Status Description | Currently, job postings are being sent to University Centres/Indigenous Student Lounges |

| | |
|--|--|
| Strategic Priority Issues and Rationale | Increased Access to Training Programs <i>(Creative and appropriate use of technology could be a key strategy to addressing health human resources needs in rural areas. Offering such programs in our communities opens opportunities to the rural areas and the Indigenous population, who otherwise would not be able to participate)</i> |
| Actions | Deliver ongoing post-secondary programs within region: a) health care aide – Red River b) health care aide via (high schools) c) Comprehensive HCA program– challenge course d) LPN program (rural rotating e) LPN-RN f) Indigenous LPN program |
| Performance Measures | |
| Status Completed/In Progress/Long Term | Ongoing |
| Status Description | Currently being offered: HCA – Portage, Morden/Winkler, Steinbach LPN – Southport LPN-RN – Sept 2016 Indigenous LPN – March 2016 HCA via high schools |
| | |
| Strategic Priority Issues and Rationale | Indigenous High School Internship Program |
| Actions | a) Promotion of work experience and job shadowing with high school students b) Encourage sites to hire Indigenous students for summer employment |
| Performance Measures | Number of Indigenous Students hired per summer/year Number of students job shadowed/year |
| Status Completed/In Progress/Long Term | Long Term Priority |
| Status Description | Currently being offered in the region on an annual basis |
| | |
| Strategic Priority Issues and Rationale | Implementation of Regional Job Description Initiative |
| Actions | a) Review qualifications and competencies/job classification b) Development of Regional Recruitment Committee with Indigenous Employee representatives |

| | |
|---|--------------------|
| Performance Measures | 100% |
| Status Completed/In Progress/Long Term | Long Term Priority |
| Status Description | |

RETENTION

| | |
|--|--|
| Strategic Priority Issues and Rationale | Creating a culturally competent workforce that encourages diversity and celebrates cultural differences |
| Actions | <ol style="list-style-type: none"> 1) Incorporate cultural awareness into regional general orientation 2) Work Life Survey – 2014 3) Implement Cross Cultural Workshop Walk a Mile in my Moccasins for all employees 4) Development of regional Respectful Workplace Policy and Education sessions |
| Performance Measures | <ol style="list-style-type: none"> 1) Number of employee attending RGO/year |
| Status Completed/In Progress/Long Term | <ol style="list-style-type: none"> 1) Complete 2) 2019 3) Long Term Priority 4) Long Term Priority |
| Status Description | <ol style="list-style-type: none"> 1) Currently: 80% compliance 2) 2nd Staff work Life Survey Completed May 2006 3) Began in 2009 - Approximately 300 staff have attended the education sessions. We offer 3-4 sessions per year 4) Sessions started in fall 2015 |

| | |
|--|---|
| Strategic Priority Issues and Rationale | Capacity building with Clients and Community through partnerships Building sustainability and vitality by linking and combining our resources and strengths in the Indigenous community |
| Actions | The ongoing establishment of relationships with Indigenous networks, and employment and education agencies such as <ol style="list-style-type: none"> 1) Schools throughout region; including First Nations Schools 2) Manitoba Métis Federation 3) CAHRD 4) Portage Friendship Centre 5) Participation on Provincial Committees i.e. IANE, MARS 6) Unions 7) Other RHA's 8) Employment Resource Centres |
| Performance Measures | Number of partnership encounters/ events/year |
| Status Completed/In Progress/Long Term | In Progress/ongoing |
| Status Description | Partnership agreement signed in 2010. Union Partnership – to review hiring practices/job qualifications |

STAFF DEVELOPMENT

The employees in Southern Health–Santé Sud are our most valuable resource. To ensure excellence in our health region, we are committed to the continuing professional development of all employees.

Staff Development is seen as an activity that has as its goals, the development of skills and competencies that will provide the employee the potential for better performance, enhance client care, and satisfaction on the job. To that end, Southern Health-Santé Sud., delivers, and provides financial support for a variety of activities that engage health care employees in an intellectual work life.

“Maintenance of competence of health care providers is a major concern for three reasons:

- a) The median age of health care providers is 44.5 years
- b) In rural, many individuals remain in the same work setting for many years or all of their careers and may have limited opportunities for continued education or upgrading
- c) (Rural facilities) presently admit fewer patients. These patients are of lower acuity than previously at these locations. Most emergencies are stabilized and transported. There is less opportunity for health care providers to practice and retain their skills. Some have drifted into an attitude that emergency situations are few so the need for up-to-date skills is less. Because of this the opportunities to practice a skill are limited, therefore more educational time is required to be spent on skill maintenance.”^[1]

Benefits to employees that may accrue as a result of staff development initiatives are:

- Improvement of the delivery of the service which a staff member provides ultimately enhances client care
- Enhancement of cultural proficiency of the staff member
- Improvement of leadership skills
- Enhancement of knowledge
- Improvement of technological skills
- Enhancement of employees’ health and wellness

Staff development activities include those that meet the needs of employees as expressed in learning needs assessment surveys, workshop evaluation forms, and internal documents such as program reviews, accreditation reports, program team strategic plans and management initiatives. Moreover, the Staff Development Team should be proactive in identifying the needs and encouraging employees to explore ideas and competencies that facilitate continuous improvement at the organizational and individual levels.

Since resources are always limited, professional development activities are designed to provide the greatest effect for the employees and its program areas. Consequently, human and fiscal resources are allocated to activities that have broad organizational impact. Education opportunities are advertised (via e-mail, newsletter, the calendar of events on the Internal Portal system, and by program/unit leader promotion). Also where applicable, details of funding resources available to all staff are promoted such as specialized

^[1] College of Physicians & Surgeons of Manitoba, Annual Report for Rural Hospital Reviews, August 2004

nursing skills funding to support critical care competency based programs, nursing recruitment and retention continuing education funding, and the annual MNU tuition allowance.

There are several education opportunities offered across the region at various locations every month to which employees have access. To note, where possible education opportunities via the use of, Learning Management, WEB x and Telehealth services are sought to enhance program delivery. All education activities are recorded into QHR as evidence of attendance at education sessions. QHR has the ability to generate reports based on education activities on a regional and individual employee basis. The personal education record for employees is encouraged to be included on the employee performance review.

Educational programs will basically be delivered in three formats:

- a) Internal programs (inclusive of orientation, mentoring programs, Safe Client Handling Injury Prevention Program, Violence Prevention, P.I.E.C.E.S , Mental Health First Aid, competency based programs- BLS, ACLS, CTAS, TNCC, NRP, and the obstetrical training program) utilizing internal expertise/resources;
- b) Internal programs utilizing external resources (Leadership Development, Cultural diversity training (Walk a Mile in my Moccasins), Food Handlers course, , Excel Training, PALS, and the AORN course- on line delivery purchased through the region);
- c) External programs utilizing external resources (Red River College Health Services Leadership and Management Program, Robertson College Health Care Aide course- 2013, Employee Assistance Program Education, and Ethics training sessions as provided through MBPHEN).

All employees are offered a structured orientation program (regional, regional clinical orientation- ER, Obstetrical, facility, program and department specific orientation). Three full day Regional Orientation sessions are scheduled every month in the region whereby new employees participate. Following Regional Orientation, a site/ program specific orientation and department/ unit orientation is arranged by the manager.

A regional mentoring program has been made available for new nursing graduates. This program is new to the region and is not considered mandatory for new nursing graduates; however the research shows that benefits to the new grad have been seen to positively affect the development and success of the new nurse.

Also, in 2015- Health Science Placement Network (HSPnet) was added to the staff development portfolio. HSPnet is a comprehensive, web-enabled Practice Education Management system for the health sciences, addressing challenges of discipline-specific and interprofessional student placements. The manager of this program works with the site management and staff development team members to ensure we have adequate student placement arrangements and the required orientation for the candidate.

The regional Safe Client Handling Injury Prevention Program (SCHIPP) was introduced based on best practice guidelines in accordance with Workplace Safety and Health Act and regulations, and has been implemented across all sites and programs with demonstrated success at various sites and programs across the region. Education tools are available for employees to access on the internal portal services and regular training programs are offered.

The Regional Violence Prevention Programs have been offered in the region for several years and the program is currently being redesigned to align with the provincial program. The course design has been revised to be more inclusive of all sectors working in health care. Employees feel the program equips them with skills to deal with aggressive clients.

Leadership Development programs are regularly scheduled on an annual basis, and are made available for all directors, managers and supervisors in the region. This education program is deemed as the baseline education for those employed in these roles. The content of these programs is inclusive of the art of leading, communication skills, performance management, change management, and generational/cultural diversity.

The Provincial Certification in the Food Handlers program is offered in partnership with the Public Health Inspectors- Health Protection Unit, Southern region several times per year to all those that work in food services areas, inclusive of those working in home care service areas in the region. This course and recertification courses are offered on regular intervals throughout the organization.

The provision of Excel Computer program training has been offered in the region, and has seen to enhance the efficiency for those using the program in the course of their job duties. The need for a designated computer lab and training personnel and lab is seen as an area of improvement for the region.

In 2013, the Robertson College Health Care Aide Challenge course was offered as a cost shared program (employee: region sharing costs). 33 home care employees successfully attained Health Care Aide certification. The benefits of the certification program supported a standardized accredited program for home care employees, and at the same time also improved the employee morale.

In 2015, the region began a three year partnership with Red River College Health Leadership and Services Management program. This is a cost shared initiative between the employee and the region to partake in a three year distance delivery education certificate program. 21 employees are currently enrolled in this program.

Annually, Manitoba Blue Cross Employee Assistance Program offers education hours to all regional health authorities. These education sessions are provided by very skilled high calibre facilitators. Employees enjoy participating in these education sessions as they often provide practical suggestions that the employee can apply while at work and in their personal life.

Given the fiscal realities in the health care environment, Southern Health-Santé Sud believes that although, there is an obligation on the part of Southern Health-Santé Sud to provide continuing education for its employees, it is unrealistic to expect complete funding of educational opportunities. Workshops provided within Southern Health-Santé Sud will be done, as much as possible, on a cost-recovery basis. The exception would be those courses deemed mandatory. The collective agreements dictate that when required to participate in mandatory educational programs employees will be fully compensated. Monies for such required programs would be secured from the Area/Program budgets in those instances where funding has not been established regionally. Educational hours are also available through our regional Employee Assistance Program and these are administered by our Staff Development Department.

The future direction of education needs to include movement to electronic learning management education delivery programs to allow employees to have flexible access to continuing education opportunities at any time of the day or week. This type of learning can be more cost effective when it comes to reducing travel to attend the more traditional education sessions.

One of the areas we hope to finalize is our Succession Management Program. Many components are already in place and we are offering an "open" program of management development to all managers, not just "heir apparent". Our Leadership Program has been significantly expanded adding a "Change

Management” component along with incorporating “Lean Training” and the “Releasing Time to Care” program from the United Kingdom.

A more formalized LEADS program is now being discussed at the senior management level and will soon be introduced into the organization.

LABOUR RELATIONS

The majority of the staff employed at Southern Health–Santé Sud are unionized under seven (7) different Collective Agreements; Canadian Union of Public Employees (“CUPE”), Manitoba Nurses Union (“MNU”), Manitoba Government and General Employees’ Union - Technical Professional Paramedical (“MGEU P/T”), Manitoba Government and General Employees’ Union - Community Support (“MGEU C/S”), Manitoba Government and General Employees’ Union – Facility Support (“MGEU F/S” – Eden Mental Health Center), Manitoba Government and General Employees’ Union – Emergency Medical Services Superintendents (“MGEU EMS Superintendents”) and Physician and Clinical Assistants of Manitoba Inc. (“PCAM”). It is recognized there is a need for a strong knowledge base and supportive structure to coordinate and apply processes to have a successful and consistent application of Labour Relations in the region. The following are goals for the Labour Relations department over the next five years:

1. Building capacity for existing managers, other human resource professionals, and for new managers in the functional areas that encompass labour relations.

CURRENT STATUS

Regular and ongoing inquiries for labour relations support and services confirms there continues to be a need for new and additional learning. This continued learning would be targeted for existing managers and new managers. It will have two components; through formal theory based educational sessions, and with continuous demonstrated learning opportunities supported by The Labour Relations Team during collaborative interactions. This balanced approach will ensure there is a practical application of learning and evidence of the skill present. By providing the supportive learning opportunities, managers will be able to utilize the framework and tools within their portfolios with additional support through a consultative labour relations service.

The areas of focus in the strategic planning term will be:

- Annual Vacation Planning
- Attendance Management
- Performance Management
- Grievance Handling
- Progressive Discipline
- Conducting Manager/Employee meetings and supporting documentation
- Union/Management Role Education
- Collective Agreement Application Training
- Conducting Workplace Investigations (Ex: Respectful Workplace/ Resident Abuse & Violations falling under “Violence in the Workplace”).

- Complex Investigations Training (Example: Human Rights/Respectful Workplace Retaliation/Workplace Health & Safety/WCB Fraudulent Claims).

New Manager and existing Manager training will focus on the day-to-day information that a manager is most likely to encounter on a regular recurring basis. This education is intended to provide them with the foundation for functioning autonomously and the tools to proceed in a timely way. Human Resources have related experience and knowledge of complex issues and are aware of the legal implications in many circumstances; while we endorse this service, it is our intention for managers to feel that they can access the services of labour relations at anytime should their issues be complicated. Managers will be provided with one on one or group meetings for those requiring extra learning opportunities with the support of labour relations present.

To accomplish this goal we will:

- Review existing manager guides and update to be in keeping with current labour law standards and practices.
- Create new manager guides for the remaining topics that do not exist, and may require a manager to reference material regularly.
- Update existing policies to ensure they match the training programs or continue to harmonize following merger.
- Create training that can be used to support the on boarding of new managers and can also be added to the “New Manager Orientation”.
- Have the new training be available so it can be used as part of the “Leadership Development Program” as appropriate.
- Offer formal learning opportunities for managers on labour relation topics of interest relative to the collective agreement and include annual refresher sessions as it relates to vacation planning.
- Labour Relations will partner with the Human Resources Team, workplace partners and stakeholders to offer quality education in areas where cross over exists.
- Improve accessibility to the Human Resources section of the Internal Portal so managers have a specific place where they can “click and go” to access tools, materials, and quick information sheets that support them in their daily activities for reference.
- Continuous learning with Labour Relations Team to maintain knowledge with industry changes, practices and legislation.
- Identifying regional trends to support and engage in negotiations of new Collective Agreements

LABOUR RELATIONS CHALLENGES AND GRIEVANCES

Where there are challenges identified that negatively impact

- Work environments
- Quality service delivery
- Violations within established policies
- Procedures and established practices or harmful impacts to the safety and health of our clients and employees;

The Labour Relations Team will provide assistance to support facility and program leaders to address challenges when requested. Labour Relations will be able to provide this assistance by applying a consistent regional approach and supporting Human Resources processes to expedite an approach to improve work environments and correct unacceptable behaviours to reflect Southern Health-Santé Sud’s Core Values.

The goal during this next strategic plan timeframe will be to increase labour relations knowledge and experience within the management team to address challenges with staff and services while meeting contractual obligations and maintaining positive working relations with employees and union groups.

Labour Relations will also provide a supportive environment to management to work collaboratively through Respectful Workplace complaints or investigations, union grievance handling and resolutions while exercising, promoting and supporting legislative and contractual rights.

To accomplish these goals:

- Labour Relations will gain knowledge by meeting with management to understand their priorities and the impact of issues in the workplace.
- Encourage managers to meet with staff to engage in open discussion to understand, value and involve employees to resolve issues.
- Develop strong working relationships with all Union groups.
- Involve stakeholders to develop and determine priorities (SLT, RLT, DHS, MGRS and Provincial Groups, Unions).
- Engage in consultative meetings with managers and all union groups.
- Work towards positive resolutions that support regional goal(s).
- Labour Relations to maintain service delivery to managers that support their client service delivery
- Labour Relations will provide a supportive service delivery that reflects our Core Values.
- Ensure a good understanding of managers' needs to provide options and opportunities to carry out their roles
- Continue to build positive working relations with managers
- Share Labour Relation industry practices, experiences and outcomes both regionally and provincially to managers for informed decision making

Overall the relationship between the Unions and our Leadership group is positive and we are able to engage in respectful and collaborative discussion when addressing challenges in staff and making changes, while reflecting Southern Health-Santé Sud's Core Values and Board Ends.

WORKPLACE SAFETY AND HEALTH

Workplace Safety and Health (WS&H) is a comprehensive program with a philosophy and values that reflect those of our organization to ensure a healthy, safe workplace for all employees in the region.

As well as the many obvious benefits of a healthy workplace, there are significant opportunities for cost savings in this area, particularly as it relates to disability management. It is our hope that resources saved in this area can be redirected to contribute to improved health care and more importantly create a healthier workforce.

The Southern Health-Santé Sud Workplace Safety and Health Program consists of 3 main aspects:

1. Workplace Safety and Health
2. Occupational Health Management
3. Disability Management

Every program in the region - whether acute care, long term care or community services - has a link to workplace safety and health. All employees have a responsibility to work safely and be accountable for their actions and as the employer we have a moral and legal responsibility to provide a safe and healthy working environment.

WORKPLACE SAFETY AND HEALTH (WS&H) PROGRAM

The role of the Workplace Safety and Health Program is to be the contact for regional WS&H inquiries from managers, workers and Manitoba Labour- WS&H Branch (formerly the Division). These include responsibilities relative to critical incidents, inspections and work orders, variances, WS&H Committee status, inquiries and requirements. Also, education to managers and WS&H Committee members regarding legislation, minimizing risks, developing safety policies and safe work procedures to meet the provincial legislation is an important function of this area.

Manitoba Legislation identifies eleven elements of a safety program for all workers and employers. Southern Health-Santé Sud has related these elements to our industry of healthcare for a standard approach as stated in the legislation.

The content of the Safety program is stated by Section 7.4 of *the Workplace Safety and Health Act*.

“Section 7.4 (5) A workplace safety and health program must include:

1. A statement of the employer’s policy with respect to the protection of the safety and health of workers at the workplace;
2. The identification of existing and potential dangers to workers at the workplace and the measures that will be taken to reduce, eliminate or control those dangers, including procedures to be followed in an emergency;
3. The identification of internal and external resources, including personnel and equipment, that may be required to respond to an emergency at the workplace;
4. A statement of the responsibilities of the employer, supervisors and workers at the workplace;
5. A schedule for a regular inspection of the workplace and of work processes and procedures at the workplace;
6. A plan for the control of any biological or chemical substance used, produced, stored or disposed of at the workplace;
7. A statement of the procedures to be followed to protect safety and health in the workplace when another employer or self-employed person is involved in work at the workplace that includes:
 - a) criteria for evaluating and selecting employers and self-employed persons to be involved in work at the workplace, and
 - b) Procedures for regularly monitoring employers and self-employed persons involved in work at the workplace:
8. A plan for training workers and supervisors in safe work practices and procedures;
9. A procedure for investigating accidents, dangerous occurrences and refusals to work under Section 43(1);
10. A procedure for worker participation in workplace safety and health activities, including inspections and the investigations of accidents, dangerous occurrences and refusal to work under section 43(1);

11. A procedure for reviewing and revising the workplace safety and health program at intervals not less than every three years or sooner if circumstances at a workplace change in a way that poses a risk to the safety and health of workers at the workplace.

Most of these areas have been addressed although a significant amount of work still remains to be done. Policies and procedures are being developed to ensure compliance with legislation.

Specific Goals for the workplace safety and health program include:

- Ongoing development of regional Safe Work Procedures (SWP).
- Ensuring the new amendments to the updated WS&H Act and Regulations are reflected in the WS&H Program to make certain we are meeting employer obligation as defined by the WS&H Branch.
- Developing policies and procedures in keeping with the Manitoba WS&H Act and affiliated regulations.
- Review regional standards and apply them to the development of current and new WS&H committees and their responsibilities in maintaining safety practices within their respected sites and programs.
- Development of a WS&H Manager's Resource Guide to assist managers in the applying WS&H Act, Occupational Health, and Disability Management programs.
- Creating a region wide process for employees and managers outlining the ability to identify, investigate safety concerns, and right to refuse dangerous work.
- Creation and monitoring of a regional violence prevention program.
- Work as a representative on the Provincial Workplace Safety and Health working group in the review and development of standardized safety processes.

OCCUPATIONAL HEALTH MANAGEMENT

As part of the overall WS&H program, Occupational Health initiatives are required to support and evaluate interventions which can be used to promote safety and health programs at the workplace. Investment in the protection and promotion of occupational health may not only support the wellbeing of the individual but also creates an environment free of illness and diseases.

The implementation of a occupational health management system that responds to regional Infection Control policies, WS&H Act requirements, Musculoskeletal injury reduction, and promotion of a healthy workplace environment. The occupational health management system consists of but not limited to the following components:

- Ergonomics
- Chemical and Biological substances control

Ergonomics: A systematic improvement process that removes risk factors that lead to musculoskeletal injuries and allows for improved worker performance and productivity. Examples of current ergonomic programs include Safe Client Handling Injury Prevention Program ("SCHIPP") and workstation ergonomic assessments.

Chemical and Biological substance control: A hazard control system that protects workers from exposures to various workplace chemicals, materials or substances as well as environmental hazards such as noise controls. Examples of current chemical and biological substance controls include WHMIS, N-95 respirator fit testing, Indoor Air Quality (IAQ) surveys/monitoring, and noise conservation programs.

Specific Goals for the occupational health management program include:

- The development of a regional electronic library of Job Demands Analysis (PDA) and PDA Summary forms. PDA development to include the use of a force gauge to measure workers' physical push or pull force during specific work rated applications.
- Establish office ergonomic guidelines to assist managers and staff with tools in maintaining proper ergonomic workstation setup.
- Develop ergonomic Manual Handling procedures for non-client related departments/ processes in keeping with the established SCHIPP program.
- Expand the N-95 respirator fit testing program to include departments utilizing half and full mask respirators for routine and emergency response (Code Brown-Chemical Spill) applications.
- Institute guidelines for surveying and monitoring Indoor Air Quality systems (IAQ).
- Continue establishing a regional Noise Control and Hearing Conservation program throughout facilities.
- Develop and implement an updated Workplace Health Management Information System (WHMIS)/ Global Harmonizing System (GHS) systems that includes a regional library for housing Material Safety Data Sheets (MSDS).

DISABILITY MANAGEMENT

The intent of Disability Management is to collaborate with all stakeholders including the employee, the union, and management to accommodate an injured or ill employee back to the workplace in a timely manner.

To balance the needs of the employee and the employer, we together will ensure the employee understands their role in the Return to Work (RTW) programs and can rehabilitate at work to their pre-injury status.

Disability Management is a proactive set of steps to identify goals, develop action plans and involve others in the workplace to assist their co-workers in the RTW process. Returning employees to the workplace in a collaborative effort reduces time away from work and the stress of dealing with an injury for the employee as well as reducing costs for the employer.

Improving the safety and health of the workforce is one of the human resources department's operational strategies. Specific goals for this strategy as it relates to Disability Management include:

- Implement a Disability Management program manual that effectively directs the many layers of an employee absence resulting from an injury or illness.
- Develop a proactive resource plan consisting of a best practice model for managers, workers, and the injured worker's health provider to follow in returning the injured employee back in a safe and healthy manner.
- Educating managers and health practitioners on the various disability management processes, employer obligations, including the Duty to Accommodate, and employee expectations. Building the capacity in our managers to expedite the first initial steps of a leave of absence will improve on the following:
 - obtaining required medical information on timely basis;
 - providing employee awareness of expectations and communication requirements;
 - ensure timely applications to insurers;
 - contribute to accurate payroll processing to minimize errors;
 - opportunity to inform staff of available resources related to their absence and to extend care and concern to their current medical status; and

- reduce workers' length of time away from work by improving on re-entry time back to the workplace (working with insurers, health provider, and union regarding the employer's willingness to accommodate).
- Continue to maintain and build on positive relationships established with unions, insurers and managers to represent the supportive approach for our employees' during the absence and re-entry processes, build on the successes of the combined goal of all parties; "recovery for long term health".
- Balance the needs of the employee and employer during rehabilitation at work to pre-disability status.
- Development of an improved reporting process for claims, costs and types of absences to model planning and areas of focus for continued improvement (WCB reports, HEB reports).
- Reduction of WCB rates, time loss injuries, number of days lost per time loss claim. Monitor types of injuries to educate and modify to reduce risks. Reduce time away from work by improving on turnaround times on information received, RTW Meetings and Claim Adjudication. Continue to support SCHIPP.
- Creating and maintaining regional staff injury reporting system and the development of database for identifying and determining trends in staff injury and illness.

CONCLUSION

The delivery of health services in Southern Health-Santé Sud are labour intensive and therefore require a steady supply of well-trained and experienced professionals. The Human Resource challenges that our organization face will only worsen as baby boomers leave the organization and the demand for health care increases.

The availability of a skilled labour pool is critical for our organization to maintain existing health services in Southern Health-Santé Sud. Utilizing the newcomer, youth and Indigenous population in our region as a valued "untapped" resource is an opportunity for the region to maintain our staffing levels and to achieve the long term strategy of creating a workforce that is representative of the population it serves, in addition; to creating a work environment that is conducive to diversity.

Given that one of the determinants of health is employment, we anticipate a secondary effect of our strategy will be improved health for all of our employees and their families.

As with many other plans, this is a dynamic and "living" document that will change with shifts in both internal and external forces. The plan reflects and supports the strategic directions of the organization and Board Ends.