



VOL. XVII No. 2



APRIL TO MAY, 1980



A mixed bag of resolutions awaits delegates

Death of a hospital And the town it served

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LPNs have room for optimism

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Some lumps in that lump pay

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Young shop steward Takes a stand on principles

— p.



"In humble dedication to all those who toil



The Hospital Guardian is published six times a year by the Provincial Executive of the Hospital Employees' Union, Local 180, under the direction of an Editorial Committee whose members are:

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Opinion Page

The lonely road

Retreat for a moment to the days of your childhood. Do you remember him? There seemed to be at least one of his kind on every block. The kid who agreed to the rules of the game, only to throw a tantrum and head for home when he couldn't have his own way. The kid who wouldn't play if he couldn't be up to bat - who threatened to sick his big brother on you.

You should be free of him now that you've grown up. But you're not. It seems he's followed you to the bargaining table. Only it's not his big brother he's calling today. It's the Labour Relations Board. Or the might of the courts. Or both. The game has to go his

way.

All too often these days employers are agreeing to binding arbitration to settle contract disputes, but failing to abide by the awards that are handed down. There are cases when they make no effort to implement some of the terms of those awards. More often, they appeal to a higher authority in hope of having the award set aside.

The most recent case in point is the arbitration award that offered the first real ray of hope to the long underpaid employees of two non-profit long-term care facilities Shaughnessy Manor in Vancouver and Rose Manor in Victoria. Both have turned to the LRB and the B.C. Supreme Court to appeal the findings of an arbitration board that was under the chairmanship of John Sherlock.

In economic terms, it was a sizable award. It was also a just award. Any fairminded person would readily agree to that. But the figures involved are not important here. What is important is the question of moral responsibility. When the employer agrees to settle a dispute through binding arbitration, then the employer should be willing to accept the outcome of that arbitration. Unfortunately that is not the case this time — nor has it been in a number of other disputes.

In this particular case, the binding arbitration was not under the terms of essential service legislation, but was an avenue mutually agreed to by both sides. By not living within the spirit of the agreement and by fighting on after the final bell, Rose Manor and Shaughnessy Manor are really guilty of scandalous behavior. They are also ignoring the plight of employees who have been waiting a long time for resolution. And this applies not only to employees of the two facilities mentioned, but in four other long-term care homes that have agreed to pick up the same settlement.

This union believes binding arbitration is of particular importance to something as vital as the health care field. The industry itself has shown interest in this route to settlement for disputes that often cannot be resolved at the bargaining table. It is a

sensible and fair way of doing things.

In playing fast and loose with the arbitration mechanism, employers may in the long run be hurting themselves. They may unwittingly be building a disincentive into a system that has long been advocated as a viable alternative to the economic bloodshed of the strike.

Only if suitable

Someone has suggested this is our 10th anniversary. We hadn't thought of it quite that way. But if it is an anniversary — even a nice round 10th — you won't find us celebrating. We don't believe in toasting 10 years of broken marriage.

It was in 1970 our relationship with the Canadian Union of Public employees went on the rocks. You might say the convention marks the occasion well. For it was at the spring

convention 10 years ago that we broke the ties.

The decision wasn't taken lightly. We knew the price would be high. We knew that under the rules of the House of Labour, when you divorce your mate, you also divorce the rest of the family. This meant we could not retain our affiliation with the Canadian Labour Congress, or those bodies that sit under the CLC umbrella — the B.C. Federation of Labour and the various labour councils.

There were sound reasons for our break with CUPE. It wasn't a matter of like or dislike. Perhaps it could best be described as an unbearable imbalance. The service we received

was too little and the price we paid for it, too high.

We were a small union in those days — less than half our present size of 21,500 members. Even so, we were already becoming quite efficient. For instance, we had developed our research facilities to the point where we found them superior to anything CUPE was able to offer us.

We knew then that the time had come to part company. And we did.

We have done well in the years since. For one thing, we have more than proved our capability as a self-servicing provincial organization. For another, we have maintained a healthy relationship with those in the mainstream of the trade union movement. Our goals have been the same — the welfare of the working person coming before all other considerations. In defence of that principle, we have on occasion linked hands with the CLC affiliates.

Yet, it is a lonely road we travel. For some time now, our members have expressed a desire to move back into the herd on an official basis. They realize there is much to be gained through the united strength of the trade union movement. By and large, they are proud of their own union, and they know that as an active participant, it would have much to offer the movement in return.

It is some time now since the matter of re-affiliation with the CLC was first approached at the official level. The door remained closed because we were not willing to hitch our cart to CUPE as a means of entry.

The CLC leaders have a clear understanding of this, but they have shown a willingness recently to reconsider the question. As one newspaper report indicated in May, the possibility of accepting HEU on a direct charter, or through some other form of affiliation, has been raised at a meeting in Ottawa of the CLC executive council.

Direct charter remains the preference of this union. Perhaps this will prove acceptable to the CLC. Only time will tell.

Victoria on firing line over pension changes

As the Guardian deadline approached, the pension story took a new turn.

Provincial Secretary Evan Wolfe introduced five amendments to pension legislation and almost immediately found himself on the firing line. Unions affected, including HEU, were not happy with what they considered a surprise punch endangering the future of their pensioners.

Two days after hearing of the government's plan, six key officers of the B.C. Government Employees' Union paid a visit to Wolfe and left the message that they would settle for nothing short of withdrawal of the

amendments. Wolfe indicated it was too late in the day for that kind of a move, although he was prepared to set the machinery in motion for consultation with the union before making any future changes.

The union earmarked \$50,000 for use by the B.C. Federation of Labor Public Sector Committee in conjunction with any protests that might be mounted.

Since various pension plans were also involved, other unions wasted no time in making their feelings known.

William Black, president of HEU, accused the government of "unilateral action without any attempt at consultation."



.... Evan Wolfe

The fact the government would tamper with pension plans without talking first to those financially involved was more than Black and HEU were willing to accept.

Particularly offensive to the union, and others, is the meaning of those changes: the clamping of a lid on indexing and an increase in employee contributions to the funds. This effectively means a cut in takehome pay for the employee and a limit on cost-of-living increases for retired members.

The Provincial Secretary has defended his move. Far from having a harmful effect, it is aimed at giving the funds some

added strength and security in the years ahead, he says.

The government looks upon itself as blazing new trails that, when recognized, will be followed by other jurisdictions.

Pension funds affected by the amendments are covered by the Municipal Pension Act, the Public Service Pension Act, the Public Service Benefit Act, the Teachers' Pension Act and the College Pension Act.

HEU members are covered by the Municipal Pension Fund.

A wide range of public sector employees are affected by the planned changes, something that would be expected to add considerable strength to any protest campaign.

... Bookkeeping also sloppy, but funds secure

The hand dips into the cookie jar and moves some of the contents — not out of the kitchen — but to another shelf.

Not only do they not belong there, but they're going to remain undetected until someone comes by to do a little tidying up.

While Erma Morrison doesn't do the actual tidying up, she's responsible these days for pointing to those areas where it is needed.

As B.C. Auditor-General, Morrison is concerned with good economic housekeeping and her recently-unveiled 1979 report indicates that she looks upon the Social Credit government as a bit of a frump.

The report was critical of the government's accounting practices in a number of areas, including the Municipal Superannuation Fund, the pension vehicle for numerous bodies of employees, including HEU members.

After taking a look at this particular cookie jar, Morrison noted that \$4.3 million had been transferred from the government-controlled fund to the general fund account without the knowledge of the fund's signing officers.

There are other areas of concern these days with various pension funds, although those who keep a close watch on developments with the Municipal Superannuation Fund seem to have no worry about its ability to meet its obligations — in spite of some rather sloppy handling.

The MSF annual report for 1978 (the last available) discloses an unfunded liability of \$235,147,000 "in respect of basic pension benefits, given the present statutory levels of employee and employer contributions."

On the surface, this places the MSF in the awkward position of being out of luck if it ever had to meet its total obligations. Looking down the road, some see a need to hike contributions to the fund.

But, with the "fund watchers," there seems some room for optimism.

One trade union representative on the Municipal employees' Pension Committee says he and others are inclined to look at it this way: one way or another, the formula created for the fund will work; the necessary money would have to come from somewhere, even if it

meant going to the general

"Looking at the figures as they stand," said the representative, "someone might get the impression that if the fund went broke today, or if everyone was to be paid off all at once they'd fall \$235 million short of the mark.

"But for that to happen, B.C. would have to float off into the Pacific Ocean. It's that unlikely."

The advice of a rather conservative actuary is that a superannuation fund should be "62 percent covered at any time" to be thoroughly healthy. At last report, the MSF was a mere one-quarter percent short of that mark.

The average yield on securities that came in during 1978 was 9.83 percent. Contributions for the year were close to \$92 million — \$47,242,417 from employees and \$44,656,299 from employers.

By taking an average on the \$661,885,242 accumulated since the fund began, the net interest rate for the year was just over 8.2 percent.

The interest has been creeping up an average of a quarter of a percent per year.





"Without doubt Russian measels - red squares!"

A-G asked to take a look

Some wheels are turning at the top levels of government as a result of Nanaimo Regional General Hospital's refusal to provide the Hospital Employees' Union with requested financial information.

Deputy Health Minister Dr. Chapin Key brought the Attorney-General's Ministry into the picture earlier this year.

The case concerns the union's unsuccessful attempt to obtain information relating to bonuses and gratuities paid to each employee at the hospital. The request grew out of an earlier dispute. The union knows what its members earn. But what it can't find out is what management is paying itself.

In a letter to HEU's legal counsel, Chapin says he was informed by the hospital administrator that the board of directors was not prepared to release the information. The board's stand was based on legal opinion it had received.

"I have therefore now submitted this matter to the Ministry of the Attorney-General," writes Key, "and have asked that the Public Bodies Financial Information Act and other appropriate legislation, such as the Hospital Act and the Societies Act of British Columbia, be reviewed, and an opinion provided, based on the intent of that legislation."

There have been no further developments reported since Key wrote the letter.

"The question that is involved here is simply this: are hospital boards laws unto themselves?" asks HEU Secretary-Business Manager J. D. Gerow.

Gerow says it is the first time the union has encountered difficulty of this nature in its dealing with hospitals through-

out the province.

"The public has a right to know how its money is being spent, especially when you consider that 80 percent of the

"I have therefore now sub-money spent by hospitals goes itted this matter to the into salaries.

"One has to ask why the Nanaimo Regional General Hospital is paying no attention to the public information acts."

Adds Gerow: "The hospital is taking this position in spite of the fact that any member of the public has the right, after paying a nominal fee, to see the information."

Hollywood will never suggest it, of course, but wouldn't it seem appropriate to hang—just over the casting director's couch—a sign reading: From Here to Maternity?

First Nurse: Why do you consider Dr. Snortengroober the quickest surgeon on staff?

Second Nurse: I went out with him the other night, and is he ever a fast operator.

Page 3



After lying dormant for some time, the question of compulsory retirement seems to be emerging once more as a potentially explosive issue.

It appeared earmarked for considerable discussion at the HEU Biennial Convention, June 15 to 18 at the Richmond Inn.

A record number of delegates — probably about 350 — were also due to deal with a wide range of resolutions covering everything from problems with hospital staff reductions and high interest rates, to Canada's two official languages, industrial democracy and the need for rent controls.

And some questions were to be asked concerning the union's objective of a \$1 million defence fund.

Attention has been focussed on the compulsory retirement question recently with the move in some quarters to do away with the rule that says a worker must pack it in when he or she is

Multitude of questions await delegates

65. The International Woodworkers of America, for example, made a test case out of the forced retirement of one worker, but lost what may just be the initial round of an ongoing battle when the courts ruled the retirement valid.

The IWA may represent a growing public opposition to compulsory retirement, but two of the 91 resolutions submitted by units in advance of the HEU convention demonstrate that opinion is still divided — even among trade unionists.

The Como Lake Unit asked simply that HEU pressure the government to put an end to compulsory retirement.

At the same time, the Creston unit sought support for its stand that voluntary retirement be allowed at 55 and compulsory retirement be lowered to 60 years of age. If that wasn't acceptable, said the unit, the 65 figure should remain.

Among those voicing concern over short-staffing in the hospitals, is the Altamont Unit. It submitted a resolution saying patient care was suffering because of the double impact of staff reductions and increases in the patient load. The unit asked that a delegation from the convention approach B.C. Health Minister Rafe Mair to express the concern.

Some other opinions forwarded at the unit level:

 Because hospitals hold back retroactive cheques "until the last minute," the employer should be forced to pay interest on the amounts owed. Any HEU member who tries to get another member fired by volunteering information (unauthorized by the union) should have his or her union card withdrawn.

 Only people with an adequate knowledge of either the English or French language should be hired for hospital work.

Wage parley delayed

The Provincial Wage Policy Conference was not combined with this year's Convention due to the fact that the 1978-80 Master Agreement was extended one year to Dec. 31, 1981.

The next Wage Policy Conference will be scheduled for sometime in mid-1981.

RN windfall should improve picture for LPNs

Disparity is usually a bad word in trade union circles.

But there can be rare circumstances that call for a nod of approval rather than the traditional thumbs down sign.

Case in point: the Licensed Practical Nurses of HEU and the members of the Registered Nurses' Association of B.C. who staff the province's general hospitals.

The narrow wage gap that separated the two groups is being widened somewhat as the result of a boost for the long-underpaid RNs. Early indications are that this will have a positive effect on the employment of LPNs.

The trend had been to replace Practical Nurses with RNs because the overall costs were not that much greater. but now that the difference will be more pronounced, the Practicals may soon find themselves back in some of their old stamping grounds.

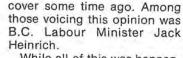
The first evidence of this showed up when the Vancouver General Hospital posted notices that it wanted 100 LPNs for summer relief and others for full-time and part-time jobs. In a smaller way, the same kind of talent search is underway elsewhere in the province.

Lyne Fallick, president of the Licensed Practical Nurses' Association of B.C., sees the recent developments as good news for both her group and the RNABC.

"I think the RNABC have got a good settlement," says Lyne, a former employee of Gorge Road Hospital in Victoria, who remains an honorary member of HEU. "I don't think they could have got a better one without Page 4

strike action. And it's good for the LPNs because of the disparity factor."

The RNs, economically handcuffed for years, rode a new wave of militancy into the last set of negotiations with the industry and emerged with wage increases of 44 percent over 27 months. While the figure created shock in some quarters, most reasonable people realized the RNs were simply covering ground they should have been allowed to



While all of this was happening, the LPNs were not exactly idle. In the two years covered by the HEU master agreement with the Health Labour Relations Association, their wages increase by as much as 36.26% percent.

In addition, some will be getting as much as \$2,400 in the lump-sum payment that has been agreed to with the scrapping of the job evaluation program.

Until the new contracts, the difference between the maximum LPN wage rate and the minimum RN wage rate had been less than \$100 a month notes Fallick. The difference now is \$1,394.00 for the toppaid LPN and \$1,624 for the beginning RN.

That disparity will shrink to \$118 Aug. 1 when the top LPN rate goes to \$1,506, but the Jan. 1, 1981, boost for the RNs will take it back up to \$194. When the LPN rate moves up to \$1,626 Aug. 1, 1981, with the last increase in the HEU contract, it will fall \$210 below the \$1,836 RN minimum.

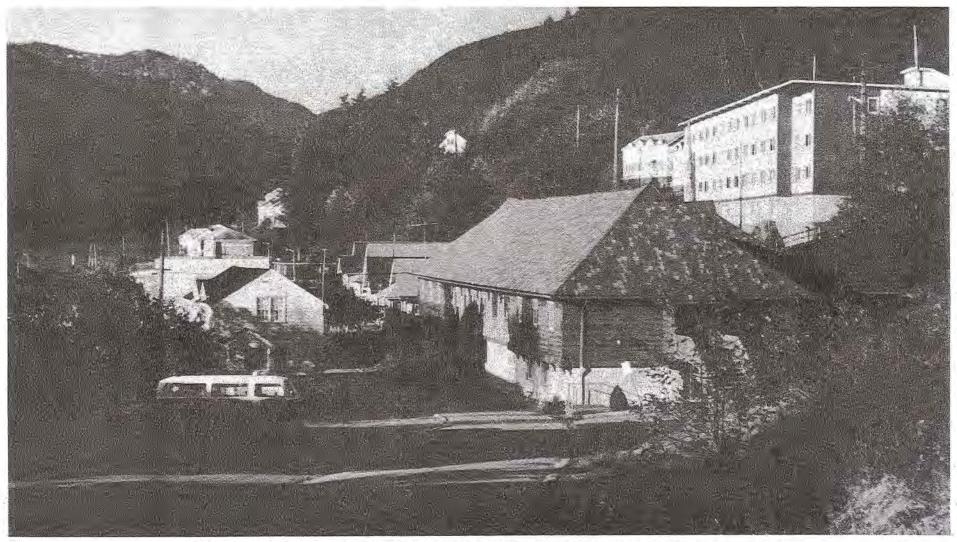
Fallick says LPNs had been phased out of many of the specialized areas in some hospitals, such as emergency, maternity and surgical nursing.

"It was obvious that pay was a factor," she says.

The improvement in the job situation, she explains, will constitute no threat to the RNs.

"We just want to do the jobs we were trained to do — to get back into the areas where we were before."





For employees, it was a good place to work and a great place to live before fate cast its shadow over the community.

What lies ahead for survivors of Ocean Falls?

The hospital, like the people it serves, can be a story of contrasts — alive with the joy of birth, subdued with the sadness of death.

But unlike the people, the hospital isn't supposed to die.

It can happen, however. And when it does, a special kind of sadness descends on those who have served as its lifeblood—people like Bertha Owen and the others who staffed the 12-bed Ocean Falls General Hospital.

As chairperson of HEU's little Ocean Falls Unit, Bertha has had the unpleasant experience of watching the hospital and community enter the death throes together, victims of what some local people call the disease of poor economic judgment and bad politics.

When Bertha was interviewed in mid-May there were only five members of the unit remaining on the job. One was due to leave the next week. The entire unit, of course, would disappear with the death of the hospital June 8.

The hospital is a vital but small part of the story of a dying community. When the Ocean Falls Corp. announced March 6 that the provincial government-owned paper mill would close in June, it-meant the end of the line for the mill's 410 employees and uncertainty for most of the 1,100 residents of Ocean Falls.

They had been headed this way once before — in 1973 when the NDP government of the day stepped in and purchased the town and mill operation from Crown Zellerbach. The company was going to close down because the economic picture was anything but good.

The government changed in 1975 and the new Social Credit administration talked of selling off businesses bought by the NDP. On March 9, 1978, most of the shares in the original holding company for province-held resources — B.C. Cellulose Corp. were transferred to B.C. Resources Investment Corp. (BCRIC)

The lone exception was Ocean Falls. It remained outside the package as a

separate corporation. According to reports, this was because investment brokers and marketing authorities considered it too unattractive to be included.

As the party leaders hit the campaign trail last spring for the May 10 provincial election, private and public ownership became an issue. Premier Bennett said the government wanted to sell the Ocean Falls operation because it would be better off in private control. Opposition Leader Dave Barrett said an NDP government would determine what could be done to make the operation viable before turning it over to BCRIC.

This March, just about a year after the first shots were fired, Brian Payne, a national representative with the Canadian Paperworkers Union, charged that Bennett was responsible for the impending death of Ocean Falls.

About three weeks after announcement of the closure had sent a shock wave through the community, Payne told of a meeting he and other union officials had with Bennett Jan.

He said Bennett assured the meeting "the one thing they weren't going to do was walk in one day and put a closed sign on the mill."

"He also said we would be the first people to know what would happen," Payne said.

"It's just not fair what these people are being put through. It's crazy. And he is responsible in the end."

At the time the mill closure was announced, there was a suggestion that another type of operation might be possible in two years or so. But this has been dismissed by most as nothing more than a vague hope. Skeptics say it is tantamount to handing a bar of soap to a drowning man.

For Bertha Owen, who has lived in Ocean Falls for 36 years, life will go on. But it will never be the same.

"Anybody who has been here any length of time feels bad about it," she says.

Since making the move so

long ago from Northern Manitoba, Bertha and her husband, Jack have watched their five children grow up in Ocean Falls.

The community has been Bertha's life. Seven-and-a-half years ago she went to work in the hospital and for the past five years had served as chairperson of the HEU unit.

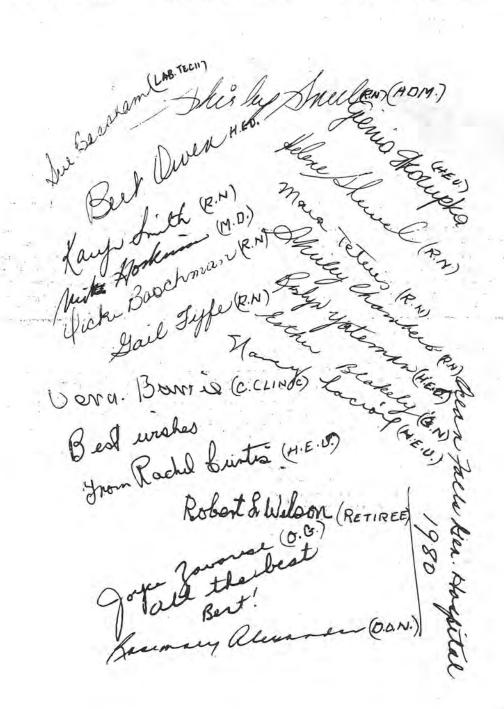
Her husband retired from the mill three years ago and both of them hope they will be able to stay on in what may be little more than a ghost town.

As long as there is still a link with the outside world, some reasonable delivery by ship of the necessities of life, it may be possible for those who have retired to live out their lives in this land of their choice.

That, at least, is what Bertha Owen is banking on.

"We'll stay here for a while and see," she says.

Only time will tell whether people like Bertha and Jack will be able to accomplish what the town and mill and hospital could not.





Staff Rep Bob McCartney spells out happy details.

Two-way attack on long-term care



Expression of Barbara Murray, far right, tells story.

Out of the dark ages ... and into the light

Some significant gains are being made as the union attacks the problems of the long-term health care system on two fronts.

Dramatic wage increases are showing up for employees who had been stuck with substandard earnings.

At the same time, the employees have launched an ambitious drive of their own to improve life for their patients. Their own task force will be conducting a parallel study to the one carried out by a government taks force. It hopes to give Victoria a real basis for action.

The battle on the other front is beginning to bear some rich fruit almost two years after the seeds of certification were planted by HEU.

The latest success story involves Chilliwack Intermediate Care Home. It comes on the heels of an arbitration award that more than doubles wages for some employees at Rose Manor in Victoria and Shaughnessy Manor in Vancouver. (The Rose Manor-Shaughnessy Manor award,

elsewhere

in this

edition is being appealed. A rough estimate indicates that full-time employees at Chilliwack will get in the neighborhood of \$5,500 in retroactive pay alone as the result of a Dalton Larson arbitration award. Because of the long battle between the time of certification and the final resolution, increases are retro-

active to Aug. 15, 1978.

There had been no wage hikes since Aug. 15, 1977.

Nursing attendants, the major group involved, were earning \$4.48 an hour. An increase that takes them to \$5.58 is retroactive to Aug. 15, 1978. They move to \$5.97, retroactive to Jan. 1, 1979, and \$6.50, retroactive to Jan. 1 of this year. On Aug. 1 — when different levels come into play — the maximum rate will be \$7.97, and on Aug. 1, 1981, that figure swells to \$8.58. The attendants are the same as nurse aides.

The two other groups — dietary aides and housekeeping aides — move from \$4.18 to \$7.97 in the same time frame.

\$7.97 in the same time frame.
Part of the retroactive harvest
has already been reaped. The

employees received \$1,000 advances at Christmas on what was owing.

When the job of organizing got under way at Chilliwack there were only 12 employees. but that figure increases to 30, possibly even 40, with the opening of recently added facilities housing 90 long-term care beds.

A non-profit establishment, operated by a hospital society, the Chilliwack Intermediate Care Home is on property occupied by Chilliwack General Hospital. It is an arrangement that has left it with limited job classifications. It is supplied with a number of support services by the bigger hospital, including food, heating, stores, administration and secretarial work.

The other side of the longterm care story had its beginning last December when problems concerning the workload and patient care were discussed at HEU's special long-term care conference.

The next step came May 13 when 22 HEU long-term care employees met and agreed on various areas of concern, including:

—That the workload has increased greatly since the government's long-term care program came into effect two years ago.

—That patient care varied radically from institution to institution.

—That privately-owned facilities fared the worst in terms of patient-staff ratio.

A committee was formed at that meeting with Joan Wright of Altamont Private Hospital installed as chairperson. Others on the committee are: Eileen Snarey, Dogwood Lodges, secretary; Phil Taylor, Queen's Park Hospital, Carol Sanders, Kiwanis Car Home and Barbara Roberts, Como Lake Private Hospital. Alternates are Kathy Robie, Delta Centennial Hospital, Melva Poyser, Normandy Private Hospital, and Penny Morris, Inglewood Private Hospital.

At another meeting May 20, the committee started the ball rolling by deciding that HEU would set up a long-term care task force of its own.

task force of its own.

What makes this move interesting is the fact that HEU was turned down when it made

application earlier for representation on the task force committee established by the province.

The HEU committee's plan is to work with employees in all long-term care facilities to determine what the real story is. This will involve an extensive investigation with a long list of very specific questions.

Meanwhile, the committee is compiling a list of all regulations concerning patient care, funding and matters concerning the physical side of the institutions.

The objective will be to find out just which of these regulations are being followed and which are not. The assumption is that no one knows more about the faults and the needs than do the people who work in long-term care on a day-to-day basis.

The hope at the moment is to establish four or five regional committees to work with the main committee on what is destined to be a painstaking and thorough study.

The final step will be to present the provincial cabinet with a comprehensive brief.



Point by point Chilliwack long-term members go over the gains that lift them out of the depression of the past.



It's good news to Evelyn Buck, left, Pat Ellis, Chairperson Sandra McDowell and Patricia Saunders.

Larson to adjudicate move

Troubleshooter Dalton R. Larson has the job of seeing that all goes well for employees and employer when Helmcken Road Hospital is completed in Victoria.

When established, Helmcken Road will take over much of the workload now handled by Victoria General.

With the introduction and maintenance of new facilities, there is always a possibility of Page 6

problems where jobs are concerned. With this in mind, HEU and HLRA have executed a memorandum of understanding naming Larson as special adjudicator until Dec. 31, 1982.

Larson is to act on "any question or difference" arising between the parties. Within 30 days of receiving written notice from either party, he is to complete his investigation and make a binding decision.

Working Conditions and Poor Patient Care Blamed for Walkout

H.E.U. members at Pouce Coupe Community Hospital staged a two-day sit-in starting at 10:00 a.m. on May 30, 1980.

The sit-in was caused by a growing number of disputes between the employees and the hospital's administration over the quality of patient care and working conditions. The sit-in came to an end after an L.R.B. cease and desist order was issued ordering

the employees back to work. The order included an immediate investigation by a special officer of the L.R.B., into the employees' complaints.

Pouce Coupe is a 54-bed extended care hospital six miles south of Dawson Creek.

In the last edition of the Guardian an editorial referred to a sad incident at Prince George involving the eagerness of two union members to give unsolicited evidence against another at a termination hearing. The editorial reminded HEU members of their Oath of Obligation which concludes with the words: "... charitable in my judgement of my fellow members, and never from selfish motives wrong a brother or sister or see him or her wronged if in my power to prevent it."

It would seem fitting to remind members of that editorial and oath in dealing here with the ordeals of Joyce Brubacher, a young Shop Steward at Royal Jubilee Hospital in Victoria.

Joyce attempted to meet the problem head-on by presenting this brief at the April general meeting of HEU's Jubilee Unit. The brief is presented here in its entirety.



"I reacted as I think any caring human being would"

I have been a Shop Steward from the Medical Records Dept. since last September and on reflecting over the past seven months I would like at this time to share some of my impressions with you. Perhaps other Shop Stewards are having, or have had, similar experiences.

I'm titling this topic "What it means to be a Shop Steward from Medical Records."

In a word - it's tough!

For obscure reasons, the Medical Records Dept. has projected an anti-Union attitude in past years. We hope this is slowly changing, but

management is still keeping up the pressure.

Example No. 1: Last August or early September I was asked by the Director of Medical Records to assist the new employees. The day after my name appeared on the Union Bulletin Board as a Shop Steward I was suddenly totally isolated.

Example No. 2: In November I was approached (during office hours, it is true) by a young employee of Medical Records who, with tears in her eyes, asked if she could talk to me for a few minutes. I reacted as I think any caring human being

would. We stood in the hall outside Medical Records for less than five minutes.

At 11 o'clock that morning five employees from Medical Records went to Mr. Zirul's (Assistant Personnel Director) office and threatened to walk off the job if I did not cease acting like a Shop Steward.

Example No. 3: A petition was circulated around the Medical Records Dept. in an attempt to remove the two Shop Stewards (Sister Beth Spencer and myself). I understand many of the casual employees were called by phone at home and asked if their names could be

used. I never saw this "petition" and it came to nothing — but this is hardly the point.

I find this totally unacceptable. How dare Union sisters behave this way!

As a fledgling Shop Steward I am operating as best I can with the wisdom and knowledge I have at this time. I am prepared to be responsible for my actions. Should not those people actively opposing me in my duties as Shop Steward also be responsible for their actions?

The kicker to this story is that one of the five women I am given to understand sat in

Zirul's office is now in management and is presently the Acting Director of Medical Records. I leave the Union membership to speculate on the motives of such employees.

There is an expression you may have heard: If you don't use it, you lose it. I think this applies to Union solidarity, to our right to speak out against favoritism, against harassment, against injustice. How far are we prepared to go in the abandonment of Union principles?

I feel every HEU member of Local 180 should consider this question very carefully.

If we don't use it, we lose it!

Pressure Opposed

Pressure by employers to have workers certified fit for a return to the job doesn't sit well with the trade union movement or the doctors.

The B.C. College of Physicians and Surgeons and the B.C. Medical Association decided recently to tell doctors not to be influenced by company pressure. The message was to be conveyed by newsletter and the B.C. Medical Journal.

Last year there were meetings between medical representatives and the B.C. Federation of Labour in connection with cases the Fed has been compiling. The cases concern abuse of the doctor-patient relationship.

One example is a letter the post office sent to all B.C. and Yukon postmasters — suggesting they write doctors treating injured employees and urge them to return the employees to the job. A sample form was included.

The sample letter names the employee, gives the rate of pay, expected date of return, and says: "His/her work is important in helping us meet our service commitment to the public. If as a result of his/her prolonged absence, replacement or overtime staff becomes required, it can add substantially to the cost of maintaining this service.

"Any professional assistance you can provide which will promote an earlier recovery and return to work will be appreciated by all concerned."

Such developments have not escaped the attention of the working public.

As one HEU unit officer said, after noting publicity on the subject: "I'm sure our members will find it interesting and quite relevant in these times when cost-cutting measures by the government and employers are being initiated everywhere."

Staff contract goes to mediation

Contract negotiations between HEU and the Hospital Employees' Staff Union goes before a mediation-arbitration tribunal June 19, the day after the windup of the HEU convention.

Six days have been set aside for the hearing.

Chairing the tribunal is UBC law faculty professor R. G. Herbert, whose past involvement with the industry included the standing arbitration for pay rate requests.

Both sides agreed to this means of resolving the dispute. The staff union covers some 25 HEU employees. Wages, hours of work and overtime are the main issues.

Nurse: Why, in the name of equality, can't a hernia be a himnia?

Doctor: Stop this foolish talk and get Mrs. Prendersnoot ready for her hymterectomy.

Patient: Doctor, what can I do about this knife in my back?

Doctor: Walk carefully and sleep on your stomach.



New bursaries up for grabs

A total of \$2,900 in bursaries has been made available for the union's 1980-81 Bursary Program.

The bursaries go each year to HEU members and the sons and daughters of members. They're also open to the children of retired members, as long as those members were still on the union's active list on the first day of the year.

Bursaries that are up for grabs:

Edward James Ashmore Memorial Bursary (jointly sponsored by the Surrey Unit and the Provincial Executive) — one bursary of \$1,000.

 Hospital Employees' Union (Provincial Executive) one bursary of \$500.

Hospital Employees' Union (Vancouver General Unit) — two bursaries of \$350 each.

 Hospital Employees' Union (Royal Jubilee Unit) — one bursary of \$350.

 Hospital Employees' Union (Victoria General Unit) one bursary of \$350.

The bursaries are offered to students going into a full degree program at Simon Fraser University, the University of B.C., the University of Victoria, or any regional college in the province. They are also available for students entering the B.C. Institute of Technology (BCIT) in any field leading to a Diploma in Technology.

The bursaries are awarded to students who have demonstrated satisfactory academic standing and who need financial help.

Applications can be obtained from the Awards Office, University of B.C., Vancouver, B.C. V6T 1W5.



"So much for Freud . . . now to the worm in the apple of your marriage — your husband."

Gradual Progress On complex plan for new system



For HEU team, it means poring over endless data

As they move slowly along the road to a Classification System, the union and hospital industry are finding a few potholes.

What is involved mainly at this point is the fundamental question of whether there is to be equal say in the first two phases - development and implementation. There is agreement in principle on the final question of how the plan is to be administered. Consistent with past practice, the ongoing administration would be carried out by the employer with the employee having rights of review and appeal.

The classification system entered the picture with the new master agreement as a replacement for the ill-fated job evaluation program. The union has estimated that approximately 30 per cent of the members are in jobs that still require proper classification,

SON OF JOB EVALUATION NOT BORN EASILY

compared to the figure of 1,00 per cent when a bid for a master job evaluation plan was first made in 1974.

So far there has been initial agreement that administration of the classification program be consistent with the master agreement where it applies to changes in job content, creation of new positions.

HLRA has suggested that the employer determine pay rates for classifications with the employee having the right to appeal the decision through negotiations and, if necessary, arbitration.

But there has been no agreement on this proposal to develop and implement the program. HEU has proposed that there should be an initial matching of HEU job descriptions with those established by the Government Employee Relations Bureau (GERB) covering provincial government health care employees.

Any wage increases growing out of this should become effective August 1 and be retroactive to January 1, says

Negotiations and arbitration would come into play in cases of disagreement over the matching of positions and

The main goal of the program, says HEU Secretary-Business Manager J. D. Gerow, is to create job classifications that honestly reflect the work being done and establish appropriate wage differentials.

He says the union's call for an equal say in the development and implementation stages of the program is based on the conviction it would mean less trouble for the industry in the

"What we want is balance and we're sincere in saying that we can agree on the correct rate at the outset and eliminate as many appeals as possible in this way.'

Donna Lowe, chairperson of the Victoria General Unit, and three of her fellow officers have been assisting the union in the matching of job descriptions with those of GERB.

All are clerical employees and were selected for the chore because of the extensive involvement Victoria General had with the planning for the job evaluation program. The hospital was the site of initial study by the Wilkinson Com-

Under the terms of the master agreement, Gerow said that HEU and HLRA have until May 31, 1980 to agree upon a mutually acceptable sytem, otherwise the matter will be put to arbitration.

LRB ready to force first contract on Nelson

After years of resisting union efforts to negotiate a first contract, the Medical Associate Clinic at Nelson may have one

imposed on it in a rare move by the B.C. Labour Relations Board.

In a May 23 letter to the clinic

and the Hospital Employees' Union, LRB Chairman Donald Monroe said: "I would have to be naive in the extreme to believe and accept that the clinic has made every reasonable effort to conclude a collective agreement."

Munroe said he had concluded it was "advisable" for the LRB to impose the terms of a first agreement, but he is giving the parties one last chance to negotiate a contract before the final step is taken.

The B.C. Labour code introduced in 1974 by then-Labour Minister William King included provisions for forcing an initial agreement, but this section of the code has seldom been put to use.

The clinic's record of resistance dates back to Christmas Eve, 1976, when the International Woodworkers of America was certified to represent the 17 employees. The IWA failed in its bid to have a contract imposed and on May 19, 1978, HEU replaced the IWA with a certification of its own.

Unable to achieve a settlement by negotiations, mediation, arbitration or through an industrial inquiry commission, the union made two attempts to have the LRB impose one.

The first application to former Labour Minister Allan Williams last March was rejected, but another application to present Labour Minister Jack Heinrich Dec. 5 was referred to the LRB for investigation and decision.

Munroe called a hearing at Nelson May 13. His decision came just 10 days later.



"Regardless of the government's program, they can't do anything for your type of inflation!" Page 8

There are free riders on road to unionism

He stands there on the side of the road, his hoisted thumb telling you he wants a lift.

Depending on his attitude, he may have a lot in common with some union members you know.

He may, for instance, be telling you that if you provide the gas, the oil, foot the bills for the car repairs and the insurance, he'll be perfectly content to ride with you.

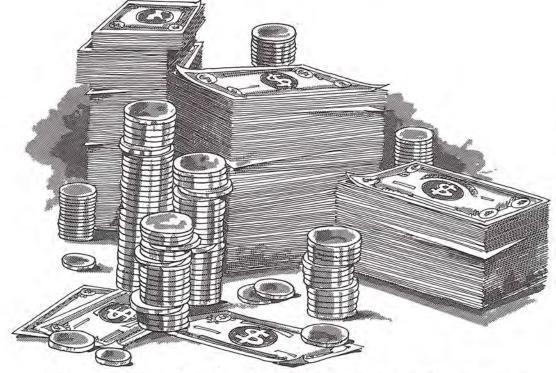
And there is one other point in this unspoken agreement: any accident you have is also your responsibility - for his part, he'll simply sue you for damages.

How many union members do you know who are happy to let you get something for them? Who are quite willing to let you serve on committees? Who count on you to study the collective agreement and know what it is all about, so that they can tap your knowledge when the need arises? Who seem to say: "You keep a firm hand on the wheel — I'll go along for the ride."?

Some of us will realize we don't have to look far to find the

union free-rider — no farther than the mirror.

If it's your thumb you recognize in the mirror try uncurling the other four fingers. That way you can produce a helping "Casuals on staff Jan. 1, 1980 don't qualify and we don't agree that this is fair or reasonable'



"Regular employees retiring as late as Dec. 31, 1979 are out of luck"

Sum total of this lump sum is lump in throat for some

For some, it is a bonanza of

But for others, it is the bitter fruit of an unfair decision.

That, at least, is how union officials view the lump-sum payment factor included in the recent collective agreement.

The deadline for payments ranging as high as \$2,400 was May 31, but it was unclear at presstime if it was going to be

The negotiations of the E. R. Peck mediation board provided a portability factor to protect employees who were mobile during the five year period covered by the payments. But it excluded casual employees, regardless of how much work time they may have compiled inthat period. And it cut off any regular employees who retired before last Jan. 1.

The lump-sum payment was awarded because of the loss in the agreement of job evaluation, standardization and pay rate adjustment requests.

It applies only to regular fulltime and regular part-time employees who were on staff Jan. 1, 1980 and provides \$50 a month for each month worked in 1979, as well as \$37.50 for each month worked through 1975, 1976, 1977 and 1978. The payments are proportionately smaller for incomplete work months.

The portability applies to those who moved from one hospital to another during that period - as long as the break between hospital jobs didn't exceed three months.

The cost of the lump sum payments has been estimated to exceed \$25 million.

"Casual employees on staff at January 1, 1980 do not qualify for lump sum payments for regular service earned from January 1, 1975 to December 31, 1979. We do not agree that this is fair or reasonable," says HEU Secretary-Business Manager, J. D. Gerow.

It was the reason he gave earlier when, as a member of the Peck Arbitration Board, he dissented from the majority decision that cut off casuals from qualifying for payments for any regular wages.

Although the lump sum payments were the product of mediation under the E. R. Peck tribunal, the question of entitlement for casuals on staff at January 1, 1980 who have regular service from 1975 to 1979 required an arbitration by Peck.

Union's education program Getting set for years ahead

Someone in the union dubbed it "1980: The Year of Educa-

An unofficial but welcome distinction that is inaccurate in only one respect: 1980 marks only the beginning of an energetic and thorough labour education program HEU is operating in conjunction with Capilano College.

With the initial courses completed, plans are being set for an ongoing program. The time between enrollment and completion will be two year

As explained in the last edition of the Guardian, most of the modern techniques of communications have been brought into play in a "teaching the teachers" program to prepare staff representatives for the job of conducting seminars for shop stewards and officers across the province.

Figures compiled by Ray McCready, HEU's Director of Membership Services, show that 288 members were enrolled for seminars that began in Victoria Feb. 11 and wound up at Smithers April 22. Several others participated in supplementary courses conducted by Capilano College from March 6 to May 22 - courses covering such fields as economics, the B.C. Labour Code, labour history and communication skills.

The regular seminars dealt mainly with the roles of the shop steward and unit officers.

Two groups - one made up

of 228 persons and the other to contain 150 to 200 — will be working their way through the extensive ongoing program that has been set at the moment for this year and next.

One group has already studied the various procedures that come into play for stewards and officers. The rest of the program for both groups begins in September.

Also planned are seminars on convention procedures and workshops dealing with communication skills, public speaking and parliamentary proced-

Everything from history to public speaking on list

A quick look at the many avenues of the ongoing education

Contract Analysis (beginning in September): History and philosophy of contract provisions; interpretation and application of HEU contracts.

Statutory Provision Analysis (beginning in spring, 1981): History and philosophy of such statutory provisions as the Labour Code, essential services legislation, hours of work, truck act, wage acts, safety, WCB, UIC, social-human relations; interpretation and application of legislation.

Public Speaking (beginning mid-year 1981): Communication skills, parliamentary procedure.

Trade Union History (date to be set): Emphasis on HEU's role in health care and public sectors; growth of trade unions in B.C. and Canada.

The contract analysis and public speaking seminars are being conducted by HEU, the statutory provision seminar and trade union history seminars by Capilano College with input by HEU.

Already completed by Group A (288 members) was the procedures course which includes the examination of grievance procedures, instruction in advocacy techniques, assertiveness training, basic parliamentary procedure, and study of unit minute and financial record keeping.

Group B (150 to 200 officers and stewards) moves into the

program in the fall.

A continuation of training for staff representatives will take the form of one-day seminars on the last Monday of each month





Royal Jubilee delegates prior to the wear and tear of the convention.



At least the pain won't be in the bank book

That unexpected trip to the hospital emergency ward in some other province isn't going to be quite as painful now for the roving British Columbian.

The physical concern will remain, but the worry about costs has been removed by an extension of B.C. health benefits that became effective April 1.

Your B.C. coverage now takes care of emergency department visits and day-care surgery. Until April, the onus was on you. If you were unfortunate enough to require such service in some other part of Canada you had to dip into your own pocket — or someone else's.

The idea behind the change is to work toward making hospital benefits more portable across Canada, something that should reduce the personal hardship factor

Day-care surgery includes all operating room services, with the stipulation that the patient is able to leave hospital within several hours of treatment.

The new out-of-province benefits are available on the same basis as treatment within B.C. It means you pay the normal \$2 fee for each visit.

The coverage is in addition to that already available for inpatient care outside B.C.

If you're on the button, they throw the book at you

(This new twist to union and management strategy appeared in the May 25 edition of the Daily Colonist in Victoria).

The telephone repairman enters the home wearing a bright yellow button bearing the message:

We give Super Service — TWU.

He backs it up with painstaking care to see that everything is done just right. It may, says a member of the Telecommunications Union, mean spending as much time satisfying one customer as would normally be spent on two or three.

No one will admit that this is a slick new form of job action, or a new version of the old-fashioned slowdown. They simply smile and say that they haven't heard any complaints

from B.C. Telephone Co., the employer in this case.

The TWU and B.C. Tel have gone through negotiations, have met with conciliation officers and a conciliation commissioner without reaching accord on a contract to replace the one that expired Dec. 31.

A month-and-a-half ago the Super Service buttons and great new service came into play and, according to the union, was followed a weekand-a-half later by little B.C. Tel booklets entitled Questions and Answers, that were handed out to employees.

"The booklet cries poverty on the part of the company," the TWU's John Hoffmeiste told laughing delegates at a Victoria Labour Council meeting.

Hoffmeister, president of the clerical local in Victoria, said just about everyone realized

B.C. Tel is far from being in desperate financial straits.

The union, representing 10,000 members in B.C., says it isn't willing to accept a total cost package of seven percent in the first year of a two-year agreement and eight percent in the second. It wants, it says, something that will keep pace with inflation.

Meanwhile, the button and booklet battle goes on.

And, as the premier was saying

The words of Premier Bill Bennett may never move mountains or open up the skies. But there are times . . .



Well, let's just let the press reports tell it.

The premier, they say, was speaking at the official opening of B.C. Hydro's \$20 million research centre in Surrey May 24 when strange things happened.

He claimed people should take a more positive approach to Hydro. It was easy, he said, to criticize the crown corporation.

"But I'd like to hear the screams and cries the day the light switch doesn't work," he said.

As he uttered the words his microphone went dead and his speech was put on hold while the sound system was fixed.



"TV is definitely an evil influence when 36 out of a class of 40 spell 'relief' R-O-L-A---" Page 10



Heavy on the Light side

Much has been said and written about Premier Bill Bennett's refusal to answer questions in the Legislature. Some people say it is plain bad manners for him to swing around in his chair and turn his back on the opposition when a question is being put to him. However, anyone familiar with the fine art of survival will tell you it is easier to take an embarrassing query in the back of the neck than between the

The Bennett case has aroused more than public interest. A group of non-partisan psychologists suggests that since there is no longer any real communication between the government and opposition, the legislative chamber be effectively split into two rooms. Under the group's proposal, a concrete wall would be built down the middle of the already badly divided house.

On one side of the wall the opposition could talk to itself, much as it has already been doing. On the other side the government could enact, without the delay of debate, the legislation it was going to enact anyway.

Because frustration must have some outlet, three small vents would be opened in the wall by timelock for a threeminute period each day to allow both sides to fire a short burst of insults. The openings would not be large enough to allow the penetration of weapons or passage of rocks.

The plan of the psychologists would greatly reduce the time necessary for sittings. Indeed, it is believed an entire session of the Legislature could be completed in a week of one-hour-a-day sittings. The chamber would then be available most of the year for more worthwhile functions such as dancing, drinking, matchmaking and governmentsupervised gambling.

The group of psychologists making this proposal is not to be taken lightly since there is evidence that 75 percent of its members have been declared sane. The same cannot be said about the politicians.

Meanwhile, Dr. L. Pennington Swirp has been attacking the problem in a more direct fashion. Swirp, generally accepted as the world's leading authority of human behavior patterns, has been secretly tapping the mind of the premier during the early morning hours when the subject can sometimes be found asleep.

Gaining entry to the Bennett suite with a special key, the good doctor releases a truth serum he has concocted in gas form. He waits five minutes and then begins asking

Even with this weapon, so to speak, at my disposal, I dare not ask direct questions. The political mind has an enormous defence mechanism. One must be devious," Swirp was saying the other day. "For instance, unlike the opposition, I do not ask him what he might know about Social Credit's dirty tricks campaign.

Instead, Swirp puts the question this way: "Mr. Premier, how is your tennis these days?"

To which the premier usually answers: "Not very good, I'm afraid. My arm aches almost constantly from restraining people who want to write bogus letters to the editor."

A couple of other examples:

"What can you tell me about the new rubber ducky in your

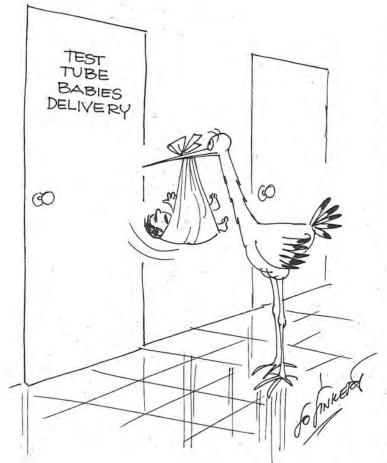
"Actually, it's a rubber American eagle — a model of the ship that will eventually carry tourists between Victoria and Seattle. It was presented to me by a fine group of men who have adopted the slogan: 'Progress Before People.' They spell progress with dollar signs in place of the letter S."

"Have you read any good books lately?"

"Yes, a party bank book. It's a mystery thriller that should make it onto the fiction best seller list some day."

Dr. Swirp says he would complete his study if only someone would let him out of his newly-fitted restraining jacket. He has one other objective.

"I want a rubber ducky."



On the Personal Side

(The first item in this roundup of unit happenings is being run here exactly as it was written by Ocean Falls Unit Chairperson Bertha Owen. We believe it is something that can be best expressed by those personally involved. Bertha has given it the appropriate title: Ocean Falls General Hospital Staff Says Goodbye).

On Sunday evening, April 13th, the staff of the Ocean Falls General Hospital had a final get-together. Final, because the hospital will close June 30th (since changed to June 8) due to the closing of the Ocean Falls Corporation paper mill.

Attendance was 100 percent for this buffet meal held in the board room at the hospital. Each staff member received a picture of the hospital autographed by everyone as a memento of the time spent here. For some this is as much as 10 years.

Administrator months, Mrs. Shirley Snell entered into the spirit of the party by giving a witty resume of each employee, some of whom responded with an antidote of their own.

A good deal of laughing, good food and good drink went into making this farewell party a success.

There were no tears; but as June grows nearer, I'm sure the kleenex boxes will grow emptier. It has been a pleasant and friendly place to work.

Mrs. Joan Martin of the Ocean Falls Unit received word April 5 that she has earned her Class "A" first-aid certificate.

Fellow workers say Joan, a nurse aide, should be able to put the certificate to good work in getting a job elsewhere, now that the hospital is a thing of the past. Remaining unit members have wished her the best of luck.

Two popular members of the St. Vincent's Hospital Unit have been the special guests at tea parties within the hospital and dinners arranged by their coworkers to mark their retire-

Kay Fast, a ward aide, had been at the hospital since 1955.

In addition to her duties at the hospital she has - with her sister - spent much time caring for her elderly mother. She is also active in church work, particularly in connection with the children's choir at her

The second woman, Annie Monoghan, found herself a widow with a family to feed when she went to work at the hospital in 1965. Through her efforts she was able to put the youngest of her children - a girl and a boy - through school.

Annie had never entered the job market before coming to



Evelyn Rich

Vancouver from Scotland with her family of four. This, however, proved no handicap. She did well enough in the Housekeeping Department to be made acting supervisor on holidays and weekends during the past few years.

Fellow employees say both women are going to be sadly missed.

After 33 years on the job, Lillian Quarrie plans to follow her retirement from Mater Misericordiae Hospital with a little travelling.

Lillian worked as a Registered Nurse from 1947 until December, 1969, when she moved into the Medical Records Department as a stenographer.

From 1973 until 1977 (inclusive), she served as secretary of the Rossland Unit of

She has also been active with the Girl Guides movement.

Another person with travel plans following her retirement is Irene Kennedy, who had worked as a Housekeeper at G. R. Baker Memorial Hospital since 1973. Irene, a member of the Quesnel Unit, plans to spend about a year in Australia and possibly some more time in Europe.

It's going to be a little fishing, rockhounding and just plain relaxation from now on for Evelyn Rich who has retired after more than 24 years in the Housekeeping Department of Kootenay Lake District Hos-

Evelyn has served as a warden and trustee with the Kootenay Lake Unit. Fellow members say she was the type of person to turn to for help whenever there was a problem.

Rose and Shaughnessy

Unhappy with large award, long-term employers appeal

The most significant move. yet to raise the inadequate living level of employees in the long-term care field has run into a legal delay.

Shaughnessy Manor in Vancouver and Rose Manor in Victoria have challenged a binding arbitration award that more than doubles the wages of many of the staff in the two facilities, as well as adding greatly to fringe benefits. Employers at the two non-profit establishments are appealing the award on two fronts - the Labour Relations Board and the B.C. Supreme Court.

The award, brought down by an arbitration board headed by John Sherlock, was more farreaching than it appeared on the surface. Four long-term care homes in the interior agreed beforehand to adopt the same terms. They are Dr. F. W. Green Memorial Home (Cranbrook), Kimberley Special Care Home (Kimberley), Sunnybank Retirement Home (Oliver) and Omenica Lodge (Vanderhoof).

It had been a long wait for employees of Shaughnessy Manor and Rose Manor, many of whom were earning barely more than the minimum wage in spite of the responsibilities of their jobs.

Initial reports that the wage increases would be in the neighborhood of 60 percent failed to take into account all of the factors. Even so, there was a slight gasp of surprise from some sectors of the community which, according to the union, were not aware of the need for a long overdue catchup.

Examples of wages that more than doubled:

-Housekeeping aides, earning \$520 to \$550 a month early in 1980 would move up to \$1,233 by Aug. 1 and \$1,332 on Aug. 1, 1981.

The top-paid employee at Rose Manor (maintenance) would see the \$750 a month he earned at the beginning of the year swell to \$1,700 by Aug. 1 and \$1,977 on Aug. 1, 1981.

Even with these seemingly enormous increases, the employees mentioned would still remain slightly behind their counterparts in the general hospitals.

Following the announcement of the Sherlock award, the union hailed it as a progressive step that would prevent employers from subsidizing their institutions through a form of low wages.

In one HEU official's view, the wage structure sadly reflected the attitude of both government and community toward the older people who reside in such long-term care homes.

"It's been the same as saying: 'those employees don't need higher wages. After all, they're only taking care of old people,"" he said.

"What this attitude overlooks is the fact it is the older people who made these facilities available in the first place."

The six homes involved directly and indirectly in the Rose Manor and Shaughnessy Manor award are just part of the domino effect that appears to be evolving for long-term care employees.

For instance, an arbitration award that was being awaited for recently-certified Yucalta Lodge at Campbell River is to be picked up by Nanaimo Travellers Lodge, Nanaimo, and MSA Manor at Abbotsford.

Chilliwack Intermediate Care Home is the subject of another arbitration.

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ELECTIONS

Do you know the chairperson of your Unit or have you ever wondered if the Secretary-Treasurer you met at the last Conference was re-elected? Well, the answers to your questions are here.

Unit	Chairperson	Sec-Treasurer	Unit	Chairperson	Sec-Treasurer
Como Lake	B. Roberts	S. Bentley	Sechelt	P. Dubuad	
Courtenay	S. Bunn	J. Fairbanks	Smithers	B. Dybwad D. Schrader	S. Mills
Cranbrook	J. Cavelle	B. Hunt	Sparwood	C. Elliott	J. Clark
F. W. Green	S. Sutherland	M. Turner	Squamish	M. Fors	M. Plessis T. Pearson
Creston	R. Toews	S. Griffith	Summerland	M. Grohs	E. Austen
Cumberland	C. Davis	J. MacDonald	Florence	W. Grons	E. Austen
Dawson Creek	O. Steinke	M. Costaganna	Nightingale	M. McKee	Y. Krasey
Delta	K. Robie	E. Vaupotic	Surrey	R. Greenwood	H. Burritt
Ladner	N. Barclay	S. Barnett	Tahsis	M. Wilson	D. Auger
Duncan	M. Gutensohn	L. Wolford	Terrace	M. Dilly	C. Sinclair
Enderby Fernie	R. Hart	M. Woods	Tofino	M. Sloman	J. Bond
Fort Nelson	M. Koran L. McLean	D. Reiter	Columbia View	R. Folvik	L. Graves
Fort St. James	K. Wilkinson	P. Herberg	Trail	J. Bradbury	A. McCumber
Fort St. John	A. Dorval	B. Ramos G. Murray	Arthritis Society	M. Gipp	M. Prodromidis
Golden	M. Spaens	A. Lucas	Red Cross	M. Gillies	H. Bremer
Grand Forks	A. MacKay	Y. Taylor	Cancer Control	J. Brydle	H. McArthur
Hope	C. Murphy	L. Peters	Children's	E. Aldridge	B. Spurr
Invermere	J. Pocha	A. Camenzind	Crofton Manor	R. Biring	
Mount Paul	C. Sidney	W. Docza	Dogwood Lodges	E. Snary	P. Ficken
Overlander	J. Groves	N. E. White	Edith Cavell		F. Datwin
Ponderosa	F. Nielsen	G. Orabko	G. F. Strong	J. Chatterton	W. Hamilton
Kamloops	D. Groves	H. Theobald	Grace	D. Kozak	T. Pendlebury
Thrupp Manor	D. Lotzien	E. Kellog	Holy Family	P. Colter	J. Elsasser
Kaslo	S. Leathwood	C. Allain	Kensington Louis Brier	T. Moimoi	N. Husain
Crossroads	R. Waller	S. Colburn	Mount St. Joseph	C. de Guzman	M. Herczeg
Kelowna	H. Burnell	A. Merlo	Normandy	I. Dumas M. Poyser	M. Barrington
Sun Valley	M. Wengrowich	Children and Children and Children	Shaughnessy	C. Weisner	S. Mishra M. Aitken
Kimberley	J. Wilkinson	J. Broadhurst	Shaughnessy	C. Weishei	w. Anken
The Pines	S. Egge	N. McArthur	Manor	D. Jones	Y. Bencivenga
Kitimat	M. Brandt	S. Verde	Southpines	P. Singh	G. Silveo
Ladysmith	B. Dyer	J. Crawford	St. Paul's	R. Standell	M. Ganczewski
Langley	L. Zeglen	E. Anderson	St. Vincent's	S. Wilkinson	B. Moore
Lillooet	T. Meir	O. Priddy	Sunnyhill	L. Ballati	V. Hudson
Lytton	S. Horning	P. Van Dyke	Vancouver General	G. Meagher	G. Parrish
Mackenzie	M. Coleman	L. Hemstad	Central Park	E. Moran	C. Chan
Crestwood	M. Villa	J. Gunther	Omenica	H. Stevens	C. Martins
Maple Ridge	W. Vioen	A. Jones	Noric House	B. Jones	J. Haller
Parkridge	B. Kuxhouse	L. Terris	Vernon	D. Lenz	K. Bronson
M.S.A. Manor	J. Kleven	B. Srigley	Aberdeen	H. McFadden	C. Campbell
Merritt Mission	B. Grund P. Stefanek	H. Geertsema	Capital Region	I. Hargreaves	G. Bliss
Nakusp		R. Beaulieu	Glengarry	D. Worth	L. Spicer
Nanaimo	K. Hamling A. Woods	A. Witt E. Henneberry	Gorge	C. Wormald	H. Williams
Travellers Lodge	L. Wilton	E. Hermeberry	Mount St. Mary	J. Evans	E. Meyer
Kootenay Lake	A. Fukala	L. Bonderoff	Mount Tolmie Queen Alexandra	J. Dawson	M. Mus-Rath
Medical Clinic	M. Lewis	L. Bonderon	Rose Manor	M. Giles	M. Schmit
Mount St. Frances	N. Logan	A. Phillips	Jubilee	J. Drinkrow	D. Wilcox
Willowhaven	E. Bozak	G. Bonderud	Priory	N. Cardy	P. Shiplack
Queen's Park	P. MacLeod	L. Obrecht	Victoria General	B. Buyert	K. Cardin
Royal Columbian	B. Myggland	W. Hasselaar	Altamont	D. Lowe J. Wright	V. Kirk
St. Mary's	A. Campbell	E. Vopni	Inglewood	P. Morris	P. Alejan J. Ralston
Kiwanis	C. Sanders	E. Armstrong	White Rock	D. Holloway	J. Berry
Lions Gate	C. Gardner	L. Woitas	Cariboo Lodge	J. Boomer	L. Connolly
Ocean Falls		B. Owen	Williams Lake	J. Holland	N. Johansen
Oliver	M. Meysen	M. Jones	M.S.A.	S. Polak	B. Jones
Sunnybank	G. Skuce	H. Clarke	Menno	I. Calbick	K. Dyck
100 Mile House	J. Dick	C. Chadsey	Armstrong	M. Borshowa	I. Domstad
Penticton		404	Ashcroft	M. Beebe	R. Balaski
Ret. Service	S. McMillan	D. Gouchie	Bella Coola		M. Svisdahl
Penticton	D. Jeffery	V. Inkster	Burnaby	M. Smith	G. Berry
Port Alberni	L. Rodgers	W. Girbav	Fellburn	D. Waite	M. Christensen
Port Hardy	A. Pellerin	G. Begin	Finnish Manor	L. Soderberg	J. Steiner
Port McNeill	T. Kerr	J. Serafini	New Vista	L. Rogers	S. Baker
Pouce Coupe	F. Arndt	D. Dedman	Willingdon	K. Riar	A. Atick
Olive Devaud	N. Dyble	O. Head	Burns Lake	M. Claassens	M. Wilson
Powell River Prince George	J. J. Johnston	A. Johnston	Campbell River	E. Nylander	M. Kirby
Prince George Princeton	A. Kozyniak B. Noel	D. Erickson E. Bellmond	Yucalta Castlegar	J. Connors	J. Gustafson
Quesnel	L. Hodgkinson	L. LaLonde		B. Uchida	L. Hartson
Revelstoke	J. Madlung	N. Martin	Raspberry Lodge Chemainus	S. Benton	D Danner
Richmond	H. Morton	P. Dempsey	Chetwynd	B. O'Dell E. Odishaw	P. Penner
Rossland	M. McKerracher	S. LaPlante	Chilliwack	V. Jones	J. Mullin
Saanich	C. MacMillan	J. Ashmore	Chilliwack Int. Care	P. Ellis	C. Schulties S. Adams
Salmon Arm	S Bonthius	R Green	Clearwater	F Broda	J. Soburook

R. Green

Clearwater

E. Breda

S. Adams J. Schurack

Salmon Arm

S. Bonthius