



COPE LOCAL 491

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Bargaining Survey 2017

Sisters and Brothers,

Your Bargaining Committee has been elected. We are preparing for the next round of negotiations with the Employer and we want to hear from you! Attached is a survey to assist us in identifying what you want changed in OUR Collective Agreement and what our priorities are for this round of bargaining.

Please take some time and think about your work environment, wages and benefits. Let us know your concerns, issues and what improvements to OUR Collective Agreement you would like us to propose. At the end of the survey you will find the form "Amendments to the Collective Agreement", use this form to suggest specific language changes and/or additions (make as many copies of this form as you need to!)

This survey should take you approximately 5 to 10 minutes to complete. Please complete the survey by November 24, 2017 and return it to cope_bargaining_committee@hotmail.com with a copy to your Regional Vice-President.

Your individual response is confidential and will not be reported. We will only use summary information (for example: 45% of members want improvements to the benefit plan).

If you have any questions about the survey, please contact any member of the COPE Local 491 bargaining committee or send an email to: cope_bargaining_committee@hotmail.com
In solidarity,

Your COPE Local 491 Bargaining Committee

Karen Carle
Lindsay Mills
Trish Sinclair
Karri Patterson
Collette Calvelli
Abigail Manangan

KAREN CARLE
President

TRISH SINCLAIR
(Interim) National Vice-President

LINDSAY MILLS
Treasurer

ANGELA LAVIGNE
Secretary

RACHEL ROBERTS
(Interim) Education/Communication Officer



Bargaining Survey 2017

Working Conditions

1. How accurate (or true) would you rate the following statements about your working conditions:

Issue	Very Accurate	Somewhat Accurate	Not Very Accurate	Not Accurate
My workload has increased in the last 3 years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I am absent from work, I am replaced in enough time that all essential work gets done	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I regularly do unpaid work (work through breaks, do prep before or after shift)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Bargaining Priorities

2. How important to you are the following issues for the next round of bargaining? Rate the issue on a scale of 1 to 5, where 1 is “not important at all” and 5 is “very important”.

Issue	Not Important (1)	(2)	(3)	(4)	Very Important (5)
Wage increase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Improvements to hours/days of work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Improved leaves of absence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Benefit improvements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pension improvements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vacation improvements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Addressing workload	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional development and training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Replacement coverage for vacations/leaves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. What do you think the term (number of years) should be for the new collective agreement?

a. 2 years b. 3 years c. 4 years d. Other _____

Communications and Mobilizing

4. COPE Local 491 wants to have regular communication with members during bargaining so we can keep you informed.

Please tell us how important the following ways of communicating are to you, using a scale of 1 (least) to 5 (most important).

Issue	Not Important (1)	(2)	(3)	(4)	Very Important (5)
Printed bargaining bulletins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regular email updates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A closed Facebook page (accessible only to members)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Group phone messages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COPE Local 491 website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Town Hall phone calls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. We'd like your thoughts on what kind of actions COPE members can take to achieve a strong collective agreement.

Please tell us what actions you would be willing to participate in, on a scale of 1 (unlikely) to 5 (would do this).

Issue	Not Important (1)	(2)	(3)	(4)	Very Important (5)
Attend union information meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wear red to work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Talk to other COPE co-workers about bargaining issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participate in a letter-writing campaign to pressure employer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participate in an information picket or rally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job action, up to and including a strike vote and possible strike	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other actions you would consider? _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Participant Information

6. Please choose one of the following that describes your employment status:

- a) Permanent full time (30 hours/week or more)
- b) Permanent part-time
- c) Temporary/Casual

7. How long have you worked for CUPE?

- a) Less than one year
- b) Over a year but less than 3 years
- c) Over 3 years but less than 5 years
- d) Over 5 years but less than 10 years
- e) Over 10 years but less than 15 years
- f) Over 15 years but less than 20 years
- g) Over 20 years

8. What is your primary classification at work? Please choose only one.

- a) Receptionist/Clerk-typist
- b) Machine Operator/Stockroom Clerk
- c) Statistical Clerk-typist
- d) Purchasing & Receiving Clerk
- e) Secretary
- f) Executive Secretary
- g) Collective Agreement Analyst
- h) Bookkeeper
- i) Research/J.E./H&S/Technology Assistant
- j) Administrative Assistant
- k) Regional Administrative Officer/Fleet Manager

9. Please provide your personal information (optional):

Name: _____ Office: _____

Home Mailing Address: _____

Personal Email: _____ Phone: _____

Do you prefer to receive emails or text messages? _____

10. Do you have any additional comments for the Bargaining Committee?

Thank you for completing the Survey!!!!

AMENDMENTS TO THE COLLECTIVE AGREEMENT MODIFICATIONS À LA CONVENTION COLLECTIVE

ARTICLE #

AMENDMENT / MODIFICATION

JUSTIFICATION

Name : _____

Office : _____

Signature

Date

Return to cope_bargaining_committee@hotmail.com
and your RVP by November 24, 2017

