PUBLIC PRIVATE PARTNERSHIPS

No fix for long-term care

It’s being touted as a cure-all for seniors’ care but it comes down to another attack on our health care system.

PAGE 8-9

PRIDDY NICE!

A new nursing initiative announced by Health Minister Penny Priddy in April is a boost for all health care professionals. HEU members Richard Dennis and Mary Benson from Yaletown House rejoice at the announcement.

PAGE 13

SURPRISE! SURPRISE!

Health care workers are more stressed out on the job than their managers. Details on page 12.

ON THE LINE

Striking community social services workers began job action March 8 to back their demands for fairness.

PAGE 3
COMMENT

Keeping the NPD on track

By Chris Allerton

IN OCTOBER'S COMMENT, I wrote that a third term for the NPD depends on policies that offer working people a clear choice when they next go to the polls. In the intervening six months, Victoria has taken an important step in that direction and our national领导班子.

The good news is contained in Victoria's latest budget which boosts health care spending for the eighth consecutive year. The deficit budget tabled in December included an increase consistent with the choices the Liberals and the B.C. Business Summit would make - steep corporate tax cuts paid for by deep program cuts.

It's good news for HEU's nursing team members. The budget includes $5 million to convert 218 care aide positions to LPNs and to create a further 74 new care aide positions in B.C.'s long-term care facilities.

In the early 1980s, LPNs were told they were no longer useful and their numbers declined dramatically. At the same time, the workforce crisis intensified for care aides who provide the bulk of personal care to seniors and others in continuing care.

Our HEU nursing team activists tirelessly educated the public, government and other HEU members about the appropriate utilization of the nursing team. That work has paid off with recognition at the highest levels that there was a mistake; that there is a significant

"There is a significant and vital role for the entire nursing team".

the number of regular employees who may be away at a time, when disaster plans have to be implemented.

Guidance and a policy at the provincial level would be appreciated. In my opinion the complexity and magnitude of this issue is comparable to developing and implementing a strike plan. Our union should not underestimate the importance of this to our members.

RICHARD DHENIS, Chairperson, Victoria Local

Retired, but not forgotten

Thank you for the opportunity to write to your active and retired members about BC FORUM (British Columbia Federation of Retired Union Members). Membership in FORUM is open to retired union members or any active union member who has attained the age of 50.

Why join a seniors group at 50? With the changing workplace, early retirements, buy-outs and golden and not-so-golden-handshakes, a transition to an organized group

becomes very important. BC FORUM is a registered non-profit society, with an annual membership fee of 15 dollars. Each member is automatically covered by a $5,000 accident insurance plan valid until the end of the year of the member's 85th birthday. Membership also includes other products and services that can be negotiated on a group basis, such as home insurance, travel, medical, extended health benefits and others.

There are over 100,000 retired union members in B.C. and many more active members over 50. We have found with our current 7,900 members, our presentations to the appropriate levels of government or committees have already been effective in helping to bring about changes that affect seniors.

The BC FORUM was created by and affiliated to the B.C. Federation of Labour as well as affiliated to CURF (Congress of Union Retirees of Canada) and the CCL. The larger our membership, the easier it will be to negotiate group benefits and the more effective we will become at protecting the interests of FORUM members. Let's stay organized! Join BC FORUM now! Call 1-888-455-5675 (Lower Mainland) or toll free 1-800-896-5675.

ALBERTA DOWELL

HEU Retired FORUM Observer

Case for casino #2

This letter is directed to all members of the HEU. I am writing to support all other unionized casinos across the province.

Many full-time or part-time sisters I talk to against 16:01 tell me they all had to go through those casino days at 1:00. We, however, have had to suffer through those shifts for maybe 20 to 30 years. Our pay, however, has been far better than that of those shifts.

Working now at two facilities, I still can't work enough hours to draw salary. I stay casual for more years with fewer shifts every new contract. When will they realize this unfair representation is going too far?

They say "United we stand" not "Bumping each other's head".

ISABELLE LARONNE, Astoria Manor, Peace River River

Guardian

"in bubble, dedicated to all those who need it today"

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Fred Morris, Chris Allerton, Nancy Lavoie, David Bailey, Collins, Macphee, Lee, Nino, Linda MagriANGES PROVINCIAL EXECUTIVE

Where to for year 2000?

Our employer has implied that staff will not be able to take vacation this year in the period surrounding New Year's due to concerns about the Y2K issue. A directive has not been issued being more specific as to what the exact time frame is, and with which members will be affected.

This is a province-wide concern, and we can probably expect different employers to respond in different ways. I feel the union should be notified of any deadlines that will affect the working conditions of the members.

I have some staff in my department who never work over the holidays, and I see no reason some of their co-workers at this facility being asked to work, also. I can also understand the concern of the employer, and they may be justified in restricting

"There is a significant and vital role for the entire nursing team".
What we’re up to

Equity groups hold fourth confab

On May 12 and 13, HEU’s equity standing committees held their final conference at the Richmond Inn.

At the end of two days each standing committee discussed their plans for the future, introduced their new chairpersons and honoured outgoing officers.

Two of the standing committees now have websites:

Persons with Disabilities (www.alberni.net/PeopleWithDisabilities) and the Lesbian and Gay Standing Committee (www.pridepages.org).

The Ethnic Diversity Standing Committee is going to publish the second edition of its very popular cookbook. If you have any tasty recipes you’d like included, the committee would like to hear from you: White Azha Dhrk at Box 631, Vanderhoof, B.C. V01 1A0 or e-mail t.dhrk@telnet.com.

Chief Vincent Stogdon began and ended the conference with a blessing, as has become the custom at the equity conferences.

LGH members sit in over contracting out

HEU-lined services workers at Lions Gate Hospital in North Vancouver walked off the job May 13 over the contracting-out of the preparation of operating room linen bundles to transnational paper disposable products giant Kimberly-Clark.

They were joined by maintenance and nutrition services members for a study session to develop strategies to counter this latest decision, and to stop further privatization moves.

Due to the decisions, five full-time positions – one currently vacant – have been cut and displacement notices issued.

Affected workers are covered by job protection provisions in the facilities sub-sector collective agreement.

HEU cited lack of enhanced consultation regarding the hospital’s latest move.

A hospital spokesperson claimed that “changes that may involve workplace impact” had been discussed in a labour management meeting the week before, and suggested this has not just dropped out of the sky.”

The 70 union members ended the impromptu job action after their concerns were taken to an in-house arbitrator.

continued on page 4

No contract yet

At press time, 10,000 community social services workers including more than 800 HEU members wrapped week 12 of province-wide job action while their representatives continued to meet with government negotiators in make-or-break contract talks.

Talks resumed May 2, two weeks after the unions upgraded rotating job actions into a full-scale walkout. Mediator Don Muntrose is assisting in the negotiations which have stalled several times on a range of issues including parity.

“Our members can take credit for generating the political pressure needed to restart talks,” says HEU secretary-business manager Chris Allnutt. “Through a range of creative job actions, our demand for an end to wage and benefit discrimination are front and center in communities across the province.

“Allnutt praised striking HEU members for forging strong bonds with CUPE, BCGEU and HSA sisters and brothers. “There’s no question that the gains we make at the bargaining table in this round can be credited in large part to the effective common front mounted by our unions.”

Take another look, say unions

BCGEU and CUPE BC have joined HEU in its application to reconsider a Feb. 17 Labour Relations Board decision that transfers clinical perfusionists to HSA. The unions say the decision failed to properly apply the Health Authorities Amendment Act – Bill 28 – in determining union membership.

“There’s a growing consensus by labour that the LRH has punched a hole in Bill 28, which could result in major jurisdictional disruption,” says HEU secretary-business manager Chris Allnutt.

“Changes in union membership that followed the initial round of health care restructuring in the mid-90’s would pale in comparison.”

HSA withdrew from their original application after a CLC-appointed umpire found them in violation of the CLC’s anti-racing policy. But they’ve intervened in HEU’s application for reconsideration as an interested party – an action that resulted in a letter of protest to the CLC by CUPE.

NATIONAL president Judy Darcy.

In addition to appealing the LRH decision, HEU is also asking government to amend the Health Authorities Amendment Act to make its meaning more clear and less open to interpretation.

In other developments, the B.C. Federation of Labour has established a “technical committee” to try and reach a protocol between HEU and HSA on jurisdictional matters – a move that Allnutt says is a welcome but partial solution to the issue.

TOP LEFT: HEU Western Human Resources members were among the 600 picketers who shut down Vancouver’s Library Square March 26.

TOP RIGHT: HEU community social services workers cheered and sang at the March 8th Victoria rally.

RIGHT: Kootenay care-providers and support workers from HEU, HSA, CUPE and the BCGEU gathered in Nelson on March 9.

MARG BAIAMY PHOTO

AUAN SCOUTT PHOTO

APRIL / MAY 1999 • GUARDIAN 3
Fighting for human rights

by Dale Fuller

REPORTERS. Enforced disappearances, massacres. These are words we hear in the news about places that are far away. For Maria Gloria de la Vega, they are not just words — she knows the "before and after" that they represent. She has been fighting for human rights all her adult life, and in recognition of this she received the Thalere Human Rights Award from the Simon Fraser University Institute of Human Rights. She says the award is not only for herself but for all the people she has worked with over the years. The Thalere Foundation was established to honour the memory of Mahatma Gandhi.

De la Vega and her husband lived in Guatemala and came to Canada in 1982 after many threats and finally an attempt on their lives. Both were legal advisors to Guatemalan trade unions. The Guatemalan elite — and foreign corporations — fought trade unionism viciously and with no holds barred.

Between 1944 and 1956 there was a period of repression when workers in unions in Guatemala had the right to organize. An eight-hour day, a minimum wage and benefits were part of the labour code, with special laws to protect women workers from discrimination. All these rights were dismantled or ignored after the military took over in 1954. In 1983, Guatemala was not a safe place for two lawyers who defended the rights of trade unions.

Their first concern when they arrived in Canada was to get the word out. "We became involved immediately in trying to tell Canadians what was happening in Guatemala," says de la Vega. "There were two salaries taking place. Eventually a United Nations commission documented over 669 — and these involved anywhere from five to 350 people at a time — mostly women and children and mostly Mayans."

An ecumenical group brought the couple and their children as privately sponsored refugees, and it was with the Christian Task Force on Central America de la Vega started working — and continues to this day.

Her work evolved into joining with a group of four other Guatemalans to lobby the UN Commission on Human Rights to hold Guatemala, a signatory to the Universal Declaration of Human Rights, accountable. That meant spending part of the year in Geneva and New York City, which she did for 12 years.

This experience gave her an insight into how the commission functions. The issue of human rights has become highly politicized with some of the powerful member nations prioritizing their own interests at the expense of human rights around the world. This is unethical and is not the mandate of the UN, nor the signatories of the declaration," she says.

Although she does not live in Guatemala now, de la Vega is still defending the rights of the workers of that country. The CTFCA has been a force in trying to change the working conditions of the maquilas (sweatshops) of Central America.

About 60 percent of the maquilas in Guatemala are Korean, so for two years the group met with the Korean consul in Vancouver, talking to him about the maquilas. "Fortunately, he got a letter from him saying the rights of the maquila workers were not being violated," says de la Vega. "And the letter went on to issue an invitation to visit any of the Korean maquilas."

So, they took him up on the offer. In 1997 representatives of CTFCA and other groups, both Canadian and Guatemalan, went to three Guatemalan maquilas. De la Vega says they found that maquila owners followed neither the labour code of Guatemala nor of Korea.

"The conditions inside the factory were deplorable. Hanging wires, water on the floor. The workers were young, extremely tired and frightened. The washrooms were in notably bad condition," were some of the comments in their report about one maquila which manufactures Liz Claiborne clothing.

Although she knows that the adversity she's been fighting is very powerful, de la Vega is hopeful that the voices of ordinary people can still be heard.

She says that right now the leaders of the world are taking us down a dangerous path with no consultations. Commenting on the war in Yugoslavia, she wonders where the money comes from for war when governments always cry "deficit." When it comes to health, education and other social programs. Wars are sometimes waged for years. Why don't we devote that much time and effort to peace? It's hard work, she says. And she should know.

BALANCING IT ALL is a regular Guardian column about the challenges facing women activists.

Yucaita local quiet out loud

When the community health council in Campbell River decided in a cost-saving move to lay off one of two registered nurses at the 70-bed resident Yucaita Lodge, HEU members showed up at the next council meeting to protest: "We do not think they fully appreciate the workload this person has," said local chair Carolyn Slaven in an article in the Campbell River Mirror. It was the BCNU who was making a presentation to the council to show them the folly of the layoffs. But, HEU members stood silently in the back of the room with their signs of support. Chairperson Slaven said they were "quietly loud."

The layoffs pay, because the health council reversed its decision and retired the registered nurse.
Governance of pension funds looms ahead

HEU's Provincial Executive has given the green light to the union's participation in discussions aimed at safeguarding members' pension plans. The move comes as the provincial government prepares to draft legislation that would allow changes in the governance of public pensions.

"Pension reform can provide important protections for HEU members' retirement incomes," says HEU secretary-businessman Chris Allbutt. "If workers gain more control over pension administration, we can avoid a situation where government guarantees pension surpluses or provides contribution holdbacks to employers. And that's a real concern as the Municipal Plan moves into a surplus position next year."

Allbutt says proposed legislation that would combine the various statutes controlling public sector pensions into a single law could put unions in the position of being able to negotiate joint trusteedship of their pension plans.

And there could be a built-in mechanism to protect workers' pensions — making it impossible for government to change pension plan arrangements without the agreement of both employers and unions. That would prevent unilateral raids of pension surpluses.

"There is a very small window of opportunity here," says Allbutt. "Other public sector unions like CUPE B.C., BCGEU and the College-Institute Educators' Association are already moving towards joint trusteedship."

"The FE has given its pension committee direction to study our options," adds Allbutt. "But any final decision will be made by the membership in a ratification vote."

The FE has taken the position that any move towards joint trusteedship provides for maximum control of the plan surplus by the workers and minimizes the risk of unforeseen liabilities on plan members.

At Royal Columbian trades are in

by Dale Fuller

EMPLOYERS will often contract out work in an ill-advised effort to balance their budgets. At Royal Columbian Hospital, workers and the employer developed an alternative a few years ago, and now the workers have approached the Simon Fraser Regional Health Board about taking their idea region-wide.

Trades is one area where health care facilities frequently resort to contracting out work.

In the early 1980s a union-management agreement established a "capital works crew" at the New Westminster Lions' Centre. It allowed for an in-house crew of trades workers for construction and maintenance.

Flexibility to adjust to different levels of projects and funding was part of the agreement, allowing the employer protection from capital funding uncertainty.

For union members, it was a way to prevent their jobs from being contracted out.

The hospital committed to one day of work every two weeks for each trades worker, allowing them to be eligible for benefits. When a project ended, the worker reverted to the casual list.

After a few years, the workers decided they were entitled to job security and bumping rights and were prepared to take the matter to arbitration.

But before that happened, the employer relented and made the jobs permanent.

The crew members know the facility backwards and forwards.

In other facilities where trades work is contracted out, union members often find they have to do all or part of the work over again because the contractor was unfamiliar with the place, regulations or practices.

Ray McVie, the crew's plumber, says that when a contractor comes in, they do the work as cheaply as possible, cutting corners wherever they can.

"In contrast, we not only work to code, we work to 'over code' because we know we will be here in the future. We don't want to create problems for ourselves down the line," he says.

McVie is assembling a committee made up of one trades worker from each of the major facilities in the Simon Fraser Regional area to look at the viability of a regional crew.

"We are examining the contracts that were let out from 1990-99 to see if we can do it more economically. We think we could probably have 15 to 20 full-time trades people steadily employed in the region," he says.

The crew at RCH does not do large projects, but any routine jobs are done by the in-house crew.

Recently they have done a complete renovation of the renal department, renovated the main entrance and main floor of a building and four large offices of 3,500 square feet each.

Union members know that they can do the work better and, in the long run, save money.
PRESIDENT'S DESK

Time to celebrate and re-energize
by Fred Muzin

HULS 40 DELEGATES at the May 3rd to 7th Canadian Labour Congress in Toronto had the privilege of participating in the retirement celebration of president Bob White and secretary-treasurer Dick Martin. Over the last 40 years, brother White has consistently advocated for working people, as a steward, a local chairperson, national president of the Canadian Auto Workers (CAW) and CLC president. His commitment to social justice, his vision of international worker solidarity, his determination in welcoming women and equity groups into the House of Labour, all the while maintaining his infectious good humour and remaining approachable sets the standard for all dedicated trade unionists.

Dick Martin, while a bit less flamboyant, has been instrumental in putting workers' health and safety at the top of the agenda, steadfast in building strong networks with advocates in third world countries, especially South and Central America, and determined in ensuring that youth know that they too can achieve justice and dignity and are the key to the future.

‘Success will depend on how well we organize those without unions’

Our challenge is to keep the torch burning brightly into the perilous twenty-first century.

The convention policy papers provided us with a roadmap for the struggles – fair trade deals, equitable taxation, quality public services, a living wage, pay equity, Medicare, public pensions, education, decent unemployment insurance, child care, adequate and affordable housing, the elimination of poverty, the elimination of racism, an end to child labour, no more torture and political imprisonment and a healthy environment.

The labour movement has also been reinvigorated by the militancy of the registered nurses, who were at their first CLC Convention, and the revitalization of the building trades.

Success will depend on how well we organize those without unions and encourage current members to take ownership of their unions. We must embrace community and social activist organizations, transforming borders and building solidarity with workers of all nations. And education must have a prominent place on labour’s agenda.

Just as the 2,500 delegates to the CLC Convention represent a wealth of experience and knowledge, closer to home the 200 delegates at our July summer school are part of HEU’s great resources. Course content will provide leadership development, look at members-in-member conflict and group facilitation, analyze pensions, duty to accommodate, public-private partnerships, ergonomics and much more.

But the time we spend outside of formal courses is even more important. We must pass on the skills that we have acquired in the classroom of life. Over nine days we will be able to strategize and develop plans of action to involve our members, defend our contracts and expand our rights. And when we follow through on commitments to work with those less fortunate, we all become richer.

THE GUARDIAN

She deserves more pay

The challenges are what Danielle Sulion enjoys about working at Mountain View group home in Vancouver. She has been working there for five years, providing personal care for three mentally-handicapped, wheelchair-bound clients.

That means bathing, feeding, changing diapers, dispensing medication, making and getting them to doctors’ appointments, shopping, taking them swimming and a myriad of other tasks.

Since most are non-verbal, it means teaching them augmentative communications.

“Faced with such challenges,” she says, “to work with non-verbal clients, teaching them a way of communicating.”

Mountain View is considered to be an intermediate care facility for the physically and mentally handicapped. She began working in a non-unionized transition house with mentally ill patients about to go out into society.

Amazingly, there was only one caregiver for 21 clients. “If that place would have been unionized, there would have been three times the number of workers,” she says.

She got involved in union work about eight years ago. She says her CUPE union local was struggling. There weren’t enough people to help. “I thought I could help get this union.”

Unfortunately, her employer lost the contract and with no successorship rights, the union was gone. “I had to take a pay cut and I lost all my seniority and benefits. Yet it was the same home, just a different contract,” she says.

As a community social services worker, Sulion is on strike for the first time.

She is busy staffing strike headquarters, going to work when she is essential and walking the picket line.

“People think that they are not asking for anything outrageous – only a decent wage and benefits – the same as others who do the same work.”

In about three months people got paid for the work they do, and everybody got paid the same.

She got into the field as a teenager in a work-study program – caring for the physically and mentally handicapped.

Working with the CWA, she was able to negotiate better rates for workers in the field.

She got off the street and began working in a non-unionized transition house with mentally ill clients.

NOTEBOOK

Twisted facts don’t tell story
by Dale Fuller

Everyone knows that statistics can be manipulated to stretch the truth, to tell a lie, in fact. They can also divert readers’ attention from real issues.

A recent article in the Globe and Mail implies that Canadian workers are unproductive because they are on strike as often. According to the April 5 article, Canadians spend more time off the job because of labour strife than workers in any other of the ten industrialized countries in the world.

Canadians lost 292,000 work days per 1,000 workers every year, compared to 62 in the United States. The article goes on to unfairly compare the “unproductive” Canadian worker with those in Belgium, France and Germany.

The statistic, thus stated, leaves readers with a distorted picture. First, the statistics for the U.S. do not include days lost due to work stoppages that involve fewer than 1,000 workers. If we were to eliminate that group from the Canadian statistics, the numbers would be reduced considerably.

Second, the numbers for Belgium, France and Germany exclude work disruptions in the public sector, and a good percentage of strikes in Canada are in that sector. And to add transit to injury – literally – part of the picture is missing completely.

The number of days taken off work because of labour strife pale in comparison to time taken due to on-the-job injuries.

The fact is, in every year since 1989, work days lost due to on-the-job injuries have averaged 10 times the number of days lost to strikes in British Columbia. In 1998, B.C.’s front-line health care workers lost 350,000 days of work due to workplace injuries.

Management should be working with labour to bring these disgraceful numbers down, so that Canadian workers can go to work everyday without the fear of injury. Now that would be a news story worth covering!

But it probably would not be printed in a Canadian newspaper.

A 1998 Simon Fraser University study analyzed labour and business coverage at the Vancouver Sun in 1987 and 1997 — before and after the Hollinger takeover — and found that business coverage had increased to twice the coverage of labour issues. Writers presented business in a favourable light, while labour stories focused on disruption to the province’s economy.

The corporate agenda is the guiding light of Hollinger’s newspaper empire, and it controls almost all major Canadian newspapers. Its influence extends to the Globe and Mail article, which is a classic example of comparing peaches and oranges. And it leaves out the poisoned apple.
Global Mariner voyage defends sailors’ rights

by Margi Blamey

THE MARSH reality of life at sea for many of the world’s half million seafarers was exposed to public scrutiny in Vancouver as the International Transport Workers Federation’s (ITF) campaign vessel, the Global Mariner, docked at Canada Place April 8 for a five-day stay. The Global Mariner is a refurbished cargo ship that began an 18-month, 80-port world tour from London, England (July 1, 1998) with a crew dedicated to the cause as they are skilled at their jobs. It’s the ITF’s latest means of taking its 50-year crusade against flags of convenience (FOC) to the international community, and its hull holds a massive and graphic exhbit documenting the falling standards and conditions endured by seafarers around the world. Assistant purser Milton Unojo, a 27-year veteran seafarer, radio operator and founder of a fledgling seafarers’ rights group in the Philippines, knows all about the exploitation of workers – and reprisals against complainants. In 1995, he contacted the ITF in Argentina because the owner of the flag-of-convenience vessel on which he was sailing, Greek-owned and Panama-registered, was blatantly ignoring employment contracts. “There was no heat on the ship. There were holes in the hull where water was coming in and insufficient food supplies. The crew had to buy their own drinking water, and they were owed overtime wages,” Unojo said. “The owner argued an inability to make a profit as the reason for the violations, but the ITF forced him to pay the back wages, have heaters installed and stock sufficient food and water.” But Unojo’s experience with unscrupulous ship owners was just beginning. The next time he went to a hiring agency in Manila he discovered he’d been blacklisted. “They told me, ‘We need radio operators but we don’t want trouble with the ITF.’” Unojo explained. “I knew of the blacklists but I didn’t know I was on one until the agent showed me. People are blacklisted because they complain. They’re labelled ITF trouble-makers.” Now Unojo sails on the Global Mariner and speaks out about workers’ human rights abuses on the high seas, and against flags of convenience. The ITF, with approximately 500 transport union affiliates representing more than five million members worldwide, and the United Nations International Maritime Organization and International Labour Organization have recorded numerous violations including lack of food and clean water, non-compliance with occupational health and safety regulations, no medical attention, low wages, unpaid overtime, physical and sexual abuse, and racism.

BCAA workers wrestle with a dinosaur

Members of the Office and Professional Employees’ International Union who work at B.C. Automobile Association offices in the Lower Mainland and Nelson have been off the job since early February. BCAA has refused to negotiate the most basic principles, including the right of an employee to union representation, pay equity and seniority. BCAA pays wages that vary by as much as 30 per cent for the same job. An employee with one year of service may earn more than an employee with 10 years’ service. Men are often paid more than women. OPEU Local 378 officials have stated that the employer’s positions are like nothing they’ve ever seen before. Initially, BCAA claimed that the right to have a union steward present during discipline and discharge was “confrontational” and unnecessary. OPEU members are also fighting for seniority.

The strikers’ spirits and determination are strong despite employer-tactics designed to intimidate and divide. The 170 workers, most of whom are young women, have been subjected to threats and taunts. Strikers say they are prepared to stay out as long as necessary to secure a fair contract. The union has called upon BCAA to return to the bargaining table but, as the Guardian goes to press, the employer has not responded.
Public Private Partnerships

The problems

- Quality compromised
- Public accountability questions
- Shareholders pay more

- Local economies undermined
- Jobs, wages and benefits under attack
- Governments bear risk
- Corporate monopolies
- P3 lead to privatisation

Birth of a bad policy

Here's what the B.C. government has been doing to boost P3s in our health care system:

- March '97 budget supports P3 scheme to build long-term care facilities
- January '98 - Victoria signs in all public hospitals to build long-term care facilities in Nanaimo and Kamloops

No wonder that in '96 Ministry of Finance steers down responsibility for management, planning and delivery of new health care facilities in an effort to encourage P3s.

- Regional health authorities directed to explore P3s for new long-term care facilities
- Regional health boards in Nanaimo, Kamloops, Prince George and Greater Victoria to prepare agreements for new long-term care facilities in early '99

...and more than one year after government announcement.

The characteristics of the policy that is promoting P3s are:

- No public participation
- No public accountability
- No increased costs
- No new employment
- No public health benefits

In fact, the policy is a failure.

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The B.C. government has been doing to boost P3s in our health care system:

- March '97 budget supports P3 scheme to build long-term care facilities
- January '98 - Victoria signs in all public hospitals to build long-term care facilities in Nanaimo and Kamloops.

No wonder that in '96 Ministry of Finance steers down responsibility for management, planning and delivery of new health care facilities in an effort to encourage P3s.

- Regional health authorities directed to explore P3s for new long-term care facilities
- Regional health boards in Nanaimo, Kamloops, Prince George and Greater Victoria to prepare agreements for new long-term care facilities in early '99

...and more than one year after government announcement.

The characteristics of the policy that is promoting P3s are:

- No public participation
- No public accountability
- No increased costs
- No new employment
- No public health benefits

In fact, the policy is a failure.
Birth of a bad policy

Here's what the B.C. government has been doing to boost P3s in our health care system:

- March '97 budget supports P3 schemes to build long-term care facilities
- January '98 - Victoria says it will ask private sector to build long-term care facilities in Nanaimo and Kelowna
- also in '98 Ministry of Finance assumes responsibility for management, financing and delivery of new health care facilities in an effort to encourage P3s
- regional health authorities directed to explore P3s for new long-term care construction
- regional health boards in Nanaimo, Kelowna, finally seek proposals from private sector for care facilities in early '99 - more than one year after government announcement

Public Private Partnerships

NO FIX

for long-term care

The problems
- Quality compromised
- Public accountability sacrificed
- Taxpayers pay more
- Local economies undermined
- Jobs, wages and benefits under attack
- Hidden costs escalate
- Governments bear risk
- Corporate monopolies created
- P3s lead to full privatization

by Mike Old

In its 1997 Budget, Victoria signaled a major shift in the way new multi-level care facilities for seniors would be constructed and operated. Stinging from media and corporate criticism of provincial debt levels - and acting on advice from the construction and design industry - government adopted a policy that public-private partnerships (P3s) be explored for the construction and operation of new care facilities.

Health care workers, seniors and some regional health authorities (RHAAs) are critical of the policy charging that it is unproductive, more expensive to taxpayers over the long-term, and threatens to undermine Medicare.

In P3 schemes, the private sector takes the lead in developing, financing and operating public services, facilities and infrastructure. Often, P3s are just a new label for privatization.

Victoria's P3 policy for new long-term care facilities works this way: RHAs find a private sector "partner" to assume the capital costs of construction and recover those costs through Ministry of Health operating grants and mortgage subsidies - also known as per diems. Victoria says private construction is the only way it can keep up with a growing demand for long-term care space while containing public spending.

But it appears that no additional long-term care facilities have been built as a result of the two-year-old P3 policy. In fact, former Health Minister Joy MacPhail's January 1998 announcement that the private sector would be approached to build care facilities in Nanaimo and Kelowna wasn't acted on by reluctant regional health boards for more than a year.

Some RHAs believe that privately built and operated care facilities are inconsistent with the goal of integrating health services for seniors. The Central Vancouver Island Health Board told Health Minister Penny Perry that under P3 arrangements, "we would not see full integration of services or administrative economies of scale."

But faced with growing pressures on regional hospitals resulting from a lack of long-term care beds and limited options for developing non-profit alternatives, both the Central Vancouver Island and Okanagan-Similkameen Health Regions have begun the process of seeking out private developers for new long-term care facilities.

HEU secretary-business manager Chris Allmout says it's only a matter of time before the private sector takes advantage of the government's P3 policy. "These developers will build multi-level care facilities to gain a competitive advantage in marketing seniors' housing complexes."

And HEU is questioning claims that private financing and development of new long-term care facilities will save taxpayers money. While P3s transfer construction-related debt to the private sector, their borrowing costs are higher than the province. Government can borrow money at lower rates and structure loan repayments over a shorter period of time.

It's on those grounds that Victoria recently agreed to pick up the $300 million tab for the expansion of the Vancouver Convention Centre from its private sector partner, Groupe roseau Properties. The province argued that higher private costs would have been passed on to taxpayers in the form of higher payments.

"The very same logic should be applied to the construction of seniors' care facilities," says Allmout.

HEU says that private operations of long-term care facilities will recover their higher costs of development from taxpayers through per diem payments and the diversion of operating grants

"The province's P3 policy is unproductive, expensive and could lead to the privatization of seniors' care"

P3 primer

Public-Private Partnerships (P3s) are ventures where the private sector becomes a lead actor in providing public services. They may involve private sector involvement in financing, designing, building, operating and owning public services, facilities and infrastructure. P3s are often another way of contracting out public services. Instead of the usual short-term contracting out arrangements, these longer term agreements move public services much closer to outright privatization. P3s are privatization by stealth. Who's pushing P3s? Corporations and some public sector employers have formed the Canadian Council for Public Private Partnerships. The council promotes P3s to governments and the public. Its backers include Laidlaw, Serco, Mutual Life and Neen court Capital, all of which have been advocating - and benefiting from - privatization and contracting out.

B.C.'s Finance Ministry is also a member. CUPE, through the Public-Work campaign, has provided tools to fight P3s and privatization.

Check them out on the web at http://www.cupe.org/privatization.html

CUPE's P3 primer - Behind the Pray pry Packaging Exploiting Public Private Partnerships - is available at HEU offices throughout B.C.
better ways
Non-profit alternatives to P3s integrate seniors' health services

Many RHAs see new multi-level care facilities as an opportunity to partner with non-profit housing societies to build adjacent affordable housing and to provide other health services for seniors.

There's a critical need for such cooperative ventures.

Institutional funding for lower levels of care — such as personal care and ILC — are almost non-existent. And there's growing demand for supportive housing by low income seniors who can't access the high end retirement housing market.

That's why HEU has been pressuring Victoria to explore alternatives to P3-financed construction and operation of care facilities.

HEU has backed proposals for pilot projects that give RHAs the opportunity to enter into community partnerships with non-profit societies, municipalities and other community groups to develop "aging-in-place" communities.

It's been done before. Burnaby's 55-year old New Vista Society provides housing, community and care services to seniors centered around its New Vista Care Home — a 236-bed intermediate care facility staffed by more than 200 HEU members.

About 540 low and moderate income seniors — 60 per cent female — live in the non-profit group's five rental properties.

BC Housing subsidizes most of the rental suites. Tenants don't have priority placement at New Vista Care Home, but there is a strong interaction between the care facility and the housing.

The New Vista kitchen prepares soup and sandwich lunches for seniors in the society's housing units. Many social programs at the facility, including Tai Chi and gardening, are open to residents in the surrounding housing. "Seniors-to-seniors" programs involve about 70 tenants in the Society's housing who spend time with residents of the care facility and the housing.

The New Vista Society would prefer to manage their own home care budget so they can "bundle" the delivery of home care to tenants in a more efficient and continuous manner. But for the time being, tenants are eligible for home care. Meals on Wheels and other services on the same basis as other seniors.

HEU is urging the provincial government to bring in policies that allow RHAs to take part in projects like New Vista that integrate the housing and health care needs of our seniors.

Better ways
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Victory House shelters when nowhere else will

by Dale Fuller

FORTY-SEVEN hard-to-house people with varying levels of psychiatric disability hang their hats at Victory House in Vancouver's Downtown Eastside.

The people who work there care for the residents with dedication and diligence. There are sometimes violent incidents, and people can cross the line in their behavior. But because the staff is so close in to the state-of-being of their charges, there has not been one death at Victory House in over 11 years.

Most of the residents are ex-psychiatric patients who are trying to live their lives in as normal a way as possible. "Our job is to ensure that they get some kind of quality of life," says Mark Roberts, mental health worker and HEU local chair. "We have people who have lived here for 10 to 15 years. The residents are anywhere from in their 20s to their 80s. The atmosphere at Victory House is pleasant. The front lounge area has comfortable seating, and people sit quietly reading in sunlight that filters through large windows. Residents eat in the cafeteria which resembles a small neighborhood cafe. Each table seats four people, and has a bulletin with a vase of flowers. In short, the designers mimicked the institutional setting as much as possible.

Victory House is part of the St. James Society which operates several different sites - most of them in the Downtown Eastside. About 200 HEU members work at all of the sites. They were first unionized in 1990 as a CUPE local. "We had a different management and board than we do now," says Roberts. "They tried to get the members to decertify, threatened to change Victory into a hotel. Actually it was run at that time out of an old hotel, but the residents would have had to be rehoused at Riverview Hospital. The management even went so far as to fire everybody, but reacquainted on that a week later.

One result of unionization, says Roberts, is that people stay longer on the job. When he first started working at Victory, one or two people every month would quit. "Now many of us have been here for five or more years," he says. That is better for the residents, because continuity of care is of extreme importance to them.

The community is very cohesive. If a worker on the night shift thinks someone is hurt or is going to hurt himself or someone else, they can call on the St. Vincent's care team or Priority 7, which is a team of two made up of a police officer and a nurse.

During the day and night shifts there is one nurse on site. There were no nurses at all at Victory House until two months ago. They are there to deal with the medical emergencies that crop up from time to time, and they are part of management. Working in a place like Victory is not for the faint-at-heart. You have to be ready for the unexpected all the time. The kitchen and janitorial staff as well as the mental health workers are a dedicated bunch of HEU members.

St. James Society's other departments include:
- two offices dealing with those people the Ministry of Social Services and Housing won't deal with because of violent or unpredictable behavior;
- ten Youth Place, a crisis centre for women and children at risk;
- a hospice with home support workers;
- a craft store which includes garment alteration services;
- a furniture store with delivery and pickup; and
- St. James Place for independent living.

New members bring renewal

by Maigi Blaney

New members are the lifeblood of a healthy, dynamic union. At HEU, the people most aware of this on a daily basis are our organizers, and they follow every lead and explore every opportunity in order to infuse the union with new blood.

While some individuals contact the union, most new certifications are the result of the staff's research, groundwork and diligence.

"HEU organizers have been known to leaflet a worksite at 6:00 a.m., or even a few people for coffee at midnight," says acting director of organizing Raj Choudhary. "Staff accountability and flexibility are essential to any organizing action."

Workers who investigate unionization often run a real risk of employer reprisals, and may be understandably fearful. That's why worker confidentiality and privacy are strictly maintained throughout an organizing campaign. From the beginning, the organizer's first task is to build trust with potential members - that's the heart of the workers' relationship with the union throughout and after the organizing phase.

The most successful campaigns are worker-driven - by taking ownership of the process, they're the most effective union promoters. Organizers remain active participants, contributing information and support.

The motivations for seeking union membership are disturbingly familiar to HEU's organizers: poor working conditions and treatment including low wages, few or no benefits, long hours, lack of respect, intimidation and harassment, discrimination, and health and safety concerns.

"HEU has earned a reputation as an effective advocate on behalf of working people," says secretary-business manager Chris Allatt. "Our history records solid advances bargaining superior contract provisions that address issues of wages and benefits, employment security and pay equity. We're also in the forefront of the fight for Medicare, human rights, and economic justice."

HEU has organized all the province's hospitals and the majority of long-term care facilities. Our growth is evident in the independent/assisted living and community social services sectors. Over the last five years more than 4,100 workers have joined HEU.

The 2,500 delegates to the 22nd Canadian Labour Congress convention held in Toronto this May underscored the importance of organizing by adopting a policy statement asserting "the need for a culture of organizing that values and promotes the labour movement's integration in the various communities - geographic, social and/or cultural - in which people live and work."

With the adoption of this policy statement the CLC has recognized the work of dedicated organizers like those at HEU and confirmed organizing's key role in the renewal of the labour movement.

The first step

Contact HEU organizers in confidence:
- Raj Choudhary, director of organizing
  cell: 604-240-0462
  (Lavender Eastside)
- Meg Stevens
  cell: 604-880-9837
  (Lower Mainland)
- Lela Murray
  cell: 604-240-0625
  (Lower Mainland)
- Jay Davidson
  cell: 250-920-0089
  (Vancouver)
- Donald Yee
  cell: 604-880-9725
  (Lower Mainland)
- Michael Carney
  cell: 604-862-0453
  (Lower Mainland)
- General phone: 734-3431 extension 215
  (Greater Vancouver)
- Toll free: 1-800-563-5813 extension 215
  (outside the Lower Mainland)

And look for the organizing web page, coming soon to www.heu.org.
Scrap bargaining rights, say Liberals

Tax cuts and no obstacles to wealth creation top Liberal wish list

by Mike Old

The B.C. Liberals want to replace the current collective bargaining rights of public-sector workers with an alternate dispute mechanism. That's just one of the policies adopted by delegates to the April 18 to 18 B.C. Liberal convention held in Kelowna.

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HEU welcomes Jim Sinclair to Fed presidency

HEU congratulates Jim Sinclair on his election as president of the B.C. Fed- eration of Labour. He was elected by the B.C. Fed executive council on May 14.

HEU has worked with Sinclair on campaigns in defence of Medicare and in his capacity as a member of the Vancouver/Richmond Regional Health Board. He started working for the United Fishermen and Allied Workers Union in 1982 and has been its second vice-president since 1991.

HEU president Fred Marlin says, "Jim Sinclair brings a wealth of experience and expertise to the Federation and the labour movement. We look forward to working with him in his new role."

Sinclair takes over from Ken Georgi- en, who replaces Bob White as presiden- tial candidate at the Canadian Labour Congress. He assumes his new post on July 1, 1999.

Carcel RADs, says poll

"BCMA's tactics are wearing thin, " says poll.

by Mike Old

If public opinion and the views of some outspoken physicians are any in- dicator, it's time for the B.C. Medical Association to revisit the use of reduced activity days (RADs) to draw attention to its fee dispute with the provincial government.

According to an HEU/McIntyre & Munsell province-wide telephone survey carried out in late February, 57 per cent of B.C. physicians say the BCMA should cancel RADs to help clear the surgical backlog in B.C. Only 31 per cent say RADs should continue. Twelve per cent had no opinion or refused to comment. And on the eve of the BCMA's five-day RAD action coinci- dent with spring break, 29 physicians from the Lower Mainland and Victoria publicly rejected the BCMA's tactics.

"While the health system is ex- periencing serious problems that call for public awareness and discussion," wrote the physicians in a March 12 statement, "we believe it is misleading to confine the question of physicians' incomes with the welfare of the health care system. We think it is contradictory to complain about long waiting lists only to com- pound the problem by withdrawing our services."

HEU estimates that the RADs have delayed as many as 20,000 operations since March 1998.

Workers suffer most stress

by Sheila Rowsewell

FEELING STRESSED to the max lately? You're not alone in health care these days. HEU's Regionalization/Recon- structing Committees have taken up workplace stress and workplace control as part of its action plan for 1998-99.

Many people are led to believe that it's not work but one's own life skills, per- sonal life or work that causes stress. And the general belief is that it's managers, not people like HEU members, who face high stress levels at work. In fact, the opposite is true. It's managers, directors or CEOs who have the highest stress levels. It's regular working people. For years re- search has shown it to be people with low control and high demands made of them that have the most stress and suf- fer the highest rates of stress-related injury and disease. Its workers, it seems, take on the stress of the system.

The RRC committee recognizes that workplace stress levels are increasing as employers recognize and adjust to structural changes with little respect for or input from frontline workers. Stress levels have also increased as the intensity of health care work increases.

Some employers see that workers are stressed, but their solutions are usually based on individual solutions such as exercise or coping skill classes. HEU's approach is broader. We are bringing workers together to break individual members' feelings of isolation. We look at the common sources of workplace stress and, most importantly, try to find col- lective ways of gaining more control at work, which reduces workplace stress.

Through the committees, three pilot workshops were held in December 1998 at worksites where workplace stress was high. The workshops were held with union stewards at Vancouver General Hospital, nurses and purchasing members at the Fraser Valley and care aides and food service work- ers at a Victoria private nursing home.

None of the members attending were union activists, and most had little contact with HEU up to that point. At Chilliwack four area hospitals have combined their stores and logistics department into one site. One member attending the workshop said that the work situation there now is just as stressful as it was today spending looking for items after the Gulf War.

At VGH members described how they felt they were in the eye of the change storm with no one aiding them what work would or wouldn't be done, or how to bet- ter organize their work. As the month wore on, it was clear that the turn around in the workplace environment is a key to reducing stress.

The committee is looking at how to take the project out to other locals and members. Interested staff and activists will be able to take facilita- tor training this spring and summer. Members should keep an eye out for a brochure on workplace stress/work- place control which will be mailed out in June. Look for more articles in the Guardian. If you think your local could benefit from a workshop or if you would like more information, contact Marcy Cohen or Sheila Rowsewell through the Provincial Office.

MSIs studied

Health care workers suffer musculo- skeletal injuries (MSI) in alarming numbers. Health Canada and the Workers' Com- pensation Board funded a study to find out why.

The study, carried out by UCR epidemiologist PhD student Madie Wookens and her colleagues, looked at 4,000 workers in an acute care hospital in the Lower Mainland from 1993 to 1995. It looked at all the occupations in the facility, except doctors and students.

Muscle strain from low control and low support on the job may result in increased tension in the upper body muscles and eventual- ly lead to MSI symptoms. Taking a break from repetitive or demand- ing tasks can ease the tension. Usually workers can do this only if they have control over their situ- ations. Some have good support from their supervisors.

However, not everyone is equal in the battle to determine when and how often they will prepare and wear it on the lower body. A worker is even more at risk if not able to make those decisions. The report recommends changes to address these prob- lems, and these will be elaborated on in a future issue of the Guardian.
Nursing team initiative receives $5 million

Funds will boost staffing levels in continuing care

ENTHUSIASTIC Minister of Health Penny Priddy announced that her government will be spending $5 million to upgrade LPNs working as care aides to LPNs and to hire care aides in continuing care, as secretary-business manager Chris Allnutt awaits his turn at the podium.

O N APRIL 16 at Vancouver’s Yaletown House, Health Minister Penny Priddy announced a $5 million initiative to increase the numbers of care aide and licensed practical nurse positions in residential continuing care. This is good news for HEUs nursing team members.

“This initiative came about because of some very hard work by our nursing team activists,” said HEU secretary-business manager Chris Allnutt. “Combined with the budget announcement of $615 in new health care funding, it shows that in B.C. we’re willing to make the right health care choices.”

After the government said it was going to add 1,000 more registered nurses to the system, HEU stepped up its own lobbying to add more LPNs and care aides, resulting in this initiative. “This new funding will help deal with the overall nursing shortage as each member of the nursing team is used to her full potential,” said Allnutt.

Addressing changing care needs

These dollars apply to the 1999 base budget, with a commitment for at least another $5 million next year. This year’s funding will focus on long-term care for two reasons: • the changes in acute care (shorter stays, day surgery), combined with senior’s needing residential care, have dramatically increased pressures and workload in long-term care; and • health care reform has restructured the care needs of residents in long-term care facilities, making it impossible to ignore the value of LPNs any longer. HEU will continue to gather evidence and organize for increased LPN staffing and utilization in acute care.

This funding lays the groundwork and provides regional forums for pressing nursing team issues in acute as in long-term care.

How the $5 million is spent

This initiative will create permanent LPN and care aide positions in long-term care and support research on their utilization across the health care system. The funding will be granted to each Health Authority in three categories to carry out these objectives:

• Conversion of care aide to LPN positions for LPNs who have been working as care aides in other jobs;• training for LPNs and care aides; and• creation of care aide positions.

Care aides to LPN conversions

Approximately 1,200 LPNs in B.C. currently work in other positions, 600 as care aides in long-term care. One million dollars will be allocated so LPNs working as care aides can work as LPNs.

Education part of initiative

The training funds will be administered by joint committees of the Health Authority and HEU. The first priority will be to support orientation and refresher education for LPNs who will be moving into the converted positions. Once this is achieved, the funds will be available to LPNs and care aides for training and professional development. Any money not spent in the staffing categories of this initiative will become part of the regional LPN/care aide training funds.

New care aide positions

LPNs have been campaigning for a long time for recognition and reversal of the trend that saw their numbers decline, said Allnutt. “This initiative represents a significant gain for them, but care aides have made advancements here as well.”

In fact, 70 per cent of the $5 million will go towards the creation of new care aide positions. And there will be $300,000 in training funds available to them once the immediate task of upgrading the LPNs is completed. The recent provincial budget announcement of $21 million for 480 continuing care spaces will result in approximately 150 new care aide positions as well.

Research on utilization

The Joint HEABC-HEU Facilities Bargaining Association Committee on LPN and Care Aide Utilization will receive $200,000 to continue its research work on staffing and utilization practices in B.C., best practice models and trends and experiences outside of B.C.

Making it work

The provincial government will allocate the staffing and training funds to health authorities based on current bed levels, adjusted for acuity and staffing levels. Each health authority, in consultation with HEU, will determine which facilities receive converted and new positions. Facility size and the acuity level of residents will be principle factors.

Selected employers must be committed to effective utilization of LPNs and care aides. Conversion of care aide to LPN positions and creation of new care aide positions will happen as quickly as possible. These must be permanent positions only, and full-time wherever possible, with no displacement of employees or involuntary layoffs.

The process of finding LPNs working as care aides who wish to make the conversion will vary from place to place. In some facilities it will be relatively straightforward. In others, it may require an extensive labour adjustment process. In the latter case the joint committee will use new care aide positions to backfill conversion to LPN positions, and canvas employers for their interest in voluntary options such as early retirement, job sharing or retraining.

New positions will be posted and filled according to collective agreement procedures.

What they say at Yaletown

Vancouver’s Yaletown House was a good place to announce the new nursing team initiative. Bucking the trend, this intermediate care facility has been utilizing LPNs for years. “We believe that with the care requirements of our residents becoming more complex, we needed to have a broader skill base in our nursing staff,” says Yaletown administrator Shirley Nelson. It took a while to adjust, but now LPNs are a great support to the registered nurses and the care aides. “The facility was an innovator in the conversion of care aides to LPNs. Yaletown food service supervisor and local chair Richard Dennis says, “Now the LPNs can give meals and supervise the care aides. It’s a much smarter way to run a facility like this.”

Recreational therapist Mary Benson agrees. “I noticed the difference with the LPNs here. It took the pressure off the other nursing staff,” she says. She thanks the new funding to long overdue. “Continuing care is in a crisis state; this is an absolute necessity.”

PRIDDY TALKS TO YALETOWN HOUSE RESIDENTS EDITH COULTER AND KAY FAYolle ABOUT HOW THE NURSING TEAM INITIATIVE WILL HELP PEOPLE WHO LIVE IN CONTINUING CARE FACILITIES LIKE THEIRS.
Founding member Jim Ballard dies

EU lost one of its founding members when James Ballard passed away on March 27.

Ballard began his career as an orderly at Vancouver General Hospital in 1939 and retired in 1974 as a nursing supervisor for HRU. In the intervening years, he saw the birth and growth of the Hospital Employees' Union. And he was involved right from the start.

The workers at VGH were unionized when he began working there, but they did not have their own certification. The male workers were in fact affiliated with the Civic Employees' Union.

“We didn't even have the women. They had their own association. That's how weak we were,” said Ballard in a 1974 interview with the Guardian. The women employees were in the Hospital Workers' Union which was made up of only female members.

In 1944 women and men at VGH voted to merge their two unions, thus forming the Hospital Employees’ Union, Local 180 of the Trades and Labour Congress. Jim Ballard was a catalyst in that development.

Ballard worked for seven years as an orderly and then he took over a position looking after anaesthetic equipment. He stayed in that job for 25 years. When World War II broke out, VGH failed every attempt Ballard made to enlist, and he made several. The hospital considered his work as an orderly in the burn unit indispensable.

He said he got involved in the union because he wanted to know what made it tick. And the only way he could do that was to run for office. He was an active participant of his local until he left to join the union staff, serving as chair four times and in other offices too many times to count. He sat on the Provincial Executive nine times.

All that experience was put to good use when he came to work for the union in 1971. He serviced VGH, Burnaby General, St. Paul's and Lions Brier. He then served as the Kootenay rep until his retirement.

Ballard retired with a severance package, and he put it to good use by buying a camper. He and wife Rita went camping every year from May to September. They made several trips to Mexico and Hawaii and loved going places on the train. Son Glenn said he has a photo of his dad in Mexico parasailling when he was in his mid-70s.

The Ballards are truly an HEU family.

Ottawa massacre victims mourned

On April 6 a former employee of the Ottawa-Charlton public transit commission entered a central garage and, armed with a rifle, shot and killed four OTC/transpo employees and injured one other before turning the firearms on himself.

The victims of the massacre were all members of the Amalgamated Transit Union.

Members of CUPE 3550 worked alongside those ATU members as supervisors and security staff.

Bob Mannion, president of the CUPE local, said of the victims, “I’ve been working with some of these guys for 20 years and they never had a bad word for anyone. It’s such a sad thing. It should never have happened.”

CUPE members worked through the night to ensure that transit service was fully restored the next morning. They brought in trauma teams afterwards to help their members deal with the tragedy, said Mannion.

HRU joined CUPE in extending their sympathy and solidarity to the brothers and sisters of CUPE 3550 and ATU.

COMING UP ON WORKING TV

Is Canadian water going down the drain?

Find out on Working TV on Wednesday, June 16 at 9 p.m. and Saturday, June 19 at 11 p.m.

A one-hour special program called The Private Drain on Public Water, put on by the Council of Canadians, will feature Maude Barlow's April 21 Vancouver talk.

Regular broadcast times for Working TV are Fridays at 7:30 p.m. and Mondays at 8:30 p.m. in the Lower Mainland; Tuesdays at 9 p.m., Wednesdays and Thursdays at 8 p.m. on Kootenay Cable TV (Kimberley and Fernie) and now on air in 50 American cities.

And don't miss the Working TV website at <https://www.workingtv.com>.
Retirements
Two retirements from the Bulkeley Valley District Hospital: housekeeper/supervisor Sue Gorse and maintenance worker Jim Briggs. Gould, a 22-year veteran at the hospital, will return to Mexico to spend much of her retirement in Mexico. A few years ago she worked there with her son and fell in love with it, and was spending half of each year there for the last four years. Thirty of her co-workers celebrated her retirement with a party. Briggs, known as Mr. Santa Claus to local children's functions, is also an artist, with much of his artwork to be found in the hospital. He spent 19 years here but VDH, and he will be greatly missed, but since his wife Loretta still works there, local residents will get to see him every now and again.

To Ha Luong retired from his position as cleaner at Mt. St. Joseph Hospital at the end of March after working there for 20 years. He plans to travel to Europe and to volunteer at the facility — probably translating and interpreting for the Chinese and Vietnamese patients.

Gooreti K.C. H. also recently retired from Mt. St. Jo, where he worked as a CSD aide. He worked at the facility for 22 years. Care aide Florence Witt retired from Dogwood Lodge recently. Long walks, exercise and travel to visit friends are in her immediate plans.

Food services worker Helen Yatkowski retired from Pleasant Valley Health Centre in Armstrong at the end of April. She served as a conductor and trustee of her local and she worked at the facility for 22 years. Now that she doesn’t have to work anymore, she plans rest and relaxation.

Care aide Irene Szafla, also of Armstrong, retired in January. She worked at Pleasant Valley Manor for eight years. Her plans include “traveling with my little dog.”

Laurine Dunlop worked at Swan Valley Lodge for 21 years. Her co-workers wish her well in her retirement.

Laurine Dunlop

TURBULL
Judy Turnbull does an excellent job of training and showing her collies. She started at 100 Mile House Hospital as a cook in 1967. She transferred to maintenance in 1969, where she worked until she had to go on disability in 1997. Her co-workers wish her well with the collies.

Staff
Appointments
We have three new members of staff, all of whom have been working at HEU as temporary staff and have been made permanent.

Kerry Anderson came to HEU from Crofton Manor where she worked for more than five years, first in food services then on reception. She worked briefly as a care aide in the late 1970s at Normandy Hospital. She started as a temporary employee at HEU two years ago, and is now a Secretary II. Outside of work, she is active in church activities.

Another secretary II, Raine Kearney, started out at Han Park as a casual receptionist and a casual care clerk. She started at that facility volunteering her time to work with seniors in respite care. She also worked briefly at St. Paul Hospital in the anesthesiology department. She was also at the B.C. Transplant Society. She started working at HEU in March 1997 as a temporary worker.

Sharron Modder worked at Malahide House at Martine View Housing Society in West Vancouver as an activity coordinator. She worked for two years before starting work at HEU. Her permanent appointment is as a Secretary II. She studied recreational therapy at Douglas College. While there she continued her work with pregnant teenagers and street youth, work that she loved. Modder is married, but no kids.

In membranes
HEU nurse Val Marie Corbett died in Prince Rupert on Jan. 24. She worked for the past 11 years in the dietary department of the Prince Rupert Regional Hospital.

Her laughter and love of life were well known to all, and she will be fondly remembered by her family and many friends.

Agnes Magnone, a former laboratory member, passed away at the age of 88.

A proud licensed practical nurse, she was an active union member and was chair of her local during the 1960s. She was also active in the Licensed Practical Nurses Association of B.C., including as president. She cared for her patients and she likewise cared about and created good things as a true catalyst for change.

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