Justice for those on LTD

by Chris Allnutt

In July, HEU’s community social services members ratified a new collective agreement bringing to a close 16 months of intense bargaining that began in earnest with facilities sub-sector bargaining in January 1998. During this period, every public sector union was challenged to make gains for their members in the face of a government imposed wage freeze of 0-0.2 per cent. Part of that equation resulted in an end to wage discrimination against community social service workers. But the other part of the equation was a commitment to creatively address non-wage demands. Justice for members on long-term disability was at the top of HEU’s list. I clearly recall our bargaining session with health employers on Feb. 12, 1998 – a pivotal date in facilities bargaining. Members on LTD were at the table in person, accounting for the financial and emotional impact of poverty-level benefits on their families and on their self-worth. The die was cast and four months later HEU signed a tentative agreement that provided significant improvements to the facilities LTD package including increased benefits, regular indexing of benefits, 50 per cent coverage of extended health and dental premiums and shorter waiting periods. The new LTD package contained early retirement provisions and improved support for members seeking rehabilitation or retraining. And for those long-term LTD recipients who qualified for neither retirement or rehab, the supplementary monthly LTD benefits would boost poverty-level incomes. According to actuarial figures provided by HEAC $19 million of benefits would flow to our LTD members in each contract year. The supplementary monthly benefits alone were valued by the employer at $5 million – four times as much as the lump sum payments calculated for the previous agreement. But one year later, many of our members on LTD are angry and frustrated. And they have every right to feel this way. Preliminary figures show that the value of new LTD benefits received by our members falls far short of the $19 million mark. The members of HEU’s LTD members receiving newly negotiated benefits – and the amount of those benefits – is much lower than expected. Fully one-third of long-term claimants – those not eligible for early retirement or for the monthly LTD benefit – are not receiving the supplementary LTD benefits. And it underlines the efforts of HEU’s 42,000 facility sector members for whom justice for those on LTD was an important precondition to securing the current collective agreement. We’ve met with HEAC on this matter. We’ve demanded a complete review of the value of LTD benefits before the first year of the contract. HEU will take whatever steps are required to see justice delivered to our LTD members.

Goodbye and thank you

This is a thank you note to the union, all the people who worked so hard for years and months to bring good contracts to the members. Going into retirement now, I’d like to tell all the good people who that was the wish of the people into consideration. Attending a session before the last one, I was impressed with Mr. Allnutt’s patience explaining to members what the contracts were about. I am grateful it is so easy now to retire. The coordination between the union, the Health Care Benefits Trust and VGH is very impressive and pleasant to experience. One of the main reasons the union has been a friend, in working days and times of disability. Taking many

Voice/mail

THE GUARDIAN WELCOMES YOUR FEEDBACK. SEND LETTERS TO 2006 WEST 10TH AVE., VANCOUVER V6J 4S4 OR PHONE 1-800-202-2444, PLEASE BE BRIEF.

The Hospital Employers’ Union is the B.C. Health Services Division of the Canadian Union of Public Employees

Guardian

In humble dedication to all those who have lived.

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LETTERS

I have a few comments about the Guardian. I think it is a very good publication, and I enjoy reading it every week. I also appreciate the way it covers local events and issues.

Cheers,

John

Manoir

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Happy moments with me into retirement, was the good people that mattered most, working together with better conditions in mind. The union has come a long way since 1980 – when I first started, and came back later after two babies. Thanks for all the good things accomplished over the years.

THERESA BOYNE
Former VGH OR Anesthesiology Attendant

Paramed wants issues addressed

DrSA did not hold HEAC in respect to the perturbation. The perturbation makes up 10 per cent of the employees who are not just giving lip service to the issues.

BRITT PARRISH
Biomedical Engineering Technology
Children’s & Women’s

I want some more, please

1. The following letter was sent to the Kimberley Community Health Council (KCHC). It has been edited for length. My name is a resident at the Kimberley Senior Care Home. I am writing to describe my concerns about its level of staffing and consistency of care. It appears that the staffing level on “Q” wing is wholly inadequate to provide the necessary level of care consistent with basic principles of risk management within the health care sector.

During the afternoon/evening shift the RN’s take their meal breaks leaving one staff member to deal with the resident’s evening routine. This is a very busy time for residents who are unwell and disoriented. It’s also a very busy time for some of the new residents who are unwell and disoriented. How can quality care be given with this ratio considering the increased attention required by the residents at this time?

My recommendation is that the staffing levels should be considered on the wing, and consideration given to increasing staff between 3 p.m. and 9 p.m.

SHELLEY SLOVER

Wants Justice

First a little history. Last June, Chris Allnutt announced an agreement between HEU and its members with a lot of people in the press about a negotiated agreement with a huge victory for their members. The agreement was supplemented with a huge victory for its members. Nine months later I found out what the huge victory was. I’ve been on LTD since 1988, and I’ve received the same amount of $677.80 per month since that time. For the last 13 years I had no increase. So you understand how happy I was with the negotiated agreement with a huge victory for people.

After writing to the Healthcare Benefits Trust (HBT) and HEU many times, finally, after nine months I found out my monthly supplemental LTD benefits would be a pittance of $24.04 per month. Not only did we have to wait nine months, but it was not on the huge amounts announced in the press and on TV last June.

The HBT has sold us out once again and I think it is a disgrace to this province and to our union. To add insult to injury, we also face demands from the added threat that this will be taken away in the year 2000.

Are the people on LTD going to stand for this? I tell you I will not. With our union, to the HBT, your provincial government — let them know how you feel.

And I would like to know how everyone feels about this injustice. Please write me at P.O. Box 1160, Chemainus, B.C., V0R 1S0.
Bill 28's been undermined, says union

HEU has asked the Labour Relations Board to reconsider its February decision stripping away the rights of health care workers to maintain their union membership when transferred between bargaining units.

At a hearing July 12, HEU argued that the LRB failed to properly apply the Health Authorities Amendment Act - Bill 28 - when it transferred a group of clinical periactives from HEU to the Health Sciences Association.

Bill 28 is the 1997 legislation that restored the rights of unions to follow members transferred between bargaining units in health care.

"There's broad support among health care union for our position," says HEU secretary-business manager Chris Allmunt, noting that CUPE BC and BCGEU supported HEU's application.

But the Health Employers Association of B.C. and HSA have weighed in against HEU's application and are supporting the Feb. 17 LRB decision.

"HEABC position is surprising in view of the Canadian Labour Congress charge of guilting of raiding which resulted in their withdrawal from the original LRB application," said HEU's statement.

And in response to an HEU application to have some of its members at Richmond Alcohol and Drug Action Centre transferred to the provincial professional bargaining unit, HSA and health care bosses have taken the position that the workers should be "de-unionized" rather than retain their HEU membership.

Under HEU's paramedical professional certification, the counsellors may have access to higher wage rates and a more appropriate classification system. HEABC agrees that the counsellors belong in the paramedical professional bargaining unit but along with HSA, they've taken the position that the workers should be stripped of their union membership.

"Bill 28's intention has been undermined leading to some bizarre and unwelcome developments," says Allmunt. "And while HEU will pursue every avenue of appeal, the provincial government also has a responsibility to amend the Health Authorities Act so that its intention is clear to the LRB."

"Neither the government nor health care unions can afford to be distracted from the critical work of defending our Medicare system."

What we're up to

Navigation aids for rehab plans

Did you know that your union can help you work out the details of an "Approved Rehabilitation Plan" with the Healthcare Benefits Trust?

In last year's facilities subsector bargaining, HEU LTD claimants won the right to have a union rep present in discussions with LTD regarding training, return-to-work schedules or other elements of a rehabilitation plan.

Beyond Hope's decision

 Arbitrator Allan Hope Q.C. released his long-awaited decision in the case of Nanaimo Regional General Hospital worker Vicki Bertram, and it is not good news for the B.C. union activity. The hearing held June 28, Bertram was fined last August. In the wake of a sit-down protest which itself followed a summer of workplace labour-management relations.

"The union is naturally disappointed at this decision," says secretary-business manager Chris Allmunt. "We believe that Mr. Bertram's termination was unjust, and that is why we fought it."

The decision has sided with the Labour Relations Board to review Hope's decision.

One positive outcome of the protest was an agreement to a "labour relations enhancement process" facilitiated by Vince Ready and designed to improve communications and the resolution of grievances.

Trivial it's not

The Solidarity Committee at HEU's Nelson local has joined forces with the Advocacy Centre to produce a board game to raise funds for projects abroad and in Nelson.

Nelson 2000 Our Town Trust is a board game featuring questions in a number of categories including a tile-tailer-made for this West Kootenay community.

The solidarity committee has supported three projects over the past few years in the Salvador and Guatemala while the Advocacy Centre provides information support for a wide variety of family, income assistance, housing, disability, poverty and other matters.

Barry Nelson of HEU's local solidarity committee encourages other locals to contact them about purchasing copies of the game to give away at special events or to raise money for specific gifts. And he insists that Nelson 2000 will soon be a "collectors" item. Intrigued? Call Barry at 250-354-2394.

HEU lauds cabinet shuffle

Premier Glen Clark catches up on his reading at the B.C. NDP June convention in Burnaby. Was he also contemplating a cabinet shuffle?

"Clark brought four new faces into cabinet"}

Allmunt says the new cabinet must address the inadequate levels of income assistance provided to those living in poverty.

"It's absolutely critical the new cabinet connect with British Columbians on the issues that affect them in their workplaces and in their communities," adds Allmunt. "They must demonstrate how their policies differ from the agenda the Business Summit and the Liberals would inflict on our province."

Clark's new cabinet includes Sue Murray-Whitley MLA Joan Smallwood as the new Minister of Labour.

"Joan has a long-standing relationship with our union because she shares with us a commitment to fairness and justice for those who have been marginalized in our society," says Allmunt.

Allmunt also welcomed Vancouver-Mt. Pleasant MLA Jenny Kwan as Women's Equality Minister.

"As B.C.'s largest union of women, HEU has a keen interest in this government's agenda for women," says Allmunt. "And we'll be looking for Jenny's help in implementing comprehensive pay equity legislation."

Aside from Smallwood, there are three other new faces in cabinet: Burnaby-Willingdon MLA Joan Saretsky is Minister of Environment, Lands and Parks, Columbia River-Revelstoke MLA Jim Doyle takes over Municipal Affairs and former parliamentarian for health and seniors MLA Helmut Giesbrecht is Minister for the Public Service.
WHAT WE'RE UP TO

On May 17 HEU's People with Disabilities Standing Committee received the Plauneurs, Paving the Way award from the B.C. Coalition of People with Disabilities. Present at the award dinner were Fred Mazin, Crystal Williamson, Laura Mazin, Cheryl Young, Louise Hutchison, Gail Hagstrud and Bonnie Down.

continued from page 3

For the record, we were right

Health records staff at Vancouver Hospital who've been critical of management's restructuring of their department had their views validated by an external review. An external consultant's report concluded that the hospital should have acknowledged the expertise of frontline workers in the department and consulted with them more extensively before implementing changes. The report also backed up workers' claims that restructuring had led to workload problems in all areas of health records.

VGH local secretary-treasurer Doreen Plaunliss says the hospital ordered the external review in February after receiving an HEU report that documented how restructuring of health records has transformed a smoothly functioning department into one plagued by morale problems and increased rates of illness and injury.

"The report proves that enhanced consultation is an important step in making sure that the restructuring of health services will be able to serve the best interests of patients and workers in mind," says Plunliss.

It's a real contract

HEU locals across the province boycotted CKE on their workdays for eight weeks while members of Teamsters Local 213 were locked out at three Coca-Cola operations in B.C. The transitional composition broke off contract negotiations on May 31 when the union rejected its demand that 10 sales and marketing staff be removed from the union. The CKA's president called upon its 1,100 affiliates to actively support the boycott. RCP president Jim Sinclair said that CKE unilaterally tried to take away the right to be in a union for some of its employees.

But on Friday, July 23 the union and the employer reached an agreement. The marketing staff will remain in the bargaining unit, while the sales staff will choose to be in the union or not, or take a severance package. The workers ratified the agreement by 84 per cent and were back on the job on Monday, July 26. Roy Zigno, president of Local 213, said "Buy Coke now, Pepsi is non-

If it ain't broke

On June 11 HEU members at Bear Creek Lodge in Surrey held an impromptu rally outside the facility. They were fed up with scheduling changes. Care aides who had been working the same shifts for years were suddenly told they would be changing to rotating shifts. Phyllis Socrates, local chairperson, says, "People have been working the same shifts for years and have built their family lives around them. They are very upset."

A supervisor told one member whose mother has mild Alzheimer's and wants to be able to be home on one of the shifts she is being told to work— that she should put her

Negotiating the maze of red tape

ASAP's staff lend a hand in dealing with brass

VICTORIA LAMBERT says that she has always been able to belfound and relate to people of all ages. This was definitely an asset in the early 1990s when she returned to school as a 27-year-old single parent. And it also comes in pretty handy in her present job as an advocate and project coordinator for the Prince George organization called Active Support Against Poverty (ASAP).

There is a significant problem in Prince George with poverty and lack of affordable housing. ASAP strives to help people with problems they face living with poverty, leading them through the maze of dealing with government bureaucrats.

"We help people who call or come in off the street. Usually they are having some kind of difficulty with the Ministry of Human Resources," Lambert says. The small staff act as mediators, giving the clients the information they need to empower themselves to solve their problems. Often they don't know what their rights are, but they are able to help themselves once they are armed with enough information.

Lambert says that sometimes, even after the client has done the lion's share of the work, there is still a need for some support. "Then we might make a phone call or two to ministry workers so that the problem can be resolved."

They also advocate for people on income assistance who become disabled. They give them a hand at applying for disability benefits.

Even when they are successful in their applications for assistance, it is not a lot of money. Single people receive just $500 a month in income assistance. And if you are at a Level 1 disability where it is expected you can return to the workplace in the future, you receive $396. A person who has a permanent disability receives the overwhelming sum of $771.

They are expected to pay no more than $25 per shelter, which even in Prince George is not realistic," she says. "It is so hard to survive on that money."

And an important part of ASAP's work is to help people access affordable housing. ASAP is managing a project called Lower Income Urban Singles (LUIS) - 16 housing units owned by B.C. Housing. The $325 month rent includes all utilities. "This truly reflects the amount of money one receives on income assistance," says Lambert.

When the units became available, about 50 per cent of them went to older women. "We were really pleased to be able to provide a service for a segment of the population that is so often overlooked," she says.

Another project for which funding is still very tentative, but one for which the executive director of ASAP, Audrey Schwartz, has high hopes, is called Montem House: LUIS is for people who can take care of themselves; MARI is for people who are at risk of becoming homeless, which generally means they require a little more help in their day-to-day living.

A group which receives a lot of attention from ASAP staff is young people who need to access income assistance. Youth face a barrier because their parents must fill out a form claiming they are no longer financially responsible for their child. Parents are then interrogated about the possibility of taking their child back into the home. If they make even the smallest sign that they would, under certain conditions, income assistance is denied. "In my opinion, this sends them out onto the street," says Lambert. So ASAP acts as an advocate for those sometimes very young people, steering them through that maze.

During the last couple of years ASAP has managed a winter emergency shelter which has received a lot of press, so people know there is somewhere to go if they are really in need of help - not for financial assistance but for information on what the various options are on how they can access it. And that is very satisfying for Lambert and her colleagues.

Lambert is happy she moved to Prince George after she completed her degree at the University of Victoria. Her original plan was to pursue a master's degree at the University of Northern British Columbia, but fate intervened when her son's kidney condition flared up.

I had to decide whether to continue with university or focus on my son and creating a life for the two of us. I chose the latter," she says. Matt is better and Lambert says that one of the highlights of her original plan, although now she is studying for a certificate in management studies, with an eye to being involved in non-profit management in the future.

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

MOUNTAIN CLIMBER Vicki Lambert spends her working days helping people on income assistance find a way over the mountains of paperwork that governmentThrowers throws at them.
HEU ratifies social services agreement

HEU’s community social services members have voted 92 per cent in favour of an historic five-year collective agreement that guarantees wage and benefit parity with other health workers while providing bonuses and benefits to employees.

The late July ratification votes had been delayed by one month because the Community Social Services Employees’ Association, flip-flopped on an agreement setting out which HEU positions are residential care workers or their equivalent. When dispute was resolved in the union’s favour.

CSSEA had not ratified the agreement by press time.

A tentative agreement was reached May 29 after 12 weeks of job action and more than a year of bargaining. Since January, bargaining and job action had been co-ordinated with other CUPE members, BCGEU and HSA in an unprecedented show of union solidarity.

The contract provides retroactive wage increases for RCWs and equivalents to $14.45 increasing to at least $16.83 in 2002. Benefits adjustments over the next three years will also increase wages in the sector. Benefits improvements will match the community health agreement by 2002 and include employer-paid medical, dental and extended health benefits.

The contract provides retroactive wage increases for RCWs and equivalents to $14.45 increasing to at least $16.83 in 2002. Benefits adjustments over the next three years will also increase wages in the sector. Benefits improvements will match the community health agreement by 2002 and include employer-paid medical, dental and extended health benefits. Group RRSPs and community health-level vacation, accumulated sick leave and special leave benefits are also in the contract.

Community social services members gain access to a facilities-level LTD plan this fall and by 2002, at the latest, its costs will be completely employee-paid.

And these workers also gain access to a range of labour adjustment programs and on Oct. 1, 2000, 12 months of membership security will be available in the event of layoff. Complete parity with the community health sector is guaranteed by 2004.

In a sector dominated by contracted services, the new collective agreement will be protected through new successorship provisions. “Our members have worked hard for this outcome and it shows,” says HEU secretary-business manager Chris Allison. “It’s a victory shared by the workers themselves and the rest of HEU’s membership who provided concrete support throughout bargaining.”

Legislation to enable joint trusteeship of pension funds

The NDP government passed a bill on July 13 which will enable public sector workers — including those in health care — to have a direct say in how their pension plans are managed.

Right now the trusteeship of public sector pensions in B.C. is held only by the employer — the government. The Public Sector Pension Plans Act enables the trusteeship to be jointly shared by the employer and the workers.

The Act consolidates and modernizes statutes governing four public sector pension plans, providing a mechanism through which workers are able to have an equal say in the management of their pension funds. "With joint trusteeship it will be impossible for future governments to treat pension surpluses as another source of revenue," says HEU secretary-business manager Chris Alliston. "Instead, health care workers will have a say over how their hard-earned pension contributions are managed with a view to safeguarding and improving future pension benefits."

Alliston says the new Act would prevent a government raid on pension surpluses such as that conducted by the Ottawa Liberals on the federal public sector pension plan earlier this year where 700,000 workers were powerless to stop the federal government from stripping $32 billion in surpluses from their pension plan. When she presented the bill for second reading Minister Joy MacPhail said, "It has long been recognized that a pension benefit is a form of deferred wage. As such, it makes abundant sense to allow plan members to be securely and directly involved in the co-management of their pension plan."

In other provinces, shared control of public sector pensions has been a reality since the early 1990s. The Hospitals of Ontario Pension Plan and the Canadian Blood Services Plan are two.
Organizing key to shared struggle

by Fred Munin

THIS SUMMER, our sister union in Pennsylvania, Local 1199, celebrated its 25th anniversary. I was privileged to attend their largest ever delegate assembly, where 500 delegates celebrated their victories and debated how to build an even stronger union. 1199's tremendous membership growth—70 percent over the last 25 years—made a dynamic union, constantly in an organizing mode and in touch with the front-line struggles of workers fighting off corporate giants like Beverly and Benedictine.

Our American sisters and brothers are fighting for universal health care. We have a responsibility to them and to ourselves to defend and preserve Canada's Medicare system. They need to know about our struggles, and we need to learn from their fight against powerful adversaries.

There is no single payer (government) Medicare system in the U.S., and 43 million Americans go without coverage. Although employers provide some benefits, most people supplement services through costly private contracts with health management organizations (HMOs) whose primary focus is profit at the expense of service delivery.

This tremendous corporate power and greed has generated a unique blend of solidarity—all disciplines recognize that no one group can succeed against the giant 1199's 14,000 members include health-care professionals, LPNs, RNs (5,500 of them), tradespeople, maintenance workers, cooks, housekeepers, etc. Their national affiliate, the Service Employees International Union (SEIU), counts 15,000 physicians, who will compulsory bargain unless the hospital companies' efforts to limit their scope of practice, as part of its 1.3 million members.

Like 1199, is committed to social justice. But in a state where anti-scal legislation is the norm and the mandate of a master agreement and co-ordinated bargaining is considered a threat to the whole free enterprise system, the union's strategy must deal with corporate market control where profits come before people. While we focus on the social determinants of health—poverty, unemployment, level of education, the lack of affordable housing—to build bridges with community activists, in Pennsylvania these connections are essential to union survival.

We have a 33 percent overall unionization rate in B.C., including the vast majority of health care workers. In the States, only 10 percent of their 11.1 million health care workers are organized. In Pennsylvania, 80 percent of nursing homes, 70 percent of the 281 hospitals and all 16 hospitals in Pittsburgh are non-union.

This competitive model is the corporate master plan for Canada, where a third of our health system is already privatized. We have much to learn from 1199 about being vigilant, passionate and strategic in resisting privatization.

As our sisters and brothers struggle for universal health care, we can share our experiences and suggest ways to improve upon Medicare.

Medicare as including administrative savings and economies of scale.

Bank CEO supports universal Medicare

by Ben Swankey

Something strange, but nonetheless welcome, happened in Vancouver last April. Speaking before the Vancouver Board of Trade, A. Charles Baillie, chair and chief executive officer of the Toronto Dominion Bank, came out strongly in support of our publicly funded health care system. As far as I know, he is the only corporate head in Canada who has done so.

Baillie described himself as the son of a small town doctor whose compassion in the days before Medicare was top off all that he knew in the way of the sick having to choose between supporting their life savings or preserving their health.

"It is high time that we in the private sector went on record to make the case that Canada's health care system is an economic asset, one that today, more than ever, our country dare not lose," said Baillie.

"If there is one priority that brings Canada together from coast to coast, it's the desire to see our universal health care system preserved."

Rebutting the advocates of a two-tier health system, Baillie said that while he supports the market system, "It is great work in the context of universal health care." He described the advantages of Medicare as including administrative savings and economies of scale.

Baillie also called for changes in our health care system, including more beds and better home care and community care; treating people who now go to emergency in community clinics; and the addition of multidisciplinary clinics that would operate on a seven-day week and provide a full range of health care; more research and resources for illnesses that will affect our growing elderly population such as diabetes, osteoporosis and Alzheimer's disease; and improvements for nurses whose numbers will need to be increased by 110,000 in the next decade.

Baillie's speech, in sharp contrast to the views of some of his corporate colleagues, will be welcomed by the majority of Canadians who support our publicly funded health care system.
Labour

NOTEWORTHY NEWS ABOUT ISSUES AFFECTING WORKING PEOPLE HERE AND ABROAD

British union launches pay equity case

In a legal action brought under the auspices of the Equal Pay and Equal Treatment directive from the European Union (EU), Britain's largest public sector union, Unison, has launched a pay equity law suit against a group of employers (health authorities) that it claims are paying women less than equivalent roles done by men. The action, which seeks an order for a pay review, is the first of its kind in the UK.

"Health service women do some of the lowest paid jobs but are paid less than their male colleagues," Unison argued. "Women are the main employers in the health service and receive less pay. This is unfair and must change." Unison regional officers Ross Butterley said that health service workers do some of the lowest paid jobs and that the value of their work has never been recognized. He also noted that it is difficult to provide services to patients in a timely manner due to the lack of staff.

The employer and the union have agreed to appoint an independent tribunal to decide on the matter. However, the union has reserved its right to continue legal action.

Pattison worker wins equal pay

United Steelworkers has won an arbitration on behalf of a young mentally-challenged worker who was being underpaid by a company owned by wealthy West Coast wheeler-dealer Jim Pattison. The worker is employed as a Junior Blender at Monzabella Packaging in Burnaby, Ontario. Last September, he approached his union, Steelworkers Local 9052, questioning why he was being paid $1.31 an hour less than other employees in his job classification.

The union filed a grievance, which Monzabella fought all the way to arbitration. The company even attempted to use the worker's agoraphobic parents as a way to influence him into withdrawing the grievance. In a decision released in May, the arbitrator agreed with the union that the worker should be paid according to his job classification, and not on the basis of the tasks within that classification the company chose to assign him.

"The company has not appealed the decision, which orders Monzabella to pay approximately $2,000 for wages earned since the grievance was filed. Monzabella Packaging is part of a global network of companies owned by Pattison, the Vancouver billionaire who boasts a total of 20,000 employees world-wide. This is an important victory for workers and for the Steelworkers' Legal Aid Committee. This is an important victory for workers and for the Steelworkers' Legal Aid Committee.

CUPE flight attendants settle

Strong strike vote, united membership, spurred employer to address issues

CUPE Flight attendants and Air Canada concluded a tentative agreement after a series of negotiations. The deal, which includes a 10% increase in wages over the next three years, was reached after months of difficult bargaining. The agreement includes improvements to the working conditions of flight attendants.

The parties agreed to begin negotiations on a new contract in mid-2023, and will continue to work on a resolution to the current dispute.

"We are pleased with the outcome of the negotiations," said CUPE representative. "This agreement will improve working conditions for the flight attendants and will help to resolve the current dispute."
This innovative approach proposes an integrated public health system that applies the best features of institutional and community care, fully utilizes the skills of all personnel and builds in community and consumer participation.

Institutional care offers the best standards of care, while community care is more familiar, accessible and culturally appropriate. But the two systems are often fragmented and not integrated.

The new approach is to combine the best of both. The concept is to develop programs and services that are community-based but have trained staff and are offered in a variety of settings, including hospitals.

The key is to develop a system that is flexible and responsive, that can adapt to the needs of the community and that can be managed by trained personnel.

This approach is being tested in a number of pilot projects across the country. The goal is to develop a model that can be implemented in other communities.

Blended care on the scene

Community health in Quebec

The Quebec government has been working on developing a new health care system for several years. The system is designed to be more efficient and to provide better care to residents.

The new system is called the "Blended Care System." It combines the best features of institutional care and community care, and is designed to be more flexible and responsive to the needs of people.

The Blended Care System is based on the idea that health care should be provided in a way that is convenient and accessible to people. The system is designed to be more efficient and to provide better care to residents.

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MAKING THE MOST OF THE HEALTH CARE TEAM

This innovative approach proposes an integrated public system that applies the best features of institutional and community care, fully utilizes the skills of all personnel and builds in community and consumer participation.

In a blended care environment, a non-hierarchical multidisciplinary team like the one above would deliver every health program to its clients 24-hours-a-day.

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Transforming hospitals
A respectful workplace culture

Hospitals are notoriously undemocratic workplaces. Their top-down organizations gives managers and doctors undue power; meanwhile, other personnel — clerical and technical staff, nurses, other health professionals — feel that their skills and knowledge are undervalued and underutilized.

This hierarchical culture is stressful to morale, wasteful of resources and it hinders patient care. In 1994, U.S. researcher Linda Aiken studied hospitals where nurses enjoy significant control over clinical decisions. These hospitals have a mortality rate around five per cent lower than other hospitals.

With blended care, health workers are empowered. Staff are encouraged to work in teams. And everyone's perspectives on good work processes and good care would be listened to and respected.

Caring values

Hospitals place too much emphasis on cost savings, technological investments and streamlining. Senior administrators often seem to lose sight of the enormous benefits of human caring.

Yet good research tells us what we already know: when health workers are given the time to pay attention to patients — by simply talking with them, expressing interest, offering information and giving emotional support — patients are helped to get better.

Institutions practice a false economy when they value technical and clinical data over human needs. Blended care would recognize and build on the health benefits of human connections within hospitals, and between hospitals and communities.

A new role

Blended care challenges hospitals to rethink their role in the health care system. Posing two questions:

1) How can a hospital's strengths and stability be harnessed for pop-
A new vision for health care

would encourage practical connections between hospitals and community-based care. Blended care is a systemic approach to health care that:

- includes the best features of institutional and community-based care;
- changes hospitals into more democratic workplaces;
- provides holistic care with a psychological focus and offers a range of preventive and monitoring programs;
- uses non-hierarchical, multidisciplinary teams;
- respects and utilizes the skills of all workers;
- builds in genuine community and consumer participation;
- acknowledges social and economic factors are key health determinants of Canadians.

Copies of the discussion paper, Blended Care: Blending the Best of Institutional and Community Care, Making the Most of the Health Care Team, will be available in September. Please contact Gail Poquette at (604) 734-3431 if you would like a copy.

Blended care on the scene

Community health in Quebec

All provinces have community health centres, but only Quebec has a full and integrated network: approximately 100 CLSCs (centre local de services communautaires).

The first CLSCs were pioneered by community groups 30 years ago. As Quebec established its Medicare program, CLSCs gradually became the focal point for community-based services. In the mid-1980s, the centres took up the home care mandate and became one-stop shopping facilities for local health and social services.

All CLSC personnel are unionized. The centres employ many RNs, care aides, social workers and LPNs, but only around seven or eight physicians.

In the 1980s, CLSCs became the cornerstone of Quebec's move to the community and the centres were literally moved from the hospital system to CLSCs. Transferred employees retained their union membership, seniority, wages and benefits. People in Quebec are worried that mergers and restructuring are modernizing the CLSC's ability to provide health promotion and home care. Nevertheless, Quebec still leads the country in having a robust community health care movement.

On Lok senior health services

San Francisco is home to an inspiring non-profit program for frail elderly people. On Lok was launched in 1973 as a day health centre located in a renovated downtown nightclub. Today there are five centres serving 500 high-risk seniors. The Cantonese word On Lok means, abode of peace and happiness, reflect the program's philosophy.

The average age of On Lok's clients is 84, and many are at high risk because of poverty and isolation.

Health promotion is the cornerstone of the program. Participants must visit On Lok at least once a week; most come at least three times. They are offered a nutritious meal, exercise and companionship, as well as a range of services such as rehabilitation and dentistry.

Due to this frequent contact and monitoring, clients are quickly treated if their chronic condition flares up—and hospitalization is usually avoided.

On Lok is the model for a multidisciplinary team of health care personnel, all of whom receive generous salaries and benefits. Care aides play an especially prominent role. On Lok employs 30.8 aides per 100 patients. The program has two salaried, full-time doctors and two part-time physicians on call 24 hours.

The program uses over 50 per cent of its budget for home care and day programming, and only 16 per cent for institutional services. On Lok has one of the lowest institutional rates of all services. On Lok's clients receive an overall institutional rate of only six per cent. At least 10 per cent of all Canadian's over 75 are in institutions.

By spending money on personnel, On Lok program actually saves money by reducing acute care admissions.

JUNE / JULY 1989 • GUARDIAN
Teacher provides a new twist on bilingualism

By Linda Forsythe

I spend this past year working as a Capilano College instructor in the Basic Education Skills Training (BEST) program with HEU members at Vancouver General Hospital. The program is offered on-site and students attend classes during their work hours. One key element to the program is the training of other VHGH workers who act as tutors. During the year 35 students attended the program and received support from one of a dozen tutors. The students, as adult learners, set their own learning goals and the tutors' job was to assist them in meeting those goals.

I believe that one of the reasons the program works so well is that it is largely conducted by workers for workers. VHGH has a common set of workplace principles and practices, and both students and tutors share this experience. As well, both groups are members of HEU and can give information and support to each other around workplace issues and problems.

Often, when students practiced writing memos and workplace incident reports, discussions ensued about rights and responsibilities on the job. Students, as well as tutors, had a great deal of information and suggestions to offer one another. The BEST program (where tutors often held more power than their students) was shifted in these cases, and students saw themselves as people with knowledge and skills.

In my opinion, another reason the program worked so well con-

The environment was a safe one for the students'

cern issues of social class. In workplace education programs, working class people get a chance to gain new skills and information in a working class environment. I think that the environment was a safe one for the students – and they responded to it.

Although many of the reading and writing skills that students learned had to do with personal goals, like filling out an accident report or learning math so they can help children with their homework, some students were interested in taking more academic studies. Academic studies presented the students with another language to learn. Standard English that is used in colleges, universities – is the language in the classroom. I watched as students grappling with the way information was presented and ideas developed. They needed help to understand the text in light of the way the language was used.

As well, much of the content was foreign to them. I reflected on my own discomfort, when as a child I read stories about people who had no relation to my life. My father didn't go to work in suit and tie; he wore coveralls and boots. I started asking myself what these readings had to do with my life.

I faced the same dilemma with the students in the BEST program. I have resolved this issue for myself in the following way: in order for students to gain the information and skills they desire, some will be required to learn Standard English. This doesn't mean that they have to 'give up' their working class English, but rather, see themselves as learning a new language and learning how to use it.

It is an exciting one, challenging all who were involved to learn new and different things.

Linda Forsythe is an adult education instructor who presently teaches at Douglas College.

Okanagan hosts first Nursing Team forum

O n JUNE 28 the HEU Nursing Team held its first forum in Kelowna. The idea is to hold nursing team forums in each of the union's regions over the next two years. Forty nursing team members from as far away as Ashcroft took full advantage of the opportunity to talk about what is happening in their facilities, what they would like to see happen and the obstacles they encounter. Members of the Nursing Team Committee talked about the new $5 million nursing team initiative.

An important component of the new initiative is education. Delegates agreed that there is a need for education in community colleges so that LPNs and care aides can upgrade their training and education without having to leave their communities.

There is a special need for bridging programs which care aides can use to certify as LPNs, if they wish. The "LPN Access" curriculum allows care aides to become LPNs with eight months of training instead of going through the entire 12-month program. Okanagan University College is willing to offer the program if employers demonstrate the need and care aides the interest.

In stark contrast to other areas, the South Okanagan-Thompson cannot fill their LPN positions. This is a sure indication of the necessity for Okanagan University College to increase its programs for LPNs and care aides. The participants agreed that employers need to be proactive in going to the college and the Ministry of Health, stressing this need.

Activation and rehab assistant bridging courses which build on care aides' existing skills and knowledge are all lacking.

As a result of the nursing team initiative, a regional committee was struck with representatives from South Okanagan, Okanagan-Similkameen and the Thompson health regions. They will target and coordinate where and how training funds are dispersed in the region.

Members heard reports about what challenges each region faces.

Some facilities are forward-thinking in their utilization of nursing team members, while others certainly aren't. As LPNs in the Thompson region are doing, nursing team members can use facilities with good utilization to press for better facilities in the same region to improve their practice.

There will be one forum in each region over the next two years. The second forum will be in the Lower Mainland in October.

Québec nurses backed in fight

New Canadian Labour Congress president Ken Georgetti issued a message of support and encouragement to the president of the Québec Federation of Nurses (Fédération des infirmières et infirmiers du Québec) on behalf of the 2.3 million members of the CLC.

"The back-to-work legislation brought in by the Québec government is an attack on the basic rights of workers to collective bargaining," Georgetti said. "It's the kind of attack that has become all too common on the part of the governments in Canada at the provincial and federal levels," he stated.

The 47,500 member federation began a province-wide strike on June 20. The nurses were seeking a 13 per cent wage increase over three years, which includes a 10 per cent catch-up to other public sector employees. The government refuses to budge from its offer of five per cent increase over three years. "It's obvious that the government has chosen to use a series of judicial attacks instead of negotiating in good faith. If our right to free collective bargaining is denied, we won't take it lying down," said Henri Parent, Québec Federation of Labour president.

The government called the strike illegal and the legislation passed by the Liberals in 1986 and previously used against RNs in 1989. The workers can lose one year of seniority and two days of wages for each day of the strike.

Because the government would not budge on the issue of RNs while they were on an illegal strike, Québec RNs returned to work for 48 hours on July 13.

The resulting tentative agreement did not make the rank and file happy. The government had not moved from its original five per cent offer, promising instead to "truly further wage hikes." On July 21 the RNs voted 75 per cent to reject the offer.

At press time, union delegates were meeting to plan their strategy.
Union activists take messages to their hearts

A

S THE Guardian goes to press, Summer School 1999 is in full swing. So far, it has been an experience to remember for many HEU activists. The theme "Taking Back Our History" speaks to the experience of so many that there was no difficulty getting into the rhythm.

Participants have just concluded their core course with its heavy emphasis on the study of class structure, labour history, equity issues and how local trade unionism ties into the big picture of global economics. They will use that foundation as they now go into their elective workshops.

The night before classes began, the Jubilee Action Group kicked everything off with songs and drama illustrating the history of the Jubilee movement — an ancient phenomenon, but also a new one. As the millennium draws to a close, people around the world are saying we are not going to accept things the way they are anymore. This is manifesting itself in Canada as a fight against homelessness, and in some other parts of the world as a call for the cancellation of "odious debt."

Premier Glen Clark gave a relaxed and wide-ranging address on Thursday night focussing on the challenges of globalization to B.C.'s economy. And he challenged public sector unions and his own government to more proactively defend the importance of taxes in funding critical public services.

He talked more than an hour of questions and answers. Donna Dickson of the Hero local told Clarke that he needs to visit B.C. reserves, because although there is some acknowledgement that the Natives' policies have generally been good for First Nations peoples, there is a low voter turnout on the reserves.

The Winters Committee hosted a breakfast to start off the third day. That evening, two women, Monica Urutia from the Philippine Women's Centre and Linda Moreau from End Legitimated Poverty, made a deep impact on their audience.

Urutia talked about what it is like to live in poverty in this society — the effect it has on people and their relationships.

Moreau talked about what it is like to live in poverty in this society — the effect it has on people and their relationships.

Urutia said how one of the Philippine main exports is her own people — 10 per cent of the population goes abroad to work for poverty wages, but sends back $7 billion in remittances a year to boost the country's economy.

Both women told participants that policies that lower income assistance rates and encourage a low-wage, underclass of caregivers serves to undermine unionized work and public services.

Jim Sinclair, new president of the B.C. Federation of Labour, challenged participants to forge a united front with other trade unions and community groups to defend and improve our public health care system.

He argued that Medicare is a fundamental social right that does not discriminate on the basis of wealth. And while there are problems in the system, like surgery waiting lists, citizens do receive the care they need. "For 40 million Americans, the waiting list is forever. It's that simple," said Sinclair.

New agency hires director

THE NEW Occupational Health and Safety Agency — with its mandate to develop plans promoting better health and safety practices — has chosen its founding executive director, Dr. Annabelle Yost of the University of Manitoba. She was chosen from a field of worthy candidates and her appointment was made without a search.

Yost is a medical doctor with a specialty in occupational medicine. And she has extensive experience with organized labour. Even before she graduated from McMaster University, she was teaching a health and safety course at the Ontario Federation of Labour. Shortly after graduation, she helped to establish the first labour-controlled occupational health clinic for Local 1005 of the United Steelworkers of America in Hamilton, Ont.

Her academic credentials include further degrees or diplomas in epidemiology, occupational health and safety, community medicine and occupational medicine from McMaster, the Royal College of Physicians and Surgeons of Canada and the University of Toronto.

She moved to Manitoba in 1985 to work with the Manitoba Federation of Labour’s Occupational Health Centre. While there she established a comprehensive occupational health program for health care workers at Winnipeg’s Health Sciences Centre.

Yost is enthusiastic about her new responsibilities. "I plan to use my 20 years of experience in occupational health to work with both labour and management to identify the causes of the workplace injuries and illnesses affecting health care workers, to assist in the formulating and implementing of effective solutions and to evaluate our efforts so that we can continue to improve working conditions for health care workers in British Columbia and beyond," she says.

And her experience of having served with international commissions on occupational health and safety will prove to be a valuable asset.

HEU secretary-business manager Chris Allmunt, who was on the selection committee, says "We are indeed fortunate to have found someone of Dr. Yost's background and qualifications."

The new agency will be jointly administered in much the same way as the Healthcare Labour Adjustment Agency and will be fully operational by Oct. 1.

Disability package is underfunded

HEU is questioning the implementation of the facility sector LTD package after reviewing preliminary figures that show a lower than expected number of claimants are receiving benefits.

A key contract improvement in last year’s facility bargaining was a package of LTD benefit improvements worth $19 million in each contract year. But late-June figures indicate the true value of benefit improvements fall far short of the mark.

In particular, the Supplementary Monthly LTD Benefit — targeted at long-term LTD claimants not eligible for early retirement or rehabilitation — benefits only about 520 claimants out of 770. And more than half of the beneficiaries are receiving an adjustment of $50 or less per month.

Many existing claimants are being assessed low or no supplementary benefits as a result of the impact of offsets such as Canada Pension Plan payments on the benefit calculation.

"Our agreement was based on high actuarial figures provided by HEARCO and on a written commitment that $19 million of benefits would flow to our LTD members," says HEU secretary-business manager Chris Allmunt.

"We’re prepared to take whatever steps are necessary to ensure our LTD members receive the justice our union fought for and won last year."
Alternatives to be explored
Public opposition to public/private partnerships in long-term care bears fruit on Central Vancouver Island

The B.C. cabinet has approved a Health Ministry proposal to explore alternatives to the private operation of multi-level care facilities. The move is capped several weeks of intense activity in HEU's campaign against public-private partnerships in seniors' care.

At its June 17 meeting, cabinet gave approval-in-principle to two pilot projects in constructing care homes that incorporate not-for-profit operations integrated with affordable seniors' housing.

It's a small but significant departure from the two-year-old P3 policy which restricts the development and operation of new multi-level care facilities to for-profits.

And the cabinet动作 came one day after a public meeting organized by HEU in Nanaimo that attracted more than 30 seniors, health care workers, affordable housing activists and students to oppose plans for a P3 seniors' care facility in that community.

"We need to promote publicly accountable non-profit alternatives," HEU president Fred Murtha told the meeting, "rather than depend on P3 models that limit our ability to care for seniors in new and creative ways."

But our fight is far from over.

Meanwhile in Kelowna

May Bennett seniors' facility in the Kelowna suburb of Rutland is near and dear to the heart of the community. So much so that they formed the Friends of May Bennett to fight to have the aging facility rebuilt on-site and be publicly owned and run.

When the government announced that Kelowna was going to be one of two communities in B.C. to build a new seniors' facility under a public/private partnership, the alarm bells went off.

The Friends, made up of members of the community, residents, their family members and staff - including many HEU members - called for public meetings, staged events and attended regional health board meetings.

Marti Pendaloske, chair of the Okanagan Similkameen Regional Health Board, said at their June 16 meeting in Princeton, that the RHB could not say no to public/private partnerships. "To do so would be to say no to beds. The government has the last say, it is the government who should review the policy," he said.

The announcement of the award of the bid for the 100-bed facility was expected at that meeting, but was in fact made two weeks later.

Allan Claridge, spokesman for the group, said at the same meeting that there is no reason to change the structure and governance of May Bennett. "The welfare of the patients and the staff, effective use of taxpayers dollars - those already exist at May Bennett," he said.

They even submitted a proposal to redevelop May Bennett. After all, they argued, the land that the facility sits on already belongs to the government.

In the end, the contract was awarded to Pacific Sun, which owns four other (private) Kelowna long-term care facilities. The plans for them will be the 42 independent living condominiums, 34 supported housing and assisted rental suites with "petal or complete house support services."

"HEU fears that this will not be affordable housing," says the union's secretary-business manager Chris Allutt. "More than half of the women in B.C. over 75 have annual incomes of less than $20,000 per year. Will they be able to afford those condominiums? My guess is no, they won't."

At the June 16 meeting, board CEO Murray Ramsden said that May Bennett would not be impacted by the building of another facility so, the Friends will continue fighting against the facility being rebuilt by a private company.

This may provide some consolation to May Bennett aide Debbie Finlay, one of four people including Claridge, his son Don and BCNU member Judy Jeffrey who made presentations at the meeting. But, she said, they have already been struggling with the threat of closure for eight years, and these are not the best circumstances in which to care for people.
Pitching the big business agenda

by Mike Old

The B.C. BUSINESS Summit takes its campaign for corporate tax cuts, gerrymandered labour and privatization of public services on the road this fall. A "Summit Panel" chaired by Board of Trade director Carole Taylor will visit more than a dozen communities to communicate the Business Summit's goals and "seek public consensus on economic issues."

Those goals include $1.5 billion in tax cuts mostly targeted at the wealthy and corporations, a wholesale attack on the labour code and employment standards and an aggressive program to sell crown assets and privatize services in hospitals and schools.

"There's a striking resemblance between the Business Summit agenda and Gordon Campbell's 1996 election platform," says HEU secretary-business manager Chris Allbutt, "including proposals to reduce the minimum wage, end the university and college tuition freeze and repeal anti-scal legislation."

Allbutt says Campbell and his Howe Street allies aren't being honest with British Columbians about who benefits from their schemes and blueprints for B.C.'s economy. "About 90 per cent of the tax cuts proposed by the Business Summit benefit fewer than 10 per cent of B.C. taxpayers," says Allbutt. "But every British Columbian will pay for these cuts through the loss of public services and privatization of their health care system."

"B.C. already has the least public sector in the country," says Allbutt. "That's why Campbell's claim that a Liberal government could preserve health care and education spending while implementing these tax cuts for his friends lacks credibility."

In fact, the Business Summit recommends "greater use of outsourcing and external contracting by all provincially funded public sector bodies" including hospitals and schools.

And the Liberals' health care policy specifically targets the employment security provisions in health sector collective agreements while promoting to replace health care workers' bargaining rights with an "alternate dispute mechanism."

The Business Summit has also targeted B.C.'s labour and employment standards laws for special attention. They'd like back the use of scabs and replacement workers in the place of the signing of union cards in organizing efforts.

And the Liberals and their Summit allies would lower the minimum wage for young people. "People working for today's minimum wage are seldom able to support themselves independently," says Allbutt. "The creation of a special class of people who earn even less than this minimal amount is an abhorrent notion."

"Today's Business Summit agenda represents tomorrow's British Columbia under a Gordon Campbell Liberal government," says Allbutt. "It's critical that health workers and other union members forge a strong coalition with community groups to undermine the designs Campbell and his big business friends have on health care and other public services."

This fall's Summit tour is a dry run for Campbell's election platform," adds Allbutt. "We'll need to work hard across the province to make sure the real implications of the Business Summit agenda on our communities is understood."

So far, the Business Summit panel plans to visit Campbell River, Castlegar, Cranbrook, Fort St. John, Kamloops, Kelowna, Nanaimo, Pittetten (Sept. 21), Port Alberni (Oct. 22/23), Prince George, Prince Rupert, Terrace (Sept. 18), Vancouver, Victoria and Williams Lake.

... and HEABC's on the team

It's no surprise the Board of Trade, Chamber of Commerce and Business Council are on the list of 40 organizations endorsing the Business Summit's goals of corporate tax breaks, program cuts and gutting of labour laws. But did you know the Health Employers Association of B.C. is also on the list of endorsers? It's to be blunt, the organization representing public health care employers has no business participating in an agenda to dismantle and sell off health care piece by piece," wrote HEU secretary-business manager Chris All butt in a letter to HEABC. "It's incompatible with the public nature of Medicare as defined in the Canada Health Act and in this province's Medicare Protection Act."

Allbutt questioned HEABC's commitment to new privatization and contracting out language reached in the last round of bargaining given the Business Summit goal of more outsourcing and contracting out in hospitals.

But at least one HEABC member organization has taken exception to HEABC's endorsement of the Business Summit's goals. The Central Vancouver Island Regional Health Board passed a resolution earlier this year asking the HEABC to withdraw its name from the list of endorsing organizations. HEABC is the only public sector employers' organization to endorse the Business Summit agenda.

News that didn't make the cut

Once again the Vancouver Sun is very, very silent when it comes to publishing the results of an investigation that was spurred by the newspaper's allegations that the NDP masterminded a conspiracy of dirty tricks to fight recall campaigns in Prince George, Slocan and the Comox Valley against Paul Martin, John Stuntz and Ron Davis respectively. Forensic accountant Ron Parks was supposed to dig up all the dirt, but he didn't. Because there was none.

As it turns out, the investigation discovered only minor reporting errors - on all sides. As chief electoral officer Bob Patterson explained, "The unique and unusual nature of the legislation may have contributed to the errors and misunderstandings."

Patterson reviewed the report, along with the B.C.MP and a special prosecutor. They have recommended no criminal investigation, prosecutions or any other penalties be taken.

While the paper glibly admits there were errors on both sides, and that the nature of the legislation made it difficult to avoid such errors, they have still chosen to report only on errors made by the NDP or third parties opposed to the recall campaign.

The B.C. Federation of Labour "is stunned by the Sun for spending $2,886 to help volunteers travel to help on the campaigns, but nary a word about Parks' findings that the B.C.'s office of the Canadian Taxpayers Federation spent $2,895 promoting the recall campaign in B.C."

The Vancouver newspaper seems to be unwilling to live up to its obligations to report fairly on matters of public concern. It's worth remembering that the Sun is hardly a disinterested party in these events. The provincial NDP continues to pursue legal action against the newspaper for its blatantly unfair coverage of the story. Parks' report certainly strengthens the NDP's suit.

But the damage is done. Most people will never know what really happened, because if the mass media refuses to report it, who will?

BCFL Bulletin/The Provincial C/ALM
A warm welcome to new members

HEU's family has grown a little bigger over the last few months with new members in every sector of health and community social services.

Workers at two not-for-profit facilities providing seniors' housing and care now call HEU home: 52 workers at Waverly of Chilliwack and 112 workers at Crescent Gardens in South Surrey. In Campbell River, 14 new members at Crawford House are proud positive that community social services workers need their newly negotiated successors.

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Support Program and two mental health group homes in Langley: Brookwood Court and Vel Roy Lodge. New members at Penicton's Flora House and Penicton Health Centre also provide mental health services.

HEU's Red Cross local at Canadian Blood Services has added 1700000 to its ranks while 24 members at the Victoria Chinatown Care Centre will soon be part of the facilities subsector.

Welcome all!

HEU AT WORK' photography contest

Are you a frustrated shutterbug? Do you want your work seen by the 30,000 members of B.C.'s highest circulation health care publication? This is your big chance for some real exposure.

As the century draws to a close, the Guardian wants to capture on camera HEU members at day deliver health care services in hospitals, long-term care and in the community. We're assembling a photographic record — a slice of work life — of frontline workers across the province.

We want you — HEU members — to take snapshots at work and send them in to the "HEU at Work" photo contest. A professional photographer will judge entries and the top three will appear in the final Guardian of the millennium. There will be small prizes, too.

Common sense should prevail. You need to have the okay of your supervisor before you start snapping away, and ask people if it's all right to take their picture.

Contest rules:
- entries open to HEU members only
- limit of two entries per person
- submit black and white or colour but photos no larger than 7" by 7"
- photos must feature HEU members at work
- include a brief caption which includes the name of people who appear in your photograph
- you should get the written permission of clients, residents, patients and workers that appear in your photographs as well as contact telephone numbers
- entries must be postmarked by October 29, 1999 and mailed to HEU Guardian Photo Contest, 2004 West 10th Ave., Vancouver, B.C. V6J 4P9

Entries will become the property of HEU's communications department. We reserve the right to use any photographs in the Guardian, HEU newsletters or promotional material, whether or not they are prize winners. Photographers will be credited, however.

Coffee break

Media scoop

Rarely do the media talk about themselves, yet newspapers, radio and TV have an enormous impact on our society. And it's the managers and senior journalists at these outlets who decide what gets reported and what doesn't. So Vancouver's Guerrilla Girls is launching an Internet rumour mill about B.C. newspapers. While this summer called The Letter to be located at www.guerrilla-people.org. GAI wants to uncover the editors who routinely kill stories to promote their ideological goals, and expose the effects of corporate downsizing. It's getting on the morale and ability of newspapers to do the job of informing the public.

Doh!

Matt Groening may be the "one silent heros of popular culture." (Melrose Jones interview, March/April 1999) but he's definitely not a hero to the American Labour movement, according to Tom Rice, president of the Motion Picture Screen Cartoonists Local 839 in Hollywood, California. In response to the Mother Jones article, Rice writes: "The Simpsons began in the Kiski Cupano animation studio, run by Gabo Cappo, who told the Los Angeles Times: 'I'm never going to sign with a union. If they vote for it, I'm not going to hire them.' I can lay them off and I'll take the work to Hungary. I'll take it to Japan." Is this true? Will Homer later move to Film Roman, which sends the bulk of its work to be drawn and painted by low-wage artists in Korea and the Philippines? It pays their work photographers well below union minimums.

Lights out for Lady with the lamp

Health workers belonging to the United Kingdom public sector union, Unison, voted unanimously to ask the International Council of Nurses to move international Nurses' Day from May 12, Florence Nightingale's birthday, to May 21, the birthday of Lizzy Fry who founded the Institution of Nursing Sisters several years before Nightingale set up her own nursing team.

Delegates say Fry is a better representative of modern-day nursing than Nightingale. Fry — best known for her work with female prisoners — led reforms in the hospital system and helped improve the treatment of the mentally ill. Nightingale — whose hospital was set up with family money — believed nurses should be subservient to doctors, was against registration of nurses, opposed the three-year formal training for nurses, and did not see mental health as a field for nurses.
Care aide retires after 33 years
Bertie Van Eldik, retired in April after 33 years as a care aide at Packeridge Hospital and Holywood Manor.

"It was hard to say goodbye," says her co-workers. They told the Guardian that Bertie plans to spend her retirement travelling with husband Bill in their new motor home, gardening and visiting with her three children and six grandchildren.

Activist retires from New Vista
Also retired is Eva Wullenberg, former chairperson of New Vista, which she helped bring into the HEU. Eva also served as vice-chairperson and was a key spokesperson throughout her 20 years at New Vista, in advocating for the contract rights of fellow workers. Eva also enjoyed speaking out at HEU conventions.

As for her retirement, Eva will spend more time with her husband, Sonny, and the rest of her family.

Retire to the road
Yaculta Lodge’s Helen Pornikow is turning her attention to travel and relaxation after almost 25 years as an HEU activist. Helen joined HEU at Trail Regional in 1975 and then moved on to help organize Columbia View Lodge. She’s worked as a residential care attendant at Yaculta since 1986.

With the best wishes of her fellow members, Helen plans to soak up the culture and history of Central and South America and generally catch up on the good things in life.

In Memoriam
Elaine (Kope) Malarvortof passed away in April after a brief struggle with brain cancer. Elaine worked as a care aide and activity aide at Amekla Care Centre. She will be sadly missed by her co-workers at the Parklea local who say her kindness and geniality touched many of the people that knew her.

Lee Perkins of the Prince George CUPE died June 2 at the age of 52. Through her work as a community access worker, Lee’s compassion for the people she served shone through. She had a powerful voice in the community and often performed miracles by knowing exactly who to approach to get results that no one dreamed possible.

Although her life was cut short, Lee touched the hearts and souls of hundreds of people and is truly missed by her fellow workers and the clients she so compassionately served.

New staff
HEU has bolstered its service capacity with the addition of four new Reps in the Provincial Office.

Jennifer Whiteside brings 10 years of advocacy and organizing experience to HEU from her work in the education sector. She’s an active member of the women’s movement and a long-time CUPE member, with an academic background in labour history.

John Hardie worked almost every job in the building except nursing during his 16 years as an active HEU member at New Vista. Asked what he does in his spare time, John said “What spare time?”

Erik Paul has been working as a servicing rep at HEU since June 1. She worked for 10 years for the Canadian Union of Postal Workers, first as a union rep and then as the regional grievance officer for the Pacific region. She’s originally from Vancouver, but she became involved in CUPE/SEIU while serving as a laborer in Edmonton. She enjoys working at HEU and appreciates everyone’s helpfulness.

Debbie Mann is no stranger to servicing having left Langley Memorial four years ago to work as a Rep Trainee and Rep 1. Congrats to Debbie on her appointment as a Rep 2 in the Provincial Office.

And Marc Cohen is HEU’s new research policy planner. Since 1995 Marc’s been one of HEU’s research analysts. She brings a wealth of experience in research, training and popular education to HEU.

Jim Quail is HEU’s new in-house legal counsel. Jim has a diverse background that includes community legal services and public interest advocacy. He’s been executive director of the Legal Services Society, business manager of a municipal workers union and a legal services advocate for farmworkers. Over the last several months, Jim has had ample opportunity to get to know HEU’s legal reps and assigned to our union.

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The Superannuation Commission has launched its public website.

HEU member will be able to access an on-line estimator for their Municipal Pension Plan, as will members of other pension plans administered by the commission.

For more information, contact the commission by fax (250) 356-8591 or email: <pensions@pension.gov.bc.ca>.

EQUITY PHONE LINE
1.800.663.5813, ext. 514
Lower Mainland 739.1514

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One union, many colours! Working across our differences! To participate, please call and leave us your name.

press 3
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For support of being identified, feeling isolated, want to know your rights?
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press 4
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Well like to hear from you. If you are on WCB or LTD. Or if you are invally or visibly disabled in the workplace, let us know how the union can better meet your needs.

ALL CALLS ARE CONFIDENTIAL

TALK TO US ... TOLL-FREE!
You can call any HEU office toll free to deal with a problem or to get information. It’s fast, it’s easy and it’s free.

PROVINCIAL OFFICE:VANCOUVER (ISLAND OFFICE):
Victoria site:1-800-663-5813
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JUNE / JULY 1999 • GUARDIAN 15
Needs Fixing

Our employer’s arrogance, arbitrary and unequal treatment of staff and continued harassment are at the root of several serious grievances which have been piling up over the years and can now only be dealt with through a fair contract. We simply want and deserve a little protection and respect in our workplace.

As customers of BCAA we ask that you show us your support by taking a few seconds to fill in the reply form below and drop it in the mail, or fax it to us at (604) 298-8211.

We also ask that you respect our pickets and not do any business with BCAA until this dispute is over.

BCAA employees are good people providing very good service, but is BCAA a good employer?

1. Is an employer who pays one employee 60% more than one he doesn’t care about, even though they perform exactly the same job, a good employer? ☑ YES ☐ NO

2. Is an employer who gives some staff sick leave but refuses it to others a good employer? ☑ YES ☐ NO

3. Is an employer who lays off or retards employees on a personal or arbitrary basis without any consideration of seniority a good employer? ☑ YES ☐ NO

4. Is an employer who refuses to agree to contract language protecting staff from harassment a good employer? ☑ YES ☐ NO

5. Does such an employer deserve your support and business? ☑ YES ☐ NO

If you answered NO, please go one step further and fill out your name and address...