

Spectrum Society for Community Living
Policies and Procedures Meeting
November 27, 2014

Present: Dea Canoniga, Helen LI, Denis Sushkin, Ed Fontaine, Shauna Carson, Susan Stanfield, Ernie Baatz

1. Introductions: Ernie reviewed the history of the Policy and Procedures committee and everyone introduced themselves.

2. Agenda was developed:

1. Policy Amendments
2. Wage Increases
3. Benefits Changes
4. Process for Consultation and Review
5. Mileage

3. Susan reviewed the circulated list of proposed policy changes with the representatives. She also showed the new draft policies so people could see how the new policies will read. The changes arise for a number of reasons – because government changes their policies, because CARF changes their standards, because WorkSafe BC creates new regulations. We reviewed the policies for clarity and comprehensiveness.

The list of changes is attached to the end of these minutes.

The Personal Assistance Guidelines contain some new language and expectations that managers should be aware of. A review of this new policy will be included at the next Managers' Meeting.

4. Our group health and dental benefits come up for renewal on January 1, 2015. Our benefits are delivered through the Community Services Benefits Trust www.csbt.ca - and we just received the renewal rates. There are small increases to Life Insurance and Long Term Disability Rates. There are also increases to Medical Services Plan, Municipal Pension Plan and Workers Compensation. Finally, there is a wage increase of 1% planned for April 1, 2015. Ernie provided a handout that summarizes wage increases of 11.5% over the next 4 years – to March 2019. It is attached to the end of these minutes. Spectrum is committed to keeping our wages rates competitive with community support worker rates at the other local agencies, and is working with the BC CEO Network to confirm funding from government for the wage increases and benefit increases. We would also like to explore some new methods of delivering benefits that could save some money on a monthly basis.

Ernie reviewed two alternatives for reduced cost medication benefits. A major portion of the prescription cost is the pharmacy service charge, and CSBT has developed a centralized pharmacy that has a much lower pharmacy charge. Your doctor would send the prescription to the central pharmacy and the pharmacy would courier the medications to your home or work. This process works best with

maintenance medications, those medications that you take on a regular basis for more than three months. (eg. Diabetes, blood pressure, cholesterol). Attached at the end of the minutes are summaries to two alternatives for Prescription Delivery, one called Managed RX and called PostScripts RX.

Policy representatives had a few questions about prescription delivery:

- What if your apartment has no intercom?
- if no one is home, Will they be left in a mailbox?
- Can they be delivered to a spouse's work?
- Can they be delivered to a Neighbour?
- If medications disappear / get stolen?

Ernie will get answers to these questions.

What about people living in apartments without intercoms – Alliance Pharmacy will contact the employee to confirm where they would like the parcel delivered each time they have a new prescription/request a refill. They can choose to have this delivered to work, etc.

- What if no one is home? Will they be left in a mailbox? – FedEx will not leave medications in a mailbox; they will attempt delivery again and then take to their retail centre for pickup
- Can they be delivered to spouse's work? – Yes, provided the spouse or an authorized person (i.e. a reception desk) can sign for the package.
- Can they be delivered to a neighbour? – As above, if the neighbor is aware of the delivery and authorized to sign for it, yes.
- If medications disappear / get stolen? – They have not had such an instance, since the packages are delivered to an individual/signed for and never left on doorsteps, mailboxes, etc.

6. Mileage Rates: An employee asked about mileage rates. In the same CSSEA handout on wages, the collective agreement mileage rate increases are outlined. Currently, Spectrum pays 0.50/km for approved use of employees' cars.

7. Collective Agreement Rates are currently at 0.45 and increase to 0.48 per kilometer in 2018.

8. Consultation and Review of policy changes and wage / benefits proposals: Representatives discussed ways to increase participation and awareness of the policy changes.

- All Staff email may not be getting to all staff:
 - o People are not using spectrum email – changing as new staff are enrolled
 - o All Staff may not be going to all addresses – Ernie will check with tech support.
- Perception that staff are only interested if wages are being discussed.

- Need more paper feedback options, more face-to-face options.

If we are going to get more effective feedback on the proposed prescription delivery change, we will create a paper memo to circulate and attend team meetings to ensure more people hear about the choices, before we make a change.

Next Policy and Procedures Meeting – approximately six months – May / June 2015

Summary of Proposed Policy Changes

October 2014

00.1 Privacy Policy (Persons Served)

- added “and secure online site (Sharevision)” to personal records we maintain;
- added clause stating that we will safeguard personal information if the person leaves Spectrum’s services or transfers to another service provider, according to the guidelines set by the funder

1 Service Scope and Access

- expanded shared living description to reflect that some individuals do not share common space, meals etc. with the caregiver but have their own suite in the home;
- replaced “intake” with “service start-up” and added Service Plan and assigning of a supervisor to the steps;
- removed “Reasonable Accommodation” clause – moved to Accessibility Policy

2 Accessibility

- reworded to reflect new Accessibility Plan (replacing old Accessibility Checklist);
- added “Reasonable Accommodation” clause from Policy 1

8 Person Centred Planning

- reworded to reflect new Service Plan and more flexibility around goal setting and reporting

9.1 Personal Assistance

- new policy based on Ministry of Health Personal Assistance Guidelines

13 Petty Cash

- added clause: “Expenses incurred by employees must be approved by the supervisor and submitted to Accounting for reimbursement by the 15th day of the following month”;
- added “review and approve” to clause regarding supervisor’s approval of expenses [supervisor to review and approve expenses, not just sign off]

15 Drugs and Alcohol

- added clauses on drugs and alcohol from “Employee Conduct” policy

19 Complaints

- added clause about complaints made against a supervisor or co-director

20 Technology Use

- added “and to assist persons served to access information and technology” to the list of reasons Spectrum promotes the use of technology;
- added “and enhancing the quality of life of persons served” to the purpose of these activities;
- added to the list of things users will not transmit, retrieve or store [using Spectrum’s technology]: information that is in violation of any copyright laws, including downloading of copyrighted music, movies and other content

24 First Aid

- removed steps for completing first aid as these are covered in the “Requirements for Employment” policy

- 25 Critical Incident Reporting
- removed clause about reporting for licensed homes as our one licensed home [Taunton] is now closed;
- added reference to new Sharevision CIR list;
- added wording around debriefing critical incidents and initiating internal investigation following the Investigation procedure if applicable
- 27 Behaviour Support and Safety Planning
- replaced “risk assessment” with “assessment of individual vulnerabilities and safeguards”;
- added wording about reviewing behaviour support plans annually;
- added clause: “Positive interventions will be implemented prior to the use of restrictive procedures and will continue to be used in conjunction with any restrictive procedures”
- 34 Emergency Preparedness
- added reference to new Sharevision Emergency Drills Record
- 35 Missing Person
- replaced “regular permanent and relief staff” with “supervisor” as the first person to call
- 36 Supporting Individuals who are Ill
- added wording around people who direct their own health care being offered assistance to make medical appointments rather than staff assuming responsibility for this;
- added reference to Policy #37 (when to seek emergency treatment);
- expanded “allergic reaction” to distinguish between minor and severe reactions
- 38 Fire
- changed frequency of fire drills from monthly to twice per year on each shift (day / evening / overnight)

Personnel Policies

Code of Conduct

- changed wording of clauses around release of personal information, from requiring supervisor’s approval to requiring approval of the person, and added clause: “This includes posting of personal information or photographs on social media (facebook, twitter, youtube etc)”;
- added “and external communications, including social media” to clause on marketing activities respecting the dignity of persons served and the integrity of Spectrum;
- embedded “Employee Conduct” policy into the Code of Conduct;
- renamed “Employee Harassment” to “Bullying and Harassment” and reworked this section to reflect new WorkSafe guidelines;
- embedded “Damage to Personal Property” from Employee Conduct policy;
- removed “Drugs and Alcohol” section [covered in Policy #15 – Drugs and Alcohol];
- embedded “Dress and Decorum” from Employee Conduct policy

P2 Management Responsibility

- reworded clause describing director and associate director roles to reflect three associate directors [currently just refers to one]

P2.1 Communications

- added social media to the list of external communications the directors have designated responsibility for (Spectrum facebook page, twitter, youtube, blogs, webinars and online discussion forums)

P3 Classes of Employees

- added to description of relief employees: "Relief employees provide their availability to HR and are responsible for keeping their availability up to date. Unless otherwise approved by HR, relief employees must work a minimum of one shift per month to remain active on the relief list."

P4 Requirements for Employment

- removed clause on TB testing as our one licensed home has now closed;
- added clause on providing proof of identity to HR upon hiring;
- revised Criminal Record Search section to reflect new provincial process for obtaining a criminal records search [we are no longer using Back Check];
- revised name of emergency first aid course and revised wording around reimbursing Spectrum for the cost of cancellations to include the new \$20 service fee charged by St. John Ambulance

P8 Payment of Wages

- new section on Salary for Administrative Positions

P9 Health and Welfare Benefits

- updated MPP rates;
- retirees "may" have health benefits provided by MPP [not mandatory]

P10 Employee Safety

- removed reference to Employee Safety report on Sharevision [discontinued this report];
- added reference to Bullying and Harassment section in Code of Conduct

P11 Hours of Work

- short term leave clause – removed wording around all available shifts being filled from the relief availability schedule [shifts are often filled by permanent staff, not just relief]

P12 Statutory Holidays

- added Family Day

P18 Sick Leave

- added wording on providing a doctor's note upon return from sick leave or long term disability
- added clause on benefits coverage for employees on sick leave or long term disability

P19 Special and Other Leave

- removed requirement that co-directors review and approve requests

P25 Travelling Expenses

- removed Employer Bus Pass clause [program discontinued by Translink]

P29 Progressive Discipline

- qualifying statement added as preface to list of infractions

P31 Employee Conduct

- discontinue this policy [moved to Code of Conduct]

P33 Damage to Personal Property
- discontinue this policy [moved to Code of Conduct]

HIGHLIGHTS OF THE TENTATIVE 2014-2019 COLLECTIVE AGREEMENTS FOR ABORIGINAL SERVICES, COMMUNITY LIVING SERVICES and GENERAL SERVICES

TERM

Five-year agreements effective April 1, 2014 to March 31, 2019.

WAGE INCREASES

The general wage increases and comparability adjustments in these agreements significantly close the wage gap between workers in this sector and those with equivalent positions in the community health sector.

April 1, 2015	1.0% General Wage Increase (GWI)
April 1, 2016	2.5% comparability increase (for Community Health comparators)* 0.5% GWI directed to address anomalies **
Feb. 1, 2017	1.0% GWI
April 1, 2017	2.5% comparability increase (for Community Health comparators)* 0.5% GWI directed to address anomalies **
Feb. 1, 2018	1.0% GWI
April 1, 2018	2.5% comparability increase (for Community Health comparators)* 0.5% GWI directed to address anomalies **
Feb. 1, 2019	1.0% GWI

*Comparability adjustment applies to approximately 77% of the classifications.

**An increase equivalent to a 0.5% GWI to address anomalies for the 20% of the classifications not captured by the comparability adjustment.

Note: the remaining 3% are delegated employees in Aboriginal Services who will receive wage increases per the PSA Agreement (Master).

ECONOMIC STABILITY DIVIDEND

A conditional wage increase of 50% of the difference between the actual real GDP and the forecasted real GDP. The dividend will be applied to the first pay period after February 1, 2016, 2017, 2018 and 2019.

BENEFITS

Vision Care

- Effective April 1, 2017, a maximum of \$100 every 24 months for eye exams.
- Effective April 1, 2017, increase to a maximum of 80% of \$350 per person per 24 month period to coverage for prescription eyeglasses or equivalent corrective laser surgery to the maximum allowed.

Oral Contraceptives

- Effective April 1, 2016, oral contraceptives will be added to the prescription drug coverage list.

Joint Benefits Working Group

- Group comprised of CSSEA, CSSBA and government representatives to explore strategies to better manage the rising costs of health and welfare benefits. By November 30, 2018, the group will calculate a “fixed percentage” of the cost of benefits to straight-time payroll to establish a base line for 2019 bargaining.

TRANSPORTATION AND MEAL ALLOWANCES INCREASES

Transportation Allowance

	April 1, 2013	April 1, 2016	April 1, 2017	April 1, 2018
For CLS/GS	45¢	46¢	47¢	48¢
For AS	49¢	50¢	51¢	52¢

Meal Allowance

	April 1, 2013	April 1, 2015	April 1, 2016	April 1, 2017	April 1, 2018
Breakfast	\$10.00	\$10.10	\$10.25	\$10.41	\$10.56
Lunch	\$12.25	\$12.37	\$12.56	\$12.75	\$12.94
Dinner	\$21.25	\$21.46	\$21.78	\$22.11	\$22.44

LANGUAGE IMPROVEMENTS

Article 2 Definitions - Wage related premiums no longer pyramid.

Article 24 Promotions and Staff Changes - Enhanced management flexibility on hiring, promotions and lateral transfers.

Article 29 Harassment - Language improvements introducing the element of “reasonableness” as well as improved process for handling complaints directed at executive directors.

FULLY FUNDED AGREEMENT

These agreements were negotiated under the new Economic Stability Mandate and unlike the previous mandate are fully funded by government.

The government has provided CSSEA with a letter outlining the agreements are fully funded (wage increases, benefit improvements and mileage and reimbursements increases) *per s. 21 of the Financial Administration Act*.

About Community Services Benefits Trust



The CSBT is a non-profit trust that was formed in January 2002 by a group of non-for-profit community service organizations. Working together, these organizations created the Trust to provide fully insured, locally accessible benefits to social service organizations. Administered by GroupHealth Benefit Solutions, the CSBT plan is delivered through a national network of Advisor Partners. The trust has grown to over 360 agencies across Canada representing over 16,000 employees.

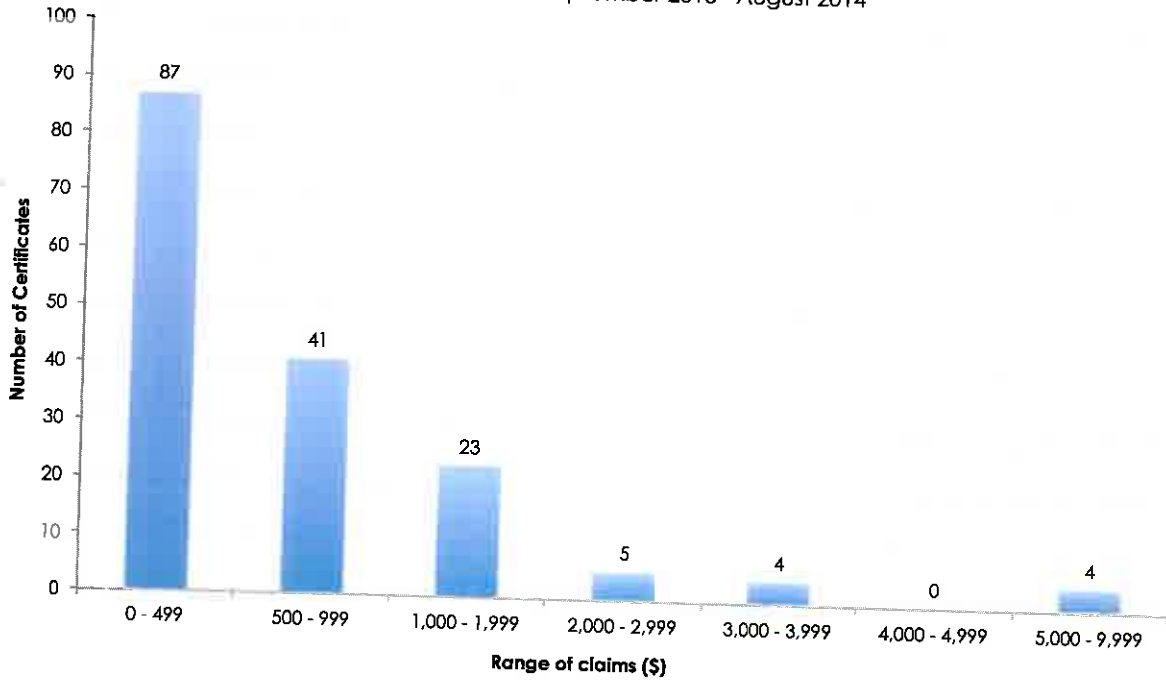
Advantages of CSBT Plan:

- Provide sustainable employee benefits
- A non-profit trust with leadership from sector experts
- Best-in-class benefit plans designed to meet specific sector needs
- Group buying power: representing agencies across Canada
- WEBS online administration is an easy to use administration system for managing benefits and claims
- Cost containment strategies which maximize benefit dollars

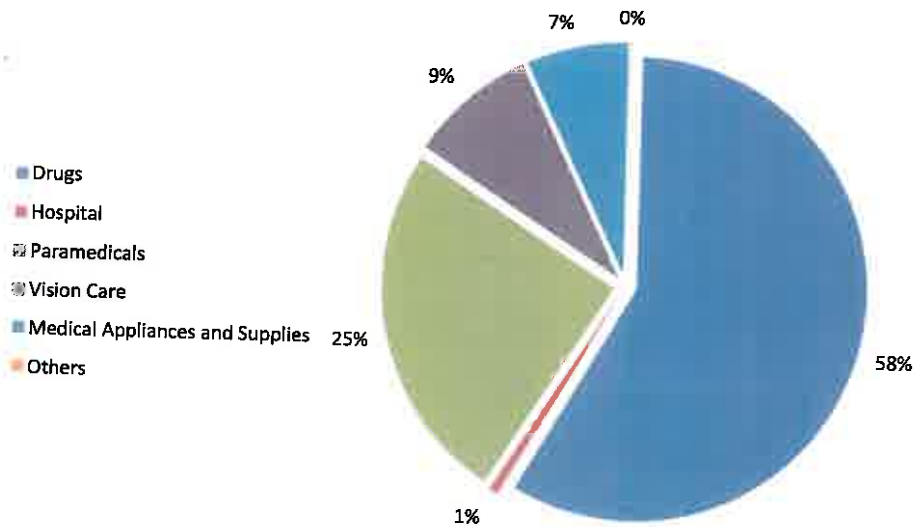
Healthcare Claims

Below chart shows the comparison of the number of certificates versus the amount of paid claims for the most recent claims period.

Experience Period: September 2013 - August 2014



The chart below outlines the distribution of health claims over the past experience period by type of service.



Drug Management Options

Below illustrates different drug management options available to Spectrum Society and the price impact of each.

1. Managed Rx with current drug plan unchanged (90% co-insurance)

Healthcare rates will reduce by 8.13% with this option. Thus bringing a bottom-line renewal increase of 1.05% to a decrease of 2.82% to the bottom-line.

2. Managed Rx with drug co-insurance increased to 100%

This plan option provides greater incentive for all employees to participate. Healthcare rates will increase by 0.39% thus bringing a bottom-line renewal increase of 1.05% to an increase of 1.24%.

3. PostScripts Rx

Healthcare rates will reduce by 5.19% with this option. Thus bringing a bottom-line renewal increase of 1.05% to a decrease of 1.42%. Additionally, if this program is implemented at this upcoming renewal, Spectrum will be credited 5% for total drug spend in the month following the next renewal.

Total drug spend will likely decrease compare to this year if the program is implemented, however, we roughly estimated this year's drug claims to be approximately \$83,182. A 5% credit based on this estimated figure is \$4,159.

Managed Rx

Spectrum Society's drug plan currently covers the lowest cost generic equivalent drug with a co-insurance of 90%. Brand name drugs are covered only if the physician specifies no substitution.

As drug costs and drug dispensing fees vary at different pharmacies throughout the lower mainland, employees maybe paying higher mark-ups and dispensing fees without doing their proper research before filling up their prescriptions.

GroupHealth has partnered with Alliance Pharmacy to offer one central drug dispensary, which will control cost, create convenience by having home delivery service, and save plan sponsor cost by providing employees incentive to use generic versions of drugs.

Here's how it works:



To illustrate how Managed Rx control drug costs, below is an example with Spectrum's current plan of 90% drug co-insurance.

Sample Drug Layout		Prescription Drugs Purchased at:	
		Alliance Pharmacy	Local Pharmacy
Tier 1	1. Generic Drugs	90% Coverage	70% Coverage (90% Coverage for drugs in the immediate need category)
	2. Brand-name Drugs that DO NOT have a lower cost alternative		
	3. Diabetic Supplies		
Tier 2	1. Brand-name Drugs that DO have a lower cost alternative	70% Coverage	50% Coverage
"Specialty" Drugs		90% Coverage	



Highlights for Managed Rx:

- o Significantly lower dispensing fee than local pharmacies (\$5.00)
- o Free delivery any where in Canada
- o Reduction on renewal Healthcare rates (illustration shown below)
- o Pharmacists from Alliance Pharmacy will request a lower cost drug alternative if available and remind patients to refill
- o Program not available in Quebec due to legislations

PostScripts Rx

Same as Managed Rx, this option also assist plan sponsors who recognize the need to control costs but at the same time continue supporting plan members with the medication they need.

PostScripts Rx is for maintenance drugs only without affecting current drug plan co-pay. Additionally, PostScripts Rx also goes through a central drug dispensary, however instead of Alliance Pharmacy it's MediTrust Pharmacy with a slightly higher dispensing fee. Below table illustrates the differences between PostScripts Rx and Managed Rx. Following the table, a brochure with detailed program information is attached.

	
Utilizes a central dispensing pharmacy	
Prescriptions are couriered	
Online interface to manage prescriptions	
Must have pay direct drug card	
Available to ClaimSecure Groups	Available to ClaimSecure or Industrial Alliance Groups
Only applies to maintenance medications	Affects all medications
Plan design is unchanged	Plan design changes
Coverage for maintenance medication (once stabilized) is only provided when the drug is purchased from MediTrust pharmacy	Coverage level varies based upon the type of drug purchased (eg. brand-name or generic) and whether it is purchased at Alliance Pharmacy or not
No coverage if a stabilized maintenance drug is purchased at local pharmacy	Higher percentage of coverage if drug is purchased at Alliance Pharmacy
Coverage is not affected based on type of drug purchased	Higher percentage of coverage for drugs that do not have a lower cost alternative
\$7.49 dispensing fee	\$5 dispensing fee
Great way to capture cost savings with no change to plan design	Great for groups committed to significant changes to both plan design and delivery of prescription drugs
Less aggressive approach to controlling costs	More aggressive approach to controlling costs

postscripts

The ultimate in CONVENIENCE:
your prescriptions delivered right to your door



Benefit plan costs are steadily rising. Your plan sponsor simply can't afford to afford their risk year after year to continue providing the same benefits.

Prescription drug account for a significant portion of benefit costs. Many plan sponsors recognize the need to control those costs, but at the same time continue supporting plan members with the medical on the ground. The solution is now delivery system for managing medication - it's called PostScripts.

PostScripts offers a benefit administration platform which makes enrollment, delivery, the you, and cost savings for your plan sponsor.



Maintenance Medication Delivered to your Door

Your new plan includes free delivery of your maintenance medication anywhere in Canada! Once you're stabilized* on a maintenance medication, just ask your doctor to fax, phone or mail in a prescription to our central dispensing pharmacy, MediTrust. Within 3-5 days, you'll receive your medication.

* "Stabilized" means that you have received 90 days of medication (same DIN) within the previous 4 months.

PostScripts Rx helps take the "maintenance" out of maintenance medication. Our pharmacy partner, MediTrust will:

- Ship your medication to an address you provide;
- Dispense a 90 day supply of your medication;
- Contact your doctor directly to request a renewal of your prescription (with your permission).

Maintenance medications are those drugs that a doctor has prescribed for regular (i.e. daily) use.



If you've been stabilized on your maintenance medication for at least 90 days, your next refill must come from MediTrust in order to be covered.

How it Works

1. Sign up for ClaimSecure's eProfile by visiting www.claimsecure.com
2. Once in eProfile, click on the PostScripts tab in the top right corner of the screen, and then select "Register with PostScripts"
3. Transfer any existing prescriptions for maintenance medication to MediTrust by logging into your PostScripts account (www.postscripts.ca)
4. Request your next refill by logging into your PostScripts account at www.postscripts.ca
5. Ask your doctor to phone, fax or mail any future prescriptions for maintenance medication directly to MediTrust
6. Start enjoying the convenience of free delivery of your maintenance medication!

If you are prescribed a **NEW maintenance medication**, you can fill it at your local pharmacy until you've been stabilized for 90 days. This is to give you and your doctor time to find the correct type and dosage of medication, before you're dispensed a larger supply. After you have been stabilized for 90 days on your maintenance medication from your local pharmacy, you must purchase future refills from MediTrust in order to receive coverage.

No more driving to and from the pharmacy. No more impulse buying while you're waiting for your prescription. Just the dependable convenience of your prescription arriving at your door.



postscripts 

Coverage

Consult MediTrust's PostScripts Rx Dispensing Service

1. Have the drugs that are covered under my plan changed?

No. The drugs that are covered under your plan have not changed, but which pharmacy you purchase maintenance drugs from has changed.

2. Do I have to purchase maintenance medication through PostScripts Rx?

Yes. If you've been stabilized on a maintenance medication for 90 days, you must purchase that medication from MediTrust in order to be covered. Medications for acute/sudden conditions (eg. antibiotics, short term pain killers etc.), can still be purchased at your local pharmacy.

Your Exclusive Perks

Safe. Accurate. Delivered.

- **Rexall Pharmacy Discount Card**
 - Your PostScripts Rx plan comes with a 20% discount card that applies to all Rexall-branded products at Rexall Pharmacy retail locations! Rexall Pharmacy stores stock a variety of items such as bath and beauty, household cleaning supplies, vitamins and cough medicines.
- **Low Dispensing Fees**
 - The dispensing fee for medications dispensed from MediTrust is just \$7.49! This combined with a policy to dispense a 90 day supply means more money in your pocket.
- **Free Delivery**
 - You choose where to have your prescription delivered; be it home, work or anywhere else that someone is available to sign for your package.

Prescriptions for Acute Medication

Acute medications are those drugs used to treat a sudden/unexpected illness or injury (e.g. antibiotics or short term pain killers). If you have a prescription for an acute medication, chances are you need it right away! As such, please continue to fill your prescriptions for acute or non-maintenance medication at your local pharmacy.



3 Ways to Get your Prescription to our Central Dispensing Pharmacy, MediTrust

1. Ask your doctor to Fax it to 1.800.563.8934
2. Ask your doctor to telephone it to 1.800.561.3763
3. Mail your original prescription and your new prescription form (which you can find once you log into your PostScripts account) to:

Ontario: 27-9665 Bayview Ave, Richmond Hill, ON, L4C 9V4
Atlantic Canada: 1490 Manawagonish Rd, Saint John, NB, E2M 5S9
Manitoba: 100-233 Kennedy St, Winnipeg, MB, R3C 3J5
Saskatchewan: 50-3806 Albert St, Regina, SK, S4S 3R2
Alberta: 4484 97 St, Edmonton, AB, T6E 5R9
British Columbia: 208A-3430 Brighton Ave, Burnaby, BC, V5A 3H4
(includes YT, NT & NU)