CHOOSE WITH CARE

BIG BUSINESS HAS BIG PLANS FOR B.C.
AND THEY'RE NOT IN WORKERS' INTERESTS.

The Guardian's
A VICTORY TO CELEBRATE!
Comparability passes its last hurdle. PAGE 3

50!
comment

Celebrate pay equity victory, but prepare for more work
by Chris Allnutt

I T IS TIME for HEU members to celebrate a tremendous achievement. Due to their efforts and hard work over the years, the union has come to an agreement with the Health Employers Association of BC, an important element of our pay equity program.

Reconductive compatibility payments should be in the pockets of almost 40,000 HEU members by September 8. And most employers have compiled with the agreement to implement the rate increases by May 1.

To a sector of society—taking care of people, considered women’s work—the issue of pay equity is an important one. In the 1970s close to 15 per cent of HEU members made less than the average wage of women.

Within this discriminatory pay structure, all health care work was undervalued. In addition predominantly female occupations were being paid less, it is less than predominantly male occupations.

Job action in 1992 resulted in a solid pay equity win in collective bargaining that included compatibility with the direct public service as a key element. After a down payment in 1994, several years of arbitrations and Labour Relations Board hearings followed, culminating in the final confirmation on March 14, 2000 and the

HEAEC’s decision not to appeal the ruling.

The struggle to end gender-based wage discrimination in health care has been a long one. This pay equity victory by several years for the average that was greater in the past.

Some female entry-level jobs are still below the entry-level male job, positions like housekeeping aide, some food service workers, and some clerical and services. In addition, some long-term care facilities have been excluded from compatibility altogether.

This means that some HEU members that are doing exactly the same work under the same collective agreement are being paid less than others.

It’s unfortunate workers in BC must depend on collective bargaining to achieve gender-neutral pay rates. What is urgently needed is comprehensive pay legislation.

However, there is strong opposition from the Liberals in the Legislature, Opposition health critic Colin Hansen (MLA for Vancouver-Quilchena) targeted HEU pay equity victory in the BC Legislature on March 29.

We are approaching the near round of bargaining, and we should expect strikes by the Liberals and others on pay equity and our other contract gains to come.

It’s clear that we still have a fight on our hands to get fair discrimination in health care is nothing but a memory.

voice/mail

THE GUARDIAN WELCOMES YOUR FEEDBACK. SEND LETTERS TO 2666 W 10TH AVE., VANCOUVER, BC, V6K 1P5 OR PHONE 1-800-995-9544. PLEASE BEbrief.

We want to know

I am a Community Social Worker (CSW). While I am not writing on behalf of my local in Victoria, I believe that the comments before are shared by many colleagues and their families.

To be blunt, I am not satisfied with the level of service provided by HEU in areas of leadership and communication. A current situation underlines my disappointment—we have yet to receive our retro- and raise despite a resolution to our stiilrene; with so many rumours and anxiety over what is happening. It is important members hear from HEU officials about what can and will be done than the return to work at least once a week.

While I understand that the issue of retro was taken to the Labour relations Board, we also need to know our rights. For example, are we in a strike position if our contract has not yet been renewed? To address this and other questions, I suggest a

fact sheet/newsletter be distributed to all whose members are aware of the grid compact to be fully implemented. Not only would this fact sheet/newsletter show leadership and facilitate communication on current events. It would also be a means to be blunt of some of the mixed messages and anger.

In minutes from a recent interim local meeting the following was noted: “It was felt that HEU was doing too little, too late.” I feel that a fact sheet/newsletter would help to ease the tension.

The issue of communication is not new. During the strike and afterwards, worse, we were waiting for clarification over night staff wages, there was lack of communication that made matters worse than necessary. Had newsletters been distributed from time to time as would be what was going on, tensions on the rank and file would not have been so intense.

There is a great deal of anger directed at HEU because many of us felt we were not well informed about the issue of night staff wages. We thought a full compreensive agreement had already been reached.

Good communication is one sign of good leadership. I believe one reason why social service communication is through newsletters—especially when there are unresolved critical issues.

I would also like to suggest that a column or two in the Guardian be set aside to disso C SW issues and what is being done by the union to resolve our problems.

Poor communication—or none at all—only intensifies the situa tion at hand and in the long run, weakens the HEU’s effectiveness.

TIM BOTTRELL, CSWE, VICTORIA

Editor’s note: All community social workers received their pay increase retroactive to 15th February of last year, so they, too, could make RSP contributions. That did not receive interest was advised to the grummers, which they did.

12-month bridge for LPNs

As you are aware there is an

acute shortage of registered nurses in British Columbia. We would like to see this shortage in 12 months.

In B.C. 7,000 licensed practical nurses are registered with the college. The government should set up an appropriate process in order to upgrade a practising LPN to an RN. We believe the duration of the course should be no more than 12 months. Presently some colleges offer a 16-month course for LPNs wishing to enter the RN program. The government could base a 16-month course for LPNs wishing to enter the RN program.

Kudos for Gay and

Guardian

As a former labour appointee to the Northern Interior Regional Health Board, I wanted to let you know some things.

1) I really appreciate Gay Burdette’s (HEU’s recently retired director of regionalization) efforts at educating the labour reps at the two conferences I attended. She is a gifted leader.

2) I am no longer the NIBHR member representing labour. This task falls to Larrion-Hayes, a home support worker and 1st vice-chair of local 411 BCGEU.

Hope you continue to send me your excellent newsletter. I find it complements my own union paper very well. Sending the Guardian to all unionised but non- HEU supervised might remind them that our superlative service is not without salinity by definition, only by how some people choose to practice it.

ERIC RICHARD, LPN
PARKER RICHARD, LPN

Guardian

In treble difficulties to all those who sell to me.

Dep’t.

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We offer luncheon invitations to our members.

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The Hospital Employees’ Union is the B.C. Health Services Division of the Canadian Union of Public Employees.
What we're up to

Call Women's Committee toll-free
1-800-666-2044 – that's the brand new HEU Women's Committee toll-free phone number. It's up and running now, giving members throughout the province one more way of getting information on women's issues in the union, and of connecting with the committee members.

This is one of several new Women's Committee Year 2000 initiatives along with the women's gatherings at the table officers' meetings, the promotion of local women's committees, and participation in World March of Women 2000 activities including our own banner project – a creative venture to be presented at HEU's 22nd Biennial Convention in October.

The toll-free number will run messages with items of interest to union women as well as labour and community events and actions by, for and about women.

And if your local would like assistance in setting up a local women's committee, let the Women's Committee know.

Lease a contact name, local and the best phone number to call back on, and one of the committee members will be in touch.

So mark these numbers down – province-wide toll-free 1-800-666-2044; Greater Vancouver (604) 742-8801.

Victoria members
spin their own

The Victoria General local has launched their own website, with an online newsletter and up-to-date information on what is going on in their local.

A good example of what a wonderful tool the web can be is their call to members to attend the May 3 meeting of the Capital Health Region. The region has announced that they are going to increase the parking charge for all CRH employees to pay for the construction of the Royal Jubilee Hospital parkade.

HEU members say that the increase in parking rates is unacceptible. A report on the meeting will be on the website. The address is www.members.home.net/heu-tiff-jeff. Of course, the Juan de Fuca local has had its own site for a couple of years now (www.heu.com).

The Gay and Lesbian Standing Committee (www.pridepages.org) and the People with disabilities Standing Committee (www.alberni.net/Peoplewithdisabilities) also have their sites.

Check out the links on the HEU website for more.

continued on page 4

School workers' will is unbroken

UNDOUBTEDLY OF CUPE school board workers from across the province rallied to Vancouver May 15 to show their determination to win a fair collective agreement after Victoria ended their strike and legislated them back to work in April.

Government actions, like the draconian back to work law, "have not broken the will of CUPE members and their struggle to win a fair collective agreement that we can submit to ratification by our members," said CUPE B.C. president Barry O'Neill.

CUPE's pledge to escalate its actions was reinforced by the presence at the rally of key labour leaders and supporters from other unions like HEU and the B.C. Teachers' Federation.

O'Neill said a fair settlement must address critical issues for school board workers like job security, wage and benefit improvements, and hours of work.

"We will achieve a fair settlement for our members," he said. "It's time for the provincial government to stand up for working people in B.C. It's time for them to take responsibility for solving the continuing crisis in school board bargaining."

Jane Bourley, a parent of a special needs child, said the media's effort to paint the bargaining impasse as a dispute around the role of volunteers is wrong. "The real issue is funding and cuts, in which job security for CUPE members is tied to the quality of education," Bourley said.

CUPE B.C. Health Services Division vice-president Leo Ribo was on hand to deliver HEU's support for the school board workers. HEU condemned Bill 7, the back to work legislation, when it was brought in by the Doaneigh government April 1.

Comparability's a reality

HEU has reached an agreement with health employers that will put retroactive comparability payments in the hands of almost 40,000 HEU members on or before Sept. 1.

The payments represent a four-year old pay equity bill that arbitrator Stephen Kelleher ordered employers to pay in a decision brought down last fall.

The majority of facilities sector members have already received comparability-related wage rate adjustments that locked in on May 1. Retratioicity covers the period April 1, 1996 to April 30, 2000 and will result in individual payments ranging up to $6,700, less regular payroll deductions.

Health employers have agreed in principle to provide these payments to individual members in a separate cheque that includes calculation details.

The payments will occur despite the fact that HEU and health employers disagree on the total interest due on retroactivity. That matter has been referred to Kelleher.

"Fortunately, we have been successful in separating the issue of retroactivity from the question of paying," says HEU secretary-business manager Chris Allum. "As a result, retroactivity payments will not be delayed."

HEU and HEABC have agreed that the global amount of interest owing will be divided by the number of full-time equivalent employees as of May 1, 2000 and distributed to all facilities sector members in proportion to hours they have worked during the period April 1, 1999 to March 31, 2000.

"This method of delivering interest acknowledges that all members deserve compensation for new-wage elements of comparability with the direct government service like hours of work and pensions," says Allum. "It also recognizes the role all HEU members have played in achieving this key pay equity victory."

Improved maternity/paternity leave benefits related to Kelleher's award took effect May 1, 2000.

LaPlante elected to Blue Cross board

HEU financial secretary Mary LaPlante has been elected to the board of directors of Pacific Blue Cross at the organization's April 26 annual general meeting.

LaPlante, who served on the boards of Pacific Blue Cross and CUPE from 1994 to 1999, credits her win to the support of the many HEU members and staff that turned out to offer their support.

"Our activists believe that Pacific Blue Cross needs to be more aggressive in its advocacy for our publicly administered and delivered health care system," says LaPlante. "I intend to form the basis of alliances on the board that will support initiatives in defense of Medicare."

Also re-elected to the board are CUPE B.C.'s Colleen Jordan and Leif Hanssen of the UFCW.
Nanaimo member defends rights of Hepatitis C victims

When her husband was diagnosed, Karen Park became a crusader

I T'S BEEN almost two years now since the lives of Karen Park and her family were turned upside down. It was a change that thrust Park into a life of advocacy and activism she had never imagined for herself.

She is now in her 25th year at Nanaimo Regional District Hospital. For the last two-and-a-half of those years she's been a mail distribution clerk, but before that she worked in laundry, housekeeping, dietary, preparing meals for the OR.

In early 1999 her husband Doug, a machine tender at the Harman Division pulp mill in Nanaimo for 26 years, began to complain about feeling tired all the time, vaguely ill— one of those things you just can’t put your finger on.

After a while he decided he’d better go to a doctor about it, to see if something was wrong.

Something was wrong. A random blood test found that he had Hepatitis C. The couple asked themselves, "How could this happen?"

Thinking back many years, they remembered that in 1983 he had a brain aneurism and spent a couple of months at Royal Jubilee. Part of the treatment involved blood transfusions, and that's where they figure he contracted the Hep C.

"Well, okay," we said. He's going to need treatment. We just assumed that costs would be covered and medication would be paid for," she says. "We found out to our horror that this was not the case."

There is a drug treatment that is used for Hep C, and that is Interferon. According to Park, the success rate is not great—less than 50 per cent—but it's good enough not to ignore.

The problem is it is very expensive, and it is very debilitating. You cannot work while you are on the one-year treatment. Design treatment, which he began in July 1999, costs $2000 per month.

Park says a lot of people who have Hep C don't want to go public, because they think there is a stigma attached to it. And at first they also tried to keep it to themselves. But her husband had been forced to take sick leave and to drop out of a business management course in which he was enrolled. And their savings were fast diminishing.

"We've never really been activists," says Park. "But we felt we couldn't sit by and see our life go up the drain, and it got to be too much for us to handle."

She started out small with a simple letter to the Nanaimo newspaper. "I want everyone to be aware that not all Hepatitis C victims have been compensated," she wrote. "These people must have their medical expenses paid if they want to have any chance of fighting this disease."

The paper sent a reporter out to talk to the couple and wrote an article. The local Hep C society saw the article and offered to help.

But the Parkos knew they had a whole other network. And that was their union. He's a long-time member of the Pulp and Paperworkers' Union. His sister is a Tulisa employee and a member of the Telecommunications Workers' Union, and, of course, Park is an HEU member.

Park put together a formal letter, asking for federal compensation for the victims of tainted blood and provincial compensation through Pharmacare for the drug costs.

"I think between all of our family, friends, co-workers and union members, about 20,000 letters arrived on the federal and provincial governments' doorsteps," she says.

In December the provincial government notified the Parkos that it would fund the drug therapy through Pharmacare, which they actually started to do in April.

This is not just a victory for the Park family. Pharmacare is going to pay for this treatment for everyone who qualifies for this treatment.

"Imagine sitting at home, getting worse and not knowing how much damage is being done while you wait," she says. "So you find yourself of people who have gone to desperate ends to get the money Now they will get their treatment paid for by Pharmacare."

This activism brought with it another kind of activism—in her union. Her local recently declared her the recipient of their annual Most Active Member Award.

Local chair Dan Hingler says, "It's not just for her willingness to help the local out, but for Park's continued commitment to all British Columbians in an unselfish fight to ensure that Hep C victims receive compensation." "Park says the struggle is far from over. Getting federal compensation for those victims that were infected before the federal government's cutoff date is the next goal. And educating the public about Hep C is a priority. But she feels a lot of satisfaction from the victory. She says, "I firmly believe that regardless of how you get Hep C, you deserve the care that should be given."

BALANCING IT ALL is a regular Guardian column about the challenges facing women activists.
HEU video takes looks at Harris’ health reform

With a provincial election on B.C.’s horizon, Liberal Party leader Gordon Campbell and his business allies are pledging to introduce social and economic policies based on the so-called common sense revolution of Ontario Premier Mike Harris.

So, what would be the impact on health care workers and our Medicare system here in B.C. if a Campbell-led government imported a dose of Harris-style health care reform?

To find answers, HEU is producing a special video for early summer release that looks in depth at what those impacts have been on workers and the system.

Working together with CUPE’s Ontario Council of Hospital Unions, HEU communications director Sheldon Howard and a video crew spent a week traveling to eight Ontario communities in late March and early April. Howard interviewed dozens of health care workers in hospitals, long-term care, nursing homes, community care settings, and in important community services like home support, assisting close to 30 hours of footage.

Howard says he was shocked by the chaos and upheaval in Ontario’s health system. “We visited five of the more than 40 hospitals that are on the closure list,” he said. “It’s an eerie sensation to pull in at a hospital entrance that’s chain-locked shut, or see a gated kitchen or a stripped-down ER at another facility awaiting the wrecker’s ball.

“There are so many compelling stories about the experiences of our sisters and brothers in Ontario; like extended caregivers struggling to provide adequate care after Harris chopped their funding levels in half, or home support activists confronting a mandatory low bid tendering process that’s resulting in widespread privatization of this crucial health service.”

• For information on how to order a copy of the video, contact Gill Paquette in the HEU communications department, 734-3951, 1-800-665-3813, or gpaquette@heu.org.

Confusion reigns at Capilano Care Centre

Capilano Care Centre in North Vancouver is laying off staff, claiming their funding levels have fallen due to a drop in the acuity level of their residents. But HEU says it is an excuse and has taken the issue to an expedited arbitration.

Capilano Care Centre is owned by Central Park Lodge, a multinationation corporation that has seniors’ care facilities in Alberta, Manitoba, Ontario, Quebec, Washington and three in British Columbia.

In the last three months they have given displacement notices to a total of 24 HEU members – 11 part-time care aids, seven part-time activity aides, one dietary aide, and eight housekeepers. According to HEU many of them were not given proper bumping information. Some of them may even have been given instructions that, if they follow them, will jeopardize their right to register with JLAA and could be a basis for denial of their employment security. Instructions such as switching to the casual list instead of bumping or applying for employment insurance benefits. As well, they are no longer bothering to notify the union when their members are being displaced.

Minutes from a North Shore Regional Health Board meeting indicate the facility had $83,000 cut from their budget, saying that the acuity rates of the residents are not as high as before. But the union did a little arithmetic, and figured out the money saved with the layoffs amounts to at least twice that figure.

“Something is not adding up, obviously,” says HEU secretary-business manager Chris Allnutt. “And we are very curious about seeing their documents in discovery at the hearing.”

The issue is further muddied by the fact that in early April the facility ran ads in the Vancouver Sun for care aides, activity aides, dietary aides and registered nurses.

A hearing date has been set for September, but the union is trying to move it up to June.

“At the hearing we will ask that all layoffs and displacements be rescinded with full redress for anyone affected by any wrongdoing on the part of the employer – and damages,” says Allnutt.
PRESIDENT'S DESK

Canadians' message is loud and clear: keep health care public

by Fred Muzin

Despite tremendous public opposition, on the evening of May 10, Alberta Premier Ralph Klein's Conservative government imposed Bill 11, its so-called Medicare Protection Act, by once again invoking closure to cut off debate and force a vote. This regressive legislation permits overnight stays in private hospitals, allows a two-tier health care system whereby extra billing is allowed for enhanced services and guarantees public Medicare throughout Canada under the trade provisions of NAFTA.

Canadians must be very clear—the attack is being driven by ideology, not by the desire to preserve, improve and expand our most cherished social program. There is considerable evidence that privatized medicine would result in higher costs, longer wait lists and decisions based on profitability rather than medical need.

The lack of action by federal health minister Allan Rock and his peers to deflect Klein's initiative is disgraceful. CUFPE has provided an extensive legal opinion that Bill 11 violates the Canada Health Act. Rock has flip-flopped on the issue and has adopted a wait and see attitude rather than providing the real leadership that Canadians expect and deserve.

More than 30 years ago, we concluded as a nation that access to health care should be a right of citizenship, not a privilege enjoyed only by the rich and influential. Our health care system is too important to be treated as a commodity whereby privatization is made off of people's illness.

And Canadians made the right choice. Public health care provides dignity for all, in all aspects of our existence. Its competitive advantages and sharply contrasts with the American experience whereby millions of people have no health coverage and medical expenditures are a leading cause of bankruptcies.

How did we get to the current crisis? The federal government caved to the OPH, DRIFF, hysteria and slashed transfer payments to the provinces for health and education. This resulted in bad and hospital closures, delisting of services provided, a tremendous increase in workload and injuries on the frontlines and an erosion of confidence in the public system. As well inadequate resources were devoted to training new providers and upgrading the skills of those in the system to meet the challenges of an aging population.

Former Angus Reid poll conducted for the Canadian Medical Association indicates that 71 per cent of those polled believed that they would get needed health care services if they had a serious medical problem. This personal experience, which is reflective of the commitment of all health care workers, conflicts with the perception by 78 per cent that there is a crisis.

People are influenced by the barrage of opinion that constantly confounds them. Canadians clearly prefer public funding for better health care. In Alberta, where the debate over Bill 11 has been raging, opposition to private funding for health care is 20 per cent higher than elsewhere.

However, in B.C. there has been insufficient public debate about modernizing and preserving public Medicare. It is essential the federal government stop the panic by dismantling Alberta Bill 11 immediately and promoting a rational public dialogue.

NOTEBOOK

Battle taking shape

by Mike Old

With an election and contract talks expected within the year, B.C.'s political right is bringing its health-care agenda into sharp focus and your wages and benefits are clearly in the crosshairs.

The battle plan was laid out by the B.C. Business Summit when they booed out the most prominent pre-election candidates in B.C. history two and a half years ago. A key campaign plank—contracting out and privatization of services in hospitals and schools—was a consistent theme—the B.C. Retail Council/Whac-A-Mole Jock Finlayson recently told the media that the health-care system needs a fundamental rethink of how contracts are handled and services delivered.

Translation? Extract profits from housekeeping, food services, laundry and other "labor services" by contracting them out and cutting wages.

The B.C. Medical Association is also waging their angle, calling for a value for money audit of health care. Sidestepping the issue of their excess $137 million fee settlement, RCMA president Len Coutts has fingered unionized workers for increased health care costs and has called for the private sector to look at "non-essential" health services.

The top doc even suggested to the Kelowna Chamber of Commerce that the health care system should be run by a medical crown corporation. Didn't the Business Summit—if which the BCMA was an endorsing organization—call for the privatization of crown corporations?

The propaganda effort in this battle is being fueled by the Fraser Institute. They've been recycling a B.C. 1985 study that argues the health care system would save $200 million ($4,500 for each HEU member) annually if unionized workers in "non-medical" jobs like housekeeping, laundry and dietary were paid at the same rate as their unionized counterparts in the hospitality industry.

The study has holes you could drive an ambulance through. That hasn't stopped the media from quoting it or from insisting that support worker wages are "crowding out" RN wages. That's a favourite of Vancouver Sun columnist Vaughn Palmer. He reported that laundry workers and cleaners made up to $22 an hour. In fact, there are only about 20 housekeeping and laundry supervisors in the entire province who earn wages in the $22 an hour range— and 95 per cent earn wages that are about $4 an hour less.

Accuracy aside, the argument works for those who say privatization and lower wages for unionized health care workers are the trade-off for focusing resources on direct patient care.

Of course the low wage, privatization strategy won't work unless the right can promote its silent partner—the B.C. Liberals—into power in Victoria. That's why we must prepare for bargaining, and the next election, right now.

Ask unit clerks, they know a lot

by Margit Blamey

Unit clerks are busy people. Their desks are heaped with any unit with phones ringing, people stopping by, a stream of paperwork to complete. There are patient charts to set up, doctors' orders to process and patient admissions, discharges and transfers to arrange. A colleague in sick and a replacement must be found. A disheartened family member looks for a few gentle words of understanding. Everyone and everything needs attention—now.

This scene is very familiar to Shirley Jones from Abbotsford MSA Hospital and Heather Hurasmine from Langley Memorial. Both are nursing unit clerks and they love their jobs.

Both will tell you that the common saying is true—it's the unit clerks, they know everything. The position is often called the "real manager."

Seven years ago Jones and Hurasmine each decided to expand their high level of career satisfaction by instituting in the Nursing Unit Clerk Certificate Program (NUCCP) at the University College of the Fraser Valley (UCVF). And two years ago, Shirley and Heather became more involved by diving into the creation and implementation of a unique adult-learning program—an accredited course for experienced unit clerks based on the assessment and recognition of an individual's prior learning—that would result in a Nursing Unit Clerk Certificate.

"It's amazing the number of unit clerks who have been doing this for more than 20 years," says Hurasmine. "They came into the job and learned it by doing it."

Based on the requirements of a group of unit clerks at Langley Memorial Hospital (LMH), who had initiated discussions about alternative ways to complete their NUCCP certification, a pilot course began through UCFV in June 1998, with 10 LMH unit clerks, the sponsorship of the Healthcare Labour Adjustment Agency, and the full support of the hospital.

By all accounts the innovative program was successful. Jones and Hurasmine are clearly delighted to be part of the university's prior learning assessment program (NUCCP). They speak enthusiastically about the students, the time, energy and commitment that go into the creation of a personalized learning portfolio (a personal documentation of an individual's knowledge and skills), and the strong sense of accomplishment and value participants take from the experience.

HEATHER HURTURISCE and SHIRLEY JONES stand beside their portfolios from the unit clerks who recently completed the prior learning assessment NUCCP. Two assessors spent hours evaluating each portfolio.
Oregon farmworkers urge boycott

The HEU has thrown its support behind a union of farmworkers who are taking on a multinational food processor owned by 250 fruit and vegetable growers in Oregon's Willamette Valley.

The Pinoso y Campesinos Unidos del Noroeste (PCUN), or Northwest Treeplanters and Farmworkers United, represent more than 4,500 farmworkers - mostly of Mexican origin - who have been fighting for collective agreements with NORPAC Foods for more than 10 years. But under U.S. labour laws that date back to 1933, farmworkers are excluded from the usual certification process and must depend on voluntary recognition from employers.

"As a result, NORPAC affiliated growers are able to impose depression-era working and living conditions on twenty-first century farmworkers," says PCUN organizer Alice Gates.

These conditions include 'right to work' fees that result in wages below the legal minimum, unsafe working conditions including exposure to harmful pesticides, 14-hour shifts in the fields with few breaks and cramped and unsanitary company-owned housing.

Gates says that farmworkers who've shown support for the union or spoken out against their working and living conditions have been threatened, fired and evicted from company housing.

To increase pressure on growers to bargain collective agreements, PCUN called for a boycott of NORPAC's canned fruits and vegetables in 1999 and its campaign has picked up support from more than 100 labour, religious, community and student groups since that time.

Institutional customers like hospitals, long-term care facilities, universities and colleges account for about 60 per cent of NORPAC's sales.

"HEU members can support PCUN's campaign in a very concrete way," says HEU president Fred Muñiz. "By identifying facility kitchens that use NORPAC products, we can pressure employers to discontinue their use. That's the language that NORPAC understands."

Gates couldn't agree more, pointing out that in 1998 NORPAC reported $5 million (U.S.) in losses - the worst year in the company's 75-year history.

"With the solidarity of HEU members and other Canadian workers, we will force NORPAC growers to the table," says Gates.
When the NDP was elected in 1991, it was a great victory for the working people of British Columbia. The welfare of big business had always come first with the former government of the Socreds, but now the interests of B.C. workers would be in the forefront. And by and large they were. During its tenure, the NDP government has passed legislation making it easier to certify unions. It has periodically raised the minimum wage so that we currently have the highest in Canada. Unionization of public pensions gives workers more say in how their pension funds are managed. It has consistently raised the budgets of health care and education.

But we must recognize that the government has done some things that are not good for workers and their families. Poor people have not benefited much from a social democratic government in Victoria.

And notably, the NDP government ordered striking public school support staff back to work. This has happened before with NDP premiers, both here in B.C. and in Ontario. Dave Barrett ordered B.C. workers back to work in 1975 and Bob Rae returned through a “social contract” stripping Ontario public service unions of rights to contract conditions and the right to free collective bargaining. Both leaders lost big time in subsequent elections.

B.C. ended up with the Socreds and Ontarians are stuck with Mike Harris for the foreseeable future.

“Progressive people in B.C. are facing a dilemma,” says HEU secretary-business manager Chris Allum. “In the next election, we need to choose with care, and that means knowing who our allies are – and aren’t.”

So let us not forget that although Liberal leader Gordon Campbell makes clamy attempts at appearing folksy, his party’s allies are big business. The Business Summit, the Fraser Institute and the B.C. Medical Association are lobby groups with policies remarkably similar to those of the Liberals.

Business says it will cut taxes by $1.5 billion, and absorb the enormous decrease in government revenue by cutting one billion dollars from government spending.

Those cuts could come from programs like public health care, public education, the environment and social housing. Programs that workers, poor people and their families use.

Business says they would be “trimming the fat.” But cuts to public services mean job losses in the private sector. Access to services is reduced and families end up with higher out-of-pocket expenses.

And in the end, it would be the wealthy, big businesses and corporations who would benefit with both the tax cuts and the cuts to government services. Their tax breaks would be huge compared to those of the average wage-earner. And if public services are privatized, they have the money to pay for them. They might even profit from the sell-off of underfunded public services that no longer work.

Canadians reject two-tier health care. The Liberals and their friends say that some parts of the health care system could be provided by private business. Things like laundry, food services and maintenance.

And young people would suffer the devastating consequences of lowering the minimum wage, lifting the tuition freeze at post-secondary institutions and cuts to the education system.

Working people have good reason to be upset with the NDP’s back-to-work legislation. But the Liberals and their allies want to replace the Labour Code, making it harder for unionized workers to organize. They would take away the protection for striking workers that anti-union legislation now provides.

Jim Sinclair, president of the B.C. Federation of Labour, says, “An anti-labour business agenda framed by Gordon Campbell and the Liberals is not a viable one for the labour movement.”

Allum agrees, saying, “We must find a way to remind the government where its real support comes from.”
Liberals say
• eliminate employment security for health care workers
• contract out some health care services like laundry, food services and maintenance to the private sector
• tax cuts, reduce government spending by cutting public services
• eliminate the Corporate Capital Tax
• privatize Crown corporations
• implement substantial deregulation of industry
• make it harder to certify unions by changes to the Labour Code
• outlaw sectoral bargaining
• loosen regulations on land use and forest industry
• set aside the Nisga’a Treaty and put it to a referendum

BCMA says
• privatize non-patient health services like food services, laundry, maintenance
• cut health care workers’ wages
• two-tier US-style health care system
• delivery of some health care services by private sector
• privatize preventative health care services, which they call peripheral wellness; public health services should be for those who are “sick now”
• unionized health care workers are too expensive
• base level of home care should be public, but “extra” should be paid for privately

FRASER INSTITUTE promotes
• two-tier, US style health care
• smaller government
• smaller public sector
• zero level of public debt
• tax cuts
• cap total government spending
• no raise for minimum wage as it “only benefits affluent youth living at home”
• provision of surgical services by private hospitals

in whose interest anyway?

When policies are put forward they’re usually representing a certain perspective. They are aimed at advancing a particular set of ideas, and they have specific goals in mind. Here are some tough questions to ask from the Canadian Centre for Policy Alternatives.

1. What objective(s) is the policy intended to serve?
2. Who is supporting the policy?
3. Who is opposing the policy?
4. Have all aspects and potential impacts of the policy been presented?

5. Have all the feasible alternatives been considered?
6. How will the policy affect the quality of public programs and services?
7. Does the policy enhance or reduce the accessibility of essential programs and services?
8. Are the rights and interests of workers respected by the policy?
9. What measures are available to ensure that public accountability is maintained?
50 years of the Guardian

The Guardian proudly celebrates its 50th birthday. Born in March 1950, it had a modest beginning, but has over the course of those 50 years become a very highly regarded—and award-winning—labor publication.

The Guardian took its name from the Manchester Guardian, a British newspaper known for high-quality journalism and its progressive stance.

"It has long been the intention of the General Office," begins Volume 1, Number 1 of the in-house-coined minicirculated publication, "to publish some form of monthly bulletin which would keep the various sections informed of the activities of the General Office and the many sub-offices within our organization."

And that it did. But its mandate came to be much more than that, reflecting the union's role as not only the champion of the rights of B.C. health care workers, but also fighting for fairness and justice in society at large. A look through old Guardian files tells us not just about the history of the union, but also the political history of B.C.

In the 1950s, life was very different than it is now; and articles of that era reflect the values of the times.

Bypersisting a 1955 article by business manager Bill Black, we can see how far we have come: "There are still many fringe benefits not enjoyed by the hospital workers which are enjoyed by other public and industrial workers in the province. They have no group insurance, no medical coverage, no unemployment insurance."

The 1950s and 1960s were a time for building for HEU, culminating with the first single Master Agreement covering 65 of the province's hospitals. In 1969, HEU held its first province-wide Wage Policy Conference. As a matter of fact, said the September 1969 issue of the Guardian, it was the first ever such conference held anywhere in Canada.

"Nine delegates from 68 hospitals spent nine hours hammering out Bargaining Strategy and drafting an ambitious negotiations 'package' covering Local 1800 Membership," said that Guardian.

The story also saw the birth of Medicare. With that in place, hospitals had a secure funding base, and HEU negotiations were able to win fair wages for their members.

By the 1970s the membership base had expanded dramatically and the organizing continued apace. During this decade HEU cut its ties to CUPE, and consequently the CLC and the B.C. Federation of Labour. It was a time of isolation for HEU, but also of reflection and leadership-building.

HEU held its first strike in 1971 against a Powell River doctor's clinic. The Guardian still doesn't refer to HEU's female members as women and it seems particularly enamored of capitalization: "The Clinic remains open because two Registered Nurses, a Laboratory Technician, a University Student, and the daughter of one of the Doctors are 'smacking the jobs normal- ly performed by the girls on strike.'"

The 1980s saw old ties renewed and new ones forged as HEU returned to the fold of the CLC and Operation Solidarity was born. When premier Bill Bennett introduced his restraint program, rolling back human rights legislation, tenancy rights and the bargaining power of the labour movement, trade unions and community activists took to the streets, but so did a lot of people who had never been politically active.

The premier eventually backed down on some provisions that specifically attacked public service workers—including HEU members.

But the Socreds made major changes to the Labour Code anyway. The September 1984 Guardian referred to the changes as out of the twilight zone. "Tangled together, the code changes decisively tip the balance of B.C.'s labour laws in favour of aggressive employers and make labour's fight that much harder."

The end of the 1980s saw a Social Credit government fall in a flame of scandal, and the NDP took them in the 1991 election. That decade saw legislation which was certainly more favourable to labour, but the ride was also bumpy sometimes. The government was—and is—under constant attack from the media, and has sometimes reacted by passing regressive legislation such as the exemption of high tech workers from some provisions of the Employment Standards Act.

In 1991 the Guardian underwent a major design change. National recognition for outstanding design and content followed with awards from the Canadian Association of Labour Media and the Georgia Straight. HEU communications department's wall is covered with those awards.

A new design change is in the works for the Guardian, and it will be launched at the end of this year.

A GRAPHIC HISTORY OF THE GUARDIAN
Closures rumoured at troubled Victoria centre

by Margi Blaemey

THE RUMOUR that the Victoria Chinatown Care Centre may close due to funding problems has been circulating for four weeks and around the city's Chinese community for several weeks. In order to clarify the situation and help to secure the appropriate funding, HEU wrote to the Victoria Chinatown Care Society, the body that oversees the operation of the facility. The body that oversees the operation of the facility had been circulat

'Workers are meeting with MLAs and other politicians'.
Care aides, LPNs active in National Nursing Week

2000 walk for democracy

Two thousand people marched through downtown Vancouver on Saturday, April 29 for the Walk for Democracy and Against Corporate Rule. "It was the largest May Day celebration in a decade," says B.C. Federation of Labour president Jim Sinclair.

The walk was jointly organized by Trading Strategies, B.C. Federation of Labour, the Vancouver and District Labour Council and End the Arms Race. The protest had many targets, which were illustrated with stops along the way with street theatre, music, etc. As the marchers walked past St. Paul's Hospital, they were treated to a play about cuts to public services, especially health care. The theme at Thrulow and Robson street was justice for workers. Actors at Burrard and Georgia called for the redistribution of wealth. "People over profit," they said at Burrard and Cordova. Then on to Cordova and Howe for a cry for corporate free news. And finally, at the art gallery, there was a rally for democracy.

The organizers saw the march as a spur of the public's growing awareness of the scope of unrestrictive corporate power that is spreading its shadow all over the world. Events like the protests against the World Trade Organization and the World Bank in Seattle last fall, and more recently, the demonstrations against the International Monetary Fund in Washington D.C., are spurring events like Vancouver's march throughout much of North America and around the globe.

At the walk was the kickoff to a month of activities in the Lower Mainland celebrating workers, their struggles and accomplishments. There will be film, music, dances and discussions throughout the month of May.

Many of these activities are joint efforts with registered nurses who are members of the B.C. Nurses' Union. All direct care providers are part of the nursing team," says Chris Allman, secretary-business manager for the Hospital Employers' Union, which represents care aides and LPNs. "We need to work together to provide high-quality cost effective care, and to develop creative solutions that will address the severe nursing shortage and promote progressive health reform.

Allman says Victoria has provided more than $10 million for a variety of training measures and new LPN and care aide positions in the system. In addition, the government recently announced a 28 per cent increase in training seats at B.C. colleges, including additional funding to allow care aides to train as LPNs.

HEU represents 4,000 LPNs, and more than 9,000 care aides who provide the bulk of hands-on care looking after seniors in B.C.'s long-term care facilities. HEU's nursing team members also include rehab assistants, who work to improve the daily lives of seniors and people with disabilities across the province.

We hear so often about the problems in the health care field: excessive workloads, unreasonable management, no opportunity for staff to help improve their work environments. But at McKinley Place in the South False Creek they are doing things differently.

Under a "shared governance" model, HEU staff are already sharing decisions and responsibility to a greater extent in Oliver than they see in most other facilities in B.C., according to Nancy Graedinger, a researcher who has been looking at this unique work-care environment.

Graedinger found that application of this model came about more by a unique set of circumstances than by design.

At the root of this philosophy of caring is the fact that the facility is the residents' home, and the caregivers respect their dignity and individuality.

The former manager of McKinley Place was a strong believer in sharing ideas. For several months while the manager's position sat empty staff became accustomed to making decisions and problem-solving on their own. When Jo Fleming was hired as manager, it was to manage not only McKinley Place, but two other long-term facilities in the region. Consequently she is not always on site.

Fleming promotes shared responsibility and respect. "I trust the workers to do the best job they can," she says.

"Equally important, the chair of the HEU local has a philosophy based on consultation and cooperation," says Graedinger. "LPN Shirley Couglin is considered to be a good, common sense leader whose opinions co-workers value." Staff is, she says, always prepared to discuss, to be involved, because their HEU leader demonstrates this readiness.

This particular set of circumstances has led to a success story in the making. The residents at the three-wing extend care facility are physically frail and have dementia. Caregivers include LPNs, care aides and LPNs.

Graedinger says with this shared governance model, staff and management make decisions about operations and delivery of care at the Nursing Council.

All staff attend the meetings, including those who are not direct caregivers. They have equal input into the agenda and have enough confidence in themselves and their work to put forth their ideas and suggestions.

Recent discussions and actions at council meetings have centred on a new orientation program for incoming staff, a change in the rotation schedule and a restraint policy.

Budget decisions made by council have been made for the facility—money that they were then able to use to purchase lifts and beds. The long-term effect will be a reduction in staff, job losses, staff turnover and patient neglect.

Budget decisions made by council have been made for the facility—money that they were then able to use to purchase lifts and beds. The long-term effect will be a reduction in staff, job losses, staff turnover and patient neglect.

Caregivers on McKinley Place, like those in other extended care facilities in B.C., are now overworked. They rarely have enough time to socialize with the residents, or do what they can.

Working under this model has had a positive effect on staff morale, efficiency and effectiveness of our staff, most importantly, the wellbeing of residents.
International solidarity works, says visiting labour leader

Apartheid is gone now, but there are still many obstacles for workers to overcome in South Africa

by Dale Fuller

DELEGATES TO this year’s British Columbia Teachers’ Federation Annual General Meeting learned first-hand how trade union solidarity of the international variety plays out on the ground. Willie Madisha, president of the South African Teachers Union (COSATU) and the South African Democratic Teachers’ Union (SADTU), traveled to Vancouver to personally thank BCTF teachers and tell the delegates how their support helped set up a powerful and effective teachers’ union in South Africa — a union that is now 210,000 members strong.

"Under apartheid we were not allowed to have any kind of united trade union movement in South Africa," said Madisha. "But BCTF worked hard to establish links within us, and when we were able to officially launch SADTU in 1999, they were right there with skills training and much needed equipment."

Unfortunately, says Madisha, the struggle is far from over for South Africa’s working people.

"Workers made sure this democratic government came to power, and it is a government led by our own comrades," he says. "We struggled with them, shared the trenches with them."

But now the same workers are saying that the economic models followed by the government will not assist South Africans in transforming their culture. "These economic models are borrowed from the developed countries and will not help us in any way," Madisha says. Especially alarming are the moves the government is making towards massive privatization of its assets and utilities.

Unemployment is rampant in South Africa at 37 per cent. It is the root cause of widespread poverty and its many attendant problems. Sixty-two per cent of the unemployed are rural women and youths. They have little or no access to health care and education. Many of the women resort to prostitution to support their families, and they are contracting HIV and AIDS in truly alarming numbers.

The government, in meetings with labour and business leaders, has stated it is aware of the problem but is seemingly unable to come up with solutions. So, COSATU is offering some solutions of its own.

To make its demands difficult to ignore, COSATU aligned with 40 civil society organizations in holding rotating job actions since the end of January. The week stoppages — called "stayaways" in South Africa — have been of four hours duration each and have staged one province at a time. The Johannesburg stayaway was the largest single demonstration since the end of apartheid, with 100,000 workers in the streets. By the time the

Guardian goes to press, these stayaways will have culminated in a massive, nationwide general strike on May 10.

COSATU believes the measures it is putting forward to government would go a long way towards ameliorating the misery caused by massive unemployment. More diligent government regulation of big business is the keystone of its proposed policy changes.

"Big business is in reality holding an investment strike," says Madisha. "They are not investing in jobs in South Africa, but in the stock markets of Johannesburg, New York and London. Capital serves its own interests; it does not create jobs."

COSATU’s strategy targets section 189 of the Retirement Act, which says that while employers may consult with unions before retrenchment (layoffs), they are under no obligation to use this as more than a police-giving measure. COSATU says unions must be empowered to negotiate the conditions of retrenchment for their members.

Another of COSATU’s demands is an immediate review of the Black Economic Empowerment Act, which makes the last recipients of the proceeds of liquidated companies.

Besides job actions to back up demands for changes in legislation, COSATU has also taken a very impressive step towards creating jobs in the country. It encouraged workers in its alliance to contribute one day’s salary towards a job-creation pool.

"Workers have done that. They have contributed 28 million rand [$6,200,000 Canadian]. That money will be used to retain and provide our workers with multi-skills so they can change employment with facility," says Madisha.

Since rural women and youth suffer the highest unemployment, the money will also be used to set up cooperatives in rural areas. The investment will pay off in family-supporting wages for them.

"Labour is doing its part. Now it is up to government and big business to do a 50-50," says Madisha.

COSATU is made up of organizations that fight for social justice and the transformation of their society, and that work will never end. "Our workers are concerned about workers’ rights everywhere," he says. "We know that that is the case with workers in Canada, too, because we were able to benefit in a very real way from their solidarity."

This is an excerpt of a letter sent by HEU president Fred Murnin on behalf of HEU members in support of the COSATU job actions:

On behalf of the 46,000 members of the Hospital Employees’ Union in Canada, I am writing to express our solidarity with our COSATU sisters and brothers as you join together for the historic May 10 general strike.

While we celebrate the collapse of apartheid, the ongoing problems of South Africa cannot be ignored. Poor and a half million adults are out of work and poverty levels are intolerable, with over half the population below the poverty line.

The situation continues to worsen as business interests and the wealthy invest in the stock market and profit ventures rather than rebuilding the economy. Corporations are using globalization and regressive economic policies to exploit workers and their families.

Your demonstrations since January are sending a clear message to the government and business class. Workers and the unemployed are united and strong. COSATU and the South African people have overcome amazing hurdles in the past, and you will win again.

We applaud the actions of COSATU members and your allies, and we are honoured to add our voices to those around the world who support your demands for jobs, justice and dignity for South African workers.

In solidarity, Fred Murnin, President

Health care workers are also affiliated with COSATU through their membership in the National Education, Health and Allied Workers’ Union. With 233,000 members, it is the second largest component of COSATU. After the miners’ union, NEHAWU sees its role as being the watchdog for health care reform in the country, informing members of parliament what South Africa needs in the way of health care reform.

Right now there is a basic Medicare program in place which closely resembles the American system. Pregnant women and children under six all have the right to free comprehensive health care.

The main problem, says Madisha, is that public health care is not properly resourced by the government. Policies on paper are one thing; the reality is another.
RN's sing their message

by Dale Fuller

A
NOTHER musical about all the heartbreak, joys and frustrations of being a health care worker in this day and age is making its way around the province. Following HIU's example, the British Columbia Nurses' Union is using this medium to get their message out with Heartbreak and Heal.

The play is part of the BCNU's Valuing Nurses' Work campaign aimed at educating the public about how the workload crisis has resulted from nursing shortages — with RNs working an unprecedented amount of overtime.

Another important part of the campaign is levelled at reducing the number of non-nursing duties performed by RNs — work that belongs to HSU members.

Regional BCNU local meetings pre-
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Community activities in the forecast for LPN
Elizabeth Seel, an LPN at Givens and District Hospital, started working in adult care in 1981 and moved to multilevel care in 1994. She retired on Dec. 31, 1999. She says she lives in a small community and there are many ways to be involved. “I plan to fill my days with all the things I could not find time for when I was working,” she says. She looks forward to travel, crocheting, sewing, reading, drawing, painting and learning to play a musical instrument.

Retired but not retiring
Dorothy Parsons joined HEU in 1972, but she began working as a RN in 1960 – first in the admitting department and then emergency department. In 1970 she started at the switchboard as a part-time operator and at her retirement she was the switchboard supervisor. She plans to do the three “G’s” during her retirement: gardening, golfing and going off. She also plans to do a little traveling with her son who is a long-haul truck driver.

Another Royal Jubilee retirement
Don Village has retired after 36 years of service at Royal Jubilee Hospital in Victoria. He started out in 1964 with Veterans Hospital. Upon retirement he was a housekeeper at Memorial Pavilion. He wasn’t an activist in the sense that he held any offices, but he attended meetings regularly over the entire 36 years. His sisters and brothers in the union knew him as someone who was always there to help out. “They say they will miss him and his daily supply of gum.”

V is for her name, tennis is her game
Vic Campbell, who worked at Campbell River and District Hospital for 18 years as an LPN and lab side, has retired. During her tenure at the facility she says, she held just about every job. She is a qualified tennis instructor and intends to keep this up through her retirement. She’s planning to buy a camper just in case getting to tennis tournaments easier. “I thank HEU for the opportunity to attend seminars.”

The best was summer school – priceless knowledge which I’ll value all my life,” she says.

Another 50th anniversary
Nanaimo General Regional Hospital held a ke Re’s cake party in celebration of the 50th anniversary of their certificate which took place on Jan. 7, 1949. They held the party on Feb. 14. The local is up at Kiwanis 226 Home, Dufferin Place ECU, and NGH and the satellite lab.

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HEU's new, improved website:

www.heu.org

MODERNIZE. DON'T PRIVATIZE MEDICARE
On May 10, 2000 Medicare supporters showed up on the Vancouver Club's doorstep to protest the health care privatization meeting that was going on inside. 

Click here for the full story.

CHECK HERE FIRST
HEU calls for investigation of private lab's billing practices.
Click here

Rock can no longer spill on Bill 11, say B.C. health care unions.
Click here

HEU launches anti-stress initiative to turn around rising on-the-job injuries.
Click here

Hep C strikes HEU family
Nanaimo local member Karen Park was shocked that her husband was on his own after being diagnosed with Hep C.

HEU tackles privatization
Harris' "common sense revolution" comes under HEU's microscope.

Farmworkers need help
A call from agricultural workers for a boycott to help them in their struggle.

South African unemployment
Wille Madisha, president of the Council of South African Trade Unions, tells how globalization affects his country.