HEARTS OF HEALTH CARE: Zena Daruwalla, Heidi Archibald and Stephen Campbell Hill.

The Heart of Health Care Revue is a hit!

Could the story of health care workers be told in theatre, music and song? It seemed like a long-shot, but the HEU’s Provincial Executive decided to give it a try and the hit Heart of Health Care Revue was the result.

From the Kootenays to Dawson Creek and from Prince Rupert to Victoria, British Columbians are enjoying an unforgettable insight into the crisis in health care.

250 angry HEU members protest safety inaction

When the Health Labour Relations Association decided to hold a conference on health and safety instead of bargaining real protection in a new agreement, more than 250 HEU members rallied outside to show their anger.

The April 26 rally in Vancouver drew strong support from other health care unions. At left, HEU secretary business manager, Carmela Allevato addresses the rally.

HEALTH CARE WORKERS TO HOSPITAL BOSSES:

‘BACK OFF!’

HEU rejects roll backs, opposes wage controls

After more than two solid months of bargaining, B.C.’s health care employers are hiding behind wage controls and insisting on sweeping contract concessions from the HEU. At its April meeting, the union’s Provincial Executive decided to take action on several fronts, including full participation in labour’s campaign to defeat wage controls. Details of the campaign, page 3; details of Bill 82, the wage control law, page 12.

A full bargaining report page 10.
Social Credit wage controls can be beaten

THERE is something ironic about the fact that the first HEU local to come up against Bill 82, the latest round of Social Credit wage controls, is the May Bennett local.

One decade ago, it was the provincial wage control legislation of May Bennett’s son, Premier Bill Bennett, which robbed HEU members of many of their hard-won contract improvements, including the 35-hour week.

Bill Bennett was replaced by Bill Vander Zalm and Bennett’s public sector wage controls (the Compensation Stabilization Program) has been replaced by Bill 82, the Compensation Fairness Program. This legislation has nothing to do with fairness and everything to do with mean-spirited policies of this provincial government which tries to buy low paid public sector workers like HEU members as the scapegoats for its mishandling of the economy.

COMMENT

by CARMELA ALLEVATO

Bill 82 was just not another Bill Vander Zalm brainwash. It is a piece of legislation which articulates a conservative agenda to which all of the Social Credit members of this legislature adhere.

These wage controls are coming from a government that is financially and morally bankrupt. They are a blatant attempt to deflect attention from the government’s misdeeds by attacking public sector workers.

When Bill 82 became law, one of the legislative groups to be hit by wage controls were the low paid workers at May Bennett, nearly all of them women. Bill 82 threatens wage discrimination and it is a direct attack on our members who are at the low end of the scale in terms of public sector workers.

What do we want to do? We must ensure that this legislation is withdrawn. The surest way to do that is to defeat the government that introduced it.

But that will not happen unless we educate ourselves and inform the public about Bill 82. The Provincial Executive has established a Task Force on Bill 82 charged with developing and implementing a campaign against this legislation.

As a first step we can all ensure that we are registered to vote in the provincial election. Seven hundred thousand British Columbians were left off the voters list when the province was enumerated last year.

We must also continue our work at the bargaining table. We will continue to oppose the employers attempts to roll back existing contracts.

And we must stand shoulder to shoulder with our sisters and brothers in the B.C. Teachers Federation as they fight to preserve their hard-won recent contracts from the tentacles of Bill 82.

In our own union, our first objective must be restoration of the full contract benefits of the May Bennett workers.

Then we must bargain new collective agreements for everyone in the health care field. Bill 82 must not be allowed to stand in the way of fair and just agreements covering every HEU member.

May Bennett workers express heart-felt thanks to HEU

• The following was written before May Bennett HEU members learned that their contract settlement was being referred to Compensations Stabilization Commission Ed Lien.

Thank you to all HEU members from the May Bennett gang! We couldn’t have done it without you. Our contract is now a reality.

A warm thank-you to our Provincial Executive and all the other Brothers and Sisters for your encouragement, guidance and financial and physical support, especially the wonderful Jimmy Tuttle. What a blessing they were on our 24-hour picket line. We will remember your generosity, inspiration and friendship.

RENA KUNTH.
Chairperson HEU May Bennett Local
Kelowna

WCB unhappy at Guardian report on sterilizers

I am writing to set the record straight regarding comments attributed to me in an article in the September edition of Leciaa Qwad (Guardian, March 1991) which was that ‘recommended times of at least $12,000 be charged VGH’.

VICTORY PARTY: May Bennett workers celebrated their first contract with Provincial Executive members in March. Now their wages have been frozen while the wage control case reviews the contract for failing to follow safety rules.

This statement is completely incorrect.

In a meeting on Feb. 4, at which representatives of the hospital and the WCB were in attendance, I advised that the hospital was about to appeal a $4,000 penalty recommendation.

I further advised that repeated non-compliance with WCB orders could potentially lead to an $8,000 penalty if the first is appealed and it is to be repeated again then the hospital could face a $12,000 penalty. For the record, no determination has been made to date on a penalty regarding Van
couver General Hospital.

We wrote that ‘recommended times of at least $12,000 be charged VGH’.

That statement was later clarified to read that there is every indication that failure to follow safety standards in the WCB area is prevalent throughout the hospital. This statement is inaccurate. For the record, no appeal was filed or anyone from the WCB made these statements.

My inspection report of Feb. 9, 1991 indicates safety deficiencies in the WCB area resulting from incomplete implementation of the hospital’s health and safety program. As a result, VGH was ordered to correct these deficiencies, determine why the health and safety program was not properly implemented in SSD, and as a preventative measure, review the health and safety program elsewhere in the hospital to ensure it is up to standard. That was all.

HEU member wonders where we’ve been

I have been an HEU member for more than 15 years and the last issue of The Guardian is the first time I’ve received this very informative magazine. How come? What is your mailing list made up of?

TENA ATLEY.
Westminster.

Health care employers provide us with lists of addresses so required in the collective agreement, but some were too slow to do so. As a result, some HEU members did not get included in the first ever direct mail issue of the paper in February.

LETTERS TO THE EDITOR

Guardian welcomes letters to the editor. Please be brief. Write to: 2090 W. 10th Ave., V7Y 4P5 or leave your ideas on the Guardian hotline, 734-9131.

Guardian

'In humble dedication to all those we set to live.'

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Director, Health Care Administration

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Strong demand for Heart of Health Care

Several locals have written to the Provincial Office asking for more.

Heart of Health Care buttons. The button seems to have been quite a success, says Lawrence Charles Lundersait of the Sunderland local. "Quite a few members of my unit at Sunderland Hospital are sporting them. I have been told by some that I seem to be wearing a lot of buttons."

"And maybe something to make the government sit up and take notice."

I suggest things like "I support B.C.'s Pay Equity Plan." All the way!"

Dietary ad

"When I first heard of this campaign I was very excited."

Heart of Health Care buttons have been distributed to Kaiser Permanente members in a variety of ways. Members have been given a button for every dollar paid. Members of the local have been given a button for every dollar paid. Members of the local have been given a button for every dollar paid.

TWO LIFETIMES OF CARING: More than 100 friends and fellow workers of Maria and Joe Loechel attended a Heart of Health Care Hospital in South Vancouver April 12 to honour the two HEU members on their retirement. Joe immigrated to Canada in 1954 and started work at Holy Family in 1954. He sponsored his sister Maria as an immigrant in 1968 and she started work that year. Both worked in housekeeping and are much loved members of the hospital community as well as strong union members.

Capital Region local changes its name

HEU's Capital Region local has changed its name to Victoria Association for Community Living. The Provincial Executive approved the change April 9.

Kiro Manor builds turnabout Heart of Health Care

Thanks to the crew at Kiro Manor in Trail for their hard work on behalf of the Heart of Health Care campaign. They turned out in force for a successful event.

Pioneer workers keep pressure on lay-offs

HEU members employ.

Capital Region local changes its name

"The province is facing a difficult time right now." The HEU is seeking the public's support to help them stay strong in this challenging time.

Rose to leave CUPE post

Jeff Rose, national president of the Canadian Union of Public Employees since 1963, has announced he will not be seeking re-election when the union's next convention is held in October.

Rose presided over a period of important changes for CUPE and made it a major force in the struggle against the Peso Trade Agreement and the Canada-U.S. Free Trade Agreement.

He was instrumental in negotiating the 1984 agreement with HEU and saw the union's renewed interest in the Canadian Labour Congress through CUPE.

The HEU Provincial Executive, which met in Vancouver April 23, re-elected the current executive board.

In a message to CUPE members, Rose said: "The most important consideration for me at this time of my life is to be involved in a full-time basis with John and with John, our six-year-old son."

Star on TV!

Join the studio audience for the taped show of The Heart of Health Care, HEU's musical and theatrical review.

Taping is at 8 p.m. on June 13 at the Vancouver East Cultural Centre, 1955 Venables at Victoria Drive, Vancouver. Admission Free. Bring the whole family.
HEU backs legal test on same-sex benefits

By BRAD TESTER

B.C. human rights advocates are clasping a member of the Hospital Employees’ Union for his fight for same-sex spousal benefits.

With the HEU’s help, The Knodel, a licensed practical nurse at Shaughnessy Hospital, has launched a court action against the B.C. government and the Medical Services Commission over a policy which denies spousal benefits to same-sex common-law spouses.

Spousal benefits are the benefits a spouse — husband, wife, common-law spouse or partner — would receive under a collective agreement.

The trial, which will be closely watched by civil rights organizations across Canada, is set for five days beginning June 10.

Knodel, who took the frustrating step of disengaging his民事 liability to his employer — “it’s not something I hide but it’s not something I’m publicizing” — found himself up against the wall when confronted with the anti-gay B.C. Medical Services Commission policy.

Already coping with the news that his job and spousal benefits for five years was seriously ill, Knodel was told by the hospital that the B.C. medical plan would not cover his partner.

Narrow spousal definitions block gay and lesbian from basic medical plan coverage in most provinces, although some major insurance carriers including the CIC and C Health Services Society are covering full dental and extended care medical benefits — if employers agree.

“It was another slap in the face,” recalls Knodel of the benefit refusal. “On top of all the other things going on in my life... with Ray being sick in the hospital and me working full time and trying to visit him. It was difficult.”

His partner, Ray Garsneau — who has since died — had also been an LPN at Shaughnessy, until failing health forced him to take sick leave.

In the period between his sick leave expired and long-term disability coverage began, Garsneau was without medical plan benefits.

Shaughnessy Hospital was prepared to pay premiums on behalf of Garsneau, noting that such coverage was in line with the HEU contract. However, the Medical Services Commission refused coverage, explaining that the B.C. medical plan recognizes both legal marriages and common-law relationships, but only those of a heterosexual nature.

Says HEU secretary-business manager Carmela Allavato: “It’s important that a clear message be delivered that this discriminatory policy is intolerable.”

HEU bargained medical coverage for same-sex partners in 1988. The 1990 Wage Policy Conference reaffirmed HEU’s commitment to extend benefits to all members.

HEU’s sponsorship of the Knodel court case is termed “crucial” and “lifeline” by lesbian human rights activists and “a positive stand on behalf of its membership” by the B.C. Civil Liberties Association.

Civil Liberties Association policy director Margaret Johnson says the need for such action arises because of the failure of the B.C. government to protect human rights.

Predicting that the case will draw a line in the sand, HEU president promised that the association will be watching the case and “giving whatever support we can.”

During the past year, NDP governments in the Yukon and Ontario have made historic advances in the definition of “spouse” in benefit policies. For the first time, lesbian and gay spouses of government workers will get extended medical coverage and dental and life insurance.

A similar extended definition of “spouse” is now offering benefit protection for same-sex partners at a growing number of workplaces including the City of Vancouver and the University of British Columbia. As indicated above, the B.C. Medical Services Commission continues to deny the medical plan coverage portion of employees benefits regardless of the employers’ definition of spousal.

“Meanwhile, Knodel is a little nervous about the publicity likely to be generated by the upcoming trial but says he’s determined to follow it through. His late partner Garsneau, a former HEU shop steward, had been a political activist in the family. ‘When the union asks if I wanted to carry it forward in court, I said sure,” says Knodel. “Having done it and it might as well be.”
Angry HEU members slam ‘sham’ safety conference

More than 250 angry HEU members demonstrated at Vancouver’s Robson Square Media Centre April 28 to protest an employer-sponsored safety conference which focussed on the “perception of risk.”

“We’re here today to tell health care employers the risk is real,” said HEU secretary-business manager Carmela Allevato. “It’s not in our heads and we have the injuries, wounds and illness to prove it.”

Allevato challenged employers to show they are serious about health and safety by bargaining real improvements in new collective agreements. “This conference is a sham,” she told the demonstrators. “I say shame on the Health Labour Relations Association.”

Debra McPherson, president of the B.C. Nurses Union, expressed her organization’s full support for the demonstration.

Allevato told workers that the Health Labour Relations Association (HLRA) has refused to agree even to modest health and safety demands, claiming they could fall under new Social Credit wage control legislation.

SUPPORTING HEU: BCNU president Debra McPherson expressed her union’s full support April 28 for HEU’s protest against an employer-sponsored health and safety conference designed to manage “risk perceptions”. McPherson and HEU secretary-business manager Carmela Allevato both urged employers to stop discussing health and safety and to begin bargaining real protection.

Maple Ridge HEU local tackles CAPS

Maple Ridge Hospital is having difficulty understanding that replacing HEU members with personnel from CAPS Nursing Services is a big waste of money.

Despite the recommendation of investigator Donald R. Munroe, stiff opposition from HEU and largely inflated costs, the hospital continues to use CAPS services.

The agency service, which offers hospitals and long-term care homes substitute workers for short-term employment, deprives HEU members of working hours and encourages low pay for health care workers.

CAPS licensed practical nurses and care aides make substantially less per hour than HEU members but a safety service fee charged by the agency puts the rate far above that paid union members.

An HEU member at Maple Ridge hospital who formerly worked for CAPS says the agency only paid him $16-an-hour for care side services, though the hospital paid CAPS up to $17-an-hour.

Investigator Munroe, in a troubleshooter hearing earlier this year, recommended that the hospital “make every reasonable effort, including local newspaper advertisements, to enlarge the list of HEU casual LPNs and care aides in the hope that this issue may be avoided.”

To help convince the hospital, which stubbornly continues to pay out extra dollars, the HEU will file grievances every time CAPS services are used.

The troubleshooter hearing was scheduled after 30 grievances were filed by HEU members over the hospital’s use of CAPS services.

LOOK BACK

Kelowna sit-in forced action

Frustated with attempts by the employer to reverse on their collective agreement, HEU members at Kelowna General Hospital staged one of the first work stoppages ever at a major B.C. hospital in June 1974.

Union members withdrew their services on June 20, and stayed off the job for five days, staging a continuous study session in the hospital cafeteria.

They were protesting management’s clinically on provisions in their recently-signed contract involving pay for work on statutory holidays, severance allowances and dates of application for cost of living allowances.

Most upsetting was the way the Kelowna Hospital had paid employees to work the previous Good Friday. Under terms of the agreement ratified in January 1974, union members were entitled to a bonus equal to one-and-a-half times their regular rate of pay for work on three statutory holidays — Good Friday, Labour Day and Christmas.

It was a compromise from the union’s demands on the bargaining table for 10 of these “superstat holidays.”

SOLIDARITY BARBECUE: Workers lined up for barbecued breakfast in 1974 during an HEU sit-in at Kelowna General Hospital which forced employer compliance with the collective agreement.

But when workers looked at their pay cheques for Good Friday they found the hospital had awarded them a holiday bonus amounting to only half their regular rate.

It was the same story at hospitals across the province, only the Kelowna members decided to act first. The workers were also upset with the way management unilaterally decided to interpret the cost-of-living clause, a major concern given that the consumer price index was increasing by 11.6 percent in 1974.

The hospital’s refusal to pay COLA for partial percentage increases in the cost-of-living, and decided to begin payments two months after the end of each six month reference period stipulated in the contract, refusing to pay retroactively from the end of the reference period.

A court injunction forced union staff members out of the hospital cafeteria in Kelowna. But workers chose on an individual basis to stay.

Registered nurses supported the HEU members by performing regular duties, but refusing to do work normally done by union members. The union offered to supply food to patients with special diets and refreshments to all patients, but the hospital refused.

HEU units in Kamloops, Penticton, and Trail voted for Kelowna action. The Kelowna members ended their study session only after the B.C. Hospital Association agreed to meet with the HEU within three weeks to discuss the deteriorating industrial relations climate within B.C. hospitals.

The union had enjoyed good success at the bargaining table and was achieving many of its legislative goals thanks to the NDP government of the day. But the employers were determined to make life difficult, taking away through the back door what they’d lost at the bargaining table and the ballot box.

Members in Victoria, the Kootenays and the Okanagan voted for strike action.

Meanwhile, the employers’ group, the B.C. Hospital Association, was calling for compulsory arbitration to replace collective bargaining in health care. The idea was agreed to ask Bert Blair — the man who helped them negotiate the collective agreement — to make recommendations on the dispute.

Blair ruled in favour of the union on statutory holidays and severance pay, while giving the workers a partial victory on the cost-of-living dispute. He ruled the hospitals should include partial percentage increases in COLA payments, but that they were not required to pay COLA retroactively to the end of each reference period.

April/May 1991 • GUARDIAN
Master of orchids

Delicate flowers flourish under his care

NELSON — The lip-like petal of the orchid might well arch into a broad smile on the plant as it glows under the protective gaze of hobby gardener and long-time HEU activist Dick Doorshoch.

Doorshoch, a well-known figure at local weddings and HEU retirement celebrations — he even featured in the loving attention of the Dutch-born former coal miner’s wife — has a passion for orchids. He tends his collection of orchids, which has grown into a 10-hour-a-week, 1,000 plant project, begun some 30 years ago while he was still a coal miner living in Holland. “I grew the normal houseplants but that wasn’t good enough. I had to grow the ultimate!”

There was much to learn. He quickly found that orchids, which grow in fur bark, rot soil, and require 40 to 70 percent humidity, can quickly make a jungle out of a household.

Building a greenhouse led to challenges involving heating and sprinkler systems. “We (Doorshoch and his brother, an engineer at Drift University) became overnight plumbers,” Doorshoch said.

In 1966, a downturn in mining prompted Doorshoch to sell his plants and emigrate to Canada — heading straight to what had been advertised as the “mining” town of Nelson. “Thank God there were no mines here,” says Doorshoch.

Doorshoch worked as a machinist for Canadian Pacific during his first 10 years in Canada, resuming the orchid hobby in 1979 after landing his job with Willowsheen.

Although some of the locals in the mountain region were skeptical of the plan to grow flowering orchids in often cool Nelson, Doorshoch carried on. Through the purchase of young plants from the United States — “Canada is not advanced in orchid production” — the determined gardener successfully cultivated a variety of orchid commonly used in the bridal market.

Two years after building his Nelson greenhouse, Doorshoch was rewarded with orchid blooms. These days, a local florist pays $4 a bloom for the Doorshoch product which covers the greenhouse heating costs.

Doorshoch doesn’t expect to ever earn a living on his orchid production but in return for his hard work, the hobby has offered tremendous satisfac-

A vital number-cruncher

Bill-paying is this activities’ health care job

NELSON — The work day of Kootenay Lakes District Hospital accounts payable clerk Lorna Weston often includes a good dose of contract interpretation.

It’s not included in her job description and the hours involved are largely voluntary, but Weston devotes much of her after-hours to billing and getting the accounts done for a 2 a.m. inspection of the sensitive account.

Weston’s fondness of orchids is matched by her devotion to the hospital’s bookkeeping.

ON THE JOB

A lively staff member at a Kootenay Lakes Hospital in Nelson, Lorna Weston is responsible for ensuring the bills get paid.

Weston also appreciates not having a boss standing over her shoulder. “There is minimal supervision. I know what needs to be done and when to do it so I can just go about my business.”

Paying for the hospital’s supplies is what her job is all about. She deals primarily with the supplies department which orders the supplies, cleans and maintenance departments. The kitchen and pharmacy order their own supplies.

Purchasing sends receiving to the accounts payable clerk to check that the amounts tally.

But if her job is all numbers, Weston’s after-hours activities as a union steward can be an emotional roller coaster. During the strike she worked up to 12 hours a day, sometimes even while looking after her two children.

The union activist is motivated by the satisfaction gained from hours of shop steward work. “Whether we win or lose I feel we’re doing the right thing because we’re trying to help.”

DOORSHOCHT

When it comes to the squeegee on sick claims

WHENEVER hospitals are hit by financial or other problems, the Ministry of Health hides behind the excuse that hospitals are independent bodies. But health care faciliti-
ses, and their bargaining agent, the Health Labour Relations Association, are left on a short leash by the ministry. Recently, HILA publicly disclosed how Victoria is juggling the fees to defray the costs of health care services.

What is happening on our end of the leash is that hospital managers are fighting claims for Workers Compensation, Long Term Disability, and even sick leave. HEU members find themselves being checked up more often, and their claims fought more vigorously.

HILA has launched new initiatives to reduce absenteeism, including WCB and LTD claims. In common with CCIRA and Pricers, HILA has gone to the bargaining table seeking concessions in health, safety and benefits.

Employers are also setting up rehabilitation programs to get workers back on the job faster, but they ignore question of injury prevention.

So what’s going on at the other end of the leash? It turns out that Victoria is holding back millions of dollars from hospitals as part of an effort to improve what it calls “leave management.”

An HILA publication recently reported that the ministry commissioned a study which charged that many of BC’s largest hospitals have excessive absenteeism.

As a result of the study, the ministry held back grants from 12 health care facilities.

After a meeting with hospitals, HILA said the ministry released $2.5 million of that grant money on the condition that it be used in programs to lower absenteeism.

HILA complained that many of the hospitals penalized had low levels of sickness. WCB and LTD claims, and ministry spokesperson Graydon Gibson confirmed that “the initial threat was to go after the larger hospitals. It’s trickled down.”

Gibson said the ministry is now encouraging all B.C. hospitals to “effect a reduction in lost employee time.”

An attack on the problem should start with asking why claims under WCB and LTD are growing. The ministry and hospital administrators wrongly believe that health care workers are taking advantage of the system.

But the truth is that health care workers are ill and injured more often because they are working harder than ever. The Social Credit restraint policies that force fewer workers to serve more patients.

The Social Credit government has attacked patients through its restraint policies. Now it is attacking dedicated health care workers who have sacrificed their own health in the cause of serving patients.
New York health union opposed Gulf War

New York city health care workers, many of them with family members in the American armed forces, were overwhelmingly lean to the anti-Gulf coalition. A CWA local comprises members of Local 1199, a major health care union embracing workers in New York and New Jersey, were meeting in a special assembly that day when union president Dennis Rivera told them of the war's onset.

"Many, many of our members, staff and officers have relatives serving in the Gulf," he wrote later in the union's newspaper, "The number is very much in proportion to the country at large, because some 60 percent of our troops in the Gulf are Afro-Americans or Latinos."

Health care workers could only compare the funds available for war with the denial of money for basic services at home, Rivera said. New York State health funding will decline by $4 billion in the next 12 months.

"I believe our attacking the Persian Gulf is a deadly, sinful act," Rivera wrote. "Our members can live most of their lives, but we can't provide decent housing at home. We find the money to arm our children with tanks in Baghdad, but we can't sustain the facilities at a decent level here in New York City."

"We are militarily strong but domestically weak, like a bully who doesn't know how to screw in a light bulb."

"In our misguided attempt to be policemen of the world, we are spending $1 billion a day for the war in the Persian Gulf, and $30 billion for the first four days of war. New York's projected health care cuts could be $4 billion."

"It is adding insult to injury to ask our members and their neighbors who already suffer the loss of loved ones in this immoral war, to suffer the financial consequences of layoffs and reduced services caused by the war."

El Salvador health crisis a product of civil war

El Salvador faces a serious health crisis created by a decade-long civil war and economic injustice, two Salvadoran health care activists told a meeting of the Health Sciences Association last month. Benita Delmas, a nurse, and Santiago Diaz, a popular educator, work for the Association for Health and Inter-Community Social Services, and were in Vancouver to meet with Canadian health care workers and to raise money to expand their work.

Their organization, which was started clandestinely in 1983 during a time of extreme political repression, provides community-based primary and preventative health programs, and organization and training in 54 rural communities. It receives partial funding from Oxfam and the HSA.

El Salvador, with a population of five million, is a small country, about the size of Vancouver Island. Most people live in extreme poverty. The U.S.-backed government spends only $10 per person a year on health, compared to the $3 million a day it spends trying to defeat left-wing guerrillas.

The country has only eight hospitals, although most people cannot afford to use them. Doctors appointment requires a six month wait. And health care workers are targets for attacks by the military and right-wing death squads.

The lack of clean water supplies in rural areas is a big health problem. Because of deforestation from the war and agricultural chemical spraying, people have to walk up to eight kilometers for fresh water.

"This makes it very difficult to say that people have to bathe every day."

The group also promotes community organizations and demonstrations to win things such as proper garbage collection.

"We work with people to foster a social conscience so that people recognize the conditions they live in and why they do, so that we can change our society," Delmas said.

B.C. teachers mobilize against Bill 82

B.C. Teachers left their classes an hour early April 17 and staged rallies all over the province to protest the effects of the new wage control law, Bill 82.

The latest Social Credit wage controls took effect just as teachers were midway through their bargaining process with school boards around B.C., which means some teachers will have their wages rolled back under the law.

Members of the B.C. Teachers' Federation staged the April 17 job actions as part of an action plan set at their annual meeting. Teachers are also working to rule and boycotting education ministry committees, and the BCTF has launched a legal challenge to Bill 82.

Ed Lien, the Commissioner charged with enforcing Bill 82, has ordered school boards not to pay the full settlements agreed to with teachers pending reviews by his office.

Some school boards have resisted Lien's order and have joined legal challenges to Bill 82. The B.C. School Trustees Association blasted the legislation as an "attack on free collective bargaining."

HEU has lent its support to the BCTF, including participation in several rallies held by the teachers.

At a rally held during the BCTF Annual Meeting, HEU President Bill Macdonald noted that Bill 82 is designed to attack the smaller class sizes won by teachers at the bargaining table. Bill 82 can be used to block better working and caring conditions for HEU members, he added.

"We must make everyone aware of the fact that the Social Credit government is attacking the students and the parents and the patients of B.C. Macdonald said. "In fact, they are attacking the people of B.C."

Premier Rita Johnston announced she would not meet with teachers to discuss their concerns over Bill 82.

Carpenters seek $3 raise

B.C.'s union carpenters are seeking a two-year agreement with a 10 percent increase in the first year and $3 an hour in the second in talks with the Construction Labour Relations Association.

According to On the Level, the union newspaper, the Carpenters are insisting on a "no concessions" agreement with improvements in statutory holidays and other provisions.

"Our purchasing power has been eroded by the increased cost of living, interest and taxes like the GST;" said Carpenters Provincial Council president Bill Zander. "The demands made by the union "are not big stunts, they will become part of the bargaining process."

Construction trade employers have pledged not to lock out the Building Trades as they did in the course of 1986 bargaining.

"We must make everyone aware of the fact that the Social Credit government is attacking the students and the parents and the patients of B.C. Macdonald said. "In fact, they are attacking the people of B.C."

Premier Rita Johnston announced she would not meet with teachers to discuss their concerns over Bill 82.
The Heart of Health Care

Song

Working in communities
and towns throughout B.C.,
we're the ones in the hospitals
and long term facilities.
We're the ones who take good care
of the sick and elderly,
we work to provide health care
with pride and dignity.
We're the ones that work on
traylines in labs and the kitchen.
in housekeeping and maintenance
and in the pharmacy.
Our work they take for granted
we're the ones that are not seen
we work to bring you health care
with pride and dignity.
We care for you the best we can
while they cut our funding back.
It's so hard to give the care you need
with one hand
left behind our back.

CHORUS:
That's why we're standing, standing up for health care
HEU
That's why we're working, we work for better health care
me and you
We're the heart of health care
the workers on the frontline
We're the heart of health care
HEU
We're the heart of health care

ALL:
We're on the job around the clock
each day of the year.
we're targets for violence
when the sicklash out in fear
our health endangered
by chemicals and disease
yet the pay's so low it's hard to provide
for our families.

By GEOFF MEGGS

THE HEART of Health Care, the musical and theo-
retical story of what it's like to be a health care
worker during a health care crisis, is playing
enthusiastic crowds this spring all over B.C.

The 30-minute revue, based on the experiences of HEU
members is winning standing ovations and widespread
media coverage for its unique portrayal of life inside the
health care system.

In a column in the national Globe and Mail, writer
Patricia Lush called the show "thoroughly entertaining
and often hilarious."

She was particularly touched, as many were, by the
segment called Not On My Shift, which discusses
words and music in the face of a nursing aide who is torn
between her need to care for a dying patient and the pull
of other patients in her short-staffed ward.

Actors Heidi Archibald, Zena Darwimall and Steve H.
interviewed dozens of HEU members in preparation for
the show, which has become an important element in the
union's communications program during bargaining.

The idea of the show was taken from the highly
successful professional Take Care productions of New
York's Local 1199, a health care union which developed
series of shows to put its issues across to hospital wor-
kers and patients in that city.

But Heart of Health Care, while also a very profes-
sional production, is distinctly Canadian.

In the course of a performance, the audience hears
what it's like to work under a privatized housekeeping
firm. A receptionist tells how difficult it is to arrange for
a trip to the bathroom and a dietary aide has nightmares
about drowning in a vat of mashed potatoes.

A line that echoes throughout the show, the dietary
aide tells the audience she's proud of her job: "I don't care
how much high technology you have, no one gets batted
without a good meal in their stomach."

Before the show is over, the health care workers
grappled with pay equity, encountered the deadly r
strait of Cutback Billy ("he'll take your gown and leave
you bare") and closed with a rousing chorus of the show's
theme song, The Heart of Health Care.

The result has been standing ovations at each of the
show's 30 performances. (At press time, the show was
 touring the north after swings through the Kootenay
Vancouver Island, the Lower Mainland and the Okanagan.)
U's hit musical and theatrical revue about health care workers takes the province by storm!

THE GLOBE AND MAIL
Monday, April 1, 1991

Health-care workers saying it with song

BY PATRICIA LUSH
British Columbia Bureau

Please wait until later, I silently pray.
Don't die on my shift.
What's not on my mind.
What kind of system.
Can't afford people's pain.
I feel helpless.
I know it's going to happen again.

The words are from the hit song of a new musical slated to tour British Columbia this month. It opened in Vancouver last Wednesday, at the Eagle Hall on the Kingsway, to a cheering audience of about 130, mostly hospital workers whose Unemployed Union is sponsoring the production. Rave reviews from community organizing networking agreements for its 33,000 members across the province.

The thoroughly entertaining and often hilarious musical, The Heart of Health Care, was put together by a group of British Columbians—the people who pay hospital workers' salaries—after a better understanding of the effects of cutbacks on the province's health-care system, and the work and frustrations of the people who staff the hospitals and nursing homes.

In a voice-over background to the hit song, Zena Darwulah explains: "It was two in the morning when he arrived... a semi-conscious, tubed, tubeless, just a young boy. Because it was the night shift, there were just two of us. We had 36 other patients besides him... [they] had just been up... watching for him. He had been up all night..."

I'm thinking, "Ee, don't die on us now..." we spread the rest of the shift documents everywhere... and no one our other work will get done. I felt really terrible thinking that.

"Well, anyway, he died... and we had to ring people calling..." I run out and NG tubes coughed up and people sleeping in soaking wet beds and fences at night. It's just so frustrating: a boy is dying and we're praying that he'll hold off till the next shift, till there's more staff around so that other patients won't suffer.

The Heart of Health Care hits the road this week, and the troupe plans to tour the province for five or six weeks, said the show's financer, who helped conceive the idea.

Vancouver director Julian Fisher put together the HEU preparation, assembled in the east of Canada, for "institutions: performances, music and 'good writers with a feel for social-justice issues.'"

In consultation with hospital workers, the troupe created the 38-minute series of songs and stories, among them, the broadly drawn sketch of Cathcart, a nurse who rides into town cracking his whip, ordering pick people out of bed and into the waiting line. Troubling hospital workers eventually order him "back to your rural farm".

The HEU is finding talks especially tough this time around.

"I love it, there are a lot of clerical workers in the hospitals, Maybe you could fit in something more low-key as a 'co-operative,'" M. M., account, Lions' Gate.

I sincerely hope this show is being seen more than three times by health-care workers. We are indeed more than what we do. Thank you I don't think many people will see this will have a renewed sense of pride and teamwork."

"I'm going to work together, then all should see this," L., Registered Nurse, Pemberton.

"I think this is wonderful, it shows the reality of our jobs and it's wonderful to be able to laugh about our situation," M.C., diet, King George.

"The show was fantastic! Kids as well as adults enjoyed the performance." B.S., care aide, Maple Ridge Hospital.

"It was found to be very entertaining, and it made me realize the importance of my job and made me proud to be part of HEU," M., former, Nanaimo Regional Hospital.

"Very powerful and realistic! Heil, you brought tears to my eyes as your 'Not On My Shift' song. I've been there. Thanks! J.B., nursing, Memo Hospital.

"Please do this again! A great morale booster. We need this type of things we feel we have to do better about ourselves and our work!" B.S., discharge planning unit, Nanaimo Regional General Hospital.

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"I sit on the Castlegar Hospital Board. Well done! Wish more trauma could have been seen."

EXCELLENT PERFORMANCE. Bring it to our Christmas party and let management see it," E.C., accounting, Langley Memorial.

THREE HEARTS: The actors who bring The Heart of Health Care life are (left to right) Zena Darwulah, Heidi Archibald and Steve Hill. The trials and tribulations of junior-staffed care aides brought b lots of laughs (below) when the show visited Nanaimo for the benefit of several Vancouver Island locals.

Rave Reviews

Health-care workers were engaged when they watched the union's new musical revue The Heart of Health Care.

After the first two performances, the Heart of Health Care crew realized that there was much more audience wanted to say and needed to say. An evaluation form was circulated after each subsequent show and hundreds of the time to fill it out.

Every week is a show, audience members are taking the time to fill out the form and mail it in. For some of their comments:

I think this is a wonderful production. It shows the realities of our jobs and it's wonderful to be able to laugh at our situation." M.C., diet, King George.

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EXCELLENT PERFORMANCE. Bring it to our Christmas party and let management see it," E.C., accounting, Langley Memorial.

April/May 1991 • GUARDIAN
HEU is preparing to fight wage controls and sweeping demands for contract concessions

What we're fighting for

HEU's Six Steps to Fairness, the union's bargaining agenda for 1991:

1. Pay Equity
2. An Adequate Wage Increase
3. Working and Care Conditions: A Shorter Work Week, Restoration of the Nursing Team
4. Union Rights
5. Improved Benefits
6. Job Security

Bargaining gets serious

HEU’s Bargaining Committee is confronting sweeping concession demands, wage controls and threats of strike-breaking in its efforts to secure new collective agreements for B.C. health care workers. Despite dozens of bargaining sessions since talks began in Vancouver Feb. 14, health care employers have refused to deal seriously with HEU’s bargaining proposals.

Instead, says chief HEU spokesperson Carmela Allevato, the talks have been marked by confrontation, delay and provocation.

HEU’s main bargaining proposals, the Six Steps to Fairness outlined at left, have been on the table since the first day of talks.

But negotiations with the Health Labour Relations Association have been slow and unsatisfactory. While condemning HEU’s proposals in the press, HLRA has:

- tabled sweeping demands for contract concessions which would give hospital administrators a free hand to cut staff, ignore seniority and speed up remaining workers;
- refused the recent request at May Bennett Home in Kelowna to the new wage control commissioner;
- applied to the Industrial Relations Council to have management's essential services levels imposed on the union in the event of a strike;
- produced and implemented a detailed strategy to break a strike should job action occur; and
- refused to discuss even minor health and safety items because they could be called “compensation” under the new wage control law.

“We’re pushing our agenda forward,” Allevato said, “but the membership is going to have to remain united and active in the months ahead. Clearly, health care employers are hoping to break down our contract conditions in this round.”

Talks with the Continuing Care Employees Relations Association (CCERA) and the Private Care group of private long-term care homes have been even more difficult. Those employers have responded to HEU’s proposals with even more devastating concession demands which would cost HEU members up to $1,000 a year in lost benefits alone. (Details of the concession demands are on the next page.)

“We’ve got to work on several fronts,” Allevato said May 1. “We’ve got to maintain the pressure at the bargaining table but we can’t forget who’s calling the shots. We must convince the Social Credit government to drop its wage control bill and get down to serious bargaining.”

Talks slowed to a crawl while Premier Bill Vander Zalm fought for his political life. With his departure and the appointment of Rita Johnston, health care employers again began to move, confirming their determination to win concessions.

“Concessions are not on the agenda,” Allevato said. “We will not accept them. We’re determined to win a new collective agreement that deals with pay equity, improves working and caring conditions, raises wages and resolves several other outstanding issues.”

“Nothing less will be acceptable.”

The HLRA’s strike-breaking plans

The HEU has called on Premier Rita Johnston to repudiate a strike-breaking plan hatched by health care employers which would provoke a massive confrontation in the event of a labour dispute.

In a Vancouver news conference April 17, union secretary-business manager Carmela Allevato released elements of a confidential briefing kit produced by the Health Labour Relations Association (HLRA).

The employers are laying the groundwork for wholesale strike-breaking in the event of a labour dispute. The main objective is to get workers to cross picket lines.

HLRA has applied to the Industrial Relations Council (IRC) to establish essential service levels, ignoring HEU’s proposal for a neutral third-party to determine staffing.

Instead, HLRA hopes to have the IRC impose the employer levels and back these levels with court orders and threats of fines.

Workers would be called out of seniority and even assigned to do work outside their normal responsibilities if they volunteered to scab. “HLRA’s actions threaten the public health,” Allevato said. “You can’t run a health care system without co-operation. Threats, intimidation and strike-breaking are not the way to maintain a caring, effective health service.”

The HLRA kit calls for special meetings to encourage employees to cross picket lines. Workers will be threatened with court orders, fines and jail if they defy HLRA’s levels, which the employers expect to have ratified by the IRC.

The IRC is being boycotted by the B.C. Federation of Labour because of its glaring pro-employer bias.
**THE EMPLOYERS’ AGENDA: CUTBACKS**

**Hospital bosses attack seniority**

The Health Labour Relations Association (HLRA) is attacking seniority and other fundamental rights in contract concession demands tabled March 21 during bargaining in Vancouver. In effect, the employers are demanding the right to speed up, shut down and lay off workers if they see fit to keep an airtight system functioning.

The employers' rollback demands range from the virtual elimination of bumping rights to cuts in injury-on-duty leave. The HLRA did not make a wage offer or put forward any new proposals on pay equity.

But the Hospital Employees' Union is not prepared to bargain any concession. Here are the details of the HLRA's major concession demands:

- bumping rights would be eliminated, and the employer would have the arbitrary right to reassign employees if the work force is reduced;
- bidding rights would be reduced, and jobs of less than four months would no longer be posted;
- jobs of more than four months could be filled on a departmental basis without proper posting, and regular employees would be restricted in bidding on relief work;
- casual employee rights would be radically cut, casual shifts would no longer be assigned by seniority, and casuals could be fired more easily;
- scheduling protection, such as the limit on two consecutive work days and the limit on three different shifts in any consecutive six-day period, would be undermined, while days off would not have to be consecutive;
- injury-on-duty benefits would be cut, long-term disability would be altered to make it harder to establish a claim, and the claim review process would be subverted by unreasonable time limits.

**CCERA workers would lose $1,000s**

Continuing care employers are demanding massive concessions at the bargaining table in a bid to keep the Hospital Employees' Union from winning parity with the master collective agreement for its continuing care members.

The Continuing Care Employee Relations Association (CCERA) tabled massive concession demands April 10 that are a serious attack on basic contract rights. Benefit concession demands alone represent a rollback of $1,000 per employee per year.

The employers' sweeping proposals include the elimination of bumping rights, slashing of vacation entitlement and sick leave, cost sharing of health care plan premiums, and rollbacks to injury-on-duty leave and long-term disability. CCERA did not make a wage offer or put forward any new proposals on pay equity.

**Pri-Care workers face rollbacks**

Pri-Care employers, representing the owners of B.C.'s privately-owned long-term care facilities, joined the rollback bandwagon April 24 with massive concession demands.

The sweeping Pri-Care demands include the virtual elimination of bumping rights, vacation entitlement and sick leave cuts, cost-shared premiums for all health care plans, and rollbacks to pensions. Injury-on-duty leave and long-term disability.

Benefit concession demands alone represent a rollback of $1,000 per employee per year.

Allied said Pri-Care employers were out to gut the hard-won rights in the existing agreement.

Pri-Care did not make a wage offer or put forward any new proposals on pay equity.

Here are the details of Pri-Care concession demands:

- elimination of Super Stats;
- vacations rolled back to 15 days each year for the first five years and changes to choices of vacation period;
- severe sick leave rollbacks that would leave many sick days unpaid;
- employees would have to pay a share of premiums for all health care plans;
- elimination of bumping rights, giving the employer the arbitrary right to reassign employees in the even of a work force reduction;
- bidding rights would be reduced, jobs of less than four months would no longer be posted, and regular employees would be restricted in bidding on relief jobs;
- casual employee rights would be radically cut, and casuals could be fired more easily;
- injury-on-duty leave rollbacks, including no benefits or accumulation of seniority, and cuts in WCB wage top-up;
- rollbacks in the long-term disability plan to make it more likely that an LTD claimant will be cut off after one year.

**Who’s bargaining**

**HEU** The Hospital Employees' Union, representing 38,000 health care workers around the province.

**BCNU** The B.C. Nurses' Union, representing 26,000 registered nurses around B.C. Bargaining with the same employer groups confronting HEU.

**HSA** The Health Sciences Association, represents about 6,500 technical specialists in the health care field. Must negotiate a wage increase this year.

**HLRA** The Health Labour Relations Association. Represents about 140 acute care and extended care facilities funded by the Ministry of Health. About 26,000 HEU members are under HLRA agreement.

**CCERA** The Continuing Care Employers' Association, represents about 23 continuing care facilities funded by the Ministry of Health. About 3,000 HEU members work under CCERA agreements.

**PRI-CARE** Represents about 30 privately-owned continuing care and extended care facilities. About 1,800 HEU members work under the Pri-Care agreement.

**Getting ready**

HEU has worked hard to prepare for bargaining. Following are the steps already completed to ensure the membership is ready for any eventuality:

- revised strike pay policy to ensure fair pay for all from the first day of a strike, including a strike by another union
- creation of strike fund
- co-ordination with other health care unions on essential services
- completion of HEU essential service plans by March 31
- improved membership communication, including direct mail of The Guardian and frequent circulation of Bargaining Bulletins
- province-wide Table Officers' Conferences to update local leadership on bargaining issues and preparations
- creation of Bargaining/Pay Equity hotline

Want to know more?

Call HEU's Bargaining Hotline for details of bargaining proposals or information on how you can help the bargaining effort in your local. A Provincial Executive member will be standing by.

In the Lower Mainland call 734-5431
Elsewhere call toll free 1-800-665-5513

April/May 1991 • GUARDIAN
Bill 82 targets health workers

The latest 'Sacred' wage control bill is the most sweeping yet

For the third time in the last 16 years, HEU members are facing wage controls. The so-called Compensation Fairness Act was a cornerstone of Premier Bill Vander Zalm's 10-point program to salvage his political career. Vander Zalm is gone, but Premier Rita Johnston has made it clear she will pursue his policy.

The Legislature passed the bill in March and its repeal has become a top political priority for the labour movement. B.C. teachers, their contracts rolled back, are planning a lobby to Victoria and may even resume job action to protect their wages and working conditions.

Mike Harcourt, the leader of the New Democrats, told the legislature that his party opposes Bill 82, and that as premier, "I will not tolerate unfair legislation like this bill."

"With Bill 82, the costs of ensuring that patients have adequate levels of service could come out of our pay," said HEU secretary-businessman Carmelo Allevato. "Bill 82 has nothing to do with fairness and everything to do with partisan politics."

The Health Labour Relations Association (HLRA) which bargains for hospitals employing 36,000 HEU members, immediately tried to hide behind Bill 82 in contract talks.

HEU's bargaining committee forced the talks back on track, but there's little doubt that the new wage controls could have a devastating impact on health workers. Bill 82 is a draconian law containing features that make it even more unfair than previous wage control programs.

Everything in a collective agreement, from wages to health and safety, can be included in calculations.

A $300,000-a-year commissioner named Ed Lien has been given sweeping powers over every aspect of collective bargaining. He can intervene in a contract to change whatever he wants, retrospectively if necessary and without appeal.

He has the power to set wage levels, roll back settlements, or even order wage backspaws.

Wage increases will not be held to a specific level but will be based on an employer's "ability to pay" as determined by the commissioner.

The bill's regulations include a formula to determine wage increases, but the commissioner can choose to ignore the formula.

That's just the beginning. He also can interfere with changes in working conditions and work rules, and even classification changes.

Ottawa leads national attack on public sector workers

Canada's federal public sector workers, armed with an unprecedented vote for a national strike, are poised to be first to do battle against a national wave of wage control legislation.

Public Service Alliance of Canada president Daryl Bean told a national union convention in Vancouver in April that a clear majority of PSAC members voted to support a nationwide general strike to combat unfair wage controls and the threat of significant job losses.

"We can't afford it and we've just damn well not going to take it. That's that!" Bean said.

During the past two months, wage control hysterics have swept the federal government and most provincial governments. Anxious to appear that they were doing something to save the country from economic disaster, governments have turned to wage controls to make public sector workers pay for the economic recession.

The federal government led off the hysteria with a particularly insidious plan. In his late-Federal budget, Finance Minister Michael Wilson limited wage increases for 215,000 federal workers to just three percent a year for the next three years. But in Wilson's scheme, any wage increase will result in thousands of layoffs.

With inflation running at seven percent because of Wilson's Goods and Services Tax, a three percent wage increase means a big loss in real pay and living standards. Wilson also encouraged provincial governments to follow his lead.

And follow they did. Newfoundland's Liberal government announced that 2,000 public sector workers would be laid off, and salaries frozen for 35,000 public servants. Premier Clyde Wells blamed the layoffs and controls on the Mulroney government's cuts in federal transfer payments to provinces for health, education and welfare.

Quebec's Liberal government also joined the attack on public sector workers, freezing wages for almost half-a-million workers for two years.

Conservative provincial governments in Manitoba and Saskatchewan have also announced layoffs and wage control programs affecting thousands of workers. — Canadian Association of Labour Media.
Cycle of Violence
A B.C. Federation of Labour women’s conference confronts violence against women both at home and on the job

By Della McLeod

The cycle of violence that is faced daily by women at home and in the workplace was the theme of this year’s B.C. Federation of Labour Women’s Conference.

The findings of the conference could be summed up in one sentence: In order to break the cycle of violence, society must change completely.

The two-day conference in Vancouver opened on March 8, International Women’s Day. More than 300 women from unions and community groups around B.C. were present.

The first evening, we learned that one in four women will be sexually assaulted during their lifetimes. While laws are in place, the justice system often treats women victims as the guilty party.

Legal aid is inadequate, and private lawyers too expensive for many women. Battering men often follow, intimidate and assault women who have left relationships with them.

We were told of a mentally disabled woman who was denied counseling after a sexual assault because “it doesn’t affect them in the same way.”

The provincial government came under fire for spending money on advertisements condemning family violence when services are still seriously underfunded.

A psychologist, who asked how she deals with burnout, said she takes long walks in the University Endowment Lands enjoying nature. But she added that she sometimes finds her safety.

The following day, we had a choice of 15 workshops to attend, and two workshops I attended left a strong impression on me. The first, on the violent workplace, was a real eye opener.

A receptionist with social service in Vancouver’s Downtown Eastside told how workers are often seen as the enemy.

Colleagues may be mentally ill, just released from jail, or on drugs or alcohol.

Putting up barriers to protect workers presents a problem because the barriers may further enrage people.

We also heard about clerks in Unemployment Insurance offices being harassed and attacked by claimants angry about cutbacks. Workers Compensation Board adjudicators face similar problems, and health care workers suffer from violence in their workplaces.

Equally disturbing are the threats faced by women who must face members of the public on the streets and in their own homes.

Women account for only 14 percent of letter carriers, and one of them spoke of harassment by co-workers, management, the public and, of course, dogs.

Men sometimes collect their mail in the nude, sometimes with erections. A man stalked the carrier for months, yet management refused to act because “he hadn’t done anything yet.”

Canada Post is thinking of prohibiting letter carriers in uniform, leaving the carriers as targets of mail thieves.

One common thread in these stories is that governments no longer care about people in need. They cut back staffing, service and benefit levels, and an angry public takes out its frustrations on the workers.

We need training to help us deal with violence. But because employers are unlikely to provide this, unions must work to get this training, as well as contract provisions protecting workers against violence and its effects.

Another workshop on the images of women in advertising, which was conducted by the Mediaswatch group, made the point that the $100 billion-a-year advertising industry relies more than sell products.

Men get the message that they must be powerful and invulnerable, while women must be passive, young, thin and flawless.

Women are supposed to be sexy and virginal, experienced and naive, sexy and chaste — all at the same time.

Women selling products in advertising feel the myth that women are sexually available, contributing to the problem of sexual harassment.

Commercially make use of violence against women, and even children show up as sex objects.

We discussed the “voice-over of authority,” which is usually male. Such voice-overs are found even in H.R.毛泽东’s television ads.

The conference wound up with an inspiring and powerful rally to mark International Women’s Day and a session on women, unions and the Gulf war.

I have not mentioned names in this article because many speakers and participants requested anonymity.

Should the conference have been open to men? A number of men have told me they were puzzled and upset about being excluded. I believe that those men sincerely wanted to hear the issues.

But women in non-traditional jobs say they find little support from their unions which are run more like old boys’ networks.

I didn’t miss having men there, nor do I think their presence would have undermined the openness or the strength and solidarity of the gathering.

There is no such thing as women’s issues, but rather issues that affect women. We all have to take responsibility for solutions, and that can’t happen soon enough.

• McDonald is a car-aid at Willowhaven, in Nelson, and a member of the B.C. Federation of Labour Women’s Committee.

April/May 1991 • GUARDIAN
Taramarara — A defective gas stove at Mills Memorial Hospital is the latest in a string of leaks to hit the hospital's campaign to ensure health care workers are not exposed to toxic ethylene oxide (ETO) gas. After a series of complaints dating back several years, the hospital shut down its ETO sterilizer in mid-March.

"The sterilizer has been shut down since March 9 and we will not return service indefinitely," noted Mills Memorial Hospital chief executive officer Michael A. Leisinger in a letter to the union. Leisinger said all cylinders of ETO currently on the premises are being returned to the supplier.

ETO is a toxic and carcinogenic gas used to sterilize delicate surgical equipment.

Mills Memorial is the second hospital in the country to take such action by the union's aggressive campaign targeting unsafe ETO sterilizers.

Leisinger's action came after dangerous levels of ETO were recorded in tests at the conclusion of a March cleaning cycle. ETO issued a news bulletin warning that the machine would not operate the machine until the hospital complied with health safety standards.

"Our members will not be invol-

ved in the use of ETO until the hospital installs all appropriate sterilizer safety features and activates a comprehensive worker safety program," noted HEU secretary-business manager Carmen Allevato.

A subsequent WCB investigation showed several deficiencies in emergency leak or spill procedures, dangerous drainage and a largely inadequate monitoring system.

The union, which has pushed the WCB to enforce ETO controls, insists that the hospital make improvements in five areas before the sterilizer could be activated.

The HEU demanded that: the open drain be covered and prop-

erly isolated; that proper alarms be installed; that the sterilizer and aer-

ator be isolated; and that all radon detectors be replaced with a new version equipped with updated safety features.

When pressed by the union, Mills Memorial announced that if the WCB certification letters needed met at the Prince George Regional Hospital. The provincial government minimum standards recently set at VGH to force province-wide improvements in sterilizer performance. Furthermore, the union insists that the health care industry fund an independent ongoing study of the long-term effects of ETO exposure on the health of all employees in the health care industry. Research studies have shown ETO can cause cancer and chromosome damage in workers exposed to the gas.

ETO was forced in February to replace its gas sterilizer, which was similar to the case used at Mills Memorial, after suspected ETO leaks forced patient and staff evacuations.

ETO has also received numerous safety protests. The Workers' Compensation Board issued a raft of safety complaints against the hospital.

HEU encourages members to work for the union

The HEU's Provincial Executive has again posted its annual notice inviting members to seek work with the union.

Why should you apply for work at the union offices? Because you want to be able to see that your grievances to its completion, because you want to share your knowledge and show your abilities, and because members have always helped members at HEU.

Conditions are good. Wages range from $15.30 to $18.00 per hour for building services personnel, to $17.77 per hour for secretarial work and up to $21.36 per hour for health professionals. The jobs carry medical and dental benefits and compensating time off (80% per quarter). You still maintain your hospital seniority and you can return to your hospital job.

In order to make these HEU positions more accessible to members, the Provincial Executive decided at its April meeting to adopt the following hiring policy:

- that all HEU applicants for the annual job posting will be given priority consideration for vacancies provided they meet the requirements of the job description;
- that this applies to temporary and permanent vacancies;
- that this annual job posting is to be open for two months rather than the 30 days it usually is. Those who apply for a position after the closure dates are to be informed that the union considers applications from the annual job posting first;
- that applicants will be required to update their applications every year.

As a result of that policy, the locals will be receiving the annual job opportunities bulletin to be posted for two months. Look for the bulletin and then send that resume!
C A L E N D A R

The Guardian informs its members of upcoming events. Mail to 2006 West 10th Ave., Vancouver or phone 734-3431. HEU members will get priority in the space available.

APRIL

28 SUNDAY National Day of Mourning for Health Care in Wil- liams Lake at the hospital, 7:30 p.m.

MAY

1 WEDNESDAY May Day, International Day of Workers Solidarity, Heart of Health Care, 7:30 p.m., Richmond.

1-2 WEDNESDAY AND THURSDAY, Three Officers’ Conferences, Prince Rupert.

5 SATURDAY Heart of Heath Care, Williams Lake at the hospital, 7:30 p.m.

9 MONDAY and TUESDAY, Kamloops, Three Officers’ Conferences.

10 FRIDAY, Vancouver Heart of Health Care at Vancouver General TB Auditorium, 806 West 10th, 7:30 p.m., all welcome.

10-12 SATURDAY, May 11, Full Day to FREDHEU, Working Knowledge, conference on Labour and Learning in the 21st Century, Vancouver Community College, Large. For more information contact Kamloops, 324-5434 or 324-5435.

JUNE

26-28 WEDNESDAY TO FRIDAY, FREDHEU Provincial Executive meeting in Vancouver.

JULY

26-28 WEDNESDAY TO FRIDAY, HEU Provincial Executive meeting in Vancouver.

8-9 WEDNESDAY TO THURSDAY, Three Officers’ Conferences, Prince Rupert.

9-10 SATURDAY and SUNDAY, Three Officers’ Conferences, Prince Rupert.

9-10 SATURDAY and SUNDAY, Three Officers’ Conferences, Prince Rupert.

ON VIDEO!

Pay Equity

The time is now!

Pay equity will be a major issue in the current round of health care collective bargaining. In a keynote address to the 17th Biennial Convention of the HEU, Barb Byers, president of the Saskatchewan Federation of Labour, made a compelling case for pay equity, particularly in the health care field.

This 29-minute VHS tape is a useful education tool.
Bargaining gets serious
HEU is working on several fronts to defeat Social Credit wage controls and sweeping contract concessions demanded by health care employers.

Heart of Health Care hit!
The musical and theatrical revue about health care work during a health care crisis has taken the province by storm.

Breaking the cycle of violence
Violence stalks women both on and off the job. A B.C. Federation of Labour conference looked for solutions.

We're on the phone!
Do you have questions about wage discrimination? Bargaining demands? Want to help organize for a good contract? The HEU Bargaining Hotline is up and running. Details on back cover.

Fact
For every dollar earned by men, women earn 63 cents.

Question
Do you think that's fair?
Wage discrimination. Hospital employers admit that wages of all health care workers — men and women — have suffered because of systematic discrimination against women. Want to know more? Or better yet, would you like to help end this injustice?

Call the HEU Bargaining Hotline
In the Lower Mainland call 734-3431
Elsewhere call toll free 1-800-663-5813