

Health System Transformation questions and answers

Key Questions:

1. **What does the move to a health authority mean for my job with Yukon government?**

- In advance of transferring programs to the health authority, employees of the Department of Health and Social Services and the Yukon Hospital Corporation will be given an offer of transfer.
- If they accept that offer, then they would transfer to the health authority.
- We will ensure that all employees are informed about the transfer to Shāw Kwä'ą, including being informed about their pensions and what pensions under Shāw Kwä'ą may look like.

2. **What does it mean for my pension and benefits in the future?**

- The Government of Yukon and the Yukon Hospital Corporation are exploring potential pension options for Shāw Kwä'ą so that pensions are equitable for staff who transition to the health authority, attractive to workers, supported by unions, and fiscally sustainable. This includes the plans that employees currently participate in.
- The intention of a pension plan for Shāw Kwä'ą employees is to have, at a minimum, a similar level of pension benefits and stability.
- We will consult with unions and will continue to work with the Yukon Hospital Corporation to consult and engage with its unions and communicate with employees when we know more.

3. **What happens when the current collective agreement ends?**

- Successorship provisions under the Canada Labour Code apply regardless of where in the bargaining cycle the transfer takes place.

- Just as your terms and conditions remain in force past the expiry date on your collective agreement, until a new one is ratified, they will remain in force through the transfer even if your collective agreement expires before the transfer.
- After transfer, Shāw Kwā'ą will take over the place of the employer in the Collective Agreement, and Shāw Kwā'ą will bargain the next and subsequent agreements with your union.

Pension/Financial Security

4. Do we know what pensions will look like when a Health Authority comes along?

- Under the Canada Labour Code, successorship rights exist for all bargaining unit employees. This means that employees currently represented by a union will continue to be represented, and will bring their existing, negotiated collective agreements, and the corresponding pension benefits and comprehensive benefits package.
- The Yukon Hospital Corporation and the Government of Yukon are exploring potential pension options for Shāw Kwā'ą so that pensions are fiscally sustainable, attractive to workers, supported by unions, and equitable for staff who transition to the health authority. This includes the plans that employees currently participate in.
- The intention of a pension plan for Shāw Kwā'ą employees is to have at minimum a similar level of pension benefits and stability that exists today.
- We do know that pensions are a vital part of career decisions and retirement planning.

5. Will the pensions for unions and non-union employees be kept the same as they are now?

- This has not been determined. We are exploring pension options for Shāw Kwā'ą, including the plans that employees currently participate in.
- If there is a change to the pension plan employees participate in, the goal is to find an alternative with equal benefits, value, and stability.
- The affected unions will be consulted before any decisions are made about pension options.

6. How will it work for employees who have pensions with both YG and YHC? Will they be transferred to the health authority or left with YG and YHC?

- This has not been determined. If there are options for individual employees with pensions in both current plans, the options and impacts will be clearly explained before a decision is required.

7. Once the hospital transfers, does this mean YHC no longer exists? If so, what does this mean for retired YHC employees and their pensions? Who will be paying them?

- Once hospital services are transferred to the health authority, the corporation itself as an entity will cease to exist. The Hospital Act will be repealed and the board will dissolve.
- The pension obligation to retired members exists and will be fulfilled.
- Impact on retirees is one of the factors in our review of pension options.

HA Structure / Decision Making

8. Why was this not placed to a vote territory-wide before being forced into this Health Authority?

- What is proposed is an arm's length agency (non-governmental similar to YHC) to deliver health services. The health authority will operate separately from but in close partnership with the Department of Health and Social Services, which will set policy, fund health services and ensure overall health system performance.
- The proposed legislation defines roles and responsibilities for the health authority and government.
- The proposed Health Authority Act will be voted on in the Yukon Legislative Assembly. If passed, it will be the framework on which the new health authority will be built.
- The creation of a health authority is one of the priority recommendations from the Putting People First Report, which involved significant engagement and consultation with Yukoners.

9. Why are there no medical staff past or present, front-line staff, or a union member being allowed on this new health authority board?

- The bill outlines criteria for ineligibility to be a board member, this includes current staff and medical staff of the health authority. This is to ensure that there is no conflict of interest for members of the board in conducting their work as board members, including the responsibility for making the medical staff bylaws that apply to current medical staff and bylaws governing employment with the health authority. Current staff and medical staff are permitted (and anticipated) to participate on committees of the board to ensure these critical front-line perspectives are captured.
 - Former medical staff, and previous employees (after six months) would be eligible for appointment to the board as the conflict of interest noted above would no longer exist
- It's envisioned that the health authority board will reflect a range of competencies set out in an approved bylaw that are required to operate a complex organization like the health authority. The membership must also reflect the cultural, regional and gender diversity of the Yukon. Once the legislation is passed, a process for nominations will be determined
- Should Bill 38 be passed, the Department and the Health Transformation Advisory Committee will lead proposed engagement plans with health professionals and other stakeholders to inform policy that will shape implementation, including the development of regulations and other steps.
 - This will include how health professionals and their expertise are woven into the fabric of the management and decision-making processes within the health authority, through the development of the Medical Staff Bylaws.
- Engagement with health professionals will continue even after the health authority is operational, as programs and services will be continuously reviewed to ensure they meet the health and wellness needs of Yukoners.
- The department established Networks in 2023, networks represented specific areas of the workforce and provided an avenue for the workforce to participate in the health system transformation by providing input, voicing the thoughts of their teams, and acting as peer-to-peer change champions.

10. Is this one step closer to removing the Yukon's territory status and moving the Yukon towards a province?

- There is no doubt that the Yukon's health system faces the same challenges and pressures as other places in Canada – health needs are growing and more complex along with significant health Human Resource constraints.
- The Yukon is one of the last Canadian jurisdictions to move to a health authority structure.
- Establishing a health authority is not a move towards changing the Yukon's status of a Territory.

11. How does the health authority actually make healthcare more available to patients and ensure resources for our current and future population?

- The health authority is expected to break down health and social services silos for easier access to better serve Yukoners.
- Enable a comprehensive system-wide perspective allowing for better planning, greater efficiency and innovation in the delivery of healthcare services.

12. Is any of this threatened by a potential change in government?

- The answer to this is unknown at this time as we cannot speak to the positions of Yukon's Opposition parties.
- Putting People First is a comprehensive review of health and social services in the Yukon published in 2020 and authored by an Independent Expert Panel informed by engagement and consultation with Yukoners.
- The creation of a health authority is one of the priority recommendations from the Putting People First Report, which involved significant engagement and consultation with Yukoners.

13. Would there still be a hospital CEO position under a health authority, or would the hospital executive directors report to the CEO of the health authority board?

- The Health Authority will have its own Board of Governors and its own CEO.

- The executive structure of the health authority will be determined by the Board and CEO in the future.

14. How will the Health Transformation Advisory Committee ensure they are representing all stakeholders, such as healthcare providers and professionals, when developing the health authority?

- The intention of the committee was to initially develop the legislation and ensure that it was done in a collaborative way.
- Much of the future work is going to require a number of different working groups representing different interests as we go forward.
- The Health Transformation Advisory Committee will maintain strong relationships between all the parties involved. We recognize that a lot of the heavy lifting is going to have to be done through networking groups for some of the critical elements of system design.
- In March of 2023, the Transformation Networks began meeting. Each network is made up of 10-14 people that meet separately as a cohort. The networks are: Continuing Care, Social Services, Community Health, and CS / IQP / Comms / HR. These networks are supported by 2 co-chairs that meet monthly. The intent of these networks is to build relationships, update on priorities and listen to staff.

15. Is there a possibility of the unions coming under the authority umbrella and merging to become one large union under PSAC, or will the current two unions and HSS union stay as is?

- It's hard to predict what the future will hold but what we know for sure is that successor rights are applied and are required under the Canada Labour Code.
- The successorship provisions of the Canada Labour Code allow for review of bargaining unit structure after a transfer is complete. It is not yet known whether any affected Party will seek this review.
- The final bargaining structure of Shāw Kwä'ą will be the result of the successorship process, in consultation with the affected unions.

16. Will patients have one electronic health record?

- The intention is to leverage technology more generally to enhance and enable service and care. More specifically we are looking to improve access and information through a phased approach.
- MEDITECH Expanse is currently being used across the three hospitals, as well as read-only access from others.
- A broader digital health strategy is currently being worked on by Health and Social Services, Yukon Hospital Corporation and the Yukon Medical Association, with engagement from other stakeholders.

Positions / Employment

17. During the transformation, will there be position classification alignment? Currently, YG and YHC use different position classifications and salary bands -- will this be unified?

- YG and YHC have different positions, classifications and salary bands, however, both organizations use comparable point factor rating classification systems that evaluate similar factors and dimensions of all positions (e.g. knowledge and skills, mental demands, accountability and working conditions). We anticipate that this will make it easier for the classification system and salary bands to be aligned in the new Shāw Kwä'ą.
- We don't yet know what this will look like.

18. Are there new positions being created for the creation of the health authority, and if so, where will these positions be created and for what purpose?

- In 2024/25 there are 28.5 FTEs supporting health system transformation and implementation of the recommendations under Putting People First report including the creation of the health authority and the cultural safety and humility branch.
- These temporary positions are funded through the Territorial Health Investment Fund.
- The positions are working in functions such as legislation and policy, finance, and business transformation.

- It is anticipated that there will be opportunities within both YHC and HSS to support health system transformation.

19. Where is the protection for current staff financially and with current job positions?

- Employment terms and conditions, including salary, are governed by your collective agreement, which is renegotiated (or “bargained”) periodically with your union
- When unionized employees move to Shāw Kwä’ą they will bring their collective agreement with them. Shāw Kwä’ą will then bargain future agreements with your union.
- Inheriting the obligations under an existing collective agreement from a previous employer is known as “successorship” and it is governed by the Canada Labour Code.
- Your rights under your union contracts will remain – this means that the rights to job protection that you have now will continue.
- Pay rates are, and will continue to be, negotiated with your union.

20. How do you think this will retain current staff and recruit new staff?

- We believe that an integrated health system will better coordinate recruitment and retention efforts and encourage people to apply to health careers in the Yukon.
- Working together as a health authority, we can better connect the right people with the right job.
- A Health Authority system and structure is already familiar to most other health care workers in Canada, and we expect this familiarity to aid in recruitment

21. What is this about red circling some positions?

- Red circling is protection of current wage an employee’s job is classified at a lower rate than they are earning – it may happen if a job is classified down.
- We aren’t looking at “red circling” any positions currently, as those types of decisions would be made through the job classification process.

- Reclassification is governed by applicable authorities. Currently these are the collective agreements and the Management/Excluded Terms and Conditions of Employment for YHC, and the Public Service Act for YG.

22. Some staff currently work for both employers, how will this impact on their ability to continue this practice and maintain their level of income?

- Some health system employees work for both the Yukon Hospital Corporation and the Department of Health and Social Services in varying capacities.
 - We do not currently know how many employees would be affected.
 - We will work towards getting this information while complying with privacy rights of individuals.
 - Care must be taken to understand the impacts based on specific employee situations.
- Included as part of health system transformation is a goal of reducing health care burnout and promoting healthy work life balance.
- When employees are working for the same employer, such as the health authority, employees will be supported through coordinated scheduling.
- If additional hours are required, employees may be paid premium pay such as overtime, shift differentials, based on total hours worked for the health authority.
- With respect to hours of work and any cap on hours of work, this falls within the authority of the health authority board and is something that will be worked out through negotiations with the unions.
 - The ability to work for one employer in more than one role, in more than one capacity (e.g. indeterminate, casual, auxiliary), or in more than one bargaining unit depends on the employer's policies and its collective agreements
 - The Health Authority will create its own policies, and will not necessarily adopt those of either Yukon Government or Yukon Hospital Corporation
 - Before the Health Authority has established its own human resource policies, we cannot predict what options will be available to employees wishing to work in more than one role or more than one capacity
 - By default, hours with the same employer in excess of those established for the position will trigger overtime provisions.
 - This may result in a positive impact for employees working overtime to fill critical healthcare services

- However, it is not the intent to build a system that requires employees to work excessively.

23. What are the opportunities for frontline staff to be involved in designing the Health Authority care services?

- Work to design the new health system hasn't started yet but we envision engagement with frontline staff and partner organization to be the starting point for mapping the system.
- We are committed to keeping all staff informed as this work starts to progress, including opportunities to participate. We need your voice in this work.
- Should Bill 38 be passed, the Department and the Health Transformation Advisory Committee will lead proposed engagement plans with health professionals and other stakeholders to inform policy that will shape implementation, including the development of regulations and other steps.
 - This will include how health professionals and their expertise are woven into the fabric of the management and decision-making processes within the health authority, through the development of the Medical Staff Bylaws.
- Engagement with health professionals will continue even after the health authority is operational, as programs and services will be continuously reviewed to ensure they meet the health and wellness needs of Yukoners.
- The department established Networks in 2023, networks represented specific areas of the workforce and provided an avenue for the workforce to participate in the health system transformation by providing input, voicing the thoughts of their teams, and acting as peer-to-peer change champions.

24. Will there be any layoffs of any positions when we transition to the authority?

- The creation of a Health Authority is not a job or budget reduction exercise.
- There are staffing shortages in most areas of health care and retainment of current staff continues to be a high priority.

25. What does this mean for support staff? Will support staff continue as they do now, or will they join other support staff in providing maintenance, environmental, procurement efforts, etc., for all facilities across the Health Authority?

- The health care providers and staff currently working in the system are our greatest asset. Ensuring an effective transition of staff, including working closely with unions, will be one of the key activities during this interim period.

26. With the upcoming merge, when will LPNs be advanced to full scope in line with YG? Currently, YG has a larger expanded scope of practice, yet hospital LPNs are not permitted to work to full expanded scope, which doesn't help with the healthcare staffing crisis by not maximizing the use of hospital LPNs.

- Work will occur to assess alignment of job descriptions, clinical education and policies where appropriate as the transformation work proceeds.
- Nursing scopes of practice are determined by legislation, the regulators standards and the employer's job description. The job description scope cannot expand the scope beyond legislation or regulatory standards.
- Across the system the goal is to have all professionals working to their optimum scope of practice for their role.

27. Where will Public health, YCDC, CMOH land? Where will individual branches land

- It is unclear at this time where individual branch or offices will land at this time
- We will be reviewing the functions of the department and the health authority to determine where programs and positions will fit best. More information will be shared as decisions are made.

Misc

28. When will YG/HSS begin to be able to share resources and tools with YHC staff?



- Resources and tools are not yet developed. We are committed to keeping all staff informed as this work starts to progress, including opportunities to participate in the initial development. We need your voice in this work.
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