HEU wins new two-year deal

It took nine days of HEU strike action and 29 continuous hours of mediation but members of the Hospital Employees' Union have been successful in reaching a new master collective agreement.

The HEU strike — the union's first in acute care since 1976 — began June 22, 1989 following eight days of Honor- ing Picket Lines set up by the B.C. Nurses Union. HEU's escalating action started with 19 locals but by June 29, 80 locals were on strike and close to 20,000 members were off the job.

The new two-year agreement was reached Friday, June 30 after five days of round-the-clock bargaining. The tentative deal was to be voted on by HEU members at special meetings beginning July 4, 1989. Both the HEU Provincial Executive and Provincial Bargaining Committee endorsed acceptance of the package.

HEU Secretary-Business Manager Sean O'Flynn said the settlement was reached as a result of the actions taken by HEU members at picket lines around the province. "It was their determination to put the pressure on HLRA while still maintaining essential services that won this agreement."

O'Flynn said the tentative agreement calls for an overall wage package of 13.85 per cent compounded over two years plus 100 per cent payment of retroactive classification monies.

Full details of the settlement were distributed to the members in a Bargaining Bulletin. Throughout the strike, the union maintained essential services in accordance with a process worked out with the employer’s bargaining agent, Health Labor Relations Association. In that process, an arbitration panel chaired by private mediator Stephen Kelleher heard submissions from all three unions in health care and then designated essential services at each facility.

Around the province, HEU members were called into action for the strike. Clockwise, from the top: A rally in Vernon; HEU's Debbie Hiltz and Wayne Pollock lead picketing; HEU's Provincial Bargaining Committee meets face to face with HLRA.
OKANAGAN REGION

Okanagan members prove they care!

When members of the Hospital Employees' Union make a pledge to provide essential services during a strike, they really mean it!

Just ask Dennis Jeffery, chairperson of the Penticton Regional Hospital local, who helped quarterback the HEU strike at that facility.

Jeffery says it was the members' commitment to health care that saw eight Practical Nurses and Orderlies trade their picket signs for sponges and return to bedside duties of bathing residents and patients.

"These members decided on their own to go in and bath all those people who couldn't get out of bed," says Jeffery. "It took over four hours and they did a fantastic job."

None of the members were paid for their work but Jeffery says the important thing was for the residents to get their bath.

In fact, the team continued to undertake the bathing duties throughout the strike to help residents and patients with personal hygiene.

Jeffery, who is also HEU's 2nd vice-president, says it has always been HEU policy to provide those important services.

The extra efforts of HEU members appeared not to have gone unnoticed by the patients either.

One Keremeos man, recently released from the Penticton Hospital, provided a gourmet coffee machine and stocked it daily for the picketers.

And to top things off, he supplied the strikers with boxes of fresh Okanagan cherries.

"We felt that both the patients and the public were behind us in this dispute," says Jeffery.

KOOTENAY REGION

Staff shortages a big issue

The reality of being on strike was not something that Shelley Wedderburn had ever really considered before.

"It never really hit me until I put on my picket sign and then I just thought holy cow," says the Sparwood local shop steward.

But Wedderburn says her determination was strengthened by her duties on the picket line.

"Our biggest problem in health care today is the lack of staff and the constant cutbacks," says Wedderburn. "We've been hit hard with layoffs and now we're being hit again."

Wedderburn, who herself faced layoff effective July 1 after 9 years work in dietary, says the employer is regularly combining jobs, cutting back in clerical departments and eliminating LPNs.

"Those of us who are left to do the work are burning out more quickly than ever. There just needs to be more staff."

In addition to the staff shortages, Wedderburn feels that recent cost of living increases have meant less disposable income for all health care workers.

"We're all finding it harder to make ends meet."
ISLAND MEMBERS CITE UNDERFUNDING

Government spending questioned

The lack of adequate money for health care stems directly from backward government funding policies, according to HEU member Sheryl Rankin.

Rankin, a rehabilitation assistant at Glengarry Hospital in Victoria, says she simply cannot understand how the government can have endless money for the military but never enough for health care.

"The government (provincial and federal) has got to spend more money on health. It's much more important than nuclear weapons or highways," Rankin, a single mother with four children under age 10, is particularly angered by the recent federal government advertising blitzes aimed at selling the budget.

"They spent more than $2 million in advertising alone," Marianne Davies, a cook at the Cumberland Diagnostic Treatment Centre on Vancouver Island agrees the government spends its money in "pretty stupid places sometimes."

"There have been times in our hospital kitchen when we ran out of five and six things a day — real basics," Davies says.

That, she says, is frustrating when you see the government continue to spend money on construction of new facilities. "I think they need to fund and staff our existing hospitals adequately before they build any new ones."

The most recent statistics available provide ample evidence of a steady decline in government contributions to hospital operating costs. Hospital funding in B.C. is the lowest in Canada, on a per capita basis.

As well, provincial government contributions to the B.C. Medical Service plan have dropped by 15 per cent since 1981 alone.

These cutbacks, though, are attracting public attention. HEU's Sheryl Rankin is hopeful the health care strike has helped even more people to realize that the system is overworked and underfunded.

MEMBERS UNITE IN KITIMAT

Strike brought new challenges

For Kitimat's Cindy Russell, the HEU strike was nothing short of miraculous.

"We ran a 24-hour picket line, kept it fully staffed day and night and had fun at the same time," says Russell, chairperson of the 120-member local.

"Before the strike started, we all wondered if we could really pull it off. But it was great. "People fit right into the strike. People who have never bothered to come to union meetings were lining up to help."

Russell, also a member of HEU's Provincial Executive, says that personally, the strike presented her with a new challenge.

"I'd never been in this position before and I have to admit I loved it." During normal operations, Russell says its common for members from different departments to never meet one another. "But the strike brought all sorts of people together for the first time. They really got to know each other."

While Russell admits there will always be those who complain throughout a strike, on the whole she says the strike has had a unifying effect in her local.

Like so many activists, her big hope is that participation in the strike will translate into better attendance at future union meetings.

Support from other unions was high throughout the strike as shown in this photo of a rally held in Prince George.

Pickets take a break at Prince George Regional Hospital.
St. Paul’s local goes high tech for HEU strike

The HEU strike went high tech for HEU members at Vancouver’s St. Paul’s hospital.

"We launched our strike organization into the 90s," says Roy Umlas, chairperson of the St. Paul’s local. "Between the computer, cellular telephones, and high powered walkie talkies, we tried to use all of the tools available to ensure efficient strike operations."

St. Paul’s set up a fully equipped modern office complete with photocopying equipment and the local’s computer as soon as the strike began.

"The only thing we were missing was a FAX machine," said Umlas.

The local used the computer to keep their picket pay records and produce bulletins to the membership.

Strike headquarters was housed on the 20th floor of the hotel next to the hospital. And with the BCNU next door, the HSA down a couple of floors, there was close communication and cooperation between the three unions.

Management came to the headquarters for daily meetings, and provided the cellular telephone in response to a request for more phone lines.

Walkie Talkies have helped to protect the safety of picketers, as the hospital is located in Vancouver’s West End. All three Unions used Walkie Talkies to stay in contact with picket captains and get instant reports of situations.

"All of this high tech helped us," says Umlas. "But even without it our strike would have still worked. Because it was about people.

"Machines can’t picket the hospital, machines can’t talk to the public, and machines can’t ensure essential services. Our members made this strike work."