



Prairie Region

PSAC PRAIRIE REGIONAL Health Safety Conference



Health and Safety

November 17 & 18, 2012

**PSAC PRAIRIE REGIONAL HEALTH & SAFETY
CONFERENCE, NOVEMBER 17 & 18, 2012
MENTAL HEALTH IN THE WORKPLACE,
BUILDING A BULLY FREE WORK ENVIRONMENT**

Holiday Inn Express Downtown, Edmonton

THEME: In response to the continually growing number of concerns brought forward by members and in response to member supported resolutions from the Prairie Region Convention: The overall theme will deal with Mental Health in the Workplace with particular attention to the impact and prevention of Bullying. We will work together in a variety of formats in order to provide tools, resources and confidence to you in how to deal with these issues and the negative impacts that have perpetrated so many of our workplaces.

WHO SHOULD ATTEND?

The Conference is primarily designed to provide assistance and resources to PSAC members who are active in Workplace Health and Safety. This Conference is not strictly limited to those holding a formal position; however that will form part of the criteria for selection. Please note that this Conference is not designed to function as the basic training tool on Health and Safety Rights and Responsibilities. Rather we will be expanding the knowledge range and confidence of those working in the field and already knowledgeable about the basics. There are a limited number of spots available and therefore selection will be based on this criterion.

Registration will begin the afternoon of Friday, 16 November, 2012. The Conference will begin on Saturday morning; therefore registration will also be available at that time.

The Conference will begin with a Plenary Session,

AGENDA: Details will be finalized, based in part on participant needs.

REGISTRATION FORM

**Deadline for receipt of your application:
Thursday, September 20, 2012**

NAME: _____

ADDRESS:

TELEPHONE: HOME: _____ WORK: _____ FAX: _____

PREFERRED EMAIL(S): _____

COMPONENT: _____ **LOCAL:** _____

POSITION(S) HELD IN THE LOCAL: _____

PSAC ID # (Required): _____

With this application, I authorize use of the information above for the Participants List, to be distributed at the Regional Health, Safety Conference. (Please indicate any special requests in this regard.)

Are you a Workplace Health and Safety Committee Member?	Yes	___	No	___
Are you a Workplace Health and Safety Representative?	Yes	___	No	___
Are you a Member of a Policy Committee?	Yes	___	No	___
Are you a Union Health and Safety Committee member?	Yes	___	No	___

Have you attended past Union Health and Safety Conferences?

National H&S Conferences: Yes
No

Regional H&S Conference: Yes
No

If Yes, which ones? _____

◆ **TRAINING**

Please identify Health and Safety training received:

PSAC Health and Safety Committee Member/Rep. Course, Dates

Employer or Joint H&S Committee Member/Rep. Course, Dates

Other _____ Specify

◆ **ACCESS**

It is important that you complete this section in order that we may accommodate your special needs. Do you have any special requirements? (e.g., special diet, wheelchair access, sign language, documents in alternate formats, etc.)

Yes ___ No ___

◆ **Local Certification (To be completed by the PSAC Local Executive)**

I certify that

a) is a member in good standing;

Signature of the Local President or Designate

Print name and position _____

◆ **ALLIANCE POLICIES: (No Smoking, Scent-Free)**

The Alliance no-smoking policy will be in effect for all Conference functions. Also, please refrain from using perfume or other scented products during the Conference. Many members have severe allergies and chemical sensitivities to these kinds of products. We anticipate your cooperation.

HEALTH AND SAFETY ISSUES:

Do you have or are you aware of any Health and Safety issues in your Workplace?

No

Yes

If Yes, please list:

Briefly explain why you would like to attend the PSAC Prairies Regional H&S Conference and what you would like to gain from it.

WAGES:

We encourage members applying for this Health & Safety Conference to request leave with pay, given the joint nature of union-management responsibilities in this area.

I will be applying for leave with pay:

No

Yes

If your leave with pay request is denied, please apply for leave without pay for union business and we will cover your loss of salary. Please let us know the status of your request so that we can properly budget the event.

Many employers realize the benefits in having well trained experienced Committee Members. A number of our Collective Agreements do specify the requirement to provide this leave with pay. All Employers can support the pursuit of H&S educational opportunities by providing leave with pay for appropriate training and experience. It is important that they be provided with the opportunity

to show this support. Cost Savings, for us, increase the number of participants that are able to attend therefore improving the experience for everyone involved.

FINANCIAL COSTS:

*There is a non-refundable Registration Fee of \$50.00. This is required with the application. **For those not selected the amount will of course be refunded.** This Registration Fee will assist in offsetting some of the costs of the Conference.*

Registration Fee must be paid in order for this application to be considered complete. Please make the cheque payable to the PUBLIC SERVICE ALLIANCE OF CANADA, PRAIRIE REGION.

If the registration fee will create a barrier, for example, because of the size of your local please contact Bruce Campbell or your Regional Office and arrangements will be made to accommodate your needs. The Registration Fee should be covered by the Local or Component. The individual attendee should not be paying the registration fee themselves.

Travel and related costs will be paid in accordance with the PSAC Travel Policy, details will be provided prior to finalizing attendance.

ACKNOWLEDGEMENT:

APPLICANT: With this application, I agree that, if selected, I will attend and participate in all sessions of the Health and Safety Conference. I have read the Alliance documents on human rights, harassment and scent free policies provided by my local and understand my responsibilities in accordance with them.

(Signature of Applicant)

(Date of Application)

If you have any questions about the Health and Safety Conference, please call Bruce Campbell, the Regional Health and Safety Representative, Bruce is located at the Winnipeg Regional Office 204-947-1601 or toll free at 1-866-393-7722.

Deadline for receipt of registration:

Thursday, September 20, 2012

Applications should be sent to the Winnipeg Regional Office of the PSAC @:
Suite 460-175 Hargrave St., Winnipeg MB R3C 3R8

or by Fax to (204) 943-0652 ATTN: Bruce Campbell
or by Email to CAMPBEB@PSAC.com

SELF IDENTIFICATION (OPTIONAL)

The Alliance is committed to ensure that PSAC Conferences are accessible to all members. The information requested in this section will help us assess our success in reaching members who belong to groups identified in the PSAC Human Rights Policy.

ALL INFORMATION WILL BE KEPT CONFIDENTIAL

ABORIGINAL Are you a First Nations, Métis, or Inuit Person? Yes No

RACIALLY VISIBLE Are you, by virtue of your race or colour, in a racially visible minority in Canada? Yes No

If yes, and you wish to identify with a specific racially visible group, please indicate.

DISABILITIES Do you have any persistent or permanent physical, mental, psychiatric, learning or sensory impairments, as recognized under the Canadian Human Rights Act? Yes No

SEXUAL ORIENTATION Are you gay, lesbian, bisexual or transgender? Yes No

GENDER Woman Man

YOUTH Are you under the age of 30? Yes No

If yes, what is your date of birth? _____

By completing this form I agree that the PSAC may use the information provided in the Self-ID section for administrative purposes.

This form can be made available in various formats, including Braille, English, French, and on disk in English and French. Contact your PSAC Regional Office for more information.