



Bargaining Bulletin

HOSPITAL EMPLOYEES' UNION

THE HEART OF HEALTH CARE

Chris Allnutt's comments at March 7 press conference announcing strike votes

HEU secretary-business manager Chris Allnutt's March 7 statement to the media announcing that the facilities subsector bargaining association will seek a strike mandate from health care workers.

Good afternoon.

Two months ago, our unions sat down with B.C.'s health employers to begin negotiations for a new contract covering 43,000 workers in the province's hospitals and long-term care facilities.

This is a critical set of negotiations.

Privatization and restructuring has thrown health care delivery into chaos. More than 6,000 health care workers – 90 per cent of them women --have been fired without cause.

Hospitals and long-term care facilities have been closed. Surgery waitlists are growing.

Morale among the women and men working in health care is at an all time low. One out of three are now looking for work elsewhere.

Public anxiety about the state of health care is high. The so-called new era for health care has been a disaster for British Columbians.

It's never been more important for health care workers and their employers to produce workable solutions to the problems we now face in our health care system.

For health care workers, that means an end to the fear and uncertainty that's infected our hospitals and long-term care facilities – where our members don't know from one day to another if they'll be the next victims of health care privatization.

For patients and residents, it's the knowledge that their care will come first -- before corporate profits and ill-considered cost cutting.

For B.C. communities, it's about protecting services – and decent jobs that support local businesses and families.

But for collective bargaining to succeed, both parties must trust the process. And after the last couple of years, trust is in short supply.

That's what happens when the premier rips

...over



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up legal contracts after promising he wouldn't. And when health employers' signatures on a collective agreement mean nothing.

That's what happens when more than 6,000 workers – most of them women – lose their jobs because the Campbell government and health employers don't honour their commitments.

On day one of bargaining, we told health employers that establishing a climate of trust was essential for talks to be productive. We asked them to suspend their privatization plans and stop issuing layoff notices during bargaining. Their response has been provocative and mean-spirited. They've issued 2,500 more pink slips since bargaining began -- including a thousand on Vancouver Island just two weeks ago.

Then on February 19, the Health Employers Association of B.C. put more than a 100 pages of concession demands on the table that target everything from wages and benefits to sick leave and protection for injured workers.

Health employers have gone too far. They are mistaken if they think they can intimidate health care workers into a lop-sided contract by continuing to fire workers and slash health services.

We cannot stand by while health care -- and decent jobs -- are destroyed. That's why today we are asking our members to provide their bargaining committee with a strike mandate.

Starting in the next few days, our unions will ask health care workers in every cor-

ner of the province to send a clear message to health employers that they're determined to bargain a fair collective agreement that protects health services and jobs.

We expect to complete our strike votes by the end of the month.

At the same time, we are ready to return to the bargaining table at a moment's notice if health employers are prepared to table a more reasonable set of bargaining demands in a climate free of intimidation.

Tomorrow is International Women's Day and I want to take a moment to acknowledge the thousands of women fired by this government -- and the tens of thousands more who continue to care for patients and residents under very stressful conditions.

These women are worth every penny they earn. And while health employers and this government may not value their work -- patients, residents and the public do.

I also want to acknowledge another group of women – those workers who've been hired by foreign corporations at poverty-level wages so that shareholders can profit from privatized health care services.

The wages and conditions these workers must endure is an indictment of a privatization agenda that targets and devalues women's work.

The reality is, health care services depend on women's work. The value of that work must be reflected in a new collective agreement.

March 7, 2004