

CCERA, PRICARE DEMAND \$1,000 PER WORKER 4

EXTRA!

Guardian



VOL. 10 NO. 1

THE VOICE OF THE HOSPITAL EMPLOYEES' UNION

JANUARY 1992



HEU holds strike vote

Province-wide ballot starts January 27

The Provincial Executive of the Hospital Employees' Union has decided to hold strike votes in every local from January 27 to February 13, 1992, to get health employers to bargain a fair contract without concessions.

After weeks of stalling and stonewalling by health care employers, contract talks between HEU and the employers' main bargaining agent, the Health Labour Relations Association, were suspended on December 19.

Full details of HEU's position and the employers' concession demands

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Return address:
The Guardian,
2006 West 10th Ave.,
Vancouver, V6J 4P5

It's time to stand together

It has become clear that the only way to get health care employers to bargain seriously is to confront them with a strong vote in favour of strike action.

After bargaining was paralyzed for several months by the outgoing Socred government, HEU returned to the bargaining table with employers belonging to Health Labour Relations Association on November 4. We were ready to do whatever was needed to negotiate a new contract.

When it became clear that the employers were no more ready to negotiate than they were a year ago, HEU called for a mediator to help get the talks going again.

We reduced our demands to show we were serious about

getting a deal. But employers refused to budge.

Employer concessions and rollbacks remain on the table. Employers refuse to even begin talking about wages. A year after special negotiations on pay equity had begun, HLRA announced that it was "too early" to talk about pay equity.

Finally, on December 19, the mediator suspended the talks between HEU and HLRA.

We at HEU have worked hard to get contract talks on track. Employers, who are giving themselves huge salary increases, are out to strip us of our



ALLEVATO

rights and even our jobs with their insulting offers.

We have reached the conclusion that a strong "Yes" vote in favour of a strike is the only way to show our employers that HEU members are determined to stick together to get a fair deal and to protect what we already have.

Once the strike vote is done, the Union will return to the bargaining table and work day and night to get you the contract we deserve.

Our goal is to negotiate a contract without job action. But we are prepared to take whatever job action is necessary to win a new contract.

We have learned the lessons of 1989, and we will be ready to put more pressure on employers while ensuring that patient care is maintained.

Carmela Allevato
HEU Bargaining Spokesperson

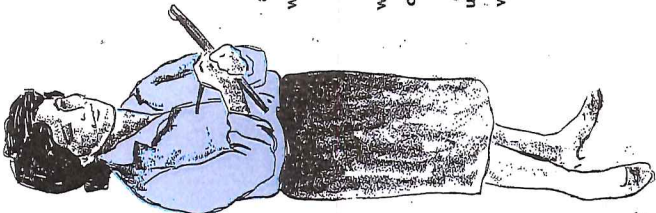
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Here's the story so far.

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Every member of HEU, men as well as women, will gain from HEU's pay equity plan. And it is designed to be put into effect in the life of the next contract.

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A WAGE INCREASE

A reasonable hike in hourly rates

HEU is seeking across-the-board wage increases in each of two years of a contract, along with protection against inflation and the GST.

HEU has reduced its opening proposal of \$3 a year in each year. We have said we want a fair increase in line with that now being paid in other parts of the public sector. Teachers recently received hikes of up to \$1.80 an hour.

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WORKING & CARING CONDITIONS

35-hour week, action on workload

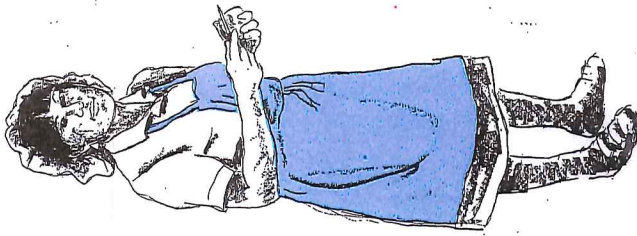
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As a result, workload has become a major issue for HEU members.

HEU is proposing new contract provisions that would set minimum staffing levels for all times of the day to guarantee the health and safety of both patients and workers.

HEU also wants the collective agreement to contain protection for all members of the nursing team, especially licensed practical nurses, patient care aides and orderlies.

Here's where we stand in our contract talks. To win a fair agreement, we'll need the unity and support of every HEU member.



Government cutbacks in the past 10 years mean that we health care workers are working harder than ever.

Patient care is suffering. This increased workload means more injuries on the job, too.

coverage. HEU also wants improved Special Leave and Sick Leave provisions.

HEU has recently analyzed benefit packages hospitals give to their management employees. Not surprisingly, these management benefits are far more generous than those given to unionized health care workers.

In spite of this double standard, HLRA is stonewalling HEU's demands for better benefits.

JOB SECURITY

Real protection from privatization, contracting-out

The job security of HEU members has been under attack in the last decade. Layoffs, contracting out and privatization have taken their toll on HEU members.

The issue of job security has taken on a new urgency with the recommendation from the B.C. Royal Commission on Health Care and Costs that 2,000 hospital beds be closed around the province and replaced with better home care and extended care.

HEU's demands include protection in the contract against privatization and contracting out, and better rules for scheduling and overtime.

Here's what health care bosses want you to give up

IN many hospitals and health care facilities, there are more management people now than there were a few years ago.

As an HEU study has documented, most of these managers get salary increases that are much higher than those given to front-line workers.

Given that health budgets are tight, who pays for all these extra managers and their goodies?

It has become clear at the bargaining table that health care management want YOU, the front line health care worker, to pay.

EMPLOYERS STALL

After one year, rollbacks still on table

Part of their strategy is to stall. HLRA, CCERA and Pri-care took full advantage of the Sacred Bill and 82 wage controls which were brought in last spring.

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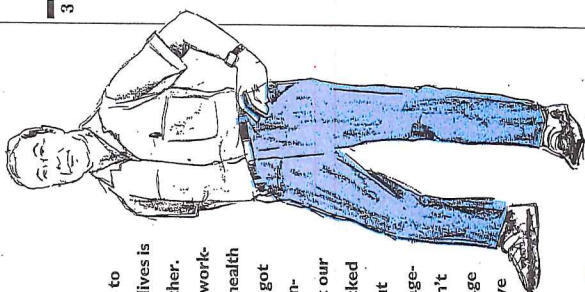
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Kelleher suspends talks.

The best way to improve our lives is to stand together. Last year, by working together, health care workers got rid of a government that cut our jobs and attacked our wages. But hospital management still hasn't got the message that times have changed.



Since the Socreds were thrown out last fall and Bill 82 wage controls defanged, HLRA has refused to bargain seriously.

It all climaxed in December when HLRA announced that it was "too soon" to talk about pay equity for HEU members.

So far, HEU negotiators have yet to see a wage proposal from any of the employers.

Throughout the bargaining, HLRA and the other employers have refused to withdraw their concession and rollback demands, in spite of HEU's vow not to accept any concessions.

CONCESSION DEMANDS

They want you under their thumbs

Among the demands from all employers, including HLRA, CCERA and Pri-care, are elimination of bumping rights. This would mean that employers would have full power to move workers wherever they want after layoffs.

Employers want to take any control over this process out of your hands. When beds are closed, you would have to work where the employer wants you to, not where you want to.

This issue is critical because of the coming shift in health care from hospitals to the home, as called for in the recent Royal Commission report.

Employers want to reduce your right to bid for job postings. That means any job of less than four months wouldn't be posted. Right now, any job longer than 30 days must be posted.

Casuals would also lose if employers get their way. They want to eliminate seniority as a factor in assigning work, and make it easier to fire casuals. In other words, you would have to obey your boss at all times, or you won't be called.

Employees on Workers' Compensation or Long Term Disability are also in the employers' target zone. They want to cut WCB wage top up, and have more freedom to fire injured workers.

Employers want to make it more difficult to establish a Long Term Disability Claim, tell you which doctor to see, and make appeals more difficult.

Scheduling provisions would go out the window, including the limit of six consecutive days of work, limitations on three different shifts within six days, and the requirement that off-duty days be consecutive.

This scheduling "flexibility" could also lead to income loss and job loss for some workers.

Special leave provisions are under attack as well. Employers want to be able to demand proof of hospitalization or emergency medical treatment for family members when special leave is used.

And they'll want seven days notice, too.

CCERA, PRICARE DEMANDS

At least \$1,000 per worker in cuts

HEU members working in facilities bargaining for CCERA or Pri-care face concession demands from employers that include all of the above and more.

CCERA and Pri-care employers want to eliminate super stats, roll back vacations and sick leave, force workers to pay part of health care plans, and make it more difficult for the grievance process to work.

Employers dress up these unacceptable demands as providing "flexibility" for "more efficient utilization of staff."

And by attacking Workers' Compensation and Long Term Disability, which are needed more than ever because health care workers are working harder and thus are injured more often, employers want to place a heavier burden on workers, especially injured workers who are unable to fight back.

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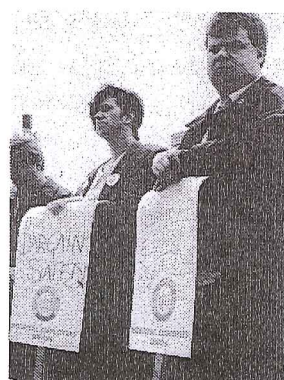
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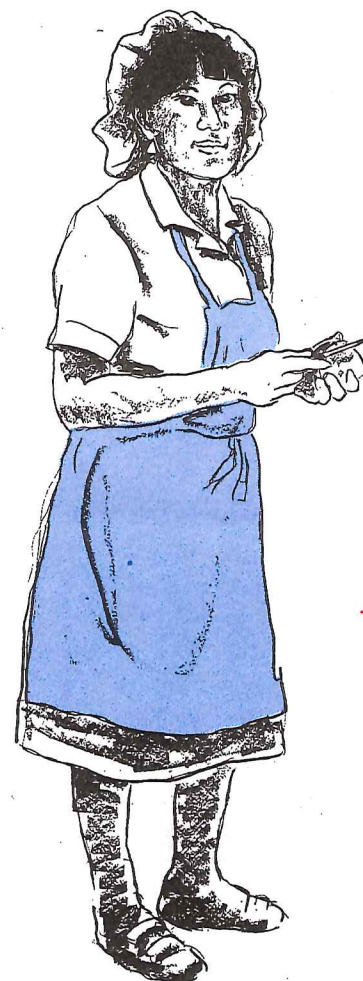
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The 35-hour week, won in previous rounds of bargaining but lost due to Socred wage controls, should be restored.

Other HEU proposals would give Occupational Health and Safety Committees some teeth to reduce workplace hazards.

HLRA has refused to respond to these proposals.

UNION RIGHTS

Quicker, fairer grievance process

HEU has proposed faster and fairer grievance procedures for health care workers.

At present, grievance procedures allow employers to deny justice by delaying it. These delays cost hospitals, and HEU, a great deal of money.

Employers have rejected these important HEU proposals.

IMPROVED BENEFITS

Implement overdue changes on LTD, leave provisions

The union is calling for extension of benefits to casuals and improvements in the Long Term Disability plan, and improved Extended Health Plan

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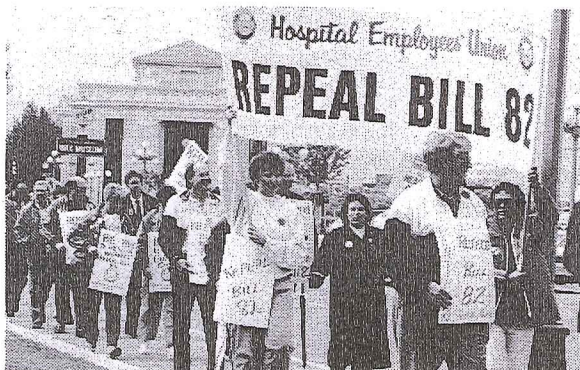
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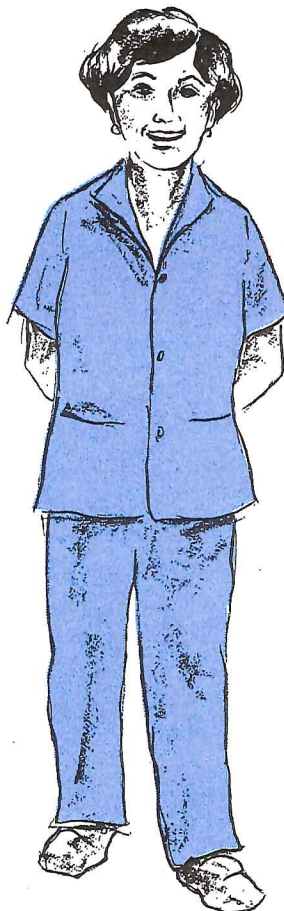
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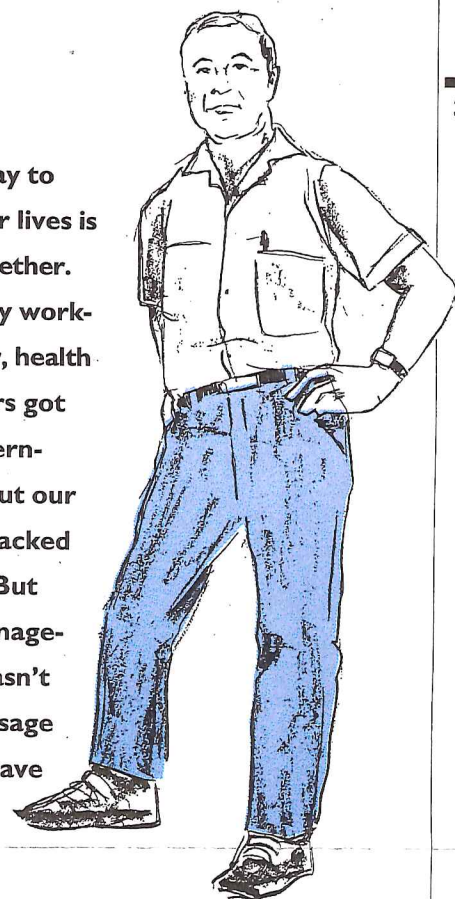
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And by attacking Workers' Compensation and Long Term Disability, which are needed more than ever because health care workers are working harder and thus are injured more often, employers want to place a heavier burden on workers, especially injured workers who are unable to fight back.

Confronting unsafe work: you must refuse to do it

You've just been ordered to do some work that you fear might endanger your health or the health of a patient.

It could be lifting a heavy patient on your own, working in an area where dangerous fumes are present, or working overtime when you are exhausted.

What do you do?

Do you risk your health or patients' health, or do you risk the anger of your supervisor?

If you refuse to do that work, the law is on your side. To be specific, Workers' Compensation Regulation 8.24, which says that if you do any work which you think may harm yourself, a patient, or anyone else, you are breaking the law.

In other words, you have more than a right to refuse unsafe work, you have an obligation.

If you go to your supervisor and say that a patient cannot be lifted by just one person, you are carrying out your responsibility under the law. If the supervisor tells someone to help you with the lift, they have solved the problem.

So what happens if you decide your work is unsafe, and your supervisor insists that you must do that work?

Regulation 8.24 protects you from disciplinary action if you believe that the work is unsafe. It does not matter what your supervisors believe.

The employer may assign you temporarily to do other work while the problem is being resolved.

Regulation 8.24 is becoming more necessary than ever in health care, with higher workloads, more worn out equipment, and fewer workers being called in.

If you have any questions about your obligation to refuse unsafe work, contact your HEU shop steward, local officer or Occupational Health and Safety Committee member.

Full details on Article 8.24 and how it can protect you are available from them or the Provincial Office.



TALKS BEGIN: HEU tabled all its bargaining proposals with health employers on Feb. 14, 1991, and held a news conference to outline demands to reporters. The union has yet to receive a counter-offer.

Long-term care bosses demand \$1,000 from each HEU member

Continuing and private care employers strongly oppose HEU's Six Steps For Fairness bargaining demands, and they're out to gut existing agreements with serious and coordinated concession demands.

HEU is seeking to raise continuing care contracts which it negotiates with the Continuing Care Employee Relations Association and Pri-Care, the private care employee relations group, to the same level as the Master Collective Agreement that covers other health workers.

CCERA and Pri-Care bosses reject the principle of parity with the HEU/HLRA agreement for HEU members in continuing and private care facilities. They want to keep treating their workers differently.

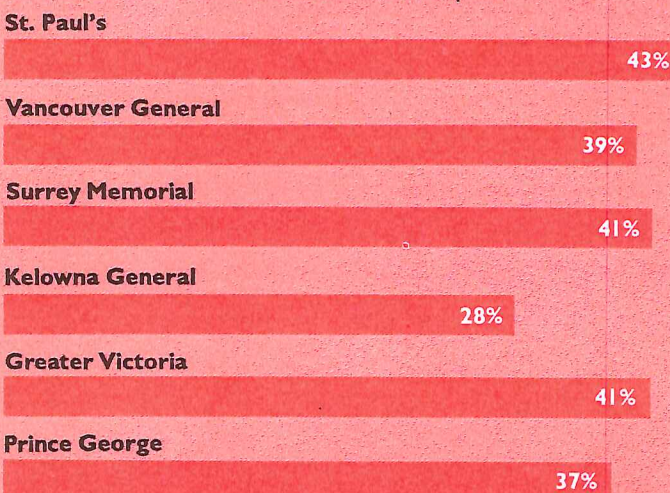
Their hardline approach at the bargaining table also includes confrontational rollback demands made in negotiating meetings through the spring and summer.

The employers want to eliminate Super Stats, introduce cost shared benefit plan premiums that would cost a worker \$1,000 annually, and gut vacation and sick leave entitlements, just to name a few.

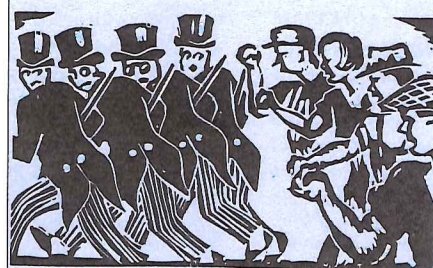
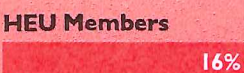
Continuing and private care workers will figure prominently in the Union's struggle to win a fair collective agreement. HEU will not accept concessions and will continue to fight for parity and one agreement for all its members in health care.

PAY INCREASES: WHAT HEALTH BOSSES GOT

Average percentage increases for 1988 to 1991 for administrators of selected B.C. hospitals



And here's what we got



Management wage hikes condemned

HEU first uncovered big salary boosts for hospital brass in June. Here are some of the newspaper excerpts from the public uproar which followed:

"The vice-president of medicine was boosted to \$132,000, the vice-president of patient care got \$123,000...and the vice-president of continuing care almost reached \$100,000. Gives a whole new meaning to the word 'care,' doesn't it?"

Victoria Times-Colonist editorial
(June 29, 1991)

"[Kelowna General Hospital board chairman] Fitzpatrick says visiting government or professional officials are often treated to a round of golf."

An explanation of the big bucks spent by KGH on golf club memberships - Kelowna Capital News
(June 1991)

"...The provincial government is spending \$225,000 to repair the roof at the Royal Jubilee Hospital. Presumably this damage was caused by the passage through the roof of Greater Victoria Hospital society management salaries."

A. Lambie, letter to the editor - Victoria Times-Colonist
(July 23, 1991)

"It's amazing that some hospital boards saw fit to give their top administrators hefty pay increases ...54 percent in the case of the Greater Victoria Hospital society's president - while holding hourly paid workers to 9.4 percent is ...doubly provocative in these times of bed closures, inadequate staffing and long waiting lists."

Judy Lindsay - Vancouver Sun columnist
(June 27, 1991)

"These guys are just putting their hands in the barrel and dragging the money out."

Vancouver businessman Fred Walker - The Province
(June 27, 1991)

Guardian

"In humble dedication to all those who toil to live."

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