At Mediation Officer Stage

COLLECTIVE BARGAINING UNDERWAY

Collective Bargaining between the Hospital Employees’ Union, Local 180, on behalf of 10,000 hospital employees in 73 Acute General Hospitals and the B.C. Hospitals’ Association representing Administration of those Hospitals, began on November 9th under Mediation Officer, Mr. C. M. Gilmour.

As reported in previous Union Newsletters, a meeting was held between the Union’s Bargaining Committee and the Hospitals’ Representatives on October 12th and 21st, but the B.C. Hospitals’ Association was not prepared to bargain constructively on those occasions. For this reason, the Union’s Bargaining Committee made Application for a Mediation Officer in order to expedite bargaining.

Time for Co-operation

One of the many concerns of the H.E.U. during the present round of Collective Bargaining is the proliferation of number of Unions or Associations bargaining with the same employer. This creates problems of availability of the employer’s time and also creates the possibility of weaker Unions (or Associations) concluding an agreement quickly, which in turn may embarrass other more viable and capable bargaining agents in the same industry.

While the problem of proliferation and issues associated with it are discussed on Page 2, nevertheless for the purpose of Collective Bargaining it is important that there be co-operation between the various bargaining agents in the industry. No one small group, nor combination of two or more smaller groups should have a persuasive influence in the determination of the general welfare of the majority of employees within the Hospital industry as represented by H.E.U. and the R.N.A.B.C.

Purpose to Achieve “Just” Settlement

The purpose of free Collective Bargaining is to achieve fair wages and working conditions over an established period of time for employees. The process and determination of a “just” settlement through the bargaining process is considered by most economists and politicians to be the most effective way of balancing employee need and the employer’s ability to pay in the economic treadmill. It is with this realization that the Hospital Employees’ Union is anxious to bargain in good faith for the purpose of arriving at a just and reasonable settlement for hospital workers within the Province of B.C.

Bargaining between HEU and BCHA will continue on the week of Nov. 22-26. The BCHA and the RNABC will be bargaining the week of Nov. 15-19.

Watch your Notice Boards every other week for Bargaining Newsletters for reports of progress or problems at the bargaining table.

Pictured above are members of the Union’s Bargaining Committee in caucus. From left to right they include R. S. McCready, Albert Tetz, Larry Richards, June Murdoch. Standing are Pete Endres and Peggy Heinze.
Review of H.E.U.'s Position Regarding the Formation of Health Sciences' Association

The Labour Relations Board recently granted certification to the newly formed Health Sciences' Association for certain employees (Health Sciences or paramedical personnel) in the St. Paul's and Lions Gate Hospitals. The Association presently has before the Labour Relations Board a number of other applications for hospitals throughout the Province. In total, their certified membership numbers under 300 and even if all the applications were granted, the potential membership of this organization as it is presently constituted, can only be in the neighbourhood of 1,200 employees. The potential total membership of this Association by comparison to H.E.U. is equivalent to one-half of the membership of V.G.H., and about the same as one of the larger Units of the size of Royal Jubilee, St. Joseph's or Lions Gate. By comparison then, the potential membership of the Health Sciences Association is relatively small and therefore gives concern to the larger industrial union of hospital workers, namely H.E.U., as to the H.S.A.'s ability to provide viable, financial and leadership voice in the industry.

Geography and size of membership are two important considerations and any Union (or Association) must have a membership of at least 4,000 members in order to provide an adequate membership base in serving the membership, bargaining, grievance administration, etc., without an astronomical dues structure.

As stated before the Labour Relations Board, the H.E.U. opposed the application of the Health Sciences' Association for several reasons as follows:

1. The application was made out of time in that H.S.A. raised X-Ray Technicians from H.E.U. certification at a time other than the seventh and eighth month as provided by Statute.

2. The Association was not a "Trade Union" within the meaning of the Act in that it was sponsored and fostered by the employer's Bargaining Agent and was an "Association of Associations" which formed an umbrella for individual professional groups as a vehicle to avoid responsibility within an appropriate Industrial Trade Union, namely H.E.U.

3. H.E.U. recognizes that there are differences amongst various groups within the Hospital structure but prefers to work toward end of a "community of interest", rather than the establishment of organizations with status or craft differences. These differences are superficial in the opinion of the Union and should be resolved within the democratic framework of the H.E.U. in conventions.

4. In terms of industrial harmony, the Union advances the concern that procrastination gives competition and competitiveness regarding the integrity of the various groups. Friction from within each group and friction within the industry are likely to be the end results of procrastination.

The goals or objectives of the H.E.U. are democratically determined through resolutions discussed and passed at Biennial Conventions. In very general terms, the goals of the H.E.U. as an industrial trade union can be simply stated as (1), the advancement of the economic needs and respect of hospital workers, and (2), the resolution of internal differences and the pursuit of community interests within the industrial structure.

Sister Irene Laundy — Second Trustee.

Sister Laundy is a Practical Nurse at St. Joseph's Hospital in Victoria, B.C. Except for a short period spent in the Okanagan, Sister Laundy has been employed at St. Joseph's in Victoria for a total of 22 years. She has served many terms on the Unit's Executive and has been Unit Chairman on one occasion. Irene has also attended B.C. Federation of Labour Conventions and has been active until recently in the Victoria Labour Council as a representative from the H.E.U. Irene was also involved in the preparation of recommendations for the Practical Nurses Licensing Act. Besides her active involvement in the H.E.U., Irene spends much of her spare time on Salt Spring Island where she has property. Her interests include gardening, camping, travelling, fishing and reading.

The Coach House Convention Site Chosen

The Provincial Executive has chosen the Convention site for the Union's next Convention to be held in June 1972.

After considering the facilities and projected costs of various Convention sites throughout the Province, the Provincial Executive decided to hold its next Convention in The Coach House Motor Inn in North Vancouver.
B.C.H.A. Hires Job Analysts

ONE-SIDED JOB EVALUATION

It has been reported that the B.C. Hospitals' Association has hired three Job Analysts and is presently embarking in instituting or implementing a job evaluation programme in selected hospitals throughout the Province. This programme is not jointly sponsored by the Union.

In the case of H.E.U. (which has a provision within the Collective Agreement which stipulates to the effect that a mutually acceptable job evaluation programme would be developed between the parties, the details of which will be used at the next contract negotiations), efforts to arrive at the mutually acceptable programme broke down because the Hospitals' bargaining agent, the B.C.H.A. was unable to commit hospitals to such a programme in the same manner and with the same legal obligations and penalties as the Union. The principal difficulty in arriving at the mutually acceptable programme of job evaluation is that the B.C.H.A. is a "charitable organization" registered under The Societies' Act and as such is non-suable and cannot commit any of the hospitals which it represents to any contractual commitment, job evaluation or Collective Agreement, unless it has specific well-defined authorization to do so. On the other hand, the H.E.U. is a suable body which can be sued for Breach of Contract and be required to pay damages for breach of contract including mutually acceptable financial undertakings in the implementation of job evaluation. In addition, the Union by virtue of the certification process can bind and commit its membership in total to obligations and undertakings including job evaluation.

While there are a number of advantages to job evaluation and while some recognize the pressing relative worth of jobs in the industry is needed, nevertheless, there are a number of disadvantages to the same job evaluation if such a programme is implemented unilaterally by the employer. Some of the problems and dangers are as follows:

1. The use of an inappropriate system of evaluation;
2. Lack of opportunity or frustration of employees in advancing the true nature and degree of their job and responsibilities;
3. Bias conversion of relative worth determined by job evaluation into wage rates which are below negotiated wages in force.

In summary, a unilaterally implemented job evaluation programme by the B.C.H.A. or individual hospitals should be viewed as a dangerous weapon that can be used against employees if there are not adequate safeguards and joint responsibility. Any employee who is advised that his or her job is being evaluated should contact the Union and should be aware that such evaluation may be for the purpose of undermining the present wages for that job or for eliminating either his or her job or other jobs within the hospital.

Properly implemented with equal responsibility between H.E.U. and the Hospitals, a job evaluation programme would be a great value to employees in the hospital industry, but certainly a one-sided job evaluation programme gives rise to a number of problems and concerns.

Vancouver Island
Region Report

Northern Vancouver Island Units

In a letter dated August 12, 1969, the Administrators of the hospitals on Vancouver Island, excepting the Victoria area, were informed that pursuant to the Addendum to the 1969 Agreement, a Special Pay Rate Adjustment request was being officially presented on behalf of all Clerical classifications. This read as follows:

All Clerical Classifications

Revised the grading structure with the objective of:
(a) Setting out the various classifications within each grade;
(b) A more equitable salary differential between grades;
(c) Minimum and maximum salaries adjusted comparable to other hospitals as per enclosed revised proposal.

This request may be considered as regional, effective in all hospitals on Vancouver Island with the exception of Victoria, therefore you may wish to meet as a Committee.

A similar request was made for the East and West Kootenay Region hospitals. Subsequently, the Standing Committee under the Chairmanship of Professor R. Herbert of the University of B.C. was awarded that the clerical structure in effect in the Fraser Valley Hospitals Region be implemented in the Kootenay Hospitals Region and also indicated that this Clerical structure should be implemented in the Vancouver Island Hospitals Region.

The placing of the Clerks into appropriate grades, and the wage structure, has been completed and agreed to, but has not been implemented to date.

In placing the individual clerks into appropriate grades some clerks were upgraded and this provided for an upward adjustment in wages. Those wage adjustments were also agreed to.

Pursuant to the Addendum to the 1969 Agreement, mutually agreed Special Pay Rate Adjustments are to be implemented on January 1st of the year following the agreed adjustment (i.e., January 1, 1970).

At this point, a dispute arose between the Hospitals and the Union concerning the retroactive date affecting the upgraded clerks. Further talks did not resolve the dispute.

On October 14, 1971, the Union wrote to Professor R. Herbert, Chairman of the standing Committee, requesting the Committee to hear the parties' arguments on this dispute and to adjudicate this matter. We are waiting for the date to be set so that we can meet with the Standing Committee.

Mount St. Mary Unit

The grievance of a member of the Mount St. Mary Unit has been resolved to the satisfaction of all concerned. This grievance arose when the member over-stayed an extended leave of absence while visiting in Europe. She was hospitalized in Europe and unable to travel. She notified her employer by registered mail of this fact.

On return to her home she had been informed that her services had been terminated. A grievance was filed and processed on her behalf and the member was reinstated without loss of perquisites and leave. Fifteen days sick leave pay was awarded.

Royal Jubilee Hospital Unit

On March 30, 1971, the Hospital Employees' Union notified the Royal Jubilee Hospital that it is raising a grievance alleging a violation of Article 5, Hours of Work and Overtime. Employees are working a schedule in excess of six consecutive days.

Meetings were held with the hospital regarding the grievance. Subsequently the hospital applied to the Department of Labour for the services of an Officer under Section 22 (4) of the Labour Relations Act. An officer was appointed on June 30, 1971, to assist the parties in resolving the dispute.

Having considered the report of the Officer and the written submissions of both parties, the Labour Relations Board ruled on August 10, 1971, that the Royal Jubilee Hospital had violated the said Article of the collective agreement as alleged and ordered the hospital to comply with Article 5 — Hours of Work and Overtime — 5.1 and 5.2 of the collective agreement, but the Board did not award any compensation for those members who had worked more than six consecutive days.

On September 16, 1971, the Union appealed the decision of the Board requesting that overtime rates of pay be awarded to those employees who had worked more than six consecutive days. After having considered further submissions from both parties, the Labour Relations Board informed the Union and the Hospital that the Board proposed to vary or cancel its decision of August 10, 1971.

The Hospital Employees' Union will seek the advice of its legal counsel as to its present position in the processing of this grievance.
At Wage Policy Conference in September

THE UNION FORMULATES BARGAINING DEMANDS

On September 18th and 19th, 105 delegates representing 10,000 hospital workers throughout the Province had a Wage Policy Conference to determine their bargaining demands for negotiation of a new Collective Agreement upon the expiry of the present Agreement which expires on December 31st, 1971. The Provincial President, W. D. Black was Chairman of the Conference which was held at the Ukrainian Catholic Community Centre, 3150 Ash Street in Vancouver.

Delegates to the Conference were supplied with Conference Kits which were prepared in advance at the Union's Provincial Office and included Recommendations from the Provincial Executive and other supplementary material such as Research, Rules of Order, and a List of Delegates.

The agenda of the conference included the recognition of invited guests, a discussion of the bargaining procedures, bargaining proposals from the Provincial Executive, and bargaining proposals from the various Units. Because of the heavy Agenda, there was no Social Evening and the Conference had to be well run in order to get through the business. Below are some of the recommendations and decisions made by the Wage Policy Conference.

WAGES: 25% across-the-board wage increase over two years with a $500.00 minimum monthly wage rate by January 1, 1972, and proportionate increases, whichever is greater.

Establish Provincial Standard Wages for the following Departments:
- Dietary
- Clerical
- Purchasing, Stores, Transportation
- Printing

DEFERRED EARNINGS: Non-taxable annual payment of 1% of gross wages paid by the Hospital to the account of all employees with five or more years' service.

HOURS OF WORK: 8 hours per day, 36 hours per week, 5 days per week with 4 hours per week "banked" and taken as full days off. Evening and Night Shifts to be 8 hours inclusive of meal periods.

SHIFT DIFFERENTIAL: Increased to 20c per hour for Evening and Night Shifts.

ON-CALL DIFFERENTIAL: Formula increased to provide $5.00 for first 8 hours and $2.50 for each additional 8-hour period within 24-hour on-call period.

CALL-BACK: Penalty Payment of $10.00 plus minimum of 4 hours at overtime rates guaranteed.

ANNUAL VACATION: 4 weeks annual vacation after 1 year's service with an additional 1 week's vacation for every additional 5 years of service.

STATUTORY HOLIDAYS: Employees to receive a minimum of three statutory holidays on the actual legally declared holiday. Overtime to be paid if a guarantee of three days is not granted.

UNIFORMS: All employees to be provided with uniforms (including clerical and maintenance). A Committee of Union and Hospital representatives to be established to ensure a reasonable selection of style and quality.

UNEMPLOYMENT INSURANCE: All employees covered.


MATERNITY LEAVE: Complications of pregnancy to be covered by sick leave, and pregnancy not be cause for dismissal or resignation. Nine weeks Maternity Leave prior to confinement, 6 weeks subsequent to confinement. Employee to return to former position without loss of perquisites.

EDUCATION LEAVE: Establish a Leave of Absence clause for Education Purposes.

BINDING TRIBUNAL: Unresolved Bargaining Disputes can be referred to Binding Tribunal at option of Union.

At the conclusion of the Conference a Bargaining Committee was elected from the floor and includes:
- W. D. Black, Provincial President
- R. S. McCreedy, Secretary-Business Manager
- R. S. Endres, St. Joseph’s Unit, Victoria
- J. Murdoch, Trail Unit
- A. Tetz, Vernon Unit
- L. Richards, Vancouver General Unit
- P. Heinz, Prince George Unit.

G. MacPherson reflects pensive mood of Conference.
EDITORIAL

WHY ALL THE FUSS?

While the majority of hospital workers and hospital administrators appreciate the Union's recent expression of concern regarding the Kootenay Inclusive Shift dispute, nevertheless, there are some people who have asked the question, "Why all the fuss?"

Some of the reasons behind the concern of the Hospital Employees' Union can be expressed under the two general areas of (a) honour and integrity in executing a negotiated Collective Agreement and (b) the implications and problems associated when operating without a properly executed Collective Agreement.

Taking the first of these two general concerns, the honour and integrity in executing a negotiated Collective Agreement, it is important of course, that when two parties reach accord on the terms of a Collective Agreement, they should then legally execute their understandings by the signing of a legal Collective Agreement. If any mistakes or errors in judgment are made by either side in the collective bargaining process, then the party or side making such mistake or errors in judgment should be prepared to honour such a position unless some other mutually acceptable alternative can be found. Certainly, if the integrity and honour of bargaining committees can be reversed as a result of retrospet, then it is only reasonable that the other side in the bargaining process will question the integrity of those persons who would not honour what they had negotiated.

Regarding the second of the two general areas of concern, the implications and problems associated when operating without a properly executed Collective Agreement, here it is important to recognize the difficulties in administering a Collective Agreement that is not properly executed. Some of the problems that can arise are the inability of both parties to find legal remedies or restraints through the courts. The second problem involves "raiding" during the full period of a non-executive Collective Agreement. The third problem is the insecurity of employees when operating under terms and conditions of employment which can be administered at the convenience of the employer.

Therefore, in answer to the question "Why all the fuss?" the answer must lie in the concern of the Union on behalf of its membership of operating under an employer-employee relationship wherein political expediency results in a lack of honour and integrity in the proper executing of terms and conditions of employment for the majority of employees within the hospital industry.

Shown above are Kootenay Unit Representatives recently considering issue in dispute with Bro. Henry Perkin (standing).

History of Unemployment Insurance

The first attempt to provide unemployment insurance was made by a Trade Union in Basel, Switzerland, in 1789. Further attempts were made by other Unions, but because of the voluntary nature of the plan they were doomed to failure.

The first compulsory plan appeared again in Switzerland in 1895, whilst the first idea of using municipal funds to supplement workers' contributions cropped up in France in 1896.

The city of Ghent in Belgium devised the most successful compulsory system and many European countries adopted variations of the Ghent system.

The first National Government to enter the field was France in 1905, but their plan was still voluntary.

In 1911, Britain introduced the first compulsory national scheme embracing six industries and 2.5 million workers. Extensions in 1916 and again in 1929 brought in practically all wage earners.

By 1935, 18 European countries were operating unemployment insurance plans on either a voluntary or compulsory basis and about 48 million workers were covered.

In Canada, in 1919, a royal commission on industrial relations recommended a national plan, but nobody listened.

Old age pensions were introduced in 1927, but no need was yet felt for protecting the unemployed workers. Only the dirty '30's changed that.

In 1935, Parliament unanimously passed the "Employment and Social Insurance Act," but the Supreme Court of Canada declared it a matter of provincial legislation — not Federal.

Two years later the Prime Minister asked the Provinces if they would waive their right, so that the matter could be handled Federally.

By June, 1940, all nine provinces had given their assent and the B.N.A. Act was amended. On August 7 of that year, the Unemployment Insurance Act became law.

The first benefits were paid in February, 1942. At that time there were two million insured workers in Canada. This did not include hospital workers.

For the first time, hospital workers across Canada will be covered by Unemployment Insurance 183 years after trade unionists first tried to protect their members from the ravages of unemployment.
Between B.C.H.A. and H.E.U.

1971 ANOMALIES

During the summer months and in the month of September, representatives from H.E.U. have held discussions with individual hospital Administrators, or Personnel Administrators in an effort to advance argument and resolve differences as to the proper “slotting” or classification of employees. This process is outlined within the Anomaly Procedure of the Addendum to the Collective Agreement.

As a result of meetings between B.C. H.A. and H.E.U. in the months of September and October, the Union has been advised through the B.C.H.A. that the hospitals do not agree nor are prepared to make any acceptable proposals with regard to the following anomalies documented on behalf of employees within the following Hospital Units.

LOWER MAINLAND REGION:

Vancouver General Hospital, Vancouver, B.C.

Truck Driver category: increase by Fifty Dollars ($50.00) per month.

Emergency Clerks: increase by Twenty-Five Dollars ($25.00) per month.

Mutlitith Operator: increase by Fifty Dollars ($50.00) per month.

Radiology Attendants: re-classify as Porter Escort Attendants.

St. Paul's Hospital, Vancouver, B.C.

Fred Urbat, Orderly Specialty II: re-classify to O.R. Assistant at Heart Pump Attendant salary structure, $728 to start, to $778.25, 24 months, 1971 rates.

Royal Columbian Hospital, New Westminster, B.C.

C.S.R. Aides: propose re-structuring at Nursing Service Aide III level, $477.75 maximum 1971 rate.

Emergency Aides: re-structure at Nursing Service Aide III wage level, $477.75 maximum 1971 rate.

O.R. Booking Clerk: Mrs. Alva MacDonald, re-structure to Clerk Grade V level, $502.00 maximum 1971 level.

Cook: all Cooking categories declared anomalous, and if not resolved through establishment of a Provincial Standard, to be re-structured on Vancouver General Hospital Dietary structure.

Pharmacy Technician: incumbent Peter E. MacLeod, structure on a 24-month increment with maximum increment at $712.25.

Linen and Laundry Supervisor: Mrs. E. Weicher, Mrs. M. Jack; 1971 wage rate of $864.00 to be established.

Serviceman: Grant B. Kitley, propose structured at Maintenance III, 1971 maximum wage rate of $792.50.

Head Carpenter: T. Semotuk, to receive same rate as Vancouver General Hospital Carpenter Foreman, 1971 maximum wage rate $929.50 flat.

Lions Gate Hospital, North Vancouver, B.C.

Dietary Department: all cooks considered anomalous, in event Provincial Standard is not achieved, propose Vancouver General Hospital Dietetic structuring should apply.

Printers: if Provincial Standard is not achieved, desire to advance evidence indicating upward salary adjustment.

Stores: all categories considered anomalous; otherwise, process under Special Pay Rate Adjustment Mechanism.

Maintenance Department: A. Carr, classify and pay as Maintenance Tradesman at maximum 1971 rate of $786; W. Third, classify and pay as Maintenance Tradesman at maximum 1971 rate of $786; Y. Thom, propose re-classify as Air Condition Mechanic at 1971 maximum rate of $902.25.

P.B.X. No. 1: re-classify to 1971 maximum rate of $525.50, 24 months.

P.B.X. No. 2: re-classify to 1971 maximum rate of $553.00, 24 months.

Orderly: John B. Ritchie, propose category at Orderly Specialty I level.

Housekeeping Department: propose this Department be structured to provide O.R. Cleaner's rate in 1971 of $601.00; to provide the Wall Washer rate in 1971 of $616.00.

Incinerator Man: 1971 rate of $618.25.

Medical Records Technician: establish category at maximum 1971 increment of $592.50.

St. Mary's Hospital, New Westminster, B.C.

Insertion of Fraser Valley Clerical Standard into St. Mary's Hospital Wage Scale to accomplish proper slotting including re-classification of:

(a) O.R. Booking Clerk to Grade IV category at 1971 maximum of $524.25.

(b) Admitting Clerk classified at Grade IV level at 1971 maximum of $524.25.

(c) Medical Records Clerk Typist, categorize as Clerk Grade III, at maximum 1971 rate of $492.50.

(d) Clerk in Stores, upgrade to Grade III, at 1971 maximum of $492.50.

(e) Junior Clerk Typist in Stores, upgrade to Grade III at 1971 maximum rate of $469.50.

Burnaby General Hospital, Burnaby, B.C.

Housekeeping Department: re-structure on basis of Vancouver General Hospital experience; employee McCann categorize as Cleaner or Garbage at 1971 maximum rate of $605.

Surrey Memorial Hospital, Surrey, B.C.

Nursing Unit Clerks: re-classify to provide all Nursing Unit Clerks paid at Nursing Service Aide III 1971 maximum wage level of $477.75.

Maintenance Department: employee Elias, Taber, Behnke, and Schulz to be classified as Maintenance Tradesman at 1971 maximum rate of $788.

Squamish General Hospital, Squamish, B.C.

Maintenance Department: H. Beckman to be re-classified as Maintenance I at 1971 maximum rate of $674.00.

Mount St. Joseph Hospital, Vancouver, B.C.

Dietary Department: all categories above Maid level to be re-structured within Provincial Standard.

Clerical Department: insertion of Fraser Valley-Kootenay Clerical Standard into Hospital Wage Schedule.

FRASER VALLEY REGION:

Langley Memorial Hospital, Langley, B.C.

Stores Department: to be included in Provincial Standard; otherwise, processed under Special Pay Rate Mechanism.

Clerical: John E. Paton, re-classify as Clerk Grade V at 1971 maximum rate of $547.50; Eline M. Duers, Sharon Hill, re-classify as Clerks Grade IV, at 1971 maximum of $524.25; Sheila Wright, re-
classify as Clerk Grade III at maximum 1971 rate of $492.50.

Dietary Department: all Cooks reported anomalous unless Provincial Standard negotiated which would take precedence. Employees Doherty, Pook and Gregor to be re-classified as Diet Clerks - Cooks' Helpers, at Royal Columbia Hospital 1971 maximum rate of $445.25.

Mission Memorial Hospital, Mission, B.C.

Ordery: (a) Propose Ten Dollars ($10.00) additional for each autopsy, or Morgue Service performed.
(b) If utilized to perform duties related to Specialty I and II classifications, to be paid as an Orderly Specialty I.
Clerical: Switchboard and Receptionist to be re-classified to Clerk III level at maximum 1971 rate of $492.50.
Admitting Clerk: propose to be re-classified at Clerk IV level, at 1971 maximum rate of $524.25.
Out-Patients' Clerk: propose re-classification to Clerk IV maximum 1971 wage rate of $524.25.
Senior Clerk: to be re-classified to Clerk V at maximum 1971 rate of $547.50.

Maple Ridge Hospital, Maple Ridge, B.C.

Orderly: (a) Propose Ten Dollars ($10.00) additional for each autopsy, or Morgue Service performed.
(b) If utilized to perform duties related to Specialty I and II classifications, to be paid as an Orderly Specialty II.

Chilliwack General Hospital, Chilliwack, B.C.

Dietary Department: all Cooks to be re-structured under Provincial Standardization; if Provincial Standard not achieved, process under Special Pay Rate Mechanism.

NORTHERN REGION:

Prince George Regional Hospital, Prince George, B.C.

Printer: employee Ivan Nadly, recommend 1971 maximum rate of $700 per month.
Utility I: W. Dodds, propose re-classification to Maintenance I at 1971 maximum rate of $674.

Mills Memorial Hospital, Terrace, B.C.

Dietary: all Cooks anomalous unless Provincial Standard negotiated which would take precedence.
Pot Washer: 1971 maximum rate of $593 per month.

St. Joseph General Hospital, Dawson Creek, B.C.

Clerical: Fraser Valley - Kootenay Standard to be inserted into Wage Scale, with the following slotting of employees:
Employees, Clerk Grade I: re-classify to 1971 maximum structure of $454.75, 18 months;
Employees, Clerk Grade II: re-classify to 1971 maximum structure of $469.50, 18 months;
Employees, Clerk Grade III: re-classify to 1971 maximum structure of $492.50, 18 months;
Employees, Clerk Grade IV: re-classify to 1971 maximum structure of $524.25, 18 months;
Employees, Clerk Grade V: re-classify to 1971 maximum structure of $547.50, 18 months.

OKANAGAN REGION:

Ashcroft and District General Hospital, Ashcroft, B.C.

Clerical Department: incumbent in Clerk Grade IV classification to be re-structured to Clerk Grade V at 1971 maximum rate of $548.00.

Enderby and District Memorial Hospital, Enderby, B.C.

Housekeeping Department: Mrs. H. Gurr re-classified to Charge Housekeeping Maid at 1971 maximum rate of $462.75.
Maintenance Men: Mr. J. Dugdale; recommend re-classification to Maintenance II at 1971 maximum rate of $701.75.

Vernon Jubilee Hospital, Vernon, B.C.

Stores: if not covered by a negotiated Provincial Standard, employees Richardson, Paul, and Barnard to be re-classified to a 1971 maximum rate of $368.50.

Kelowna General Hospital, Kelowna, B.C.

Stores: if Stores and Purchasing Department not affected by a Provincial Standard, Mrs. M. Perry to be re-classified with an upward adjustment in wages.

Royal Inland Hospital, Kamloops, B.C.

Clerical Department: Mrs. H. Phelon re-classified to Clerk Grade IV at 1971 maximum rate of $524.50; Miss D. Martin re-classified to Clerk Grade III at 1971 maximum of $496.50.

Lillooet District Hospital, Lillooet, B.C.

Dietary Department: all Cooks considered anomalous unless Provincial Standard negotiated which would take precedence.

KOOTENAYS REGION:

Kimberley and District General Hospital, Kimberley, B.C.

Laundry Department: Mrs. McPherson, Laundress; propose Supervisory Allowance of Twenty-Five Dollars ($25.00) per month.

Nursing Department: Employee Stang.

Orderly: (a) Propose Ten Dollars ($10.00) additional for each autopsy, or Morgue Service performed.
(b) If utilized to perform duties related to Specialty I and II classifications, to be paid as an Orderly Specialty II.

Dietary Department: all Cooks considered anomalous unless Provincial Standard negotiated which would take precedence.
X-Ray and Laboratory Departments: all employees to be re-structured to provide a minimum of one (1) Grade III Technician in both Departments, and the balance of Technicians to be classified at Technician Grade II level.

Boundary Hospital, Grand Forks, B.C.

Maintenance Department: employee Angus MacKey; propose employee be re-classified to Maintenance Trades classification at maximum 1971 rate of $788.00.

Arrow Lakes Hospital, Nakusp, B.C.

X-Ray Department; Mrs. B. Anton; propose employee be re-classified as X-Ray Technician, O.N.R., at a wage structure One Hundred Dollars ($100.00) below qualified X-Ray Technician standard: 1971 rates: $581.50 to $701.25, 48 months.

As a result of the hospital's refusal to make any acceptable proposals, these unresolved anomalies will be forwarded to the Standing Committee on Special Pay Rate Adjustments under the chairmanship of Professor R. Herbert for resolution.
1971 ANOMALIES UNRESOLVED
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 reasonable-
ness, to accept a voluntary guideline of six 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:

<table>
<thead>
<tr>
<th>PERCENT OF TAXPAYERS</th>
<th>AVERAGE INCOME OF TAXPAYERS, 1961-1967</th>
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<tr>
<td></td>
<td>BEFORE TAX</td>
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<tr>
<td></td>
<td>1961 $</td>
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<tr>
<td>Lowest 5%</td>
<td>1,171</td>
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<tr>
<td>Lowest 50%</td>
<td>2,483</td>
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<tr>
<td>Highest 50%</td>
<td>6,216</td>
</tr>
<tr>
<td>Highest 5%</td>
<td>14,996</td>
</tr>
</tbody>
</table>

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:

<table>
<thead>
<tr>
<th></th>
<th>1961 $</th>
<th>1967 $</th>
<th>% Increase</th>
<th>1961 $</th>
<th>1967 $</th>
<th>% Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employees</td>
<td>4,132</td>
<td>5,300</td>
<td>28.3</td>
<td>3,759</td>
<td>4,711</td>
<td>25.3</td>
</tr>
<tr>
<td>Executives*</td>
<td>24,385</td>
<td>32,110</td>
<td>31.7</td>
<td>17,977</td>
<td>23,619</td>
<td>31.4</td>
</tr>
<tr>
<td>Professionals</td>
<td>11,413</td>
<td>16,711</td>
<td>46.4</td>
<td>9,007</td>
<td>12,701</td>
<td>41.0</td>
</tr>
</tbody>
</table>

* i.e. top 0.7% of “business employees”

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.
New Staff Rep.
The new Staff Rep servicing VGH and St. Paul's Unit is no stranger to HEU members. Brother Jim Ballard has worked in hospitals for over 31 years and has been active in HEU for 27 years.

Jim's experience should be of great value in his new servicing responsibilities.

United Co-operative Housing

Union Lends Assistance

Over the past year the Provincial Office has been lending clerical assistance to the United Co-operative Housing Society which is a low and moderate income housing development presently building De Cosmos Village (discussed in the January 1971, issue of the Guardian).

Below is a picture of Mrs. Irene Hrton of the Union's Provincial Office lending assistance to Mrs. Shirley Schmid, Secretary-Treasurer of United with some duplicating work for the Society.

NEW STAFF REP. FOR NORTHERN REGION

As a result of the recent resignation of Brother Jack Lawson, Staff Representative, the Union has recently appointed Owen Adams as new Staff Representative for the Northern Region. Brother Adams will also assume other responsibilities formerly held by Jack Lawson.

In the week of October 18th-22nd, Brother Adams, accompanied by Brother Rolfe, Director of Technical Services, made a trip to Terrace and Kitimat to orient the new Staff Representative to these two Units. Also intended on this servicing trip was a meeting with the Smithers Unit which was cancelled because of weather conditions. During the week of November 1-5, Brother Adams also visited various Northern Units and met with representatives from the Northern Region at an Educational Seminar held in Prince George. It is also intended that a comprehensive servicing trip will be made in mid-December to meet with other Northern Units not previously visited during the two previous opportunities.

IT'S ALL OURS!
The last payment on the Union’s Provincial Office Building was made at the end of October.
B.C. Hospital Workers’ Trade Union Home is now free of any encumbrances or charges against it.

Danger of ‘Work for Less’ Spiral

The Hospital Employees’ Union has heard that the Provincial Department of Education’s Orderly School is recommending that Orderlies become members of the Practical Nurses Association of B.C.

This recommendation poses some serious implications which are discussed by Sister Lee Whyte, Job Analyst with the H.E.U.

Does the Practical Nurse perform the same work or substantially the same work as the Orderly?

Is the only difference that the Orderly is assigned to male patient care?

If the answer to these questions is “Yes”, then the principle of equal pay for equal work should follow.

In determining whether the Practical Nurse and the Orderly perform equal work at the present time, we must consider the following:

1. There is no mutually acceptable job evaluation programme.

2. The Practical Nurses’ Act provides for a 10-member Council of Practical Nurses to regulate the affairs of Practical Nurses. The Council establishes guidelines as to the duties that a Practical Nurse may perform and generally restricts the Practical Nurse to the procedures that are taught in an approved school.

The duties that Orderlies can perform, however, are not restricted by such legislation.

At the present time, catheterizations, post mortems and orthopaedics are generally included in the job duties of the Orderly, but not in those of the Practical Nurse. Of these, morgue work probably will not be performed by women.

3. At an April meeting of the Schools Committee on the subject of Nursing Orderly Training, it was recommended that the Orderly and Practical Nursing Training Programme (which is now offered at the B.C. Vocational School in Victoria) be integrated as soon as possible and that they be identical in content, except for Obstetrics and Urology.

If the work currently performed by the Practical Nurse is the same or substantially the same as that performed by the Orderly, then the Practical Nurse is relatively underearned and an upward adjustment of her wage rate is necessary.

The low wage levels of the R.N.’s are obstacles to the processes of upward wage adjustment (that is, they constrain both general wage increases and internal wage adjustments), since the wages of R.N.’s “straddle” and “strangle” those of related and other classifications in the Wage Structure.

Consideration must also be given to a problem associated with the current state of the economy. High unemployment; the desire for employment and security; the obvious advantage to employers to hire males at the lower L.P.N. rate of pay; are factors that combine to create the danger of a “work-for-less” spiral.

Furthermore, more men come into the L.P.N. profession, this will undermine the argument that there is wage discrimination based on sex and react against the goals of the Union to achieve wage-parity between the sexes.
EXECUTIVE REPORT

By W. D. BLACK, Provincial President

At the Sixth Biennial Convention of Local 180, a resolution was endorsed providing that a Summary of Non-Confidential Business of Provincial Executive Meetings be sent to each Unit Secretary.

To avoid duplication of effort on the part of your Provincial Office Staff and yet ensure that the activities of your Provincial Executive are being communicated to the membership, a Summary of Executive Activity will be published in each issue of The Guardian.

STAFF BARGAINING

A Collective Agreement has been negotiated between the Hospital Employees’ Staff Union, which represents Staff Representatives and Clerical Employees in the Union’s Provincial and Regional Offices, and Local 180’s Provincial Executive Committee.

* * *

NORTHERN STAFF REPRESENTATIVE RESIGNS

Brother Jack Lawson has turned in his resignation to the Provincial Executive Committee. He is opening a Coffee Shop at the Oakridge Plaza, Vancouver, B.C.

Brother Lawson was the Northern Area Staff Representative.

* * *

PRIVATE HOSPITALS NEGOTIATE

Brother Wm. Zomers, Fraser Valley Regional Executive Board Member, has volunteered to assist Local 181 by acting as Bargaining Spokesman in negotiations with the Cottage Hospital Limited, Abbotsford, B.C.

These negotiations are now proceeding to the Mediation Officer stage.

* * *

OFFICER TRAINING

A number of senior Unit Officers have been selected and enrolled in Canada Manpower Educational Seminars. These Seminars emphasize Instructional Techniques and Industrial Relations and are being held in various communities throughout the province.

* * *

KOOTENAY DISPUTE

The Executive has been advised by Professor R. G. Herbert that "peremptory notice" has been served on the B.C. Hospitals Association and the Union that the hearing into the Inclusive Shift Grievance will be conducted on December 15th, 16th and 17th, 1971.

* * *

UNIT SERVICING

The practice of having a Staff Representative attend at least one meeting of every Unit in the last half of the year will be completed prior to Christmas.

* * *

PROVINCIAL EXECUTIVE MEETING

The Provincial Executive has not established a firm date for its next meeting. Meetings will be held in response to the needs of bargaining.

Contributions

Fort St. John Unit

Sister Sylvia Cranston on behalf of the Fort St. John Unit, recently gave the Providence Hospital, Fort St. John, a Breathing Monitor for the Maternity Ward. The value of this additional piece of equipment which cost over $300, is recognized by the Hospital and Staff alike.

In cases where there is anxiety over the survival of a weak, premature baby, it is no longer necessary for a nurse to concentrate practically all her attention on that particular child. The clicks of the Breathing Monitor can be set so that they are clearly audible throughout the Ward thus enabling the Nursing staff to attend other babies while still keeping an ear tuned to the monitoring note should there be any difficulty.

Sylvia Cranston with Nursing Supervisor at Providence Hospital.

Vernon Unit

Members of the Vernon Unit recently made a generous donation of $500 from the sale of raffle tickets to a Joint Services Club in Vernon for the purpose of aiding in the construction of an outdoor ice rink. This ice rink, which was to be completed this Fall, was delayed because of lack of funds, but will now go ahead as the result of public donations. The rink is to be used by the public and for Minor Hockey and Skating Clubs.
At St. Paul's

CENTENNIAL DANCE

The Annual Banquet and Dance of the St. Paul's Unit of Local 180 was held October 16th at the Golden Horseshoe Banquet Hall. Many enthusiastic H.E.U. members arrived in Centennial costumes, adding to the enjoyment of the dance.

Another Dance is in the planning stages for April or May — probably a dance with light refreshments.

Best Centennial costume awards were swept away by: Bob Standell and Florence Damato. The prizes, handsomely created agate necklace and string tie, were made and donated by Heinz Eisenhuth and his wife Hannah, avid rock hounds.
UNION SCHOLARSHIPS AWARDED

The University of British Columbia has announced the names of the winners of Local 180 Scholarships for 1971.

Awarded the Vancouver General Hospital Unit Scholarships of $350.00 each are:
- Miss Jeannie Peloguin, whose father is employed at Vancouver General Hospital;
- Gary White, whose mother is employed at the Vancouver General Hospital.

Both of these winners intend to continue their studies at U.B.C.

Awarded the St. Joseph's Unit Scholarship of $250.00:
- Miss Angela Janot, whose mother is employed at Prince George Regional Hospital. Miss Janot intends to study Medicine at the University of B.C.

The Provincial Office of Local 180 Scholarships of $250 each were awarded to:
- Miss Linda Shipkula, whose mother is employed at the Vernon Hospital;
- Martin Dornor, whose mother is employed at St. Martin's Hospital, Oliver, will be attending U.B.C.

Heartiest congratulations are extended to all these successful candidates on their splendid achievements, and the very best wishes of the Union for their future success in the advancement of their chosen careers.

St. Mary's Unit

DANCE HELD

On October 2nd, the members of St. Mary's Unit, New Westminster, and invited guests held a Dinner Dance at the Royal Oak Legion. Members of the Provincial Office Staff who were able to attend reported that all had a good time as witnessed by the pictures below.

For Northern Region

EDUCATIONAL SEMINAR

During the week of November 1 - 5, Union members from Units in the Northern Region participated in an Educational Seminar held in Prince George.

Along with Bro. Jack Gerow, Bro. Owen Adams (new Staff Rep), and Bro. John Darby from the Union's Provincial Office, delegates from 10 Northern Units are shown below.

CLERICAL OPPORTUNITIES

Local 180, Hospital Employees' Union, is accepting applications from its Members only, for permanent, challenging and rewarding Clerical positions in the Union's Provincial Office, Vancouver, B.C., and/or the Regional Office, Victoria, B.C.

Any Clerical vacancy occurring in either of the Union's Offices during the calendar year 1972 will be filled by successful applicants to this Job Posting.

Applicants should have a Grade 12 education with a minimum typing speed of 60 w.p.m., and able to take shorthand at not less than a minimum of 100 w.p.m.

Working conditions, wages, and fringe benefits are superior to those established in the Hospital Industry.

If you are interested in working for your Union on a full-time basis, you should submit a résumé of your experience and qualifications, prior to December 15, 1971, to:

R. S. McCREADY, Secretary-Business Manager,
Hospital Employees' Union, Local 180,
558 West Broadway, Vancouver 9, B.C.

Mark your envelope "Confidential." All applications will be acknowledged. Job Posting No. 19. Issued by the Hospital Employees' Union, Local 180.