

Your Right to Pay Equity as a Registered Nurse

By Dana Slisarenko, R.N.

Nursing is a highly undervalued resource of the health care system. Regardless of whether you are working as a registered nurse in hospital, industry, public health, education, management, research or as a nurse practitioner, you have the right to pay equity as a woman working as a registered nurse.

The Pay Equity Act, 1987 in Ontario, is a one-time historical opportunity for women to correct the current wage gap between male and female work. The current wage gap in Ontario is 36%, which means that the average working woman earns \$.64 for every \$1.00 earned by the average working man. Pay Equity is more than just a dollar and cents issue. It's an issue of fairness. It involves comparing the value of jobs traditionally done by women with the value of jobs usually done by men on the basis of skill, effort, responsibility and working conditions and rendering pay adjustments to ensure that they are equally compensated. The law protects the nurse from being intimidated, coerced, penalized or discriminated against for exercising the right to pay equity. Employers can be prosecuted for taking action against nurses who question or appeal their pay equity plan.

To date thousands of registered nurses have declared their dissatisfaction with the implementation of Pay Equity, and have filed about a third of the 110 applications for review before the pay equity tribunal. Registered nurses have been compared to a variety of male-dominated positions. At Mississauga Hospital the nurses were deemed comparable to an assistant pastry chefs. At Sick Children's Hospital, Toronto, and the Cambridge Memorial Hospital, they were equated with biomedical technicians.

In some establishments, the pay equity postings are declaring no male comparator, as is the case at York Central Hospital. Depending on where you work, your pay equity plan may not yet be posted. The Act has specific guidelines, timetables and schedules for various sectors of the population. For example, private sector employers with 100-499 employees were to post plans by January 2, 1991, whereas those with 10-99 employees are not required to post plans until 1993. The Act applies to all public sector employers regardless of size and all private sector employers with 10 or more employees. Where there is a union, the pay equity plan for bargaining unit employees is to be

negotiated with that union.

The Ontario Nurses Association (ONA) represents 52,000 registered nurses and is presently faced with the onerous task of dealing with pay equity on a local level at each of its 350 bargaining units. Confusion evolves where pay equity issues are marred by labour disputes, and ONA to date has spent millions of dollars negotiating pay equity appeals for their nurses.

Nurses compared to police officers

Last year the in Haldimand-Norfolk, the public health nurses, represented by ONA, won the right to be compared to police officers when the Tribunal ruled in their favour. The basis of this appeal was that both the public health nurses and the police were employed by the municipality of Haldimand-Norfolk. The Act states that comparisons are to be made within the employer's establishment which in this case was disputed at great length before the decision became final. Another appeal presently before the tribunal involves Women's College Hospital Nurses, represented by ONA. They are attempting to prove that the job evaluation tool used at the hospital was male-gender biased. The Act states that the comparison system used must be gender-neutral. The job evaluation tool in question is the Stevenson, Kellogg, Ernst and Whinney System commonly known as the S.K.E.W. tool. The outcome of this tribunal could be very significant since many hospitals across Ontario used the S.K.E.W. tool. This tool is the one recommended by the Ontario Hospital Association (OHA). Most unionized facilities have not proceeded with the implementation of pay equity pending the results of this tribunal. To date, ONA's talks with the OHA to work out a province-wide approach to pay equity have not been successful.

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More than half of Ontario's registered nurses are not unionized. Nurses working in non-unionized settings are faced with the prospect of exercising their right to pay equity independently and are fearful of incurring exorbitant legal costs. The Nurses Coalition for Pay Equity (N-CoPE) was formed to help nurses anywhere in Ontario to pursue their right to Pay Equity. N-CoPE is presently seeking status as a non-profit corporation. This support group evolved when nurses realized that Pay Equity Plans were publicly undermining the value of nurses' work. In the process of compiling job fact sheets, nurses began articulating what nurses do. They began to look at their work from a different perspective and to consider aspects of their job that had never been written in job description. This process reinforced the value of their work and their reaction, when compared to housekeepers, maintenance workers, technicians and assistant pastry chefs, was one of shock and disbelief. Unfair Pay Equity plans were failing to capture the responsibility, complexity and diversity of nurses' work.

If registered nurses continue to feel underpaid, unappreciated, unrecognized and overburdened as a result of unfair Pay Equity Plans, this will have dire consequences for the profession of nursing. In 1990, the then Ontario Liberal Government recognized that Ontario was in demand for clinical nurses. They developed the Ontario Nursing Innovation Fund in an attempt to help recruit, retrain and retain more Ontario Nurses. If the present demand for nurses in Ontario is already strained, the rising discontent with inept Pay Equity Plans will definitely augment the problem and the future quality of health care across the province will be in jeopardy.

Nurses are the life-line of any health care system. We are designated an essential service and it is illegal for us to strike. If we do nothing while unfair pay equity plans are adopted across the province, we will have no other opportunity to have our worth recognized and valued appropriately.

N-CoPE aims to educate all registered nurses, both unionized and non-unionized about their right to Pay Equity. Many nurses are not aware that employers were given direction to set aside a specific percentage of their global budget in preparation for financial repercussions resulting from compensation secondary to the implementation of pay equity plans. Nurses are so accustomed to hearing of the shortage of money in the health care system, they now accept this without question. However, as front-line caregivers, nurses are aware of where the health care dollar is wasted and how it could be more wisely spent. It is the opinion of some health care experts that nursing is the most cost efficient resource hospitals have, other experts would

suggest nurses have subsidized the health care system long enough.

The future of health care in Canada depends on building a profession which is attractive to young women and men. In exercising your right to Pay Equity as a registered nurse, you are investing in the future of health care.

The Pay Equity Act, 1987, has acknowledged flaws. When this legislation was adopted, the Ontario Legislature acknowledged the injustice of the fact that women working in predominantly female sectors of the economy (ie. nurses, child care workers) who because their workplace lacks appropriate male comparators would be unable to benefit under the terms of the act as passed. During the Fall, 1990 Ontario elections, the NDP party promised they would amend the Pay Equity Act so that more women would be eligible to benefit. Now that the NDP government is in power, nurses should continue to lobby the government to amend the Act to include the proportional and the proxy comparison method. Regardless of whether nurses work in a unionized or non-unionized setting, they are still subject to the limitations of the act and unless this legislation is amended, their right to Pay Equity may be denied.

Bias-free evaluation tool needed

N-CoPE has been lobbying and will continue to lobby the government to amend the Pay Equity Act to make it more all inclusive in order that more women, especially nurses, will be eligible to benefit. The Registered Nurses Association of Ontario (R.N.A.O.) has also been lobbying for an amendment of the Act, and is advocating provision of funds for research on bias-free evaluation tools and funds for non-union nurses seeking to appeal their pay equity postings. In December, 1990 the government announced its intention to amend the Pay Equity Act to include more women, especially those with no male comparator, but no direct reference was made to nurses. If indeed the government does amend the Pay Equity Act, this does not guarantee that a nurse will achieve Pay Equity but it will expand her opportunity to exercise her right.

N-CoPE has been established to help Registered Nurses pursue their right to Pay Equity. An unfair pay equity settlement will have an impact on health care. If the significance of the work that nurses do continues to be undervalued, the present problems of retraining, retaining and recruiting nurses will escalate.

Nurses are an indispensable resource of the health care system. Whether you are involved in nursing practice, teaching, management or research, you have the right to Pay Equity as a Registered Nurse and only you can exercise that right! ■