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HOSPITAL EMPLOYEES' UNION LOCAL 180

THE HOSPITAL GUARDIAN
"In humble dedication to all those who toll to live."

Editor: Jerry Miller
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The Members of the Provincial Executive are:
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MELANIE IVESON Regional Vice-President Vancouver Island
ANDY KOZYNIAK Jr. Provincial Executive Administrator

The Union maintains offices at:
Provincial Office: 8th Floor, 1111 W. Georgia St., Vancouver V6E 3G7 Telephone 734-3437

Okanagan Office: No. 103, 2359 Hwy. 97 North, Kelowna V1X 4H9 Telephone 862-0115

Kootenay Office: 745 Baker St., Nelson V1L 4J5 Telephone 354-4466

Vancouver Island Office: 1460 St. Andrews Ave., Victoria V8S 3T1 Telephone 365-4433

Northern Office: 859 Victoria St., Prince George V2L 2K7 Telephone 564-2102

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Choosing a leader carefully

By Bill Macdonald
HEU President

It was a democratic wedding that took place October 3, 1944, a marriage ratified by a vote of 228 to 33. The ballots were cast by workers at Vancouver General Hospital who decided to form a new union. It would be created by joining a local of the Civic Employees' Union whose membership was all male and a local of the Hospital Employees' Union, the "women's union" at VGH.

Solemnizing the event, the Trades and Labor Congress of Canada quickly granted the new organization a charter as the Hospital Employees' Union, Local 180. And so it began.

The new organization's executive appointed the late Brother Bill (W.M.) Black to be our first secretary-business manager. Under his leadership, the fledgling union soon expanded to the Fraser Valley and into the province's interior. Even then, the goal — the vision — was to organize British Columbia's health care workers under a single master collective agreement.

Equally important, that first appointment began a structure which another Bill Black (W.D., HEU's president for 12 years beginning in 1968) would describe this way: "The founding members of this union recognized their lack of knowledge in labor matters and chose a structure that would allow them to hire the expertise and experience needed to build a successful union."

Their foresight has been proven. Unquestionably, HEU owes a debt of gratitude to that first provincial executive, and to the three secretary-business managers who built an incredibly successful union over the past 44 years — W.M. Black, 1944-68; Ray McCready, 1968-74; Jack Gerow, 1974-1988.

As people, they were as different in personality as any three individuals could be. Yet there was a close similarity in their visions of what the union could and should be. None of them ever flinched from discussing and debating with anyone his ideas of what the future held for HEU and how its objectives could be realized.

At this point in our great union's history, it is important to keep in mind HEU's past successes and the cohesiveness and strength fostered by the continuity and stability of the chief administrative function since 1944.

The importance of the secretary-business manager's job is not necessarily one of setting priorities for the union. Our direction has always been, and will continue to be, prescribed by the elected members of the provincial executive.

But that prescription is filled by our chief administrator — who oversees HEU's day-to-day operations and directs the staff in meeting policy goals established by the executive.

With Jack Gerow's departure, the time has come to place a new incumbent in that vital role.

The process began this summer with newspaper advertising that appeared across Canada. It invited experienced, knowledgeable labor leaders to try for the top job at one of B.C.'s largest unions. Just going through the dozens of responses has been time-consuming. And because so much depends on the person whose application ultimately succeeds, weighing those who survive the initial review will be very difficult.

Today's provincial executive bears a great responsibility in the selection of HEU's fourth secretary-business manager. Mindful of this, we have decided to take whatever time is necessary to make a reasoned, unhurried decision.

We are constantly aware of two requirements for this job. First is the ability to meet the traditional trade union challenge of satisfying the members' continuing needs for decent wages and working conditions. Second is a clear commitment to sustain HEU's ideals about broader issues, including universally accessible health care; a single standard of wages and benefits; quality social services; the advancement of women's rights.

Besides meeting these qualifications, your next secretary-business manager will continue — in his or her own, unique way — the traditions of the office. The provincial executive makes this pledge as our part in maintaining the solid foundation on which our union stands.
PAST TIMES AND CONVENTION HIGHS — Pictures of the 1986 biennial convention show some things that may be the same at this year’s meeting, and some that won’t. HEU President Bill Macdonald takes the chair (below), and delegates give a standing ovation (above) to comments by Jack Genow, then the union’s secretary-business manager.
In a matter of days this fall, HEU’s basic direction for the next two years will be charted by nearly 500 elected delegates representing more than 27,000 health care workers across British Columbia.

The delegates meet in Richmond for the union’s 16th biennial convention, a five-day event starting October 28. About two-thirds of them stay another two days for the 11th Wage-Policy Conference beginning November 2.

"Keeping Our Union Strong" is the umbrella theme for the two consecutive meetings.

Both of them deal mainly with discussion and voting on hundreds of proposed resolutions submitted during the summer by HEU units. They reflect membership concerns about the union’s political posture, constitutional structure and collective bargaining goals.

Given the fundamental issues at stake, the delegates’ debate sometimes grows heated. But between them, the two meetings assure democratic membership input to significant decision-making on HEU’s future.

Altogether, it should be a busy week for the delegates, with the volume of resolutions this fall expected to be comparable to the 1986 meetings. Two years ago, the biennial convention considered 99 general resolutions and 115 proposed amendments to the union’s constitution; the wage-policy conference dealt with 635 motions for HEU collective bargaining proposals.

Voting of a different sort is also high on both agendas this year.

First, convention delegates elect 21 members to two-year terms on the union’s governing body, the provincial executive. Under the constitution, it exercises all of HEU’s “sovereign powers” between biennial conventions.

Second, elections at the wage-policy conference choose a provincial bargaining committee for a new master hospital agreement. Acting on the negotiating priorities established at the conference, the committee should begin meetings early in 1989 with employer representatives of the Health Labor Relations Association.

Candidates for both elections are nominated from the floor.

As background for all of this decision-making, delegates receive a variety of reports on recent union activities and developments. At convention, elected union officers and senior staff detail major events since the last biennial meeting.

The wage-policy conference receives a collective bargaining report that sets the stage for discussion of negotiating proposals.

Detailed programs — including guest speakers and other events rounding out the daily sessions — will be provided to delegates as they register for the meetings.
Contracting out — a major form of privatization — is alive and well and an inescapable fact of life throughout much of British Columbia’s health care system.

That’s the conclusion of a survey of HEU representatives conducted earlier this year and collated during the summer.

From the province’s largest hospitals to small long term care facilities, the union identified contracting-out activities at 40 per cent of its units. A unit-by-unit summary appears below.

The survey pinpointed 87 health care agencies where outsiders have been given work ordinarily done by union members or assigned management functions for which internal administrative personnel have traditionally been responsible. Contracts go to private businesses or individuals whose primary goal is to turn a profit on public services.

The most common targets seemed to be maintenance and dietary services which were contracted out by 33 and 30 facilities, respectively. Of these, management contracts accounted for 26 of the dietary and nine of the maintenance situations.

The survey also found: 14 facilities using contractors for laundry services, eight for housekeeping, and 31 for a variety of miscellaneous functions. (The total for the five contract categories exceeds the number of facilities in the survey because some of them farmed out functions in more than one category.) Because information is often difficult to obtain, the survey could not pinpoint all contracting-out situations. HEU members aware of any that are not reported below should notify the union’s provincial office.

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Privatizing Health Care

How much people pay is important — not what government may ‘save’

What people pay for health care — not just how much government may save — must be considered in assessing the real costs of privatizing medical services.

This assertion was stressed by all three speakers during a panel discussion on “Health Care: for People or for Profit?” that climaxed HEU’s two-week summer labor school at UBC. (See Page 12)

“When we look at health care costs, we have to look at the total picture,” emphasized Lois Boone, Prince George MLA and provincial NDP health critic. “We must take into consideration not just the budget of the Ministry of Health, but all the fees that each of us pays — medical services premiums, user fees, medication costs.

“We do not reduce costs when we reduce provincial funding and increase the charges paid by individual taxpayers. That’s just shifting responsibility for payment from one pocket to another.”

Sean Usher, of the Ontario Public Service Employees’ Union (OPSEU), agreed that the effects of privatization on health care must be analyzed “globally, not just one little corner of it.”

He added: “Health care operated

Introducing and moderating HEU’s summer school panel — “Health Care: for People or for Profit?” — was a man who needs virtually no introduction himself.

Dave Barrett was premier of B.C. for three years beginning in 1972 and leader of the NDP opposition until 1984. He planned to seek a seat in parliament.

Peter Jacques has been head of social insurance and social welfare for the Trades Union Congress in England since 1972. He is responsible for negotiating social security, occupational pensions, health policies and other benefits and is a member of the Royal Commission on the National Health Service.

Sean Usher is coordinator of education and campaigns for the Ontario Public Service Employees’ Union. An OPSEU member since 1968, he has served on its staff for the past 11 years.

Lois Boone is opposition health critic and represents Prince George North in the B.C. Legislative Assembly. Elected in 1986, the NDP member previously served four terms as a school trustee, two as vice-chairperson of the board.
by the private sector costs more to
the economy as a whole than health
care operated by the public
sector. Workers often earn less
under outside contractors and
therefore have less money to put
back into the community’s econ-
omy.”

Peter Jacques, of the Trades
Union Congress in England, drew
on the British experience to illus-
trate the ill effects of privatizating
health care.

“The government program of so-
called efficiency measures has
meant hospital closures, job losses,
patient waiting lists and increased
prescription charges (user fees).
And none of these measures has
meant savings on the scale
required to compensate for the lack
of National Health Service fund-
ing,” he told HEO summer school
students.

Jacques said that the NHS,
established after World War II, had
greatly improved the length and
quality of life in Great Britain. But
the picture changed drastically
after 1979 and the first election of
Prime Minister Margaret
Thatcher. Her Conservative gov-
ernment has cut NHS funding and
introduced privatization.

“Every year, the Thatcher gov-
ernment has expected (regional
health authorities) to make further
cuts to their budgets — irrespec-
tive of their health care needs.
This has necessitated restrictions
in services,” said Jacques.

“In addition, ‘efficiency’ mea-
sures introduced in 1983 required
all health authorities to contract
out ancillary domestic services —
cleaning, catering and laundry.
Health authorities also were
required to sell off all of their lands
and buildings that were not cur-
rently being used.

“The result has been a gap
between patient needs and
resources provided by govern-
ment,” he said.

“Operations have had to be can-
celled due to lack of proper support
services. “Attention of nursing
staff has been diverted to non-
nursing duties due to disappear-
ance of domestics because of con-
tracting out. There’s also been a
growing concern about the lack of
cleanliness in some hospitals and
its effect on the health of patients.

Jacques said that individuals
actually pay more for reduced ser-
dices because of higher user fees.

“The Trades Union Congress is
firmly committed to full public
funding without any restriction on
access or quality of service,” he
declared. Adding that full funding
of NHS would cost only about $658
per person annually, he noted the
“internationally acknowledged”
cost effectiveness of the system.
On average, Great Britain spends just
over six per cent of its national
income on health care, compared
with 10.8 in the United States and
9.3 per cent in France.

Panelist Lois Boone, NDP health critic and
Prince George North MLA

“The minister of health recently
stated that he would like to see the
reintroduction of user fees for
emergency health services because
people are abusing the system. He
claims that user fees introduced for
physiotherapy and chiropractic
services are deterrents to such
abuse,” she said.

“But a $5 user fee is a deterrent
only to somebody who’s making
$4.50 or $6.50 an hour. So user fees
are not deterring all the people
who might overuse or misuse these
services. They deter only those
people who can least afford these
services.”

Boone also cited other Social
government rhetoric which could
indicate more bad news for health
care.

“Last year, the premier sug-
gested that the province might
adopt a two-tier system, with pri-
ivate hospitals being built for use
by those people who could afford
to pay for their services — in effect,
one system for the wealthy and a
different one for the poor.

“I would like to remind you that,
at one time, private schools in this
province received no public fund-
ning. But over the past few years,
the government has given increasing
funds to private schools at the
expense of public schools,” she said.

“I believe that private hospitals
also would eventually want some of the taxpayers' money. Then you would have public and private funds being used to develop private hospitals — while public hospitals struggled along on what was left in the public coffers."

Boone also addressed the question of contracting out, declaring that there is no proof that this form of privatization is cost effective or efficient. She called the assumption that the private sector can do things better than the public sector a matter of ideology.

"In fact, the auditor-general, in reviewing contracting-out of food services by the attorney-general's office, found no proof that it was more efficient or that it saved money," said Boone.

"Public services that are con-

tracted out are taken on by businesses wanting to make a profit. Now how can they keep costs down to the same levels as the public sector and still make a profit? I know only two ways: reduce wages or reduce services.

"It's common knowledge that any business is in business to make money, and there's nothing wrong with that. But they shouldn't be doing it on the backs of sick people. All health care ought to be and ought to remain on a not-for-profit basis," said Boone.

Equally adamant on that point, Sean Usher declared: "Health care and social services are not for profit. Period."

He also had a privatization her-

ror story about an Ontario government decision "based on economic and political expediency — not on concern for the well-being of the people involved": It dealt with the closure of psychiatric hospitals and the resulting growth of "ghost towns where deinstitutionalized patients settled, unable to care for themselves properly and living on limited incomes".

The government rejected OPSEU's calls for public inquiries into the closures, "so we commissioned our own." The result was a book called Madness, and 40 universities have asked permission to use it as course material.

"The book is an indictment of mental health care in the province of Ontario," said Usher. "Through it, we propose a continuum of care that would utilize public services to implement humanitarian deinstitutionalization."

"In forming our proposal, we studied the Rhode Island model, where they programmed for individuals and not for the institution. The health care union involved was consulted throughout the process, and they ended up with a very human system. An unexpected benefit was that the health care workers' measurable stress levels were actually lowered."

OPSEU intended the book to "demonstrate to the Ontario government that we are not against deinstitutionalization of patients, but that we are against decisions made on political and economic bases rather than on a humanitarian basis."

Usher also detailed costs of privatization as it affected acute care, using the case of Hawkesbury General Hospital, located near Ottawa, as an example. The government contracted with American Medical International, a U.S. conglomerate, to manage the hospital.

"When AMI went in, there was a deficit of $350,000. The following year, the hospital showed an apparent $400,000 surplus. However, the deficit was almost entirely eliminated by a grant of $345,000 from the ministry of health in Ontario specified for that purpose."

"Of the $400,000 surplus, approximately $78,000 came from not having to pay interest on the deficit; $7,000 came from interest earned on positive cash flow; approximately $200,000 came from recruiting patients on the Quebec side of the border and sending the bills to the government of Quebec, and an estimated $140,000 arose from staff reductions and closing part of one floor of the hospital during the summer."

Usher emphasized that facts like those — available by law in Ontario — are necessary to combat privatization effectively.

"Freedom-of-information legislation is the best weapon we have," he said. "It enables us to get information that we can use in court. We're using it to get information about contracts: who the bid went to, how much it cost, who's working for the new contractor."

Usher noted that Canada's advantage is "being able to study what happened when health care services in the U.K. were privatized, to learn from what has happened there."

"As individual unions, we have to learn to recognize the warning signs of privatization, and we need to work together to help other unions combat the problem. We also have to help people across the country understand what privatization means."

Jacques agreed, pointing out that British health care unions have opposed privatization since it began in 1979. "And at the beginning of this year, we had an upsurge of activity — strikes, marches, industrial action, reactions that were happening for the first time in a long time."

Boone's conclusion emphasized how much is at stake: "The system that we have is good, but it is in danger. And it is something that all of us have got to protect, to maintain, to save for our future and for our children's future."
An immersion program

Climaxing HEU's first summer school was a panel discussion on "Health Care: for Profit or for People?" Featured speakers gave HEU members perspectives on the effects and threats of privatization in Great Britain, Ontario, and British Columbia. (See Pages 9-11 for details.)

Nancy Macdonald of Royal Jubilee Unit, Terry Klemmenson of Prince Rupert Unit, Imna Mohammed of Shaughnessy Unit and Lisa Nurse of VanU Unit.
for HEU members

It was a non-stop learning experience. For two weeks, some 200 HEU members from all parts of the province gathered in Vancouver to eat, breathe and live trade union education.

They were students at a special college of labor knowledge — the union’s first annual summer school, conducted in June at the University of B.C.

The pictures on these pages show some of the HEU scholars at work. Like everyone there, they underwent a true immersion program, with events scheduled into the evening and on the weekend. Activities ranged from classroom situations to mock arbitrations to presentations by guest speakers.

But a common thread tied all of that together. Everything was intended to help HEU activists do a better job for their fellow workers and for the union.

Each student began by taking part in a week-long program exploring different aspects of union leadership.

Most of the second week consisted of two-day courses on political action, occupational health and safety, negotiations, labor history, human rights, contract interpretation, communication, classification. Each student chose two of these options.

Finally, on the last day, the entire student body attended a panel presentation on privatization called “Health Care: for Profit or for People?” (See Page 9.)
Survey finds striking data

Nearly half of Canada's unionized workers would walk a picket line to protect their purchasing power.

Those findings come from a national poll conducted for The Globe and Mail this summer. It reported 44 per cent of workers agreeing that better wages are a good reason to go on strike.

But the hot spot for Canada seemed to be Toronto, where the pro-strike proportion was 69 per cent. B.C. ranked second highest with 59 per cent.

Three factors linked to the "unrest" were growing dissatisfaction with wages, a "negative view of wage gains in relation to the cost of living"; and expectations of insignificant increases over the next year.

A pay equity win in Newfoundland

Hospital workers represented by five unions will receive as much as $20 million in pay equity payments over the next four years under the terms of an agreement negotiated with Newfoundland's provincial government.

The money — about one per cent of total hospital payroll — will bring wages of employees in predominantly female hospital jobs up to those of workers in male-dominated classifications.

Job action threat saves job security

The probability of renewed job action led the federal government's "hand-picked arbitrator" to preserve job security for postal workers despite management's objections, according to CUPW President Jean-Claude Parrot.

Handed down in July, the arbitration award recorded some gains, including: a guarantee of no layoffs for the term of the contract, improved protection from harassment over work absences, and better provisions for vacations, recovery leave and rest periods for certain workers.

While forestalling layoffs, the award had a gift for the employer, according to Parrot: "a major rollback with respect to the hours of part-time employees."

But Parrot emphasized, "The fact that (arbitrator Laurent Cassette) understood that any rollback of our job security would definitely create a strike in 1989 was no doubt an important factor in his decision."

Non-nurse work falls to RNs

Confirming what many see as a disturbing national trend, a provincial survey by the Ontario Nurses' Association reports that registered nurses spend up to 30 per cent of their working time on non-nursing duties.

The 47,000-member union calls that a direct result of health care employers reducing clerical and housecleaning staffs, "preferring instead to impose many of these tasks on nurses."

The survey of ONA members tried to identify problems driving nurses from the profession and contributing to the nursing shortage. One finding: "Nursing support staff must be increased to allow nurses to do what they do best — care for their patients."

"Better-paid nurses combined with adequate support staff might yield better patient care without substantial increases in operation costs."

Checking the national pulse
Teachers not retiring over pension changes

The Ontario Teachers’ Federation was campaigning hard this summer against major amendments to the superannuation plan proposed by the provincial government.

OTF President John Fautheux warned Ontario Treasurer Robert Nixon that making the changes unilaterally could bring 100,000 protesting teachers onto the provincial parliament’s lawns.

Opposition centered on the proposed merger of two pension funds and a 2.34-per-cent rate hike.

Businesses lose charter argument

A Charter of Rights challenge of progressive labor legislation has been rejected by Manitoba’s Court of Queen’s Bench.

At issue was a law that empowers the Manitoba Labor Relations Board to impose a first collective agreement at the request of either side in negotiations if one of them has bargained in bad faith.

A group of businesses wanted to overturn that as a violation of their charter rights: Metropolitan Stores, the T. Eaton Company and the Winnipeg and Manitoba Chambers of Commerce.

But Manitoba’s labor movement launched a successful defense of the law, which had been introduced by the former New Democratic Party government.

Some wrong numbers from Bell Canada

While 19,000 employees of Bell Canada walked picket lines this summer in Ontario, Quebec and the North West Territories, they heard a few interesting numbers about the other side of the bargaining table.

The company’s chief executive officer, Raymond Cyr, earned $973,200 last year, the result of a 21-per-cent wage increase. Based on a 40-hour week, that comes $467.88 per hour, according to the Communications and Electrical Workers of Canada which represents the 19,000 striking employees.

It wasn’t known whether Cyr was among 6,000 Bell Canada managers who struggled to keep phone lines open during the job action.
Going on-camera with HEU’s story

They ought to be in pictures — and so they were. HEU members at two Lower Mainland facilities were featured in a short television report in early September.

They helped make a profile of the union that was broadcast on the first show of “BC at Work”, a new series produced by the B.C. Federation of Labor. It presents public affairs issues from the perspective of working people. (Each show airs twice: Sundays at 4 p.m. on BCTV, and again Wednesdays at 7 p.m. on CHEK-TV).

The three-minute profile described HEU’s 27,000 members as “working together for better health care . . . and for fairness to health care workers in B.C.”

It showed members in a variety of hospital settings (including those pictured here), and it featured individual licensed practical nurses and activity aides describing their work and the satisfaction of being a care-giver.

Because of limited time, not everyone who helped the camera crew actually appeared in the profile, but their help is appreciated. Here, then, is a complete list of members who helped send out the message that HEU stands for “the people who care for the people of B.C.”

- Judy Aldred, secretary-receptionist
- Barbara Charlton, activity worker
- Corina Choy, licensed practical nurse
- Narinder Darred, licensed practical nurse
- Hope Edwards, licensed practical nurse
- Glenda Erickson, licensed practical nurse
- Tracey Heyworth, respiratory therapist
- Tim Knodel, licensed practical nurse
- Lois McCann, cleaner
- Ron Moughtin, maintenance carpenter
- Gurpinder Mutti, cleaner
- Lavina Ramsay, admitting clerk
- Terry Ross, admitting clerk
- Cindy Taylor, activity worker
- Tom Wakely, transport aide
- Cathy Webster, unit clerk

Respiratory Therapist Tracey Heyworth

Unit Clerk Cathy Webster
ARE WE AMUSED?

What they say in Victoria . . .

"Probably in the last 10 years we have fallen back considerably. We haven't been able to keep up with programs or facilities as much as we should have and we're much more behind than most people realize."

Premier Bill Vander Zalm, describing the B.C. government's performance in meeting the needs of the elderly for long term care

". . . increasing the capability of our residential care clients to contribute to the system by evaluating their ability to pay."

Health Minister Peter Dueck, explaining what most observers call a means test for seniors facing increases in daily long term care rates

"There was certainly no coverup, and if he thinks I'm guilty of negligence, well then, he and I must have a different dictionary."

Labor and Consumer Services Minister Lyall Hanson, reacting to opposition leader Mike Harcourt's description of the minister's failure to act on an early report from one of his senior officials about inappropriate political interference by Premier Bill Vander Zalm's office in the licensing of a neighborhood pub

"I have no comment on that at all. I'm not going to talk to you about that anymore."

Premier Bill Vander Zalm, responding to questions about the fact that his labor minister did nothing about political interference in the pub licensing case

. . . and at the Richmond palace

"I am happy to see that the Hospital Workers' Union is deeply interested in the subject, and am hopeful that with our combined efforts we can reduce the suffering caused by back injuries."

Workers' Compensation Board Chairman Jim Nielsen, whose office is in Richmond, responding to an HEU position paper calling for fairer approaches to assessing pensions for back disabilities
Major fee increase hits seniors

As asked to take a stand, some 5,287 HEU members have put pen to petition and demonstrated their strong opposition to increases in provincial government fees paid by seniors who live in long-term care facilities.

Introduced in the spring, the 15-per-cent increase pushes the resident’s fee from $16.70 to $19.20 a day.

The measure affects nearly 24,000 elderly across B.C. By one estimate, they will pay an additional $35 million annually to the provincial treasury, with none of the money going to improve long term care.

The HEU signatures were among more than 43,000 on petitions tabled in the provincial legislative assembly. But they did not persuade the government to reverse the fee increase, and neither could reports of seniors having to move out of facilities because of the higher rate.

The minister’s public reaction to the petitions? That he could collect as many names on a petition calling for better service from the dogcatcher.

While a bit more polite, Dueck was no more giving on the basic fee issue when he actually met for two hours with representatives of the B.C. Old Age Pensioners Association.

“He’s just not listening,” Association President Jo Arland told The Guardian in late summer.

As this went to press a month later, Arland’s group and others were still pushing to roll back the increase, and the government’s position on the new fees remained rock hard.

A $99.3 million gift to employers

How much money is too much to help injured workers and make job sites safe? Some people know there’s never too much, but they don’t run the Workers’ Compensation Board of B.C.

Last year, the WCB gave employers in 25 industries a $99.3 million holiday from their quarterly assessments. It justified the action by noting that assessments collected in earlier periods hadn’t been spent.

The B.C. Federation of Labor sued the Board to stop the payoff — declaring that the money must be used for compensation benefits to injured workers, and
Compensation fight nears 10-year mark

The latest in the nine-year Judy Kereszi case is that the Workers’ Compensation Board has loosened the purse strings — but not enough to give the former hospital cleaner a decent living.

This summer, the Board decided Kereszi’s permanently, totally disabled back deserves only a half pension of $684.03 a month.

That’s more than the $104.76 she began with, but well below last spring’s official poverty line of $658.67 for a single person in Victoria.

Disabled in a 1979 on-the-job accident at Victoria General Hospital, Kereszi still lives in constant pain today. Eight major back operations haven’t helped, and neither has the WCB.

The Board refused until early this year to acknowledge her total disability, and it still insists on granting only a half pension because of legal technicalities.

(Those problems, experienced by many back-disabled workers, are addressed by an HEU position paper and a companion brochure published in July. Copies can be ordered from the provincial office.)

Despite the obstacles, Kereszi won’t give up, and her union is helping with another formal appeal for a full pension. Meanwhile, her former employer has opened another legal front, arguing that even a half pension is too generous.

It seems Kereszi’s struggle may yet hit the ten-year mark.

New HEU units

HEU organizing efforts have led to membership for workers at a half dozen long-term care facilities.

The most-recently certified units are: Deer Lake Private Hospital, Burnaby, with 35 members; Faisse Creek Residence, Vancouver, with 28 members; Jackman Manor, Aldergrove, with 48 members; Little Mountain Place, Vancouver, with 73 members; Paradise Care Home, New Westminster, with 15 members; Simpson Hospital, Port Langley, with 35 members.

LOS AMIGOS — A health care tour brings Latin American trade unionists to Vancouver and St. Paul’s Hospital. From left: Fred Muzin, HEU unit chairperson; Paul Pilet, Canadian Labour Congress representative; Susana Rodriguez, a Salvadoran textile worker; Benjamin Cardenas, a Panamanian steel worker; and Carlos Solano, a Costa Rican hospital worker.
Making more points against privatization

It was a Queen Charlotte City fundraising fair called "Hospital Days," and members of HEU and other health unions came together to make points against a favorable approach of the provincial government.

In one day at the summer event, they collected signatures from 119 people opposed to privatization.

The joint effort "shows beyond doubt that the people of Queen Charlotte are not in favor of privatization of our health care system," said Unit Secretary-Treasurer Alfred Murna.

A fight to save jobs at Mission

A fight for 54 licensed practical nursing jobs at Mission Memorial Hospital was nearing a climax, as it went to press.

The battle had begun in July when the hospital laid off four LPN's and announced plans to replace all the rest with a mix of registered nurses and aides.

With HEU support, the LPN's went public. They approached local doctors, wrote letters to newspapers, circulated leaflets, collected 1,200 signatures on petitions, and got the city council to pass a resolution opposing the loss of LPN jobs.

The final chapter was to be a hospital board meeting in late September, when the nurses planned to ask the trustees to reverse the administration's plan.

HEU effort draws 3,200 supporters

HEU findings confirm recent polls showing significant public resistance to the provincial government's privatization schemes — especially in health care.

The union assessment reflects the response to its Stop Privatization campaign. Beginning last spring, HEU invited British Columbians to put their opposition on the record and to receive background on the dangers of privatized health care.

By late summer, a total of 3,203 respondents had sent cards to HEU's provincial headquarters offering to help in the fight to keep health care services kept out of private hands.

Of those, 2,087 asked for free union information kits which had been developed after months of intensive research.

Out for blood with free trade

Some supporters of the so-called "free trade" deal are truly cold-blooded.

At least they seem unconcerned that it threatens to destroy Canada's voluntary blood donor system by allowing U.S. firms to lay siege to the Canadian Red Cross.

Federal Health Minister Jake Epp has confirmed that commercial American blood banks could operate in Canada and profit from buying blood and selling costly by-products to laboratories and hospitals.
BOYCOTTS

The B.C. Federation of Labor asks all HEU members for their support in boycotting certain companies and products.

Unions representing the workers involved seek Federation support in the hope that boycott actions will help end longstanding disputes. The boycotts remain in effect until settlement of the disputes:

• All non-union postal outlets — by Canadian Union of Postal Workers/Canadian Labor Congress.
• All goods and services of Shell Canada and Royal Dutch/Shell — by CLC.
• All Hyundai products — by B.C. & Yukon Building Trades Council.
• All products of Zeidler Forest Products — by CLC/IAW Canada.
• All forest products of Louisiana Pacific Corporation — by Carpenter/IAW Canada (Look for Wafwood construction panels, Fabco Xerolite insulation, Weatherseal windows and doors and other construction materials).
• All California table grapes — by United Farmworkers of America.

In addition, Federation affiliates are asked not to purchase or handle any products originating in Chile or South Africa.

Federation hot edicts continue against:

• Royal Canadian Legion #26 in Kelowna — for Hotel and Restaurant Employees' and Bartenders' Local 40.
• Callwood Industries in Surrey — for Carpenters Union Local 1929.
• Hyundai-Kirshoff — for B.C. & Yukon Building Trades Council.

It's tough for Bill 19 supporters

It was a tough summer for the Industrial Relations Reform Act, also known as Bill 19.

On one front, a boycott led by the B.C. Federation of Labor and supported by HEU produced a court case that threatened the law's validity.

The boycott centres on the Industrial Relations Council which in July said a carpenter's union picket line was illegal.

But the pickets stayed up, and Supreme Court Justice William Trainor refused to issue a court order against them. He said the courts should not be required to "rubber stamp" IRC decisions.

The B.C. Court of Appeal was to rule on that judgment later in the fall, and agreement with Trainor would make Bill 19 a paper tiger.

(Meanwhile, HEU President Bill Macdonald offered Carpenters Union Local 1938 support for "the firm stand your members have taken on behalf of the entire British Columbia labor movement").

A separate blow to the legislation came this summer with an official condemnation issued by the International Labor Organization.

A United Nations body with union, management and government representation, the ILO ruled in June that Bill 19 violates workers' rights and interferes in collective bargaining.

But Premier Bill Vander Zalm — saying "we're happy with the legislation" — insisted that Bill 19 would not be changed.

Still, HEU and other boycotters could record some progress, and they predicted more tough times ahead for supporters of the anti-labor law.
Presenting HEU bursaries

More than $4,000 in educational assistance for the 1988-89 academic year has been awarded to nine post-secondary students by the HEU Bursaries Committee.

Awarded annually, the union bursaries go to HEU members with at least one year's continuous service or to their children or spouses.

The recipients this year are:
- $1,000 to Marilyn Kingison of the Croogas Unit — the Edward James Ashmore Memorial Bursary (jointly sponsored by the Surrey Unit and Provincial Executive).
- $500 to Beatrice Scott of the Richmond Unit — the Lions Gate Unit Bursary.
- $500 to David Way of the St. Paul's Unit — the Prince George Unit Bursary.
- $500 to Susan Park of the Prince George Unit — the Provincial Executive Bursary.
- $500 to Felipe Librel of the Vancouver General Unit — the Royal Jubilee Unit Bursary.
- $350 to Lauren Pau of the West Coast General Unit — the Mission Unit Bursary.
- $350 to Barry Corral of the Fort St. John Unit — the Vancouver General Unit Bursary.
- $350 to Janice Morrison of the Shaughnessy Unit — the Vancouver General Unit Bursary.
- $350 to Balvinder Gill of the Royal Jubilee Unit — the Victoria General Unit Bursary.

GOOD AND WELFARE — Money for research goes to Alzheimer Society of B.C.
The representative-Paula Laverman (left) from Joanne Martin, Good & Welfare Committee Chairperson of HEU's Evergreen Unit in White Rock. A two-day garage sale raised the $1,000 donation Unit Members "volunteered their time and energy, as well as many donations of goods," said Secretary Treasurer Kathy Gieser.

We want long shifts

LPNs at Royal Inland hospital request that extended work hours shifts be re-opened to change, thus providing continuity of care to patients — including time spent with patient needs and better communication with RN team leaders, providing safety for both patients and nurses.

Our duties as LPNs involve direct patient care. Patients have appreciated one nurse on days and one on nights, instead of the confusion of three shift changes.

We have received positive feedback due to the morale of the staff involved and the superior organization provided by the extended hours.

As our patients' comfort and welfare are what we are working toward, it is imperative that an open-minded look be given to whereLPNs needs sit — with respect to patient care and with regard to the needs of Housekeeping, Dietary, Laundry and Maintenance. Please realize that our objectives are completely different and that we should be considered a separate body of people with special working hours to accomodate and fulfill our objectives.

We feel that the Union and the Hospital, who are representing our needs, should accommodate the wishes of the LPN employees in this particular area of concern.

— Judy Burn, RN, Kamloops Unit

EDITOR'S NOTE: The union's current policy on extended hours of work was arrived at by democratic process during HEU's 5th Biennial Biennial Convention which decided to place a freeze on
existing extended shift arrangements.

This edition went to press before the deadline for membership resolutions at this year's convention in October, so it was unclear whether the policy would be reconsidered.

Delegates supporting the policy at the last convention raised several arguments against shifts longer than the 7 1/2-hour shift specified by HEU's master contract. Among them:

- Extended hours are detrimental to workers' health and safety.
- Workers show a reduced commitment to the union's goals.
- A smaller workforce reduces the chance of getting a job for HEU members.
- Under current provincial labor law, an 11-hour shift with two meal breaks means employers pay only 22 hours in a 24-hour period.

Picking up the torch for Gordie Meagher

Many personalities contribute to a union's growth and strength. We need the trouble-making, the flamboyant ones. But often the quiet and thoughtful ones — going about their business without looking for a place on the band — are the backbone of the union.

Such a man was Gordie Meagher, who passed away earlier this year. Born and raised in New Brunswick, he worked as a logging camp cook, stored and loaded trains before joining the army. As a lance corporal he transferred to Vernon, B.C., where he met and married his wife Louise. Discharged a year after their December 1945 marriage, Gordie soon began work as an orderly at a home for the aged. In 1962, he was hired as a night shift orderly at Vancouver General Hospital, where he eventually transferred to the transportation department.

These were the early days of Gordie's life. It's too bad we didn't meet him during that period. But as the years went on, taking people to their bedside became a trademark of his work. He represented strength and stability to many members, especially those in need.

In his personal life, as in his union life, Gordie was kind, generous and dependable, a source of strength to his wife and only son. They miss him sadly.

Gordie's other family, the Hospital Employers' Union, also misses him. The union rates, in particular HEU, are poorer without him.

Gordie Meagher has passed the torch to someone else. Let us all pick up the torch as a tribute to him.

— Bob Davis, VGH Unit

MILESTONES

Phyliss Douville, an LPN at Creston Valley Hospital since 1984, retired earlier this year to enjoy her garden and get away for some travel. She had also worked briefly at the unit in the early 1970s, shortly after completing her training in Nelson and Kimberley.

A three-decade career at Kootenay Lake District Hospital ended this spring for Carmela Iallonardo, who began work in the Nelson facility's dietary department in April 1987. Her co-workers wished her a special farewell with a retirement party at HEU's Kootenay Regional Office.

Enjoying life is at the top of the retirement agenda of Helen Simmons, a house cleaner and worker who ended 16 years at Kelowna General Hospital this summer. She worked in the laundry at Colombo and was much appreciated by residents and staff.

Thank You

This is just a quick note to thank all my brothers and sisters from the HEU Summer School who sent me the basket of fruit when I had to leave early due to illness. It brightened up my hospital stay to know that you were thinking of me.

-Ray Carneau, Shaugnissett Unit
How free trade can get you down

By Joani Read

Gosh. Every time you think it’s safe to go out shopping again like you did in the old days, without a worry in the world except whether or not you should actually be wearing higher heels with that cute short skirt, somebody will try to ruin your mood.

They will try to ruin your mood with things like nuclear war or acid rain, or the abortion issue and Bill Vander Zalm, or political prisoners in Central America or free trade and the threat to democracy — things that a person who is interested mainly in shoes should not have to worry about.

The other day, for instance: There I was, happily heading out the door with nice new shoes on my mind, when my eye fell on a flyer sent out by an anti-free trade group who did not fail to mention the threat to democracy expressed in the Conservative government’s complete about-face on the free-trade issue.

They quoted Brian Mulroney in 1983: “This country could not survive with a policy of unfettered free trade.”

At the moment, I was more interested in free trade with Italy, where the best shoes — not to mention the best cotton sweaters and pasta and cappuccino bars — come from. But I did decide to give the threat to democracy some thought, as I was driving up to the mall.

It seemed to me that democracy had always been under threat, ever since it was invented — even though, of course, these days things are worse than usual. These days, it seems, the only countries moving toward democracy instead of away from it are the Soviet Union and the People’s Republic of China, which makes it pretty suspect right there, don’t you think?

Democracy: What makes it so good anyway? Why does it always have to be defended?

Is it worth the trouble?

And if it is worth the trouble, why is everybody sitting around in restaurants eating expensive lettuce instead of demonstrating in the streets?

This is why: The democratic process means running things according to what most people want. And we all know how we feel about most people, right?

I mean just look at them. Do they even know how to dress properly, with humor and irony, as befits a decade as sophisticated as the ’80s?

No. Everywhere you look are people — most people — dressed with appalling taste. Some of them even wear Ultrasuede. What makes them think they can run a country?

You know how you feel about it. As soon as most people start doing something, you know that thing is a good thing to stay away from.

Most people watch the Bill Cosby Show. Most people want cheap transportation, resulting in the Hyundai. Wouldn’t the world be a more attractive place if people could only drive Jaguars, Porsches and Ferraris? Of course, it would.


You just can’t trust most people. And if you still doubt it, consider: Most people got us Brian Mulroney for prime minister, too, causing us to get all those depressing flyers in the first place.

I rest my case.

(Joani Read is a regular columnist for The Province, the Vancouver daily newspaper for which she originally wrote this piece.)