Standing up for health care!

A committed membership and political action produce a new master contract that protects services and jobs. Now the focus of negotiations shifts to the community sector and first contracts for new locals.

BARGAINING REPORT
PAGES 9-12

LIFTING SMARTER LIFTING SAFER

A unique management lifting team pilot project in Kelowna has reduced injuries. Other employers should take note.

PAGE 6
Weather a fitting follow-up to a victorious spring

by Chris Allnutt

O N THE HEELS of our bargaining and provincial election victories it seems only fitting that across B.C., HEU members are basking in some of the best-ever July weather. The months leading up to the contract settlement and election were exhausting ones. Our dedicated local activists and union staff tirelessly shouldered enormous responsibilities, and our members remained united and ready to act to achieve our bargaining goals. Make no doubt about it, without the power that comes from a united membership and a common commitment to political action to get the NDP re-elected, we wouldn’t have a Collective agreement today.

Our efforts have clearly paid off. So the sunny skies provide a well-deserved opportunity to unwind, to rest and relax with family and friends. Those members who had the foresight to book their holidays for July are particularly fortunate! Congratulations to Premier Clark and the NDP for their cliff-hanger election victory. With Clark in the NDP drivers seat, the party shifted into high gear and made protecting Medicare a key campaign issue. Never did he waver from his commitment to provide employment security for health workers.

Along with president Fred Martin and financial secretary Mary LaFlante, I’ve had an opportunity to meet with the new health minister Joy MacPhail to discuss the impending review of New Directions and other important issues. The new minister is committed to working with HEU and health care workers to ensure that health reform makes our public system even better. HEU has always said that you can’t protect health services without protecting the workers who make them happen. With employment security provisions now enshrined in our contract, we’ve clearly achieved the goal of protecting services and caregivers. We’ve also made gains in a number of areas such as non-urgent and acute care, workers are now covered by one contract. There will be greater emphasis on retaining and retraining in the workplace, and significant improvements for members on long-term disability.

Flowing from the recommendations of Vince Ready that make up the new deal are an array of measures to ensure the health system is restored to what it is now. The government has made a strong commitment to the health care system. HEU will monitor implementation to ensure that these gains are maintained.

‘We’ve clearly achieved the goal of protecting services and caregivers’

sector into one agreement, and deciding on an appropriate allocation of the money provided to fund the levelling up of lower wage rates that result from the new “one contract for all” master agreement.

With negotiations, and the election behind us, the 600 HEU activists who will attend the union’s 20th Biennial convention in September will be able to develop an action plan to consolidate our gains from this spring and help Chart HEU’s course for the future.

On another note, I would like to acknowledge the tremendous contribution by Brother Geoff Meggs to HEU over the past few years. His creative ideas helped the union through some difficult challenges, and we wish him all the best in his new job as Premier Clark’s director of communications in Victoria.

Winter school rejuvenating

I am writing to thank HEU for the scholarship to attend the Canadian Labour Congress Winter School this past February.

I was joined by two HEU sisters in the CUPE leadership course. Imagine, three HEU activists with 27 CUPE sisters and brothers.

The course was very informative, and gave a chance for us to get an inside view of the workings of CUPE, and an opportunity for the CUPE activists to get firsthand information about HEU. And what would winter school be without water volleyball and their night. A great attempt at both, no success from the judges.

We all had a great week, and not all the learning was from the classrooms.

I would encourage all activists to apply for the opportunity to attend winter school in the future, as many associations are started there with other union activists. It is educational, as well as a rejuvenating experience of solidarity. Once again, thank you HEU.

ROGER KISHI
St. Paul’s Hospital

Queenslader says ‘thanks’

Queenslader Alcohol and Drug Abuse Association was on strike from Jan. 31, 1998 to Aug. 8, 1999. It has taken an immense amount of time to process all the events, emotions, implications, trials and tribulations of that pivotal time. I would like to thank all the folks who helped us by sending donations. I cannot say how needed and how grateful we were to receive them. Fellow strikers everywhere know how hard a long strike can be on body, mind, spirit and pocketbook. I would like to thank the Provincial Executive for the guts, the pride and honour, the heated debate, the humour and the love and energy they bestowed upon us.

To an old soldier, John Hurn, (Director, Northern Regional Office) who was consistent, steadfast, and always helpful. He helped us immeasurably. He sat us down and helped us sort out the big picture and put it all its pieces. He was a kind of expert in the big area of politics and opposition that we are all forced to endure to the end of the bottles of the people. He always treated us as equals, with the utmost respect, as is his way.

To that wild woman, [self-rep] Cathy Jenson, for the support and knowledge she shared, and the study chicken concoction she cooked.

We received no wage parity, we were locked into the IPA. We were unhappy. We were subjected to Kevin McGee from HEUCA, the “stupid "staff" worker” we’ve ever encountered. We lost two injunctions, were evicted and still we stood. I’d like to thank my closest comrades, John, Sharon and Vicki for their dedication, endurance and encouragement, we truly are a force to be reckoned with. We are now situated in G.R. Baker Hospital. My wage is equal to my colleagues, I have a human rights case pending, and my spirit is alive and well.

Thank you HEU! D. HORSFALL
Queenslader Drug and Alcohol Local

Stop the whining and get behind your union

I’ve tried hearing fellow brothers and sisters complaining about the HEU.

For years I fought as an activist against this negative attitude, and tried to encourage participation and solidarity throughout my local. Members not willing to attend union meetings would criticize both their local and Provincial Executives, and the HEU in a whole.

These opinions were bred from ignorance of the truth and quite often encouraged by management who were eager to weaken our ranks.

As we all face further cuts and uncertainty, there seems about a fear of the future and a movement continued on page 14

Guardian

"To humble dedications to all those who set us in".

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The Guardian is published on behalf of the Provincial Executive of the Hospital Employees’ Union, under the direction of the following editorial committee:

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Terri Doherty

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Nelson Miller

Member-at-Large 59

Marilyn Boldman

Member-at-Large 60

Linda McEvoy

Member-at-Large 61

Terri Doherty

Member-at-Large 62

Nelson Miller

Member-at-Large 63

Marilyn Boldman
What we’re up to

Essential service talks too hot to handle at Glangery

A late March meeting on essential services between the Glangery local and management became too hot to handle when an HEU member became an unwilling victim of spontaneous combustion. During a management “think tank session,” the HEU committee retreated for a quick smoke. When they returned to the building the members could smell a strange odour coming from Ran Morrise of the Procyr logo. “He was on fire,” recalled Glangery’s Cecile Logan. “But nonetheless, it created a stir among management and Don was had by all.”

Kamloops local’s hockey team champs

About the same time the NDP was losing the opposition 36 to 35, the atom hockey team sponsored by HSU’s Kamloops local was outwitting its opponents to win the city’s first championship.

“The whole team just came together and they won it,” says Kamloops local member Ken Hall, whose son Tyler was on the team of 11 and 12 year olds. Local secretary-treasurer Ken Prinse says Kamloops members have been sponsoring an atom minor hockey team for the past 30 years. The team is divided out to have five games with a great big HEU logo on the chest.

“It’s a great idea to promote HEU,” says Prinse, “and for us to become involved in the community.” Prinse says that over the years, many children of HEU members have played on the team. Now the local is looking at sponsoring girls and boys soccer teams in the community.

Richmond food service workers in workload wildcats

Food service workers at the Minoru extended care facility, which is part of Richmond Hospital, took job action April 25 to press their case for employer action on some significant workload issues stemming from a reorganization of food services.

Earlier in the year, Minoru’s full-service kitchen was shut down and a number of staff displaced by Minoru, the non-

LRB backs HEU in biomed engineering technologist hearing

The Labour Relations Board has ruled that biomedical engineering technologists (BMETs) do not meet the criteria to be classified as paramedical professionals. In handing down its decision, LRB vice-chair Barbara Juniper said “on balance the BMETs do not meet the criteria set out in the inquiry decision, and thus, in accordance with the regulations the BMETs must be included in the HEU health services and support facilities sector union.”

The hearing, which took place in February and March, is tied to last year’s Bill 48 process, which altered the labour relations structure in health care. Juniper also revisited a 1979 LRB decision affecting the BMET classification.

At the time the labour board found that all new BMET positions were to be placed in the HEU bargaining unit. Consequently, Juniper ordered that 63 BMETs in the HSA bargaining unit should instead become HEU members. She directed the two unions to begin negotiating the transfer. HSA is appealing the ruling.

New Directions review ordered by NDP’s new health minister

Health care key election issue, as NDP re-elected with strong HEU support

Regionalization in the B.C. health care system is on hold while B.C.’s new health minister, Joy MacPhail, reviews its progress in the last three years.

MacPhail’s announcement followed several changes in health care relating to the B.C. provincial election, which ended on May 28 with a narrow win for Premier Glen Clark’s NDP.

MacPhail, the MLA for Vancouver-Hastings, was minister of social services before moving to the health ministry.

Clark succeeded Mike Harcourt in February as NDP leader and premier, and appointed Andrew Petter as health minister, replacing Paul-Ramsay Petter remained in health only until the post-election cabinet shuffle in June, when he moved to the finance ministry.

Before and during the election campaign, Clark and Petter made a number of announcements relating to health care, including a 2.5 per cent budget hike for hospitals and a new Medicare Charter (see page 11).

Medicare was a prominent issue during the campaign, with Clark asking how Liberal leader Gordon Campbell and B.C. Reform leader Jack Winberg could protect Medicare when they planned to slash spending and give business major tax breaks.

Campbell later promised to protect Medicare as part of his economic plan, but the plan was based on optimistic predictions of economic growth.

The NDP campaigned with strong support from HEU, with many HEU members and staff working in NDP campaigns around B.C.

‘Premier Glen Clark has been very supportive of health care workers, especially with his work in promoting the historic Employment Security Agreement’

‘Premier Glen Clark has been very supportive of health care workers’

Agreement,” said HEU secretary-business manager Chris Alliston. After the election, Petter maintained the 2.5 per cent funding increase for hospitals, but ordered a temporary freeze and review of capital funding programs, including hospital building, because of public concerns over the provincial debts.

MacPhail said the review of regionalization program, known as New Directions, is needed because of the need to deliver efficient health care services at a time when the federal government is making major cuts to its contributions to health care funding.

LGH DISPLACEMENTS PROTESTED

Lions Gate Hospital food service workers wildcated June 16 to protest layoffs in the department in the ongoing controversy over a shared cost/chill system operated by LGH and Burnaby Hospital.

They were protesting displacement notices primarily for full time positions issued effective July 30 without consultation by the hospital, which wants to cut full-time equivalent staff by more than 25 per cent. LGH says it wants to stay within the original budget plan for the shared scheme, which has been plagued by cost overruns and complications about quality since its inception.

As a result of the walkout, the union won a week’s reprieve and will press the employer to maintain the full-time positions. HEU has also greased the move.

Lions Gate reports that food service costs for 1995/96 were up considerably — close to $400,000 — over the previous year, when the hospital maintained its own kitchen and produced meals on site.

Food quality is an “obvious problem,” says one administrator, with food quality being a “minimal standard” which “lacks consistency.”

June/August 1996 • Guardian
Treaty signing like finally coming home

The signing of the historic Nisga'a and claims agreement in principle at a colourful ceremony in New Aiyam was quite an 'awesome' experience for HEU member Don Roberts. A member of the Nisga'a Nation and an LPN at Millet Memorial Hospital in Terrace, Roberts attended the March 22 festivities with other HEU representatives. "It was moving and awesome," says Roberts. "I feel proud to be an Aboriginal person, and feel like finally come home."

Two national labour media awards won

The union's communications department took home some silverware in May, winning two achievements from the Canadian Association of Labour Media. For the third time in four years, the Guardian won the prestigious top honour as the best overall publication of a provincial union in Canada. In addition, HEU won recognition for excellence in public advocacy videos for the comedy pieces Power House Hospital Administration and Dr. Dean Dawson, featuring Vancouver actor Steven Hill, that were shot for Working TV, the union-sponsored cable TV program.

Halt sought to Red Cross changes

EU MEMBERS at the Red Cross Local are continuing their campaign to halt plans by the Canadian Red Cross to close B.C.'s only blood testing centre and move the work to Alberta. Working together with HSA and BCNU members, the HEU local is calling for a moratorium on downsizing and regionalization at Red Cross while the Kreeker Commission and Canadian health ministers consider the future of Canada's blood supply system.

During the provincial election campaign, Premier Glen Clark endorsed the workers' call for a moratorium. The Red Cross launched major changes last year. In B.C., all blood collections outside the Lower Mainland and Vancouver Island have been halted, cutting the amount of blood donated by 20 per cent. The Red Cross now plans to cut the number of blood testing centres across Canada from 16 to four, with the Vancouver testing centre being the first to close. B.C.'s blood would then undergo necessary testing in Calgary.

CAMPAIGNERS HEU local chair Victor Elkims addresses a June Red Cross rally organized by the BCNU to press for a halt to plans to test B.C. blood in Alberta.

This will mean delayed test results, lower quality of products taken from donated blood, and a heightened danger of an interrupted blood supply to British Columbians. The workers have joined the support of hundreds of doctors, and have embarked on a petition campaign to build support for their moratorium. As well, contacts are being made with workers and unions affected by the Red Cross plans in other parts of Canada. Last year, the Red Cross was successful in getting itself removed from the Health Employers' Association of B.C. Meanwhile, a recent appeal of last year's Labour Relations Board decision removing the Red Cross from HRAC was successful, placing Red Cross back under the Master Collective Agreement, but the employer is fighting it.

Red Cross plans to regionalize blood testing will cost many jobs and place the security of B.C.'s blood supply in jeopardy, even if Red Cross removes itself under the Master Collective Agreement.

BASIC EDUCATION PROGRAM OFFERED

HEU is gearing up to bring a pilot education and skills training program for health workers to more workplaces in B.C.

The basic education program, initiated by HEU in cooperation with the Labour Adjustment Agency and health employers, is designed to provide basic literacy training at the workplace for health workers to help them adapt to changing work practices.

Last fall, the first basic education pilot project was held at Vancouver General Hospital, providing reading, writing, math and communications instruction for 20 HEU members. Other HEU members were also involved as tutors.

"After I joined the program I started to read the newspaper and magazines and look up new words," said one student. "I never knew that before. I think it's really good help."

Another pilot project is set for Surrey Memorial Hospital this fall, and funding is being sought to again offer courses in Vancouver Hospital. Choices are made during work time without loss of wages for participants.
Union trio gain valuable experience as first time political campaigners

HEU activists and staff volunteered their expertise to help get the NDP re-elected

by Stephen Howard

In election circles, there's nothing like working on the party leader's own riding campaign. Helping Glen Clark to hold his east side Vancouver seat was a job that fell to both Chan and Strudwick.

An LPN for 23 years, Chan, who worked at B.C. Women's Hospital, was taken off the job for a number of days to work on the Clark campaign and then volunteered further on her days off.

"I was a real end experience working with everyone," says Chan, who found her first campaign to be really positive, so much so that she'd get involved again.

At first I hesitated about working on the campaign, but I really like to help - that's my job, isn't it?" Clark was up against a tough Chinese Canadian candidate, so Chan's Cantonese language skills were put to good use. Her assignment was phone contact with the riding's Cantonese speaking voters to explain the voting procedure, listen to their concerns, and identify supporters for the premier.

"It was great, you have a chance to talk to voters," Chan says. "You get some positive feedback, people appreciate that you're phoning them." Strudwick was another first time campaigner for Clark. The nurses' aide and local chairman at Normandy Hospital in Vancouver, volunteered on her own time working the phone banks to help in the crucial task of identifying supporters and dealing with the concerns of undecided voters.

"I was quite excited," says Strudwick. "On the list I was by the B.C. Federation of Labour and its affiliates like HEU, and modelled on a similar organization in the U.S., B.C. Forum is active on issues affecting working people like fighting a two-tier health system and maintaining the Canada Pension Plan. It also provides a range of services like insurance that are specifically tailored for retirees. There's an annual membership fee of $15.

All retired HEU members can join B.C. Forum and its affiliated HEU activist Alberta Donald, a long-time member of the Provincial Executive.

"It can give us the power to help do a lot of things - it's a good idea," says Donald. Application forms are available from the Provincial Office.
CONTRACT, ELECTION ARE REMARKABLE ACHIEVEMENTS

by Fred Muzin

THE PAST TWO months have seen remarkable achievements for working people in B.C. HEU members have been at the forefront by reaching a six-year-two-year Master Agreement in the facilities sector and in being a critical part of the NDP re-election victory. Both events will have a fundamental impact on our future. No longer will members be able to claim that their efforts are in vain and that it doesn’t matter who one elects as government.

Health care employers made it very clear from the outset of negotiations that their agenda was totally political—they anticipated a Liberal electoral victory and therefore it was unnecessary to bargain. Their government would impose massive layoffs and concessions. They shamelessly refused to deal with issues such as service continuity and the prevention of injuries to health providers.

Our new bargaining association—with the BCGEU and the IODE—required flexibility and dialogue to reach common acceptable positions, remaining sensitive to the needs of all and respecting the different union cultures.

When negotiations encompassed the BCU and the HEA, the complexities increased. HEU’s provincial bargaining committee consisted of 13 members. The five unions combined meant over 400 bargaining units were involved, each committed to representing their membership to the best of their abilities. Communications focused on trying to keep everybody informed and not feeling left out of this new and difficult process.

Union represents different membership levels and shifts in one province-wide sectional agreement to cover all members working in acute, long-term and extended care facilities.

Glenn Clark and the NDP were solidly on our side before, during and after the May 28th election. Although some of our members were sceptical about trusting any politician, the HEU leadership, both provincially and locally dedicated the full effort of our resources to assisting the New Democrats.

The NDP success for an unprecedented second term is tremendous. By imposing Vince Ready’s recommendations as our new contract the government has made it clear that people matter more, both the public who require health care and the providers that must be afforded dignity and respect. This is being followed up by consultation before decisions are implemented so that front line workers have meaningful input in developing realistic, improvements to health care delivery.

In B.C. we continue to set an example for trade unionists elsewhere. It is possible to have a strong economy and anti-scalp legislation. Sectoral certification, employment security and no concessions are more than a dream. Working people have the right and the ability to govern.

We must continue to work with the government, and yes, pressure them when necessary to achieve one collective agreement to cover both community and facilities sector, elimination of wage controls, full utilization of LPNs, skill training and upgrading, and the preservation of a quality public Medicare system.

We should all be proud of our progress, but aware of the challenges that remain.

NOTEBOOK

GROCERY WORKERS HAVE REASON TO BE PROUD

by Stephen Howard

Hats off to thousands of Save-On-Frugal and Safeway workers who are now back on the job after a bitter confrontation with their concession-driven employers. While the results of the ratification votes show simmering discontent, the United Food and Commercial Workers members displayed real guts and determination as they resisted the efforts of two powerful employers here on cutting living standards for thousands of working people.

They stood firm when locked out two days after a close provincial election in which Gordon Campbell had promised to eliminate anti-scalp protection. And when the two employers spent millions of dollars into an unprecedented media advertising blitz to pressure for approval of the broad-scaled final offer, the grocery workers said a resounding no.

In the era of so-called bargaining leading up to the May 30 employer lockout, every time I shopped at the Westshore Superstore, Save-On-Fr 1 was inspired by the many young workers proudly wearing their UFCW pins on the job to support their union’s bargaining position. In an era when young people have broken Mjob prospects and unions face significant challenges to incorporate more younger workers into the movement, it was a measuring stick to see. In fact, with the employers’ demands for a two-tier wage structure that would pay new, younger workers significantly less, this was in many ways a dispute about young people’s employment issues.

With Sidney’s record of swallow to keep stores open during labour disputes in the U.S., it should come as no surprise that the NDP’s anti-scalp law leveled the playing field for the unions. This was the first real test of the new law in a big service sector dispute affecting the public. So what was truly surprising was that the public and the employer community weren’t demanding a repeal of the law, which may be another reassuring sign.

This is the last issue of the Guardian in which editor Geoff Meggs’ name appears in the masthead. With the re-election of the NDP, Meggs becomes Premier Christy’s director of communications.

Meggs came to HEU as communications director six years ago. One of his first projects was to totally revamp the Guardian, then a glossy magazine distributed solely through the workplace.

With direction from the Provincial Executive, the Guardian got a new look—a bright tabloid, professionally designed—and made the stories, facts and voices of HEU members a coverage priority. The result? A high percentage of avid readers, and now the Guardian is recognized as the best labour publication in Canada.

Meggs faces some big challenges moving to the political arena in Victoria. We wish him well.

LIFTING TEAM: RN Lorrie Downey, right, and LPN Jean Barkwell use one of the new mechanical lifts at the Cottonwoods long-term care facility.

LIFTING SMARTER, LIFTING SAFER

Caregivers at Kelowna General Hospitals Cottonwoods long-term care facility are lifting easier and safer thanks to a pilot lifting team project created through union-management cooperation.

While the novel experiment, which involved the purchase of 50 new mechanical lifts and adopting a team approach to care still ongoing, it has already provided results that other health employers should note of fewer injuries, better morale, and less tears out, happier workers.

“You feel better about coming to work,” says care aide Susan Holme. “When I get here in the morning, I don’t feel so overwhelmed.”

Another benefit of the lifting team is that it’s improved the quality of care. “We’re able to spend more time with residents,” says care aide Sandy Zadoos.

“Residents are happier, and we’re able to do things for them that normally we can’t do, like mbs.”

HEU local chairperson Maureen Shepherd says it took a lot of prodding from her and other activists to get the hospital to look at the horrid muscle strain carnage for caregivers lifting residents at Cottonwoods.

According to the hospital, since 1990 there were 57 lost time injuries related to lifting. A unit resident, which cost the hospital and the WCBS close to $80,000.

Shepherd went one step further in calculating another cost of unsafe work, adding up sick time loss that could potentially result.

Shepherd’s unsafe work environment.

In addition to the new lifts, the change to the team approach has been a crucial element of success. Prior to the pilot project care was RN-driven. Now RNs, LPNs and care aides start their day together as the report meeting, then work the floor caring for the unit’s 73 residents. And to make the team approach work, KGH adopted a policy of full replacement of staff so that no team works short.

The commitment to the team approach a clearly evident from the way RN Lorrie Downey and LPN Jean Barkwell walk the floor.

Shepherd says that some HEU members were sceptical about the changes when the experiment began. “It was short lived,” she says, “and now the staff on the other four Cottonwoods units want the same changes.”
Guatemalan women seek assistance

Guatemalan women's organizer Norma Herrera Miyangos had two reflections when she met HEU’s Political Action Committee in June: support for organizing programs in her country and pressure to end the death threats that harass her organization.

With Guatemala’s civil war on the wane and a democratic political structure emerging, Guatemalan women are working to take place in society, she told committee members, but they face the double burden of poverty and sexism.

The average hospital workers’ wage of about $4 a day covers only the basic necessities of food and shelter for a family of three, Miyangos said, and many workers must strike even to achieve that wage. Women nurses must bring their own drugs, bed clothes, food and even hypodermics. In one maternity hospital the newborns are wrapped in newspaper to save money.

“Our job is to work with women to remove their restrictions so they can organize,” said Miyangos, who was visiting Canada on behalf of the National Union of Women of Guatemala. “How are we going to use this new democratic space open to us?”

But the newly elected Congress passed new laws that would eliminate the right to strike or organize. Workers occupied Congress to demand implementation of their collective agreements, but the struggle is far from over.

Hanging over all the work is the continuing terror of the death squads, who have made numerous threats against Miyangos’ life.

HEU president Fred Muzin promised her the Guatemalan president would hear directly about HEU’s concerns for her safety and well-being.

SOLIDARITY Sheila Skitil, Fred Muzin and Lulumile Seota.

South African workers share health insights

A visit from two South African health union activists gave HEU leaders and members an opportunity to share insights into restructuring and privatization of health care in the two countries.

Sheila Skitil and Lulumile Seota are leaders in the 100,000-member National Education, Health and Allied Workers’ Union. They met with health workers in various parts of Canada thanks to the efforts of CUPE’s international solidarity program, Union Aid.

Skitil said the new post-apartheid South African government faces economic problems and pressure from multinational health companies just like Canada.

The NEHAWU pair toured the Health Labour Adjustment Agency and compared notes with the activities on HEU’s shared food services committee. They travelled to Victoria for a meeting with health minister Andrew Petter and trusted B.C. Women’s Hospital and the Vancouver long-term care facility.

GROCERY DISPUTE SETTLED

After a lengthy lockout and a short strike, more than 14,000 supermarket workers are back on the job at Save-On-Overwaite and Safeway stores across B.C.

New contracts for the members of the United Food and Commercial Workers are essentially a roll-over of existing agreements, which employers sought to get first with demands for massive wage and benefit rollbacks and then to implement a two-tier wage scale to pay new younger workers a lower wage.

The so-called two-tier final offer put forward by the highly profitable grocery chains was soundly rejected by the workers. Leading up to the vote, Save-On and Safeway ploughed millions into a media ad blitz and sent a video to each employee in a bid to influence the outcome of the vote.

Monocverts at Safeway were able to win additional job security and severance protection on the issue of prepackaged meat.

The UFCW members maintained discipline and solidarity in the face of the employer onslaught, which included Safeway’s top mogul threatening to close all of the U.S. monosource B.C. locations.

Surprisingly, they rallied significant public support against the two big supermarket chains. And support from other unions like HEU helped members maintain picket line morale.

In Kelowna, HEU members organized a June 28 picket line support rally complete with huge piles of nacho snacks.

Government-funded “sweatshop” exposed in New Brunswick

One day, her supervisor—who had allegedly mistreated her previously—intercepted a call from her baby’s mother, who explained that the child had become seriously ill and would have to be rushed to the hospital.

The supervisor took a message: telling the baby’s mother that the situation wasn’t serious enough to interrupt his employee. When he gave the woman the message, she fled to the hospital, where she discovered that her baby was suffering from a brain hemorrhage.

When she returned to work later that day to ask for time off, her supervisor exploded in front of her co-workers, saying that she couldn’t afford to take time off and that he would not allow it in any case.

That incident was the final humiliation for ICT employees. Within days, the young woman who was working part-time, gave notice. CUPE began organizing an information meeting about the ICT call centre.

Soon after the story broke, ICTS president flew up from Pennsylvania to deal with the situation. The supervisor was fired and the young mother was given two weeks of paid leave.

With the story going public, however, CUPE representative Bob Davison was confident that the working conditions experienced by ICT employees won’t be repeated elsewhere.
CLC meeting highlights different health care reality east of Rockies

UTS TO SERVICES, contract rollbacks, layoffs — those are the day-to-day realities for health care workers everywhere in Canada except B.C., participants in an HEU-sponsored forum on health care in Vancouver in May bailed the B.C. health care settlement proposed by industrial inquiry commissioner Vince Ready as a model contract.

HAILED Premier Glen Clark, shown with CLC president Bob White, received an enthusiastic convention welcome.

"It's great to be able to go to a union meeting and say this is a contract that protects health care services," HEU secretary-business manager Chris Allbutt told delegates, "and in the next few days you should go and help re-elect the New Democrats who helped us to achieve this agreement."

That kind of victory is what health workers across the country are striving for, CLC national president Judy Darcy said.

"The front line health care workers are the main

HEU DELEGATES at the national labour meeting included Terry Lubach, left, MSA; Iris Reamhobtren, Ridge Meadows, and Bob Webster, Royal Columbian.

defence of the five principles of medicine. "We're going to defend them and we're going to be in the employers' faces wherever they try to roll them back," he said.

Everywhere she goes in Canada, health workers are telling stories of service cuts, from Alberta and Manitoba, where emergency wards are limiting their hours, to Newfoundland, which has driven five hours to arrange a hospitalization.

Health workers may be holding the line in B.C., with a government committed to protecting services, but east of the Rockies, they are in a different world. After years of wage rollbacks and layoffs, health workers in the other nine provinces are getting angry.

At Okanagan General Hospital the employer has issued threat layoff notices after imposing years of restrictions on the workers, said CLC activist Colleen Swanson, a worker in the maintenance department.

"People are talking about strikes," she said. "If they are going to move against our collective agreement they will have a strike, that's the only way."

In Alberta, the goal of restructuring is not savings but the creation of a two-tier health care system, said Clancy Trakenko, of Calgary CLC Local 8.

"But people have finally learned because of the laundry workers' strike that they do have rights. The members made a decision that enough was enough. Even if it is illegal, you have to do what you know in your heart is right."

The mood among health care workers is equally angry in Edmonton and Saskatchewan, other delegates reported. Support for job action is building in Edmonton and Regina health care workers are mobilizing against 350 new layoffs.

The CLC agenda: jobs, equality and security

Canada's unions will be working for jobs, equality, security and democracy in their fight to roll back the right-wing agenda during the next two years.

Those four goals were the center-piece of strategies adopted by delegates to the Canadian Labour Congress' May convention in Vancouver.

After passing a modest does increase to support the CLC's expanding role, delegates agreed to a seven-part action plan including:

• setting up a national organizing institute to train activists in community and union organizing;

• a renewed effort to implement labour's jobs program;

• a campaign to halt the erosion of federal constitutional powers; and

• renewed efforts to link the labour movement with community activism.

There was a sense of real pragmatism to this year's convention, which developed little new policy in favour of consolidating the movement's finances and structure.

The battles of the past years prove that Canada's power elite — the banks, certain political parties and the bosses of transnational corporations — "will never voluntarily accept the fact the labour movement is fundamental to building a civil society," said CLC president Bob White.

"We must resist them, not only through dialogue and the sense of our arguments, but also with pickets, lines, with political actions and with building a strong social movement domestically and internationally."

Women's march presses for jobs and social justice

If anyone believes that the time for social movements has passed, Arthas Whittaker says they should have been standing on the steps of the Vancouver Art Gallery the morning of May 15 as thousands of women and men launched the Women's March Against Poverty.

For the next four weeks the women's caravan that Whittaker was part of travelled across the country to Ottawa, where thousands gathered — including HEU financial secretary Mary LaPlante and Provincial Executive member Melanie Ivenson — at a June 15 rally to celebrate the end of the march.

"While many of the 35 communities we visited had celebrations," Whittaker wrote in The Lang Haile, the newspaper of End Legislative Poverty, "the tone was one of anger as women expressed their dissatisfaction with the rise in unemployment and government attacks on social programs and health care.

"We found solidarity, support and resistance coming from people we met as we travelled between towns. On the highway, drivers read the slogan 'For jobs and justice' on our truck and honked with thumbs up.

"From Vancouver to Ottawa, I saw people whose lives are under attack. I know that for every woman who actually stood on Parliament Hill, there were thousands more behind her — the ones who signed our banner, marched in small towns, and sent postcards to Ottawa with the demand: for broad And roses, for jobs and justice."

The experience in Ottawa was truly inspiring, says HEU's LaPlante.

HU financial secretary Mary LaPlante, left, CUPE national secretary treasurer Geraldine McGuire and Provincial Executive member Melanie Iverson at the Women's March Against Poverty rally in Ottawa.

'The enthusiasm was incredible," she said.

"It showed how well unions and community groups can work together to make the demand of jobs and social justice a reality."

LaPlante also attended the general meeting of the National Action Committee on the Status of Women on HEU's behalf, where Joan Grant Cummings was elected to lead the national women's organization. She takes over from Vancouver's Sinners Thobani, who will be teaching at SFU.
A strong membership mandate combined with political action produces employment security and a government committed to protect health services.

WIN!

I T'S ONE DOWN, one to go for HEU as the union moves from a successful struggle to win a new master agreement to focus on a new contract for workers in the community sector. The long spring campaign for a renewed agreement to protect services and extend employment security ended June 8 with a government order-in-council imposing a new contract on disgruntled employers.

It was a textbook case on the importance of political action. The success of the tentative agreement, which was sent to the membership in the middle of a provincial election, hinged on who would form the new government.

The New Democrats supported employment security, the Liberals made elimination of the health accord a key campaign plank.

By June 8, both the notification votes and the provincial election were over.

Premier Glen Clark used his authority under Bill 21, legislation passed by the NDP in the brief session before the provincial election, to ensure that the recommendations of industrial inquiry commissioners Vince Ready formed the basis of new contracts for members of HEU, the BCGEU, the International Union of Operating Engineers, the B.C. Nurses’ Union and the Health Sciences Association.

All unions affected by Ready’s report endorsed his recommendations, but the Health Employers Association of B.C. rejected the proposed contract by a 60 per cent margin. Clark rejected employer calls for renewed negotiations and imposed the agreement, with a new emphasis on training and skills development;

• It provides the process to create a single collective agreement for all health care workers in acute and long-term care facilities in the province;

• It marks the first time that all B.C.’s major health unions — including the BCAEU, the Health Sciences Association, the B.C. Government and Service Employees’ Union, the International Union of Operating Engineers and HEU — negotiated joint issues in a single set of talks; and

• It provides for the protection of health care services as health reform continues.

"Our commitment is to protect health services and we believe this agreement can do that".

NEW DEALERS Health workers rallied March 31 in Vancouver top left, and in Prince George, top right, to press for a new Master Agreement. Olga Csatraczi, at right, casts her strike vote ballot at Vancouver hospital. The vote was a strong 81 per cent for strike action.
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"Our commitment is to protect health services and we believe this agreement can do that," said HEU secretary business manager Chris Allcott. "Clearly we have to work with employers to reach that goal."

In its first full meeting after the settlement, the union's Provincial Executive set a goal of achieving a new agreement for members in the community sector as soon as possible. Those talks also involve the BCGEU, the largest union in the community sector, and the United Food and Commercial Workers.

The contract in the facilities sector, ratified by an overwhelming margin in voting by HEU members which concluded May 30, marks a milestone for HEU for several reasons:

* It entrenches employment security in a new sector-wide agreement with a new emphasis on training and skills development;
* It provides the process to create a single collective agreement for all health care workers in acute and long-term care facilities in the province;
* It marks the first time that all B.C.'s major health unions — including the BCNU, the Health Sciences Association, the B.C. Government and Service Employees' Union, the International Union of Operating Engineers and HEU — negotiated joint issues in a single set of talks; and
* It provides for the protection of health care services as health reform continues.

"Our commitment is to protect health services and we believe this agreement can do that."

NEW DEALERS Health workers rallied March 31 in Vancouver (top left) and in Prince George, top right, to press for a new Master Agreement. Olga Castrucci, at right, casts her strike vote ballot at Vancouver hospital. The vote was a strong 81 per cent for strike action.
**HOW WE GOT A CONTRACT**

**FEB. 22** HEU, the B.C. Government and Service Employees' Union and the International Union of Operating Engineers, announcing all support workers in the facilities sector table their grievances for new contracts. The unions immediately seized the position to negotiate productive talks.

**MARCH 27** Health minister Andrew Peurratt talks health workers at St. Paul's Hospital (funding won't be cut for health services despite strike) to transfer payments. The move was from temporary to permanent. Support staff will not be drawn "for the benefit of those who provide health care services." Negotiations of all health unions begin in Richmond.

**MARCH 31** More than 1,200 health care workers rally in Vancouver and hundred more in Kamloops, Prince George, Prince Rupert and Williams Lake in support of HEU's bargaining stance. Bargaining sessions with the assistance of Vince Ready in mediator.

**APRIL 12** Facilities sector workers vote 61 per cent for strike action.

**APRIL 15** Premier Glen Clark calls on all parties to return to bargaining table. Unions agree to return and signed plans for job action.

**APRIL 23** Labour minister Providedly announces the appointment of Ready as industrial mediator, congress with the ability to make recommendations for a new agreement.

**APRIL 26** The NDP government introduces B.C. 21 giving the power to impose recommendations of an HCRC as a collective agreement, a new contract in health and laboration. The law is used immediately on and a Surrey school dispute.

**MAY 30** Facilities sector union, including HEU, ratify new agreements by 99 per cent.

**JUNE 7** Employers present 1.25 wage increase rejection of the Ready report.

**JUNE 8** NDP issue order-in-council implementing Ready report.

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**BARGAINERS HEU's negotiating committee deal with many twists and turns in talks.**

Despite the gates, the challenges continue for HEU, says Allnutt, because employers refused to ratify the new agreement by a substantial margin.

In the wake of the settlement, employers and unions gathered for a board meeting of the Health Labour Adjustment Agency to set its new course. The agency now has a much wider mandate to assist the parties in training and retraining to equip health workers.

But this constructive approach was not in evidence during most of the negotiations. Although last year's HEU Wage Policy Conference had set some clear goals for a new collective agreement - employment security, a fair wage increase, action on workload and improvements in long-term disability payments - employers were not anxious to get to the table.

Early in January, HEU released documents produced by the HEAHRB bargaining conference which showed some employers ready to "take a strike to win major concessions, including elimination of employment security."

With the NDP singling in the polls and the Liberal Party well ahead, employers were hoping for an election outcome to strengthen their hand.

The tone of the debate changed Jan. 17 when NDP leadership hopeful Glen Clark sat down with strike talk show host Rod Mac in a province-wide broadcast on CICN. When asked his views of the accord, Clark pledged to renew the agreement. "I don't want to see," he said, "nor do I support thousands of hospital workers being laid off and, in consequence, a reduction of services that it would require."

Meanwhile, HEU was working hard to build the unity necessary to achieve success for health workers. By the end of January, the HEU, BCGEU and the Operating Engineers were meeting regularly as a bargaining association to name the single position that would form the basis for a new contract for workers in the facilities sector.

In a special meeting with HEAHRB on Jan. 25, the unions urged the employers to commit to the goal of negotiating a new agreement before the existing one expired. Although sceptical, HEAHRB president Gary Macner agreed to begin bargaining as soon as possible. Talks began in earnest Feb. 22.

During the next two weeks, negotiations began between employers and the BCGEU and between employers and the unions representing paramedical health workers - HSA and BCGEU.

It was a promising start, but bargaining came quickly. Arguing that an entirely new agreement was necessary, built from the ground up, employers sought to negotiate every single clause.

**WORKING TOGETHER**

**Solidarity between HEU, BCGEU, and the Operating Engineers was key to winning a new deal.**

By this time, health workers in the province were underlining their determination to win a new deal.

Employment security provisions of the old agreement expired March 30, opening the door to possible layoff of several hundred health workers still awaiting placement by the Health Labour Adjustment Agency.

Workers responded with rallies and marches in Vancouver, Kamloops, Penticton, Prince George, Prince Rupert and Williams Lake.

In Vancouver, about 1,000 workers marched through the wind and rain to rally at Vancouver Health Sciences Centre in an unprecedented show of health union unity.

Marching behind a banner reading Stand Up For Health Care, leaders of all the health unions in the province underlined their commitment to win a fair contract.

The next day, workers at Children's Hospital held a sit-in to protest the threatened layoff of an HEU member.

Now the spotlight turns to the employers, says HEU's bargaining spokesperson Zorica Bosnicic, and HIRAC will be under pressure to use a short break in negotiations to test the proposals and return with realistic responses when bargaining resumes July 21.

The three union committees will continue to meet to prepare for the next round of talks and develop ways to pressure employers to reach a settlement.

"There's been a real logjam at the table," says Bosnicic, "and employers have yet to show that they're serious about finding common ground on a new agreement. Many of the workers in the community sector have no pension plans; no long-term disability protection, and only minimum benefits," she says. "Employers have been behaving like community sector workers should have no rights on key issues like health.

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**COMMUNITY TABLE**

**Spotlight in community talks turns to employers**

HEU and BCGEU and UPW have completed presenting union proposals for a new community sector collective agreement in negotiations with the Health Employers Association of B.C. as the series of bargaining sessions wrapped up June 27.
The negotiations which began that weekend in Richmond drew together five unions representing more than 80,000 workers. Across the table, HEU/BCGEU's bargaining teams were representing several hundred employers. Negotiations settled into a hard slog of meetings that continued almost without interruption for the next month.

AsReady wrote later, the parties retreated deadlocked and far apart.

...do not have the benefit of any constructive dialogue having taken place between the parties. The issues which separate the parties are among the most difficult, complex and challenging I have confronted in mediating numerous difficult disputes over the past 20 years."

The talks continued against a backdrop of increasing political tension in the province. As HEU, BCGEU and the UOE began a province-wide strike vioce April 1, the new premier was preparing an announcement on health funding that would change the direction of the negotiations.

T
HE FIRST signal had come March 27, when health minister Andrew Petter told an audience of health workers at St. Paul's Hospital in Vancouver, that his government would not cut funding to health services in spite of federal cuts to transfer payments.

Petter vowed to "marshal the resources and maintain the system we have built by working in partnership with health care workers."

There would be sacrifices necessary, Petter said, but "we are not going to do it on the backs of those who provide health care services."

British Columbians supported that stand as a poll commissioned by HEU confirmed. Taken just a few days after Clark's April 9 announcement that hospital funding would rise 2.5 per cent, the province-wide poll showed that 53 per cent of those surveyed expected a quick settlement now that funding was in place.

Even more significant was agreement by 66 per cent of those surveyed that the number of health care workers could not be reduced without affecting the level of service.

This was precisely the justification for employment security which the health unions had been hammering at since January. But health employers still refused to budge.

With an 80 per cent strike mandate under their belts, the HEU, BCGEU and UOE served strike notices April 13, putting them in a legal position to take job action April 18. Clark responded quickly with a direct appeal to the parties to return to the bargaining table and postpone job action. Both sides agreed.

A week later, the government stepped in even more forcefully.

On April 23, labour minister Penney Piddery made Ready an industrial inquiry commissioner with authority to hold hearings and to write recommendations for resolution of the dispute. Ready's hearings were barely under way when the government introduced Bill 21, giving it power to impose his recommendations as the new agreement. (The law was used immediately to impose recom-

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**NDP's health initiatives**

Health care was a major issue during the provincial election campaign, and Premier Glen Clark made a number of important promises prior to the May 28 election.

Here are the promises that have a key impact on HEU members:

1. **Hospitals will get a 2.5 per cent funding increase this year.** The pre-election announcement was backed up in the budget brought down by finance minister Andrew Petter in June.

2. **A new health care scholarship will help health care workers upgrade their skills.** Up to 300 workers a year will be eligible for scholarships of up to $3,500 a year when used in a B.C. college or university.

3. **The government and B.C.'s doctors agreed to cap the Medical Services Commission budget this year at the same spending level as last year.**

4. **During his brief stint as health minister, Andrew Petter moved to protect B.C.'s health care from provisions of the North American Free Trade Agreement, which could have forced privatization and contracting out into health services.**

5. **Clark promised a Medical Planner and a Patient Bill of Rights which would guarantee necessary health care in a non-profit publicly run system and prohibit two-tier health care in B.C.** The charter will contain special protections for British Columbians living in the North and remote areas.

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**'Leaders of all the health unions in the province underlined their commitment to win a fair contract'**

- simulations to resolve a dispute between the Surrey school board and CUPE.

- With the election call April 30, the outcome of the campaign effectively went to the entire electorate.

- The Ready recommendations, handed down May 13, laid the basis for a new agreement. The election of the Clark government on May 28 made it a reality.

- The contract was imposed June 8. It was one of the shortest bargaining sessions in recent HEU history—- and one of the strangest.
MASTER COLLECTIVE AGREEMENT

Light at end of LTD tunnel

There is some light at the end of the long tunnel of poverty and pain suffered by HEU members as a result of HEUs new Master Collective Agreement. HEUs submissions to industrial inquiry commissioner Vince Ready included a damming indictment of HEARCH's handling of its Benefits Trust, which returned $30 million to employers between 1991 and 1995 while freezing benefits to claimants. But a claimant injured in 1985, the union pointed out, who remains on the plan today, will have a before-tax income only $600 more than she would receive on welfare — and welfare would cover her $1,200 a year extended health coverage.

HEU research indicated that the fund's surplus for 1995 alone amounted to some $12.5 million. In addition, employers gave themselves a three-month "holiday" on premium contributions and reduced the rate at which they would make future contributions to the plan.

The Ready recommendations mean workers in the long-term care sector, formerly under the old CCERA and Private agreements, will finally enjoy the same health and welfare benefits as other workers in their sector. But Ready also ordered the formation of a Health and Welfare Benefits Committee, made up of labour and management representatives, to conduct a complete review of existing plans and ways to improve them.

In addition, Ready ordered a one-time lump sum payment of $1.5 million be paid to Health and Welfare Trust claimants who have been receiving benefits for at least eight years. He also directed government to provide $2 million more to the trust to further enhance LTD payments starting in January 1996.

HEU laid 1,744 members on LTD in 1994, equiva lent to 7.7 pc of the membership. Benefits had not been improved since the trust was formed in 1980. The precise size and timing of the payments remains to be determined by the Health and Welfare Benefits Committee. The committee will be chaired by mediator Colin Taylor, who is to make a non-binding report by Jan. 1, 1998.

Begin the Healing tells our stories

HEU TURNED to comedy, drama and music in a special theatre production called Begin the Healing to provide a forum for the public to better understand the union's bargaining proposals to preserve health care services.

The production, written and performed by professional actors, is based on the real-life workplace stories of HEU members. More than 20 HEU members helped out in a special rehearsal held early in February.

"Begin the Healing is HEUs second theatre production, and follows on the heels of the union's 1991 hit Heart of Health Care Revue.

With more than 1,300 people taking in the 14 performances, held in various centres across the province between March 6 to 29, the show was clearly a hit.

"It was so real, I was holding back the tears," said Lucile Ann Smallbrough of the MSA local in Abbotsford. Kelowna General Hospital's Debbie White gave the show two thumbs up. "I loved the music, the puppets and the part about hiring another vice-president."

A number of performances actually proved too popular, as organizers scrambled to put out more chairs as the play opened.

Another feature of this production was the turnout of politicians — particularly from the NDP, as numerous MLCs and NDP candidates attended the performances. And through cooperation with Premier Clark's office, HEU brought Begin the Healing right into the Legislature for a special performance for key government decision makers.

Video copies of Begin the Healing can be borrowed from the HEU communications department.

Royal City symbolizes first contract hurdles

HEUs Royal City branch members are symbol of the hurdles to first collective agreement faced by members of new locals.

After three years of bargaining — in which their boss set a three standard- good, down and dirty — employers and locals' Labour Relations Board ruling forced the employers to implement a contract achieved through binding arbitration.

But now, the employer has sought a judicial review of the LRB decision, delaying justice for the New Westminster workers for weeks more.

The LRB is pressing forward on a number of fronts to win first contracts with new private employers, but negotiations made difficult by the ever-changing world of "sage guidelines" set by Victoria. And progress in talks with first Nations health employers is slow due to the need to share information and understand different cultural approaches to achieving agreements.

Some new locals have come under the facility master agreements, while other first locals in the social services sector have been able to negotiate extensions to agreements until 1998.

On a positive note, the Wilson Place long-term care facility found its tired Outpatient gun Roger Moffett roving pin positive mood relations after member of negotiators made extremely difficult

GREAT RESULT HEUs Chris Allnut, centre, Daryl Barnett from the BCGEU, right and the Operating Engineers' Lionel Anker announced an 81 per cent strike vote mandate April 12. Below Premier Clark talks health at an April 4 funding announcement.
Make positive continuing care changes, Vancouver board urged

The Vancouver Health Board is taking a serious look at changing the way it delivers its $150 million continuing care services, and HEU says the review is a good opportunity for the board to make positive changes in how the continuing care system operates.

In a brief submitted in late May to the VRIB, HEU supports the broad focus of the review to come up with ways to more closely integrate services and empower front line care providers. The union says that progressive changes made in the Vancouver region would set a precedent for the rest of the province.

Recognizing that health care restructuring and the downsizing of the acute care system have put extreme pressure on continuing care, HEU says that these changes "have actually worked against the long term goals of cost effective and progressive health care restructuring."

The key element to the union’s submission is a pitch for linking changes in continuing care with similar changes in the primary care system, for a "fundamentally different approach," to delivering health care services.

The union argues that changing the fee for service system of primary care, with doctors as powerful "gatekeepers" is necessary to improve the delivery of continuing care services.

There are numerous examples, says the union, that early monitoring and proper support services for elderly people minimizes the need for more intensive forms of crisis intervention through acute care admissions, prevents premature deaths, and reduced health care costs.

One widely-studied example of the positive outcomes created by an integration of primary and continuing and community services using a wide range of health care providers is the On Lok Seniors Health Services in San Francisco.

On Lok is a non-profit organization which operates on a population-based funding formula, not fee for service. It provides a full range of community services like supported housing, day programs, and home care and respite care.

While no On Lok example exists in Canada, HEU points to the community health centre model in Saskatoon, and the strong record of providing high quality but less expensive care. The CHCs provide a wide range of services for communities, uses a broader range of care providers, focus on prevention and reduce acute care admissions.

The union submitted an eight-point plan to the health board as a progressive first step for the Vancouver Regional Health Board to make to improve continuing care services by changing the primary care system.

• For a copy of HEU’s submission, contact the communications and research departments at Provincial Office.

The world according to Joy

Golden dietary aide Lorna Joy draws working people with a saucy cartoon style to make people laugh

by Dan Gawthrop

EVERYONE knows that hospitals can be stressful workplaces. For Lorna Joy, however, they’re also an inspiring source of good humour.

For the past three years, the dietary side from Golden has gradually become her hospital’s resident cartoonist.

"Sometimes, when I've had a really bad day at work, I go home and wonder: 'What could possibly be funny about this situation?'" Joy says.

"Then something occurs to me and I think it's hilarious, so I draw something and bring it back to work."

If her colleagues’ response is any indication, Joy has definitely hit a nerve. Several of her panels have graced the pages of the Guardian, and her "Stressed Out" cartoon - a screaming woman with mouth wide open, results showing, her eyes like sockets and her hair standing on end - has been adopted as a sticker for workflow campaigns.

In addition to her audience among health care workers, Joy has done paid work for the local Golden Star newspaper. "I did an editorial cartoon for about six months, but then they didn't run it anymore," she says. "They never told me why they stopped it."

Perhaps it had something to do with politics. Lorna's saucy blend of arrest, visual and blunt language reflects the every day experiences of working people. As such, it often has its dark side.

"A lot of people don't see things the way I do," she says, without apology.

But even she has her limits: one series of cartoons she calls the "brownbagers" - those that are just too unhappily personal or politically loaded to share with a mass audience. "I don't want to hurt people's feelings, or get into too much trouble," she laughs, noting that a few of these forbidden drawings poke fun at management.

For Joy, cartoons are a natural result of her tendency to doodle. "I am an absolute fanatic about being creative. I can hardly even go one day without drawing something or doing a craft. I guess I have to do serious stuff and I wanted to do something funny."

Originally from small town Alberta, Lorna returns to Red Deer every summer to visit her mother and take a new art class. Among her most recent classes were drawing with the right side of the brain, working with stained glass and design, and silver jewellery.

Married with an eight-year-old daughter, the 37-year-old Lorna has worked at Golden for 15 years. In addition to her full-time work and cartooning, she enjoys sewing and is taking piano lessons.

• Golden Star"
HEU's Erda Walsh wins election as MLA

Campaign an “eye-opening” experience for HEU staffer Gail Paquette who came second in her Richmond riding

by Chris Gauthier

The result of the May 28 provincial election was that a long-time HEU member is now sitting in the legislature. Cranbrook health care worker Erda Walsh emerged victorious in the election in Kootenay, where she ran for the NDP.

Gail Paquette, a clerical worker who is employed in the HEU provincial office, ran unsuccessfully for the NDP in Richmond-Steveston.

Walsh, who has 20 years experience as a clerical and accounting worker, said she has a number of ideas about how health care could be improved. Walsh also works as an ambulance paramedic, and is also a member of the ambulance paramedics local of CUPE.

"I've seen a lot of people come up here from the United States to see the incredibly high health care costs there. We must make sure that we never have an American-style system here in Canada," Walsh said.

"It's exciting working on a team with People Cre Clark. We want to make B.C. a better place to live in and work in," she said.

She will be able to put her knowledge to work as MLA, since she has been named as one of four MLAs who will review B.C.'s health regionalization program at the request of health minister Joy MacPhail. Mike Farnworth, the MLA for New Westminster, will chair the assessment team, which will also include Bill Goodacre (Bulkley Valley-Skeena) and Gorme Bowbrick (New Westminster), who was a CUPE member at the Community Legal Services Society before being elected on May 28.

Walsh was in her third year on Cranbrook City Council when the provincial election was called.

She has been busy since the election working on problems brought to the attention of council in the Valley.

"The campaign was a lot of hard work, door knocking, attending meetings, and talking to people. I got elected thanks to the hard work everyone put in, and I would like to give my most profound thanks to people in HEU and CUPE who helped my campaign," Paquette said. She would recommend being a candidate to anyone. "It was an eye-opening experience, especially for a woman, being a candidate is basically a traditional male job. Women running as candidates are treated like men have been, and people listen to what you say, which is novel. People often said to me, "I like the way you talk. I've been talking the same way all my life, but this is the first time people have said that to me," Paquette said.

Before joining HEU staff, Paquette was a member of the HEU Princeton local and also worked in various other fields.
Laid off nurses: don't blame Prince George LPNs
by Chris Trudell

There are difficult economic times and when jobs are on the line it is easy to look for a scapegoat to blame the problems on. I realize that it is [Princess George Regional Hospital] BCNU reps job to defend registered nurses, but maligning licensed practical nurses will not produce success.

So the RNs who will be laying their positions, you truly have my empathy I have received a displacement notice four times in 10 years. I felt used and abused. It is my belief we should all be allowed to be the best we can be and work to our full potential, RN and LPN alike.

How did we get in this situation? Some years ago RNASC convinced the management of hospitals that going to a primary care model of nursing would guarantee an excellent level of care.

Up to this point RNs and LPNs worked side by side and supported each other in giving excellent nursing care. The RNs focus was on administrative duties, making rounds with the doctors, and giving medications. The LPN did bedside nursing care, like bathing, taking vital signs and doing some treatments, and kept the RN aware of the changing condition of the patients, and contributed to the nursing care plans.

The disappointment began when RNs complained that they were spending too much time doing administrative duties and giving medications, and had no time to spend one-on-one with their patients doing some of the basic care, like the LPN.

The current philosophy was taking shape and changes had to be made to justify the existence of the philosophy. The RN wanted to be in total control of all that was to be done for the patient.

Many studies have been done comparing the two models of patient care, and primary care was found to be more expensive, and didn't deliver a higher level of health care for the public.

When the BCNU says that our level of education is not as extensive as that of the RN, it is correct. What it neglects to mention is that the LPNs that remain in the system have many valuable years of experience. Our training does allow LPNs to give oral medications. PGRN spent thousands of dollars two years ago to have LPNs certified for giving oral medications in the rehab unit, and then neglected to change the policy and allow them to do so.

LPNs do catheterizations on all patients. LPNs may remove sutures and staples in an orthopaedic clinic, but may not do so on any ward due to policy. LPNs did patient assessments for many years, when that discovery was made the policy changed and only RNs were to do them.

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EVERYWHERE we turn the words "special interest group" are being used to describe people in the daily newspapers, on the television or radio news, or even in our every day daily coffee-room conversations with friends and co-workers. Why is this a phase of the times and what does it mean? Although a short article cannot do justice to the language and how words are more and more being used to mean the opposite of what they appear to mean, the following few paragraphs attempt to discuss what "special interest" means and how it impacts the work of our union and the labour movement.

Coming, the phase "special interest group" has proven to be a brilliant strategy used first by the right-wing Christian movement in the United States and more recently by Reform party politicians in Canada. Generally it is used now whenever someone wants to marginalize or exclude a specific group, particularly any group seeking to change the status quo.

The strategy is brilliant in that virtually anyone will agree that individuals shouldn't have special rights, regardless of their position. Using the term "special rights" puts groups seeking equality on the defensive.

It has been effective in stopping affirmative action programs in some U.S. states and now, in Ontario. It becomes a rallying cry for status quo, a banner against downsizing.

What equality seeking groups agree. The real questions are: What is special about having the right to rent an apartment; what is special about being a woman or a person of colour or a person with a disability; what is special about being able to access the services available in a community without experiencing slurs or avoidance because of your sexual orientation?

It is no accident these are the times when the queer activist organizations are forming in Canada and in British Columbia and that the membership is getting younger. Many college and university campus newspapers receive funding from organized, right-wing American coalitions.

The purpose is to spread a message among youth about exclusion, a message that someone else is getting what you can't. A message that pushes exclusion of immigrants, exclusion of anyone who is "special" and could demand "special rights." It is no accident this campaign against our differences comes at a time when one corporation, largely owned by one man, is attempting to control 70 per cent of the print media outlets in Canada, the outlets that provide us with daily information. No accident.

"What is special about having fair and real competition for a promotion or leadership position, regardless of your skin colour or ancestry?"

this comes in the first 10 years of "free trade," a time when working people are fighting concessions in standard of living and struggling to keep our communities safe and healthy places to live.

Under such stress, what better time to divide people based on race, religion, ability, ancestry, or sexual orientation? These campaigns of division and in some cases, of hate, are succeeding. They result in increased violence in our streets, and in our schools, and in our communities.

Already our doors are barred, our lights are on timers, and more and more we prefer the shopping channel to our local grocer.

Yet every time we take a union action to fight against the requirements of workers, we fight this divisiveness. Each time we choose to be inclusive in our actions and to challenge ourselves to be open to another's opinion, to another's life experience, we gain in our fight against domination by an elite narrow group.

When we choose to be silent, or when we accept the language of the right we let the campaigns that divide us move ahead.

The union gives us a chance to speak to each other, to speak in strength to employers and government. These are the times for our voice to be both strong and united.

VOICES

Trust doctors' medical advice but question their politics

by Dr. Gabor Mate

The British Columbia Medical Association may claim the dubious honour of having made one of the clumsiest boasts ever floated by any professional group in this province. In its runup to the May provincial election, the BCMA published a pamphlet entitled Fairness First. Listing a number of credible health initiatives by the medical profession, the brochure also proclaims that "doctors were one of the first professions to publicly call for the use of condoms against the spread of the Acquired Immune Deficiency Syndrome, long before government or politicians ..."

If this silliness catches on, we may soon see advertisements announcing that "engineers were one of the first professions to erect bridges," that "hockey players were among the first to score goals in the NHL," and so forth.

Why this pamphlet and why the large billboards asserting that doctors consider "patients' rights first."

The conscious or unconscious defensiveness of the BCMA propagates effects flows from the tenacious task the association has doggedly performed for nearly two decades now of trying to sell to the public its básically-dugigned agenda of privatization.

The inequities and moral horrors of a U.S.-style health system in which profits dominate are too close to us not to have sensitized the Canadian population to the dangers of privatization. No matter how seemingly innocuously presented.

In its current election campaign brochure entitled Health Issues for British Columbians, the privilege of the well-off to pay for preferential medical treatment is privately referred to as "patients' rights."

"The privilege of the well-off to pay for preferential medical treatment privately is referred to as "patients' rights" - a term one thinks would be better reserved for such genuine and necessary rights as access to one's health documents, the right to be treated with respect, the right to receive the best available health care without any fear of discrimination based on income, etc.

One could be amused, if the situation were not so ominous. In fact, the agenda of privatization is in ascendence. The intentions and promises of politicians matter much less than the economic and political framework in which real decisions are made, post-election. Under all governments across Canada services are being pared, health care workers are laid off and anxiety and demoralization are visibly growing in our health institutions.

The U.S. health-service mega-corporations are not unmindful of the potential for expansion northward, given the pallid guarantees of the free-trade agreement.

Medicare will not end with a bang but with a series of barely audible whispers, gradually blown into obscurity, another sacrifice to deficit reduction and the global economy.

The privatization advocates may well achieve their goal, to their chagrin as they will learn. As U.S. physicians have more and more reason to lament, complaints of越来越好 interactions with health care in Canada pale into non-existence when compared with the actual and corporate control exercised in the U.S. over how doctors practice and where patients may seek help - those who can even afford it.

The best course of action when faced with yet another BCMA message telling people to "call or fax" the government, urging us "put patients first." Take a huge grain of salt and do not call anyone in the morning.

• Match article first appeared in the Vancouver Sun.

by Chris Allmunt

"SPECIAL INTEREST" LABEL HELPS TO MAINTAIN BARRIERS

The right-wing's phrase used to dismiss people seeking equality, not special rights
Big brother is watching, from the ceiling

Secret surveillance camera spying on workers found above boss’ office at New Westminster facility

HEU MEMBERS at St. Mary’s Hospital in New Westminster are up in arms after a hidden video surveillance camera was found in the ceiling of the housekeeping director’s office May 15.

And with BCGEU and HSA members at the facility they’re pressing the hospital’s president to promise the secret surveillance camera will be removed and that the manager involved, Dave Neundfeld, be fired along with two other administrators who the unions believe are also implicated.

The local tri-union committee has presented facility’s president Bernie Blidouess with a 200-plus signature petition from workers backing up their demands. They’ve also filed a grievance to end the on-the-job spying that’s caused staff morale to take a nosedive.

“This is the last straw as a very dysfunctional facility,” says HEU local chairperson Lynn Halstead about the story that’s been front page news in the local newspaper. And she says it’s clear now, what the housekeeping director was up to when he invited staff in for friendly chat.

However, Blidouess has been tortoise-slow in responding to the unions’ concerns, taking 33 days to agree to a request for a meeting on the controversy, which finally took place June 26.

At the meeting, Blidouess admitted he’d authorized the camera’s purchase and its installation in the housekeeping office a month before it was discovered by an HEU electrician doing routine maintenance.

“There is only one such camera,” said Blidouess in a warped-logic letter to staff, "therefore, no one is being secretly monitored.”

He claims he authorized the surveillance to deal with a vandalism problem at the facility, citing schedules that had disappeared for two days, and intended damage to the hospital’s backup generator last year. (The generator isn’t located anywhere near the housekeeping office.)

More important, says Halstead, Blidouess wouldn’t rule out that the camera—which was quickly removed by an administrator immediately after its discovery—may still be deployed to spy on health workers in other parts of the hospital.

Halstead and other tri-union leaders are angry that Blidouess won’t take action. To protect the hospital’s reputation, they wanted Blidouess to do something for almost two weeks before going public with their concerns.

“The real issue is that you don’t trust your employees like this,” HSA steward tarde Parker told the local paper. “I’m so pissed off.”

Halstead says HEU members aren’t opposed to tighter security at the facility—security cameras stationed in general areas of the hospital with ‘video monitoring’ signs clearly posted. “But people,” says Halstead, “are being called in to that closet for a friendly chat, a how-are-you and spill your guts.”

She says stepped up measures could have helped prevent the 1995 attack on an HEU member who was knocked unconscious by an intruder.

In dismissing public outcry, boss Blidouess blamed HEU for being troubleshooters. “This union and shop steward have been problematic,” he told the media. “They seem to be working on their own agenda.”

It’s the second episode of electronic employee monitoring involving housekeeping director Neundfeld since he arrived at the hospital in December of last year. At a meeting of housekeeping staff in February, attended by local vice-chair Casey O’Hearn to discuss the budget, something went ‘click,’ under a pile of Neundfeld’s papers. It was a tape recorder Neundfeld was using to keep tabs on staff.

“Next thing we knew,” said O’Hearn, “he had a video camera in his office.”
IN MEMORIAM

Red Cross member Doris Ndana waged 20-year fight for Canadian citizenship

Red Cross worker Doris Ndana, a South African immigrant who fought the Canadian bureaucracy for more than two decades before finally being granted citizenship last year, died in Vancouver on Jan. 13 after a long private battle with cancer. This moving story of her struggle, beginning with her abandonment as a child in the bushlands of Zululand, was told by Red Cross steward Chris Bell.

Doris Ndana never did find out when she was born, but it was probably some time around 1935. A member of the Buthelethi tribe, Doris lost her parents to tribal fighting when she was still a baby and her grandmother was killed shortly afterward. The only memory she would keep of this woman was the nickname her grandmother whispered in her ear: Bescoulina — a clicking sound that rolled softly off the tongue.

For a short time, a woman who had known her grandmother looked after Doris. But the young orphan was not allowed to stay in the hut with the other children; instead, Doris slept with the castle in the animal pen. At seven or eight years of age, she was an outcast.

For the rest of her life, she would carry the scars of beatings, stabblings, and other forms of cruelty the villagers subjected her to.

On one occasion they buried her to the deep mud of a nearby river bank, roping the hippo would crash her to death. But Doris was able to dig herself out and hide in some nearby caves. There she was found by missionaries who took her to a church hospital. With no family and no name, Doris was Doris. She was taken away from her native village to be married for a dowry in Pretoria. But it never happened.

In 1973 she came to Canada on a student visa. Unable to prove when and where she was born, she soon began a struggle with the Canadian immigration bureaucracy; that would last for the next 22 years. With no formal identification, she could not travel outside of Canada for fear she would not be allowed back in, and she was barred from certain jobs because of her status.

Despite these limitations, Doris never once applied for OIC, or welfare and managed to obtain her Bachelors and Master’s degrees from Simon Fraser University. For five years she worked as an office assistant for the Red Cross, travelling through B.C. collecting blood, making friends wherever she went.

Following media publicity in early 1995, Canada’s Citizenship Court finally granted Doris the citizenship that had eluded her for so long. Friends had written dozens of letters on her behalf, describing her story.

A group of women in Prince George even offered to adopt her: “I give great credit to the Canadians who finally let me be a human being again, and be able to put things together,” an overcome Doris said, at the May 10, 1995 ceremony. “I want to pick up... maybe finish my PhD, because now I can travel to South Africa and do all my research... I can get a job of my choice, a job I like.”

With her citizenship came the pilot license she had dreamed of having. She hoped to fly relief supplies to assist her people in South Africa; perhaps even some of those who had once attacked her as an unwanted outcast. It would have been a poignant homecoming for Doris, but cancer finally caught up with her after Christmas.

Doris died alone, silently with her problems, and had told no one about the illness that had been burning through her body. When she entered a local hospital on Jan. 13, those who loved her were surprised and shocked. Two days later, those shocks turned to grief when Doris died. She would have been about 40.

On March 10, her ashes were scattered over the Pacific Ocean from a single-engine airplane.

Those wishing to remember Doris Ndana’s life can donate to the Hector Peterson Scholarship Fund, to which Doris contributed to support a school in South Africa. Donations can be made at any branch of Van City Credit Union, or through Chris Bell in Victoria (695-4856) or Shelley Clark in the Lower Mainland (687-8686).

This article was written by members of Red Cross local.

And the Foot-In-Mouth Award goes to...

Less than two weeks after praising the continuing success of a steel mill in the English town of Crewe that had actually closed down 15 years before, Finance Minister Kenneth Clarke referred to the same town as a major centre for the manufacture of disposable diapers, unaware that the diaper factory had also been closed for several years.

What a personal touch!

Thanks to the wonders of high tech, the human resources department of Canadian Tire Corporation now has a far more cost-effective and less time-consuming method of hiring its employees: intelligent resume-scanning software that eliminates thousands of applicants based on the language contained in their resumes.

Company officials can now scan resumes into a database where the software searches for keywords and terms that identify qualified candidates for available jobs.

The software knows how to weed out the overqualified, undereducated, unskilled, or anyone guilty of using vague language or "padding" their resume.

GAP zapped

A recent campaign in which CPUE participated to get the GAP, the well-known blue jean manufacturer, to clean up its act in supplier factories in Central America has worked. The clothing giant has agreed to the Monitor's factory in El Salvador to review 350 workers fired last June for starting a union or face losing GAP's business.

It will also require suppliers to allow local human rights officials to monitor the plant. This is the first time any company has agreed to hire third-party monitoring.

This agreement is a major victory for the campaign initiated in Canada by the Maquila Solidarity Network.

Airports can make wonderful homes

Iranian Mehran "Alfred" Nasseri, 49, arrived at Charles de Gaulle Airport in Paris in 1988 for a two-day stay but without a passport or visa, which he said had been confiscated when he took part in an anti-Shiah demonstration in 1975.

Lacking documents, Nasseri was allowed neither to enter nor leave France. So he took up residence in the airport's lounges, passing the time writing in his diaries and studying, he said, "the history of economics analysis" and hoped for a diplomatic breakthrough.

According to a Los Angeles Times article in May 1988 still there, his diary is now 6,000 pages long.

Now that's accountability

Chesapeake, Va., inmate Robert Lee Brock freedom $5 million lawsuit against Robert Lee Brock — accusing him of violating his own religious beliefs and his own civil rights by getting himself drunk and engaging in the various crimes that resulted in his imprisonment.

He wrote, "I want to pay myself $5 million [for violating my rights] but ask the state to pay me on a model I can't work and am a ward of the state."
HEU People

"Treasured" rehab assistant gets a well deserved rest
George Road Hospital's Physio Lee didn't want much time getting into the swing of retirement which started in late February. She and her husband Les have embarked on a lengthy trip to England, Scotland and Cyprus. “Treasured” by George Road hospital staff and patients for her kind, thoughtful and caring manner, Lee says she’ll continue operating her Victoria bed and breakfast.

MELINA HAMILTON
Activist will be missed at Peace River Haven
Long-term care aide Melina Hamilton will be sorely missed at Peace River Haven, a Dawson Creek long-term care facility, where her active work as a steward and OH&S officer was appreciated by many. Following her January retirement party – where she was presented with a fame plan for her new home and a greating card made from a grievance form – Melina plans to travel and explore Canada. She still enjoys floor hockey "and anything except checkers."

Crofton Manor's Sun Mang Pan, centre behind cake, is joined by his union sisters to celebrate his retirement after 20 years on the job.

Dogwood's Cheryl Young on LTD
A tireless worker for her members, former Dogwood Lodge chairperson Cheryl Young vows she’ll remain an active member of the union after the long-time activity aide went on long-term disability in March. Young, who led the Dogwood local for 18 years, says it is an honour to be a union member. She is vice-chair and on the local CHGS committee.

Alice Drain bids au revoir
Central City Lodge dietary aide Alice Drain retired in March after 13 years at the downtown Vancouver facility. “It’s been nice to be a member of HEU, the best,” Drain writes. “Keep up the good work you’re doing.” Now that she’s retired, Drain plans to enjoy life as much as possible, and to move back home to Quebec to be with family and friends.

Night shelter liked debating with the boss
McDonald Lodge care aide Annette Morrissette enjoyed night shift “and the many debates dealing with management” in her capacity as shop steward and chairperson. She plans to keep her job in security at the PNE.

Retiring cook plans wedding
Since retiring last December in Nelson, Halkyn Avenue care cook Marj Lander has kept busy planning her spring wedding and future travel arrangements while building a new home in Salmo.

Retirees keep in touch
For Port Hardy Hospital's June Lyons, the first year of retirement has been a lot like life on the job: full of service for others. Since leaving her housekeeping position on June 29, 1995, this one-time local chair has immersed herself in church fundraisers while nursing her elderly mother, doing gardening for the church, and cheerfully cleaning up road-side litter to keep Port Hardy beautiful.

Twenty-year dietary aide Sun Mang Pan was one of the first employees of Crofton Manor and fully supported the bargaining committee during certification in 1978. He continued to support the union until his retirement in May of last year, and has kept in touch with HEU friends since then.

Fellow Crofton Manor member Ajit Lalli spent more than a year in India with her husband, after finishing 17 years in the housekeeping department in August, 1994. Dianne Yokota, a long-term attendant at Yucalla Lodge, has worked on various hobbies with her husband since retiring in December, 1994.

Head for travelling
Now that she's retired, Willingen Park Hospital nurse aide Mary Head hopes to work part time in addition to travelling. She also wants to spend time with her eight grandchildren.

Sense of humour will be especially missed by her co-workers and residents.

Lewison plans to get a life now that the shift work regime of eating, sleeping and working is over.

Tech assistant kissed a lot of frogs
Berthe Ogena says she "nearly had to kiss a lot of frogs" to make it to retirement, "and not one of them turned into a prince," writes the lab tech assistant from Royal Inland Hospital in Kamloops.

Ogena, a one-time vice-chair of her local who retired after 17 years in April, plans to take a trip, focus on arts and crafts and spend more time with her grandchildren.

"Ah, she's still looking for the prince!"

Gorge housekeeping supervisor has green thumb
Ace gardener Albert Legare plans to spend a lot of time in his flower beds, building up what his coworkers call "his mini Butchart Gardens."

Thanks to Accord, lab assistant leaves early
Irene Sheppard took early retirement from the Red Cross in March, taking advantage of the early retirement provisions of the Health Accord. A 14-year veteran of the blood facility, Sheppard plans to spend a lot of time sewing and cooking. Come summer, she also plans to take off in her camper and roam the country with her husband.


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The great health divide
Premier Glenn Clark was hailed at May's Canadian Labour Congress convention, where the harsh health care reality east of the Rockies was highlighted.

A new Master
A united membership and a sophisticated union political action strategy combine to win health workers renewed employment security in a new contract.

The world according to Joy
The saucy drawing pen of HEU's Lorna Joy gets inspiration from the workplace.

Ready and able
With an expanded scope of practise, licensed practical nurses should be used more widely to provide quality care during difficult financial times.