Ramsey on reform

B.C.'s new health minister Paul Ramsey talks about what happens next, in a special Guardian interview.

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Guardian

UNLOADING ON WORKLOAD OVERLOAD

Care aide Deb Hills was rushing to make up lost time on the day she sprained her back. It was a costly but preventable accident.

Thousands of HEU members like Hills are affected by the symptoms of workload overload: stress, fatigue, and an epidemic of injuries. That's why HEU has targeted workload in a special campaign.

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CARING FOR LIFE

Corporate tax freedom day highlighted the free tax ride enjoyed by many profitable companies.

PAGE 7

Saving jobs

The employment security deal has kept hundreds of health care workers working. Electrician Rick Hastings is one of them.

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COMMENT

Time to stop cuts in acute care services and build community care

By Carmela Alleavato

Five years ago, the provincial government unveiled its New Direction in Health Care for British Columbia. Individuals and communities were to take more responsibility for their own health and forego direct delivery of services. The stated goal was to deliver health care "closer to home," out of the hospitals and into communities and homes where people live.

Two weeks after the New Directions announcement, the provincial government announced the closures of Shaughnessy Hospital. This was the first dramatic step to reduce hospital services. British Columbia's third largest teaching hospital, with world class programs employing more than 3,000 people, would be eliminated. The programs were to be transferred to remaining facilities and acute beds were to be increased in other parts of the province.

In spite of a huge public outcry, the government proceeded with the closure. A subsequent task force was critical of the government's process. That's what's under the bridge. Shaughnessy closed last September. Some programs were transferred to other facilities, some beds were transferred to the Fraser Valley, and some services remain on the site administered by other Vancouver hospitals. The provincial government saved $40 million.

Indeed, 1993 was a very good year for the provincial government in terms of reducing the health care budget. It spent approximately $300 million less than it budgeted for. And preliminary reports indicate that the total of 1993 B.C. hospital operating deficits are less than half of what was forecast.

The cost overruns predicted by opponents of the Employment Security Act didn't materialize at all.

The Royal Commission on Health Care and Costs stated in its 1991 report that to achieve the closer to home objective, hospital care services should be available to British Columbians on the basis of a formula of 2.75 beds per 1,000 population. This target was to be reached by 1995 and, coupled with a healthy increase in community services, would allow for the acceptable level of hospital care in British Columbia.

According to provincial government officials, the 2.75 bed target translates into 850 patient days per 1,000 population. This figure of 850 is significant because it is the objective stated in the Employment Security Act. More importantly, this target has been achieved.

It has been achieved through the closure of Shaughnessy Hospital, the reduction of hospital service in some communities and through the impact of the reduction of the work week from 37.5 hours to 36 hours without loss in pay for 50,000 health care workers.

What has not been achieved is a healthy increase in community services. Despite the reduction in hospital beds, the hospital sector has not been able to catch up with the cuts, instead of the casual or nonexistent relationship that exists elsewhere.

The experience of moving mental health services closer to home during the 1980s was a blip on the radar for British Columbians, and must not be repeated.

The Hospital Employers' Union wants the reduction of hospital care to stop. We remain committed to New Directions, but to the whole plan, not just part of it. Without community services in place to substitute for hospital care, New Directions won't be new after all.

letters

The Guardian welcomes letters to the editor. Please be brief. Write to 2006 West 10th Ave., Vancouver, BC V6J 4P5.

Ramsey Skidt

Armstrong Report

from a letter to HEU secretary-business manager Carmela Alleavato.

Thank you for your letter of November 4, 1993, and for the copy of the report "Closer to Home: More Work for Women" by Dr. Pat Armstrong. The goal of the Closer to Home initiative is to ensure more local management of health services and to provide more services in homes, local communities and regional areas.

An adequate supply of professional and employed health care providers and an effective mix of providers are essential requirements in this initiative. The intent is to provide better support for voluntary caregivers in their appropriate roles, not to offload the responsibility of professionals onto these caregivers.

The Hospital Employees' Union's interest in caregivers, and women caregivers in particular, is much appreciated. Dr. Armstrong's report will indeed contribute to the discussion around the design of our revitalized health care system.

Thank you for your effort and initiative helping to address these important issues.

Paul Ramsey, Miniter of health

Duncan member didn't reap benefit of 36-hour week

I am writing in response to the Sept./Oct. Guardian article regarding 36-hour work week schedules.

Our local is part of the minority of facilities that had most of our presented schedules denied. Our employer took the position that only employees in direct patient care will be back-filled with replacements. Our schedules were denied before they were even presented. Now we have to work 18 minutes less each day, but we still have the same amount of workload! Our workload is even more stressful than before.

It's a shame that all dues-paying HEU members didn't benefit from this reduction and that the minority of us have to bear the burden of this agreement instead of reaping the benefit.

Judy Clarke, Duncan local

Tragedy strikes former member in Chile

Former HEU Holy Family member Rosita Rojas and her husband Alejandro came to Canada after a brutal military dictatorship was imposed in their native country of Chile in 1973. With the help of a priest at that time, Alex, a union and social activist, was released from prison on the condition that he leave Chile. Like many other Chileans the Rojas family was sent into exile. They came to Canada. Once here Roja worked at everything from janitorial services to child care worker. Alex found work in mines all over Canada which took him and his family for months at a time. In the late 1980s Rosita became a patient care aide working for two years at Holy Family Hospital and for a time at Evergreen Lodge in North Vancouver.

In 1993 Alex was allowed to return to Chile. He and the two children went back promptly, while Rosita stayed behind to support them in their repatriation.

A strong union supporter, she was a member of those that had built the union and negotiated wages that allowed her to support her family with more dignity.

Rosa joined them in Chile in 1995 and in 1993 Alex got a mining job just outside their home town of La Serena.

They were all just beginning to enjoy a stable family life when on Feb. 7th Alex's truck went over an embankment at the mine site. He died instantly. Under Chilean law a married woman may not hold a bank account so the little funds the family has are inaccessible now to Rosa. Friends are organizing support. Anyone wishing to contribute emotional and/or financial help can do so by calling Heather Keely at 254-2577 or writing to 2550 ton Street, Vancouver, B.C. V5R 1V3.

Heather Keely, B.C. Nurses' Union, Vancouver

Guardian

"To humble dedication to all those who lie too few."
Battle for first contract heats up
Come Share is still on strike

HEU is stepping up its efforts to win first contracts for the more than 1,000 health care workers who have joined the union's ranks in the past year - because of a recent Labour Relations Board decision on first contract arbitration and the ongoing Come Share strike.

"Workers cannot be asked to subsidize health care reform"

Faced with employer stonewalling in the fight to win first contracts for many new contract, HEU applied to the LRB last year to compel the labor code's arbitration process to get agreements for a seven-bed SHARE in Abbotsford and Yarrow. But after a lengthy delay, the board refused HEU's request and instead implemented guidelines that favor employers.

HEU secretary-business manager Carmela Allerano said the decision fails to protect workers from employers who wish to preriom unionization with a bargaining fees. The LRB had a chance to send a message to employers to get serious about first contract negotiations, he said. "They blew it."

"Instead, the decision encourages employers to propose substantial collective agreements."

The LRB ordered mediation for the disputes at Bevan and Yarrow. Meanwhile, more than 200 Eagle Ridge Hospital workers achieved their contractual goals, the struggle is proving harder for many other new units, particularly in the emerging community sector.

HEU is pressing health employers and Victoria to recognize the principle that care providers in the community sector deserve comparable pay to that earned by their sisters and brothers in long-term care and acute care facilities. That's at the heart of the two-month-old strike at Come Share adult day care in White Rock and Newton, where HEU members are lobbying government to provide sufficient funding to achieve a fair settlement. HEU took that message to women's equality minister Penny Priddy in a meeting in February. The strike is in Priddy's riding.

"We've said the government that it's community care workers cannot be asked to subsidize the health care reform process," Allerano said. "With Come Share wages and benefits per cent less than the wages earned for the same work in long-term care, it's clear the government must act. We need a clear statement from government that it expects wages in the community sector to be a level comparable to those prevailing in long-term care and acute care. The changes can be phased in, but we need a signal that's practical for adult care workers to help us."

HEU is also negotiating with employers at South Island Community Living and Western Human Resources, and Victoria Community Resource Society, all on Vancouver Island, and Western Human Resources in the Lower Mainland.

HEU members at Maple Ridge Intermediate Care are bargaining with a 100 percent strike mandate and a strike vote has also been taken at Royal City Manor, in New Westminster, where the employer has threatened a lockout. Negotiations are also under way at more than a dozen other facilities where HEU members are seeking first contracts.

Prince George review recommends LPN return

Standing together, a broad cross section of trade unionists from public and private sector unions turned out to support HEU's demand for first contract action at a Dec. 1 rally at the Labour Relations Board.

Provide sufficient funding to achieve a fair settlement. HEU took that message to women's equality minister Penny Priddy in February. The strike is in Priddy's riding.

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Surpassing her goal

Jennifer Ritson came close to winning a school board election on her first try

by Stephen Howard

Jennifer Ritson spent election night, Nov. 20, in the kitchen of her Salt Spring Island home. "I was cooking things with a lot of chocolate in them, because that's what I do when I'm nervous. I was thinking in a way 'what am I doing?' and then I kept telling myself 'you can manage.'

Ritson, a nurse aide and housekeeper at Lady Minto Hospital, was taking her first stab at electoral politics, vying for one of five school trustee positions on her local board.

She ran because she wanted to play a role in her children's education as they grew up. She was also concerned about the lack of support and funding for the local school, which was struggling to maintain high-quality education for students.

Balancing It All

Ritson attended all-candidates meetings, gave speeches and answered questions, and there were buttons and car posters but no door-to-door. Instead, word of mouth was the most effective means of getting her message out, and health care workers at the hospital were among her strongest supporters.

"It's like having everyone you know telling their friends," she said.

Ritson had faced a modest target of winning 150 votes. But when the final count came in election night, Ritson had far surpassed her goal. She pulled in 721 votes cast by 2,000 islanders and came within an inch — 69 votes — of winning the final trustee seat.

"This was a great morale booster for my members," says local chairperson Sylvia Stephens. "They all enjoyed being in charge for a change." It was also a good warmup for bargaining — the Simon Fraser contract expires March 31.

Parking rate battle in Greater Vancouver

A number of Lower Mainland locals are waging a running battle over exorbitant parking rates, which are being considered by the Greater Vancouver Regional District for parking facilities it operates at hospitals in the region.

HIT has been successful in rolling back the first proposal — a 50 per cent boost. A delegation of union reps attended a November GVRD meeting and argued about the impact of the increase on staff, and the lack of dependable 24-hour public transit service to their facilities. GVRD officials admit current parking rates cover all operating costs at the facilities, and even provide a profit. But now there's an effort to have parking rates also cover the bank loan payments which financed construction.

The latest proposal is for a 25 per cent boost, while HIT is calling on the regional government to hold the line with a five per cent boost.

Services increased in balanced budget

After a lengthy and tough budgeting process, the Provincial Executive has adopted a balanced 1994 HEU operating budget as presented by financial secretary Mary LaPlante.

"The new budget provides increases in areas that provide direct services to members like education programs, campaigns and projects, and more staff representatives," LaPlante said.

The 1994 budget also designates funds to cover unexpected costs incurred in 1993 for bargaining the Employment Security Agreement.

"Who would have thought in December 1992 that we'd be back bargaining again in 1993?" she said.

On the revenue side, LaPlante said the health care reform process has made predicting days income an even tougher job, and LaPlante says it will have an impact on the union's revenue base.

It was a grueling experience, but LaPlante says it's part of a move to a more comprehensive budgeting process.

Election of local officers

With each HEU local's voting members at the first local meeting of 1994, now is the time to pass on the results to Provincial Office. Please fill out the local officers and committee forms, then return them to the Provincial Office so the union can update its mailing and contacts lists.

Golden Hospital food service worker Lena Joyson of Albertas's slack and burn deficit reduction council

EVEN KEEL There are days when Jennifer Ritson feels like packing it in, but a commitment to her children and her Salt Spring Island community keeps her going.

Ritson was pleased with the outcome. "Hopefully I'll run again in two or a half years, and this time win."

For now, she'll stay involved in the education system by serving on her local parents advisory committee and volunteering one day a month in her son Zander's school.

Prior to even deciding to run in the election, Ritson attended a seminar on empowering women put on by the Victoria labor council. It was an important experience for her hearing from women who already held political office, like former B.C. NDP MP Lynn Hunter.

"Hunter told us she wasn't a superwoman, and that women have the ability to do it. We just have to make a start at it," she said.

A commitment to her community and her two sons is what has driven Ritson since 1996, when she returned to the island and went to work at the hospital. "I get a lot out of growing up here. Getting involved is one way of giving things back."

She's held a number of elected executive positions in her HEU local, attended union conventions, and thanks to onsite child care, the 1992 HEU summer school.

Her son still remembers when that lady (secretary-business manager Carmela Alletro) gave him a summer school button. "He calls HEU our union," Ritson says.

Ritson is also involved in her youngest son's preschool, she's a Beaver leader, and active in her church, where she was part of a fundraising committee that raised $300,000 in 11 months to expand their facility.

"Everyone said we couldn't do it," but they did.

Ritson manages to balance it all by making conscious choices about work and family life. She did in a part-time housekeeping job from her nurse aide position to get weekend-only shifts.

She can also rely on her husband Philip, a greengrocer at the local golf course, to look after the kids on the weekends and to do his share of housework.

"He's always been accepting of the things I do and want to do," she says.

To help keep things on an even keel, both her boys are in school and then child care on Fridays. "It's my day off."

There are days when Ritson admits she feels like packing it in. But there are too many other moments "when it's all worthwhile," that keep her going.
New plan boosts wages, creates more hurdles

by Chris Gainor

Pay equity arbitrator Stephen Kelleher has decided on a new pay system that should give pay increases ranging from two to 37 per cent to nearly 95 per cent of HEU members over several years.

Kelleher’s plan is based on a proposal from health employers to wrap up the fifth step of the pay equity process contained in the Master Collective Agreement.

The result is a new pay system with increases for HEU members that will be worth more than $12 million. No one will see their wages cut or red circled.

But Kelleher’s decision also means that HEU members will have to continue to work in the next round of bargaining to win a pay equity plan that eliminates wage discrimination against health care workers.

"This award is the largest pay equity adjustment to date in Canada," HEU secretary treasurer Carmela Alle- vato said. "But we have a long way to go before we win true pay equity."

Kelleher also decided the 1993 adjustments for HEU members retroactive to April 1, 1993. Members earning the PCS wage rate of $2,280 a month or lower will get a $52 a month wage increase.

The wage rate for the housekeeping aide (BMW 1) is being raised $32 a month and the cleaner (BMW 2) is being raised $10 a month. These adjustments equalize the raises to $2,292 a month.

Pay equity wage increases for 1994 and 1995 will be decided soon.

HEU has proposed that the rest of the system be implemented with pay increases in 1990 and 1997, but employers have rejected this proposal.

If the increases are paid out at one per cent of payroll, it will take 18 years to implement the new system.

"These must be an industry-wide adjustment, and we must put pressure on employers to implement in the next five years the full wage grid that we have won under this plan," she said. Allevato said the union is still pushing for a true pay equity plan including an industry-wide adjustment and a five-year implementation period.

Action planned to get job security talks moving

by Geoff Meggs

With less than a month remaining before the expiry of their collective agreement, HEU members in long-term care facilities signatory to the CCERA Standa- rd Agreement are tucking up the heat for a new contract.

A province-wide round of membership meetings with CCERA locals in January gave HEU’s bargaining committee a re- viewed mandate to demand extension of the Employment Security Agreement in a new contract that eliminates second- class status for long-term care workers.

But faced with apparent indifference by the Health Employers Association of B.C., HEU and the BCGN began imple- menting a series of joint actions designed to get negotiations moving. They include:

• Joint HEU and BCGN action in the workplace to serve notices on employers that the membership’s patience is wearing thin;

• An HEU decision to force employers to arbitrate in the face of their refusal to pay previously-negotiated pay equity increases;

• Initial preparations for essential services designation in affected facilities;

• Increased pressure directly on the leadership of the Health Employers Association of B.C. to return to the table.

No talks have been held since employ- ers walked out of negotiations in December. The outstanding issues are extension of the Employment Security Agreement to remaining long-term care facilities, implementation of the pay equity adjustment and parity with the master agree- ment.


"With the massive changes to come in health care, long-term care workers de- serve equal treatment with all others in the system. We will not back down on that goal."

WHAT WE'RE UP TO

CLC call for

Toronto convention

HEU will be sending a full delegation of 44 members to take part in what is shaping up to be a very crucial Canadian Labour Congress convention in Toronto May 18 - 20.

In addition to the Provincial Executive, 23 delegates will be selected from locals in each of the CLC’s 10 regions. To be eligible for selection, locals must be affiliated to their local labour centre, the deadline to apply for delegate status is April 8.

Locals were urged to submit resolutions to the convention prior to the Feb. 21 deadline.

Beagle story placed

struggles in wrong area

Mickey Singh, profiled in our last issue for her long career of labour activism, was characterized inaccurately by the article received, but asked us to correct two small errors.

"The Westwood where I lived in California was in the North, in the forest," she told us soon after the article appeared, "not southern California as you said. The Westwood in southern California is where all the holy holy people live, and I wasn’t there."

Beagle also reminded us that although she worked closely with immigrant women, she wasn’t a migrant worker herself. She was a worker, however, at a time when women were even rarer in that field than they are today.

CUPE leads

national action

by health unions

A national meeting of health care unions agreed in Ottawa in January to undertake a national program to defend medicare and health workers’ employment security. The Canadian Union of Public Employees is coordinating the work, which HEU has enthusi- astically endorsed. The first meeting was dominated by discussion of B.C.’s experience with the

Employment Security Agreement. "We had observers from Local 1199 in New York, who are confronting similar problems," said HEU secretary-business manager Carmela Allevato. The unions agreed to intervene in the upcoming national consultation on medicare promised by the Liberal government.

New biomed waste

guidelines soon

Long-awaited recommendations on new biomedical waste regula- tions should finally be released before the end of February. It is expected that the report of waste reduction commission Dorothy Caddell will recommend tougher workplace action to deal with the problem of sharps that pose a major health and safety risk for many HEU members.

Caddell will also present an action plan to reduce the biomedical waste stream and new disposal methods to replace aging incinerators.

HEU K-Bru local member Andrea Wolden surveys the cache of sharps found during a normal two-week period at the Cumberland laundry.

CCERA deadline nears

"Long-term care workers deserve equal treatment"

PREPARING TO WIN Members of HEU’s Cedarview local in North Vancouver discussed ways of winning equal treatment and employment security at a special meeting in January at which a report on the status of bargaining was given.
PRESIDENT'S DESK

We're 50 and proud!

by Fred Muzzin

This year HEU is 50 years old. A major milestone is a time to reflect on where we've been and to celebrate our successes. It is also an opportunity to plan for the future, to have a vision for what is possible, to go where nobody has gone before.

"We have a proud tradition. In 1944 we were established at the Vancouver General Hospital, where one of the major issues was wage fairness — equal pay for equal work for practical nurses and orderlies. Although we have grown to 36,900 members at over 2,100 facilities and are the largest union of women in the province, we have not forgotten our roots.

There are many important contracts in our union. Our members are principled and genuinely care about the services that we provide for patients and residents. Our activists are committed and outspoken. Our leadership is not afraid to take progressive positions even when it is unpopular to do so. Our organization is prepared to be militant when necessary — we know that it is essential to negotiate from strength.

1994 will be a year of rejuvenation and renewed commitment. Last year, negotiating and implementing the Job Security Agreement and pressing forward on the pay equity process strained our resources. We know that we have to re-evaluate our systems and resources and find better ways to deliver services. This year will focus on achieving justice for our members not covered under the Accord, combating excessive workload, improving and expanding education, local building, securing our place in the formal house of labour and preparing for our biennial convention.

Our achievements are only possible if we are strong at the local level. Our newly elected local executives and shop stewards need to take time from their daily advocacy responsibilities to plan — to determine what resources they have available and what assistance they can realistically provide for the membership. We must be innovative and creative. We must take the time to remember what it means to be a trade unionist and recruit new activists so that our goals become sustainable. Our staff resources must complement the local initiatives.

It is imperative that we as HEU members control our union and are confident of our future. Our strength grows from grass roots solidarity. Let us nurture it well.

They care for kids

by Stephen Howard

Caring for kids is tough and challenging, but three new HEU members bring a wealth of experience to the job at Vancouver Hospital's operating new site child care centre.

Sonia Ahma, Judy Anderson and Zivana Mic are trained early childhood educators who provide care for the children of health care workers at the Kids in General Centre, which opened Jan. 4. It's the first hospital-based 24-hour child care centre in the province, the result of years of planning by hospital officials and health union representatives.

Ahma earned her early childhood education diploma in Toronto six years ago after a serious accident ended her dancing career. She works in the infant centre with six to 18-month-olds because she enjoys it most.

"Every day there's something new; the children are wonderful or they have a new sound," she said.

Anderson has been a child care worker at non-profit and on-site corporate centres in Vancouver for 20 years, earning her ECE diploma along the way. Working with the 18- to 36-month-old toddlers is her forte.

"It's a really nice job to have. It's really fun," she says.

Mic works in the pre-school centre with three to five-year-olds. She worked in the child care field since 1979 both as an educator and as the director — "chief cook and bottle washer," she says — at two worksite programs in Montreal.

Starting a new program is a lot of work, and hard on kids, says the centre's director, June Baker. While they're used to capacity — 25 preschoolers, 12 toddlers and 12 infants — starting days for each child are staggered to help keep them settled and to give staff the time to get to know their individual needs.

Four HEU members have their children cared for in the centre.

All support services are provided by the hospital and Baker has nothing but praise for staff in departments

Subsidy program could help with care costs

Child care is an expensive reality, but HEU members could benefit from a little-known government subsidy program that could make it more affordable.

The Ministry of Social Services program is based on financial need and family size. Maximum subsidies range from $330 to $374 per month per child.

For example, a single parent with two children needing child care could qualify for full subsidy with a monthly net income from all sources of $1,752, according to figures from the ministry. Higher net income earners could qualify for a partial subsidy up to a cutoff amount.

"It's important that people know about the subsidy program," says childcare advocate June Baker.

Baker, who is director of the Kids in General child care at Vancouver Hospital says few people have heard about it. She regularly sends parents to apply.

But Baker says the program has one major fault: subsidy rates haven't increased since 1991, while child care costs have.

The worse part, she says, is that the maximum subsidy only covers a portion of the cost. It means that lower income parents have to come up with the difference between the fee and the subsidy — which can be hundreds of dollars.

"This means even if you qualify for the full subsidy, you may not be able to afford care. I've had to turn people away who couldn't get enough subsidy support to afford care for their kids," she said.

"Subsidies need to be increased to come closer to the real cost of care."

Information on the subsidy program can be obtained by contacting the local Ministry of Social Services's family and children's services office.
NOTEWORTHY NEWS ABOUT ISSUES AFFECTING WORKING PEOPLE HERE AND ABROAD

Union video tackles AIDS from health workers' perspective

The AIDS crisis has had an even more profound effect on health care workers than society at large. Whether they work in acute care, long-term care, home care or community clinics, health workers are facing the disease every day in ways that affect them deeply.

Now the Bead and Roses Cultural Project of Local 1199, New York's union of health care workers, has produced a powerful new video which tackles the issues from the workers' standpoint.

Called Facing AIDS: Stories of Healthcare Workers, the 30-minute production is a moving educational and emotional experience. We sit with nurse Barbara Norris at a New York medical center as she prepares to tell a patient he is HIV-positive. "It's not easy...I sit down, meditate and I pray before I tell him."

Nurse aide Yvonne Hoyte, of the Bronx Lebanon Hospital, is the last friend in the world for an AIDS patient whose family has deserted her. "I have to know how to introduce myself to patients," she says, "and let them know I'm not frightened of them."

And nurse Lorraine Thebaud, at San Francisco General, tells of her efforts to win improved health and safety procedures to protect fellow workers from needlestick injuries.

Most moving of all is a San Francisco community nurse, himself HIV positive for nine years, who takes the camera on a home care visit and then into his own home to meet his partner. It is hard to imagine a more effective way to humanize the tough struggle against this disease.

Available to unions for only U.S.$100, this important video comes with a discussion guide on the effects of HIV, how it is transmitted and safe work practices.

It is highly recommended. For information, contact the HEU Communications Department or write directly to Bead and Roses, 22-D Hollywood Ave., Hoboken, New Jersey, 07032.

Race for the Trough

Eight little piggies representing Canadian corporations that pay little or no tax raced for the trough Jan. 27 at the B.C. Federation of Labour's Corporate Tax Freedom Day event. Federation leader Ken Georgetti says corporate income tax accounts for only seven per cent of federal tax revenues, down from 21 per cent in 1981. The Jan. 27 date is about seven per cent into the year. At the finish line, the Royal Oak Mines piggy won by a snout. The company paid no income tax on 1991 profits of $33 million, and also raked in a credit of $250,000.

Giant troubles continue

YELLOWKNIFE, N.W.T.

The vicious labour dispute is supposed to be over, but the houses at Yellowknife's Royal Oak Mines are still picketing with mine workers and the Canadian Association of Smaller and Allied Workers.

Of the original 334 in the bargaining unit at Giant Mine, just over 100 are working there, including about 20 scabs. Fifty more were fired during the 18-month lockout, and Royal Oak is fighting their return. The Federal Court of Appeal will hear Royal Oak's challenge of the Canada Labour Relations Board ruling that led to the end of the lockout. As a result, CASAW overwhelmingly voted to accept a watered-down version of the company's last contract offer — but with its provisions protected by special mediators Vince Ready and Don Monroe.

Articulation for the locked-out workers was part of the board's ruling, which cantered on the force of a court order. "We are using the agreement for guidelines only," mine manager Bill Heath wrote to CASAW on December 31. "We do not feel we are legally bound to adhere to the terms of that agreement.*

On the low end of the pay scale, wage rates set in the agreement were ignored. Union intervention was required before workers were paid for statutory holidays on Christmas Day, Boxing Day and New Year's. Some returning workers were told this was because they were "new employees." Others, struggling with tight finances after the long dispute, faced delays in getting overtime pay.

When two grievances were filed, one by a replacement worker disciplined for working too slowly, Royal Oak claimed "there is no collective agreement. That being the case, there is no opportunity for you to file a grievance."

In the mine itself, Royal Oak has done little to improve its safety record, infamous for being the worst in the Northwest Territories. During a recent power outage, there was no ventilation because the emergency systems did not kick in. Scoopermen were left running, flooding the air and creating a fire hazard, and other vehicles were in use. "One scale kept on drilling," said another miner. "Had their been an accident, phones were not working. Workers say the mine is being run as if there's no tomorrow. Pumps for heavy equipment are often unavailable. Machines sent to mechanize the shops sometimes lose parts used for other repairs.

Divisions and bad labour relations led to the terrible industrial dispute in 1992-93, but management's attitude has changed little. Most union members blame Peggy Witz, Royal Oak's hard-line, Nevada-born CEO. They're not alone in this opinion. Witz recently earned the "Bed of Nails Award" for having "the toughest corporate hide" in 1993 from the best of CBC television's "The Business" program.

From the bottom of her heart

"We had a wonderful Christmas. The kids loved the presents the old Shanghi-nanny sent us. I want to thank them from the bottom of my heart," said June Roberts.

The founding president of CLASS, the ladies auxiliary of the mine workers' union at Royal Oak's Giant gold mine in Yellowknife, has been one of the volunteer job since last April. She re- signed to have her fourth child, Hayley, who is propping off her first pregnancy.

Husband Derek is back to work on the slope host at Giant, pulling a rotating shift that keeps him one moving seven days a week. He worked graveyards both Christmas and New Year's Eve, but his holiday pay wasn't included in his first cheque. "I thought he'd be a new hire," June exclaimed.

The labour dispute took its toll on the Roberts family, though their resilient spirits were sound and undaunted. "We had our power cut off in September and the power company was going to shut off our power again a few weeks ago. We only owed them $200," Roberts said. A friendly neighbour powered their furnace, refrigerator, light and television with an extension cord.

Despite some strong new friendships made during the dispute, June and Derek are thinking about leaving Yellowknife once they've caught up on their bills. "We're hoping to leave. I just don't like it here. I don't like the atmosphere," she said.

Travelling to Edmonton for Hayley's case, she realized how much the pressures of Yellowknife had affected her. "It actually had a good sleep down there."

Still, she notes, that they've thought about leaving the North for the North yet never did. "Well see when the time comes."

It's a day-to-day outlook that served her well in not only enduring, but rising above the rigors of the worst labour dispute in Canada's recent history.

I NH/1994 • G-18B
Paul Ramsey, who became B.C. minister of health in September, 1990, offers a unique perspective on the health care system. In his newly appointed position, he is working to improve and reform the system.

Ramsey has a long career in health care, having served as the college president of the Health Occupations Education Association, which focuses on community college curriculum. He has also served as the president of the Canadian Medical Association and as the chief executive of the National Health Council.


during his tenure as B.C. minister of health, he has been working towards improving the health care system in the province. His efforts have focused on addressing the challenges facing the system, including workforce shortages and funding constraints.

**1994 Hospital Budgets**

I would like to ask what we can expect in terms of hospital budgets in the coming year. Obviously, there is a lot of concern about the future of health care in B.C. We are currently facing a difficult financial situation, and it is clear that we need to be more efficient in our use of resources.

**As the minister of health, what can you tell us about the provincial government's plans for hospital budgets in 1994?**

I can tell you that the provincial government is committed to ensuring that our hospitals are well-funded. We are working closely with the hospital boards to develop budget plans that are realistic and sustainable.

**Are there any specific initiatives planned to improve hospital efficiency?**

Yes, we are looking at ways to improve efficiency in our hospitals, such as streamlining processes and utilizing technology to reduce costs. We are also exploring ways to involve the private sector in providing health care services.

**What concerns do you have about the future of health care in B.C.?**

One of the biggest concerns I have is the ongoing need for funding. Despite recent budget increases, we still face significant challenges in providing the level of care that people need and deserve. It is clear that we need a long-term solution to ensure the sustainability of our health care system.

**What steps are being taken to address workforce shortages?**

We are working closely with the College of Physicians and Surgeons to address these shortages. We are also increasing funding for residency programs and exploring ways to attract more doctors to B.C.

**What role do you see for the private sector in health care?**

The private sector can play a valuable role in providing health care services, particularly in areas where there is a demand for specialized care. However, it is important that we ensure that these services are affordable and accessible to all B.C. residents.

**What is your vision for the future of health care in B.C.?**

My vision is a health care system that is sustainable, efficient, and responsive to the needs of B.C. residents. We need to ensure that our system is able to adapt to the changing needs of our population, while also being affordable and accessible to all.

**What challenges do you foresee in achieving your vision?**

There are many challenges we will face, including funding constraints, workforce shortages, and the need to modernize our system. We must work together to overcome these challenges and ensure a better future for all B.C. residents.
Paul Ramsey, who became B.C. minister of health in the September, 1993, cabinet shuffle, is now facing the huge challenge of implementing the package of New Directions health care reforms drawn up by the previous health minister, Elizabeth Call.

Ramsey is a college instructor and former president of the College Institute Educators' Association, which bargains for community college instructors. Ramsey was first elected as the MLA for Prince George North in the 1991 election.

In this interview in late January with Guardian associate editor Chris Guenter, Ramsey talks about the health reform process, hospital budgets for 1994, and bargaining for HEU members in long-term care and in new certifications.

HEALTH BOARDS AND COUNCILS

Have you made a decision yet on conflict of interest for health providers serving on regional health boards and community health councils?

It is something that I felt was important enough that I should take to cabinet because it is not a decision that can be made just within health care.

I think conflict of interest and perceived conflict of interest are major issues for governments, whether it is at the provincial legislature level or whether it is the level of community health councils. I believe we have to be very careful that the public perceives that the councils are serving the community and not serving any interest group within the health care providers.

I think that administrators within the health care system are in an equal conflict of interest with workers, and I believe that they face the same problem of conflict or perceived conflict. I believe that the same is true of physicians and other care providers who may not be direct employees but whose income is clearly dependent on the health system.

What else has been going on with the reform process since you became minister?

Nobody's talked to thinks about that our current system works.

What we had in a real mishmash of direct government operations; funded agencies, independent societies, working sometimes in cooperation, sometimes at odds with one another.

People in some areas of the province are saying we are ready to get on with forming the community health council if you would please tell us where the boundaries are around our community. Well, we don't even have a process for establishing that, so we have to work on that.

Other people say we are quite willing to move forward on regionalisation but we must have some decisions on how capital projects are going to be funded in the future.

1994 HOSPITAL BUDGETS

I would like to ask what we can expect in terms of hospital budgets in the coming year.

Obviously I cannot announce the budget. That's the prerogative of the minister of finance. But I will say that the downsizing of the acute sector which is contemplated by the Employment Security Agreement will continue, and that means there will be fewer jobs in the acute sector at the end of the next fiscal year than there are currently. We will be working with the hospitals and with the Labour Adjustment Agency to make sure that the provisions of the Employment Security Agreement work and provide health workers with the options that the agreement has set out in terms of retaining and early retirement and possible job sharing and relocation.

SHIFTING SERVICES

We have felt that there has been more emphasis placed on cutting acute care services than on funding new services in the community. What do you say to that?

I know that there is a debate about whether the level of community services is adequate. The last two budgets have done substantial shifting of resources into the community-based services. The figures that I have seen indicate that over the last two budgets we have shifted something like $1 billion dollars into the community services area. Some of that seems to be largely invisible. But it is there in communities throughout the province.

We have increased living accommodations for those who suffer from mental illness, we've increased the number of home support hours, we've increased the emphasis on prevention, immunization programs and the like. There has been a wide range of stuff that has gone on.

EMPLOYMENT SECURITY AGREEMENT

How do you see the importance of the Employment Security Agreement, and the work that is being done by the Healthcare Labour Adjustment Agency?

The Labour Adjustment Agency has surely taken more than its fair share of knuckles in the press in the last little while. My belief is that the agency is going to become the vehicle that all the signato-
tem are in an equal conflict of interest with workers.”

A GUARDIAN INTERVIEW BY
CHRIS GAINOR

ris to the Employment Security Agreement thought it would. This is, in terms of Canadian public sector, a revolutionary sort of agreement. Having taken those bold steps to say we should not do the needed shift from acute to community sector on the backs of health care workers, it is no surprise to me that the figuring out of how we do the nuts and bolts of making sure that doesn’t happen is difficult. We have employers who are not used to thinking of themselves as a system. The workers do. The key to the Labour Adjustment Agency working is working with the employers to make sure that they function as a system so that they can see their needs identified early, so that match between workers needing a job and job postings are done as broadly as possible so that people do have a job to go to.

Is there going to be money for job sharing and for more early retirement?
Yes. First I’m firmly committed to try and get more money for early retirement. Job sharing is something that should be able to be done within existing budgets. I think there needs to be concerned work on the idea of job sharing. What job sharing contemplates is proportional salary and benefits, but with all the security of full-time positions. This is a different sort of “part time” employment arrangement.

I think that is something that must be promoted to assist workers in assessing that accurately, and seeing if it fits with what they want from their employment relationship and how it fits into the rest of their life. The average age is probably moving toward 40 or above, and increasingly people in the workforce are saying, “Maybe I don’t want to work full-time hours anymore. But if I want to say, two thirds of a job, could I still have the same security of employment and benefits that I would have in a full-time employee?” That is where we have to make sure that this happens.

CCERA & PRCARE TALKS

One issue which we are facing right now is trying to get the Employment Security Agreement extended to our members working in long-term care under the CCERA and Pricare contracts.

Carolyne I have not wrapped my head around all the complexities of that set of negotiations right now. I hope we can get on and move toward an agreement in the new year. The goals remain the same in that I want to see movement towards equity in relation to the jobs that are done in the health sector.

But I also know that we have to figure out how we do that within the financial resources we will have in any budget year. Those fiscal realities are not something we can ignore.

FIRST CONTRACTS

Another related issue is first contracts for some of our members. We have in the neighbourhood of 30 or 40 new certifications. Have you given any thought as to how you are going to fund these facilities so that we don’t have two or three or four tiers of health care workers?

First, I am aware of the issue that we need to have one tier of health care workers, not three or four. The issue is much the same with the CCERA and Pricare negotiations.

RIBBON CUTTING The health minister was on hand to open the new spinal cord unit at Vancouver Hospital, which was transferred from Shaughnessy. Ramsey made a prompt commitment last year to implement the recommendations of the Shaughnessy task force report that was critical of the way the hospital shutdown was handled.

BEAR PIT Ramsey faced some tough questions when he met in a special session with HEU delegates at December’s B.C. Federation of Labour convention in Vancouver. It was the first time that a B.C. minister of health had ever done so.

Ramsey’s willingness to consult with the three health unions has so far set him apart from his predecessor Elizabeth Cull.
Unloading on workload overload

Health & Safety

I'm 47-years-old and I don't want to get crippled up,” says Gorge Road Hospital care aide Deb Hills. “I would like to retire healthy. My roommate calls me a dreamer.”

Hills’ dream of staying healthy is shared by all health care workers. But employer neglect and trucation make the odds of staying healthy extremely low when you work in health care — B.C.’s most dangerous industry.

According to recent WCB statistics health care facilities have more lost time claims of any industry in the province.

About 7,000 health care claim cases were made in 1992 — more than in logging and sawmills combined, more than in heavy industry and construction, according to recent WCB statistics.

Local members have role in organizing drive

Do you have friends or relatives working in non-union community-based health services, or inexperienced long-term care facilities?

If you do, HEU wants to hear from you, because you can play an important part in the drive to bring protection and decent wages and working conditions to the many health care workers who don’t have the benefit of union representation.

At a local level, members are being asked to provide names of people they know working in home care services, mental health group homes, adult day care, children’s services, and community living support programs.

“Those are difficult jobs with small bargaining units and substandard wages,” said union secretary-busi-

ness manager Carmela Alvesio.

Remember, the fight is about improving health care services for all, not just for unionized health care workers. If you have any questions or would like to get involved, please contact your local union or the HEU office.

Members have this opportunity to make a difference in their workplace and in the lives of their fellow workers. Join the fight for better wages, benefits, and working conditions. Together, we can make a difference.

HEU's commitment to improving health care services is unwavering. We will continue to fight for better working conditions and the right to a decent wage.

Join us as we work towards a brighter future for all health care workers.
HEALTH REFORM

Downsizing target achieved

Thanks in part to the Employment Security Agreement, the government's New Directions goal for an efficient, leaner, less complex system has already been achieved more than two years ahead of schedule.

In a brief circulated to government officials in Victoria, the HEU, B.C. Nurses Union and Health Sciences Association affirm their support for the reform process.

But the unions warn that it is essential now to maintain existing services in the acute care system while the governance structure and infrastructure in the community sector catch up.

The government's New Directions strategy and the Employment Security Agreement both reflect goals of reducing the acute sector to 2.75 beds per thousand population, a target set by the Royal Commission on Health Care and Costs, in conjunction with the enhancement of community-based services by 1996.

That figure works out to a province-wide average annual utilization rate of 850 patient days per thousand population.

Ministry of Health figures confirm that the goal of achieving 850 patient days per thousand was achieved in March or April of 1993, more than two years ahead of schedule.

Continued funding pressure on hospitals will meet costs in services, the unions warn, and put tremendous budget pressures on hospitals.

As yet, the community sector is not ready to support the affected services and the workers who provide them.

The three unions urge a number of measures to smooth the transition, including:

- assurance of sufficient funding in the acute care sector to maintain existing levels of care;
- quick action to extend the Employment Security Agreement to remaining long-term care facilities properly represented by CCEBA and Fraser;
- additional funding for the early re-training programs of the Health Labour Adjustment Agency; and
- direct government co-ordination of the shift of hospital-based services to the community.

Saving jobs for health workers

Security deal, adjustment agency come through for HEU members

by Geof Meggs

The Employment Security Agreement has provided early retirement, employment security or a new job to more than 700 health-care workers — including hundreds of HEU members — in its first six months of operation, according to B.C.'s Health Labour Adjustment Agency.

That figure does not include hundreds of additional positions — at least 430 in HEU's case — that were projected by the shift to the shorter work week, which was a major feature of the first year of the deal.

The HLAA, a joint labour-management agency designed to facilitate implementation of the Employment Security Agreement, opened its doors in August after final ratification of the deal. HEU is directly represented on the HLAA board.

"There's no question the agreement is proving its value," says HEU secretary-treasurer Josee Lonergan.

"Without the agreement, hundreds of HEU members would have faced permanent layoff. A large part of the credit for that achievement belongs to the agency."

Operating out of a small office on West Broadway in Vancouver, the agency is implementing a wide range of programs to protect health-care workers' employment security as the health-care reform process unfolds.

(For an assessment on whether community services are keeping pace, see the related story above.)

HEU members using the agency will recognize some familiar faces, including former Shaughnessy local activist Rosmary Bessac, who acts as the agency's receptionist, and former HEU member Ruth Warren, who acts as the agency's receptionist and performs a wide range of other duties to help move displaced workers to comparable jobs.

An example of how the agency came through for one HEU member is the story of Shaughnessy electrician Rick Hastings, who found himself caught in the hospital's closure after five years on staff.

He registered with the agency and expressed a willingness to move outside the Lower Mainland. On Nov. 8, he learned that the early retirement of HEU member Robert Warren had opened a position at Nanaimo Regional General Hospital.

Hastings was interviewed Nov. 17 and started work five days later. "It was a decision that will change the rest of my life," he told The Guardian. "There are a few wobbles in the system, but it did work."

With his three-month qualifying pension period complete, Hastings is now arranging to move his family from Delta.

"The whole philosophy behind the idea of the Employment Security Agreement was good," Hastings says. "If you can keep hospital people working in hospital jobs, it's good for everyone."

And it's important to have an independent agency running the show, he believes, with strong union involvement. As far as Hastings is concerned, an agency run solely by employers "wouldn't work."

For many HEU members, particularly workers displaced from Shaughnessy, the happy ending is still to come. Because vacancies in the acute sector are hard to come by and because the agreement has yet to be extended to all long-term care facilities, several hundred members are working in temporary positions awaiting placement.

But 300 other workers, whose positions could be filled by those needing work, have received early retirement and the HLAA's other programs are starting to come on line.

"The agency went through a difficult period after start-up," sitting executive director John Malbott told a media briefing in January, "but we've seen a lot of progress and co-operation to find solutions."

With a staff of only 14, including support workers, the agency is stretched thin to handle the high volume of placements required in the wake of the Shaughnessy closure.

Nonetheless, the number of Shaughnessy workers placed in permanent positions was rising toward the 200-mark at press time, leaving as many awaiting new posts.

(Detailed reports on agency activities are issued by HLAA at regular intervals and mailed to every facility in the province.)

Matching displaced workers to new jobs is a complex task, Malbott said, that takes time to do well. Simply matching a person to a vacancy isn't good enough.

"There's no point in sending people through a process if both sides find it unsatisfactory," says agency officer Merit Heilman. "We could mechanically apply the criteria and the computer will produce matches, but it would not make sense to put a food service worker into a laundry position, although technically the match is there."

An extra effort is paying off in a 93 per cent success rate on job matches.

Still under development are new programs to assist workers in retraining and job shadowing.

The remaining initiative, in particular, holds the promise of easing the transfer of workers from one job to another.

It all adds up to employment security, a rare commodity in today's uncertain economy.

MATCHMAKERS MATCH Labour Adjustment Agency staff, at right, helped match former Shaughnessy electrician Rick Hastings, above, with a new job in Nanaimo. HEU has a strong presence at the agency with former employees Mary Donaldson, Rosemary Bessac, and Anita Connolly on staff providing key clerical support. Provincial Office researcher Sylvia Smul, far right, is a labour adjustment officer.

AGREEMENT PROTECTS HEALTH WORKERS

August 1993 to January 31, 1994

Displaced workers placed in comparable job

Workers taking early retirement

Workers taking voluntary layoff

Total:

Displaced workers awaiting placement

Grand total:

HEU share (estimate)

HEU positions protected through 36-hour week

Total estimated HEU positions protected

Source: HLAA, HEU Research Department

154
199
8
455
254
98
764
350
430
780
11
JANUARY-FEBRUARY 1994 • GUARDIAN
HEU endorses federation action on Canadian Legion

HEU will join with other affiliates of the B.C. Federation of Labour to urge the Canadian Legion to adopt by-law changes which would "condemn racist actions such as the discrimination against Sikhs which occurred at the Newton Legion." The Newton branch refused admission to a Sikh veteran on Remembrance Day because his turban violated a "no-beardgate" rule. A resolution, adopted unanimously at the convention, also called on members of the Canadian Legion "to ensure that no Legion in B.C. ever again attempts to bar Sikhs because of their religious attire or for any other reason."

Labour urges review of health boss salaries

The financial management practices of the Health Labour Relations Association, the Continuing Care Employee Relations Association and B.C. Pricewater, as well as individual hospital corporations merits a legislative inquiry, says the B.C. labour movement. A resolution calling for such an inquiry, proposed by the Victoria's Labour Council, was adopted Nov. 29 by convention delegates. HEU Royal Jubilee delegate David Ridley told delegates "the only way to bring integrity into employer organizations" ordered by health minister Paul Rafferty. "This inquiry was long overdue," Ridley said. "The ridiculous inefficiency at the top of the pyramid should not be allowed to continue."

Rally demands ruling on first contracts

"We're here to collect on the promise of arbitrated first contract settlement," HEU president Fred Moulin told more than 300 HEU members outside the B.C. Labour Relations Board Dec. 2. "There's no use organizing if you can't get a contract."

HEU organized the demonstration, which was supported by a number of other unions, to protest the board's delay in ruling on an HEU application for an imposed first contract for newly-organized HEU members in two locals. The decision was released later than month. For details see page 3.

The provincial government had refused proposals by many unions, including HEU, to bring in a new form of sectional organizing rights because the law would give the board the authority to impose a first contract when all else failed.

Instead, Moulin said, the board has been reluctant to use its new powers and hundreds of new HEU members are without a contract. "If the cost of social programs has hardly risen in the last 20 years, causing only six per cent of growth in the national debt, the other 94 per cent was caused by tax breaks introduced in the 1970s and 1980s by Liberal and Conservative governments, and the high interest rate policies pursued by those governments, said McQuaig, who has written a book on Canada's tax system.

Big business is lobbying governments to cut social programs but maintain tax breaks, most of which benefit wealthy Canadians and corporations. She said organized labour must continue its work of introducing and defending social programs.

"There's a real class struggle going on. So far, they've been winning it," McQuaig said of wealthy Canadians.

Carcasses are costly because most unemployment means more pressure on health systems and on social programs, she said. "Austerity can be very expensive. Beware of men in suits offering solutions to the debt crisis."

Sharing and working together

"Unless unions and aboriginal people work together, divided we all fall," says HEU activist Trudy Erickson.

Rallies in two First Nations and a "buffer zone" was held in Cowichan Lake to "to share and work together in solidarity. Only in this way can we move forward."

The convention debate followed a strong appeal to delegates from Joe Mathias, a chief of the Squamish Nation and a major figure in the local claims struggle.

"There is an ugly, vulgar sentiment emerging which I term anti-Indian," Mathias said.

"It emerges from a great void of uncertainty. From not knowing what's coming down the pike."

First Nations "are not here to threaten you or your jobs," Mathias said. "We are not here to send anybody back to Europe. It scares me that the process we're trying to develop may be distorted simply because of misunderstanding."

Through the treaty-making process, Mathias said, "we want the opportunity to participate at all levels of the economy. We want jobs and the capacity to create jobs."

Together, he said, unions and First Nations "share the same aspiration to the basic human right to have a decent-paying job to benefit ourselves, our families, and over the long-term, the B.C. economy."
Respect human rights in Chiapas

With media reports documenting the repressive measures used by the Mexican government to crush an uprising in the southern state of Chiapas, HEU has called on the Mexican government to respect the human rights of the area's indigenous peoples. In a letter to Mexican president Salinas, union president Fred Mazin urged a dialogue and negotiations with the Zapatista National Liberation Army "so that a non-violent solution to this conflict can be found, preventing further bloodshed." The letter was also critical of the government for eliminating constitutional protections for indigenous communities that helped preserve their traditional landholdings.

At press time, demonstrations of indigenous and peasant groups continued to rage against the new Mexican government in Chiapas and other states in southern Mexico. Meanwhile, the Provincial Executive's international solidarity committee met with Mexican economic and NAFTA opponent Salvador Peniche in January. Peniche, who is in Vancouver working on a project at UBC, said that despite more than just extreme poverty and the fight for economic justice behind the uprising that erupted New Year's Day, according to Peniche, it was symbolic of the crisis facing his country's repressive and corrupt political system.

The new 36-hour week facts of life

Ever since the 36-hour week became a fact of life last September 30, HEU members have become familiar with a new term: extra day off, or EDO. For Helen Bryson, an activity aide at Cottonwoods in Kelowna, the three letters mean something more. "EDO," she said, "that's heaven's day." Bryson spends the extra day off she gets every five weeks on herself. It's a needed break from her work and from her family responsibilities. "I think it's wonderful because we need the extra time. It's given me more time for myself."

The workers in her department now work 7.5-hour shifts, and the new shift schedules give her two weekends off with five of her family, instead of one out of five as in the past.

For Ken Prokopetz, who works in maintenance at Kelowna General, the new eight-hour shifts give him every second Friday off. "It's improved every one of our people's morals," he said. "The work gets done. The extra half hour each day helps us finish the job." The employees in the department, which has six full-time workers and two part-timers, sat down and worked out the days off they wanted.

As in the case of those departments at Kelowna General and Cottonwoods, health care unions and employers were able to agree on 90 per cent of new shift schedules without taking the matter to arbitration.

Ambassador Colin Taylor, in a recent ruling on the shift schedules, called the high degree of cooperation on the new shift schedules "an extraordinary achievement." Taylor's decision will allow this cooperation to continue, because he decided that disputes over new shift schedules will be resolved through agreement or arbitration, and not by a decision of employers.

The issue of future schedule changes came up last fall in talks to make what are known as "consequential amendments" to the master agreement, when employers insisted that they have the unilateral right to change the new 36-hour shift schedules. HEU, the B.C. Nurses' Union and the Health Sciences Association refused to accept the employer's position, and the matter was referred to binding arbitration.

Taylor's ruling emphasizes the importance of mutual agreements on shift schedules. But when employees do not agree to a new schedule, the award puts in place a new, quick process for employers to challenge management's schedule. Taylor also ruled that no particular shift schedule should be given priority of consideration by arbitrators, and that shift schedules brought in with the 36-hour work week may not be changed without agreement or compelling reason.

"We have won an important right to have an ongoing say in our shift schedules," said HEU secretary-business manager Carmela Allevato.

BETTER MORALE Kelowna General maintenance worker Ken Prokopetz says the new shifts have improved morale.
What caused the Westray disaster?

A miner’s-eye account of a tragedy that shouldn’t have happened

Review by Art Kilgour/CalM.

It's been almost two years since an explosion at the Westray coal mine in Nova Scotia killed 26 men, some of them buried forever under coal and rock. Shawn Comish’s 82-page book, a minute-by-minute account, ‘tells’ you into the heart of a modern-day mine that was run like something out of a prehistoric century.

A 12-year veteran miner, Comish describes a workplace where rockfalls, high methane levels, excessive coal dust and fires were everyday occurrences. It was like playing Russian roulette with three bullets in a six-shooter," he says, and "it was your turn to spin more often than you wanted to." Comish carries a dreadful guilt because, as an experienced miner, he knew a tragedy was inevitable. The only question was when and how bad it would be.

It is now generally accepted that the explosion, at 5:18 a.m. Sat. May 9, 1992, started with a spark, which ignited ever-present methane gas, which in turn triggered a massive eruption of airborne coal dust. The explosion raced up the mine shafts, incinerating everything in its path.

It blew the mine entrance – two kilometres from the coal face – to bits and caused massive rockfalls followed by lethal build-ups of methane gas. The coal dust sucked up all available oxygen as it burned. Death probably came instantaneously to those underground.

As a trained mine rescue man Comish spent much of the next 72 hours making trips into the mine, hoping against all odds to save a life. "I could not believe my eyes as we descended into what can only be described as hell. Centuries of coal dust built up to two and three feet thick had been smashed into fine pieces and thrown 100 feet or more. Steel doors that had stood 13 and 17 feet high and 12 feet wide were now crumpled, twisted pieces of metal."

Desperation and conditions soon forced abandonment of the rescue. Only 15 bodies were recovered, 11 remained unlocated and presumably dead, a total of 26 deceased, mostly 30-something men with young families.

What caused the Westray disaster? Comish suspects worst tubes, which had been blocked the day before the explosion, caused the build-up of methane gas which was ignited by sparks from a drill.

He faults mine managers, who permitted and encouraged unsafe practices, and belittled or threatened anyone who complained. Provincial and federal politicians who back-rolled the new mine despite the coal’s history of explosions, and 244 previous mining deaths are also to blame.

Comish criticizes the conditions of the mine, which was also opposed by the survivor’s families. But he says, "once again the victory went to the Goliath of this story."

Finally, Comish issues a warning to future miners, should Westray ever re-open, "It’s safe, be tough and don’t compromise your right to a healthy and safe workplace."

The case for a shorter work week

Review by Geoff Meggs

Has Canada got a jobs shortage or a labour surplus? Author Bruce O’Hara believes the problem is labour surplus and the solution is a shorter work week. O’Hara’s new book, entitled Working Harder, Isn’t Working, makes the persuasive case that most of the world’s problems — from unemployment to pollution and ill-health — stems from an obsession with working hard, long hours.

"North America suffers from an epidemic of workaholism riddling in size and severity the problem of alcoholism," O’Hara says. The result: pressure on the environment, social breakdown, unemployment and plenty of misery for all. His proposed solution is a phased-in 32-hour week, starting with four on overtime.

O’Hara’s philosophy is not new. In fact, similar thinking was behind the reduction of the work week in HEU’s Employment Security Agreement implemented last fall. The shift for shorter hours has been a top labour priority for more than a century.

What is new in this book is the definitive-sounding effort, O’Hara makes to link the economic demand with the needs of people far beyond labour’s ranks in the unemployed, in developing countries and even the environmental movement. It’s a good read.
HEU PEOPLE

REID

Fite Grove’s Reid says farewell

Verda Reid, a nurses aide at Pine Grove Lodge in Kamloops, retired in 1993 after 24 years as an HEU member and activist. Reid served as vice-chair for her local and saw to the good and welfare needs of her brothers and sisters. Active in church groups and choir, Reid plans to spend more time with her husband, visit with relatives and travel.

Whoops, KGH’s Harry O’Neill still on job

The Guardian’s September/October issue made it out as though Kelowna General Hospital member and union activist Harry O’Neill had retired after a long and glorious career. We were wrong. Brother O’Neill hadn’t retired from his job, he’d just stepped down from a union position. Local chairperson Maureen Shepherd reports that O’Neill has been busy in enjoyment of congratulations calls from across the province since the article appeared.

BLACK

Sorry Harry, it’s time to set the record straight.

Smalies to relax, enjoy life

Peggy Smalies started working as dietary department dietary department in 1978. Now, after a quarter-century of work, the Kamloops cook is calling it quits. She plans to relax, enjoy life and spend time with her granddaughter.

On her retirement, Smalies received a gift and pint from the local.

Albert Black takes early retirement

Mount St. Mary’s Hospital cafeteria worker Albert Black took advantage of the early retirement option in the Employment Security Agreement and called it quits Jan. 28 after 20 years.

Black never held a local executive position, local secretary-treasurer Mary Jellicoe writes that he always attended local meetings.

His retirement was marked by a special dinner, where he received an HEU jacket, retirement certificate and a band. Black plans to fish and travel to Scotland for a visit.

Scholarships awarded to CLC labour school

The Provincial Executive has awarded 16 scholarships for members to attend a variety of labour education courses at the 1994 Canadian Labour Congress Winter School held in January and February at Harrison Hot Springs. The $540 scholarships were awarded equally by region. Those members receiving them were Jean Schoeberli, Shona MacIver, Janice Power, St. Paul’s, Richard Perdriau, Eagle Ridge; Doreen Foulke, VGH; Lisa Sami, Louis Brier; John Rogers, Royal Arch; Terry Perks, Mount Tolmie; Susan Vaughan, Nanaimo; Nancy Zacora, Prince Rupert; Peggy Christianson, Williams Lake; Lorna Hendrickson, Overlander; Ruth Hendriks, Saugeen; Nina Zabala, Grand Forks; Diane Merriman, Mount St. Francis; Crystal Rudy, Jackson; and Kate Marleau, Mission.

TRHIC

GABLED

SPLINEDII

DETECTED

GAITEVSET

PUZZLE

“I warned you about letting your dog run around.”

Unscramble the words, then unscramble the circled letters to discover the missing element of the cartoon caption. The words are all to be found in Article 8 of the Master Collective Agreement.

Weekend labour

Employees at Walt Disney Co. it is said, work so hard and the budgets are so tight, that they say, “if you don’t work on Saturday, don’t even think about coming to work on Sunday.”

Work generates gastric grumbles.

Gloxo says

If work makes you sick to your stomach, you’re not alone. According to the Glaxo pharmaceutical company, half of all workers suffer from stomach disorders. It surveyed 1,251 workers and found:

• Eight per cent had missed a day of work in the past year because of stomach problems
• Work-related stress was the culprit for 34 per cent of those surveyed

The job killed him

The widow of a man who died after working 360 days in a row is not entitled to compensation. Japanese government officials ruled. They said the amount of work was not excessive.

NAFTA jobs pipe dream

Some Mexican economists predict that even if foreign investment in Mexico doubles under the North American ‘free’ trade pact only 12 per cent of new job-seekers in that country will find employment. Meanwhile the impact of the deal’s agricultural provisions could drive almost 15 million poor peasant farmers off their land.

Sources: CALM, Frank

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Stylish enamel and brass International Women's Day lapel pins based on the above design can be ordered from the Provincial Office for $4.