# **COLLECTIVE AGREEMENT**

Between

Source Office Furniture & Systems LTD. ("The Employer")

And

United Food and Commercial Workers, Local 1518 ("The Union" or "UFCW")

May 1, 2022 to April 30, 2026

Ratified by member vote: October 13, 2022



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# **ARTICLE 1 – Purposes**

# 1.01 Purposes of Agreement

The following are the purposes of the Agreement:

- a. to establish and maintain an orderly and harmonious relationship between the Employer, the employees and the Union;
- b. to provide a fair and amicable method for final and conclusive settlement without stoppage of work for all disputes between the persons bound by this Agreement.

# **ARTICLE 2 – Agreement Interpretation**

# 2.01 Gender References

For the purposes of this Agreement, the masculine shall be considered to include the feminine and singular to include the plural.

#### 2.02 Employee

In this Agreement, "employee" means an employee in the bargaining unit.

# 2.03 Savings Clause

If any provision of this Agreement is rendered invalid by statute or by decision of a court or tribunal of competent jurisdiction, such provision shall be severed from this Agreement and the remaining provisions of this Agreement shall continue in full force and effect.

# **ARTICLE 3 – Scope and Recognition**

#### 3.01 Scope

This Agreement applies to all employees of the Employer included in the bargaining unit for which the Union is certified under the Labour Relations Code.

# 3.02 Recognition

The Employer recognizes the Union as the sole collective bargaining agent for all employees in the bargaining unit.

# 3.03 Copies of Agreement

The Union shall be responsible for printing this Agreement and for ensuring that each employee receives a copy.

# **ARTICLE 4 – Union Security and Deduction of Dues**

# 4.01 Union Membership

Each employee must, as a condition of employment, be or become a member of the Union within 30 days following the effective date of this Agreement, or 30 days following the beginning of his employment, whichever is later. Each employee shall remain a member of the Union in good standing as a condition of continuing employment.

# 4.02 New Employee Documentation

The Employer agrees to provide each new employee at the time of hire, a Union Membership Application form and a Dues Check-Off Authorization form, both to be completed by the new employee. Once completed said forms shall be forwarded by the Employer to the Union office. The Union shall be responsible for furnishing the Employer with an adequate supply of blank forms.

# 4.03 Deduction of Dues

The Employer agrees to deduct from the wages of each employee, upon proper authorization from the employee affected, such initiation fees, union dues, fines and assessments as are authorized by regular and proper vote of the memberships of the Union. The Employer further agrees to automatically deduct union dues from the wages of all new employees. The employee shall, within thirty (30) days after commencement of employment, provide the Employer with a signed authorization for such deductions.

#### 4.04 Remittance of Dues

The Employer agree to make deductions in each calendar month for the then current month and to remit the aggregate of the amounts so deducted to the Secretary-Treasurer of the Union prior to the last day for the month following the month in which the deductions are made and the Social Insurance Number of each employee for whom the deductions were made and the amount of each deduction. The Employer agrees to include dues deducted during the year on the employee's T4 slip.

#### 4.05 Indemnity

The Union agrees to indemnify the Employer for any fines, dues, initiation fees or assessments improperly deducted and remitted to the Union on instructions to the Employer from the Union if such fines, dues, initiation fees or assessments are found to have been improperly deducted by a court of law or the Labour Relations Board.

# **ARTICLE 5 – Union Representation**

# 5.01 Recognition of Shop Stewards

The Employer shall recognize up to two (2) Shop Stewards elected by the employees or appointed by the Union. The Union will endeavour to ensure that one Shop Steward works in the warehouse.

#### 5.02 Qualifications

The Shop Stewards shall be employees who have completed their probationary periods.

#### 5.03 Notification

The Union shall notify the Employer in writing of the names of the Shop Stewards; the Employer shall not be required to recognize a Shop Steward until it has been so notified.

# 5.04 Investigation/Processing of Grievances

A Shop Steward may, within reason, investigate and process grievances or confer with representatives of the Union during regular working hours without loss of pay. Before doing so, the Shop Steward must obtain permission from his manager. Such permission will not be unreasonably withheld.

# 5.05 No Union Activities

Neither the Union nor the employees will engage in any Union activities on Employer premises during working hours, except as provided in this Agreement.

# 5.06 Union Representatives

An authorized representative of the Union shall have the right to contact employees at the workplace to discuss matters respecting this Agreement or its administration. The Union shall obtain authorization from the Employer as to the appropriate time for such contact before meeting the employee(s). Such authorization shall not be unreasonably withheld. The Union representative agrees to check-in with management when they arrive and when they leave.

# 5.07 Bulletin Boards

The Employer shall make a bulletin board available for the posting of Union bulletins regarding meetings, appointment of committees, election of officers, seniority lists, dues, entertainment, and health and safety. The Shop Stewards shall be responsible for ensuring that the bulletin board is used in accordance with this Agreement.

# 5.08 Joint Labour-Management Committee

A Joint Labour-Management (JLM) Committee shall be established, consisting of two employees and two representatives of the Employer. A representative of the Union or the Employer may attend the meetings from time-to-time. Prior notice of such attendance will be provided to the other Party.

The JLM Committee shall meet every second month or as required to engage in a meaningful exchange of ideas and information on matters relating to the workplace that affect the parties or any employee bound by this Agreement. The purpose of the JLM Committee is to promote the cooperative resolution of workplace issues, to respond and adapt to changes in the economy, to foster the development of work related skills and to promote workplace productivity.

Meetings will be held during regular working hours.

# **ARTICLE 6 – Management Rights**

# 6.01 Management Rights

The Union recognizes and acknowledges that the management of the business and direction of the workforce are fixed exclusively with the Employer and without restricting the generality of the foregoing, the Union acknowledges that it is the exclusive function of the Employer to:

- a. maintain order and efficiency;
- b. hire, promote, demote, classify, transfer, suspend and rehire employees, and to discipline or dismiss any employee for just and reasonable cause;
- c. determine the nature and kind of business conducted by the Employer, the methods and techniques of work, contents of jobs, the number of employees to be employed, the extension of operations or any part thereof;

- d. establish new, and abolish existing, job classifications;
- e. establish job requirements, including the determination of the experience, skills, abilities, training and qualifications required to perform the work;

and to determine and excise all functions which shall remain with the Employer except as specifically limited by the express provisions of this Agreement.

# **ARTICLE 7 – Employment Status**

# 7.01 Probationary Period

Each regular employee shall serve a probationary period of **three (3)** months actually worked, commencing with his date of hire. If the Company, in its sole discretion, decides that the employee is unsuitable for continued employment, that his performance is unsatisfactory, or that the employee is unwilling or unable to properly carry out his duties, the Company may terminate the employee's employment at any time during the probationary period.

# 7.02 Full-Time Regular Employees

Full-time regular employees are regularly scheduled employees who work forty (40) hours per week on a continuing basis.

# 7.03 Part-Time Regular Employees

Part-time regular employees are regularly scheduled employees who work less than full time hours per week on a continuing basis. Such employees are covered by all provisions of this Agreement, but are not entitled to the Group Benefit Plan.

# 7.04 Casuals

Casuals are persons who are called into work by the Employer, on an infrequent basis, and who are not obligated to work when required.

Casuals:

- Are new employees who are not members of the Union, provided said non-members shall be eligible for membership in the Union and shall make application within ten (10) working days after employment and become members in thirty (30) working days; or
- b. Workers who are not employees of the Employer and will not work in excess of ten (10) working days.

# **ARTICLE 8 – Seniority**

# 8.01 Definition

Seniority shall mean the length of continuous service with the Employer.

# 8.02 Seniority Lists

The Employer shall provide the Union with a current seniority list every six months; or when the information is required to determine seniority in order to settle a disagreement.

# 8.03 Probationers

Seniority shall not accrue during an employee's probationary period. Upon successful completion of the probationary period, the employee's seniority shall be backdated to his date of hire.

# 8.04 Leaving the Bargaining Unit

An employee who leaves the bargaining unit to fill another position with the Employer shall continue to accumulate seniority, and shall have the right to exercise his seniority to return to the bargaining unit, for a period of three (3) months. After the expiry of that period, the employee's seniority shall be lost.

# 8.05 Loss of Seniority

Length of continuous service or seniority can be lost and the employee deemed to be terminated if they:

- a. voluntarily leave the employ of the Employer; or
- b. are discharged and such discharge is not reversed by the grievance procedure; or
- c. are absent without leave for a period greater than **four (4)** working days without notification; or
- d. after being laid-off by the Employer, fails to report for work when recalled or cannot be located after a reasonable effort on the part of the Employer. The method of contact by telephone, followed by a registered or couriered letter to the employee at their last known address, will constitute a reasonable effort on the part of the Employer and within **four (4)** working days of receipt of such notice the employee fails to report for duty, or advise the Employer that they will return within five (5) working days, the Employer shall be entitled to assume that the said employee has left the Employer's service voluntarily; or
- e. has been laid-off for a period of:
  - i. three (3) months if less than twelve (12) months' seniority; or
  - ii. six (6) months if twelve (12) months' seniority or greater.

# **ARTICLE 9 – Hours of Work**

# 9.01 No Guarantee

Nothing in this Agreement shall be construed as a guarantee of work, or of hours of work per day or per week, or of days of work per week. The provisions of this Article are intended to outline the normal or regular hours of work.

# 9.02 Definitions

A day shall commence at 12:01 a.m. and end twenty-four (24) hours later. A week shall commence at 12:01 a.m. Sunday and end at 12:00 midnight the following Saturday.

# 9.03 Time Clocks

- a. The Employer shall provide a time clock in order to enable employees to record their time for payroll purposes. Each employee's time is electronically recorded at the start and finish of work and when leaving the premises. Warehouse employees also electronically record the start and end times of their lunch breaks. Drivers and swampers must advise by text message to the manager, or their delegate, their start and end to lunch breaks.
- b. It is each employee's responsibility to ensure that every punch and scan is verified as accurate at the time of the scan.

# 9.04 Meal Break

An employee who works more than five (5) consecutive hours in one day shall receive an unpaid meal break of one half (1/2) hour's duration. Meal breaks will be arranged between the employee and his manager, and shall commence no sooner than three (3) hours, and end no later than five (5) hours, after the beginning of the employee's shift.

# 9.05 Breaks

The Employer will provide a ten (10) minute paid break in each half of a full-time shift.

# 9.06 Minimum Pay

The Employer shall pay an employee reporting to work as required by the Employer a minimum in any one day of:

- a. two (2) hours' pay; or
- b. where the employee commences work, a minimum of four (4) hours' pay unless his work is suspended because of weather or other reasons completely beyond the control of the Company.

# 9.07 Available Hours

- a. Preference in available hours of work shall be given to senior employees provided they are available and can perform the work.
- b. The Employer shall not reduce the weekly hours of work of an employee for the purpose of replacing such hours with another employee at a lower hourly rate of pay.

# **ARTICLE 10 – Overtime**

# 10.01 Overtime Pay

An employee shall receive overtime pay of one and one half (1 ½) times his regular hourly wage for all hours worked in excess of:

- a. eight (8) in a day; and
- b. forty (40) in a week.

# 10.02 Double Time

An employee shall receive overtime pay of two (2) times his regular hourly wage for all hours worked in excess of:

a. twelve (12) in a day.

# **10.03** Distribution of Overtime

- a. Where planned overtime work is available (i.e. Saturday, Sunday and Statutory Holidays) it shall be offered to qualified employees in order of seniority. In the event that insufficient numbers of employees volunteer, the Employer will allocate overtime by reverse order of seniority provided the employee is qualified.
- b. Drivers/swampers are expected to complete their assigned daily work. Therefore, when unplanned overtime is required at the end of a shift, employees so performing the work shall be required to complete their work, including the Island Run.
- c. Employees who have provided a minimum of twenty-four (24) hours' advance notice to management of an inability to work overtime on any given day, will be exempted from (b) above. Only two (2) employees will be exempted on the same day.

# **10.04** Authorization Required

No employee is permitted to work overtime hours without authorization by the employee's manager or delegate in advance of the overtime worked.

# **ARTICLE 11 – Statutory Holidays**

# 11.01 Statutory Holidays

For the purpose of this Agreement, the following days are Statutory Holidays:

New Year's Day	Family Day	Good Friday
Victoria Day	Canada Day	B.C. Day
Labour Day	Thanksgiving Day	Remembrance Day
Christmas Day	Boxing Day	

# 11.02 Eligibility

Eligible employees shall receive the day off with pay on a Statutory Holiday. To be eligible for Statutory Holiday pay, an employee must have:

- a. been employed by the Employer for at least 30 consecutive calendar days; and
- b. worked or earned wages for 15 of those 30 calendar days.

# 11.03 Part-Time or Casual Employees

Statutory Holiday pay for eligible part-time or temporary employees shall be based upon the employee's regular hourly wage rate, multiplied by his average daily hours during the last thirty (30) day period prior to the Statutory Holiday.

# **11.04** Statutory Holiday During Vacation

If a Statutory Holiday occurs during an employee's annual vacation, an additional day's vacation with pay shall be allowed for each such Statutory Holiday.

# 11.05 Work on a Statutory Holiday

Work performed on a Statutory Holiday shall be paid at one and one half (1  $\frac{1}{2}$ ) times his regular hourly wage for all hours worked, in addition to regular pay or a paid day off in

lieu for that day. All worked performed over twelve (12) hours in that day shall be paid at two (2) times his regular hourly wage.

# ARTICLE 12 – Annual Vacation

# **12.01** Vacation Entitlement

- a. Employees begin earning vacation upon the commencement of their employment.
- b. Vacation earned during one year is taken during the following calendar year.
  - i. In the first year of employment, employees will earn vacation pay for the balance of that calendar year, to be taken in the following calendar year.
  - ii. Employees who have completed twelve (12) consecutive months of employment will be entitled to two (2) weeks' paid vacation in the following calendar year(s).
  - iii. Employees who have completed five (5) consecutive years of employment shall be entitled to take three (3) weeks' paid vacation in the following calendar year(s).
  - iv. Effective May 1, 2019, and for Employees who have completed eight (8) consecutive years of employment shall be entitled to four (4) weeks' paid vacation in the following year(s).
- c. The Employer must ensure an employee takes an annual vacation within twelve (12) months after completing the year of employment entitling the employee to the vacation.
- d. The Employer must allow an employee who is entitled to an annual vacation to take it in periods of one or more weeks.
- e. An annual vacation is exclusive of statutory holidays that an employee is entitled to.

# 12.02 Vacation Pay

The Employee shall pay annual vacation pay to each employee calculated on the employee's total wages for the year in which the employee earned the vacation, at the rate of 2% for each week of annual vacation to which the employee is entitled.

The Employer will pay full-time employees their vacation pay on their regular pay day during their vacation period.

Vacation pay for part-time and casual employees shall be calculated and paid on each pay cheque.

# 12.03 Scheduling

a. Vacations shall be scheduled and taken within a calendar year. Vacations shall be scheduled by classification, and the senior employees within each classification shall be given preference in the selection of vacation periods, subject to the needs of the Employer.

- b. The Employer will post vacation schedules during the first two weeks of October in each year, for vacation in the next calendar year. Employees shall select their vacation periods for that calendar year by October 31st, and the Employer shall confirm the vacation scheduling by November 15th in each year.
- c. Should an employee not select his vacation by October 31st, their vacation request will be dealt with on a "first-come first-served" basis and he will not be able to use his seniority to bump another employee from his pre-selected vacation period.
- d. In the event that an employee has not scheduled vacation by June 1st, the Employer will schedule such vacation at their discretion, after discussion with the employee, to ensure vacation is taken in the calendar year.
- e. Once the approved vacation schedule has been posted, all changes require Employer approval. Employees requesting vacation of any duration, or a change to an existing scheduled vacation, will be required to submit their request in writing two (2) weeks in advance of the time-off requested.

# 12.04 No Carry Over

Vacations must be taken during the calendar vacation year. Vacation entitlement cannot be banked or carried over from year to year.

#### **ARTICLE 13 – Classifications and Rates of Pay**

#### 13.01 Wage Rates

Each employee shall be paid not less than the hourly rate established by Appendix "A" for his job classification.

#### 13.02 Working in a Higher Classification

Where the Employer requires an employee to work temporarily in a higher classification, the employee shall be paid the higher rate for the period so employed.

#### 13.03 New Classifications

If the Employer creates a new or different classification, it shall establish a wage rate for that classification. The Employer and the Union will then negotiate regarding the applicable wage rate for the classification. If the Parties cannot reach agreement on a wage rate, the issue will be referred to a single arbitrator to resolve the matter.

#### 13.04 Pay Days and Pay Slips

Employees shall be paid by direct deposit twice monthly, on the 15<sup>th</sup> (or Friday before) and the last working day of the month.

On that date, the Employer will mail either by Canada Post or electronically or hand deliver to each active employee an itemized statement of earnings, rate of pay and deductions for the pay period covered.

# 13.05 Lead Hand

Lead Hands will be appointed by the Employer where it is determined to be required. One of the criteria to be considered when selecting Lead hands will be seniority. Lead Hands shall be paid a premium of **one dollar and twenty five cents (\$1.25)** per hour in addition to their regular hourly rate of pay, for each hour worked, as outlined in Appendix A. Such premiums will not be included in the calculation of benefits or overtime.

# 13.06 Forklift Trainer

A Forklift Trainer shall be provided with a premium of **one dollar and fifty cents (\$1.50)** per hour for each hour spent training as assigned by management.

# **ARTICLE 14 – Leaves of Absence**

# 14.01 Union Business

- a. A leave of absence of up to two (2) weeks per year without pay will be granted, upon written request by the Union, to two (2) regular employees per year for the purpose of attending to Union business, provided that the Employer's work requirements allow for such leave. The Union will request such leave by giving the Employer at least one month's notice in writing. The Employer will continue to pay employees on such leave on the payroll, and the Employer shall invoice the Union and be reimbursed for all wages and benefits during such leave.
- b. Employees on leave under paragraph (a) above shall continue to accumulate seniority for the period and upon return to work shall be reinstated into the work performed prior to their leave, or to an equal job if the said work has become redundant.
- c. Where an employee is selected to work as a Union Representative, he shall be granted a leave of absence for a period of one (1) year without pay, provided that not more than one (1) employee shall be absent for said leave at any one time. The Union will request such leave by giving the Company at least one month's notice in writing.

# 14.02 Bereavement Leave

Bereavement leave, for all non-probationary employees, shall be granted to employees in accordance with the *Employment Standards Act*. An employee is entitled to up to **five** (5) days of **paid** leave on the death of a member of the employee's immediate family.

Employees may be granted additional leave without pay, upon request.

# 14.03 Leave Respecting Death of Child

- (1) If a child of an employee dies and the employee requests leave under this section, the employee is entitled to unpaid leave for a period of up to 104 weeks.
- (2) If an employee is charged with a crime that resulted in the death of the employee's child, the employee is not entitled, or, if already on leave, is no longer entitled, to leave under this section.
- (3) A leave under subsection (1) must be taken during the period that starts:
  - (a) on the date the child dies, or

- (b) on the date the child is found dead, in the case of the child disappearing before the child dies, and ends on the date that is 105 weeks after the date referred to in paragraph (a) or (b), as applicable.
- (4) A leave under subsection (1) may be taken by the employee in
  - (a) one unit of time, or
  - (b) more than one unit of time, with the employer's consent.
- (5) Despite subsection (3), a leave under subsection (1) ends on the earlier of the following dates, if any apply:
  - (a) the date the employee is charged with a crime that resulted in the death of the child;
  - (b) the date that is the last day of the last unit of time in respect of which the employer consents under subsection (4) (b).
- (6) If requested by the employer, the employee must, as soon as practicable, provide to the employer reasonably sufficient proof that the employee's child is dead.

# 14.04 Compassionate Care Leave and Family Responsibility Leave

Compassionate care and family responsibility leave shall be granted to employees in accordance with the *Employment Standards Act*, as follows.

# Compassionate Care

- (1) In this section, "family member" means:
  - (a) a member of an employee's immediate family, and
  - (b) any other individual who is a member of a prescribed class.
- (2) An employee who requests leave under this section is entitled to up to 27 weeks of unpaid leave to provide care or support to a family member if a medical practitioner or nurse practitioner issues a certificate stating that the family member has a serious medical condition with a significant risk of death within 26 weeks, or such other period as may be prescribed, after:
  - (a) the date the certificate is issued, or
  - (b) if the leave began before the date the certificate is issued, the date the leave began.
- (3) The employee must give the employer a copy of the certificate as soon as practicable.
- (4) An employee may begin a leave under this section no earlier than the first day of the week in which the period under subsection (2) begins.
- (5) A leave under this section ends on the last day of the week in which the earlier of the following occurs:

- (a) the family member dies;
- (b) the expiration of 52 weeks or other prescribed period from the date the leave began.
- (6) A leave taken under this section must be taken in units of one or more weeks.
- (7) If an employee takes a leave under this section and the family member to whom subsection (2) applies does not die within the period referred to in that subsection, the employee may take a further leave after obtaining a new certificate in accordance with subsection (2), and subsections (3) to (6) apply to the further leave.

# 14.05 Leave Respecting Disappearance of a Child

(1) In this section and section 52.4:

"child" means a person under 19 years of age;

"crime" means an offence under the Criminal Code other than an offence prescribed by the regulations made under section 209.4 (f) of the Canada Labour Code.

- (2) If a child of an employee disappears and it is probable, in the circumstances, that the child's disappearance is a result of a crime, and the employee requests leave under this section, the employee is entitled to unpaid leave for a period of up to 52 weeks.
- (3) If an employee is charged with a crime that resulted in the disappearance of the employee's child, the employee is not entitled, or, if already on leave, is no longer entitled, to leave under subsection (2).
- (4) A leave under subsection (2) must be taken during the period that starts on the date the child disappears and ends on the date that is 53 weeks after the date the child disappears.
- (5) A leave under subsection (2) may be taken by the employee in
  - (a) one unit of time, or
  - (b) more than one unit of time, with the employer's consent.
- (6) Despite subsection (4), a leave under subsection (2) ends on the earliest of the following dates, if any apply:
  - (a) the date on which circumstances indicate it is no longer probable that the child's disappearance is a result of a crime;
  - (b) the date the employee is charged with a crime that resulted in the disappearance of the child;
  - (c) the date that is 14 days after the date on which the child is found alive;
  - (d) the date on which the child is found dead;
  - (e) the date that is the last day of the last unit of time in respect of which the employer consents under subsection (5) (b).

(7) If requested by the employer, the employee must, as soon as practicable, provide to the employer reasonably sufficient proof that the employee's child has disappeared in circumstances in which it is probable the disappearance is a result of a crime.

# 14.06 Family Responsibility Leave

An employee is entitled to up to 5 days of unpaid leave during each employment year to meet responsibilities related to:

- (a) the care, health or education of a child in the employee's care, or
- (b) the care or health of any other member of the employee's immediate family.

# 14.07 Maternity and Parental Leave

Pregnancy and Parental leave shall be granted to employees in accordance with the *Employment Standards Act*, as follows.

# Maternity leave

- A pregnant employee who requests leave under this section is entitled to up to 17 consecutive weeks of unpaid leave:
  - (a)
- (i) no earlier than 13 weeks before the expected birth date, and
- (ii) no later than the actual birth date and ends no later than 17 weeks after the actual birth date.
- (1.1) An employee who requests leave under this subsection after giving birth to a child is entitled to up to 17 consecutive weeks of unpaid leave, which much be taken during the period that begins on the date of the birth and ends no later than 17 weeks after that date.
- (2) An employee who requests leave under this section after the birth of a child or the termination of a pregnancy is entitled to up to 6 consecutive weeks of unpaid leave, which must be taken during the period that begins on the date of the termination of the pregnancy and ends not later than 6 weeks after that date.
- (3) An employee who requests leave under this subsection is entitled to up to 6 additional consecutive weeks of unpaid leave if, for reasons related to the birth or the termination of the pregnancy, the employee is unable to return to work when the employee's leave ends under subsection (1), (1.1) or (2).
- (4) A request for leave must:
  - (a) be given in writing to the employer,
  - (b) if the request is made during the pregnancy, be given to the employer at least 4 weeks before the day the employee proposes to begin leave, and
  - (c) if required by the employer, be accompanied by a medical practitioner's or nurse practitioner's certificate stating the expected or actual birth date or the date the pregnancy terminated or stating the reasons for requesting additional leave under subsection (3).

(5) If an employee on leave under subsection (1) (b) (i) must or (1.1) proposes to return to work earlier than 6 weeks after giving birth to the child, the employer may require the employee to give the employer a medical practitioner's or nurse practitioner's certificate stating the employee is able to resume work.

# Parental Leave

- (1) An employee who requests parental leave under paragraph (a), (b) or (d) of this subsection is entitled to:
  - (a) for a parent who takes leave under section 50 in relation to the birth of the child or children with respect to whom the parental leave is to be taken, up to 61 consecutive weeks of unpaid leave beginning immediately after the end of the leave taken under section 50 unless the employer and employee agree otherwise,
  - (b) for a parent, other than an adopting parent, who does not take leave under section 50 in relation to the birth of the child or children with respect to whom the parental leave is to be taken, up to 62 consecutive weeks of unpaid leave beginning after the child's birth and within 78 weeks after that event, and
  - (d) for an adopting parent, up to 62 consecutive weeks of unpaid leave beginning within 78 weeks after the child is placed with the parent.
- (2) If the child has a physical, psychological or emotional condition requiring an additional period of parental care, the employee is entitled to up to an additional 5 consecutive weeks of unpaid leave, beginning immediately after the end of the leave taken under subsection (1).
- (3) A request for leave must:
  - (a) be given in writing to the employer,
  - (b) if the request is for leave under subsection (1) (a) or (b), be given to the employer at least 4 weeks before the employee proposes to begin leave, and
  - (c) If required by the employer, be accompanied by a medical practitioner's or nurse practitioner's certificate or other evidence of the employee's entitlement to leave.
- (4) An employee's combined entitlement to leave under section 50 and this section is limited to 78 weeks plus any additional leave the employee is entitled to under section 50 (3) or subsection (2) of this section.

# 14.08 <u>Reservists Leave</u>

(1) In this section:

"Canadian Forces" has the same meaning as in section 14 of the *National Defense Act* (Canada);

"Reservist" means a member of the reserve force, as defined in section 2 (1) of the *National Defense Act* (Canada).

- (2) Subject to the regulations, an employee who is a reservist and who requests leave under this section is entitled to unpaid leave, for the period described in subsection (3), if
  - (a) the employee is deployed to a Canadian Forces operation outside Canada or is engaged, either inside or outside Canada, in a pre-deployment or postdeployment activity required by the Canadian Forces in connection with such an operation,
  - (b) the employee is deployed to a Canadian Forces operation inside Canada that is or will be providing assistance in dealing with an emergency or with its aftermath, or
  - (c) the prescribed circumstances apply.

(3) An employee who is a reservist is entitled to take leave under this section for the prescribed period or, if no period is prescribed, for as long as subsection (2) (a), (b) or (c) applies to the employee.

- (4) Subject to subsection (5), a request for leave must
  - (a) be in writing,
  - (b) be given to the employer,
    - (i) unless subparagraph (ii) or (iii) applies, at least 4 weeks before the employee proposes to begin leave,
    - (ii) in the case of leave under subsection (2) (a) or (b), if the employee receives notice of the deployment less than 4 weeks before it will begin, as soon as practicable after the employee receives the notice, or
    - (iii) in the case of leave under subsection (2) (c), within the prescribed period, and
  - (c) include the date the employee proposes to begin leave and the date the employee proposes to return to work.
- (5) If circumstances require leave to be taken beyond the date specified in the request under subsection (4) (c), the employee must
  - (a) notify the employer of the need for the extended leave and of the date the employee now proposes to return to work, and
  - (b) provide the notice referred to in paragraph (a),
    - (i) unless subparagraph (ii) or (iii) applies, at least 4 weeks before the date the employee had proposed, in the request under subsection (4), to return to work,
    - (ii) in the case of leave under subsection (2) (a) or (b), if the employee receives notice of the extended deployment less than 4 weeks before the date referred to in subparagraph (i), as soon as practicable after the employee receives the notice, or
    - (iii) in the case of a leave under subsection (2) (c), within the prescribed period.

- (6) If an employee who is a reservist proposes to return to work earlier than specified in the request submitted under subsection (4) or the notice provided under subsection (5), if applicable, the employee must notify the employer of this proposal at least one week before the date the employee proposes to return to work.
- (7) An employer may require an employee who takes leave under this section to provide further information respecting the leave.
- (8) If an employer requires an employee to provide further information under subsection (7), the employee must
  - (a) provide the prescribed information in accordance with the regulations, or
  - (b) if no information is prescribed, provide information reasonable in the circumstances to explain why subsection (2) (a), (b) or (c) applies to the employee and provide it within a reasonable time after the employee learns of the requirement under subsection (7).

#### 14.09 Jury Duty

Employees required to attend court as a juror shall be granted leave in accordance with the *Employment Standards Act*.

Employment is deemed continuous while an employee is on leave or jury duty for the purposes of calculating annual vacation entitlement, continuation of benefits including any increases to wages or benefits, the employee would have been entitled to had the attendance as a juror not been required.

#### 14.10 Special Leave

An employee with two (2) or more years' seniority may be granted up to two (2) months' leave without pay for personal reasons, upon written application presented to the Employer at least one (1) month in advance. Permission for such leave shall be solely at the Employer's discretion, but shall not be unreasonably withheld.

**14.11** It is understood that any employee taking an unpaid Leave of Absence beyond what is permitted in Article 14.10 will have their length of service frozen until they return to work for purposes of the retention bonus.

# ARTICLE 15 – Layoff/Recall

#### 15.01 Layoff Procedure

- a. Employees shall be laid off in reverse order of seniority within the affected classification as defined in Appendix A.
- b. If, an employee so laid-off from his position has the necessary present ability to perform the work of the least senior employee, he may do so. In such cases, the employee shall receive the wage rate for the classification into which he moved.

#### 15.02 Recall

Employees shall remain on the recall list as follows:

- a. an employee with less than 12 months' seniority, shall be on the recall list for three (3) months;
- b. an employee with 12 months' seniority or greater, shall be on the recall list for a period of six (6) months.
- c. For the purposes of recall from layoff, the sequence in 15.01 shall be reversed. That being, the last laid-off shall be the first recalled, provided always that they can perform the work available.
- d. The Employer will make a reasonable effort to contact the employee. The method of contact by telephone, followed by a registered or couriered letter to the employee at their last known address, will constitute a reasonable effort on the part of the Employer. If the employee fails to report for duty within **four (4)** working days of receipt of such notice, or advise the Employer that they will return within five (5) working days, the Employer shall be entitled to remove the employee from the recall list and considered him to have left the Employer's service voluntarily.

# 15.03 Employee's Responsibility

It is the responsibility of all laid off employees to keep the Employer advised at all times of where and how they can be contacted for recall purposes.

# 15.04 Rate Upon Recall

Employees recalled to work shall receive the current rate for the classification into which they are recalled.

# **ARTICLE 16 – Vacancies and Promotions**

# 16.01 Vacancies

Vacancies, of greater than three (3) months, in existing or new classifications for regular employment shall be posted in a conspicuous location for five (5) consecutive working days. The posting will outline the classification, the wage rate and a brief description of the position. All applications for the posted positions must be filed in writing with the Employer by the end of the fifth (5<sup>th</sup>) working day after the initial posting, on forms supplied by the Company. If in the Company's view there are no suitable applications received by the end of the fifth (5<sup>th</sup>) working day after the initial posting, the Employer may fill the vacancy from an external source.

# 16.02 Criteria

Promotions or posted vacancies shall be awarded to the person whom the Employer considers to be the best qualified applicant. In evaluating qualifications, the Employer shall consider such things as the applicant's abilities, skill, past performance, and overall ability to efficiently satisfy the requirements of the job. If, in the Employer's opinion, the qualifications of two (2) or more applicants are equal, then the employee with the greatest seniority shall be awarded the job.

# 16.03 Trial Period

Employees filling vacancies or obtaining promotions through the procedure outlined above shall serve a trial period of three (3) months in the new position. If, during this trial period, the employee is considered by the Employer to be unsuitable for the new position, or if the employee feels that he cannot do the job, the employee shall be returned to his former position or one of equal rank.

# **ARTICLE 17 – Grievance Procedure**

# 17.01 Definition

"Grievance" means any difference or dispute concerning the interpretation, application, operation or alleged violation of this Agreement, including a question as to whether a matter is arbitrable.

# 17.02 Purpose of Grievance Procedure

The parties agree that the purpose of the grievance procedure is to identify and seek to resolve grievances as quickly as possible and that there shall be no work stoppages during the term of the Collective Agreement.

# 17.03 Grievance Procedure

The parties further agree that they will seek, through consultation, to avoid situations that may result in grievances and to resolve as many as possible at Step 1 of the following grievance procedure:

# Step 1

Within ten (10) working days of the alleged violation, the employee shall, with the aid of a Shop Steward, attempt to resolve the grievance informally through discussions with his immediate excluded manager. The manager shall respond orally within (3) days of the meeting with the employee and their shop steward.

# Step 2

If the matter is not resolved at Step 1, the Union shall present the grievance in writing to the Warehouse Manager or delegate, clearly setting forth full particulars of the alleged violation, including the Article(s) involved and the remedy sought. The written grievance must be presented without undue delay following the response at Step 1.

The Warehouse Manager, or designate, will meet with the Union as soon as possible following receipt of the written grievance, in attempt to resolve the grievance. The Warehouse Manager, or designate, shall provide the Union with a written reply as soon as possible after the Step 2 meeting.

# Step 3

If the matter is not resolved at Step 2, the Union shall present the written grievance to the General Manager or delegate, without undue delay following receipt of the Step 2 response. The General Manager and their designate shall meet with the Union Representatives or their designate and seek to resolve the grievance.

The Employer shall issue a written reply within ten (10) working days following the Step 3 meeting.

# 17.04 Referral to Arbitration

If the grievance remains unresolved after the conclusion of Step 3, it may be referred to arbitration. Either party shall notify the other party in writing of its desire to submit the grievance to arbitration within twenty (20) working days of the Employer's response to the Step 3 meeting.

# 17.05 Policy Grievance

The Union or the Employer shall have the right to initiate a policy grievance, or a grievance involving suspension or termination at Step 3.

# 17.06 Time Limits

The time allowance may be extended by mutual agreement between the parties.

# 17.07 Settlements

All settlements arrived at during the grievance procedure shall be final and binding upon the Employer, the Union and the employee(s) concerned.

# 17.08 Troubleshooter

The Parties agree to using a Troubleshooter Process as follows:

- a. Either Party may refer a grievance to this process, by providing the other Party with three (3) weeks' notice of a grievance being referred.
- b. Both Parties must agree to use of the Troubleshooter process for the grievance outlined in (a) above.
- c. Irene Holden, Brian Foley or Mark Brown (or any other individual agreed by the Parties) shall be scheduled as required to hear the grievance on an expedited basis.
- d. The Parties agree to share all relevant information regarding the grievance in advance of the troubleshooting hearing.
- e. The Parties will make every effort to develop a Statement of Agreed Facts.
- f. Decisions of the Troubleshooter will be in writing and binding on the Parties with respect to the grievance before the Troubleshooter. However, the decision will not be precedent setting and shall be without prejudice and shall not be publicized.
- g. Legal counsel shall not be used by either Party when using this Troubleshooter process.
- h. The Parties shall bear equally the fees and expenses of the Troubleshooter.

# 17.09 Expedited Arbitration

At any time prior to arbitration the parties may agree to refer the dispute to Section 104 (Expedited Arbitration). If referred the parties agree that the decision will be final and binding.

The operation of Section 50(2)(3) of the *Labour Relations Code* of British Columbia is hereby excluded.

# **ARTICLE 18 – Arbitration**

# 18.01 Arbitrator

The Board of Arbitration shall be composed of a single Arbitrator. (The parties may, by mutual consent, agree upon a three (3) person Board of Arbitration.)

# 18.02 Submission

Grievances submitted to the Arbitrator shall be in writing and shall clearly specify the nature of the issue.

# 18.03 Jurisdiction of Arbitrator

In reaching its decision, the Arbitrator shall be governed by the provisions of this Agreement. The Arbitrator shall not be vested with the power to change, modify or alter this Agreement in any of its parts, but may, however, interpret its provisions.

# 18.04 Binding Decision

The findings and decision of the Arbitrator shall be binding and enforceable upon the parties.

# 18.05 Cost of Arbitrator

The Union and the Employer shall bear equally the fees and expenses of the Arbitrator.

# ARTICLE 19 – No Strikes/No Lockouts

# 19.01 Lawful Union Activity

No employee shall be discharged or discriminated against for any lawful union activity or for serving on a Union committee outside of business hours or for reporting to the Union the violation of any provision of this Agreement.

# 19.02 Prohibition

There shall be no strikes or lockouts during the term of this Agreement.

# **ARTICLE 20 – Health and Safety**

# 20.01 Health and Safety

- a. The Employer shall make reasonable provisions for the health and safety of employees during their hours of employment.
- b. The Employer agrees to comply with the requirements of Worksafe BC Occupational Health and Safety Regulations, First Aid Regulations and Occupational Environment Regulations. In accordance with Part 3, Sections 3.12 and 3.13 of Worksafe BC Regulations, employees have the responsibility to advise management when they believe the work may be unsafe.

# 20.02 Joint Health and Safety Committee

A Workplace Joint health and Safety Committee shall be chosen and act in accordance with the *Workers' Compensation Act*. The worker representatives on the Committee shall be elected or chosen by the Union. Worker representation on the Committee shall be equal to or greater **than** Employer representation.

# 20.03 First Aid Premium

Employees designated by the Employer who successfully complete an Industrial First Aid course shall be given a premium of **thirty dollars (\$30.00)** per week. The Employer

shall pay for the cost of enrollment and compensate the employee to a maximum of eight (8) hours per day at their regular hourly rate while attending the course.

# 20.04 Safety Inspections

The Employer agrees that when a WCB inspector arrives at the warehouse for the purposes of an inspection visit or attending to the investigation of an accident, a Union Safety Committee member shall be informed and given the opportunity to meet with the Inspector, for the duration of the warehouse tour.

# 20.05 Safety Footwear

The Employer agrees to provide a footwear allowance of **two hundred dollars** (\$200.00) each twelve (12) month period to employees who have completed their probationary period. The employee shall receive reimbursement up to this amount upon presentation of a receipt.

# 20.06 First-Aid Kits for Trucks

All trucks shall be supplied with first-aid supplies and trucks shall comply with all *Worksafe BC Regulations* Part 16 (Mobile Equipment). It is the driver's responsibility to ensure the first-aid kit is properly stocked and inform management of any requirements.

# ARTICLE 21 – General

# 21.01 No Discrimination

The Union and the Employer agree that they shall not discriminate against employees in the administration of this Agreement on any of the grounds prohibited by the Human Rights Code, which include: race, colour, ancestry, place of origin, political belief, religion, marital status, family status, physical or mental disability, sex, sexual orientation or age of that person or because that person has been convicted of a criminal or summary conviction offence that is unrelated to the employment or to the intended employment of that person.

# 21.02 No Conflicting Agreements

No employee shall be asked to make any written or verbal contract which conflicts with this Agreement.

# 21.03 Employee's Personnel File

Subject to giving the Company advance notice, employees shall have access to their personnel file in accordance with the *Personal Information Protection Act of BC*. The employee may be accompanied to view this file by their Union Steward or Union Representative. The time spent viewing the file will be the employee's own time.

# 21.04 Accommodation for Religious Reasons

- a. Employees may request time off to observe religious holidays. The Employer will make every effort to provide such time off. Such requests should be at least one week in advance and only two (2) employees may be absent on the same day.
- b. Such time off shall be without pay, however, an employee may choose to use any vacation time owing.

# 21.05 Medical Reports

Where an employee has displayed a regular pattern of absenteeism, he shall supply the Employer, upon request, with a medical report from his doctor. Effective December 5, 2018, the Employer's contribution to an employee's cost of a medical report requested by the Employer shall be up to one hundred dollars (\$100.00), upon presentation of a receipt by the employee.

# 21.06 Staff Meetings

When the Employer schedules a staff meeting, such meetings will be considered as time worked and paid for at the employee's applicable straight time rate.

# 21.07 Union Decal

The Employer agrees that during the term of this Agreement it will permit the Union to supply and hang its Union decal. Such decal shall be displayed in a prominent position on the bulletin board.

# 21.08 Picket Lines

All employees covered by this Agreement shall have the right to refuse to cross legal picket lines. However, in the event that employees are confronted by picket lines which block their entry to the Employer and does not involve a dispute with the Employer, the employees shall telephone the Employer and the Union immediately for instructions.

# 21.09 Performance Appraisals

- a. Staff performance reviews are not part of the disciplinary process. Where a formal review of an employee's performance is carried out, the employee shall be provided with a copy to read and review. At the end of the performance review meeting, the employee shall sign the form indicating that the performance review meeting took place with the manager. The employee shall receive a copy of the report at the time of signing.
- b. The employee has the right, within seven (7) calendar days, to provide any written response or comments to the performance review. This response must be signed and dated by the employee and shall be appended to the review and maintained on the employee's personnel file.
- c. Performance reviews will be conducted up to two (2) times in a calendar year. All performance review meetings will be conducted during work time.

# 21.10 Drivers

The Employer will maintain the deliveries carried out by Sasa Boskovic and Zoran Kirov until such time as either employee leaves the Company or takes up another position in Source. In addition, and for as long as Sasa Boskovic and Zoran Kirov are driving, the Company will maintain and service the two (2) delivery truck(s).

# 21.11 Meal Allowance – Island Run

Effective December 5, 2018, the meal allowance for drivers shall be **thirty dollars (\$30.00)** per day for each employee.

# **ARTICLE 22 – Health and Welfare Benefits**

# 22.01 Group Benefit Plan

The Employer shall make arrangements with an insurance carrier to provide a group benefit plan for all employees covered by this Agreement. The selection of the insurance carrier is in the sole discretion of the Employer.

# 22.02 Group Benefit Plan Booklet

The provisions of the group benefit plan are described in the Group Benefit Plan Booklet issued by the insurance carrier from time to time. The Employer shall provide an up-to-date copy of the Booklet to each employee covered by this Agreement.

# 22.03 Limitation of Liability

The obligation of the Employer under the health and welfare provisions of this Agreement is restricted to the payment of premiums, or portions of premiums, as applicable, to the insurance carrier. Neither the benefits outlined in the Booklet, nor the insurance policies governing the application of the benefits, form part of this Agreement. All benefits are subject to the conditions of eligibility and any other limitations expressed in the insurance carrier's policy. The Employer has no responsibility for the administration of any insurance policy.

# 22.04 Eligibility

Employees become eligible for enrolment in the coverage outlined in this Article upon successful completion of Probation, subject to any eligibility restrictions contained in the applicable plans. Participation in the Group Benefit Plan is optional.

# 22.05 Premium Payments

The Employer and the employee shall each pay fifty percent (50%) of the premium cost. Amendments to the Employer's existing health care benefits plan coverage and premiums will apply to all employees in the bargaining unit whenever such changes are introduced during the term of the collective agreement.

# 22.06 Benefit Coverage

The benefits provided will be as outlined in the Group Benefits Plan Booklet, as detailed in Appendix C.

# 22.07 Sick Pay

a. Employees who are sick or injured and unable to attend work for a reason which compensation is not payable under WorkSafe BC, will receive up to five (5) day's pay per calendar year. The five (5) sick days will accrue effective January 1<sup>st</sup> of each year. Fifty percent (50%) of any unused sick time will be paid out at the end of each calendar year, on the first payday the following January.

# b. Reporting

An employee shall be required to report in, by telephone or text, to the manager, as far in advance of the start of their shift as possible. Failure to report such absence may jeopardize the employee's right to sick pay.

# **ARTICLE 23 – Duration**

# 23.01 Term

The term of this Agreement shall be from May 1, 2022 to and including April 30, 2026.

# 23.02 Notice to Bargain

Either party to this Agreement may at any time within four (4) months immediately preceding the expiry of this Agreement, by written notice require the other party to commence collective bargaining. Should either party give notice to bargain, this Agreement shall thereafter continue in full force and effect and neither party shall make any changes in the terms of the said Agreement, or increase or decrease the rate of pay of any employee for whom the collective bargaining is being conducted, or alter any other term or condition of employment until:

- a. The Union commences a lawful strike in compliance with the *Labour Relations Code* of British Columbia, or
- b. The Company commences a lawful lock-out in compliance with the *Labour Relations Code* of British Columbia.

# 23.03 Exclusion

The parties agree to exclude the operation of subsections (2) and (3) of Section 50 of the Labour Relations Code.

SIGNED THIS 22	22	February	2023	_
	DAY OF		,	•

For the Union UFCW 1518

Matt Stewart (Feb 22, 2023 13:56 PST)

For the Employer

Source Office Furniture & Systems Ltd.

Kim Novak President Matt Stewart President

# Appendix A – Wage Rates

Position Current	Current	01-May-22 (4%)		01-May-23 (2.5%)		01-May-24 (2.5%)		01-May-25 (2.5%)		Retention Table	
		Wage Increase	Resulting Wage	Wage Increase	Resulting Wage	Wage Increase	Resulting Wage	Wage Increase	Resulting Wage	Years of Service	Addition
Service Tech	\$23.25	\$0.93	\$24.18	\$0.60	\$24.78	\$0.62	\$25.40	\$0.64	\$26.04	4	\$0.50
Delivery Driver	\$21.75	\$0.87	\$22.62	\$0.57	\$23.19	\$0.58	\$23.77	\$0.59	\$24.36	8	\$0.50
Machine Operator	\$21.40	\$0.86	\$22.26	\$0.56	\$22.81	\$0.57	\$23.38	\$0.58	\$23.97	10	\$0.50
Assembler	\$20.75	\$0.83	\$21.58	\$0.54	\$22.12	\$0.55	\$22.67	\$0.57	\$23.24	15	\$0.50
Warehousperson/ Swamper	\$20.60	\$0.82	\$21.42	\$0.54	\$21.96	\$0.55	\$22.51	\$0.56	\$23.07		

NOTE: Wage increases is retroactive to May 1, 2022

Any employee overscale shall be entitled to the same wage increases on the dates as noted above, as well as, the retention increases.

RENEWED THIS 29 DAY OF September , 2022

For the Union UFCW 1518

For the Employer Source Office Furniture & Systems Ltd.

Mes

Matt Stewart (Feb 22, 2023 13:56 PST)

Kim Novak President Matt Stewart President

# Revised March 1, 2009

Source Office Furnishings is committed to providing a workplace free from harassment based on race, creed, color, national origin, political or religious affiliation, gender, sexual orientation, marital status, family relationship, disability and other personal characteristics or circumstances that are clearly unrelated to a person's ability to do their job.

# **Definition of "Workplace Harassment"**

The workplace includes all locations where business or social activities of the group are conducted. Workplace harassment can also include incidents that happen away from work (e.g. unwelcome phone calls or visits to a person's home if the harasser is in some way connected to the group). Source is committed to protecting its employees from harassment by customers, other employees and members of the public at large.

Harassment is considered a form of discrimination. Harassment will be considered to have taken place if a reasonable person ought to have known that such a behavior was unwelcome. Harassment may result from one incident or a series of incidents. It may be directed at a specific individual or groups but may also include any comments or conduct that create an environment that is hostile, intimidating or offensive. Harassment can include, but is not limited to, the following examples:

- Racial or ethnic slurs
- Written or verbal abuse or threats
- Unwelcome sexual remarks, invitations or requests
- Unwelcome remarks, jokes, taunts or suggestions about a person's body, age, marital status, ethnic or racial origin, religion, sexual orientation etc
- Displays of pornographic, sexist, racist or other offensive or derogatory material (e.g. graffiti or pictures)
- Practical jokes that result in embarrassment or insult
- Leering (suggestive staring) or other offensive gestures
- Unwanted physical contact
- Vandalism of personal property
- Patronizing or condescending behavior
- Physical or sexual assault

# **Right to complain**

Anyone has a right to complain about a situation they believe to be harassment; there will be no reprisals for doing so. However, disciplinary action may be taken against complaints filed maliciously or repeated false complaints.

# Who may complain?

Generally complaints should be filed by the victim of the alleged harassment or discrimination. However, complaints can also be made by a group of people who may have been subject to the same offensive treatment, by co-workers who witnessed the incidents or by a third party complaining on behalf of the victim.

# Options available to employees

- If at all possible tell the harasser to stop.
- Keep a record- time, date, place etc. Name witnesses if there are any.
- Seek advice from co-workers.
- Bring the complaint to the attention of management.

RENEWED THIS 29 DAY OF September , 2022 .

For the Union UFCW 1518 For the Employer Source Office Furniture & Systems Ltd.

pre Matt Stewart (Feb 22, 2023 13:56 PST)

Kim Novak President Matt Stewart President

# **APPENDIX C – Source Office Furniture Group Benefits Plan**

#### **Enrollment Process**

Employees who have successfully completed their probation will receive a notice of eligibility for Group benefits. Employees must select to join the Group Benefit Plan or not, in writing.

Employees who select to join the Group benefit Plan will meet with the Office Manager to complete their sign-up.

Employees will then be set-up on-line as a member of the Source Office Furniture Group Benefit Plan. Drug cards and other documentation will be sent directly to the employee's home address.

#### To Make a Claim

To make a claim, employees will use the drug card or submit a claim on-line or use a claim form and mail it to the insurance company. The Office Manager is available for assistance with this process.

# **Group Benefits**

Per attachment

	29 DAY OF -	September	2022	
<b>RENEWED THIS -</b>	DAT UF -			•

For the Union UFCW 1518

For the Employer Source Office Furniture & Systems Ltd.

pues

Matt Stewart (Feb 22, 2023 13:56 PST)

Kim Novak President

Matt Stewart President



My Group Benefits Plan





#### **BENEFIT DETAILS**

Great-West Life is a leading Canadian life and health insurer. Great-West Life's financial security advisors work with our clients from coast to coast to help them secure their financial future. We provide a wide range of retirement savings and income plans; as well as life, disability and critical illness insurance for individuals and families. As a leading provider of employee benefits in Canada, we offer effective benefit solutions for large and small employee groups.

#### **Great-West Life Online**

Visit our website at www.greatwestlife.com for:

- information and details on Great-West Life's corporate profile and our products and services
- investor information
- news releases
- contact information
- claim forms and the ability to submit certain claims online

#### **Great-West Life Online Services for Plan Members**

As a Great-West Life plan member, you can also register for GroupNet<sup>™</sup> for Plan Members at **www.greatwestlife.com**. To access this service, click on the GroupNet for Plan Members link. Follow the instructions to register. Make sure to have your plan and ID numbers available before accessing the website.

This service enables you to access the following and much more, within a user friendly environment twenty-four hours a day, seven days a week:

- your benefit details and claims history
- personalized claim forms and cards
- online claim submission for
- extensive health and wellness content

Using our GroupNet Mobile app, you can access certain features of GroupNet for Plan Members to:

- submit many of your claims online part of our industry-leading GroupNet online services
- access personalized coverage information about benefits, claims and more quickly and easily, any time
- view card information
- locate the nearest provider who has access to Provider eClaims, through a built-in GPS mapping tool

In addition, by using GroupNet Text, you can get immediate information that is specific to your benefits. GroupNet Text allows you to use your mobile device to access detailed plan information, including:

- plan and member identification numbers
- coverage details (details available depend on your plan design)
- reimbursement amounts
- benefit maximums, balances and more

You can sign up for GroupNet Text on GroupNet for Plan Members under the Your Profile tab.

To use GroupNet Text, go to GroupNet for Plan Members and select the Your Profile tab, then text certain keywords to 204-289-1667. You will receive an instant text back providing information on your coverage. For a complete list of keywords, text Help. For a brief description of the type of information that a keyword provides, text Help along with the specific keyword.

Compatibility of GroupNet Text may vary by mobile device or operating system.

# **Great-West Life's Toll-Free Number**

To contact a customer service representative at Great-West Life for assistance with your , please call .

This booklet describes the principal features of the group benefit plan sponsored by your employer, but **Group Policy Nos. and** issued by Great-West Life are the governing documents. If there are variations between the information in the booklet and the provisions of the policies, the policies will prevail.

This booklet contains important information and should be kept in a safe place known to you and your family.

The Plan is underwritten by



and arranged by

This booklet was prepared on:

#### Access to Documents

You have the right, upon request, to obtain a copy of the policy, your application and any written statements or other records you have provided to Great-West Life as evidence of insurability, subject to certain limitations.

#### Legal Actions

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act* (for actions or proceedings governed by the laws of Alberta and British Columbia), *The Insurance Act* (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), or other applicable legislation. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the Quebec Civil Code.

#### Appeals

You have the right to appeal a denial of all or part of the insurance or benefits described in the contract as long as you do so within one year of the initial denial of the insurance or a benefit. An appeal must be in writing and must include your reasons for believing the denial to be incorrect.

#### **Benefit Limitation for Overpayment**

If benefits are paid that were not payable under the policy, you are responsible for repayment within 30 days after Great-West Life sends you a notice of the overpayment, or within a longer period if agreed to in writing by Great-West Life. If you fail to fulfil this responsibility, no further benefits are payable under the policy until the overpayment is recovered. This does not limit Great-West Life's right to use other legal means to recover the overpayment.

# **Protecting Your Personal Information**

At Great-West Life, we recognize and respect the importance of privacy. Personal information about you is kept in a confidential file at the offices of Great-West Life or the offices of an organization authorized by Great-West Life. Great-West Life may use service providers located within or outside Canada. We limit access to personal information in your file to Great-West Life staff or persons authorized by Great-West Life who require it to perform their duties, to persons to whom you have granted access, and to persons authorized by law. Your personal information may be subject to disclosure to those authorized under applicable law within or outside Canada.

We use the personal information to administer the group benefits plan under which you are covered. This includes many tasks, such as:

- determining your eligibility for coverage under the plan
- enrolling you for coverage
- investigating and assessing your claims and providing you with payment
- managing your claims
- verifying and auditing eligibility and claims
- creating and maintaining records concerning our relationship
- underwriting activities, such as determining the cost of the plan, and analyzing the design options of the plan
- preparing regulatory reports, such as tax slips

We may exchange personal information with your health care providers, your plan administrator, any insurance or reinsurance companies, administrators of government benefits or other benefit programs, other organizations, or service providers working with us or the above when relevant and necessary to administer the plan.

As plan member, you are responsible for the claims submitted. We may exchange personal information with you or a person acting on your behalf when relevant and necessary to confirm coverage and to manage the claims submitted.

You may request access or correction of the personal information in your file. A request for access or correction should be made in writing and may be sent to any of Great-West Life's offices or to our head office.

For a copy of our Privacy Guidelines, or if you have questions about our personal information policies and practices (including with respect to service providers), write to Great-West Life's Chief Compliance Officer or refer to www.greatwestlife.com.

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# **Benefit Summary**

This summary must be read together with the benefits described in this booklet.

Employee Basic Life Insurance	, reducing by 50% at age 65
Dependent Basic Life Insurance	
Spouse Child	
Optional Life Insurance	Available in units to a maximum of , for you or your spouse, subject to approval of evidence of insurability
	If you are covered under this plan as both an employee and a spouse, you are limited to the maximum
Employee Accidental Death, Dismemberment and Specific Loss (Principal Sum)	An amount equal to your Basic Life Insurance

# Healthcare

# Covered expenses will not exceed customary charges

Deductible

Nil

**Reimbursement Levels** 

Out-of-Country Care

- Non-Emergency Expenses
  Emergency Expenses
- In-Canada Prescription
- Drug Expenses
- All Other Expenses

Basic Expense Maximums

Hospital Home Nursing Care In-Canada Prescription Drugs Viscosupplementation	room for a maximum of 12 months per condition Included
Hearing Aids Incontinence Supplies Custom-fitted Orthopedic Shoes	each calendar year
Custom-made Foot Orthotics Myoelectric Arms External Breast Prosthesis	\$10,000 per prosthesis 1 every 12 months
Surgical Brassieres Mechanical or Hydraulic Patient Lifters	\$2,000 per lifter once every 5 years
Outdoor Wheelchair Ramps Blood-glucose Monitoring Machines	\$2,000 lifetime 1 every 4 years
Transcutaneous Nerve Stimulators Extremity Pumps for Lymphedema Custom-made Compression Hose Wigs for Cancer Patients	\$700 lifetime \$1,500 lifetime

Paramedical Expense Maximums

Chiropractors, Podiatrists, Naturopaths, Osteopaths, Psychologists, Social Workers, Physiotherapists, Massage Therapists, Speech Therapists, Occupational Therapists and Acupuncturists

combined each calendar year

Visioncare Expense Maximums

Eye Examinations

- dependent children
- under age
- all others

Out-Of-Country Care

Expense Maximums

- Emergency Care

- Non-Emergency Care

Lifetime Healthcare Maximum Unlin

Unlimited

# Dentalcare

# Covered expenses will not exceed customary charges

Payment Basis

Deductible

Nil

Reimbursement Levels

Basic Coverage Major Coverage

Plan Maximum

each calendar year

# COMMENCEMENT AND TERMINATION OF COVERAGE

You are eligible to participate in the plan after of continuous employment. You are considered continuously employed only if you satisfy the actively at work requirement throughout the eligibility waiting period.

- You must apply for coverage no later than 31 days after you become eligible. After 31 days, you must provide evidence of insurability for you and your dependents before you can participate.
- You must be actively at work when coverage takes effect, otherwise the coverage will not be effective until you return to work.

Increases in your benefits while you are covered by this plan will not become effective unless you are actively at work.

• Temporary and seasonal employees, and part-time employees who work less than hours per week may not join the plan.

Your coverage terminates when your employment ends, you are no longer eligible, you stop paying the required premiums, or the policy terminates, whichever is earliest.

- Your dependents' coverage terminates when your insurance terminates or your dependent no longer qualifies, whichever is earlier.
- Your coverage may be extended if it would have terminated because you are not actively at work due to disease or injury, temporary lay-off or leave of absence. Your employer will provide you with details.
- When your coverage terminates, you may be entitled to an extension of benefits under the plan. Your employer will provide you with details.

# **Survivor Benefits**

If you die while your coverage is still in force, the health and dental benefits for your dependents will be continued for a period of or until they no longer qualify, whichever happens first.

# DEPENDENT COVERAGE

Dependent means:

• Your spouse, legal or common-law.

A common-law spouse is a person who has been living with you in a conjugal relationship for at least

• Your unmarried children under age , or under age if they are full-time students.

Children under age are not covered if they are working more than 30 hours a week, unless they are full-time students.

Children who are incapable of supporting themselves because of physical or mental disorder are covered without age limit if the disorder begins before they turn, or while they are students under, and the disorder has been continuous since that time.

# **BENEFICIARY DESIGNATION**

You may make, alter, or revoke a designation of beneficiary as permitted by law. Any designation of beneficiary you made under your employer's previous policy prior to the effective date of this policy does not apply under this policy. You should review any beneficiary designation made under this policy from time to time to ensure that it reflects your current intentions. You may change the designation by completing a form available from your employer.

# EMPLOYEE BASIC LIFE INSURANCE

On your death, Great-West Life will pay your life insurance benefits to your named beneficiary. If you have not named a beneficiary or there is no surviving beneficiary at the time of your death, payment will be made to your estate. Your employer will explain the claim requirements to your beneficiary.

- Your life insurance will not continue past the end of the day before the date you reach age .
- If you are under age 65 and have been disabled for 6 months or more, you may be entitled to have your life insurance continued without premium payment until you reach age 65. You are considered disabled if injury or disease prevents you from being gainfully employed in any job. Great-West Life will determine your qualification for waiver of premium benefits. If you believe you may be eligible, contact your employer for claim forms. You must apply for waiver of premium benefits within 12 months of becoming eligible.
- Your life insurance will terminate if you are age 65 or over and you are not actively at work. However, if you are not actively at work because of disease or injury, your life insurance may be continued on a premium paying basis for up to 6 months following the date you ceased to be actively at work.
- If any or all of your insurance terminates on or before your 65<sup>th</sup> birthday, you may be eligible to apply for an individual conversion policy without providing proof of your insurability. You must apply and pay the first premium no later than 31 days after your group insurance terminates. See your employer for details.

# DEPENDENT BASIC LIFE INSURANCE

If one of your dependents dies, Great-West Life will pay you the dependent life insurance benefit. Your employer will explain the claim requirements.

- Your dependent life insurance will not continue past the end of the day before the date you reach age
- If you are disabled and the premiums for your employee life insurance are waived, your dependent life insurance will also continue without premium payment until your own coverage terminates or your dependents no longer qualify.
- Your dependent life insurance will terminate if you are age 65 or over and you are not actively at work. However, if you are not actively at work because of disease or injury and your employee life insurance is continued, your dependent life insurance will be continued on the same basis.
- If your spouse's insurance terminates on or before his or her 65<sup>th</sup> birthday, he or she may be eligible for an individual conversion policy without providing proof of insurability. You or your spouse must apply and pay the first premium no later than 31 days after the group insurance terminates. See your employer for details.

# **OPTIONAL LIFE INSURANCE**

Optional Life Insurance allows you to choose additional coverage for yourself and your spouse. Check the **Benefit Summary** for the amount of Optional Life Insurance available. When you apply for Optional Life Insurance, you must provide proof of insurability, and the application must be approved by Great-West Life. If you or your spouse dies within two years after applying for Optional Life Insurance, Great-West Life has the right to verify any medical information you or your spouse provided. If any inconsistencies are discovered, the claim will be denied and any premiums paid will be refunded.

On your death, Great-West Life will pay your life insurance to your named beneficiary. If you have not named a beneficiary or there is no surviving beneficiary at the time of your death, payment will be made to your estate. Your employer will explain the claim requirements. If your spouse dies you will be paid the amount for which he or she was insured.

- If you are approved for waiver of premium on your basic life insurance, any optional life insurance for yourself or your spouse will also continue without premium payment as long as your basic life insurance continues but not beyond the date your optional insurance would otherwise terminate.
- If your or your spouse's optional life insurance terminates, you or your spouse may be eligible to apply for an individual conversion policy without providing proof of insurability. You must apply and pay the first premium no later than 31 days after your group insurance terminates. See your employer for details.
- Your optional life insurance will not continue past the end of the day before the date you reach age 65. Your spouse's coverage will not continue past the end of the day before the date you or your spouse reaches age 65, whichever comes first.

# Limitation

No benefit is paid for suicide within the first two years of initial or increased optional life coverage. In such a situation, Great-West Life refunds the premiums that have been received.

# ACCIDENTAL DEATH, DISMEMBERMENT AND SPECIFIC LOSS (AD&D) INSURANCE

If you suffer one of the losses listed below as the result of an accident which occurs while you are insured, you will be paid the factor or portion of the Principal Sum shown opposite the loss in the table below. The loss must occur no later than 365 days after the accident. For loss of use, the loss must be continuous for 365 days. If you suffer multiple losses to the same limb as the result of the same accident, only the loss providing the highest amount payable will be paid.

If you die as a result of an accident, Great-West Life will pay the Principal Sum to your named beneficiary. If you have not named a beneficiary or there is no surviving beneficiary at the time of your death, payment will be made to your estate. Your employer will explain the claim requirements to your beneficiary.

The Principal Sum is the maximum amount that will be paid for all injuries resulting from the same accident. For paraplegia, hemiplegia, and quadriplegia, the maximum amount that will be paid for all injuries resulting from the same accident is two times the Principal Sum.

# Loss

# Amount Payable

Life Both hands or both feet Sight of both eyes One hand and one foot	Principal Sum Principal Sum Principal Sum Principal Sum
One hand and sight of one eye	Principal Sum
One foot and sight of one eye	Principal Sum
Speech and Hearing in both ears	Principal Sum
One arm or one leg	3/4 Principal Sum
One hand or one foot or sight of	
one eye	1/2 Principal Sum
Speech	1/2 Principal Sum
Hearing in both ears	1/2 Principal Sum
Thumb and index finger or at	·
least 4 fingers of one hand	1/4 Principal Sum
All toes of one foot	1/8 Principal Sum

# Loss of Use

Both arms and both legs	
(quadriplegia)	2 X Principal Sum
Both legs (paraplegia)	2 X Principal Sum
One arm and one leg on the same	
side of the body (hemiplegia)	2 X Principal Sum
One arm and one leg on different	
sides of the body	Principal Sum
Both arms or both hands	Principal Sum
One hand and one leg	Principal Sum
One leg or one arm	3/4 Principal Sum
One hand	1/2 Principal Sum

Your AD&D insurance will not continue past the end of the day before the date you reach age .

# Surgical Reattachment

If you suffer the loss of a limb that is surgically reattached, Great-West Life will pay 50% of the amount that would have been payable if the loss had been permanent, regardless of the amount of use regained. The balance of the benefit will be payable if the reattachment fails and the reattached part is removed within one year after the reattachment was performed.

### Repatriation

If you die as the result of an accident that is at least 150 kilometres away from your home, Great-West Life will pay up to \$2,500 for the preparation and transportation of your body to the place of burial or cremation less any amounts paid under this plan's global medical assistance benefit.

# **Educational Benefit for Dependent Children**

If benefits are payable under this benefit provision for your death, Great-West Life will pay the tuition fees for enrolling your dependent children as full-time students at a post-secondary institution. To qualify for an educational benefit, a dependent child must have been enrolled as a full-time student at a post-secondary institution at the time of the accident causing your death, or he must have been enrolled as a full-time student at the secondary school level at the time of the accident causing your death and enrols as a full-time student at a post-secondary institution within 365 days after the accident.

Great-West Life will pay up to of the Principal Sum, or , whichever is less, for each year of full-time postsecondary school enrolment. Great-West Life will pay the educational benefit each year for a maximum of 4 consecutive years upon receipt of proof of full-time enrolment.

No benefits will be paid for tuition expenses incurred before the accident, or room or board or other ordinary living, travelling, or clothing expenses.

# **Family Transportation Benefit**

If you are hospitalized more than 150 kilometres from your home as a result of an injury for which benefits are payable under this benefit provision, Great-West Life will pay the actual expense incurred less any amount paid for the same expenses under this plan's global medical assistance benefit, up to , for transportation and lodging expenses for one family member to join you.

Benefits for lodging are limited to moderate quality accommodation for the area of hospitalization. Telephone expenses and taxicab and car rental charges are included. Meal expenses are not covered.

Transportation expenses are limited to round trip economy class transportation. If a private vehicle is used, expenses are limited to \$.44 per kilometre travelled.

# **Occupational Training Benefit for Spouses**

If benefits are payable under this benefit provision for your death, Great-West Life will pay for expenses associated with your spouse's enrolment in an accredited occupational training program. The purpose of the training program must be to provide the spouse with at least the minimum qualifications required for employment in an occupation for which the spouse would not otherwise qualify.

Great-West Life will pay up to of the Principal Sum, or , whichever is less.

No benefits will be paid for expenses incurred more than 3 years after the accident causing your death, or room or board or other ordinary living, travelling, or clothing expenses.

#### **Educational Benefit**

If benefits are payable under this benefit provision for an injury that requires you to change occupations, Great-West Life will pay the tuition fees for enrolling you as a student at a post-secondary institution for training in a new occupation. To qualify for an educational benefit, you must enrol at a post-secondary institution within 365 days after the accident. Great-West Life will pay up to .

No benefits will be paid for tuition expenses incurred before the accident, expenses incurred more than 2 years after the accident causing the injury, or room or board or other ordinary living, travelling, or clothing expenses.

#### Wheelchair Benefit

If benefits are payable under this benefit provision for an injury that requires the use of a wheelchair for you to be ambulatory, Great-West Life will pay for alterations to your principal residence to make it wheelchair accessible and habitable, and modifications to a motor vehicle you use to make it accessible to and driveable by you.

Benefits for home alterations are payable only if the person or persons making the changes are experienced in home alterations for wheelchairs, and recommended by an organization recognized for providing support and assistance to wheelchair users.

Benefits for vehicle modifications are payable only if the person or persons making the changes are experienced in vehicle modification for wheelchairs, and the modifications are approved by the provincial vehicle licensing authority.

Great-West Life will pay the actual expense incurred less any amount paid for the same expenses under this plan's healthcare benefit, up to for all home and vehicle modifications combined.

No benefits will be paid for expenses incurred more than 365 days after the accident, or for subsequent alterations to your home or vehicle after an initial claim for benefits has been made under this wheelchair benefit provision.

# Limitations

No benefits are paid for injury or death resulting from:

- Intentionally self-inflicted injury or suicide
- Viral or bacterial infections, except pyogenic infections occurring through the injury for which loss is being claimed
- Any form of illness or physical or mental infirmity
- Medical or surgical treatment, except surgical reattachment
- War, insurrection or voluntary participation in a riot
- Service in the armed forces of any country
- Air travel serving as a crew member, or in aircraft owned, leased or rented by your employer, or air travel where the aircraft is not licensed or the pilot is not certified to operate the aircraft

# How to Make a Claim

- To claim benefits for yourself, ask your employer for a claim form. Complete it and return it to your employer.
- If you die accidentally, your employer will explain the claim requirements to your beneficiary.
- Claims should be submitted as soon as possible, but no later than 15 months after the loss.

# HEALTHCARE

A deductible may be applied before you are reimbursed. All expenses will be reimbursed at the level shown in the **Benefit Summary**. Benefits may be subject to plan maximums and frequency limits. Check the **Benefit Summary** for this information.

The plan covers customary charges for the following services and supplies. All covered services and supplies must represent reasonable treatment. Treatment is considered reasonable if it is accepted by the Canadian medical profession, it is proven to be effective, and it is of a form, intensity, frequency and duration essential to diagnosis or management of the disease or injury.

Your healthcare coverage will not continue past the end of the day before the date you reach age , unless otherwise required by law.

#### **Covered Expenses**

- Ambulance transportation to the nearest centre where adequate treatment is available
- Semi-private room and board in a hospital or the government authorized co-payment for accommodation in a nursing home is covered when provided in Canada and the treatment received is acute, convalescent or palliative care.
  - Acute care is active intervention required to diagnose or manage a condition that would otherwise deteriorate.
  - Convalescent care is active treatment or rehabilitation for a condition that will significantly improve as a result of the care and follows a 3-day confinement for acute care.
  - Palliative care is treatment for the relief of pain in the final stages of a terminal condition.

Semi-private room and board in an out-of-province hospital is covered when the treatment received is acute, convalescent or palliative care. For out-of-province accommodation, any difference between the hospital's standard ward rate and the government authorized allowance in your home province is also covered.

The plan also covers the hospital facility fee related to dental surgery and any out-of-province hospital out-patient charges not covered by the government health plan in your home province.

Residences established primarily for senior citizens or which provide personal rather than medical care are not covered.

 Home nursing services of a registered nurse, a registered practical nurse if you are a resident of Ontario or a licensed practical nurse if you are a resident of any other province, when services are provided in Canada. No benefits are paid for services provided by a member of your family or for services which do not require the specific skills of a registered or practical nurse

You should apply for a pre-care assessment before home nursing begins

• Chronic care, provided in a hospital, nursing home or for home nursing care in Canada, for a condition where improvement or deterioration is unlikely within the next 12 months, to a maximum of 180 days per disability. Coverage is provided when the confinement follows at least 5 consecutive days of hospitalization and occurs within 14 days of hospital discharge

- Drugs and drug supplies described below when prescribed by a person entitled by law to prescribe them, dispensed by a person entitled by law to dispense them, and provided in Canada. Benefits for drugs and drug supplies provided outside Canada are payable only as provided under the out-ofcountry emergency care provision.
  - Drugs which require a written prescription according to the Food and Drugs Act, Canada or provincial legislation in effect where the drug is dispensed, including contraceptive drugs and products containing a contraceptive drug
  - Injectable drugs including vitamins, insulins and allergy extracts. Syringes for self-administered injections are also covered
  - Disposable needles for use with non-disposable insulin injection devices, lancets and test strips
  - Extemporaneous preparations or compounds if one of the ingredients is a covered drug
  - Certain other drugs that do not require a prescription by law may be covered. If you have any questions, contact your plan administrator before incurring the expense.

The plan will also pay for preventative immunization vaccines and toxoids.

Unless medical evidence is provided to Great-West Life that indicates why a drug is not to be substituted, Great-West Life can limit the covered expense to the cost of the lowest priced interchangeable drug.

For drugs eligible under a provincial drug plan, coverage is limited to the deductible amount and coinsurance you are required to pay under that plan.

- Rental or, at Great-West Life's discretion, purchase of certain medical supplies, appliances and prosthetic devices prescribed by a physician
- Custom-made foot orthotics and custom-fitted orthopedic shoes, including modifications to orthopedic footwear, when prescribed by a physician
- Hearing aids, including batteries, tubing and ear molds provided at the time of purchase, when prescribed by a physician
- Diabetic supplies prescribed by a physician: Novolin-pens or similar insulin injection devices using a needle, blood-letting devices including platforms but not lancets. Lancets are covered under prescription drugs
- Blood-glucose monitoring machines prescribed by a physician
- Diagnostic x-rays and lab tests, when coverage is not available under your provincial government plan
- Treatment of injury to sound natural teeth. Treatment must start within 60 days after the accident unless delayed by a medical condition

A sound tooth is any tooth that did not require restorative treatment immediately before the accident. A natural tooth is any tooth that has not been artificially replaced

No benefits are paid for:

- accidental damage to dentures
- dental treatment completed more than 12 months after the accident
- orthodontic diagnostic services or treatment

- Out-of-hospital services of a qualified acupuncturist
- Out-of-hospital treatment of muscle and bone disorders, including diagnostic x-rays, by a licensed chiropractor
- Out-of-hospital services of a qualified massage therapist when referred by a physician (a new referral is to be provided every 12 months)
- Out-of-hospital services of a licensed naturopath
- Out-of-hospital services of a licensed osteopath, including diagnostic x-rays
- Out-of-hospital treatment of movement disorders by a licensed physiotherapist or a qualified occupational therapist
- Out-of-hospital treatment of foot disorders, including diagnostic x-rays, by a licensed podiatrist
- Out-of-hospital treatment by a registered psychologist
- Out-of-hospital treatment by a qualified social worker
- Out-of-hospital treatment of speech impairments by a qualified speech therapist

# Visioncare

• Eye examinations, including refractions, when they are performed by a licensed ophthalmologist or optometrist, and coverage is not available under your provincial government plan

# **Global Medical Assistance Program**

This program provides medical assistance through a worldwide communications network which operates 24 hours a day. The network locates medical services and obtains Great-West Life's approval of covered services, when required as a result of a medical emergency arising while you or your dependent is travelling for vacation, business or education. Coverage for travel within Canada is limited to emergencies arising more than 500 kilometres from home. You must be covered by the government health plan in your home province to be eligible for global medical assistance benefits. The following services are covered, subject to Great-West Life's prior approval:

- On-site hospital payment when required for admission, to a maximum of \$1,000
- If suitable local care is not available, medical evacuation to the nearest suitable hospital while travelling in Canada. If travel is outside Canada, transportation will be provided to a hospital in Canada or to the nearest hospital outside Canada equipped to provide treatment

When services are covered under this provision, they are not covered under other provisions described in this booklet

- Transportation and lodging for one family member joining a patient hospitalized for more than 7 days while travelling alone. Benefits will be paid for moderate quality lodgings up to \$1,500 and for a round trip economy class ticket
- If you or a dependent is hospitalized while travelling with a companion, extra costs for moderate quality lodgings for the companion when the return trip is delayed due to your or your dependent's medical condition, to a maximum of \$1,500

- The cost of comparable return transportation home for you or a dependent and one travelling companion if prearranged, prepaid return transportation is missed because you or your dependent is hospitalized. Coverage is provided only when the return fare is not refundable. A rental vehicle is not considered prearranged, prepaid return transportation
- In case of death, preparation and transportation of the deceased home
- Return transportation home for minor children travelling with you or a dependent who are left unaccompanied because of your or your dependent's hospitalization or death. Return or round trip transportation for an escort for the children is also covered when considered necessary
- Costs of returning your or your dependent's vehicle home or to the nearest rental agency when illness or injury prevents you or your dependent from driving, to a maximum of \$1,000. Benefits will not be paid for vehicle return if transportation reimbursement benefits are paid for the cost of comparable return transportation home

Benefits payable for moderate quality accommodation include telephone expenses as well as taxicab and car rental charges. Meal expenses are not covered.

# **Out-Of-Country Emergency Care**

The plan covers medical expenses incurred as a result of a medical emergency arising while you or your dependent is outside Canada for vacation, business or education purposes. To qualify for benefits, you must be covered by the government health plan in your home province.

A medical emergency is a sudden, unexpected injury or an acute episode of disease.

- The following services and supplies are covered when related to the initial medical treatment:
  - treatment by a physician
  - diagnostic x-ray and laboratory services
  - hospital accommodation in a standard or semi-private ward or intensive care unit, if the confinement begins while you or your dependent is covered
  - medical supplies provided during a covered hospital confinement
  - paramedical services provided during a covered hospital confinement
  - hospital out-patient services and supplies
  - medical supplies provided out-of-hospital if they would have been covered in Canada
  - drugs
  - out-of-hospital services of a professional nurse
  - ambulance services by a licensed ambulance company to the nearest centre where essential treatment is available
  - dental accident treatment if it would have been covered in Canada

If your medical condition permits you to return to Canada, benefits will be limited to the amount payable under this plan for continued treatment outside Canada or the amount payable under this plan for comparable treatment in Canada, plus return transportation, whichever is less.

# **Other Services and Supplies**

Great-West Life can, on such terms as it determines, cover services or supplies under this plan where the service or supply represents reasonable treatment.

#### Limitations

Great-West Life can decline a claim for services or supplies that were purchased from a provider that is not approved by Great-West Life.

Great-West Life can limit the covered expense for a service or supply to that of a lower cost alternative service or supply that represents reasonable treatment.

Except to the extent otherwise required by law, no benefits are paid for:

- Expenses private insurers are not permitted to cover by law
- Services or supplies for which a charge is made only because you have insurance coverage
- The portion of the expense for services or supplies that is payable by the government health plan in your home province, whether or not you are actually covered under the government health plan
- Any portion of services or supplies which you are entitled to receive, or for which you are entitled to a benefit or reimbursement, by law or under a plan that is legislated, funded, or administered in whole or in part by a government ("government plan"), without regard to whether coverage would have otherwise been available under this plan

In this limitation, government plan does not include a group plan for government employees

• Services or supplies that do not represent reasonable treatment

- Services or supplies associated with:
  - treatment performed only for cosmetic purposes
  - recreation or sports rather than with other daily living activities
  - the diagnosis or treatment of infertility
  - contraception, other than contraceptive drugs and products containing a contraceptive drug
- Services or supplies associated with a covered service or supply, unless specifically listed as a covered service or supply or determined by Great-West Life to be a covered service or supply
- Extra medical supplies that are spares or alternates
- Services or supplies received outside Canada except as listed under Out-of-Country Emergency Care
   and Global Medical Assistance
- Services or supplies received out-of-province in Canada unless you are covered by the government health plan in your home province and Great-West Life would have paid benefits for the same services or supplies if they had been received in your home province

This limitation does not apply to Global Medical Assistance

- Expenses arising from war, insurrection, or voluntary participation in a riot
- Eye examinations required by an employer as a condition of employment

- Services or supplies that Great-West Life has determined are not proportionate to the disease or injury or, where applicable, the stage or progression of the disease or injury. In determining whether a service or supply is proportionate, Great-West Life may take any factor into consideration including, but not limited to, the following:
  - clinical practice guidelines;
  - assessments of the clinical effectiveness of the service or supply, including by professional advisory bodies or government agencies;
  - information provided by a manufacturer or provider of the service or supply; and
  - assessments of the cost effectiveness of the service or supply, including by professional advisory bodies or government agencies.

In addition and except to the extent otherwise required by law, under the prescription drug coverage, no benefits are paid for:

• Drugs or drug supplies that appear on an exclusion list maintained by Great-West Life. Great-West Life may exclude coverage for all expenses for a drug or drug supply, or only those expenses that relate to the treatment of specific diseases or injuries or the stages or progressions of specific diseases or injuries. Great-West Life may add or remove a drug or drug supply from an exclusion list at any time.

For greater certainty, a drug or drug supply may be added to an exclusion list for any reason including, but not limited to, the following:

- Great-West Life determining that further information from professional advisory bodies, government agencies or the manufacturer of the drug or drug supply is necessary to assess the drug or drug supply; or
- Great-West Life determining that the drug or drug supply is not proportionate to the disease or injury or, where applicable, the stage or progression of the disease or injury.

- Atomizers, appliances, prosthetic devices, colostomy supplies, first aid supplies, diagnostic supplies or testing equipment
- Non-disposable insulin delivery devices or spring loaded devices used to hold blood letting devices
- Delivery or extension devices for inhaled medications
- Oral vitamins, minerals, dietary supplements, homeopathic preparations, infant formulas or injectable total parenteral nutrition solutions
- Diaphragms, condoms, contraceptive jellies, foams, sponges, suppositories, contraceptive implants or appliances
- Smoking cessation products
- Fertility drugs
- Any drug that does not have a drug identification number as defined by the Food and Drugs Act, Canada
- Any single purchase of drugs which would not reasonably be used within 34 days. In the case of certain maintenance drugs, a 100-day supply will be covered
- Drugs administered during treatment in an emergency room of a hospital, or as an in-patient in a hospital
- Non-injectable allergy extracts
- Drugs that are considered cosmetic, such as topical minoxidil or sunscreens, whether or not prescribed for a medical reason
- Drugs used to treat erectile dysfunction

# **Prior Authorization**

In order to determine whether coverage is provided for certain services or supplies, Great-West Life maintains a limited list of services and supplies that require prior authorization.

For services and supplies, including a listing of the prior authorization drugs, go to www.greatwestlife.com.

Prior authorization is intended to help ensure that a service or supply represents a reasonable treatment.

If the use of a lower cost alternative service or supply represents reasonable treatment, Great-West Life may require you or your dependent to provide medical evidence why the lower cost alternative service or supply cannot be used before coverage may be provided for the service or supply.

# Health Case Management

If you or one of your dependents apply for prior authorization of certain supplies or services, Great-West Life may contact you to participate in health case management. Health case management is a program recommended or approved by Great-West Life that may include but is not limited to:

- consultation with you or your dependent and the attending physician to gain understanding of the treatment plan recommended by the attending physician;
- comparison with the attending physician, of the recommended treatment plan with alternatives, if any, that represent reasonable treatment;
- identification to the attending physician of opportunities for education and support; and
- monitoring your or your dependent's adherence to the treatment plan recommended by the attending physician.

In determining whether to implement health case management, Great-West Life may assess such factors as the service or supply, the medical condition, and the existence of generally accepted medical guidelines for objectively measuring medical effectiveness of the treatment plan recommended by the attending physician.

# Health Case Management Limitation

Great-West Life can, on such terms as it determines, limit the payment of benefits for a service or supply where:

- Great-West Life has implemented health case management and you or your dependent do not participate or cooperate; or
- you or your dependent have not adhered to the treatment plan recommended by the attending physician with respect to the use of the service or supply.

# Health Case Management Expense Benefit

Expenses associated with health case management may be paid for by Great-West Life at its discretion. Expenses claimed under this provision must be pre-authorized by Great-West Life.

# **Designated Provider Limitation**

For a service or supply to which prior authorization applies or where Great-West Life has recommended or approved health case management, Great-West Life can require that a service or supply be purchased from or administered by a provider designated by Great-West Life, and:

- limit the covered expense for a service or supply that was not purchased from or administered by a provider designated by Great-West Life to the cost of the service or supply had it been purchased from or administered by the provider designated by Great-West Life; or
- decline a claim for a service or supply that was not purchased from or administered by a provider designated by Great-West Life.

# **Patient Assistance Program**

A patient assistance program may provide financial, educational or other assistance to you or your dependents with respect to certain services or supplies.

If you or your dependents are eligible for a patient assistance program, Great-West Life can require you or your dependent to apply to and participate in such a program. Where financial assistance is available from a patient assistance program in which Great-West Life requires participation, Great-West Life can reduce the amount of a covered expense for a service or supply by the amount of financial assistance you or your dependent is entitled to receive for that service or supply.

#### How to Make a Claim

• Out-of-country claims (including those for Global Medical Assistance expenses) should be submitted to Great-West Life as soon as possible after the expense is incurred. It is very important that you send your claims to the Great-West Life Out-of-Country Claims Department immediately as your Provincial or Territorial Medical Plan has very strict time limitations.

Access GroupNet for Plan Members to obtain a personalized claim form or obtain form M5432 (Statement of Claim Out-of-Country Expenses form) from your employer. You must also obtain the Government Assignment form, and residents of British Columbia, Quebec and Newfoundland & Labrador must also obtain the Special Government Claim form. The Great-West Life Out-of-Country Claims Department will forward the appropriate government forms to your attention when required.

You should complete all applicable forms, making sure all required information is included. Attach all original receipts and forward the claim to the Great-West Life Out-of-Country Claims Department. Be sure to keep a copy for your own records. The plan will pay all eligible claims including your Provincial or Territorial Medical Plan portion. Your Provincial or Territorial Medical Plan will then reimburse the plan for the government's share of the expenses.

Out-of-country claims must be submitted within a certain time period that varies by province or territory. For the claims submission period applicable in your province or territory or for any other questions or for assistance in completing any of the forms, please contact Great-West Life's Out-of-Country Claims Department at 1-800-957-9777.

• Claims for expenses incurred in Canada, for, may be submitted online. To use this online service you will need to be registered for GroupNet for Plan Members and signed up for direct deposit of claim payments with eDetails. For online claim submissions, your Explanation of Benefits will only be available online.

Online claims must be submitted to Great-West Life as soon as possible, but no later than 6 months after you incur the expense.

You must retain your receipt for 12 months from the date you submit your claim to Great-West Life as a record of the transaction, and you must submit it to Great-West Life on request.

 For all other Healthcare claims, access GroupNet for Plan Members to obtain a personalized claim form or obtain form M635D from your employer. Complete this form making sure it shows all required information.

Attach your receipts to the claim form and return it to the Great-West Life Benefit Payment Office as soon as possible, but no later than 15 months after you incur the expense.

• For drug claims, your employer will provide you with a prescription drug identification card. Present your card to the pharmacist with your prescription.

Before your prescription is filled, an Assure Claims check will be done. Assure Claims is a series of seven checks that are electronically done on your drug claim history for increased safety and compliance monitoring. This has been designed to improve the health and quality of life for you and your dependents. Checks done include drug interaction, therapeutic duplication and duration of therapy, allowing the pharmacist to react prior to the drug being dispensed. Depending on the outcome of the checks, the pharmacist may refuse to dispense the prescribed drug.

When your coverage ends, return your direct pay drug identification card to your employer.

# DENTALCARE

A deductible may be applied before you are reimbursed. All expenses will be reimbursed at the level shown in the **Benefit Summary**. Benefits may be subject to plan maximums and frequency limits. Check the **Benefit Summary** for this information.

The plan covers customary charges to the extent they do not exceed the dental fee guide level shown in the **Benefit Summary**. Denturist fee guides are applicable when services are provided by a denturist. Dental hygienist fee guides are applicable when services are provided by a dental hygienist practising independently.

All covered services and supplies must represent reasonable treatment. Treatment is considered reasonable if it is recognized by the Canadian Dental Association, it is proven to be effective, and it is of a form, frequency, and duration essential to the management of the person's dental health. To be considered reasonable, treatment must also be performed by a dentist or under a dentist's supervision, performed by a dental hygienist entitled by law to practise independently, or performed by a denturist.

Your dentalcare coverage will not continue past the end of the day before the date you reach age .

#### **Treatment Plan**

• Before incurring any large dental expenses, ask your dental service provider to complete a treatment plan and submit it to Great-West Life. Great-West Life will calculate the benefits payable for the proposed treatment, so you will know in advance the approximate portion of the cost you will have to pay.

#### **Basic Coverage**

The following expenses will be covered:

- Diagnostic services including:
  - one complete oral examination every 24 months
  - limited oral examinations, except that only one limited oral examination is covered in any 12-month period that a complete oral examination is also performed
  - limited periodontal examinations
  - consultation with the patient
  - complete series of x-rays every 24 months
  - intra-oral x-rays to a maximum of 15 films every 24 months and a panoramic x-ray every 36 months. Services provided in the same 12 months as a complete series are not covered
- Preventive services including:
  - polishing
  - topical application of fluoride
  - scaling, limited to a maximum combined with periodontal root planing of

A time unit is considered to be a 15-minute interval or any portion of a 15-minute interval

- pit and fissure sealants on bicuspids and permanent molars every 60 months

- space maintainers including appliances for the control of harmful habits
- finishing restorations
- interproximal disking
- recontouring of teeth
- Minor restorative services including:
  - caries, trauma, and pain control
  - amalgam and tooth-coloured fillings. Replacement fillings are covered only if the existing filling is at least 2 years old or the existing filling was not covered under this plan
  - retentive pins and prefabricated posts for fillings
  - prefabricated crowns for primary teeth
- Endodontics. Root canal therapy for permanent teeth will be limited to one course of treatment per tooth. Repeat treatment is covered only if the original treatment fails after the first 18 months
- Periodontal services including:
  - root planing, limited to a maximum combined with preventive scaling of
  - occlusal adjustment and equilibration, limited to a combined maximum of

A time unit is considered to be a 15-minute interval or any portion of a 15-minute interval

- Denture maintenance, including:
  - denture relines for dentures at least 6 months old, once every 36 months
  - denture rebases for dentures at least 2 years old, once every 36 months
  - resilient liner in relined or rebased dentures after the 3-month post-insertion care period has elapsed, once every 36 months
  - denture repairs and additions and resetting of denture teeth after the 3-month post-insertion care period has elapsed
  - denture adjustments after the 3-month post-insertion care period has elapsed, once every 12 months
- Oral surgery
- Adjunctive services

#### **Major Coverage**

- Crowns. Coverage for crowns on molars is limited to the cost of metal crowns. Coverage for complicated crowns is limited to the cost of standard crowns.
- Onlays and inlays. Coverage for tooth-coloured onlays and inlays on molars is limited to the cost of metal onlays and inlays.

Replacement crowns, onlays and inlays are covered when the existing restoration is at least 5 years old and cannot be made serviceable.

- Standard complete dentures, standard cast or acrylic partial dentures or complete overdentures or bridgework when required to replace one or more teeth extracted while the person is covered. Overdentures and bridgework are covered only when standard complete or partial dentures are not viable treatment options. Coverage for tooth-coloured retainers and pontics on molars is limited to the cost of metal retainers and pontics. Replacement appliances are covered only when:
  - the existing appliance is a covered temporary appliance
  - the existing appliance is at least 5 years old and cannot be made serviceable. If the existing appliance is less than 5 years old, a replacement will still be covered if the existing appliance becomes unserviceable while the person is covered and as a result of the placement of an initial opposing appliance or the extraction of additional teeth.

If additional teeth are extracted but the existing appliance can be made serviceable, coverage is limited to the replacement of the additional teeth

- Denture-related surgical services for remodelling and recontouring oral tissues
- Denture and bridgework maintenance following the 3-month post-insertion period including:
  - denture remakes, once every 36 months
  - tissue conditioning
  - repairs to covered bridgework
  - removal and recementation of bridgework

#### Limitations

If you do not apply for dentalcare coverage within one month after you become eligible, benefits will be subject to the following restrictions, unless the expenses are incurred solely as a result of an accident occurring after the coverage takes effect:

- Basic Coverage expenses are limited to \$100 during the first 12 months of your coverage
- No benefits will be paid for Major Coverage expenses during the first 12 months of your coverage

No benefits are paid for:

- Duplicate x-rays, custom fluoride appliances, any oral hygiene instruction and nutritional counselling
- The following endodontic services root canal therapy for primary teeth, isolation of teeth, enlargement of pulp chambers and endosseous intra coronal implants
- The following periodontal services desensitization, topical application of antimicrobial agents, subgingival periodontal irrigation, charges for post surgical treatment and periodontal re-evaluations
- The following oral surgery services implantology, surgical movement of teeth, services performed to remodel or recontour oral tissues (other than minor alveoloplasty, gingivoplasty and stomatoplasty) and alveoloplasty or gingivoplasty performed in conjunction with extractions. Services for remodelling and recontouring oral tissues will be covered under Major Coverage
- Hypnosis or acupuncture
- Veneers, recontouring existing crowns, and staining porcelain
- Crowns, onlays or inlays if the tooth could have been restored using other procedures. If crowns, onlays or inlays are provided, benefits will be based on coverage for fillings

• Overdentures or initial bridgework if provided when standard complete or partial dentures would have been a viable treatment option.

If overdentures are provided, coverage will be limited to standard complete dentures.

If initial bridgework is provided, coverage will be limited to a standard cast partial denture and restoration of abutment teeth when required for purposes other than bridgework

If additional bridgework is performed in the same arch within 60 months, coverage will be limited to the addition of teeth to a denture and restoration of abutment teeth when required for purposes other than bridgework

Benefits will be limited to standard dentures or bridgework when equilibrated and gnathological dentures, dentures with stress breaker, precision and semi-precision attachments, dentures with swing lock connectors, partial overdentures and dentures and bridgework related to implants are provided

- Services or supplies covered under Healthcare. If the amount payable would be greater under this Dentalcare benefit, then benefits will be paid under Dentalcare and not Healthcare
- Orthodontic treatment
- Expenses private plans are not permitted to cover by law
- Services and supplies you are entitled to without charge by law or for which a charge is made only because you have insurance coverage

- Services or supplies that do not represent reasonable treatment
- Treatment performed for cosmetic purposes only
- Congenital defects or developmental malformations in people 19 years of age or over
- Temporomandibular joint disorders, vertical dimension correction or myofacial pain
- Expenses arising from war, insurrection, or voluntary participation in a riot

#### How to Make a Claim

• Claims for expenses incurred in Canada may be submitted online. Access GroupNet for Plan Members to obtain a personalized claim form or obtain form M445D from your employer and have your dental service provider complete the form. The completed claim form will contain the information necessary to enter the claim online. To use the online service you will need to be registered for GroupNet for Plan Members and signed up for direct deposit of claim payments with eDetails. For online claim submissions, your Explanation of Benefits will only be available online.

Online claims must be submitted to Great-West Life as soon as possible, but no later than 6 months after the dental treatment.

You must retain your receipt for 12 months from the date you submit your claim to Great-West Life as a record of the transaction, and you must submit it to Great-West Life on request.

• For all other Dentalcare claims, access GroupNet for Plan Members to obtain a personalized claim form or obtain form M445D from your employer. Have your dental service provider complete the form and return it to the Great-West Life Benefit Payment Office as soon as possible, but no later than 15 months after the dental treatment.

#### **COORDINATION OF BENEFITS**

- Benefits for you or a dependent will be directly reduced by any amount payable under a government plan. If you or a dependent are entitled to benefits for the same expenses under another group plan or as both an employee and dependent under this plan or as a dependent of both parents under this plan, benefits will be co-ordinated so that the total benefits from all plans will not exceed expenses.
- You and your spouse should first submit your own claims through your own group plan. Claims for dependent children should be submitted to the plan of the parent who has the earlier birth date in the calendar year (the year of birth is not considered). If you are separated or divorced, the plan which will pay benefits for your children will be determined in the following order:
  - 1. the plan of the parent with custody of the child;
  - 2. the plan of the spouse of the parent with custody of the child;
  - 3. the plan of the parent without custody of the child;
  - 4. the plan of the spouse of the parent without custody of the child

You may submit a claim to the plan of the other spouse for any amount which is not paid by the first plan.

#### DIAGNOSTIC AND TREATMENT SUPPORT SERVICES (BEST DOCTORS® SERVICE)

This service is designed to allow access to the expertise of specialists, resources, information and clinical guidance.

You, your dependents and your and your dependent's physician can access this service if the physician has made a diagnosis of a serious physical illness or condition for which there is objective evidence, or if the covered person or his or her physician suspects that the person has this illness or condition. This service is made up of a unique step-by-step process that may help address questions or concerns about a serious physical illness or condition. This may include confirming the diagnosis and suggesting the most effective treatment plan by drawing on a global database of up to 50,000 peer-ranked specialists.

#### How it works

- Access diagnostic and treatment support services by calling 1-877-419-BEST (2378) toll-free.
- The person accessing the service will be connected with a member advocate who will be dedicated to his or her case and will provide support through the process. The member advocate will take the necessary medical history and answer the person's questions. Any information provided is not shared with either your employer or the administrator of your health plan.
- Based on the information provided, the member advocate determines the optimal level of service required.
- The member advocate may provide information, resources, guidance and advice individually tailored to meet the covered person's health needs, and can help identify individual community supports and resources available.

- If it is appropriate, the member advocate may arrange for an in-depth review of the covered person's medical file to assist in confirming the diagnosis and help develop a treatment plan. This review may include collecting, deconstructing and reconstructing medical records, pathology retesting and analyzing test results. A written report outlining the conclusions and recommendations of the specialists will be forwarded to the person accessing the service. Generally, this process takes 6 to 8 weeks. Timeframes may vary depending on the complexity of the case and amount of medical records to collect.
- If the covered person decides to seek treatment by a different physician, the member advocate can help identify a specialist qualified to meet his or her specific medical needs. Expenses incurred for travel and treatment are not covered by this service.
- If the covered person decides to seek treatment outside Canada, the member advocate can arrange referrals and can help book accommodations. The member advocate can also assist in accessing hospital and physician discounts, arrange for the forwarding of medical information and monitor the treatment process. Expenses incurred for travel and treatment are not covered by this service.
- The member advocate may identify a Best Doctors specialist suited to answer basic questions about health concerns and treatment options. Answers will be provided in a written report sent by email to the person accessing the service.

These services are not insured services. Great-West Life is not responsible for the provision of the services, their results, or any treatment received or requested in connection with the services

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