THE BARGAINING process for new HEU collective agreements gets under way Oct. 16 and 17, when close to 400 delegates gather in Richmond for HEU's 13th Wage Policy Conference. Meeting with the theme, From Community to Facilities Health Workers Union delegates will consider more than 900 bargaining demands sent in by HEU locals and the Provincial Health Care Reform. These skills should be protected, and opportunities provided," Allevato said.
HEU president Fred Muzin said HEU members want to have more meaningful control over their working lives.
"Members are feeling uneasy about how health care reform is evolving," he said.
"This wage policy conference is where we will decide what our priorities are for the coming round of bargaining," he said.
Major issues to be discussed are expected to include employment security, contracting out, pay equity, workload and a single contract for health care workers.

HEU says hello to hundreds of health care workers, many of them already CUPE members, who have chosen HEU as new regulations change health care's labour relations map.

A senior Vancouver health board official is linked to Jim Nielsen's MRI clinic by an HEU investigation.

National medicare week will focus on the fight against two-tier health care. Oct. 30 to Nov. 3.
COMMENT

Defending medicare starts with a commitment to care — and to caregivers

by Carmela Alliutto

At STUS GUARDIAN makes it to members, nearby 400 HEU delegates will be setting down in Richmond for our union's 13th Wage Policy Conference. The direction set at the conference will guide us through what promises to be the most challenging round of bargaining we have ever experienced.

Joining us for the first time will be delegates from dozens of new locals, almost all in the growing community sector, who have organized into HEU or transferred as a result of health care restructuring.

Our new bargaining agenda must confirm our commitment to a reformed medicare system that provides a continuum of quality care from community to facilities.

The new community-based system now emerging from the achievements of mediocrely for 25 years will be successful without an equally firm commitment to fairness, dignity, equity and respect for care providers.

How can employers talk about delivering care in the community when those community-based care providers face discrimination in wages and working conditions? How can claims of better utilization be believed when tens of millions of dollars are wasted to pay for injuries that could have been avoided?

How can government claim to be implementing improvements in health services when health workers' voices are stifled? And how can health workers do the best possible work when employers reserve the right to lay them off or contract out their job to the lowest bidder?

The next few months will see our bargaining begin. We'll have a provincial election. Well join with other unions representing health workers to create new bargaining associations. We will see the impact of massive federal budget cuts that, if not reversed, cut $375 million out of our medicare services. It's not going to be easy.

Front-line caregivers are already under attack. The B.C. Medical Association, fighting to maintain the power and privilege doctors enjoy under the fee-for-service system, is attacking the Employment Security Agreement to distract the public from its own refusal to stand on the side of medicare.

But we know that British Columbians are committed to medicare. We know they agree with collective agreements that protect our investment in the skills and training of health workers. And we know that British Columbia looks to health workers to speak out for medicare.

A fair wage, equity and a reasonable workload, employment security — those are the commitments we're calling on employers to make, now just to us, but to medicare.

voice/mail

The Guardian welcomes your feedback. Send letters to 2006 West 10th Ave., Vancouver, BC, V6J 4R9 or phone 1-800-595-4994. Please be brief.

Doctors aren't paid that much

I'm tired of the doctor bashing our union is doing. Let's try to work together with these people. I know for a fact that doctors aren't paid that much money. Thirty or 40 per cent tax, then their overhead, the hours that they put in. It's just not fair.

Why aren't we going after the administrators and the top people?

RICHARD HALDAC
HEU St. Mary's, Victoria

HEU members struggle to make the workplace safe

In matters relating to occupational and health safety, there has always been the perception that "nobody cares" or that "nobody is doing anything."

Sometimes it's the employer accusing HEU members of not asking OH&S seriously; sometimes it's the members themselves who are discouraged by what they see as disinterest in this vital process.

Until fairly recently, this perception has not been too far off the mark. That is then; this is now. I offer the attached list of activities at Vancouver Hospital and Health Sciences Centre (3rd and Oak Street site) as proof positive that the entire OH&S process has, in fact, gone. Some a long way baby.

I realize that in the current climate of upheaval and cost-cutting, it's a difficult to come to grips with the OH&S issues in their area and continue to work diligently towards solutions.

Any recognition of their efforts by the Guardian is greatly appreciated.

No matter what future form health care takes, there will always be workers and there will be work-related injuries.

And anything that helps to dispel the "nobody cares" mindset is priceless to those who know that very well that lots of people care.

DANIE PEPPLE
OHU St. John's

Guardian "blatant misuse of union funds"

After receiving the Vol. 13 No. 4 (July/August) edition of the Guardian, I was left with some disturbing thoughts.

Firstly, during this time of producing a 'glory' high end publication, when a stated down version would be just as informative, must be questioned.

Do we really need BOLD headlines, colour photos, and large print to effectively convey necessary items to the membership?

Coupled with the unnecessary and costly practice of individual mailing, I am offended by the blatant misuse of union funds for this purpose.

Perhaps remove my name from the "mailing list", as I have made arrangements to use the old fashioned "buddy system", and will share a co-worker's copy of the Guardian.

D. WILLIAMSON
HEU Vernon local, Vernon

Guardian "On humble tribute to all those who tend to us"

SOURCE: Geoff Meggs
COORDINATING EDITOR: Stephen Howard
ASSOCIATE EDITOR: Chris Gunner
DESIGN PRODUCTION: Carol Rix
DESIGN CONSULTATION: Kim Klaven
WORKING DESIGN: Stanley Izmaylo
TECHNICAL PRINTING: Broadway Printers

The Guardian is published for the Financial Members of the Hospital Employees Union, Canada, by the directors of the following companies:

Fred Moise, Carmella Alliutto, Mary Lafferty, Doral Ridley, Marjorie Smith, Dora Thompson, Monica Heenan, Lorna Turner, Heni Thomas, Monica S. Edge, Mervyn Dowling, John Mortimer, Russ Marple, Regional Vice-President, Prince George; Marilyn Moore, Regional Vice-President, Prince George; Barbara Anderson, Regional Vice-President, Lower Mainland; Louisa Green, Regional Vice-President, Lower Mainland; Mike Kovacs, Regional Vice-President, Lower Mainland; Jim Bouchard, Regional Vice-President, Lower Mainland; George Gofin, Regional Vice-President, Lower Mainland.

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What we're up to

Whoops, we goofed!

We gave out two wrong numbers in the last issue of the Guardian. The toll-free organizing hotline is number 1-800-663-9183 (Q.C), 215.

The contact for HEU's People with Disabilities caucus is 530-9493.

Shame on Gorge Road for appealing WCB audit

Thanks to pressure from HEU, other unions, the WCB has been conducting health and safety audits at facilities across the province.

In mid-January, employers have not balked at the results, which are designed to make work safer, but enter the Gorge Road Hospital in Victoria, where the employer is consistently trying to delay implementing the compliance plan ordered by the WCB.

Local chairperson Allen Forrest says the Gorge is appealing the results of the audit. "I'm really appalled that they'd appeal something that would prevent injury," Forrest said. "Every injury we face here at Gorge costs us an average of $7,500."

"Apparently they're upset because the WCB won't buy their efforts to delay completion for up to two years," he said.

The appeal is expected to begin in 1994.

They left their hearts of health care in San Francisco. From left, HEU's president, Mario Flaherty, Linda Leachie and Wendy Johnson from Merrino local and Laura Muzin from the VGH local were part of an HEU contingent attending the Aug. 20 rally to protest a corporate takeover of the U.S. health system. See page seven.

If shaving classes haven't been set but Forrest said the locals will be stepping up member education as they wait to see what happens.

Employer pressure behind WCB claims clampdown

HEU has received reports that the Workers' Compensation Board is ramping down on claims and cutting people off WCB benefits entirely.

Union members whose claims are rejected or cut off should get in touch with their WCB representative and consider appealing the decision.

The changes in WCB policy follow the suspension of the WCB board of governors last July by labour minister Dan Miller. Miller's actions followed a campaign against the WCB undertaken by employers in cooperation with Liberal leader Gordon Campbell to undermine progressive changes made at the WCB.

Employers are determined to reduce their WCB premiums and WCB management is responding to this pressure by rejecting more claims and cutting people off benefits sooner, continued on page 4.

LRB redefinition will open a 'Pandora's Box'

A Labour Relations Board suggestion to throw wide open the definition of who is a "paramedical professional" is an attack on HEU that could undermine the progress of health reform, the union has warned.

The board has scheduled several days in November to hear submissions on a issue that could once more throw health care labour relations into confusion.

HEU is preparing for the upcoming hearings, says secretary-business manager Carmel Allevato, and the issue will be front and centre at the union's mid-October Wage Policy Conference.

"By its actions, the board is really organizing a raid on our union," said Allevato. "If the goal is to divide health care workers and slow down health reform just as we head into bargaining, they could not have picked a better strategy.

"We've already tried to sit down and solve this problem with the other unions through the B.C. Federation of Labour, but we are not prepared to surrender our right to represent anyone."

A broad review of the narrow technical definition is raised by some biomedical engineering technologists - who believe they are paramedical professionals - was one element of the recent Bill 48 regulations reining in health care bargaining, said Allevato.

"If Bill 48 came down, we worried HEU's exclusion from the paramedical bargaining association would cause instability. LRB's move will be the source of that upheaval," she said.

First Nations breakthrough part of HEU organizing gains

HEU extends a warm welcome to health care workers at eight facilities across the province who have signed up to win better wages and working conditions.

And the union has made a small breakthrough in relations with B.C.'s First Nations communities in the North. In August, 19 caregivers at Naay Naay (House of Life) Health Centre, operated by the Skidegate Band Council for the Haida Nation and serving the Skidegate community on the Queen Charlotte Islands, joined the union. It's the first HEU certification in a First Nations community facility.

Xaaynangaa naay

First Nation caregivers have signed up to become HEU members working at Xaaynangaa Naay.

HAIDA HEALERS Meet the new HEU members working at Xaaynangaa Naay.

Here are the other facilities where workers have joined HEU:

- Community Connections Enterprise, a fee-for-service program of social services funded group home in Sydney;
- Gold River Health Clinic, a diagnostic treatment centre in the North Island community;
- Golden & District Home Support, which provides community services in Golden;
- Gabriola Home Support, also providing similar community support for Gabriola Island residents;
- Tenасsin Intermediate Care, a long-term care facility in New Westminster;
- Chateau Elan, an unlicensed, fee-prof.

lt-long-term care facility in Nanaimo;
- Delta Lodge, a funded, fee-prof.

lt-long-term mental health residence in Delta.

B.C.-wide events set for national medicare week

The Canadian Health Coalition's campaign to defend medicare against federal cuts and privatization moved into high gear for National Medicare Week, set for Oct. 30 to Nov. 5.

Two events will take place in Vancouver on Wednesday, Nov. 1. The first will be a demonstration against privatization in the park at 12th and Willow at Vancouver Hospital.

As well, Canadian Labour Congress president Bob White and B.C. health minister Paul Kian.toJson will appear at 6:30 p.m. in a Celebration of Medicare at the Operating Engineers Hall at 4333 Lodge in Burnaby.

Events are also planned for Nanaimo, Prince George, Kamloops and elsewhere during the week.

Later in the fall, the coalition will be organizing a lobby of federal politicians on the importance of repealing the Canada Health and Social Transfer (CHST).

When the CHST sales take effect on April 1, 1996, it will cut an estimated $3.75 million a year from B.C.'s budget.

Both the CLC and the B.C. Coalition for Health Care Reform have produced special pamphlets on Medicare, which will be distributed during Medicare Week activities.

SEPTEMBER / OCTOBER 1995 • GUARDIAN 3
WATCHING OUT FOR WOMEN

by Chris Guiner

OMENS' equality minister Penny Priddy was a surprise no-show when the New Democratic caucus met recently in her home base of Surrey, and she was late that evening for a fundraiser being held for her and fellow MLA Sue Hammill.

The reason? Priddy was with her daughter, who was giving birth that day to Priddy's first grandchild.

To Priddy this was an example of setting priorities and bringing them home. "You have to really care about your priorities. Your job isn't everything."

Before she became MLA for Surrey-Newton and minister of women's equality in 1991, Priddy worked for 25 years as a nurse and administrator, working with people with disabilities. "But being a nurse has made me a pragmatist."

Work and raising a son and a daughter with her husband Rob, Priddy also used her training as a nurse to be well organized.

In four years as minister, an important part of her work has been to ensure that every government policy is examined for its impact on women, regardless of which ministry is involved.

This has led to improvements in the Pension Standards Act so that it covers part-time work, reforms to the Employment Standards Act to benefit working women, and new laws to protect women and children at abortion clinics, and a change to the Criminal Injuries Act to win compensation for victims of karai.

The ministry has done work to promote pay equality in the public sector. Support for child care has included operating funds for new spaces. Funds were also found to improve wages for low paid hand-related workers, whose pay is lower than similar workers in the public sector.

Through the BC 21 initiative, new child care spaces are being built in workplaces, including five hospitals. Priddy said the $55 million the ministry spends on child care services is the highest in Canada.

Child care is a crucial issue, she said, because it has been identified as one of the biggest barriers to women who need training or job upgrading.

Fighting violence against women is a major priority. The number of sexual assault centres has tripled, and new women's shelters and transition houses have been built.

Children who witness violence against women are obtaining counseling, and conflict resolution programs in schools are helping children and adolescents solve problems without fighting.

She said the ministry is also doing work to support women workers, including health care workers, who face violence on the job.

"We have to stop the cycle of violence. Just putting people in jail doesn't work," Priddy said. "I'm proud of the work we've done to stop violence in the community and violence against women."

Priddy pointed out that most of the work done by

UNIQUE Women's equality minister Penny Priddy says the work done by her ministry isn't done anywhere else in Canada.

"It's new work. It's never been done before," Priddy said she has always had good support from her colleagues in caucus, cabinet and even treasury board, where her ministry has won spending increases. But she believes there is an opportunity to roll out programming and access for women growing in society in general.

"I say that when you're talking about women, you're talking about families and communities. People look at the links between women, families and communities."

In her own life, these links are important. "I have a very supportive family and a group of supportive friends," Priddy said she also knows that listening to other people is important in all the work she does.

"I would be arrogant and disrespectful to say from behind a desk in Victoria what's right and what's wrong. That's why I get out on the road as much as I can and listen to what people are saying."
Feds refuse to back off big cash cuts

Provincial health ministers from across Canada met in Victoria in September with federal health minister Diane Marleau but failed to resolve disagreements resulting from the Chretien government cuts to health funding. The federal cutbacks, contained in the Canadian Health and Social Transfer Act, which takes effect next year, will undermine the federal government's ability to enforce the Canadian Health Act's restrictions against extra billing, user fees and privatized health clinics.

In an attempt to make it appear that Ottawa is promoting medicare despite these cuts, Marleau announced that she will penalize Alberta if it continues to violate the Canadian Health Act with private clinics after Oct. 15.

The ministers also discussed a report on paying for doctors' services prepared by B.C. health ministry consultant Miles Kilshaw. In his report, Kilshaw urged that the fee-for-service system for paying doctors be replaced by a system in which physicians would be paid according to the number of patients they serve.

In an analysis of the report, the Canadian Union of Public Employees noted that Kilshaw proposes a system which will give doctors much too much power over the health care system.

CUPE is urging that physicians work for salaried in publicly run clinics alongside other health care professionals, as is already the case in Quebec and in some areas in other provinces.

The B.C. Nurses' Union also raised the issue of clinics with a press conference during the ministers' meeting.

During the meeting, a demonstration was held in Victoria, raising concerns about doctors' incomes and federal cutbacks to medicare.

New Pharmacare plan will reduce drug costs, multinationals' profits

by Chris Gairner

The federal government is taking aim at skyrocketing drug prices with a new policy that will restrict Pharmacare coverage to drugs which a panel of experts determines are the most effective from a medical and cost viewpoint.

The new policy, called reference-based pricing, will be phased in starting with naratript for stable angina and 152 blockers for gastrointestinal drugs on Oct. 1.

Reference-based pricing has become the target of an expensive campaign launched by multinational drug companies, whose bloated profits in recent years have led to medicare cost increases for individuals and for government and private drug plans.

"This new program will prevent wasteful Medicare dollars on prescription drugs that are expensive but no more effective than less costly alternatives," Ramsey said.

Many new drugs are introduced each year to treat certain conditions which are similar but not identical to existing drugs, and do not have a proven advantage over less expensive alternatives.

Doctors who believe it medically necessary for a patient to have a certain drug not fully covered under reference-based pricing will be able to get authorization from Pharmasave.

Since the former Mulroney government eliminated competition in the pharmaceutical business by tightening patent laws, drug prices have soared. The Liberal government has declined to take action to reintroduce competition.

The multinational drug companies have spent hundreds of thousands of dollars on an expensive campaign to frighten British Columbians about reference-based pricing.

Smithers disappointed by hospital review

HEU members in Smithers aren't pleased with the results of an outside review of their troubled hospital.

While the review recommended additional one time funding of $600,000 to help deal with Bulkley Valley Hospitals' $700,000 deficit, it didn't call for an increase in the facility's base budget, said local chairperson Claudia Sta.

The review was called as a result of a community campaign that highlighted problems at the hospital.

Sta was particularly critical of the review because it ignored the lack of adequate community services in Smithers. With home support having its funding cut, Sta said only people who could afford to hire outside caregivers would get adequate at-home care.

Earlier this year the hospital created a forum to plan its change anticipated costs $450 each a year in user fees as a way to get them to go to other facilities in the North West. The review recommended shipping out elderly residents as places in surrounding communities came open.
**The NDP deserves a second term**

by Fred Martin

The provincial executive has endorsed the re-election of the B.C. NDP government. It was a tough decision in the sense that we are sensitive to our constituents and to the need to get the job done.

Government ministers and officials have been accessible to HEU at both a provincial and local level. While we have some disagreements, there is an ability to talk with each other.

Contrary to what some Liberals would have you believe, the Employment Security Agreement, and continue to support management, inappropriate utilization and lack of consultation. Fair wages and the elimination of poverty will alleviate much of the demand for health services, yet the Liberals prefer tax breaks for their rich corporate friends instead.

The Liberal Reform parties want to import privatization from the U.S. - two-tier medicine that provides some care for the rich but nothing for over 40 million Americans.

We are on the verge of a provincial election. We are also heading into a critical set of negotiations. The restructuring of health care under New Directions means that the transfer of services and members from acute care into the community will continue. The implementation of the Dorsey Commission report reduces the number of unionized, union-representing health workers.

The evidence is compelling that our interests are intertwined with the re-election of the NDP.

**The big BCMA backfire**

by Stephen Howard

The B.C. Medical Association has caused quite a stir right across the province, with an advertising campaign, and with many hostile anti-government messages.

"Line up and shut up," was the ad, which ran in newspapers and on radio stations across the province.

If that wasn't enough, the BCMA brought out more heavy artillery in the form of association president Dr. Victor Dinsdale, who pledged that doctors will be working closely with Gordon Campbell and the Liberals to defeat the NDP and bring in a two-tier health care system.

"We ran a spoof version of the BCMA ad, "Line up and shut up," on the back cover of this issue of the Guardian.

"The BCMA claims it is "protecting patients first," by getting the government, but there were more fundamental issues behind its media barrage. As health care funding tightens, organizations like the BCMA have been pushing to increase their incomes through user fees, private clinics and extra billing.

For its part, the government has surveyed the situation and recognized that health care reform designed to safeguard medicare will install unless it tackles the issue of how doctors are paid. Victoria is now in the process of investigating creative options, like salaries and the capitation system, to replace the very costly fee for service payment system for doctors.

Study after study shows that private sector health costs are rising faster - the U.S. is a good example - than public sector health costs.

We many BC surgeons and specialists have bemoaned the handful of private clinics that are blurring the trail for Americans-style care here. Take Dr. Brian Day's private surgical centre in Vancouver, where 16 surgeons, with total medical services plus billings of more than $4 million a year, have invested up to $1 million each to make their dream of two-tier profits a reality.

"But did the BCMA's billboard approach work? The evidence says no. Online shows and letters to the editor, public feedback on the BCMA ads - which included more pot shots against the Employment Security Agreement - was extremely negative.

Even the normally mild-mannered health minister Paul Rasley, who takes a led gloves approach to his dealings with doctors, was furious. The campaign, said Rasley Oct. 5, had everything to do with politics and nothing to do with patients. The BCMA should be "ashamed," he said, for the "lies" they're telling British Columbians.

Even Dinsdale would be so long; Gordon Campbell, has also suffered some unwanted collateral damage from the BCMA campaign. Right now he must feel pretty uncomfortable being in bed with Dimond.

By linking its U.S.-style, two-tier health care prescription to the Liberal bandwagon, the BCMA president has ensured that a vote for the Liberals is a vote to destroy medicare.
Health care workers are choosing HEU as sweeping new government regulations change the labour relations map

by Geoff Meggs

...
Move over Ralph Klein ... here comes 'Mike the knife'

by John McCracken and Shannon McManus

S
O WHAT'S LIFE going to be like for Ontarians — and CUPE members in Ontario — for the next four years?
The people of this province were given a pretty accurate sampling when, four weeks into its mandate, the recent-
ly-elected Tory government of Mike Harris unveiled its first "economic statement" in July. It was followed by a
pledge to scrap the anti-scala provisions of the labour code and to make joining a union more difficult for workers.
In a nutshell, it was the beginning of the Harris government's assault on Ontario public services. As if to give
Ontarians a taste of things to come, the economic statement outlined $1.9 bil-
loans in spending cuts.
The Harris government is moving quickly to implement the mean-spirited
election platform which it called the "Common Sense Revolution". He claimed that his government has inher-
ted a "spending crisis" from the previ-
ous NDP government. According to Ontario's treasurer Ernie Eves, this year's deficit would grow to $10.6 bil-
loans if it didn't act.
With the $1.9 billion in spending cuts, the government projects a deficit of $8.7 billion. This compares with the previous government's plan for a $5.8 billion deficit, which Eves says was unrealistic.
Who are the big losers? Poor people, the unemployed, minorities and public sector workers will be hit the most by the Harris' cuts. Here's how:
• People living in poverty: The biggest single hit is on social assistance recipients who will see their benefits reduced by 21.6 per cent across the board. A single mother with two chil-
dren living in Ontario will have her basic allowance — which must cover all expenses other than rent — reduced to $372 per month effective Oct. 1st.
• Cuts to children, non-profit housing and training programs will also hammer

Corporate control hit at big U.S. health care rally

SAN FRANCISCO — More than 10,000 nurses, hospital workers, community health workers and health reform organizers tramped across the Golden Gate Bridge behind Rev. Jesse Jackson, Aug. 20 to condemn the corporate take-over of America's health care system.
Joining them for the historic demonstration was an HEU delegation headed by union president Fred Martin and Canadian health union leaders from CUPE locals across the country.
"It was a very moving experience," Martin said, "to be marching with so many health workers who are confronting the same issues we find here in Canada. The corporate agenda for health care is very much a challenge to us with the implementation of free trade and steep budget cuts." The march, organized by Local 250 of the Service Employees International Union and endorsed by the North American Health Workers' Network, charged that private-for-profit corporations now dominating U.S. health services are sacrificing quality care to maximize profits.

The result is a wave of layoffs, service cuts, and hospital mergers that is reducing the quality of care which American workers pay through the nose to obtain. (Because U.S. workers have no medicare, they must pay for their own health insurance.)
"Highly skilled nurses are being eliminated and out workers are losing control over the quality of care," said SEIU 250 president Sal Rosselli.
Jackson told marchers that the top 10 executives of the private hospital system earned more last year than the entire national AIDS research budget.
The network's next project is co-ordination of workers internationally to support Canada's National Medicare Week.

* see photo page 3
Health care workers are choosing HEU as sweeping new government regulations change the labour relations map

by Geoff Meggs

they may be mental health group home workers, public health department employees, AIDS counsellors, adult daycare workers, transition house workers, long-term care workers or home support workers, but they have one thing in common: they’re transferring to HEU and they’re making our union stronger.

As this issue of the Guardian went to press, HEU staff were putting the final touches on the paperwork necessary to confirm the transfer of more than 1500 workers, most already represented by the Canadian Union of Public Employees, into HEU’s ranks.

In every case, these locals held membership meetings to confirm their desire to join forces with HEU members in the fight for respect, fairness and equity for all health workers.

Their vote of confidence in HEU means that the union’s strength in community-based health services will more than triple to at least 2,000 workers.

"There are two main reasons so many are moving to HEU," says HEU secretary-business manager Carmela Allevaro. "One is the strong gains we have made in our Master Agreement. The second is the fact that we are committed to organizing health workers only and have no other mandate."

"By early October, the new local executives should be fully integrated into our system, be receiving regular mailings and the services of a staff representative."

"We’re calling on all HEU members to make sure these new locals feel welcome, because they have a lot to teach us about their experience organizing and working in their facilities and they’re looking forward to feeling the strength and support of a union dedicated exclusively to the needs of health workers."

(Where possible, this issue of the Guardian is being mailed to new members. All new locals will receive bundles to ensure their members get plugged in as quickly as possible.)

The changes mean HEU will have to work hard to be an even more effective advocate for community-based health service workers, Allevaro said, and find even more resources to organize in this sector, where private employers and non-union operations are dominant.
Locals which have voted to make a complete transfer to HEU will be entitled to write and vote at the upcoming Wage Policy Conference and will have the right to participate in elections for the province-wide bargaining committee.

The transfers have been forced by Bill 48, the sweeping amendments to the Health Authorities Act which are designed to bring bargaining and union organization into line with the overhaul of the health care system.

"Some tough challenges remain," Allevato said. "The compulsory changes imposed by Bill 48 have caused a lot of upheaval and opened the door to serious divisions among unions representing health workers. We're determined to ensure that health workers remain united."

Next steps on HEU's union agenda include:

- efforts to ensure effective representation for CUPE locals which have agreed to allow HEU to represent them at the table but which have elected to remain outside HEU for now;
- continued efforts to ensure that HEU is entitled to represent its paramedical professional members at the paramedical bargaining table;
- a special outreach to various locals which must hold government-sponsored votes on whether to join HEU or another union representing health care workers.

"Our organizers are contacting hundreds of workers who are facing votes in the next few weeks," Allevato said. "We're contacting them one-on-one wherever possible to ensure they have all the information they need to make an informed choice."

The changes have also opened the door for HEU to represent workers in public health employed by municipal governments in the Greater Vancouver and Victoria regions.

"We're pleased to embrace public health staff as an integral part of the health care continuum," Allevato said. Their inclusion in HEU will add to the unity of health workers.

The union has also been working through the B.C. Federation of Labour to ensure that the potentially destructive processes unleashed by Bill 48 do not undermine the unity of the health unities as they prepare to head to the bargaining table.

The new locals are concentrated on Vancouver Island and the Lower Mainland, but there are some in every region of the province.

Licensed practical nurses and care aides in Meltride previously represented by the B.C. Nurses' Union are among them, as are homemaker's at Barriere House, which is operated by the Kamloops Home Support Services Association.

Allevato said the union is taking steps to reorganize the workload of serving representatives to ensure new members get the best possible representation as soon as the transfer is completed. In the case of locals participating in the B.C. Division of CUPE, the transfer has been assisted by the close cooperation offered by CUPE staff.

"This has been a tough process for many CUPE locals," Allevato said, "and we respect that. By moving from the B.C. Division of CUPE to HEU, which is CUPE's health services division in B.C., members have the advantage of maintaining their CUPE membership."

As the transfers of workers are completed, health unions must turn to the task of developing new bargaining associations to meet health employers at the bargaining table by next spring.
In the 1991 provincial election, Gordon Wilson led the B.C. Liberal Party out of the political wilderness. But inside two years he was deposed as leader by former Vancouver mayor Gordon Campbell. Wilson then formed the Progressive Democratic Alliance.

**LIBERAL WARNINGS**

In a recent interview with Guardian associate editor Chris Gainor, Wilson rings the alarm bells about who really controls Liberal health policy.

**How do you think the New Directions health reforms have gone so far?**

I was not wildly supportive of the idea of community councils. The failure of this, if it was a failure, was that we didn't take a couple of communities and run pilot projects and see how this was going to work. The government has moved into this program and started dismantling the existing system before they had the new system running.

I have serious concerns about the degree to which health policy in this province is set by the (B.C. Medical Association). The BCMA has far too powerful a voice. When doctors get upset while they're bargaining, everyone cringes. But they're only one component of the system. If we want to find new, cost-effective ways of delivering service, then we should increase the involvement of health care deliverers other than physicians.

Unlike the Liberals or the Reform Party, the Progressive Democratic Alliance will not toss out this new system. That's because there have been far, far too many community hours put into trying to make this work.

We would bring together all the health providers and try to find a way to make this work. We would try to have a more fair application of dollars with respect to the community parts of the new system. We would set up health advisory committees that include your membership.

**What do you think the BCMA is doing to the Liberals?**

They sit in the Liberal office in the legislature writing Liberal opposition policy. The Liberal health critique, Linda Reid, listens almost exclusively to the doctors. The president of the BCMA at the time is now a candidate for the Liberals and is definitely involved in drawing up Liberal policy.

The BCMA has far too powerful a voice. The Liberal health critique, Linda Reid, listens almost exclusively to the doctors. The president of the BCMA at the time is now a candidate for the Liberals and is definitely involved in drawing up Liberal policy.

**What's your policy on two-tier medicine and private clinics?**

I believe that two-tier medicine is becoming real. The reason I say that is because I think the Christen government has capitalized entirely to the harmonization of our social services and health delivery systems because of the PTA (Free Trade Agreement) and NAFTA.

Health care is a multi-billion dollar industry, and the drug companies are very closely aligned with many practitioners. Canadians have got to wake up and realize that this harmonization is taking place and is being driven by a continental based agenda. I don't support it. I'll make that very clear.

**What do you think of the HealthCare Labour Accord (Employment Security Agreement)? Do you think it should be continued?**

I don't have a problem with employment security as long as it meets the needs of people in the community. When you have employment security based on seniority, I have some concerns that perfectly good health care workers might find themselves bumped by people coming in from outside. The autonomy of the unit is important. I was quite concerned about (Bill 48), which brought in changes to health care bargaining in an omnibus bill. I don't think it was in your interest. I thought it was really dishonest.

You have been critical of government labour policies, including both the new labour code and back-to-work legislation.

We have to find a way to get the hammer of government intervention out of the collective bargaining process. If you allow a group to have the right to organize, the right to unionize, and the right to strike, then you have to allow that group the right to exercise that right. I opposed the back-to-work legislation for Vancouver teachers (in 1993) because it was purely political.

**What do you think of the current leadership of the Liberal Party?**

I knew within a month of the election in 1991 that I would face a challenge to my leadership. The situation started almost immediately. I simply would not choose to tee the line for the Howe Street types that ran the Social Credit. When I didn't see the line on the Charlottetown Accord - I took a very aggressive stand for the No side - this establishment basically tried to blackmail me to the No side. I am not interested in recreating the Social Credit Party under the Liberal banner.

Gordon Campbell began raising money in January of 1992. He didn't become leader until the fall of 1993, after I got the most amazing trash in the press because I divorced and remarried, and happened to marry a caucus colleague. Quite frankly, my relationship with Judy Wyble had little or nothing to do with me losing the leadership. If it had not been that issue, it would have been another issue. That backroom bunch wanted me gone. The backroom bunch is the same old Social Credit group. They're all the same players.

If you look at the literature, it says in big type, 'Gordon Campbell,' and in small type, 'and the B.C. Liberals.' They're promoting Campbell because there are a lot of Socreds and a lot of Tories, for whom the B.C. Liberals stick in their throat. These are people for whom politics is a short cut to the public trough so they can stuff their pockets, and the public be damned. That's the reason I left. So we worked on setting up a party that has a sound foundation in centre left politics.

Tell me what the major policies are for your party, the Progressive Democratic Alliance.

We want to provide a greater degree of regional autonomy in delivering service. We would like to decentralize services and integrate ministries to provide integrated services. We are absolutely committed to a reduction in the tax burden. We have to curb government spending, but without slashing social services.
Another top Vancouver Regional Health Board official is in trouble as HEU bares details of his business links to Jim Nielsen’s MRI Clinic

by Stephen Howard

H e is pressing for the resignation of a top administrator in B.C.’s largest regional health board after a lengthy union investigation turned up more cosy links with private, for-profit health care entrepreneurs.

According to corporate records obtained by HEU, Vancouver Regional Health Board chief financial officer Del Brooks was a major shareholder in the controversial Richmond MRI clinic headed by ex-Socialist health minister Jim Nielsen up until Sept. 21. Brooks also served as a director in the company which is at the forefront in the fight over two-tier medicare.

“There is no question that this is a serious conflict of interest,” said HEU secretary-business manager Carmela Allemano. “It affects public confidence in our new regional board system. It’s unpalatable, and Brooks must go.”

Brooks purchased 200,000 shares in Nielsen’s company, Camimaging Technologies Ltd., in 1993, less than a year after the former Vancouver General vice-president parted ways with the hospital armed with a $156,000 golden handshake.

And Brooks, who was hired in March as VRHB’s top financial whiz, maintained his directorship in the company while he worked for the board. He didn’t resign the post until June 2 when he issued a letter to company lawyers.

Despite the conflict, Brooks is still on the job, even though he disclosed specific offers from Vancouver Regional Health Boards chief executive officer to “divest” himself of his business interests before he started work.

After a heavy spate of closed door meetings – “to finalize what he said at what to whom,” says VRHB chief executive officer Peter Warwick – independent board officials denied wrong doing and moved quickly to limit the damage.

In the space of 36 hours between Sept. 19 and Sept. 21, Brooks sold his shares back to Nielsen’s company. Then the board came out swinging with a stinging press release condemning HEU, claiming that the union had “launched an unwarrented personal attack,” on Brooks.

The Brooks brothers is the second example uncovered by the union in less than two months involving financial backers of two-tier health care and the the private clinic and they won ... so far

by Mike Keenan

In July, news broke of a grand jury to open a private surgical day care facility in the Conrex Valley Lifelines Inc. and Hunter Pacific Developments of Victoria were apparently in the final stages of property acquisition for the new facility.

The new clinic would offer special surgical procedures and charge fees.

In response, the Conrex Valley formed a coalition for medicine, spearheaded by the local chamber council and MLA Margaret Lord. Union and community activists answered the challenge through public debate, lobby efforts directed at municipal councils, and a successful campaign that garnered support in the local community health council.

Local newspapers that initially baulked the announcements of the new clinic have since been silent, as have the numerous municipal politicians who had expediently positioned themselves as defenders of private enterprise. Concerns from citizens fell by the wayside at the first signs of public opposition.

So the Conrex Valley left an unfulfilled promise that is now late enough...for now. We intend to use this breathing space before the next election to muster support for a fragile and vulnerable public health care system that has survived for Canadians well, in the hope that where the people lead, the politicians will surely follow.

• Mike Keenan is a Canadian Union of Postal Workers number 2 and past president of the local labour council. This is an excerpt of his article that appeared in Pacific Current magazine.

“You’ve thrown your lot in with for-profit, American-style health care like Brooks has, you should be ineligible to be a senior administrator stewarding our medicare system’

But that doesn’t satisfy the policy principles because not everyone has the integrity of Del Brooks. I think there should be guidelines so that people know what the ground rules are.

Nielsen’s company owns a 50 per cent stake in the Riverside Magnetic Resonance Centre in Richmond. The other 50 per cent is owned by Edmonton entrepreneurs Don Cameron and Don Little through their company Magnetic Resonance Centres of Canada Ltd.

The Edmonton firm also owns a 50 per cent stake in a North Vancouver MRI clinic, as well as similar facilities in Alberta.

The other 50 per cent of the North Vancouver clinic is owned by Richard Dolen.

Earlier this year Dolen announced he would seek the Liberal nomination for the provincial riding of North Vancouver Lonsdale. But he withdrew his name soon after a B.C. Supreme Court justice opened question Dolen’s honesty in dismissing a civil suit launched by Dolen.
1,500 members benefit from labour adjustment agency programs

More than 1,500 HEU members have benefited from early retirement, job placement, retraining and other programs offered by the Health Labour Adjustment Agency, according to information released by the agency in early October.

It’s paved the way for displaced HEU members to find new jobs under the Employment Security Agreement, and created vacancies that reversed dis- placement for hundreds of other union members.

Total financial resources allocated for HEU mem-

bers in ILA programs has topped $12 million since the agency started up in 1992.

"These figures are quite significant and show just how much benefit the agency has been for HEU members and the health restructuring process," said union secretary-business manager Carmela Alvesko.

Here are the figures for specific ILA programs:

- 369 members matched to new jobs under the ILA priority placement programs;
- 44 members matched to new jobs under the volunteer transfer program, which have avoided or reversed the displacement of HEU members;
- 471 members have retired early under various ILA programs, at a cost of $10.7 million;
- 270 members have been approved under ILA training program at a cost of $1.1 million;
- 337 members have been approved for vocational training at a cost of $200,000.
- 22 job shares involving HEU members have been approved at a cost of $94,000. In other ILA news, only 36 former HEU Shaugnussey members remain to be placed. Nineteen are currently seconded to other Lower Mainland facilities, while the remainder are on WCB, LTD or unpaid leave.

The agency also reported on the overall decline in full-time equivalent positions in the acute care sector brought about through the 10 percent restructuring reduction target set in July 1993. BCNU FTEs declined by 7.1 per cent, HEUs fell by 5.5 per cent, and HSA by 3.3 per cent. The total FTEs have actually increased by 0.7 per cent.

There’s nothing fair about workfare

The magic welfare reform plan of right-wing politicians is just plain old poor-bashing

by Dan Keeton

WORKFARE is a scheme that has nothing to do with solving Canada’s dire unemployment sit- uation. Instead, it’s a method by which governments cut welfare rolls while attacking union-set wage standards and job security.

So charge the Canadian Union of Public Em- ployees which is waging a national campaign against workfare with the National Anti-Poverty Organisation.

The term “workfare” applies to enforced labour for welfare recipients. It is banned by the federal govern- ment and it violates the United Nations conven- tion on human and economic rights.

The two organizations point to the examples of Quebec and New Brunswick to show that workfare doesn’t work.

Quebec’s program has been pronounced a dismal failure, even by Quebec’s PQ government (which, in fairness, didn’t launch the scheme; the former Liberal government did). In New Brunswick, newly re-elected Premier Frank McKenna’s Liberals are using the scheme to put un- employable recipients to work on jobs vacated by laid-off union members.

CUPE and NAPO launched their anti-workfare campaign with a boisterous demonstration in Saint John, N.B., earlier this year. Union members, clergy and senior citizens marched in indomitable weather and staged a mock funeral for unemployment insurance and other social programs.

CUPE national president Judy Davy told the demonstration, “The New Brunswick model that the federal Liberals are so fond of just encourages employers to lay off existing workers and rehire others at poverty wages.”

"Workfare encourages employers to lay off existing workers and rehire others at poverty wages", says Swanson. The compulsion of law, the compulsion of need, and the compulsion of hope.

The New Brunswick program — called NB Works — operates on the compulsion of hope, she says. Welfare recipients are forced to work in jobs such as cleaning brush and assisting kindergarten teachers.

CUPE’s research department has gleaned several examples of its effects.

In one, a woman named Michelle was paid $0.25 per hour as a school board clerk for a 20-week term while regular employees earned $10. In another, a unionized school clerical worker complained new jobs are being filled by “grant” workers who work 36 hours per week, as opposed to the 18 hours granted to CUPE members.

Poor training of grant workers on a provincial beau- tification program caused one death and 76 injuries, resulting in a six-month period in 1994, according to the New Brunswick Occupational Health and Safety Commission.

The drop-out rate for this work was 45 per cent, according to a report. Some 75 per cent of the particip- ants were single-parent women who couldn’t obtain adequate child care on their own.

Quebec’s EXTRA program pays an additional $150 per month to participants who receive a base welfare rate of $500. Labour laws do not apply to workers in the program.

Only about three per cent of EXTRA workers get a permanent placement after the term expires. Alberta is the home of true workfare — either take retraining or forced labour, or you’ll cut off. In that province, 347 full-time equivalent positions were monthly cut at hospitals in Red Deer. Meanwhile, Alberta’s workfare program was advertising for nurs-

attendants and personal care aides. The jobs paid half the wages of the union members.

Critics say workfare in whatever guise is an agent of cost-cutting for employers, private or public.

1 doesn’t increase jobs, but replaces jobs paying union-scale wages and benefits with subsidized rates. Worse, in some cases it exempts the replace- ment workers from the protection of labour legis- lation.

Even some pro-business commentators decry workfare. In a Globe and Mail column last June, Terence Corcoran criticized Ottawa’s new Tory government for plans to impose workfare on younger welfare recipients. He warned the scheme would create “a parallel employment system in the province, a pool of workers who are forced to work at jobs and wages that are outside the actual employment market.”

Last April, BC’s Liberal caucus released its own version of workfare. In a press release leader Gordon Campbell stated a Liberal government would create a Job Preparation Contract.

It was vague on the details, promising a “plan to establish personal goals enabling an easily and effect- ively transition of welfare and back into the econo- my.” It also promised “community-based works” to those who failed to find employment after going through a job-training program.

The caucus’ research department says the scheme is demanding and involve career counseling with participants rather than forcing them to work at jobs they don’t like. It’s possible, however, that those not participat- ing could face a penalty such as a reduction in ben- efits, the department acknowledged, while saying details had yet to be worked out.

CUPE and NAPO say the real danger lies in the fed- eral government’s plans to cut funding to provinces for health, education and social assistance. That will allow provinces like New Brunswick to do whatever it wants, including the establishment of full work-
UTOMN has come, and with it thoughts of — ugh — Christmas. Why be so down about the season of giving? Probably because it conjures images of driving in blinding rain or snow to the mall, where, shoulder to shoulder with thousands of other shoppers you stand out that pink hair dryer for Aunt Hortense or that bathtub for Dad.

Why bother? There are better, even cheaper ways to find gifts. Books, CDs and tapes, and other goods distributed by Canadian companies that are easy on the budget and let you do a good turn while giving a gift.

BOOKS
I gave the hospital a lot of unpaid time. Eventually, I learned you don’t do things like that.” That quote comes from Mary Hart, a former health care worker whose story is one of several chronicled in Against the Current: Canadian Women Talk About Fifty Years on the Job, by Judith Finlayson (hardcover, Doubleday Canada, $32.95). Former Vancouver street kid Evelyn List offers a new collection of stories in Other Women (hardcover, Random House, $22). Polestar Press is releasing In This Cedar Fountain, a new book of poems from Vancouver union activist Kate Bread.

It might not seem Christmassy in spirit, but the holidays are a good time to dig into the 500-page page of On the Take: Crime, Corruption and Greed in the Mulroney Years, now out in a scandal-updated paperback version (McGill- and -Stuart, $8.99). Another interesting read is Ronald Segal’s The Black Diaspora: Five Centuries of Black Experience Outside Africa (hardcover, Harper Collins, $37.95).


New Star Books of Vancouver has two new titles coming out in paperback for the season: Daniel Gawkroger’s High Art: Pornography and the Harmattan New Democrats, and Grace Hartman: A Woman for Her Time, by Sean Cean, on the late former president of the Canadian Union of Public Employees.

GLOBAL GOODS
You’ve had a sneaking suspicion the Persian blanket you gave a loved one last Christmas means profit for the retailer and the wholesaler, but only pennies for the person who made it. You’d likely feel the same way if Oxfam-Canada offers items from around the world through a system that pays dividends to the producer. It does this through Bridgehead (Vancouver store 3309 W. Broadway), a trading company that buys from grassroots co-operatives, self-help groups and unions.

Bridgehead works with 90 artisan and farming groups in 30 developing countries, as well as in Canada. It helps craftpeople buy raw materials, and shares any profits with them. This year’s catalogue has just been distributed. Among the offerings: Indian elephant bookends of soapstone for $26.50; a colourful "oil can guitar" from South Africa, $42; and a pencil box from El Salvador, $18.50.

Oxfam also accepts donations in the name of the gift recipient. Call them at 1-800-466-9526 to get a catalogue and donation information.

MAGAZINES
Canada is home to a wealth of magazines of alternative lifestyles and viewpoints. The Canadian Forum, a monthly opinion and arts journal with a strongly nationalist bent, costs $23.94 per year (send to: 3302 Atlantic St., Halifax, N.S. B3H 1G4). The left-wing Canadian Dimension comes out six times a year ($24.50, cheaper for seniors, jobless and students; write: 400-122-15th Ave., Winnipeg, MB, R3B 1N7). Activists in the labour movement will appreciate Our Times, although Ontario affairs tend to dominate its pages ($20; 390 Dufferin St., Toronto, Ont. M6K 2A3). In Vancouver, the magazine of public affairs from the left bowser is the relatively recent Pacific Current ($22; Box 34279, Vancouver, B.C. V6B 4P2).

Horizons is a women’s quarterly out of Winnipeg ($23.50; PO Box 128, Winnipeg, MB, R3C 2G3).

UNION GOODIES
Still stuck for a gift? Why not try shopping your union’s store. "Mary’s Boutique" is the name given to the stockroom of the IBEW. Therein lie a selection of gifts for loved ones. Like an IHEA mono- grammed jogging suit, in size S-XXXL, for only $65.50. Or winter and summer jackets, from $49. Or T-shirts and sweatshirts. Or assorted coffee mugs, tote bags, coasters, baseball caps, clacks and so on. You can order through your local.

Keeton is a Vancouver freelance writer and a frequent Guardian contributor.
HEU awards 21 bursaries for post-secondary students

CLOSE TO $10,000 have been awarded through HEU's special bursary program to help 21 union members and their children attend post-secondary studies this school year. HEU financial secretary Mary Laplante said almost 200 applicants were received for the union's bursary program.

"Helping to develop the skills of our members and their children is an important commitment for HEU to make," Laplante said. "With post-secondary costs so high these bursaries should be a big help.

Bursary winners are Evelyn Achak (mother: Beatrice Achak from the Children's local); Sanjita Benning (mother: Harbans Benning, Royal Columbian local); Kerrie Hewitt (mother: Myrna Hewitt, Richmond local); and Jesy Domasso (mother: Rosa Domasso, Kitimat local).

Restructuring Song

by Susan Segal, RN
California Nurses' Association
(to the tune of "Casey Jones")

The names at the hospital are working right hard. Taking care of sick patients keeps us on our guard. Cuts in staffing quickly leads to mandatory overtime. While administration fighters us over every time.

Restructuring! They tell us that's progress. Restructuring! It's a money-saving trick! Restructuring! Administration loves it! Who do they think takes care of them when they get sick? Our work is being farmed out to unlicensed personnel.

SONGS TO

MARCH BY

When will the public see that patient care has gone to hell? A patient's not a car that can be broken into parts. Except to those with pocketbooks instead of brains. Restructuring! How will it affect us? Restructuring! We're all supervisors now. Restructuring! Will our licenses protect us? When we leave our patient's care to those who don't know how?

Coffee break

Business acumen bankruptcy

When Arizona voters last went to the polls they elected a governor who promised to apply his business acumen to state government.

Well, it now appears that governor Fife Symington, a real estate developer, can't practice what he preaches. He's filed for bankruptcy claiming $24 million in debts from failed deals. Creditors cited in the Augur after rejecting Symington's offer to write his debts at 10 cents on the dollar.

No wonder the papers are bad

The top bosses who run Vancouver's two daily newspapers won't win any awards for brilliance. The brass at the Pacific News, which put out the Sun and the Province, recently decided to spend $120 million on new presses. That decision puts an end to a $60 million faxo that resulted from their last decision on new printing presses. But ... stop the presses! It turns out that the new presses aren't suitable for the company's new printing plant in Surrey. Some bonds in company management hands over this latest faxo, but other bosses involved still live to mismanage another day.

Calling all granaries

The raging Grannies started in Victoria years ago singing songs of protest at demonstrations and rallies staged by unions and community organizations. Now the start of a good thing? There are so many raging Granny groups across Canada that they held an un-convention in Edmonton in early September.

Missing in action, not AWOL

U.S. federal government employees were furious at remarks made by Republican Senator James Inhofe after last spring's bombing of the federal building in Oklahoma City.

Inhofe, who represents Oklahoma, suggested in the media that workers missing after the catastrophic bombing may have been playing "foosball.

In fact most of these unaccounted for were either dead or badly injured.

A day at the office with daddy

How nice.

Structural Dynamics Research Corp. of Montreal was having...
HEU people

Roy will curl
Elliner Roy of the Richmond Lions Manor retired Aug. 31 after more than 13 years of service. A maintenance worker, Roy held a number of local union positions including chairperson, secretary-treasurer, warehouse and chief shop steward. Roy, who sings in the church choir, is looking forward to retirement. He'll take a holiday and have his curling skills this winter.

Chetwynd's "caring caregiver" retires
Chetwynd General Hospital LPN Ruth Klaassen bid farewell to friends and colleagues this past summer, retiring after 34 years of caring.
Her colleagues describe her as a "caring caregiver" whose "availability will be missed."
Klaassen and her husband John will be retiring to Sechelt on the Sunshine Coast to pursue their hobbies of gardening, handcrafts and woodworking.

Pickering's sense of humour will be missed
Ron Pickering has retired from the Golden and District Hospital after 17 years of service. Local actor Lorna Joy writes that Pickering, a maintenance worker, "is well known for his sense of humour and love of long-sandwiches and will be missed by everyone." Pickering has plans to keep busy because "he never sits still for long," says Lorna.

Staff on the move
Welcome to Toni Marrington who started with HEU as a staff rep in late September. Marrrington is a former Vancouver Municipal and Regional Employees Union staff rep who started out as a payroll clerk and shop steward in the Vancouver sewer department. She'll be servicing locals in the Vancouver area, plus Bella Bella and Bella Coola on the Central Coast.
With former HEU Kootenay director Mark Atkinson having started his new job at the Labour Relations Board, Emil Shumney has been appointed director of the Nelson office. Shumney was serving as director of the Kelowna office, where he's been replaced by Ken Strange, who is returning to the director job from long-term disability. Welcome back, Ken.
In the Provincial Office Vancouver site, long-time office casual Mary Lee from the VGH local has been appointed to a permanent secretary II position. Kootenay office staff rep Stan Reece has accepted a new Provincial Office position with responsibility for bargaining. Sylvia Sewell, who is responsible for organizing remaining programs for HEU members, is now on maternity leave. She gave birth to a healthy baby boy Sept. 30. Three reps have been promoted to staff rep II positions. They are: Brendan Dick, Provincial Office Vancouver site, terr. Griffin, Victoria office, and Kathy Jessome, Prince George office.

HEU LESBIANS AND GAYS

for support
• afraid of being identified?
• feeling isolated?
• being harassed?
• want to know your rights?

CALL 739-1554 (Lower Mainland) 1-800-663-5883, local 54
Confidential Service of HEU Lesbin and Gay Caucus

I wouldn't want her job
"When our local union's office secretary passed away, I had to fill in for three weeks at the office," writes Keith Sullivan who's treasurer of local 9 of the Pulp and Paper Workers' Union in the union's newsletter.
"I normally work as an millwright in a pulp mill, and you could not pay me enough to do the secretary's job full time. I spent three weeks of sheer hell in there."

TEMPORARY RESpite
Golden Hospital maintenance worker Ron Pickering takes a short breather in his favourite chair to gear up for retirement.

PERSONS WITH DISABILITIES talk to us

We're working hard to make our union better for HEU members with disabilities. We'd like to hear from you. If you are on WCB or LTD, or if you're invisibly disabled in the workplace, let us know how the union can better meet your needs.

LEAVE A MESSAGE AT 604-530-9493 AND WE'LL GET BACK TO YOU. ALL INFORMATION IS CONFIDENTIAL.

a "Take our Daughters to Work Day." So Bill Means took his eight-year-old girl to work.
She was beside him when he was abruptly called into his supervisors' office and fired.
Father and daughter were then escorted from the building.

That's what you call strikebreaking
A small steel manufacturer in Whiteby, Ont., reacted to a strike by its 45 unionized employees by running people over.
Four members of the Steelworkers Union were slightly injured when owner Rosalie Fabbricci drove through the picket line.
"It's hard to believe that a company hates its employees so much that it would engage in that kind of violence," said union rep Ron Varley.

HEU's Confidential Human Rights Harassment Process

Complaints investigators can help if you are being harassed at work because of your
• sex – including sexual harassment
• race
• sexual orientation
• religion

CALL 1-800-310-6886 for a recorded message about the process

(see Art. 1.03 Master Collective Agreement or Art. 1.04 Local Collective Agreement)

You can
1. save HEU money
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by notifying us promptly of any change of address.

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"PAY UP OR SHUT UP."

That's the BC Medical Association's attitude toward your health care.

Whether they are pushing user fees, extra-billing or a two-tiered, US-style health care system, the attitude of the BCMA is that their profits come first.

The BCMA claims in their controversial ad campaign that they put the needs of patients first. But that's hard to accept from an organisation that formally opposed the principles of accessible and universal health care in 1992. In addition, at a time when federal cutbacks are putting tremendous financial pressure on public health care, BC doctors' incomes have swollen to an average of $183,013 per year – a 22% increase since 1990.

The BCMA wants a health care system that allows doctors to charge fees only the wealthy can afford. The rest of us will have to "pay up or shut up."

It doesn't have to be that way. Health care unions are working with government and employers under the Employment Security Agreement to protect quality Medicare services. Please ask your doctor to cooperate with the rest of the health care community to keep Medicare strong.

Breakthrough

HEU has organized caregivers at eight facilities across B.C., including Xaaynanga Naay Health Centre, the first HEU local at a First Nations community facility.

Watching for women

NDP cabinet minister Penny Priddy talks about priorities and the work of her ministry of women's equality which has won big gains for B.C. women.

Welcome!

More than 1,500 caregivers have joined HEU in response to big changes in health care labour relations. Meet some of the people who'll make our union stronger.

Rally for medicare – Nov. 1

National Medicare Week, Wednesday, Nov. 1, noon to 1 p.m., Dr. Brian Day private clinic, 2836 Ash St., close by VIJG. Show the federal liberals and the BCMA that you won't stand for two-tier care.