

Kathleen Cariaga

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KC: I was born in the Philippines and then I came to Canada, August of 2008. I'm one of the foreign workers who were hired by our previous employer, Rosedale Partnership. And now it's Chartwell.

Q: What part of the Philippines are you from? What did your parents do?

KC: I lived in the northern part of the Philippines. My parents were doing business. I'm a registered nurse. I applied for a healthcare aide position from Philippines to Canada, and we are hired as temporary foreign worker.

Q: You went to university?

KC: Yes, I took a Bachelor of Science in Nursing , and I passed the Nursing licensure exam.

Q: Was it expensive going to school?

KC: My parents were okay providing us with tuition fees and everything. But life is hard back home compared to the income you're going to be getting here. You just have to try to do something better. In Canada healthcare is free. Back home it's not. It's okay for me not to be able to practise my profession, and come here to work as a healthcare aide. From then on until now, for 11 years, on the 10<sup>th</sup> I celebrated my 11 years in Canada.

Q: What was your first job?

KC: This is my first job.

Q: What about back home?

KC: Same, my first job. Back home I tried to help my family's business. But you need something more than that. Even practising your profession won't even provide you with enough; so I decided to try Canada. Thankfully, I was hired by our previous employer.

Q: Was that always your plan when you started nursing school?

KC: Not really; Canada is not really our plan. Mostly in the Philippines you took up nursing to work either in United Kingdom or Middle East or United States. Canada wasn't those countries that was open for nurses; but they were open for foreign workers. As a healthcare aide, you have to have either a degree, or you have to have a background in health so that they will hire you.

Q: Are the majority of your classmates working overseas?

KC: Yes, the majority of my friends are in United States and Middle East.

Q: How did you end up in Canada?

KC: It was really hard. I came here August, and I don't know what to expect. I don't even know what my job is going to be. I read the contract, but it didn't really sink into my mind. Started working was really hard because there was no vacant spot for healthcare aides at that time. So they asked me to do housekeeping job, which was really hard for me doing it. It's like, okay you have to do this, clean the mess – do the bedding, stripping, housekeeping; you have to throw the garbage. It was pile of garbage that I have to throw out at the back of the building. So it was really hard, and it was really rough for me, those kinds of adjustments for two weeks. I'd been crying, and I don't want to tell my mom that this is what I've been doing here in Canada compared to what I have back home. But they say reality bites. You're here already and you have to make a living for you to be able to help, because my brother is still in college at that time. When I saw my first paycheque, I was offered \$11.50; my contract is \$14.26. But if you're a foreign worker and you want to stay in Canada, you don't want to get in trouble and you don't want to go against your employer. I said, okay, \$11.50 is okay instead of \$14.26, and then

realizing my one hour of salary would be my one day salary as a nurse back home. So it started to sink in: okay, this is way much better. Then, after two weeks, I started doing healthcare aide job.

Q: Did you go through a recruiting agency back home?

KC: There is a third person on the contract, which was employed by Rosedale. She was the one in charge of hiring foreign workers back home, because she's also a Filipina. Then my mother's uncle was working with Rosedale and he heard that Lorenzo was trying to hire foreign nurses back home. So he asked the boss if you can let my grandniece to be one of your caregivers here; and he said yes. So we were hired privately by the employer, but there is an agreement between the government of the Philippines and Canada for hiring foreign workers.

Q: What was the program that you came under?

KC: I came here as a temporary foreign worker as a nursing aide.

Q: Were there fees involved or tests or anything like that?

KC: There are fees involved. I think it's a labour market opinion only, LMO at that time. I think it's only \$150. We didn't go through agency, because it will cost you lots of money. The only thing the Philippine government requires the employers is a repatriation agreement. If something happens to me, I die, they have to send my body back home, and that's it.

Q: So you didn't have to pay any application fees?

KC: No, we didn't.

Q: Or visa fees or anything like that?

KC: Visa fees, no. I think it's the employer.

Q: When did you find out you'd be working in the interim as a housekeeper? Not until you got here?

KC: Yes, until they had an opening, and your salary would start at \$11.50 like what the housekeeping are getting. I think after six months or a year I got \$12.50. That's how foreign workers work. You know there's a law and there are lots of options for us to go through. But if you're going to be doing that, you're going to go against your employer. Our contract is every year. So we know that the boss is not going to rehire us. So we just stayed for the same amount of income, just for us to work.

Q: Did your coworkers come under the same program as well?

KC: Some of us are nurses back home; some of us are not. The employer just let them work as a healthcare aide without proper education requirements. Some of them came here as a housekeeper, and they just asked them to work as a healthcare aide, same as us. We know that they're breaking the law. They know it already. Everyone knows about it. But no one wants to speak up, because it's a year contract. After that, the employer might change his mind and say, okay, you talk too much. You complain about me to the government--then you're going to go back home.

Q: What was the job like?

KC: It's shiftwork, 7:30 to 3:30, 3:30 to 11:30, 11:30 to 7:30. My contract is Monday to Friday and I'm off on weekend. But it didn't go that way. The contract was just a contract; but in reality it's not that. You have to work according to the shift that they're going to be giving you. I started 7:30 to 3:30. I remember I had two nights of orientation. You have to give medication to residents; you have to assist them in grooming. It's assisted living. So you still have to provide them with independence. They can do some tasks for themselves, like combing their hair, brushing their teeth, and you have to help them make the bed and make sure they have clean

clothes. You give shower to residents too. We do housekeeping for an hour before and report the residents to the dining area. I think those are the nursing aide's job description.

Q: How many residents were you responsible for?

KC: Usually 20. In the daytime they have 12 or less than 15, compared to evening shift. But don't complain, because you know if you complain, you won't have another year of contract. It's always at the back of my mind, even though I know it's not right. My salary is not right. But I want to stay.

Q: Did you have any health and safety concerns?

KC: Health and safety for us mostly is for the type of job that we do. Some of the residents now require two-person assists; you do lifting. The carpet is not supposed to be for lift. But we have no choice. We have to lift patients using a lift machine. It's carpet and it's so hard to push that machine, and the client is on it. But it's really hard to complain. I always go back to, okay if I'm going to call this number, even before that we don't have a union, this and that. Okay, just be quiet and do your job. Before, I don't know that giving cytotoxic medication, you have to wear gloves. I have patients before that has it, and I don't wear gloves, because I am not educated enough for that matter. But, since you're a foreign worker, we're going to go back to the foreign worker thing – just obey.

Q: Did your employer provide any training or health and safety orientation?

KC: They do provide training like WHMIS, but mostly it's the staff who has fear. The majority is fear to go against your employers in the private sector. They're like, okay this is the one that complains too much.

Q: Were you aware that workers have the right to refuse dangerous work?

KC: No.

Q: How did you become aware of that right?

KC: Since we became AUPE members. We don't know about it, because before I worked as night staff, and we are required to throw the garbage outside of the building at 2 o'clock in the morning. There is a bar behind the building; there's a pub. We feel it's unsafe, that something might happen. We just don't know when, but someday it might. But nobody wants to complain. My coworkers, I have one before, she's even pregnant, but she has no choice. In the wintertime we have to push the cart all the way to the back of the building where there's a pub, and you know it's unsafe. So no one complain.

Q: At what point did you reach out to AUPE?

KC: Before, when we were still at Rosedale, some of our coworkers would say, okay, we need to get a union. But at the back of our mind, if we get into the union, the employer might not give us holiday, like six weeks you can go back home. That's the good thing about our previous employer – no holiday pay, no sick call, not much benefits, but if you ask to go home, he will allow you every year five or six weeks. After that, you can go leave of absence without pay for ten days; it's okay. But then Chartwell came in and they were like, okay, we're going to absorb every one of you. We're going to give you shifts as much as we can accommodate all of you. It's because of the funding. So we don't know how many shifts you guys are going to be getting. At first we were quite excited, like okay, we're going to be in a big company and they have good feedback on Internet. Then they came, I think the last day of April or last week of May, and they said they were going to do some changes in benefits, in hours. We were all excited. Then they gave us the schedule, and instead of working five days on and two days off, like what we used to have with Rosedale, it became four days on and two days off. Income difference is like for a week of our paycheque. It's way too much, realizing you're only going to be working nine days in two weeks. It's a rotation shift. So it's hard for us to look for another employer, because your shift is not permanent; rotation basis. So now we're like, okay, everybody feels bad. So then we decided, okay, we have to reach out. We have to reach out to AUPE. We have to do something

for ourselves, and we have to be educated on what our rights are, what are the employer's rights. So the union drive started in September 2018.

Q: What was going on with your immigration status during this time? Were you still on a temporary visa?

KC: Oh no, I met a Filipino and we got married, and I was sponsored by him. So I don't need to renew my status. At that time, thank you very much Jason Kenney: he was the one who said that foreign workers can only stay for four years in Canada and then after that you have to say bye-bye and no more contract for you, maximum of four years. But before that came along, I got married and he sponsored me. So I'm a permanent resident now.

Q: Did that change how you felt about speaking up at work?

KC: Yes, it did matter. It did change. I was like, okay now I can fight. I can speak up. I can stand up. I don't have any fear now of they might send me back. Yeah, you can fire me, but I can find another job same as this one. But I stayed there for 11 years.

Q: I imagine many of your coworkers on temporary status were sent home at that time.

KC: Yeah, they were.

Q: That was when Jason Kenney was immigration minister.

KC: Yeah, he was, in 2010 or 2011. All temporary foreign workers know his name. Jason Kenney was the one who kicked us out of Canada. Before our question is: how come we cannot be a permanent resident? With our job description we can't; it's a low-skill job. Housekeeping is low skill. You cannot be a permanent resident. Some of us did a compassionate program that you can stay in Canada because there's a need for caregivers. Some of my coworkers stayed for compassionate program and got their permanent residence. But some of them weren't able to do that. So they have to go back home.

Q: Did you start a family?

KC: Yes. When I got pregnant, we weren't expecting that. Because I'm a foreign worker, I remember I have to renew my health card, and I don't have that status yet. But before that, my husband sponsored me. So, my papers are still in the process. I don't remember the document that I provided for my employer. But still I can work. But the problem with the employer before is when I'm done with my mat leave, they didn't let me work. They didn't let me come back to work until I have my permanent resident status, even though immigration says I can, because my papers are in the process. But politics is there. Politics is they don't like people who-- because some of them decide, oh you can't, even though the immigration says you can. Some of them, the company say no. You have to like, okay they said no, I have to just wait for my papers. What they did to me is I'm the one rotating only because they said it's a rotation now. But I know I'm the only one rotating. It's okay for me to say they're giving me a hard time, which they really did.

Q: Why were they treating you differently?

KC: Are they going to be able to watch this? I'm going to skip. But luckily I had my permanent resident status. So I was able to go back.

Q: So, once you got back, you felt more secure.

KC: Yes, I felt more secure. In 2011, when I had my permanent residence, no 2013. It takes a long time. I gave birth 2011. Oh yeah, I got my status 2011; but the permanent residence came after I gave birth. So I don't need to pay for medical when I gave birth. Everything went well. So I came back work and after that Lorenzo planned to sell the business and it was bought by Chartwell.

Q: How did you find out about the sale?



KC: Nobody even know about the sale. It's one of the few private residents who found out that there was a sale that happened. We don't know. We just find out that day that our previous employer started to pull out those staff that he had for a long time. He pulled them all back, because the only business left for him is the one downtown. All the people that he likes, he took them out and put them in the business that has been left for him. We were like, okay, we're going to be Chartwell. Then we got the letter from him saying, you're going to be well taken care of by Chartwell; everything will stay the same, this and that. But it never happened. Changes were made that we have no choice. But okay, we need the job, we need to make money, then realizing that we have to have a union.

Q: Tell me about the union drive.

KC: The union drive started September. I was looking at the website, okay: AUPE this and that. My husband is with CUPE. So he's giving me some backgrounds of how a union works for you, for workers' rights. Then okay, let's go try AUPE. I was trying to call and I can't get a hold of it. I said, we'll wait for a few days; then, maybe, I'll just try to email. Then I sent an email and I got a reply from Michelle. We started talking over the email and over the phone, and then we started to meet up. Okay, this is what AUPE needs you to do, the signature for the petition, 60 to 80 percent, and our rights. She also gives us information for how many hours are we supposed to be working. I told her, eight hours for nine shifts in 14 days less the half hour break would only give me 65 hours in two weeks, which is a big change for me and my family's budget. I used to work 90 hours for Rosedale before going to 65.

Q: What were some of the impacts on your family's budget?

KC: Now I have to look for a part-time job. I have to compensate all the expenses, because I lost about \$300 biweekly or \$350 biweekly for income. So I have to look for a part-time job, which is a homecare company, because they're not going to give you extra shifts.

Q: It's difficult to schedule another job.

KC: It's difficult, because your rotation is every four days – four days on and two days off, unlike before, five days on, two days off and you can pick up extra shifts. Financially it's okay with our previous employer. But as Chartwell said, this is how they are. That's the shift according to the budget coming from Alberta Health Services. Those are the shifts available. Some of my coworkers on nightshift, they're only allowed to work three days on and three days off. I have a big impact for myself five days on two days off compared to them. It was really huge change from they only have six or seven days in two weeks to work.

Q: So that was a big issue for some people.

KC: Yeah, cut in pay, cut in hours. You can pick up shifts, but it's hard to pick up shifts also. Some of the shifts that are available are in the morning for you to work four hours working from evenings. Then the problem with them is they don't give orientation; there is no orientation for some of the new staff. What they want us to do before is they said, you cannot have your old shift before. So we were asking, okay if I will be working on the fourth floor, can I have an orientation? They said no, you don't need an orientation because you're going to read the client's care plan. You're going to read the flow sheet. So you will know what you're supposed to be doing. Yeah, it's the same routine – giving pills, giving bath. But on how to deal with this resident is hard. If the resident doesn't know you, they won't trust you. They will get anxious on you. You won't gain their trust. For them, where is my permanent staff? They took them away; you don't know what you're doing. What school were you? Did you went to school? Those are the incidents that we were expecting to encounter. But they said, no, you don't need that; you've been working as a healthcare aide. Yeah, but we're dealing with independent residents; they're still cognitive. They said, no. Then some of the residents would find out they would lose their staff; so they started complaining. It's the residents who fight for us to have our shift, not us. Because for us, they won't listen. We keep telling them that it's hard. If you just give us a day of orientation! Their first plan was trying to switch groups from this side of the building to this side of the building; it has to be switched. They want to switch everybody, all permanent staff. What they did was the staffing was based on seniority. They would give you a line that you don't know where you're going. For example, it's phase one and phase two in memory care. But if you say memory care, you can apply there. But there's no orientation. So you wouldn't; so you

would choose on your side only. But it's based on seniority, seniority basis. So there's a chance you get bumped. Some of us got only temporary shifts; some of us got only float shifts. Us seniors – I think I consider myself a senior because by ranking I'm 15<sup>th</sup> – so I got a shift four days on, two days off; but you have no idea where you're going to be going. It can change on a monthly basis, on a weekly basis, or on a daily basis that you can be on this floor and later on on this floor. We were like, what's going to happen to us and what's going to happen to the residents? We already told them that the residents might be complaining that changes to me made were not going to make them happy. But they didn't listen. They didn't listen to us. What they did was, on October 8<sup>th</sup> (they finalized the schedule) I will be working on the 4<sup>th</sup> floor. Somebody will be working for me on the main floor, which both of us doesn't know the residents. Everyone was furious. All staff were furious; so on the weekend it was chaos. Everyone was in beast mode for the management, and then they found out. I think it didn't went well, because they said we were rude, some of us workers, mixed emotion. Everyone was in beast mode. Then the residents find out. That's the time that the residents, no we don't want these changes, and then it didn't happen. We had our shift back and then they still said, okay we're still going to be switching. So from October to February this is going to be your shift. But after February, things will change again; we will do rotational basis again. We're like, okay, hopefully AUPE can come and help us right away so that this would stop.

Q: Was the employer aware of the union organizing drive in October?

KC: No, they didn't know. Everyone was more eager to cooperate.

Q: What was it like to finish the process of bringing in the union?

KC: I started September. I think the drive happened five or six weeks after that for petition. Then after signing the petition, it was given to AUPE to submit on the Labour Board and then after that the employer got a notice in November or October.

Q: It would've been the beginning of November. Then what happened?

KC: They were really good. When they found out the letter, they didn't post it. They didn't post it for a few days and then they did. Then all the big boss came from Toronto to talk to us – we're here to listen; so what's been happening with you guys? We can give you increase by January. These are the benefits that you should be getting. AUPE will ask you to pay dues, but we don't. We can have an employee association. AUPE is not good. The best unions are from British Columbia; those are the best unions. So they tried to bribe everyone. They organized meetings for the staff to be gathered in boardroom, saying, you know what, we're here to listen to you guys. What's going on with your shift? We're trying to keep everyone but the old employer is like this and like that; so it always depends on the budget. We're trying to fix everything. I had a chance to talk to one of the big boss. I had a chance to talk to Etta. I told her, you know what, I'm going to be doing my internship. Because I went to school, I went to medical office and I'm going to be doing it on November. Okay, so then you're going to use all your holidays for that, for three weeks. I can do that. After the vote, I can't do it anymore. I can't be gone for three weeks for my practicum; it has to be maximum of two weeks. So how can I go? I don't have proof this is what she told me. But then changes are made after the vote. They did a delay. I remember the tactics that they did. We were supposed to have a vote by November. But they didn't tell the Labour Board that their name was not really Chartwell Griesbach; it is Chartwell Master LP. So I think it was two weeks delayed just because of the name. So they have the chance to talk to the staff, telling everyone that you don't need a union. We are here; we can have an employee association in which you can vote two representatives from the LPNs and from the HCAs. Then they said there can be an employee association and there can be a union at the same time. Then I phoned the Labour Board and tell them that my employee said it's okay to have a union and then at the same time we can have. . . It's very unlikely to have that, because he said the union is the one representing you between the employer and the employee. But with the employee association, it's between only the employee and the employer. So then we go for a vote. So it's majority. At that time, Heritage Valley and Wildrose also tried the union drive. We were two weeks ahead of them, but before they filed the Labour Board they found out that Chartwell Master LP is the real name of Chartwell. So it became one chapter only, instead of two, for three sites.

Q: How many members?

KC: I think at that time it's around 157 spread at the three sites, and Griesbach has the majority of members.

Q: What position do you hold in the chapter?

KC: I was elected as the chairman for Chapter 54 of Local 47. I think it was January that I got elected from that position. After that, I started attending education and training, which was really helpful and really made an impact on me – how you deal with employers, what are your rights. It did really help me a lot, because after training I would talk to my coworkers and say, you know what, this is what happened; this is the rights. Especially the OH&S, it did make an impact. I remember during the union drive, it was winter, and our employer made a memo that someone should be putting some salt outside of the building. We know it's unsafe; there's a pub behind us. My coworker, one of my LPNs, she did that for a day. Her husband asked her to quit.

Q: So these are nursing staff, who have to go all the way around the building at night.

KC: Yes, especially when maintenance is gone – at night and on the weekends. But since we don't have that much education yet because we're still doing the union drive at that time, some of my coworkers decided, okay, we have to talk to OH&S. Then OH&S came in and investigate, because that's not the only thing that happened to us. We have a burglar incident in the basement, where seven cars has been smashed; the windows has been broken. One of my LPNs lost his GPS thing in his car and the window was broken. So that day they asked us, two of the staff will go down to the basement and check, doing security check. The culprit was able to smash a window, and you expect us to go down there and there's a chance that our face or we can get hurt. But they said, that's why it's two of you, like a buddy system. For us evening staff, we felt like it's unfair. They have a meeting every morning for ten minutes with the management and they they would put up a memo and evening staff would find out: okay, you have to do this in the evening and you have to do this snow thing and you have to do the security check, without even talking to us. That's the memo. So you have no choice except, okay try. Then that's the time they decided to contact. But AUPE was aware that these are the things that our

employer wants us to do, and we felt like it was really unsafe. OH&S came in and investigated and was able to talk to our previous manager, and found out that there is no committee. No committee; there's no minutes of the meeting. We don't even know that there should be an hour every month. We don't know that there should be a committee, and not appointed.

Q: So how did the employer respond to OH&S's orders?

KC: They put up a committee for OH&S, which is not elected, it is appointed, and the chairmen are the managers. So majority are the managers on the top position. We don't know that it should be a joint OH&S committee, not appointed. Then we found out that it should be elected, and those elected positions should be doing the joint health and safety. Until now, even though we have elected officers, it's still not implemented.

Q: How did you get people to come forward to be elected?

KC: Just like when we started doing the union drive, we tried to convince our coworkers that someone should be on the committee. Either staff in the morning or staff in the evening, LPNs, HCAs – someone should run for the position. We have, I think, six or eight staff who wants to have the position, and then we had a meeting for the election of OH&S. All three sites have elected officers, but Chartwell didn't recognize those elected officers. It has to be their appointed officers, because they had a meeting July 31<sup>st</sup>. Still the same people on the committee, with appointed people. It's still an ongoing struggle.

Q: You're not going to let them get away with that.

KC: Yes, everyone is aware. They were saying, oh there's still a committee. Yeah, they have a committee, but it is not the elected position. It should be joint, not appointed.

Q: Is there anything you'd like other workers in Alberta to know about, based on your experience?

KC: Based on my experience, I just noticed that when I became chairman it became hard for my shift. It was a lot different now. If you asked for help, help wasn't given compared to other coworkers. I've been complaining about my shiftwork, actually my shift load, since February. Okay, I've been doing this to my residents and my back is hurting me a lot now. It's four of them that I've been lifting legs. They said, okay let's do the shift. Then they didn't actually give much help. They removed some of the residents on my shift which are very light, that they need more supervision. The four residents that I've been complaining still stays with me. I gave them a letter saying, these are the things that I've been doing; my back is killing me now. Nothing happened until June 11<sup>th</sup> that my back was hurting until 2 a.m. It was really bad. That day I decided to phone in sick, because my back is really killing me. Then I decided to see my doctor the next day and he told me, you should have come here after the injury, because you would lose hours. My doctor said, okay, you have to be on modified. By the time I became modified for a month to let my back get some rest, that's the time they realized that she really needs help on her shift. Now instead of doing it one person, it became a two person. But still, those loads were still on you. Unfortunately, I work four days on and two days off. Those two days off I have a coworker who covers for my shift, and she has to quit for just those two days she works for me. She's quitting; her last day will be tomorrow. I told her, I don't know if it's okay to tell her that I'm sorry, because you're covering the chairman's shift. So they wouldn't listen to you. Because she quit already.

Q: Did she find the work too heavy?

KC: She found the work too heavy, because every night she's putting stuff on her back. The husband has to do some massage every night. So she said, okay, way too much. So I said, okay see, she quit already, and now you think that my shift is still okay compared to other shifts. She's quitting. So I find it harder now for them to listen for what I'm complaining about. That's what I've noticed, the changes like before. Maybe it's different if you are not the chairman; maybe it's going to be more like no barrier. You would see everything is okay. But how come my shift isn't changing? I've been complaining, but no one listens. But with the WCB, when I gave them the paper, yeah, okay, then they would realize. Okay, the shift is heavy; we've got to get help. It's hard for me now. But I'm staying - you don't just quit; that's what I realize. You have to stand up,

you have to know your rights, educate yourself, share the information to your coworkers so now they will be more encouraged. What's happening right now is they are more into like, okay, I want to learn. I've noticed with my coworkers, they don't get involved until they get into trouble. They wouldn't ask Guy's phone number until they need Guy. We gave them all the calling cards and everything, but it was just, okay, now we have a union. I kept telling them, yeah, you have a union. The name is AUPE, but we are the union. We are the union. So, if we don't fight for our rights, don't blame the union. Don't ask, where is the union? You are the union; we are the union. So now you know there is a union if you get into trouble. So there's still a struggle for information. They are aware that we have a union, but they don't know how the union works. There's still encouragement: okay, classes are coming; you have to involve; check the website. There is learning; free lunch is there; mileage is there. Hopefully, after this, after what's been going on – because I got coworkers who got suspended now for coming in for complaints and stuff – so maybe now they'll be more involved. I said, you were involved in signing, but still you see what's going on, you have to tell the union. You have to tell that to them, not me. You talk to them, reach out, and then you will see how the union works, not the people behind the union. They're going to be helping you, but you have to help yourself first. You have to stand up for your rights and get yourself educated.

Q: It seems to be working, because a lot of your coworkers have signed up for courses.

KC: Yes, they're now into it. So hopefully more and more will get involved. Not just the officers, not just those people who get into trouble, but hopefully more.

Q: With your days off always changing with the six day rotation, what impact does that have on childcare and your lifestyle?

KC: With Rosedale, our previous employer, my shift would be from Sunday until Thursday, five days, and my off is Friday and Saturday. If you have one of the pioneer shifts, your off is fixed, Friday and Saturday. Those people who covers for those days off would also have their fixed day off, but it's on the weekend. We never had problems with the off before, because it's fixed. So there is no adjustment if you have another job. But since the changes came in, I can work from



Monday to Thursday and my off is a Friday and Saturday, and next week my off is not the same. They said that's the only option they can have to accommodate all the staff from Rosedale going to Chartwell, and it's based on the funds. Some of them got three days on and three days off. Some of them only have four hours, from 7:30 to 11:30. So it's a really big change for everyone who lost a lot of income just because of those changes.

Q: They probably said it was good for everybody, because they kept them all on staff.

KC: They kept everybody on board, yes. They kept everyone on board, but since seniority applies, they have to. . . Before we don't have float shifts with Rosedale. It's all eight-hour shift in the morning. They have come up to four or six floats, but you only work four hours; from eight you would work four.

Q: And they control the hours and location of your shifts.

KC: Yes, they have the power. They offered us a line; but you don't know. You just know what side of the building you're going to be into; but you don't know. For me I think I applied for line 55 on an evening shift, four days on and two days off, without knowing what floor are you going. They said, you can either switch on a day-to-day basis; depends on the needs.

Q: How did it affect your home life?

KC: Now it's hard. I used to have a Friday and a Saturday. But I'm picking up shifts on a Friday. But I still have a Saturday to spend time with my husband and my kid. But the Saturday only happens every six weeks or every five weeks of rotation, where we all get to be together. Before, we can apply for a leave of absence for time without pay. So we can spend more time on the weekends, go for long drive, go for camping, fishing, and all that stuff. Yes you can, but now no. There is no leave of absence; there is only vacation. You have to use all your accrued vacations, no leave of absence. And they're not letting us go home to the Philippines for a vacation, not more than two weeks. That's a huge impact for all of us. We are not just workers from Philippines – we have Jamaicans, we have brothers and sisters from Jamaica, from

Ethiopia, from India, from different countries that has to put up with the rules now that there's only two weeks; that's it. I tried to talk to them before. I said, going home to my province will take me two days. Going back is another two days. If I'm going home only for two weeks, then I can only spend time with my family for ten days that I haven't seen for six years. I was planning to go home for July. But they said, no, you're only allowed for two weeks.

Q: Even though you have more accrued vacation?

KC: Even though you have more accrued. But before the union, it's okay. They said, how many accrued vacations you have? Because I was the one who spoke to one of the boss. She said, okay, how many hours have you got? I said, this one and this one. She said, oh yeah, you can go home for three weeks, but that's the maximum. After the union, it's two weeks, and we have to use all our accrued vacations within the year. We said, really, you're not going to let us go home? Then some of the changes were made. The memos come from the management and then they said, okay, no more than two weeks. But my coworker, she's a Muslim, she came up to the HR from B.C. She was able to talk to her. So she was approved of three weeks. But still it's a struggle. Some of them were approved for three weeks; some of them were not. Some of my coworkers were still not approved. So I advised them okay talk to ?. He will help you to get approved.

Q: What was the result of AUPE's complaint?

KC: They also provided us with a memo that you are allowed to phone in sick six hours before your shift. It was a memo for everyone for calling in sick. When AUPE finds out, they had to ask the employer, really, six hours before? So then they said, okay, let's have a meeting for all the staff. They said, those are not an order. It's a favour asking the staff to consider calling in sick six hours prior to your shift. The law requires only three. They said, no, we're asking you guys a favour. Now what's happening with us, I forgot to mention agency. There is an agency coming in to cover shifts. What I notice is if you are a worker, you are deprived of these hours. Why would you pick up shifts? Why would you help out? Unlike before, we don't have issue of covering shifts; no problem with that. Most of our coworkers are willing to, but now there is a change.

You want to cut back my money? Okay, I'm going to go apply for a part time. So why would I help out just for the shift? Now no one wants to pick up some of the shifts; coworkers are picky. They're not going to be picking up shifts – that's not my shift, because I don't have any orientation on the other shift. I don't want to make mistake. I don't want the resident to get upset with me. I don't want to miss my education. I don't want to get into trouble. So they decided to hire an agency. They have Brillo coming in to cover for some shifts, which is not doing well for residents. Residents have been complaining. Why don't just give an overtime pay for the staff for another four hours? They said you can only work until 12. So you guys will only pay four hours for overtime; but you don't want to. But you keep welcoming agencies that lots of missed medication, lots of missed care rendered to the residents. That's the struggle right now for my workplace.

Q: How much training are employees given regarding administering medications?

KC: Nursing background is different from healthcare aide, like job description. When you go to a client's room you're going to check the box where the pills are. It goes in a strip, and there's a time there for you to give the medication. What happened with us foreign workers before is the staff who used to do that shift will give you at least two to three days of orientation to make you aware of the routine that, okay, you're going to be doing this. You are not here as a nurse to discuss what kind of medication it is you are giving to the residents. You just need to check the time and the date for you to give the medication to the residents. They have this box like Warfarin and there's another box that says cytotoxic, and this one are the regular pills. You just go there and open the box and give it. You have lots on your plate with the a.m. care – getting them up from the bed, portering down. And you're not dealing with just six people, sometimes it's really an issue and you have to rush things. You just trip all of them and open it and you have no idea, okay this is cytotoxic, this is Warfarin, this is this one, this medication has to be for this. You are not that educated enough that this medication is to be given under the tongue. There are specifications that this one should go with the meal. Right now more training has been made for the staff. Before, the previous employer really saved a lot of money from hiring foreign workers. I think we are about 60 to 80 staff from Philippines from housekeeping on \$11. You're saving money for a healthcare aide position; so same orientation goes to us. It's like learning is a

day-to-day basis. You would encounter this resident; you would encounter this behaviour. But since you're a foreign worker, it's like what we always say – just suck it up. That's the job required for you right now, over and beyond the contract.

Q: How did you learn about the risks of handling cytotoxic medications?

KC: During the time that they said, oh okay, don't you know that this shouldn't be given without gloves? You have to wear gloves. Now they've implemented that it should be just the LPNs who should be giving this kind of medications. Over the years, changes have been made. But for foreign workers, you have a tendency to be abused.

Q: Could you describe the OH&S drive?

KC: We started the drive for OH&S representative, because we found out that appointed positions weren't the ones supposed to be. Working as a joint committee has to be elected positions, and then these elected officers will have to work with the management. It's going to be a chair from the worker, a chair from the management. We decided for our drive we'd go to different sites, three sites. First we went to Griesbach and next we went to Heritage Valley to talk to our coworkers that somebody has to run for these elected positions to help out for the workers – what are the rights of the workers, what you should and shouldn't be doing, what is expected from you, and this and that. We didn't have issue with Griesbach; it went well. But when we went to Heritage Valley, which was the fun part, the managers came in to us saying, this is our property; you shouldn't be in here. Marion was saying, we're just here on the side street talking to them. Then they were like, no, this property is our property from this fence up to that side of the building. So we had fun that day, because we were sent out from that facility. Either one would be on the other side of the condo, and one would be on the street. The fun part is the director of care from that facility. I worked with her as an LPN in Griesbach. I texted her and said, I'm here close to Tim Horton's; where are you? She said, okay, I'm coming. She went inside my car, so we had a chat. She was like, Katie, what you guys are doing here? Romana, we were only here for election. Yeah, but you're not employed here. Yeah, but the union is here for us to encourage other workers to have this joint committee. Well, they said it's

their property. So we're not allowed in there; so we were here outside. You wait and see, we're going to be on the street and then AUPE is coming and they're going to put the big tents and big flags. It's actually like a scene, because everyone will be passing by and saying, oh, something's going on. There's a union in there. So now everyone is aware that there's a union. Some of the residents were curious already about where the tents are. I said, if you just let us be on that side of the building, even close to the garbage bin. But they said no. We're not allowed to be inside of the building; we're not allowed to be in the property of the building – you have to be on the street.

Q: People may have thought you were on strike.

KC: Yeah, on strike. No, we said, it's just a committee, we're just going to encourage. She said she filed for her resignation also; she already filed for resignation.

Q: And you were at a third location too?

KC: Yeah, we went to the third location, which is in Wildrose. We were across the building, so we didn't have that issue, like for them sending us away. It went well that day, compared to the one that we had experienced in Heritage Valley.

Q: Could you talk about the chapter meeting where you were voting on the representatives?

KC: That meeting was held for us too, because we went for the OH&S committee drive for three sites. So we had our first chapter meeting to have an election for OH&S committee. Lots of our coworkers, especially in Griesbach, were willing to be elected for that position. It went well. So their next plan is to enrol for courses, especially the OH&S so they would learn a lot and share it to the coworkers. Hopefully the employer would acknowledge those elected positions for the next months for the meetings.

Q: To avoid getting another OH&S officer back again.

KC: Yes, we're not having another officer saying, where are the minutes of the meeting and how come these ones are the ones in here? There is elected officers already from the union, hopefully.

Q: Can you talk a bit about your chapter and the people who are in it?

KC: In Chapter 54 the majority are Filipinos. We have a few Jamaicans, Ethiopians, Somalians, Indians, Korean. But what's good about working with different nationalities, even though we know that we are the majority, we didn't take advantage of it. Having us a potluck before with our previous employer makes us more considerate. When we have a birthday, we tend to have potlucks, party, Facebook, and everything for Rosedale. Chartwell came in and said, no, you're not allowed to take photos inside the building in the property or as long as it's in the property; not allowing you to post it on social media. So we were like, okay. So now there's no more potlucks, not that much compared to before. But we try to consider each nationality the food, especially our brothers and sisters from Somalia. If you want them to eat your food, you have to consider them, even Indians, not to put pork on your noodles. So we adjusted well; we worked well. We consider each other friends, because we've been working with them for a long time. So the support was there for the union drive, for the election; even for OH&S they're there to support.

Q: When you strive for good working conditions, that also affects the wellbeing of the residents.

KC: Working as a healthcare aide, I think you first have to establish a trust between you and the residents. These residents are still cognitive. They would still know what's been going on, and they would get used to you on how you do things for them. If a different caregiver would come into the room and would say, hi, my name is Katie, I'm going to give you your pills, I'm going to help you. But the procedure you don't know. The resident doesn't want you to talk too much or this resident doesn't want you to talk too loud. The resident doesn't want you to give her water; she wants you to give some juice or put it in the yogurt. So these are the preferences that the residents has been used to for a constant caregiver. They know already, especially if you try to

switch them, some of the residents would then refuse shower. That's very hard, because you only get shower once a week; some of them are getting twice. So if I'm the resident, I don't like you because you are new and I don't trust you. So I'm not going to let you touch me. There is anxious for the residents; there is fear. For constant caregivers, there is trust that, okay, this staff knows what she's doing; so it's okay. There shouldn't be any, like I would tell my son or I would tell my daughter that there is a new girl, she doesn't know what she's doing. That's what our fight for telling them that. It's easy to do healthcare aide job because it's already in the paper. But you having a professional relationship which is trust, it's hard. You have to earn that trust to the resident.

Q: Is there anything else you'd like to talk about?

KC: I think I talked too much already.

[ END ]