

## **Proposal for a Private Member's Bill: *An Act to Amend the Public Service Act***

### **Purpose**

The purpose of this proposal for a Private Member's Bill is to give nurses in the Northwest Territories the opportunity to join together as a separate bargaining unit to negotiate their own collective agreement with the Government of the Northwest Territories (GNWT). This would apply to all nurses required to be registered with the College and Association of Nurses of the Northwest Territories and Nunavut (CANNN).<sup>1</sup>

### **Background**

Nurses are currently represented by the Union of Northern Workers, primarily under two different collective agreements.<sup>2</sup> The [Public Service Act](#) (PSA) specifies in section 41 (1.4 and 1.5) that the Union of Northern Workers is the employees' association for a bargaining unit that groups together nearly all unionized GNWT employees, including nurses. Without a Northwest Territories Labour Relations Board or other certifying entity, nurses require a statute provision in the *PSA* to establish their own employees' association for collective bargaining on behalf of nurses in the territorial public service.

### **Rationale**

Nurses in Yellowknife and across the Territory have been expressing dissatisfaction with the structure of the current collective agreement. Many nurses feel that they are unique employees within the NWT healthcare system, and they want to form a collective bargaining component that recognizes the particular challenges and needs of the nursing profession. They emphasize that equating nurses with standard 8:30-to-5 office workers ignores the demands, risks, and unpredictability of frontline healthcare, making current representation models misaligned with the realities of the profession.

All other jurisdictions in Canada except for Nunavut already recognize separate bargaining units for nurses, reflecting best practices that strengthen professional advocacy and workforce retention without compromising broader labour rights. A separate collective agreement would allow for the inclusion of certain healthcare standards and safety precautions in collective agreements that protect both the public and healthcare professionals, such as safe staff-to-patient ratios and limitations on consecutive shifts.

A separate collective agreement would also increase the likelihood of targeted benefits and allowances for nurses (that do not need apply to the entire unionized GNWT workforce), which would support better employee retention and higher morale among nurses generally.

Nurse retention and morale in the NWT have been at historic lows over the last several years<sup>3</sup> after increasing reliance on locums and agency nurses which has caused significantly higher expenses: NTHSSA's contracted out services expenses were \$100.1 million in 2024.<sup>4</sup> This was \$15.5 million or 18.3% more than 2023.<sup>5</sup> Nurses also cite poorer continuity and quality of care for patients, and increased pressure on staff members, who are already overwhelmed, to orient and mentor temporary nurses.

A separate collective agreement would allow for a united approach to bargaining for all nurses in the Territory. These employees are currently divided into various Locals and two different collective agreements. This would not only increase solidarity and level the playing field amongst nurses, it would also allow for greater mobility among nurses who wish to take locum placements to fill gaps in other NWT communities.

Across Canada, independent nursing associations successfully advocate for their members while still collaborating with and strengthening broader labour movements, showing how tailored representation can enhance, rather than undermine, worker solidarity.

A separate collective agreement could open the door to an “interest-based negotiation” model of collective bargaining, which is currently advocated by the NWT Medical Association as a way to keep patients at the heart of the process, drive costs lower, achieve better outcomes, and heal relationships between healthcare workers and the Health Authorities. The innovative version of the interest-based negotiation model being proposed by the NWTMA would invite Indigenous leadership to be at the negotiating table as well. The model has already proven successful in [Prince Edward Island](#) and [Nova Scotia](#). Nurses may choose to take a similar interest-based approach to bargaining.

## Considerations

The GNWT has acknowledged that the prescriptive way the *Public Service Act* is currently structured is an impediment to freedom of association (employees' right to choose their bargaining agent). This is because the current Act specifies that all unionized GNWT employees must be represented by the Union of Northern Workers as their bargaining agent, save for the teachers who are represented by the NWT Teachers' Association.

All other jurisdictions in Canada except for Nunavut have established a Labour Relations Board or similar entity which can certify and decertify bargaining units, thus allowing for employees to

choose their bargaining agent and eliminating the need to specify through legislation which select few employees' associations it will bargain with.

This Private Member's Bill cannot propose the establishment of a Labour Relations Board as that would compel the government to spend public money. While the GNWT has signaled its intention to begin investigating and consulting on the idea of establishing an NWT Labour Relations Board, this is expected to take several years.

Currently there is a window of less than a year before collective bargaining between the GNWT and UNW is expected to resume, during which it will be difficult to amend the PSA. Legislative changes to the *Public Service Act* become politically challenging and are traditionally avoided during active negotiations. Moving forward now with a private member's bill focused on specifically addressing nurses' concerns is a way to prevent unnecessary complications and ensure a smooth transition without disrupting labour negotiations.

Given the urgent need to address the growing concerns of nurses and prevent further erosion of our healthcare system, the only feasible path forward in the short-term is to amend the *Public Service Act* by specifying that nurses will have a separate employees' association for the purposes of collective bargaining, and to specify which bargaining agent will represent them.

The Union of Northern Workers is currently a "component" of the Public Service Alliance of Canada (PSAC). This is made clear in the UNW's own bylaws, stated on both the [UNW](#) and [PSAC](#) websites. UNW members hold PSAC membership cards, pay dues to PSAC, and the UNW President reports to the PSAC National President.

While nurses in the NWT say they wish to remain part of the PSAC and may wish to remain part of the "component" of PSAC that includes the UNW, they would like the option of forming a PSAC component that bargains separately from the UNW. PSAC is the umbrella organization supporting public sector employees, including nurses, in Nunavut and Yukon (whereas the UNW is only active in the Northwest Territories). Many nurses discussed their intention to work towards establishing a pan-territorial nurses' employee association. This could lead to the establishment of pan-northern healthcare standards, supported by the College and Association of Nurses of the Northwest Territories and Nunavut (which is already pan-territorial.)

The Bill would be intended to serve as an interim measure; it is understood that section 41 of the *Act* and its prescriptions regarding bargaining agents would be superseded once the government passes legislation to establish a Labour Relations Board or similar mechanism to certify and decertify bargaining units.

Other healthcare professionals who work alongside nurses, such as allied health professionals and lab technicians, may prefer to be part of the same bargaining unit as nurses, given the

similarities in working conditions. However, it is not possible for a private member's bill to address that concern right now, since there is no existing NWT legislation that regulates or establishes an association for those allied healthcare professionals, the way that the *Nursing Profession Act* defines what a “nurse” is and establishes CANN to regulate them. Without legislation to identify who would be included or excluded from a group of allied healthcare professionals, a Labour Relations Board is required to allow workers to organize themselves according to categories chosen by them.

## Conclusion

This proposal for a Private Member's Bill is intended to spark public discussion around potential changes to amend the *Public Service Act* that many nurses have been calling for, for decades. It is intended simply to allow for a separate bargaining unit to be established for nurses.

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<sup>1</sup> See the *Nursing Profession Act* of the NWT, <https://www.justice.gov.nt.ca/en/files/legislation/nursing-profession/nursing-profession.a.pdf>

<sup>2</sup> Hay River Health and Social Services Authority employees are under a separate agreement. Those nurses in the NWT who are employed by a private non-profit employer – AVENS – would not be directly impacted by changes to the *Public Service Act* since they are not part of the public service.

<sup>3</sup> “NWT now has hard data on the scale of its nursing morale crisis,” *Cabin Radio*, 17 Aug. 2022, <https://cabinradio.ca/102099/news/health/nwt-now-has-hard-data-on-the-scale-of-its-nursing-morale-crisis/>

<sup>4</sup> NTHSSA 2023-2024 Annual Report, p. 13, [https://www.nthssa.ca/sites/nthssa/files/resources/nthssa\\_-\\_annual\\_report\\_-\\_2023-24\\_-\\_final\\_-\\_web.pdf](https://www.nthssa.ca/sites/nthssa/files/resources/nthssa_-_annual_report_-_2023-24_-_final_-_web.pdf)

<sup>5</sup> NTHSSA 2023-2024 Annual Report, p. 13.