

THE HOSPITAL GUARDIAN

HOSPITAL EMPLOYEES' UNION 180

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No. 2

H.E.U. AT SCENE

EDMONTON STRIKE STUDIED



Hatless and without umbrella, a rather wet Jack Gerow joins pickets to bring H.E.U. support to striking Edmonton hospital workers.

68-PAGE DOCUMENT

NEW LOOK IN LABOR LAWS PROPOSED BY H.E.U.

Will the B.C. workers of the future be protected by special rights? Will they be harder to fire, yet easier to organize? Will they have witnessed advancement in the field of human dignity through freedom of dress and appearance, through equality of the sexes? Will they at last have a say in management decision-making?

For anyone reading the latest brief of the Hospital Employees' Union, these are among the important questions that come to mind.

In its carefully-prepared 68-page brief to Labor Minister William King and his three special Advisors, the Union stresses the need for much more protection where the worker is concerned.

The brief calls for an overhaul of labor legislation and a restructuring of the Labor Relations Board. The objective is a full-time nine-member board based in Vancouver. It would have four divisions to deal with various sectors of industry.

There is an interesting proposal for "industrial democracy", a system under which the employee would have some say at management level.

The union also warns of the danger the volunteer worker poses for the regular employee, particularly in the hospital industry.

In addition, it seeks more maternity protection, the use of a "trouble-shooter" who would be a sort of super mediator-conciliator, plus a law that would protect the striker from wage garnishee or property seizure.

These are just some of the more exciting features in a brief that grew out of the Labor Minister's willingness to listen to a variety of opinion before making changes in the labor laws of the province. Detailed stories can be found on pages six, seven and eight.

There was a lesson to be found on this rain-soaked Edmonton street.

Out there in front of the big city-owned Royal Alexandra Hospital some very wet pickets spelled it out: hospital workers, despite the nature of their jobs can be forced into an official strike position.

Perhaps officialdom had thought it would never happen; but here they were, heads down in the driving rain, collars up, hair plastered to faces and foreheads — a determined and high-spirited group of men and women carrying pickets signs announcing that they were indeed on strike.

Involved were 1,030 members of Local 41 of the Canadian Union of Public Employees (CUPE), fighting to get the bottom end of the pay scale up above the starvation level, and to win something resembling a decent work week.

(Settlement was reached during the last weekend in July with a gradual return to work planned for the end of the month and the beginning of August. Terms were somewhat better than what had been offered. See Page 10.)

While this was an isolated incident — a strike confined to one major hospital in one major city—it provided the necessary warning signs: similar strikes can be expected elsewhere when the conditions are bad enough. And sometimes they are.

Of Local Interest

In B.C., the impact would undoubtedly be much more severe, considering that employees in more than 70 hospitals are members of the Hospital Employees' Union. The Union has never had to call a strike, but it is a fact which is mentioned cautiously as it prepares for a vital round of contract talks this year.

The membership is convinced it has to make up for lost time as a result of the 6.25 per cent wage increase limit imposed two years ago by the former Social Credit Government. This time it is going after \$1 an hour more over two years, or 25 per cent — whichever is greater. It is also ready to make a real stand for equal opportunities for women members.

(Continued on Page 10)

SUPERMARKET STING

INFLATION CAN (BEE) HONEY OF A THING

It was late July when the Victoria housewife emerged from the supermarket in what appeared to be a state of mild shock.

"Honey," she muttered.

Three men turned hopefully in their tracks.

But, of course, she wasn't addressing any of them. Her fascination involved another kind of honey.

"Sixty-eight cents for this ordinary little pot of honey," she said. "Incredible. It's doubled in price in the last five years."

She wondered what excuse they would give for the latest increase. Could there have been a labor problem with the bees?

"All I know," she said, "is that bees or no bees, somebody is getting stung — and that somebody is the customer."

Her words were uttered at a time when food prices appeared to be taking another wild leap toward outer space.

There was a threat (what else can you call it?) that bacon would soon cost an additional 50 cents a pound. Soups were up one and two cents a can in some instances, a big container of cottage cheese had climbed six cents to 75 cents, the common loaf of bread was 44 cents — 45 cents in some places. And on it goes . . .

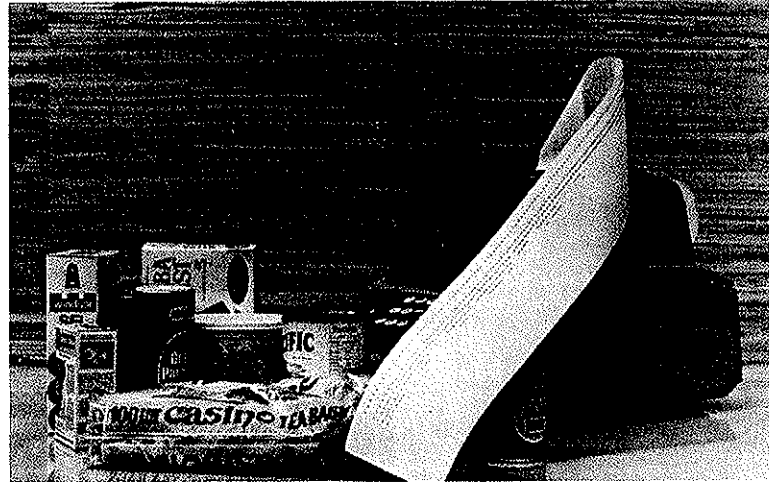
These may well be the fires of inflation, but there are those who believe the ensuing smoke is hiding a surprising truth — that the Canadian economy may be slowing down.

This, at least, is how Time Magazine reports the views of a group of economists. They think it is slowing down and that some stimulus may be needed before the end of the year — perhaps in the form of lower interest rates or tax cuts.

The gross national product was up 4.4 per cent for the first three months of this year — 2.9 per cent of this in real growth and the rest in heightened price inflation.

According to Time, prices in Canada

... Where
does
it
all
end?



rose in May by .7 per cent, an increase of 7.3 per cent from May, 1972.

More updated figures from Statistics Canada in Vancouver show a bigger jump in June — up .9 per cent from May and 8.1 per cent from June of 1972.

Despite our somewhat higher than normal cost of living on the West Coast (the price tag for Paradise?) the rate of increase has been somewhat slower than elsewhere.

Statistics Canada uses only major cities as a guide and points out that the cost of living rise in Vancouver in June was .6 per cent, up 6.6 per cent over 12 months.

It's more than two years since figures were released concerning the comparative cost of living across the Nation. Another such survey by Statistics Canada should present further figures in the near future.

In the meantime, this is the way things looked in May, 1971, and the comparison may not have really changed much.

Statistics Canada said the cost is based simply on eating at home (the awful grocery bill) and that Winnipeg is used as a medium with 100 points. You can

judge where the other cities stand.

Vancouver, for instance, was at 107 — worse than anything this side of Newfoundland and Prince Edward Island, where the rate was 109. The Prairies, in general, bounced around above the 100 mark, while Toronto and Montreal registered the low with 99 each.

None of which explains the situation as well as the lady who thinks she has been stung by the honey interests and not the bees.

Or, by the same token, you might compare the workers with the bees when you consider this statement by Eric Kierans, the economic consultant who is the former Quebec and federal cabinet minister:

"Union leaders know that you can't blame them. They have been extremely responsible the last couple of years, and you still have this terrible rate of inflation."

What he meant, really, was that prices continue to soar despite an obvious restraint in wage demands. The working man isn't the real culprit, as he so often has been pictured.

HEARINGS LEAD TO OKANAGAN PAY ADJUSTMENTS

Wage adjustments ranging up to \$195.25 a month are among pay rate awards made by Arbitrator D. R. Blair as a result of hearings held at Vernon to deal with the situation at Okanagan hospitals.

A Practical Nurse working in the Operating Room at Penticton Regional Hospital was granted an increase of \$144.25 a month. This is consistent with recent successes of the Union to defeat wage discrimination and bring Practical Nurses up to the \$707 monthly pay level of Orderlies. A similar request on behalf of a

Practical Nurse in the Extended Care section of the same hospital was rejected.

Following are categories where improvement was registered:

Kelowna General Hospital

Senior Clerk: \$77.50; new title of Assistant Storekeeper and Purchasing Clerk recommended. Chef: \$39.50. Electrician: \$163.75. Plumber: \$195.25. Carpenter: \$152.50. (Engineers' Anomaly settled "out of court" on basis of Creston award — \$32.)

Penticton Regional Hospital

Practical Nurse (Operating Room): \$144.25.

Vernon Jubilee Hospital

Stores Assistants (3): \$7.50 a month for 1972, \$8 a month for 1973. (Engineers' anomaly settled "out of court" on basis of Creston award — \$32.)

The awards, with the exception of that of the Stores Assistant at Vernon, are retroactive to the beginning of the year.

HEAVY *on the* LIGHT SIDE

Meet Professor Q. Nathan Bodwinkle, who, in one way or another, will be contributing to this column from time to time.

Prof. Bodwinkle is a respected educator of vast experience who will be bringing a wealth of knowledge to these pages. His most recent undertaking was at the University of Urban Ucluelet (U.U.U.) where he conducted an 18-month study on the sex life of the sea worm and its relationship to the contentment of villagers.

The professor's services have long been in demand. He is perhaps best known for a report entitled *Bigger and Better Bureaucracy*. It proved beyond doubt that, given time, any government worth its salt could create enough special commissions, committees and study groups to put an end to the unemployment problem.

"By applying the best bureaucratic logic," the professor wrote, "a government could — and no doubt would — put so many people to work on commissions and committees there would be few left idle. The opportunity is unlimited. For instance, we can even have commissions to study and interpret former commission reports which, until now, have defied all attempts to be understood."

"The best objective as I see it," the professor continued, "is to find reason to form one or two new commissions or committees a week. The manpower demand alone will eventually take people out of the poolrooms and off the streets. They will have no time for mischief — other than official government mischief."

In the end Prof. Bodwinkle sees the need for one giant commission with perhaps 75 members who would, in turn, have a squad of 12 investigators at their disposal. This would be the Commission to Keep Track of All Other Commissions.

"With commissions and committees popping up with such frequency and heading out in search of new horizons, some will no doubt disappear from time to time — not be heard from again, so to speak," says the professor. "One large commission could spend its time trying to trace them and in determining what, if anything, they have accomplished."

He feels it is important that there be an annual gathering of all commission and committee members. Where British Columbia is concerned, he suggests Empire Stadium in Vancouver be set aside for this purpose.

In his time, Prof. Bodwinkle has been at the centre of more than one controversy. His theory that Vancouver Island is an extension of Japan and, as such, should be cut loose and floated back to that country, brought overwhelming criticism — some of it from the Japanese.

He also came in for verbal abuse when it was reported he was recommending a rapid transit study for downtown Smithers. But the professor says this was all a mistake, that he was misunderstood.

"Actually I was talking about a rapid transient sometimes seen in downtown Smithers," he explained. "They called him Fast Freddy. I believe he was a friend of Quick Kitty from Kitimat."

Stay tuned for future pearls of wisdom from Prof. Q. Nathan Bodwinkle.

D.M.C.

EDITS PAPER

Victoria Newsman Joins Union Staff

After an absence of several months, the *Hospital Guardian* began rolling off the press again in June with a new man charting the course.

He is Don Collins, long-time newspaperman, who has joined the office staff of Local 180. Mr. Collins was appointed by the Provincial Executive to fill Job Posting No. 22, a position that combines the duties of staff representative with communications assignments.

In addition to putting out the *Guardian* on a regular basis and handling news releases and other writing assignments, he will be undertaking Unit servicing duties.

Mr. Collins has spent his entire working life on the staffs of various newspapers. His career has taken him from Toronto to Kirkland Lake, Owen Sound, Timmins and Kitchener in Ontario, and to Vancouver and Victoria in B.C. At one time or another he has served as general reporter, police reporter, legislative reporter, education reporter, labor reporter, rewrite man, sports writer, sports editor, feature writer and columnist.



DON COLLINS
... An Old Hand

He came to Local 180 from the *Victoria Colonist*, where he spent the greater part of his five-year stay as labor reporter.

As for personal data, he has passed that magic age where life is supposed to begin and says he is still waiting for the first sign that he is really alive. He has a weakness for Chinese food and chocolate milkshakes, although never at the same sitting.

Mr. Collins has a wife and two teenage children who "do a good job of running my life for me."

When he isn't at work he can usually be found at one minor sports event or another.

NASTY OLD GERMS SHOW THEIR BIAS

The terrible truth is out: we can't have equality of the sexes after all. Not as long as there are discriminating diseases.

Speakers at a Vancouver meeting of the Canadian Medical Association gave this partial picture of diseases that apparently have male or female preferences.

- Duodenal ulcers catch up to four times as many men as women; gastric

ulcers also favor men, but on a two-to-one basis.

- Hyperthyroidism (thyroid gland in neck produces too much of its hormone) is about eight times more common among women.

- About three times as many men fall victim to strokes.

- Spina bifida (birth defect involving deformity of spinal cord) is more apt to be found in female babies.

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LEFT BEHIND

SLICE OF PN PIE WANTED BY RNs

As someone said, it had to happen.

And now that the Union has won initial major pay rate victories for its Practical Nurses, the Registered Nurses of the province are out to recover lost ground.

The stunning fact for the RNs, who bargain through their own association, the Registered Nurses Association of B.C., is that members would earn less during the first year of work than the Practical Nurses.

The word from Victoria is that Registered Nurses there are going to push for a substantial increase that would give provincial members a 35 per cent differential over the Practical Nurse scale.

So far, the Union has had to work through separate arbitration hearings to win selected groups of Practical Nurses a \$144.25 a month hike and put them on an even scale with their male counterparts — the Orderlies. What it has added up to at this point is a sizable dent in the wall of sex discrimination.

The new scale for the Practical Nurses involved is \$707 a month. The current beginning salary for Registered Nurses in B.C. is \$685 a month. It would require a year on the job for an RN with three years' training to match the PN scale.

Like the Union, the RN Association intends to get down to contract bargaining with the B.C. Hospitals Association in the fall. The current agreement expires at the end of the year and Victoria RNs are adding the 35 per cent wage differential proposal to the resolutions to be considered for the bargaining sessions.

FARMERS SEEK HELP

An appeal has been made to H.E.U. Members to join in the national boycott of Kraftco Products.

In a letter to the Union, the Vancouver Area Boycott Kraft Committee says the action is being taken to support the National Farmers' Union.

"We hope that members of your organization will endorse and actively support the Kraft Boycott in expression of their solidarity with the Farmers' Union and of their dissatisfaction with the present corporate control of the food industry," the letter says.

In an accompanying letter, the National Farmers' Union says the Ontario farmers want some way to "democratically control the terms and conditions under which they produce and earn an income from the sale of their milk products." They have no recognized right of collective bargaining at the present time.

EDITORIAL

THE TRAGEDY OF ERROR

One does not criticize Motherhood without half expecting a lynch mob to show up at the door. Similarly, a Trade Union that steps on the toes of the Volunteer Worker can be prepared to have the toes of others aimed hurriedly at its lower spinal region.

The Hospital Employees' Union was fully aware of this when it pointed out faults in the concept of voluntary work in the hospital field. But it was something which had to be done regardless of how unpleasant the consequences.

The welfare of the full-time hospital worker was the prime consideration. For this reason the Union's brief to Labor Minister William King and his Advisors called for regulations which would prevent such volunteers as Candy Strippers and Ladies Auxiliaries from performing tasks normally attended to by hospital staff. There had been many instances of this and the brief made it clear the employer was to blame and not the volunteers, whose good intentions were never doubted.

Since it placed itself on the firing line, the Union is prepared to roll with the criticism that will come its way. Fair criticism, that is. Not the irresponsible brand that showed up in a Victoria newspaper.

The real trouble started with the lead sentence in the Victoria Daily Times report on the Union's brief. It read: "Volunteer work in hospitals should stop, the 11,300-member Hospital Employees' Union said today." The brief, of course, never said any such thing. What it did say was that volunteers should not be allowed to do work normally assigned regular staff.

Columnists on the Times and the other Victoria paper, the Daily Colonist, offered criticism obviously based on the error.

It is a sad mistake in that it means thousands of readers have been badly misinformed on a very sensitive point.

This is certainly not intended as a blanket criticism of newspapers. To a very great degree — probably greater than the public appreciates — the men and women who toil for newspapers do a commendable and honest job of interpreting the events of the world around them.

It has been the habit of some people to attack newspapers as some sort of ogres that manipulate the news to serve the purpose of the employer. To anyone who knows the inside workings of the business, this is just so much hogwash.

Yet, every once in a while there is an isolated case of irresponsibility that leaves a small stain on an otherwise splendid record.

This, unfortunately, has been one of those occasions.

CHILDREN'S HOSPITALS FAVORED BY EXPERTS

It is better to have central children's hospitals than pediatric wings in local hospitals.

This, at least, is the view of some international anaesthetists who specialize in the treatment of newborn babies.

However, during a panel discussion in Vancouver they said exclusive children's hospitals are not effective if they don't have a good transport system, something

which allows each ambulance to act as a mobile intensive care unit.

Because of requests from pediatricians, the Greater Vancouver Regional Hospital Board has initiated a study of the question of a new, central and consolidated children's hospital in Vancouver. Opposition to this concept is based on the argument that it is more convenient for the public to have facilities in regular hospitals.

SAD SONG OF SUMMER

OH, WHERE HAVE ALL THE NURSES GONE?

The warning had been sounded many times: provide proper training programs within the province or suffer the consequences of a severe nurse shortage.

As it turns out, it is those feared consequences that are being felt this summer.

The definite signs began to show up in May. Royal Inland Hospital said it was facing the possible closure of a ward if 11 nursing replacements couldn't be found.

Soon afterward it was disclosed that hospitals in the province had asked the Registered Nurses Association of B.C. to help find 225 more Nurses. The need in the Vancouver area alone was set at 115, with another 140 sought for hospitals throughout B.C.

By mid-June beds were being taken out of service at a rapid rate. Vancouver General Hospital, largest hospital in the province, announced 127 to 205 beds would be out of service at any one time until the end of the summer. In Victoria, Royal Jubilee Hospital — next in size to Vancouver General—announced 53 beds would be closed off for the summer, while Victoria General Hospital prepared to take the same step with 48.

Socreds Blamed

Although none of these measures had been announced at the time, the last edition of The Guardian went to press with a story blaming the former Social Credit Government for a Nurse shortage that spelled trouble. The H.E.U. said the Bennett Regime had failed to initiate proper training programs for development of Nurses within the province.

Figures from Ottawa told the sad tale: In 1971 only 44.5 per cent of B.C.'s Registered Nurses had graduated within the province. Most of the rest had come from across Canada, with 17.1 per cent recruited from outside the country.

It added up to a very bad rating for B.C., particularly in comparison to a province like Quebec where 74.5 per cent of the Nurses were trained right at home.

While they are concerned with the current summer shortage, some hospital spokesmen have been inclined to describe it as a usual state of affairs at this time of year, something that will right itself in the fall when the vacation period ebbs and Nurses who are mothers send their children back to school.

They say, also, there are generally more unoccupied beds in summer. For instance, Victoria General Hospital Director Jim Fair said the 48 beds closed off there represented more than 10 per cent of the hospital's capacity, but that during July and August there is usually a surplus of 40 to 50 beds.



Who will fill the cap?

Not everyone, of course, is so ready to don rose colored glasses to view a bad situation. Nan Kennedy, Executive Director of the RN Association is in a good position to know a crisis when she sees one. She agrees the shortage is seasonal, but adds what the others don't: it is more acute this year.

"We're not producing enough Registered Nurses in our own province," she said in a newspaper interview June 14. "We can't go on forever relying on RNs coming from other Canadian provinces and other countries."

There are those, however, who continue to do their hunting abroad. The lack of home product has made this a necessary evil.

Poor Hunting

St. Paul's Hospital was advertising in Ontario and Alberta newspapers for

Nurses. Prince George Regional Hospital sent a team to Britain. The result was 19 commitments. Trail Regional Hospital recruited two Nurses through the British Nurses Association.

It would appear that these hunting expeditions aren't really doing that much to cope with the worsening problem. When Royal Inland Hospital sent Director of Nursing Evangeline Dancer to Toronto on a hiring mission she came back with "one or two applications."

The answer, as the H.E.U. and others have said, lies in solid training programs at home. If the Ottawa figures showed the need in 1971, it has certainly been underlined by more updated provincial figures. Where RNs in B.C. are concerned, total new registrants for the year ending Feb. 28, 1973, was 1,434, of whom only 519 came from B.C. schools of nursing. All of which means the home-grown product for the year made up just a shade more than 36 per cent of the whole.

The H.E.U. has for some time pressed for establishment of a joint Hospital-Union Committee on Training and Skill Upgrading. The Union has been highly critical of the fact that under the Bennett Regime there was no initiative to establish employee training programs; that is, other than those urged by employee groups themselves.

It has also sought unpaid leave-of-absence for educational purposes.

Meanwhile, the new NDP Government has planted a seed of hope. Health Minister Dennis Cocke said in Victoria the Government is carrying out a program to increase the number of nursing educators with the hope of producing more and better-trained Nurses for B.C. Hospitals.

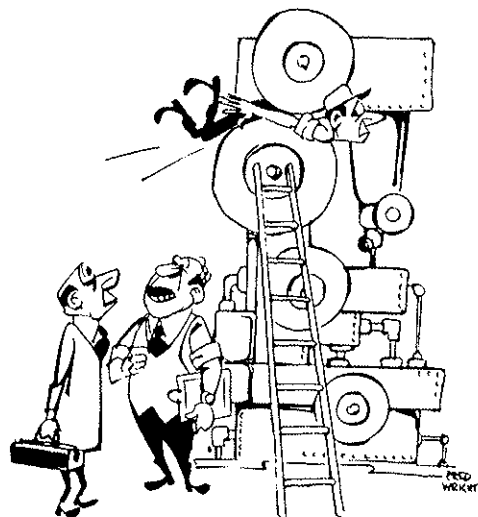
"We're trying as quickly as possible to get Nurses back into nursing and training and so on, but that's the best we can do," Mr. Cocke said in a published statement.

CHANGE REJECTED

Sole Arbitrator Professor R. G. Herbert has rejected an H.E.U. claim of wage discrimination at St. Mary's Hospital, Sechelt.

The Union had contended women Clerical Employees were underpaid because of wage practices that favor men. It sought a reclassification that would have meant more money.

Unlike the Practical Nurse - Orderly comparison, Professor Herbert found there were very few male jobs in the hospital industry with a content that could be compared to clerical work done by women.



"Now don't be nervous, Doc. You have to learn to climb a ladder sometime..."



If the Labor Relations Board is to properly meet the demands of today, it should grow in size, operate on a full-time basis and be stationed where the action is. It should also have four divisions to deal with various sectors of industry and be set up in a manner that would keep it free from charges of political patronage.

These are the key points in the H.E.U.'s proposed restructuring of the board.

In its brief to Labor Minister King and his Advisors, the union points out that the last government didn't give organized labor any say in the matter of labor representation on the board.

"In most other parts of Canada, enlightened Administrations consult labor on the subject of board representation," the brief says. "The net result in most cases, is satisfaction with board representation."

In preparing the brief, the Union made a province-by-province study which showed board membership is generally a part-time occupation. The boards seldom have more than five members. British Columbia's has six.

Some interesting differences are outlined in the brief. For instance, the Labor Relations Act, has nothing to say about the length of terms to be served by members in B.C. In other jurisdictions terms

range from two years to four, seven and 10, and in some cases are considered permanent.

In Saskatchewan, Manitoba and Newfoundland, a member is not allowed to deal with any matter in which he (or she) might have an "undue interest." In Ontario, New Brunswick and Nova Scotia, the boards have special divisions to deal with matters concerning the construction industry.

Because of its size the Ontario Board provides a departure from the usual. Made up of five management representatives, five from labor and eight chairmen, it operates on a daily basis in various divisions. The daily sittings of three-man panels include one full-time salaried member. Labor representatives are appointed through the Ontario Federation of Labor.

The H.E.U. has recommended in its brief that the B.C. Board be restructured to include a chairman and eight members representing four sectors of industry.

One reason advanced for this is that the different industries face problems that require specific solutions.

"It would also lessen the possibility of members exercising influence in matters



Labor Minister King

—B.C. Government Photo

BRIEF SUGGESTS

INDUSTRIAL DEMOCRACY: A VOICE FOR ALL

There is a decision to be made at the management level.

The Vice-President puts on his thinking cap, then calls in his general manager and others from the "Brass Brigade."

Are they ready now to make a ruling that will have an effect on the life of their plant?

Not quite. Joe Worker and Betty Worker down there on the assembly line haven't been consulted yet. Their advice must be weighed before any official move can be made.

To some, such a scene would seem a little far-fetched. But, with some variation, it is what the H.E.U. feels is an important need for the real life drama of B.C. industry.

In its Labor Brief, the Union advocates a form of "industrial democracy," which would allow employees to participate in management decision-making.

"It is a fallacy to assume that an employee's welfare is better served when left in the hands of the employer; that he is not as well off when he or his Union participate in decision-making," the brief says.

"There are numerous advantages to joint participation. This can be accomplished while leaving leadership, direction and final decision-making vested

with management."

Noting that employee involvement in management policy is a practice to be found in industrialized countries of Western Europe, the Union declares:

"Democracy in the workplace, as the concept has been called, is a harmonizing factor and a means to foster industrial peace. Its proponents are trade union leaders who believe that unions must move on from their concern for material needs to an equal concern for human dignity and personal growth of

workers."

The brief calls for legislation which would direct that "representatives of the work force participate in functions at the management level."

Also recommended is an annual one-week conference of government, management and labor to deal with such topics as labor standards and industrial relations.

The belief is that such conferences would promote a better working environment.

OF VOLUNTEERS

WHEN GOOD IS SOMETIMES BAD

The Union has moved to protect its members from the threat posed by volunteer workers.

Such hospital volunteers as Candy Strippers and Ladies Auxiliaries have created an acute problem, the H.E.U. brief says. There are many instances, it says, where volunteers are doing work normally assigned to regular hospital employees.

"A hospital employer can, of course, save considerable money by allowing volunteers to donate services instead of hiring an employee to do the same job at the rate of compensation to which the employee would be entitled," the brief declares.

As a result, the brief asks the Department of Labor for regulations which would prevent volunteers from performing the normal duties of members of the bargaining unit.

It is for this reason the H.E.U. recommends the concept of one large industrial union as opposed to several small craft unions.





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Such hospital volunteers as Candy Stephens and Ladies Auxiliaries have created an acute problem, the H.E.U. brief says. There are many instances, it says, where volunteers are doing work normally assigned to regular hospital employees.

"A hospital employer can, of course, save considerable money by allowing volunteers to donate services instead of hiring an employee to do the same job at the rate of compensation to which the employee would be entitled," the brief declares.

As a result, the brief asks the Department of Labor for regulations which would prevent volunteers from performing the normal duties of members of the bargaining unit.

in which they may have undue interest," the brief says.

It recommends one labor representative and one management counterpart for each of four sectors, which would include primary industry and manufacturing, transportation and communications, construction, and the service industry.

Qualifications rather than political expedience would be the basis for selection of board members. The Federation of Labor and employer groups would select their own representatives for each division. Final approval would come from Cabinet.

The brief admits there would be some lobbying, but adds: "... any member with a vested interest would have too many other members to persuade."

The brief suggests the Deputy Labor Minister continue as board chairman and calls for the appointment of members on a five-year renewable basis.

In making its case for a full-time board, the Union says: "Board membership should be a vocation, not an avocation."

On a full-time board the chairman would not always have the deciding voice, the brief says. Other members

"LIVE IN FEAR"

NEED SEEN FOR EASIER CERTIFICATION

The figures are, to say the least, disheartening, particularly to an organization such as the H.E.U., which believes all workers should be organized.

When a count was taken in 1971, it showed 56.77 per cent of the province's work force was non-union.

"The question, of course, is why this situation exists," the Union says in its labor brief. "The answer, as far as we can determine it, is that a great many of the unorganized workers are employed in small shops. They live in fear that any attempted union link would bring reprisal from their employers."

Under present legislation, organizing is difficult and unions have been forced to adopt "back door" techniques, according to the brief.

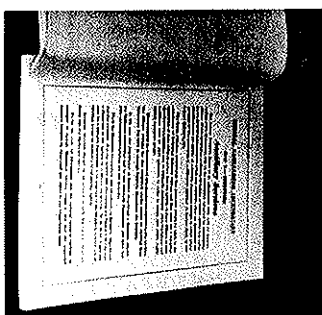
It calls on the government to get rid of the inhibiting factors and bring in legislation which would ease the certification process.

In order to apply for certification, under the H.E.U. recommendation, a union would only have to prove it was supported by more than one-third of the employees in a bargaining unit, instead of more than 50 per cent. If a representa-

would have a wider area, in which to work.

"And the chairman would not be required to continue carrying the excessively heavy administrative load, which is the present case," the brief adds. Other recommendations:

- The board should have jurisdiction over labor standards and human rights matters related to employment. Because



One of 68 pages.

- All labor statutes should be consolidated in one labor act with three parts. These would include labor relations, mediation services and labor standards.

- Vancouver should be the home for the board instead of Victoria.
- To get rid of any hint of secrecy, the board should publish its reasons for its decisions and show make its records available to all interested parties.

- The right to appeal board decisions should be excluded.
- The board should have the authority to launch investigations into labor strikes and infractions.

tion vote showed more than 50 per cent in favor, certification would be granted.

If justice is finally to be done in this area, then the process must be taken a step further, the Union maintains. It says decertification should be based on a two-thirds vote formula.

Where unfair labor practices and intimidation by the employer can be proved there should be automatic certification, the brief says.

It supports a method of determining appropriate representation to discourage fragmentation of large bargaining units by a proliferation of small unions.

The Union warns that the practice of the Labor Relations Board concerning certification of craft and industrial unions has an impact on the stability and flexibility of collective bargaining. When it follows the policy of favoring a craft union over an industrial union it is actually ruling in favor of bargaining on a smaller scale.

"The Board, unfortunately, has not always been consistent in deciding the appropriateness of bargaining units," the brief contends.

"As an example, let's take the Stationary Engineers. The Board considers them eligible for separate certification. Certified them in the hospital industry, not in the pulp and paper industry."

"The reason is that the Operating Engineers Union was the first union to organize Stationary Engineers employees," the brief continues.

"Today the proposition is that Stationary Engineers in some hospitals their own separate bargaining units be created by one union, while in other plants they are part of an industrial unit represented by another union, a situation conducive to conflict."

The Union argues that craft certification should be confined to well established crafts with a history of collective bargaining in the province.

"Except in industries where bargaining is traditionally conducted on a craft basis, such as the printing and correction industries, it is our view that craft units should be favored over industrial units," the brief says.

It is for this reason the H.E.U. recommends the concept of one large industrial unit and several smaller units, as opposed to several small units.



MESSAGE IN BRIEF**IT'S TIME TO CONSIDER APPRENTICESHIP**

Situated near the back of the brief, it doesn't occupy much space. But to the Union, it is one of the vital issues of the day.

The "it" in this case is the Union's recommendation for an immediate health care apprenticeship program, with the stipulation that trainees be called apprentices instead of students. They would be covered by the Apprenticeship and Tradesmen's Qualifications Act.

The reason for this move is twofold: to bring an end to the use of trainees as cheap labor and to initiate proper training in a province where the lack of such programs has played a part in the severe nurse shortage.

"There is definitely a need for protection against the exploitation of students," the brief says. "Those who get practical experience while enrolled in training programs, for example, can be used by an employer as a source of cheap labor."

The Union points out that Practical

Nurses are a specific concern and that Practical Nurse Trainees at hospitals aren't covered by the Minimum Wage Act.

The "meagre stipend" they did receive was recently discontinued. Since then the Union gained some ground through a test case. It proved to be of benefit to three Practical Nurse Students at Penitence Hospital when the Labor Relations Board ruled they were employees within the meaning of the Labor Relations Act. As a result, they were included in the bargaining unit for which the Union was certified.

The apprenticeship program the Union seeks would be of benefit to those working in various job categories, but particularly to Orderlies and Nursing Personnel.

For instance, those involved would end up with government certification. There is a licensing process now for Practical Nurses, but Orderlies don't have the same advantage.

Those working on hospital staffs at the present time under the coverage of a "grandparent" clause would be able to avoid further schooling if their performance measured up to that required for certification.

Through involvement in the program the Union would play a major role in the certification of hospital personnel. It would share this role with the government and the employer.

In addition to training the newcomers the apprenticeship program would also play an essential part in the upgrading of skills.

The importance of the program is such that it will continue to command considerable attention from the Union. The current moves in this direction are being made with the realization that the pains of the Nurse shortage will become even more acute with the development of community health centres.

STRIKER PROTECTION**EMPLOYEE RIGHTS AMONG BRIEF'S GOALS**

The far-ranging H.E.U. labor brief reaches into a multitude of important and exciting areas. Some examples of recommendations not included in other stories on these pages:

TROUBLESHOOTER — To act as a sort of Super Mediator-Conciliator who would be available at short notice on a call from either party. He would have to define the issue in dispute, gather the necessary facts and make recommendations that would not be binding.

While not binding, the recommendations would have this effect: If not accepted by one party, the other would have the right to publish them, or use them in any manner it deemed appropriate.

This recommendation arose from what the Union sees as a growing problem in the hospital industry — management delay in resolving disputes.

EMPLOYEE RIGHTS — An overhaul of labor legislation which would include introduction of a system of "Employee Rights." Such rights would be recognized in law and would help undo some of the harm done in years of catering to employer interests.

STRIKER PROTECTION — A moratorium on credit payments of strikers. The striking employee would not have to face the threat of garnishees or property seizure while financially vulnerable.

RIGHT TO STRIKE — Retain the right to strike and give unions in "essential"

industries sole right to opt for arbitration.

STRIKE EXCEPTION — No strikes nor lockouts during the term of an agreement with one exception: the right of employees to withdraw services over safety standards.

DUES BAN — Eliminate regulations preventing the use of union dues as political contributions.

EASY ACCESS — Allow unions access to a company site and employment records.

MINIMUM STANDARDS — Establish three weeks annual vacation with pay, a 36-hour work week, and launch a feasibility study of a four-day, 32-hour week.

The argument is that modern production methods have increased fatigue for millions of workers. "Even where the intensity of manual effort has been reduced by modern machinery the new evils are often boredom and monotony."

MATERNITY PROTECTION — Guarantee 15 weeks leave of absence in maternity cases, with a return to work in the position held beforehand.

HUMAN RIGHTS — The Union anticipates enactment of a Civil Rights Code and feels it should be administered by the Attorney-General's Department. As a result, it recommends a section of the Human Rights Act be included in labor standards legislation with an amendment that would dictate equal pay for women and men doing the same work.

There would be no job discrimination

on the basis of contemporary clothing and appearance.

Eliminate "Victorian" clauses blocking the road to job equality for women.

Change legislation so a union can lodge a discrimination complaint on behalf of an individual it represents.

CONTRACTING-OUT — Prohibit contracting-out during the term of an agreement. No essential service in a hospital or other tax-supported industry to be contracted-out.

COLLECTIVE AGREEMENT — Through sad experience, the H.E.U. has learned a negotiated settlement is not in force until it is signed and that unless it is willing to strike, the Union can't force an employer to sign. The Union calls for a time limit with appropriate penalties for any party not signing within that limit.

FIRING CAUSE — The practice of job dismissal without proven cause should be ended. Protection against this should be established as a social right. Unless he has the consent of the bargaining agent, no employer should be allowed to arbitrarily discharge an employee without first referring the matter to an arbitration board.

MINIMUM WAGE — While the recently revised provincial minimum wage is acceptable at the present time, the Union believes there should be something akin to an escalator clause written into legislation to keep the minimum increasing in line with the cost of living.

EXAMINE COMPLAINTS

White Rock Under Government Scrutiny

Complaints concerning Peace Arch District Hospital at White Rock are getting the personal attention of Health Minister Dennis Cocke.

Mr. Cocke was reported at mid-July to be "quite concerned" with developments.

The Health Minister became involved after W. K. Lyle, Deputy Minister in charge of Hospital Insurance, criticized the appointment of Peace Arch Administrator Derrald Thompson as a member of the Hospital Board.

Not surprisingly, Mr. Lyle was also interested in the fact that the hospital has employed three other members of the administrator's family.

These are just two of a number of complaints made in recent months about the hospital's operation.

Unusual Step

Like a great many others, Mr. Lyle was somewhat startled. He said he considered the board appointment of an administrator both unusual and contrary to government policy. And, quite naturally, he looked on employment of the administrator's relatives as being bad for staff morale.

It was for these reasons that he decided to discuss the case with Mr. Cocke.

Mr. Cocke is studying the situation and at the moment reportedly hasn't decided on a course of action. He is said to be hopeful the hospital board will be able to solve the problem.

The board, obviously smarting from rumors that as many as 24 of Mr. Thompson's relatives are employed by the hospital, used its annual report to say there were only three — a son, daughter, and brother — on the payroll. His brother, Ivan L. Thompson, is plant superintendent; his son, Brice, is storekeeper-printer, and his daughter, Mrs. Juanita Gareau, works as an X-ray technologist.

Mr. Thompson was reported in a newspaper interview to have said he personally hired his brother after becoming administrator in 1966. In the same interview he found he had to admit his election last December as a White Rock Alderman could lead to the possibility of conflicting interests. Just so no-one would get the wrong impression, he was quick to say that if confronted with such a situation he would refrain from voting, either as an alderman or board member.

After Firing

Complaints claiming irregularities in the running of the hospital were made by 42-year-old Richard Nitsch following his discharge as a Utility Employee.

Nitsch finds it interesting that he was fired after H.E.U. entered the picture to deal with his complaint that the hospital was refusing to clarify his job status.

The administration doesn't like being accused of firing anyone. So it said it was just that Mr. Nitsch wasn't needed any longer. Its excuse was this: there was a plan to set up a medical electronics maintenance department when Mr. Nitsch was hired, but the need proved insufficient.

So, rather than say the man was fired, the administration said his position became "supernumerary to the hospital's establishment."

(Ed's Note: Which means that, like a cube of sugar, he was dissolved. Something which might have sweetened the situation for the hospital, but certainly not for Mr. Nitsch.)

During his electronic repair work at the hospital there were occasions when he fixed TV sets belonging to Mr. Thompson and his brother, as well as a tape recorder brought in by Ivan Thompson.



HEALTH MINISTER COCKE
... Reason for Concern.

In a newspaper interview, Derrald Thompson is actually quoted as saying:

"They were old sets. We could have repaired them ourselves, but we took them in to find out if Nitsch could repair them. It was a kind of test, if you like."

Mr. Nitsch has also charged that some equipment was taken out of the hospital for personal use.

Said Derrald Thompson:

"We like to help our employees while we can. We can't give them bonuses for their hospital work. So we allow them to use hospital equipment when such equipment isn't required for the hospital's immediate use."

In the newspaper interview, he is described as acting aggressively when dealing with the Union.

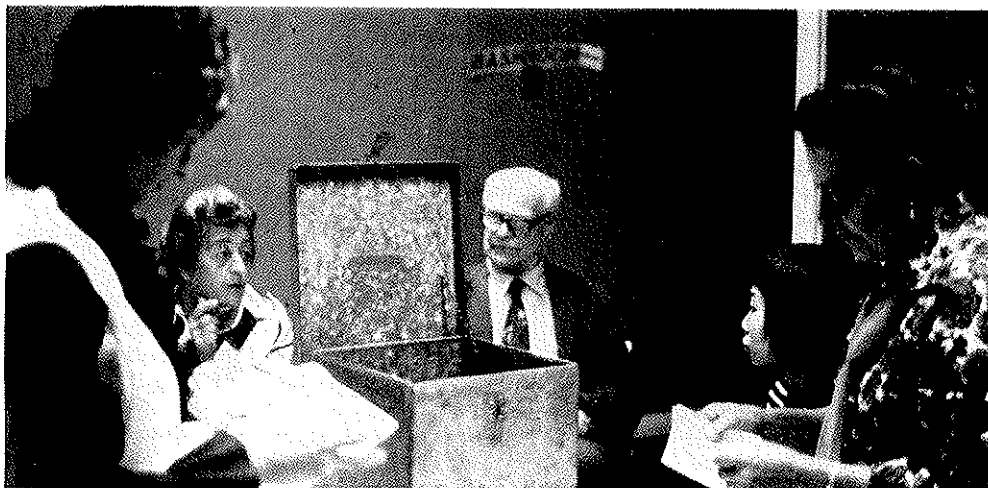
"I don't allow them to push me around," he is reported as saying.

A Sad Story

This, of course, comes as no surprise to the Union, which has found Derrald Thompson to be the epitome of all that is bad in labor relations. H.E.U. Assistant Business Manager Jack Gerow classifies him as one of the most anti-employee and uncooperative hospital administrators to ever come over the B.C. horizon.

One of the more recent examples of what Mr. Gerow means is the fact it took an 87 per cent strike vote at the hospital in April to force it to sign a 1972-73 Collective Agreement.

Says Mr. Gerow: "At a time when man is looking for a more modern, healthy approach to labor relations — seeking a way to bring harmony to a troubled area — Mr. Thompson stands out as an almost unbelievable link with the dark past."



Open ballot box symbol of earlier problem. Strike vote was needed to force signing of Collective Agreement.

SPIRITS REMAINED HIGH AT EDMONTON

(Continued from Page 1)

Staff officials of the H.E.U. were quick to react to the Edmonton strike. It not only pointed up a very real possibility of what could happen at home — many times over — but there was naturally a concern for the plight of hospital workers in trouble.

As a result, two H.E.U. staff personnel flew into a grey, rainy Edmonton June 15, four days after the strike had begun. They were there for one day to bring a message of moral support from hospital workers in B.C. Possibly the point was emphasized even more because of the discomfort involved. H.E.U. Assistant Business Manager Jack Gerow, for instance, stayed on the picket line with a special H.E.U. sign until he was soaked to the skin.

The situation they found in Edmonton was—by B.C. standards—a little shocking. Here were hospital workers asking for nothing more than a minimum of \$100 a week and ready to accept at 37½-hour week, but being denied both.

The basic wage at Royal Alexandra prior to the strike was \$373 a month, almost \$100 less than the H.E.U. minimum. Local 41 had wanted a reduction in the work week from 40 to 35 hours, but was ready to settle for 37½ hours, the standard already in force in B.C. where H.E.U. members are now gunning for a 36-hour week based on an eight-hour day—something which would mean alternating four and five-day weeks.

Money and Hours

The Edmonton strike came after Local 41 and the Hospital Board made use of all the Alberta negotiations machinery, including conciliation. The major points of disagreement were the hours of work and the pay demand. The Union wanted a \$60 a month hike in the first year of a two-year agreement to give those at the bottom of the totem pole \$100 a week. The hospital offered \$43.

Proof of the justification for this strike can readily be found in the support shown the strikers. It didn't come only from the man on the street, but from such generally unexpected quarters as the *Ed-*

WILL THE REAL PEGGY . . . ?

For anyone who may be wondering, Marion Perry has not suddenly become Peggy Heinze. Nor, for that matter, has Peggy Heinze become Marion Perry.

Both women can attest to that . . . and probably will, if asked.

Peggy was upstaged (quite unintentionally) when she appeared in a picture in the last issue of the *Guardian* and was identified as Marion. As a member of the Provincial Bargaining Committee, she was shown with the other four members.

Marion is one of three Committee alternates.

TERMS OF SETTLEMENT IN BRIEF

Conciliation Board had offered hike of \$43 and \$35 in each year of two-year agreement. Employees will now get the \$43 from last Jan. 1 to June 11, when strike began, then additional \$7 until next Jan. 1 when \$35 increase will take effect. There will be \$10 increment Oct. 1, 1974.

Forty-hour work week will be reduced to 37½ hours in stages, with final drop coming Jan. 1, 1975.

Term of agreement is 27 months instead of 24, taking "heat" off Royal Alexandra, which will no longer reach expiry date three months ahead of other Alberta hospitals.

Edmonton Journal, the sprawling city's one daily newspaper. (See accompanying *Journal* editorial.)

"We're getting good support from the people who see us on the picket line," Strike Committee Executive Member Cliff Ward said June 15, as he tried with others to dry his rain-soaked clothing at strike headquarters. "Nearly everyone gives us the sign that they're for us. I'd say only about 10 per cent are against us."

The strike cut the capacity of the 1,000-bed hospital to about one-third. One of the two largest hospitals in the city, it sent its emergency cases elsewhere and continued to cope with the maternity situation, something for which it is apparently well known.

Two Injunctions

There was no attempt in the early weeks to force the employees back to work through existing Alberta legislation.

The Union did run into restrictive court injunctions. One made it clear they could not picket city hall. Because the hospital is city-owned, a token picket had been staged there to demonstrate this point. Civic workers had honored the line, halting work within city hall for a short time.

The strike included service employees in such categories as housekeepers, tradesmen, laundry workers, porters, telephone operators, unit clerks, ward aides, house mothers and technicians.

Cliff Ward and the others were moved by the show of strength, not only on the picket line in miserable weather, but by the turnout at a rally called two days after the strike began.

They say about 850 of the 1,030 strikers followed the sound of the bagpipes to the Polish Hall for the rally.

It is difficult, they say, to beat any group that demonstrates that kind of spirit.

"LAME-DUCK BOARD"

TESTIMONY SUCH AS THIS SURPRISING, BUT WELCOME

(This editorial appeared June 13 in the *Edmonton Journal* under the heading "Lame-duck board.")

The strike of more than 1,000 service workers at the Royal Alexandra Hospital raises two distinct issues.

The first had to do with the demands of these employees, who handle housekeeping, food service, maintenance, clerical duties, and so on.

While the Royal Alex proudly claims to be in the forefront of Alberta hospitals in the matter of employee pay, it is difficult just the same, to view the demands of the strikers as excessive. A 37½-hour week, which apparently the union would settle for, isn't all that unusual for civic employees these days, and the fact that a \$100-a-week minimum has yet to be established for some of the workers simply indicates the hospital's pay scales do not reflect the reality of today.

But a larger issue concerns the very role of the board in this dispute. As was the case with the nurses in May, the board is attempting to reach a settlement with the service workers while having virtually no say in the amount of money available for pay increases. The purse strings for Alberta hospitals are controlled by the provincial government.

In such circumstances, the board is merely an intermediary — and a wholly unnecessary one at that. It would be much simpler, and undoubtedly less frustrating for all concerned, if the service workers and all other hospital employees dealt directly with the Alberta Hospital Services Commission, making it assume its rightful responsibility.

This doesn't mean the hospital board should be abolished. There are all kinds of administrative and other functions for it to carry out. But there is no point serving as a lame-duck negotiator, when the provincial government has the real power — and the money.

ST. VINCENT'S NEXT

Double Dividend for Organizers

With two major successes in recent months, the H.E.U. organization machine continues in high gear.

The Union was certified July 10 as bargaining agent for employees at Gorge Road Hospital in Victoria, adding to the February 27 certification for Children's Hospital in Vancouver. The immediate target now is St. Vincent's Hospital in Vancouver.

The certifications cover some 325 employees at Gorge and a bargaining Unit of about 100 at Children's.

Union officers would likely have been forgiven a few loud cheers. For the victory marked the end of a long hard battle. There had been a number of organizing attempts at Children's. Dating back to 1969; they reached various stages, but all had been unsuccessful.

NO SIMPLE TASK

The negotiation of a first contract — usually a simple one-session affair because of the Provincial Master Agreement — took several meetings and much time in the case of Children's. It also required the services of a Mediation Officer.

"It was one of the most difficult Unit Collective Agreements we've had to negotiate in recent memory," explained H.E.U. Assistant Business Manager Jack Gerow.

(Sampling of per - month increases at Children's Hospital following H.E.U. organizing):

Orderlies	\$ 30
Cleaners	30
Cooks	108
Food Service Technicians	108
Stores Clerk	132
Photographer	150
Driver	158
Public Relations Officer	203

But the delay had its compensations. Wage increases ranged up to (in one case) more than \$200 a month. And the Union was able to negotiate a variation to the Master Agreement with this stipulation: those who chose not to join the Union at the time of organization have to pay an amount of money equal to the monthly dues for members.

This marks a significant change in procedure. When Royal Jubilee was organized a few years ago those who didn't want to join the Union didn't have to. Nor did they have to pay the equivalent of dues.

The Agreement for Children's has been ratified and is waiting to be signed. Even after it is, there will be little time for relaxation. Negotiations for a new Master Agreement which will naturally include employees at Children's, are expected to be underway again in September.

SOME HEFTY HIKES

In the meantime, the first Agreement provides increases ranging up to another \$203 a month for the Public Relations Officer and \$158 for a Driver.

Where Gorge Road Hospital is concerned, there had also been an earlier organizing failure. That occurred prior to the rehabilitation and extended care hospital's expansion, which saw it triple its size to 300 beds this year.

This time the Union pulled out all the stops. There was so much work involved in the all-out campaign it required the hiring of two persons on a full-time basis for a period of six weeks. Filling this role were Gordon MacPherson, Chairman of the Victoria General Hospital Unit, and Vancouver General Hospital Union Secretary Gwen Parrish.

Once certification was granted the Union sent notice that it wanted to commence Collective Bargaining. This was to begin by the end of July.

Convention Set

The Ninth Biennial Convention of the Hospital Employees' Union has been scheduled for June 3-6, 1974, at the new Richmond Inn, Richmond.

Because of the continuing growth of the Union (current membership is 11,300), the convention will attract a larger crowd than before. Some 230 to 240 delegates are expected to attend.

BACK PAY

Board Orders Return of Job

After waiting well over a year, Sarah P. Davies has won reinstatement at Royal Inland Hospital, Kamloops, along with approximately \$3,800 in back pay.

This was the award of the Arbitration Board after a hearing dealing with the discharge of Sister Davies.

The story goes all the way back to the early part of 1972 when Royal Inland ended Sister Davies' term of employment over a question of competence.

The first delay involved the hospital's refusal to respond to a grievance filed by the Union. The hospital argued that the procedure followed by the Union was incorrect.

Claiming the hospital was at fault for not responding, the Union applied for the services of a Department of Labor officer. The request was turned down on the grounds that there was no signed Collective Agreement at the time between the parties. It wasn't until this past February that this obstacle was overcome.

The department appointed an officer and the upshot of his investigation was the Arbitration Hearing.

In an unanimous decision, the Board ruled that the hospital "erred in not replying to the Union in regards to the grievance procedure," and added that the Union "should be more positive in submitting the first stage of the grievance to the hospital."

The Board also unanimously agreed that Sister Davies was "wrongfully terminated and that she should be reinstated to her position at the hospital without loss of seniority or other rights, benefits and privileges."

This was to cover the period ranging from her Feb. 2, 1972 firing to the signing of the Award, June 8, 1973. The amount of back pay owing would have been in the neighborhood of \$7,500, but because of the Board's ruling deductions had to be made for money earned in the meantime outside the hospital.



Initial Agreement studied by H.E.U. Assistant Business Manager Jack Gerow (seated), and Ron Valliers, Chairman of new Children's Hospital Unit.

UNION PLEASED

New Purpose for Shaughnessy

It's time for the giant to sit back and let someone else do a little growing.

That appeared to be the message B.C. Health Minister Dennis Cocke had for Vancouver General Hospital when he announced a major hospital spending program July 20.

It was music to the ears of the Hospital Employees' Union. Of particular interest to the Union is the plan to create both a Children's Hospital and teaching facilities on the grounds of Shaughnessy Hospital.

"This is welcome news," said H.E.U. Assistant Business Manager Jack Gerow. "The long-needed leadership in co-ordination and integration of health care facilities appears to be here."

NEEDS WERE KNOWN

The Union has been very much aware of the crucial need for new Children's Hospital facilities. It has also been pressing for increased and improved training programs for hospital personnel.

In announcing that up to \$130 million would be spent over the next five to eight years on major hospital and health care

facilities, Mr. Cocke said there would be 1,400 beds earmarked for teaching and referral. He also hopes to double medical school classes.

In selecting Shaughnessy, the Minister indicated he was rejecting the proposal that teaching facilities be expanded at the Health Sciences Centre of the University of B.C. It also appeared to put an end to the hopes of Vancouver General Hospital for \$100 million in new facilities.

The H.E.U. position is that the Provincial Government is making a good move in creating new facilities rather than adding to central establishments that are already oversized.

VESTED INTERESTS

The Vancouver General Hospital plan has been under attack as a case of empire building at a time when diversification is the need.

As V.G.H. grew into a giant among Canadian hospitals it attracted related facilities to the surrounding area. Doctors



What is a Unit meeting without a smile . . . or two . . . or three . . . or . . . Then, how can you avoid it with cheerful Nelson Unit Chairman Russ Cole (right) who finds something to chuckle about as Secretary Tom Ah Yee joins in with a smile of his own.

bought buildings and opened offices nearby. The result in recent years has been a power play by those with vested interest to prevent any move toward decentralization.

Mr. Gerow says the government's plans for Shaughnessy will undoubtedly provide one other very welcome benefit — more employment.

"We can see the creation of more jobs for hospital workers," he says.

JANITOR REINSTATED

SIMMERING POT BOILS OVER AT TERRACE

Problems had been gathering at Mills Memorial Hospital in Terrace much like bubbles in a quickly heating kettle.

Finally, the build-up was complete and the boiling point was reached. It came June 13 with a protest sit-in over the firing of handicapped Janitor Douglas Pigeau.

While the sit-in of 46 fellow workers (about half the staff) wasn't expected, it didn't really come as a surprise to H.E.U. members familiar with the background.

To begin with, workers at the hospital were dealing with Tony Wagemakers, an Administrator who, interestingly enough, is followed by trouble wherever he goes.

Mr. Wagemakers has been around. There were problems during his tours of duty as Administrator at Ocean Falls, and Sechelt.

Long Delay

As an example, H.E.U. officials point to Sechelt where it took them 11 months to get job descriptions for clerical workers. This was at a time when the Union was trying to negotiate new wages.

Eventually, Mr. Wagemakers moved on, an event that was described by one member in somewhat unflattering terms: "Sechelt's loss," he said, "is Terrace's double loss."

Those who have since agreed, point to the various issues they say have developed since Mr. Wagemakers' arrival on the Terrace scene.

Workers have complained of linen shortages which they say have been allowed to hamper patient services and even operating room procedures.

Such a stand is looked upon as proof of just how responsible the members at Terrace are. The complaint wasn't something that involved a violation of the Collective Agreement; nor was it something the members were obliged to speak out against. But they did so just the same because of what some have described as a concern over the need for reasonable levels of health care.

Another trouble spot concerns something which has all the earmarks of a hospital campaign against H.E.U. Unit Officers at Terrace. Letters of reprimand have gone to certain officers involving complaints over what members describe as "trumped up" incidents.

Intimidation

The Union maintains it is a case of intimidation aimed at isolating the Unit Officers. The object would be to weaken the Unit.

It was against this background that the Pigeau firing and sit-in drama was played out.

The sit-in lasted two days, ending when D. R. Blair opened an Arbitration Hearing into the firing.

Mr. Blair ruled that Mr. Pigeau was discharged for proper cause. But in considering all the factors of the case, he added a recommendation that Mr. Pigeau be rehired without impairment to benefits.

Because of recent Supreme Court of Canada rulings, an Arbitration Chairman acting in cases of job termination is limited to making recommendations if cause is found for a firing.

In this case, the "strong" recommendation had quick results. Mr. Pigeau has been reinstated by the hospital without loss of pay and with all accrued sick leave, superannuation and vacation entitlements intact.

Starting anew are seniority rights for promotion and transfer.

In his report, Mr. Blair noted that Mr. Pigeau is a deaf-mute who has worked 5½ years at the hospital. He referred to complaints concerning the man's work habits, including the charge that he had sometimes left work before his regular quitting time. He also mentioned evidence that Mr. Pigeau had generally performed his duties in a satisfactory manner and had on one occasion complained of an excessive workload.