THE HOSPITAL GUARDIAN

HOSPITAL EMPLOYEES' UNION 180

Vol. IX

VANCOUVER, B.C., MAY, 1972



No. 3

AT WESTVIEW MEDICAL CLINIC

PICKETING SUSPENDED

For nearly 14 months, five girls have been on Strike to secure decent wages, better working conditions and Union representation at their place of employment.

All of their efforts to gain recognition have failed.

Peaceful and responsible picketing has not achieved the desired result.

Continued attempts to have the dispute resolved through the assistance or arbitration of a Third Party were ignored or rebuffed by their employer.

The dispute reduced itself down to a "David and Goliath Struggle" between working people trying to organize a Union and the Doctors-Owners of the Clinic.

For the moment, Goliath has won the girls can no longer carry on! The Strike has been a long and costly one for the girls on strike. It has also been frustrating and bitter, but it has shown several things.

It has shown that the Doctors-Owners of the Clinic do not respect the right of people to be represented by a Union. It has also shown that the Doctors-Owners of the Clinic can pick and choose referral patients from the Hospital to their own Clinic for service and subsequently payment.

People have been the pawns in the Doctors' strategy to break the Strike!

The Doctors have used their control and influence to force townspeople to cross the Picket Line or go without medical attention or prescription service. The Doctors established the ultimatum to the townspeople.

Monopoly Legislation does not cover the Medical Care field. Perhaps this is

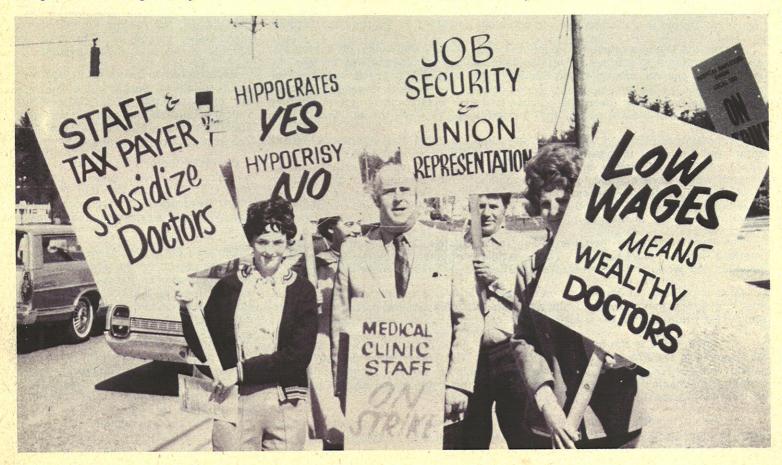
one of the reasons why besides food and shelter, the fastest rising component of the Consumer Price Index is "Prepaid Medical Coverage".

People of the community are "captive" of the Medical Care System which is not directly accountable to the people who pay for it, and provides lucrative earnings for those doctors who would maximize their profit and selfish interests.

Citizens of Powell River, like all other communities pay for both the hospitals, through income and sales tax, and for medical coverage through payroll deduction and premiums.

Citizens need not be humble or grateful for medical service — you pay for it and it should be responsive and accountable to you — not the other way around!

The Doctors-Owners of the Clinic may have "won" the labour dispute with the "handful" of girls who were brave enough to fight for what they believed in — but the girls will leave the Strike with their dignity intact. Can the same be said of others?



THE HOSPITAL GUARDIAN

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JOHN DARBY, Financial Secretary

538 West Broadway

Vancouver 9, B.C.

"In humble dedication to all of those who toil to live."

BROADWAY

DEMOCRATIC REQUIREMENT

UNION SHOP

The strike of five women at the Westview Medical Clinic appears to be over. The Doctors refuse to recognize or negotiate with the Union.

The history of the dispute, which is over one year old, is marked with several attempts on the part of the Union to get back to the bargaining table and to negotiate, constructively, and in good faith toward the conclusion of a Collective Agreement

The response to the Union's various attempts to conclude a Collective Agreement have been met with negative posturing by the Doctors and subsequent negative results. The Doctors refused to negotiate with the Union when it was first certified, but instead hired others with instructions not to make any proposals or offers in the area of wages, vacations, working conditions or Union Security.

The Doctors also refused repeated attempts during the period of the strike to resume negotiations with the Union and refused or rebuffed the efforts of highly respected people in the community to conciliate, mediate or arbitrate the dispute.

In fact, the Doctors refused to respond to the recommendations of a Mediator whom they originally proposed. This Mediator made recommendations on two major areas of dispute, namely Union Security and wages. The Union accepted the recommendations as a compromise accommodation. The Doctors refused to respond. The Doctors have often taken the position that they would sign an agreement with their employees if it were not for the "closed shop" provision of the Union.

As a matter of record, it should be known that the Union does not have a "closed shop" and has never proposed the same. The Union's proposal was for a "Union Shop" which would provide an essential requirement in order to assure that all workers would have a voice in the determination in the conditions of their employment. The Union Shop is an essential form of Union Security that ensures that people participate and that the "will of the majority" will determine the course of action or decisions of the group.

The Doctors, through their bargaining representative, argued that Union Shops interfere with the "right to work". This is a false argument because the employer provides the work and is rarely prepared to guarantee permanent employment.

Most importantly, it should be recognized that it is a basic principle of industrial democracy that those who share its benefits must assume part of the responsibility for securing them.

The Union Shop is the most common form of union security clause in Collective Agreements in the Province of British Columbia. The Union Shop Clause is contained within 40-50% of all Collective Agreements in British Columbia. It is an essential mechanic to ensure democracy within the Trade Union and as a protective defence against selective hiring by the employer.

The Union therefore accuses the Doctors of fabricating a "red-herring" argument to hide the fact they simply do not want to deal with employees if they are represented by a Union.

HISTORY OF DISPUTE

An Application for Certification was processed by the Hospital Employees' Union on August 25th and October 2nd of 1970, following an approach by the majority of employees working in the Medical Clinic to join the Union.

The Hospital Employees' Union was certified as the employees' bargaining agent on December 15th, 1970, because a majority of employees within the bargaining unit (exclusive of Registered Nurses) wished to belong to the Hospital Employees' Union.

The first collective bargaining session between the Union and the Medical Clinic took place on January 27th, 1971. The second meeting was held on February 9th, 1971.

As no progress was made toward the resolution of a Collective Agreement, the Union applied for a Mediation Officer on February 12th, 1971. The Doctor-Owners of the Clinic then retained the services of a professional negotiator.

At the Mediation Officer Stage, it became readily apparent that this negotiator was under strict instructions and was in no position to make any offer for improvements in wages or working conditions over those presently in effect. The negotiator also made it very clear that the Doctors did not agree with Union Security and felt that the matter of Union membership should be determined voluntarily at the time of employment.

Because of this failure to provide room for negotiations, bargaining broke down and on March 15th, 1971, the Mediation Officer "checked out" and in his report stated that there was no agreement and "no prospect of an agreement."

On March 30th, 1971, members of the bargaining unit were given a complete report on the situation and by secret ballot were asked to vote on strike action. The vote was unanimous, in favour of strike action.

On April 6th, 1971, 72-hour strike notice was served on the employer and on April 26th, after an Executive meeting in Powell River of the Union's 15-member Provincial Executive, the Westview Medical Clinic went on strike.

During the protracted strike at least three people in the Powell River community have been approached by one or both parties to conciliate, mediate or arbitrate a settlement. The efforts of these people to bring the strike to resolution and accommodation of the interests of both parties have been rebuffed by the Doctors — never by the Union.

FROM THE LABOUR RELATIONS ACT . . .

RIGHTS OF EMPLOYEES

Below is an extract from the Labour Relations Act which lays down the right of all employees to become a member of a trade union and to participate in its lawful activities. The excerpt also points out the general statement prohibiting an employer from interfering in the efforts of the Trade Union or any employee who becomes a member thereof:

EXTRACT FROM THE LABOUR RELATIONS ACT:

Rights of Employees and Employers and Unfair Labour Practices

Rights of employers and employees.

- 3. (1) Every employee has the right to be a member of a trade union and to participate in its lawful activities.
- (2) Every employer has the right to be a member of an employers' organization and to participate in its lawful activities. 1954, c. 17, s. 3.

Untair labour practices.

- 4. (1) No employer or employers' organization, and no person acting on behalf of an employer or employers' organization, shall participate in or interfere with the formation or administration of a trade union or contribute financial or other support to it; but an employer may, notwithstanding anything contained in this section, permit an employee or representative of a trade union to confer with him during working-hours, or to attend to the business of the trade union during working-hours, without deduction of time so occupied in the computation of the time worked for the employer and without deduction of wages for the time so occupied.
 - (2) No employer, and no person acting on behalf of an employer, shall
- (a) refuse to employ or to continue to employ any person, or discriminate against any person in regard to employment, or any condition of employment, because the person is a member or officer of a trade union;
- (b) impose any condition in a contract of employment seeking to restrain an employee from exercising his rights under this Act; or
- (c) seek by intimidation, by dismissal, by threat of dismissal, or by any other kind of threat, or by the imposition of a penalty, or by a promise, or by a wage increase, or by altering any other terms of employment, or by any other means, to compel or to induce an employee to refrain from becoming or continuing to be a member or officer or representative of a trade union;
- (d) discharge an employee for the reason that
 - (i) the employee is or proposes to become, or seeks to induce any other person to become a member or officer of a trade union; or
 - (ii) the employee participates in the promotion, formation, or administration of a trade union;

but, except as expressly provided, nothing in this Act shall be interpreted to affect the right of an employer to suspend, transfer, lay off, or discharge an employee for proper cause. 1954, c. 17, s. 4; 1961, c. 31, s. 3.

WORKING PEOPLE SHOWING THEIR SUPPORT





























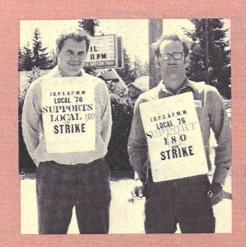


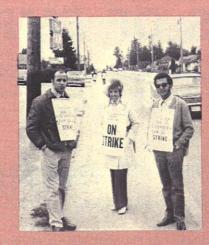




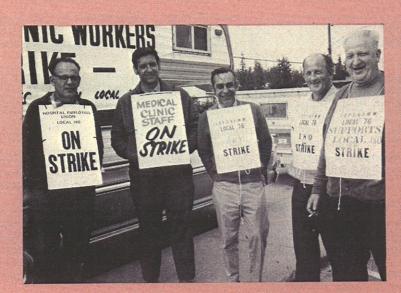


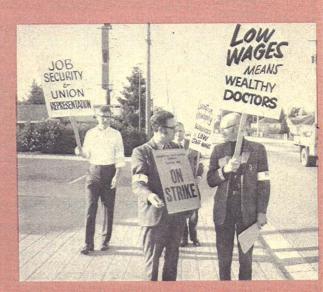
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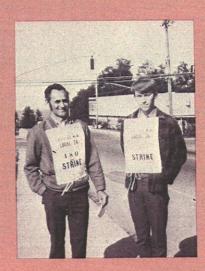


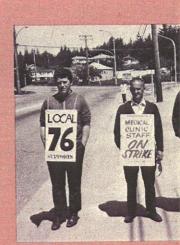












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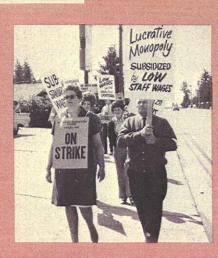


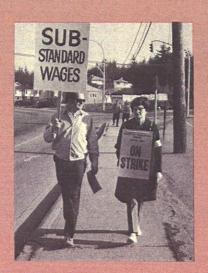














MEDICAL SERVICES COMMISSION OF BRITISH COLUMBIA

Administering the Over-all Medical Services Plan of British Columbia



368,386 147,006

> 771,049 133,269 18,489 138,165

134,147

5,073

20,236

FINANCIAL STATEMENTS

FOR THE FISCAL YEAR ENDED MARCH 31, 1970

Medical, Clinic, Invermere
Medical Clinic, Merritt (8)
Medical Clinic, Powell River (13)
Medical Clinic, Salmon Arm
(6) Medical Clinic, Vancouver
Medical Clinic, Vancouver
(21) Medical Clinic, Victoria (5) Medical Clinic, Whitehorse
Medical Clinic, Whitehorse Medical Group, Richmond (5)
Medical Services Division.
Queen Charlottes (5)
Mehl, J. R
Meindersma, E
Meloche, Dr. L.
Melville, G. G Menkes, E. T
Menzies, Dr. M. A.
Merler Dr C
Merler, Dr. T. Meserey, J. Messing, Dr. D. R.
Messing, Dr. D. R.
Meth, Dr. B. Metropolitan Bio-medical Lab-
oratories
Metropolitan Bio-medical Lab- oratories
oratories Metten and Kenyon, Drs., and
associates (3)

1	Moriarty, Dr. M. V. Morrill, Dr. S. F. Morris, Dr. D. G. Morris, Dr. H. V.
1	Morrill, Dr. S. F.
1	Morris, Dr. D. G.
1	Morris, Dr. H. V.
1	Morrison, Dr. C. Morrison, Dr. G. E.
1	Morrison, Dr. G. E.
1	Morrison, Dr. G. E. C.
1	Morrison, Dr. J. H.
	Morrison, Dr. M
1	
	Morrison Medical Clinic
1	Morro Dr. D. W
1	Mortimer Lamb Dr C D
1	Morton Dr K
1	Morton Dr W A
1	Morton, Dr. W. R.
1	Morrison Medical Clinic Morrow, Dr. J. J. Morse, Dr. P. W. Mortiner-Lamb, Dr. C. D. Morton, Dr. K. S. Morton, Dr. W. A. Morton, Dr. W. R. Moscovich, Dr. J. Moscovich, Dr. M. D. Moscovich, Dr. R. B.
1	Moscovich, Dr. M. D.
1	Moscovich, Dr. R. B.
1	Moss, Dr. B. A. Moss, Dr. C. B. (X-ray)
1	Moss, Dr. C. B. (X-ray)
1	Mount St. Joseph's Hospital
	Mout, Dr. R.
1	Mowat, Dr. D.
1	Moyes, Dr. A. Moyes, Dr. P. D.
-	Moyes, Dr. P. D.
1	Musen Dr. I. M.
1	Mudie, Dr. I. S. Mugan, Dr. J. M. Muir, Dr. D. M. K. (X-ray)
1	Mulholland Dr. A. B.
	Mulholland, Dr. A. B. Mullinger, Dr. M. A.
-	Munro, Dr. A. I.
1	Munroe, Dr. D. S.

16 200	Disufair Da Y A D	24,130
16,389	Playfair, Dr. J. A. F.	
39,081	Plecash, Dr. M.	48,471
39,983	Pledger Dr P C	882
	Piedget, Di. R. G.	
68,631	Plummer, Dr. P. (estate)	3,027
57,516	Plecash, Dr. M. Pledger, Dr. R. G. Plummer, Dr. P. (estate) Pollak, Dr. J. E. (X-ray)	184,122
21,460	Ponesse, Dr. D. J. A.	23,237
21,400		23,231
31,582	Poole, Dr. J. C.	1,478
36,436	Poole and Will, Drs. (2)	40,240
37,051	Poole and Will, Drs. (2) Poole and Will, Drs. (2)	57,402
57,031	Poole and Will, Dis. (2)	
58,346	Portelance, Dr. H. J.	29,586
53,434	Posener, Dr. L. J.	41,048
37,540	Posner Dr K S	31,674
	Posner, Dr. K. S. Posner and Knazan, Drs.	31,074
15,455	Posner and Knazan, Drs.	and the latest of
26,616	(laboratory) (3)	45,877
22,522	Potte Dr D W	29,503
10,066	Potts, Dr. D. W. Pouce Coupe Community	27,505
19,966	Pouce Coupe Community	4 0 40
84,106	Hospital	1,040
27,415	Hospital Pound, Dr. B. S.	41,452
3,137	Pow, Dr. C. G. Powell, Dr. E. D. U.	39,762
37,300	Powell Dr E D II	27,238
19,330	Towell, Dr. E. D. C.	21,230
19,330	Powell River General	
74,503		
2,377	Hospital	132,551
25,860		
16,478	Powell-Williams, B. J.	7,783
10,470		21,700
35,421	Power, Dr. P. G.	31,290
83,187	Powter, Dr. D. T.	20,390
69,489	Pozer, J. H. N.	43,194
22 045	D T 117	26 100
22,045	Pozer, J. W.	26,108
22,045 1,989	Pozer, J. W. N.	26,108 17,555
22,045 1,989	Pozer, J. W. N.	17,555
22,045 1,989 39,001	Pozer, J. W. N. Prasloski, Dr. P. F.	17,555 97,750
22,045 1,989 39,001 2,115	Pozer, J. W. Pozer, J. W. N. Prasloski, Dr. P. F. Pratt, Dr. V. J.	17,555 97,750 11,657
22,045 1,989 39,001 2,115 32,212	Pozer, J. W. Pozer, J. W. N. Prasloski, Dr. P. F. Pratt, Dr. V. J.	17,555 97,750 11,657
22,045 1,989 39,001 2,115	Pozer, J. W. N. Prasloski, Dr. P. F.	17,555 97,750

Pratt-Johnson, Dr. J. A
Reed, Dr. R. H. E.
Reeve, Dr. C. E. Regehr, Dr. R. P.
Regehr, Dr. R. P.
Reid, Dr. A. N. Reid, Dr. E. M. W.
Reilly, Dr. G. L. I.
Reilly, Dr. N.
Remole, R. G.
Remole, R. G. Rennie, Dr. C. S.
Rest Haven Hospital
Rety, Dr. N. A
Reynolds, E. E.
Reynolds, G. G.
Reynolds, G. G. Rheumatic Diseases Associa-
tion (6)
Rhodes, Dr. R. C.
Rheumatte Diseases Association (6) Rhodes, Dr. R. C. Rhodes, R. S. Rice, Dr. H. V. Rich, Dr. C. B. Richards, Dr. A. G. Richardson, Dr. D. S. Richardson, Dr. S. R.
Rich Dr C B
Richards, Dr. A. G.
Richardson, Dr. D. S
Richardson, Dr. P. M.
Richardson, Dr. N. L. Richmond General Hospital.
Richmond Bio-medical Labor-
atories
Richmond Health Centre
Rimes, H. H.
Rimmer, Dr. A. H., and Red-
ford, Dr. (2) Ritch, Dr. E
Kitch, Di. E

50,918 17,142 17,673

PROFITS WILL CONTINUE TO GROW

In 1970, the Westview Medical Clinic received in excess of \$368,000 through the B.C. Medical Services Plan. This is only one of several sources of revenue for the Doctors/Owners of the Clinic. These revenues come from payroll deductions of the general public and are processed through

the Government to the Doctors according to a schedule of fees. The present shareholders or subscribers in the Westview Medical Clinic, which has since changed its name to "Chimo Holdings" are as follows:

DAVID C. HOSGOOD, M.D.	1	Class	"A"	share	@	10c	
FRANCIS MURPHY, M.D.	1	Class	"A"	share	@	10c	
BARRY K. CUTLER, M.D.	1	Class	"A"	share	@	10c	
GERALD A. BREDO, M.D.	1	Class	"A"	share	@	10c	
(MRS.) IVA COLLINS	10	Class	"B"	shares	@	10c	
(MRS.) JOYCE MACLEOD	10	Class	"B"	shares	@	10c	
(MRS.) MARIE HOBSON	10	Class	"B"	shares	@	10c	
(MRS.) MARIANNA BROWETT	10	Class	"B"	shares	@	10c	
(MRS.) ROSEMARY HOSGOOD	10	Class	"B"	shares	@	10c	
DONALD R. COLLINS, M.D.				share			
JAMES L. MACLEOD, M.D.	1	Class	"A"	share	@	10c	
GEORGE C. HOBSON, M.D.						10c	
ROBERT J. BROWETT, M.D.	1	Class	"A"	share	@	10c	

These shareholders "participate" in the profits of the Clinic to the extent of their relative shareholding in the Company.

Reprinted from Vancouver Sun, May 12, 1972, Pg. 34

Examining doctors

Lay group looks at the care of our health

By LESLIE PETERSON

"All of us have to be held accountable for what we do. In the past, doctors haven't been."

- A doctor

Medical consumerism is another word for it — the doctor as a dispenser of health-care services to the consuming public.

It's a relatively new concept, but one that is being probed thoroughly by a little-known Vancouver group. Its investigations may very well have profound ramifications.

The group is a strangely eclectic mixture. It includes a

housewife, a minister, a school counsellor and a labor representative. Its name is a mouthful — the Lay Advisory Committee of the College of Family Physicians. It operates under the auspices of the college.

For almost two years now the committee has been meeting unobtrusively in a basement room, examing the role of the family physician or general practitioner.

of the family physician or general practitioner.

Their aim, as informed laymen without vested interests, is to have an impact on the profession and predominantly on the training of family physicians, says group member Mort Warner

Mort Warner.

"We're trying to let doctors see people as something other than patients, other than an

aggressive group," he says. "And we feel the consumer may have ideas that can be valuable in setting up courses for medical students at UBC."

The concept of "consumers" applied to medicine initially met with strong opposition, Warner says.

"It upset a number of people, notably physicians. Their connotation of a consumer was strictly a buyer, when actually the word just means a user.

"But we have found it applicable because all people are consumers of health care full time, patients part time."

To determine the expectations of practitioners and the public with respect to their practice and to set up a dialogue between the two is a heavy task. But the committee has laid its groundwork well.

In a series of panel discussions with medical and paramedical workers, they have delineated areas of concern.

At one recent meeting, for example, the committe interviewed two family physicians. There was confrontation, refutation and explanation.

"The system has built up a god mystique around doctors over the years."

. . . .

Individuals or organizations interested in joining the committee should telephone Judy Stevens, 321-3910.

Wage Guidelines: A Bad Prescription for a Wrong Diagnosis

(A Reprint from "Inflation — Why" by the Vancouver and District Labour Council)

The government appeals to us, in the name of sweet reasonableness, to accept a voluntary guideline of 6½ percent.

This, they assure us, would help to bring inflation under control. And obviously, if they were right in saying that wages push up prices, their remedy would be the right one. But, as we have shown repeatedly, it is not the wage earner that is pushing up prices. He is only trying, unsuccessfully, to keep abreast of the high cost of living.

To show this, let's examine the government's figures on the rise of incomes during the 1960's. Unfortunately, the income tax department has only made this information available up to 1967, but that takes in most of the boom period:

PERCENT OF TAXPAYERS AVERAGE INCOMES OF TAXPAYERS, 1961-1967 AFTER TAX 1961 1967 Increase Lowest 5% Lowest 50% Highest 50% 1.219 4.1 17.4 27.4 1,143 2,342 1,192 4.3 2,722 16.2 2,483 6,216 6,862 15,159 7.919 Highest 5% 14,996 19,114 27.5 11,896 Source: Department of National Revenue, Taxation Statistics.

Even the strong bias in favour of the rich that is shown in the above table is an under-statement, because, especially in a period of inflation, a high proportion of the income of the rich is in the form of capital gains and therefore not included taxable income.

If we break down the figures by occupations, the contrast is just as striking:

	1961	1967	Increase	1961	1967 \$ In	% crease
Employees Executives* Professions *i.e. top *0.7%	4,132 24,385 11,413	5,300 32,110 16,711	28.3 31.7 46.4	3,759 17,977 9,007	4,711 23,619 12,701	25.3 31.4 41.0

Corporations haven't been suffering either. From 1961 to 1967, their total after tax profit increased by 56.3%.

When the government proposes wage ceilings as a cure for inflation, it is obvious that they are attacking the victim instead of the culprit.

LABOUR'S NOTEBOOK

MOTHER JONES

There is a growing interest in the role women have played in the formation of the Trade Union Movement. The AUTOBIOGRAPHY OF MOTHER JONES tells the story of Mary (Mother) Jones, who was but one of the many women who have devoted their lives to advancing the welfare of working men and women everywhere. A fiery speaker and a fearless agitator and organizer, she spent most of her 50 years in the trade union movement with the coal miners.

At the age of 89 she was active in the first great strike against the U.S. Steel Corporation. The Gary she refers to is Elbert H. Gary, then head of U.S. Steel.

"I was speaking to a large crowd in Mingo. Most of them were foreigners, but they would stand for hours listening to the speakers, trying to fit the English words to the feelings in their hearts. Their patient faces looked up into mine. Slag, the finely powdered dust of the steel mills, was ground into the furrows of their foreheads, into the lines about their mouths. The mark of steel was indelibly stamped upon them. They belonged to steel, branded as are cattle on the plains by their owners.

"I said to them, 'The war — your war — has made the steel lord richer than the emperors of Rome. And their profits are not from steel alone but from your bodies with their innumerable burns; their profits are your early old age, your swollen feet, your wearied muscles. You go without warm winter clothes that Gary and his gang may get to Florida to warm their blood. You puddle twelve hours a day! Your children play in the muck of mud puddles while the children of the Forty Thieves take their French and dancing lessons and have their fingers manicured.

"The struggle for freedom went on. Went on against colossal odds. Steel was against them. And the government was against them. Human flesh, warm and soft and capable of being wounded went naked up against steel; steel that is cold as old stars, and harder than death and incapable of pain.

"The strike was broken. Broken by scabs brought in under the protection of the troops. Broken by breaking men's belief in the outcome of their struggle. Broken by breaking men's hearts. Broken by the press, by the government. In a little over a hundred days, the strike shivered to pieces.

"The slaves went back to the furnaces, to the mills, to the heat and the roar, to the long hours — to slavery. At headquarters men wept. I wept with them. A young man put his hands on my shoulders. 'Mother,' he sobbed. 'It's over.' A red glare from the mills lighted the sky. It made me think of Hell. 'Lad,' said I, 'It is not over. There's a fiercer light than those hell fires over yonder. It is the white light of freedom in men's hearts.'

"Back to the mills trudged the men, accepting hours that made them old, old men at forty; that threw them on the scrap heap along with the slag from the mills at early middle age; that made them nothing but brutes that slept and worked, that worked and slept. Gary and his gang celebrated the victory with banquets and rejoicing. Three hundred thousand workers. living below the living wage, ate the bread of bitterness."







