



Essential Services Database

INSTRUCTION GUIDE

March 2025

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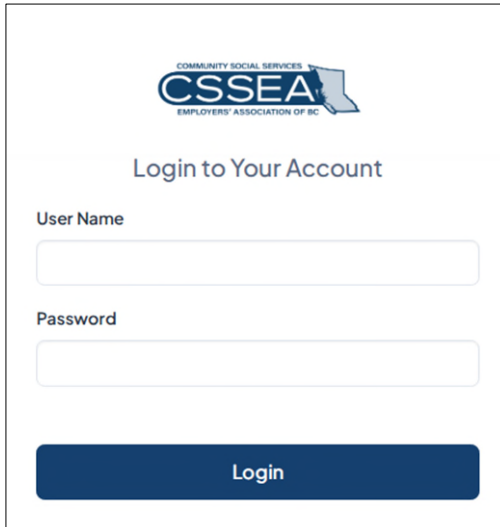
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1. Introduction

Essential services preparation occurs when the province-wide CSSEA collective agreements are expiring, new ones are being negotiated, and the potential exists for bargaining disputes to be resolved by the pressure of “job action” (union strikes or employer lockouts). In the Community Social Services (CSS) sector, job action is governed by Section 72 of the *Labour Relations Code* (“Code”) that allows for limited and controlled job action to occur while maintaining sufficient staffing levels to maintain services that are considered “essential” under the *Code*.

CSSEA member employers and their unions engage in negotiations, or if necessary mediation and adjudication at the Labour Relations Board (“Board”), to determine what services are essential and what staffing levels are needed in order to safely deliver those essential services to individuals served. This essential services database assists employers in carrying out their essential services planning responsibilities, negotiations with their union(s), and the ultimate creation of a standardized agreement that is forwarded to the Board so it can issue a binding and legal Order that will be relied on to regulate job action in case it occurs at your agency. The provision of essential services is ultimately a Board responsibility under Section 72 and so it must issue an Order in a prescribed form that this database produces for the Board.

2. How to Log into Essential Services Database



The screenshot shows the login page for the Community Social Services Employers' Association of BC (CSSEA). At the top is the CSSEA logo, which includes the text 'COMMUNITY SOCIAL SERVICES' above 'CSSEA' and 'EMPLOYERS' ASSOCIATION OF BC' below it, with a stylized map of British Columbia. Below the logo is the heading 'Login to Your Account'. There are two input fields: 'User Name' and 'Password'. Below these fields is a dark blue button labeled 'Login'.

1. Open your browser (*recommended: Chrome, Firefox, Edge*) and navigate to: <https://esp.cssea.bc.ca>

Important: This site isn't compatible with Internet Explore 11 or lower. Please use the recommended browsers i.e., Firefox, Chrome

2. Enter your **User Name** and **Password**

If you are a Member of CSSEA and require a User Name and Password, please contact vjohnson@cssea.bc.ca

3. Click **Login**

3. How to Complete Your Essential Service Forms

Please complete **Forms A-E** in the following order.

Order #	Form	Description
1.	Form A	Employer Background Information
2.	Form B-1	Bargaining Unit Staffing
3.	Form B-2	Community Inclusion Programs and/or Employment Services
4.	Form B-3	Supported Living and/or Other Occupations
5.	Form C	Management and Excluded Areas of Work
6.	Form D	Volunteers
7.	Form E	Signature Logs <i>(To be completed after Forms A-D are completed & signed)</i>

Consolidate Plan

Once Forms A-E are completed, signed and uploaded, employers will be able to generate a consolidated PDF file which includes Forms A-E, for sharing with their union(s) and the Labour Relations Board, so it can issue an Order.

A. Form A: Employers Background Information

The screenshot shows the CSSEA web application interface for Form A: Employer Background Information. At the top, there is a navigation bar with the CSSEA logo and a tab labeled 'Form A + B 1 + B 2' with a red '1' next to it. Below the navigation bar, the form title 'FORM A: EMPLOYER BACKGROUND INFORMATION' is displayed. The form contains several input fields: 'Year' (with a dropdown arrow), 'Employer Legal Name' (pre-filled with 'ABC 2 Company'), 'Service Division' (dropdown menu with 'Community Living Services' selected and a red '2' next to it), and 'Union' (dropdown menu with 'BCGEU, BCNU, CLAC' selected and a red '3' next to it). A blue 'Save' button with a red '4' is located below these fields. A 'Download Form A' link is in the top right corner. Below the form fields is a section titled 'EMPLOYER'S WORKSITES'. It contains two buttons: 'Form B - 1' and 'Form B - 2'. To the right of these buttons are two green buttons: 'Consolidate Form B - 1' and 'Consolidate Form B - 2'. Below this is a '+ Add New' button with a red '5' next to it. At the bottom, there is a table with the following columns: 'Select', 'Worksite Name', 'Address', 'City', 'Postal Code', 'Essential', and an edit/delete icon. The table contains one row with the following data: 'Select', 'Vancouver', '111 Burrard St', 'Vancouver', 'V5G 1T5', 'Yes', and an edit/delete icon.

Select	Worksite Name	Address	City	Postal Code	Essential	
Select	Vancouver	111 Burrard St	Vancouver	V5G 1T5	Yes	

1. Click Tab: **Form A + B1 + B2**

Employer legal name – Full legal name of the organization is auto populated based on the agency’s specific user login information.

2. Select a **“Service Division”**

Select the **service division** your organization is in: *Community Living Services, General Services, or Indigenous Services.*

3. Select a **“Union or multiple Unions”**

Select the union or unions certified to represent employees at the Employer.

4. Click


5. Click **“Add New”** to add a Worksite

List the names of each worksite and their street address that are unionized and covered by your organization’s Labour Relations Board certification. If more than one program operates out of a worksite please list the worksite multiple times. For example, *Eaton – Program 1 Name and Eaton – Program 2 Name. It is important to indicate whether the worksite is essential: “Yes” or “No”.*

6. Click to save the Worksite.

Continue adding all remaining **“Worksites”** by clicking **“Add New”** button

- Once the form (**Form A**) is completed, click “**Download Form A**” to download completed **Form A** (PDF file) and send to Employer and Union signatories for initialling.



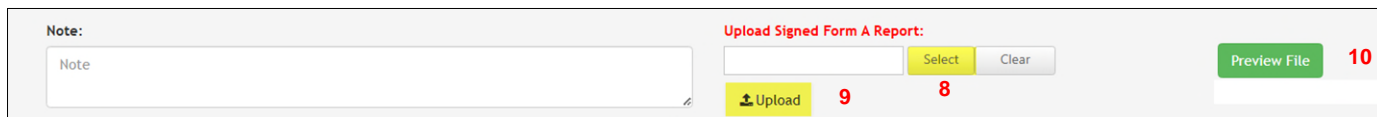
Form A - B 1 + B 2

FORM A: EMPLOYER BACKGROUND INFORMATION

Year: [input] [dropdown]

7 Download Form A

- After the form (**Form A**) has been initialled by all parties, upload the executed form. Click “**Select**” button in the “**Upload Signed Form A Report**” section to browse for the signed Form A



Note:

Note [text area]

Upload Signed Form A Report:

[input] Select Clear

Upload 9 8

Preview File 10

- Click “**Upload**” button to upload the signed Form A
- Click **Preview File** to **Preview** the uploaded Form A
- Click **Save**

Remember: Form A must be initialed by both the Employer and Union representatives and dated.

B. Form B-1: Bargaining Unit Staffing

Form B-1 must be completed for each worksite where essential services are going to be designated. Note: Staffing for community inclusion is completed on Form B-2 and staffing for supported living and/or other occupations is completed on Form B-3.

1. Click Tab: **Form A + B1 + B2**
2. Select a Worksite by clicking **“Select”** beside Worksite name
Note: The selected Worksite will change to “Navy Blue”

+	Worksite Name	Address	City	Postal Code	Essential		
Select	Vancouver	1234 Burrard St.	Vancouver	V5N 8G0	Yes		X

3. Once the Worksite is selected, click button **Form B - 1**

4. Select a **“Union”**

Select the union certified to represent employees at the Worksite.

- **Total Hours per Week** – Auto calculated. Formula: a x sum of c. Remember each field in column (c) must be filled. If there are no employees working on a specific day please enter zero.
- **Notes** - If applicable add anything specific or unique about the work schedule.

10. Click  to save the new “Normal Bargaining Unit Staffing” entry.

Continue adding all remaining “Normal Bargaining Unit Staffing” by clicking the “Add New” button

11. Click “Add New” to add a new “Essential Bargaining Unit Staffing”



Position Title	Shift		(a)	(b)	(c) # Workers per Shift							Total Hours/Week	Notes	
	Start	End	Hours Per Day	Days Per Week	Sun	Mon	Tues	Wed	Thur	Fri	Sat			
CEO Vancouver														

Include the essential hours the Employer determines are required for bargaining unit employees only, taking into account the factors listed next. The essential staffing level must reflect the staffing necessary to prevent any threat to the health, safety, or welfare of the clients.

Take into account the following factors:

- Determine what services that can be eliminated or curtailed and what are the services that the clients will absolutely need during a work stoppage.
- Identify clients that require specific staffing levels; for example, one to one care or 24-hour care.
- Consider duties and responsibilities that must be performed, and those that can be curtailed or discontinued, during a work stoppage.
- Maintain legal and licensing requirements.
- Understand the relationship between staffing levels in related programs; for example, the need to increase staffing levels in residential settings if community inclusion programs are curtailed/closed.
- Compile a list of management and excluded personnel along with their qualifications, skills, and abilities and if applicable, their limitations.
- Prepare work schedules and assign worksites for management and excluded personnel separately so that you understand the impact on the essential services staffing levels of bargaining unit employees. Management’s obligation is to work 150% of their regular schedule (to a maximum of 60 hours per week) but needs the flexibility to perform both assigned bargaining unit work and their own essential management duties during a work stoppage.

Note that essential bargaining unit staffing in the Form B-1 **does not include** management hours and the Form B-1 schedules will appear to have gaps based in part on the deployment of management to bargaining unit work.

Position Title - As found in Appendix A - JJEPA Wage Grid or Paraprofessional Wage Grid of the collective agreements.


Shift Schedules - Identify all of the shift schedules that employees work within each position title. Then, for each shift schedule, complete the following:

- **Shift Start/End Times** - For example, 9 am to 4 pm. Times can be selected or manually entered e.g., 9:00 AM, 4:00 PM. If the position does not have set start/end times, you do not need to enter these times.
- **Hours per Day (a)** - For example, 7 hours (using shift start/end times of 9 am to 4 pm).
- **Days per Week (b)** - For example, 5 days (using work schedule of Monday to Friday).
- **Number of Workers per Shift (c)** – For example, list the number of employees working, per shift, under each corresponding day of the week. Each field must be filled so for days where there are no employees working please enter zero.
- **Total Hours per Week** – Auto calculated. Formula: a x sum of c. Remember each field in column (c) must be filled. If there are no employees working on a specific day please enter zero.
- **Notes** – If applicable, indicate if the work is not essential and being discontinued during job action or if continued, bargaining unit employee deployment is at zero because management and/or excluded will be deployed to the work. If bargaining unit staffing is reduced to **zero hours and no one** (no bargaining unit staff or management and/or excluded) is working a specific schedule, please indicate in the notes column **“zero non-essential”**. If bargaining unit staffing is reduced to **zero hours and management** (management and/or excluded only; no bargaining unit staff) is working, please indicate in the notes column **“zero essential”**. This designation will allow the Labour Relations Board to better understand what services are being discontinued during job action.

12. Click  to save.

Continue adding all remaining **“Essential Bargaining Unit Staffing”** by clicking the **“Add New”** button

13. Once the form (**Form B-1**) is completed, click **“Download Form B1”** to download completed individual **Form B-1** (PDF file) and send to Employer and Union signatories for initialling.



Alternative: If there are lots of Worksite reports to download, a **consolidated** Form B-1 can be download from Tab: **Form A + B1 + B2** by clicking **“Consolidated Form B-1”** button



14. Click **Form A + B1 + B2** and navigate to **“Upload Signed Consolidated Form B1 Report”**

Employers are to combine all the signed Form B-1's into a single file and upload the one file.

15. Click **"Select"** button to browse for the compiled signed consolidated Form B-1




Upload Signed Consolidated Form B1 Report:

Select Clear

Preview File 17

Upload 16 15

16. Click **"Upload"** button to upload the compiled signed consolidated Form B-1

17. Click  to **preview** the compiled signed consolidated Form B-1

18. Click 

Remember: Form B-1 must be initialed by both the Employer and Union representatives and dated.

C. Form B-2: Community Inclusion Programs and/or Employment Services

Complete Form B-2 only for Community Inclusion Programs and/or Employment Services where the parties have agreed select clients must continue to receive service. If your agency does not have Community Inclusion Programs and/or Employment Services do not complete Form B-2.

Form A + B 1 + B 2 1

FORM A: EMPLOYER BACKGROUND INFORMATION

Year:

Download Form A

Employer Legal Name: ABC 2 Company

Service Division: Community Living Services

Union: BCGEU, BCNU

Save

EMPLOYER'S WORKSITES

Form B - 1 Form B - 2 Consolidate Form B - 1 Consolidate Form B - 2

+ Add New

Select	Worksite Name	Address	City	Postal Code	Essential		
2	Vancouver	123 Vancouver	Vancouver	V5N 5Y7	No		X

1. Click Tab: **Form A + B1 + B2**
2. Select a Worksite by clicking the **“Select”** beside Worksite Name
Note: The selected Worksite will change to “Navy Blue”

+ Add New

Select	Worksite Name	Address	City	Postal Code	Essential		
	Vancouver	1234 Burrard St.	Vancouver	V5N 8G0	Yes		X

3. Once the Worksite is selected, click **Form B - 2** button
4. Select a **“Union”**

Select the union certified to represent employees in the community inclusion programs and/or employment services at the Worksite.

Form A + B 1 + B 2

FORM B-2: COMMUNITY INCLUSION AND/OR EMPLOYMENT SERVICES

Year:

Download Form B2

Employer Legal Name: ABC 2 Company

Union: BCGEU, BCNU, CLAC 4

Worksite Name: Vancouver

Number of Clients Supported: 2 5

Brief Description of Clients: Note 6

Save 7

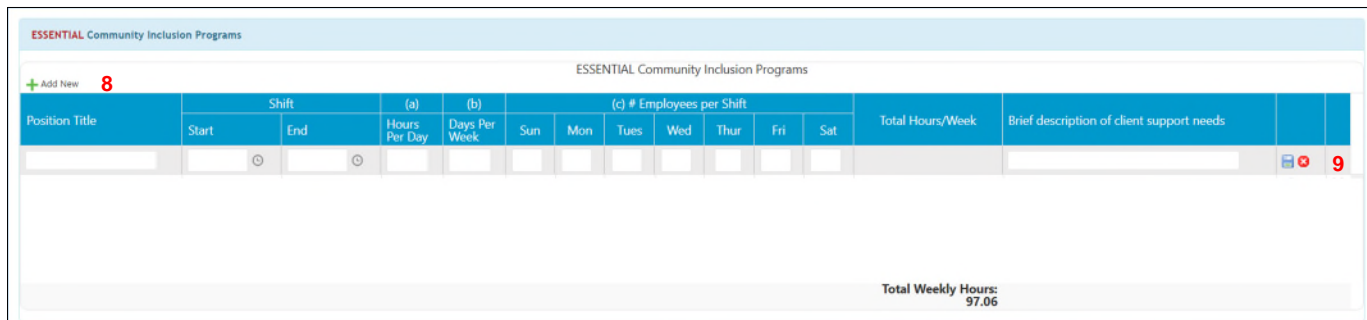
5. Enter “**Number of Clients Supported**”

E.g., 1, 2, 3, etc.

6. Provide “**Brief Description of Clients**” if applicable

7. Click 

8. Click “**Add New**” to add a new “**Essential Community Inclusion Program**”



Position Title	Shift		(a) Hours Per Day	(b) Days Per Week	(c) # Employees per Shift							Total Hours/Week	Brief description of client support needs	
	Start	End			Sun	Mon	Tues	Wed	Thur	Fri	Sat			

Total Weekly Hours:
97.06

Position Title - As found in Appendix A - JEP Wage Grid or Paraprofessional Wage Grid of the collective agreements.

Shift Schedules - Identify all of the shift schedules that employees work within each position title. Then, for each shift schedule, complete the following:

- **Shift Start/End Times** - For example, 9 am to 4 pm. Times can be selected or manually entered e.g., 9:00 AM, 4:00 PM. If the position does not have set start/end times, you do not need to enter these times.
- **Hours per Day (a)** - For example, 7 hours (using shift start/end times of 9 am to 4 pm).
- **Days per Week (b)** - For example, 5 days (using work schedule of Monday to Friday).
- **Number of Workers per Shift (c)** – For example, list the number of employees working, per shift, under each corresponding day of the week. Each field must be filled so for days where there are no employees working please enter zero.
- **Total Hours per Week** – Auto calculated. Formula: a x sum of c. Remember each field in column (c) must be filled. If there are no employees working on a specific day please enter zero.
- **Brief Description of Client Support Needs** – Add the essential support needs and services that would be offered during the indicated hours.

9. Click  to save.

Continue adding all remaining “**Essential Community Inclusion Programs**” by clicking the “**Add New**” button

10. Click **“Add New”** to add a new **“Essential Employment Services”**

Position Title - As found in Appendix A - JEP Wage Grid or Paraprofessional Wage Grid of the collective agreements.

Shift Schedules - Identify all of the shift schedules that employees work within each position title. Then, for each shift schedule, complete the following:

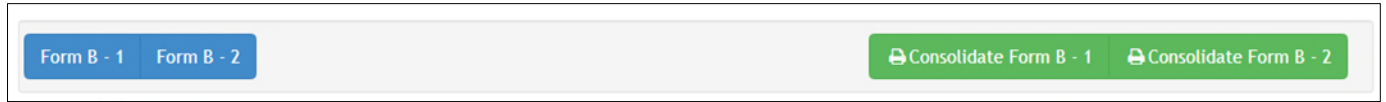
- **Shift Start/End Times** - For example, 9 am to 4 pm. Times can be selected or manually entered e.g., 9:00 AM, 4:00 PM. If the position does not have set start/end times, you do not need to enter these times.
- **Hours per Day (a)** - For example, 7 hours (using shift start/end times of 9 am to 4 pm).
- **Days per Week (b)** - For example, 5 days (using work schedule of Monday to Friday).
- **Number of Workers per Shift (c)** – For example, list the number of employees working, per shift, under each corresponding day of the week. Each field must be filled so for days where there are no employees working please enter zero.
- **Total Hours per Week** – Auto calculated. Formula: a x sum of c. Remember each field in column (c) must be filled. If there are no employees working on a specific day please enter zero.
- **Brief Description of Client Support Needs** – Add the essential support needs and services that would be offered during the indicated hours.

11. Click  to save.

Continue adding all remaining **“Essential Employment Services”** by clicking the **“Add New”** button.

12. When the form (**Form B-2**) is completed, click **“Download Form B-2”** to download completed individual **Form B-2** (PDF file) and send to Employer and Union signatories for initialling.

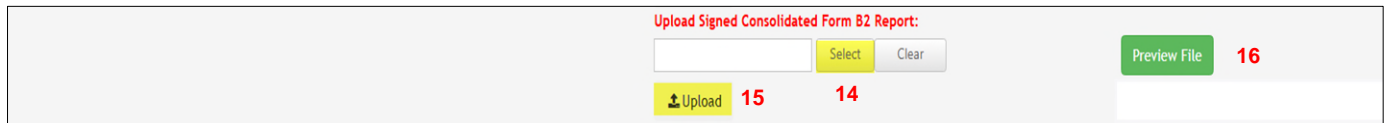
Alternative: If there are lots of Worksite reports to download, a **consolidated** Form B-2 can be download from Tab: **Form A + B1 + B2** by clicking **“Consolidated Form B-2”** button



13. Click **Form A + B1 + B2** and navigate to **“Upload Signed Consolidated Form B2 Report”**

Employers are to combine all the signed Form B-2's into a single file and upload the one file.

14. Click **“Select”** button to browse for the compiled signed consolidated Form B-2



15. Click **“Upload”** button to upload the compiled signed consolidated Form B-2

16. Click **Preview File** to **preview** the compiled signed consolidated Form B-2

17. Click **Save**

Remember: Form B-2 must be initialed by both the Employer and Union representatives and dated.

D. Form B-3: Supported Living and/or Other Occupations

Complete Form B-3 only for Supported Living and/or Other Occupations. If your agency does not have Supported Living and/or Other Occupations do not complete Form B-3. The Supported Living Program assists those with developmental disabilities to live as independently as possible within their communities. Other occupations may include behavioural consultants, nurses, counsellors, etc.

Form B - 3 1

FORM B-3: SUPPORTED LIVING AND/OR OTHER OCCUPATIONS

Year: 2022 Download Form B3

Employer Legal Name: ABC 2 Company

Union: BCGEU, BCNU 2

Number of Clients Served: 10 3

Brief Description of Clients: 4

Save 5

NORMAL Supported Living Visits

NORMAL Supported Living and/or Other Occupations

Client Id	Geographic Area	Primary Worker Name	Total # of Weekly Care Hours	Notes
1	Vancouver	Bob Smith	4.5	

Total Daily NORMAL Hours: Total Weekly NORMAL Hours: 5.5

1. Click Tab: **Form B-3**

2. Select a **“Union”**

Select the union certified to represent employees.

3. Enter **“Number of Clients Served”**

E.g., 1, 2, 3, etc.

4. Provide **“Brief Description of Clients”** if applicable

5. Click 

6. Click **“Add New”** to add a new **“Normal Supported Living and/or Other Occupations”**

NORMAL Supported Living Visits

NORMAL Supported Living and/or Other Occupations

Add New 6

Client Id	Geographic Area	Primary Worker Name	Total # of Weekly Care Hours	Notes
1	Vancouver	Bob Smith	4.5	

7

Determine the normal number of hours for each client for which supported living services are needed by entering the following:

- **Client ID** - Number each client for your records. For confidentiality reasons do not list the client name on the form.
- **Geographic Area** - State the geographical area of the client.
- **Primary Worker Name** - If applicable list the client’s specific supported living worker.
- **Total Number of Weekly Care Hours** - State the number of care hours provided per week, under the corresponding day, for each client.
- **Notes** - Describe the care for each client. For example, assisting with medical appointments and planning; supporting with meal planning; learning how to cook; assisting with budgeting, personal banking, and other financial issues; supporting with BC Housing and/or landlord and building requirements; and offering community-based programs to enhance quality of life and social interaction, such as community cooking classes and community coffee groups.

Also, indicate any client specific instructions such as allergies, hearing impairments, sight impairments, laundry days, special instructions on entering the home (e.g., by the back door, key in mailbox).

7. Click  to save

Continue adding all remaining “**Normal Supported Living and/or Other Occupations**” by clicking the “**Add New**” button

8. Click “**Add New**” to add a new “**Essential Supported Living and/or other Occupations**”



The screenshot shows a web application interface titled "ESSENTIAL Supported Living Visits". At the top, there is a header "ESSENTIAL Supported Living and/or Other Occupations" and a yellow "Add New" button with the number "8" next to it. Below this is a table with the following columns: Client Id, Geographic Area, Primary Worker Name, Total # of Weekly Care Hours, and Notes. The table contains one row with the following data: Client Id: 1, Geographic Area: Surrey, Primary Worker Name: (empty), Total # of Weekly Care Hours: 6, and Notes: (empty). To the right of the Notes column, there is a small icon and the number "9". At the bottom of the interface, there are two summary statistics: "Total Daily ESSENTIAL Hours:" and "Total Weekly ESSENTIAL Hours: 6".

Client Id	Geographic Area	Primary Worker Name	Total # of Weekly Care Hours	Notes
1	Surrey		6	

Total Daily ESSENTIAL Hours: Total Weekly ESSENTIAL Hours: 6

Determine the essential number of hours for each client for which support living services are needed by entering the following:

- **Client ID** - Number each client for your records. For confidentiality reasons do not list the client name on the form. Matches the number in the Normal Visits section.
- **Geographic Area** - State the geographical area of the client.

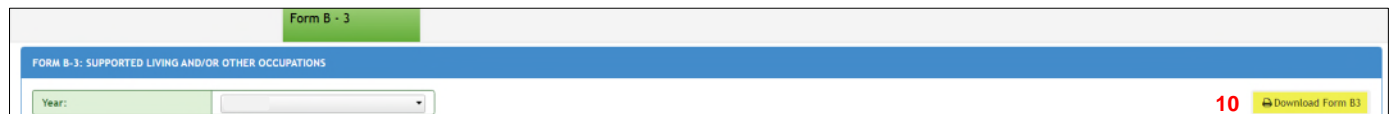
- **Primary Worker Name** - If applicable list the client’s specific supported living worker.
- **Total Number of Weekly Care Hours** - State the number of care hours provided per week, under the corresponding day, for each client.
- **Notes** - Describe the care for each client. For example, assisting with medical appointments and planning; supporting with meal planning; learning how to cook; assisting with budgeting, personal banking, and other financial issues; supporting with BC Housing and/or landlord and building requirements; and offering community-based programs to enhance quality of life and social interaction, such as community cooking classes and community coffee groups.

Also, indicate any client specific instructions such as allergies, hearing impairments, sight impairments, laundry days, special instructions on entering the home (e.g., by the back door, key in mailbox).

9. Click  to save

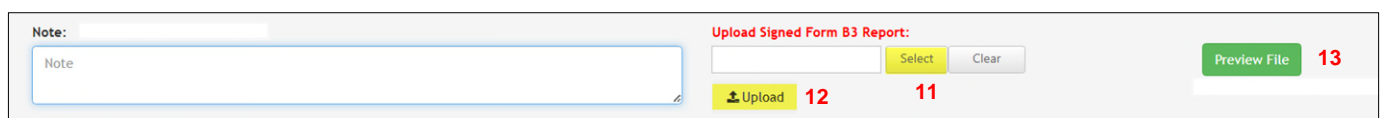
Continue adding all remaining **“Essential Supported Living and/or other Occupations”** by clicking the **“Add New”** button

10. When form **(Form B-3)** is completed, click **“Download Form B-3”** to download completed **Form B-3** (PDF file) and send to Employer and Union signatories for initialling.



The screenshot shows a web interface for 'Form B - 3'. At the top, there is a green tab labeled 'Form B - 3'. Below it is a blue header bar with the text 'FORM B-3: SUPPORTED LIVING AND/OR OTHER OCCUPATIONS'. Underneath the header, there is a 'Year:' dropdown menu. On the right side of the interface, there is a yellow button labeled 'Download Form B3' with the number '10' next to it.

11. After the form **(Form B-3)** has been initialled by all parties, upload the executed form. Click **“Select”** button in Form B-3 **“Upload Signed Form B3 Report”** section to browse for the signed Form B-3.



The screenshot shows a section titled 'Upload Signed Form B3 Report:'. On the left, there is a text area labeled 'Note:'. To the right of the text area, there is a file selection interface with a 'Select' button and a 'Clear' button. Below the file selection interface, there is a yellow 'Upload' button with the number '12' next to it. On the far right, there is a green 'Preview File' button with the number '13' next to it.

12. Click **“Upload”** button to upload the signed Form B-3

13. Click  to **preview** the uploaded Form B-3

14. Click 


Reminder: Form B-3 must be initialed by both the Employer and Union representatives and dated.

E. Form C: Management and Excluded Areas of Work

The Labour Relations Board requires a list of management and excluded employees, and the areas where these people will be deployed to perform bargaining unit work during a work stoppage. If your organization has non-union programs, please do not list management or the non-union bargaining unit equivalent employees who work in these non-union programs. Please however list the management and excluded staff who work in the administrative office and/or oversee the unionized programs.

Under the case law, management and excluded must dedicate a certain number of hours to bargaining unit essential services work. Management and excluded obligation is to work 150% of their regular schedule (to a maximum of 60 hours per week) in the event of a work stoppage performing both bargaining unit work and their own essential management/excluded duties.

The screenshot shows a web application interface for Form C. At the top, there is a green tab labeled 'Form C' with a red '1' next to it. Below the tab is a blue header bar with the text 'FORM C: MANAGEMENT AND EXCLUDED AREAS OF WORK'. Underneath the header, there is a 'Year:' dropdown menu and a 'Download Form C' button. The main content area is titled 'Management and Excluded Areas of Work' and contains an 'Add New' button with a red '2' next to it. Below this is a table with columns for 'Name', 'Position Title', 'Worksites', and 'Notes'. The table is currently empty, with the text 'No records to display.' below it. There is a red '3' next to the table's right edge.

1. Click Tab: **Form C**
2. Click **“Add New”** to add a new **“Management and Excluded Areas of Work”**
 - **Name** - List the names of all management and excluded staff to be deployed during essential services regardless of how much bargaining unit work they will perform.
 - **Position Title** - List their current position.
 - **Worksites** - Select from drop menu the worksite in which they are to be deployed during the provision of essential services. The worksite names are taken from Form A under Employer’s Worksite(s).
 - **Notes** - Identify who are the strike coordinator(s). CSSEA recommends at least one. Also, if a manager or an excluded employee has a limitation (e.g., medical, religious, family obligations, compassionate care leave, etc.) please also indicate what they are in this section.
3. Click  to save

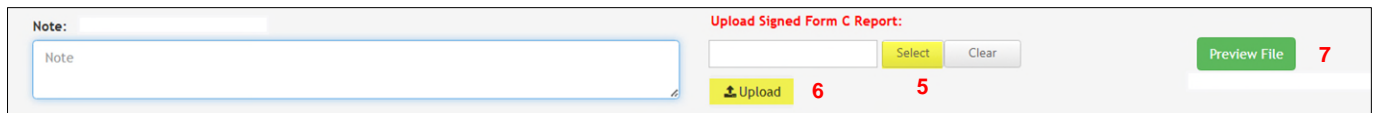
Continue adding all remaining **“Management and Excluded Areas of Work”** by clicking the **“Add New”** button.

- When the form (**Form C**) is completed, click "**Download Form C**" to download completed **Form C** (PDF file) and send to Employer and Union signatories for initialling.



The screenshot shows a web interface for downloading Form C. At the top, there is a green tab labeled "Form C". Below it is a blue header bar with the text "FORM C: MANAGEMENT AND EXCLUDED AREAS OF WORK". Underneath the header, there is a "Year:" dropdown menu and a "Download Form C" button with a red number "4" next to it. Below the year dropdown, there is a field for "Employer Legal Name" with the text "ABC 2 Company" entered.

- After the form (**Form C**) has been initialled by all parties, upload the executed form. Click "**Select**" button in Form C "**Upload Signed Form C Report**" section to browse for the signed Form C.




The screenshot shows the "Upload Signed Form C Report" section. On the left, there is a "Note:" field with a text area containing the word "Note". To the right of the note field is the "Upload Signed Form C Report:" section. This section includes a file input field, a "Select" button, and a "Clear" button. Below the file input field is an "Upload" button with a red number "6" next to it. To the right of the "Upload" button is a red number "5". Further to the right is a "Preview File" button with a red number "7" next to it.

- Click "**Upload**" button to upload the signed Form C
- Click **Preview File** to **preview** the uploaded Form C
- Click **Save**

Reminder: Form C must be initialed by both the Employer and Union representatives and dated.

F. Form D: Volunteers

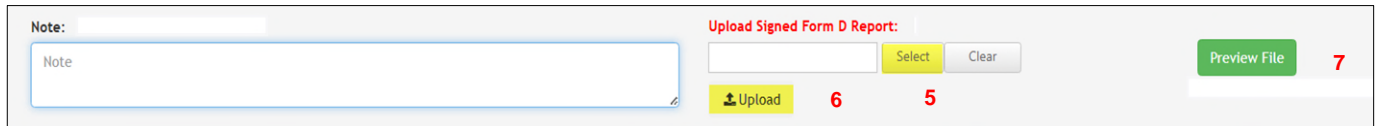
Volunteers have the option to cross a picket line and continue to provide service. The Labour Relations Board requires a list of these volunteers. Volunteers will continue their usual hours performing their usual duties and responsibilities. Their hours cannot be increased and they cannot perform bargaining unit work. Board members whose normal role is governance are not listed. Board members are prohibited from volunteering if their normal role is governance.

1. Click Tab: **Form D**
2. Click **"Add New"** to add a new **"Volunteers"**
 - **Name** - List the names of volunteers who will continue to provide service during a work stoppage.
 - **Worksites** - Select from drop menu the worksite in which they are to be deployed during the provision of essential services. The worksite names are taken from Form A under Employer's Worksite(s).
 - **Notes** - Describe the service they would normally provide.
3. Click  to save

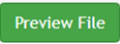
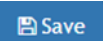
Continue adding all remaining **"Volunteers"** by clicking the **"Add New"** button

4. When the form (**Form D**) is completed, click **"Download Form D"** to download completed **Form D** (PDF file) and send to Employer and Union signatories for initialling.

5. After the form (**Form D**) has been initialled by all parties, upload the executed form. Click "**Select**" button in Form D "**Upload Signed Form D Report**" section to browse for the signed Form D.



The screenshot shows a user interface for uploading a signed Form D report. On the left, there is a text area labeled "Note:" with the word "Note" inside. To the right, the section is titled "Upload Signed Form D Report:". Below this title, there is a file selection input field, a yellow "Select" button, and a grey "Clear" button. Below the input field, there is a yellow "Upload" button with a downward arrow icon, followed by the numbers "6" and "5" in red. On the far right, there is a green "Preview File" button and a red number "7".

6. Click "**Upload**" button to upload the signed Form D
7. Click  to **preview** the uploaded Form D
8. Click 

Reminder: Form D must be initialed by both the Employer and Union representatives and dated.

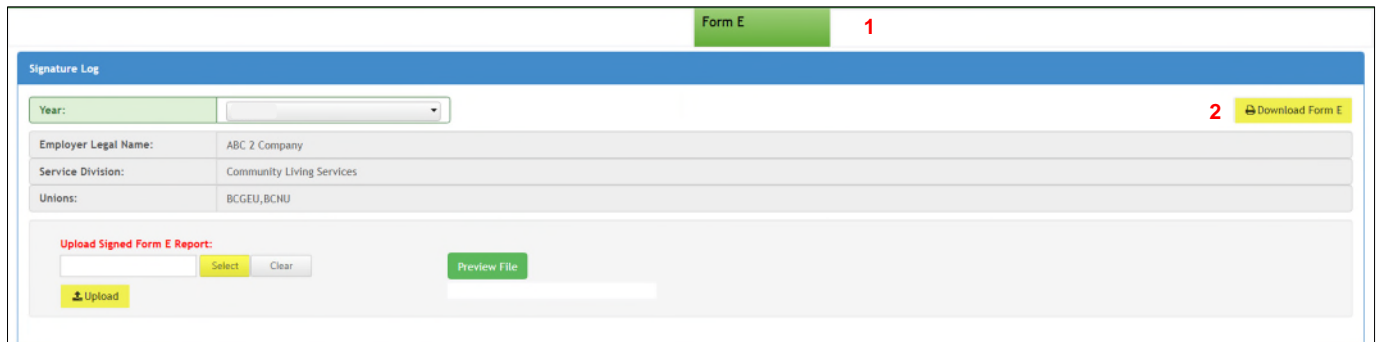
G. Form E: Signature Log

Form E is to be completed after Forms A-D have been signed and uploaded.

Form E includes:

- A separate signature page that shows who from the employer and union(s) are authorized to sign the essential services plan.
- For employers with one union, one signature box is completed.
- For employers with more than one union, one signature box is completed per union.

Remember: Forms A to E are incorporated into the Essential Services Order issued by the Labour Relations Board and can only be amended or altered by agreement with the union(s) or as ordered by the Labour Relations Board.

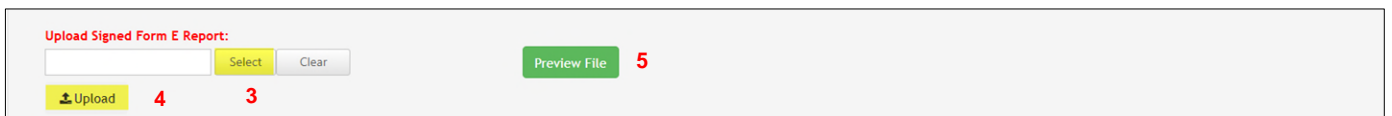


The screenshot shows a web interface for the 'Signature Log'. At the top, there is a green tab labeled 'Form E' with a red number '1' next to it. Below the tab is a blue header bar with the text 'Signature Log'. Underneath, there is a 'Year:' dropdown menu and a 'Download Form E' button with a red number '2' next to it. The main content area displays the following information:

Employer Legal Name:	ABC 2 Company
Service Division:	Community Living Services
Unions:	BCGEU, BCNU

Below the table, there is a section titled 'Upload Signed Form E Report:' with a text input field, a 'Select' button, a 'Clear' button, and a 'Preview File' button. At the bottom left of this section is an 'Upload' button.

1. Click Tab: **Form E**
2. Click "**Download Form E**" to download completed **Form E** (PDF file) and send to Employer and Union signatories for signing.
3. After the form (**Form E**) has been signed by all parties, upload the executed form. Click "**Select**" button in Form E "**Upload Signed Form E Report**" section to browse for the signed Form E



This close-up screenshot shows the 'Upload Signed Form E Report:' section. It includes a text input field, a 'Select' button, a 'Clear' button, and a 'Preview File' button with a red number '5' next to it. At the bottom left, there is an 'Upload' button with a red number '4' next to it and another red number '3' next to the 'Select' button.

4. Click "**Upload**" button to upload the signed Form E
5. Click **Preview File** to **preview** the uploaded Form E

H. Consolidate Plan

Once the forms have all been finalized and uploaded, the complete plan is to be forwarded to a Labour Relations Board supplied email address. The Labour Relations Board, after reviewing the agreed draft Order, will issue a formal Order and return it to CSSEA to upload to the database and for agencies to comply with in the case of job action.

Click "**Consolidate Plan**" to created the completed plan (PDF file)

