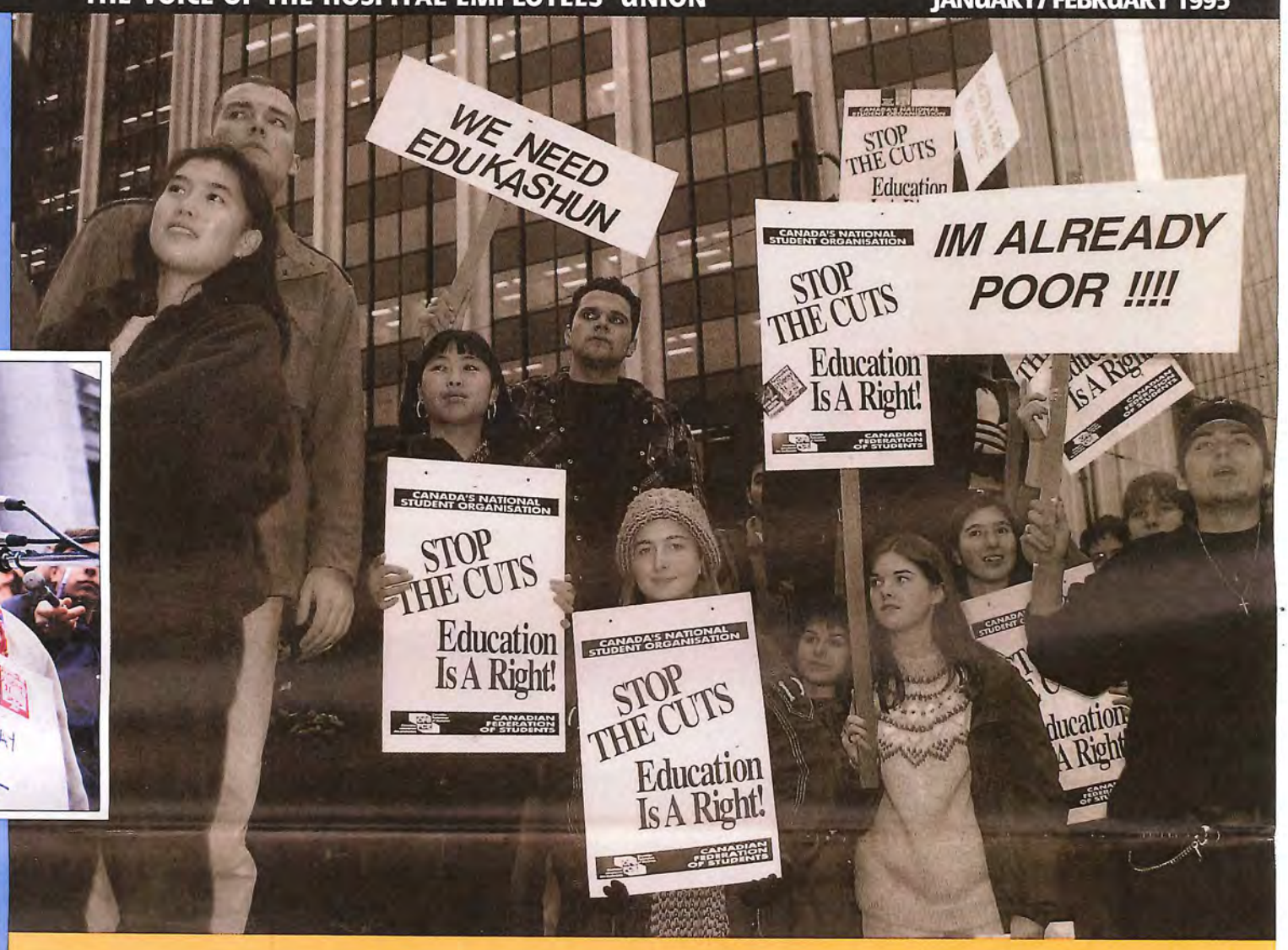
Guardian

VOL. 13 NO. 1 THE VOICE OF THE HOSPITAL EMPLOYEES' UNION JANUARY/FEBRUARY 1995

SMART ENOUGH, BUT NOT RICH ENOUGH



STEPHEN HOWARD PHOTOS

More than 5,000 people marched through the streets of Vancouver Jan. 25 to protest the cuts. HEU's Carmela Allevato, inset, pledged the union's support for students' fight to maintain funding.

Tens of thousands of students took to the streets Jan. 25 in a national day of protest against Ottawa's plans to cut billions from post-secondary education, effectively shutting the door on higher education for the children of working people, like HEU members.

At the Vancouver rally, HEU's Carmela Allevato pledged the union's support against the cuts that will trigger massive tuition fee increases.

While students here in B.C. got support from the provincial NDP, they got the cold shoulder from opposition politicians. Both Liberal leader Gordon Campbell and Reform's Jack Weisgerber backed the cuts that will ensure Canada's post-secondary institutes become the preserve of the rich.

MARY LAPLANTE PHOTO

THE QUESNEL STRIKERS

The Quesnel strikers have strong support from other HEU members in the community. Members from the Quesnel local, the Quesnel Community Aid local and members of the Provincial Executive have been walking the line with them since the strike began Jan. 31.

Confrontation in Quesnel

HEU members at Quesnel Alcohol and Drug Association are on strike against provincial "wage guidelines" in a fight for a fair first contract.

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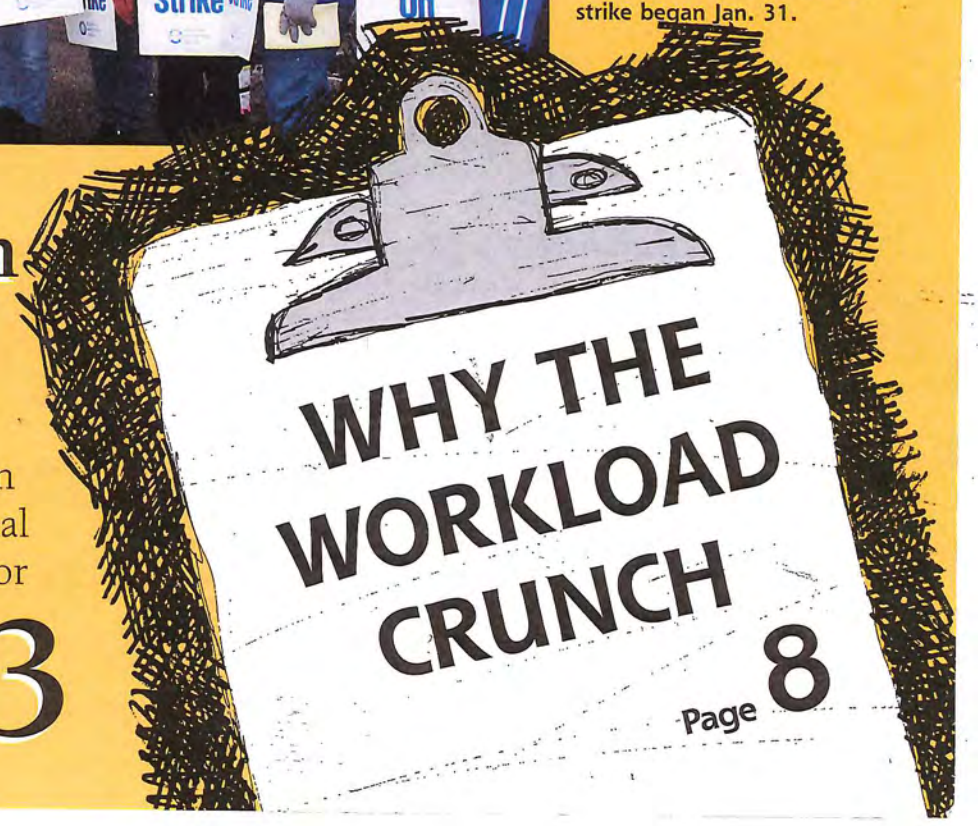

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COMMENT

Wage controls block justice

by Carmela Allevato

EARLY IN February, members of the Quesnel Alcohol and Drug Local of HEU were forced to take strike action to win a first agreement. As always with first contracts, HEU was demanding no more than what other workers performing similar work already receive.

But the Quesnel workers are so poorly paid that their wages would have to rise 40 per cent or more to achieve parity in one step.

The Quesnel local's employer was sympathetic. Members of the Quesnel Alcohol and Drug Abuse Association made it plain they wanted to see justice done. But when they tabled 2.3 per cent a year over four years, the Health Employers' Association of B.C. dropped on them like a ton of bricks.

According to HEABC president Gary Moser, such an offer exceeded wage "guidelines" established by the government's Public Sector Employers Council. If it was repeated, Moser said, the board members would be held personally liable for the difference between the contract rate and the level funded by government.

The PSEC was created by government to co-ordinate wage settlements across the public sector. It includes the Minister of Finance and the head of every bargaining agency in the public sector, including health.

'The government is flying in the face of its commitment to pay equity and fairness'

The guidelines not only limit the amount of increases in new and existing contracts. They also establish distinctions between various groups of workers in the same bargaining unit so that higher-paid workers receive little or no increase at all.

It's proof, if proof is needed, that the NDP government has in fact instituted a form of wage controls through its employers' council.

By taking this stand against the Quesnel workers – and many other HEU members seeking first contracts – the government is flying in the face of its commitment to pay equity and fairness for health workers.

It is telling them, in effect, that they can have a union, but they can't have a just contract. It's walking away from its commitment to free collective bargaining

HEU is protesting these guidelines in the strongest possible terms. The B.C. Federation of Labour convention demanded their withdrawal as early as last November, but Victoria still hasn't got the message.

We will be taking action with BCNU and the Health Sciences Association, as well as with the wider labour movement, to force the government to withdraw these controls.

They hit hard at workers with existing contracts, but they are devastating to workers who are just now joining unions like HEU to win a measure of contract justice.

We will not let these workers down

letters

THE GUARDIAN WELCOMES LETTERS TO THE EDITOR. PLEASE BE BRIEF. WRITE TO 2006 WEST 10TH AVE., VANCOUVER V6J 4P5.

HEU history will aid struggle for justice

It is wonderful to learn that a history has been written and published about HEU on the occasion of the 50th anniversary of the HEU.

Judging from the excerpts in the *Guardian* I'm going to enjoy reading this account of labour history. Hopefully, it will become part of our collective conscience while we continue to struggle for workers' rights, putting people before profit and capital gain and other concerns raised in the area of social justice and meeting the needs of the common good.

Thank you again for keeping us up-to-date and informed on current issues through the *Guardian* newspaper.

Our challenge for 1995 is to be creative in encouraging members to attend monthly local meetings. We are starting to celebrate our successes.

VICKI L. MARSTON,
Royal Jubilee local, Victoria

Convention creates lasting ties

Just a quick note to say once again how great it is to get together at conventions and for locals to help other locals.

An example of this is in response to our questions regarding setting up our union office here at PGRH, and establishing computerization.

Barb Lemky from St. Paul's immediately sent off an informative letter within the week following convention!

Thanks go to our brothers and sisters at St. Paul's.

LOCAL EXECUTIVE,
Prince George Regional Hospital

Latex allergy victim owes debt of gratitude

Thank you so much for the excellent portrayal of the many pitfalls of my latex allergy problem. I owe a debt of gratitude, which can never be repaid, to all of my brothers and sisters of the HEU for their kindness, hard work, loyalty and support in my time of need.

CPP finally ruled in my favour, so that part is finished. Maybe WCB will settle soon.

I also wish to thank you for getting my name back on the *Guardian* mailing list.

I am enclosing a copy of a poem I wrote on behalf of the latex allergy victims. It covers a lot, but it doesn't cover everything. It was published in the non-profit *Connecticut Latex Allergy News* in October. Hope you will enjoy reading it.

MARY ELLEN BEAVERS,
Kelowna General local

• *See page 13 for the special poetry section where Beaver's poem is printed.*

Member raises liability issue

This is an open letter to management and my brothers and sisters of HEU and other unions.

Before non-nursing staff such as housekeepers and porters become involved in assisting patients with meal trays, ambulation, giving fluids, etc., an important factor should be understood.

Example – if a housekeeper delivers a meal tray to a patient and because it's the wrong diet or the food isn't cut into small pieces and the patient either has a reaction or dies, the result for that employee could be financial ruin.

If the patient or next of kin names the housekeeper by name and sues that person, the health institution is under no obligation to assist with the law suit.

On the other hand, if the employee and the hospital are named in the legal action, then the hospital's liability policy covers that employee.

JAMES LATHAM,
Surrey local

Union builders omitted

In the convention issue of the *Guardian*, the report of my address to the delegates listed the names of a number of members I recalled as builders of HEU. Only two names were omitted.

I'm sure many of your readers will be pleased to know that I included the names of June Bradbury and the late Albert Tetz in that list.

These two dedicated activists contributed a great deal to HEU's success at both the local and provincial level and should be recognized.

W.D. "BILL" BLACK,
Past HEU President

Guardian

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

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What we're up to

HEU president Fred Muzin was one of the speakers at a Jan. 9 Vancouver rally against the Liberal's social program cuts.

Arbutus Manor, Belair Rest Home join HEU fold

HEU welcomed almost one hundred new members to the union fold just before Christmas. Employees of Arbutus Manor, a 154-bed privately owned Vancouver long-term care facility voted to leave their old union for better representation and servicing from HEU.

Belair Rest Home workers joined for better wages and the protection of a union contract. The White Rock long-term care facility is government funded but privately owned.

In addition, the certification for South Island Community Services Ltd., a multi-facility group home operation in Victoria, was varied in December to include two new locations and 22 new members.

Terrace local part of social policy fight

HEU's Terrace local played an active role in a recent demonstration protesting Jean Chretien's proposed social policy cuts.

The Jan. 13 demo, outside the Terrace UIC office, highlighted the impact of the proposed cuts – particularly the draconian cuts to UI – on the community and its economy, says Terrace local chairperson Andrea Leblanc.

"It went well", said Leblanc, who's a Kitimat-Terrace labour council vice-president and one of the speakers at the demonstration.

Community groups were also strong backers of the event, as was local NDP-MLA Helmut Giesbrecht. Leblanc said the local Reform Party MP supports the Liberal's plans to gut social programs.

The labour council is sending a fax to Chretien to ask him to reconsider the UI changes and to set up a special committee to deal with UI problems like the seasonal local economy and its base of fishing and logging.

Stop secret meetings

HEU has dialled 911 to Employment Security Agreement arbitrator Vince Ready in an effort to bring a halt to a spate of secret meetings of Lower Mainland health bosses.

The union charges that top administrators are thumbing their noses at the ESA provisions for consultation with health unions. The bosses are holding top secret talks on consolidating a number of functions. These include food service, laundry, diagnostic services, warehousing facilities, administrative services and information systems.

Ready is expected to convene a hearing into the charges.

continued on page 4

Liberals lie about ESA cost savings

The provincial government will save $450 million – funds it can make available to reform the health care system – thanks to the Employment Security Agreement, says health minister Paul Ramsey.

Savings totalled $79 million in the first year alone, Ramsey said Dec. 22, and will total $450 million by March, 1996.

He condemned Liberal health critic Linda Reid for her false claims that the accord is paying health care workers to stay home and do nothing.

"Reid's claims are simply not true," Ramsey said. "It's unfair and insulting to suggest that health care workers are avoiding work at the taxpayer's expense.

"Both labour and employers are working hard to achieve much-needed changes in health care and I think Linda Reid owes them a public apology."

Ramsey reported that 1,600 full-time positions had been eliminated by September, 1994, as the hospital system downsizes and community-based services build up. About 75 per cent of the displaced workers have been transferred, have retired early or moved to new jobs in their original facility.

"Ensuring hundreds of health care workers remain productive, contributing members of society is essential," Ramsey said. "It's a remarkable achievement. For a three-year investment that is projected to cost the province less than $50 million, we expect to save almost 10 times as much."

"The accord has protected HEU members from hundreds of layoffs annually," added HEU secretary-business manager Carmela Allevato. "We maintained previously negotiated wage increases, won increased protection against privatization and won employment security that is the envy of health workers across North America."

What Reid appears to advocate, Allevato said, is deep cuts in acute care hospitals combined with a drive to privatize health services.

HEU MEMBERS at Quesnel Alcohol and Drug are fighting to eliminate the $3 to $6 gap in their wages compared to prevailing rates at unionized facilities. Local members are from left, John Simpson, Dee Howse, Sharon Jenkins and Vicki Lejinse.

Quesnel workers strike against 'pay guidelines'

STRIKING MEMBERS OF HEU's Quesnel Alcohol and Drug local turned up the pressure Feb. 7 in their strike for a fair first contract by picketing a Quesnel high school where one of the local members is a youth counsellor.

Job action erupted Jan. 31 after Victoria's so called "wage guidelines" emerged as a new and controversial hurdle after 14 months of futile talks for a new contract.

"We're seeking nothing more here in Quesnel than the same wages paid at countless other unionized alcohol and drug agencies across the province," said HEU spokesperson Carmela Allevato.

The five workers currently earn $3 to $6 an hour less than the prevailing rate at unionized facilities, and haven't had a pay boost in four years.

The workers are also trying to erase discriminatory wage rates that pay a male counsellor substantially more than a female counsellor for the same work.

The provincial wage guidelines have emerged as a last minute stumbling block to a settlement at Quesnel and other HEU community service locals that are struggling to win first agreements.

"These so-called guidelines are being used by the Health Employers Association of B.C. to block a fair wage settlement," said Allevato, who, along with the B.C. Federation of Labour, urged Victoria to withdraw the ill-advised pay ceilings.

Meanwhile, at press time, HEU is fast tracking pressure tactics at community service locals where wage controls block justice. Strike notice has been served at the group of five Victoria group homes: Cornerstone, Crossroads, Kardel, South Island Community Living, and Victoria Community Resources. Essential service levels are now being set at the facilities.

Strike mandates are being sought at Garden Manor, a Kamloops group home, Canadian Mental Health Association in Salmon Arm, and at Avonlea, a specialized Kelowna facility for head injury victims.

Talks for a first contract at Wilson Place, a private profit long-term care facility in Port Coquitlam, have hit the rocks because of an employer manoeuvre even before face-to-face bargaining began.

HEU filed an unfair labour practice against the employer because its hired outside negotiator refused to allow the local's bargaining committee to meet with union staff. A decision from the Labour Relations board is due soon.

One round to go with Diversicare Inc.

It's one down and one to go in the first contract fight at facilities where multinational Diversicare Inc. runs the show.

Workers at Bevan Lodge in Abbotsford won their first contract, a three year agreement, with wage increases of 12 per cent along with many protections of the Master Collective Agreement.

At the end of the contract, achieved through binding arbitration, Bevan wage rates will be similar to those at Diversicare/Counsel Corporation's Courtyard Gardens facility in Richmond.

Meanwhile, at Kelowna's Hawthorn Park Lodge, HEU and Diversicare are going to arbitration Feb. 13 and 14 to resolve a bitter battle that was supposed to be settled by Dec. 15.

Diversicare is to blame for the hold up because its promised full disclosure of financial information didn't happen until just prior to the December deadline.

"We're not surprised," said HEU's Carmela Allevato. "The information backs our position that the employer's cash cupboard isn't as bare as it claimed."

Canadian Federation of Student's leader Michelle Kemper thanks HEU for its support for the Jan. 25 student protest.

continued from page 3

Farmworkers' union says thanks for the support

The Canadian Farmworkers' Union send their thanks for HEU's financial support of the farmworkers' cause.

"We feel we have made great strides in recent years not only for our members, but for all farmworkers throughout the country.

"We here at the CFU would like to take this opportunity to thank all our sisters and brothers at HEU and wish all a very merry Christmas and a prosperous happy New Year."

Employer slapped for blocking convention leave requests

Vancouver Hospital got a slap on the wrist from arbitrator Don Munroe for a contract violation when it refused to grant leave to three HEU local activists to attend the B.C Federation of Labour convention in late November.

HEU activists John Olsson, Dorian Meneghetti and Joe Fraser were elected to represent their local at the convention. But the hospital nixed their leave requests.

Revisiting an issue on which he'd already made a number of rulings, arbitrator Munroe found the employer was way off base when it claimed that leaves for Olsson and Fraser would interrupt the operation of their departments. He also found that Meneghetti should have been granted partial leave to attend.

ESA job match numbers continue to improve

Thanks to the Employment Security Agreement, the number of displaced health care workers who have been permanently placed in comparable jobs has increased to 440 according to year-end figures produced by the Health Labour Adjustment Agency.

That reduces the number of displaced workers awaiting permanent placement to just over 300 across the province.

There was some good news for former Shaughnessy Hospital workers because the number of HEU Shaughnessy members on secondment awaiting placement fell to 85, some 30 of which are on long-term disability, compared to 213 at the end of March last year.

The number of HEU members awaiting placement declined to 226.

However, not all the news is good. The HLAA goes to great lengths to make sure that displaced workers have the skills to perform the job they're matched to. But the number of matches rejected by employers has ballooned to 139. It's an alarming trend that HEU is studying because it may provide employers with a loophole to fill job vacancies from outside the pool of registered displaced workers.

Picasso's woman

Book by CUPE member explores the terror of breast cancer and the voyage of survival

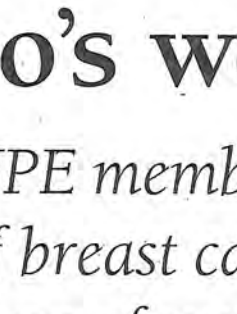
by **Carole Cameron**

Congratulations Rosalind MacPhee for writing a captivating book. I started to read *Picasso's Woman* and could not stop until I had finished the entire book. I felt fear and pain and sorrow alongside Rosalind as she described her feelings, fears and experiences.

Rosalind MacPhee is a member of CUPE Local 873 (B.C. Ambulance Paramedics), a paramedic and station chief. *Picasso's Woman* is a book about her experience with breast cancer.

Here is a woman who has everything going for her. She has a good relationship with her husband and daughters; she loves her work and is successful at it; she is attractive and healthy; has a beautiful home; likes adventure in the outdoors kayaking and hiking; is a poet and part-time university student; enjoys socializing with friends.

One day, in 1991, while showering, she feels a lump in her right breast. She has not had a physical for three years, and has never had a mammogram although her doctor has referred her for one several times. There is no known history of cancer in her family.



Her thoughts alternate between telling herself the lump she feels is a cyst and fear that she has cancer. "I thought of the one word I did not want to enter into my personal collection, then said it quietly to myself: cancer. It had an inescapably fatal sound."

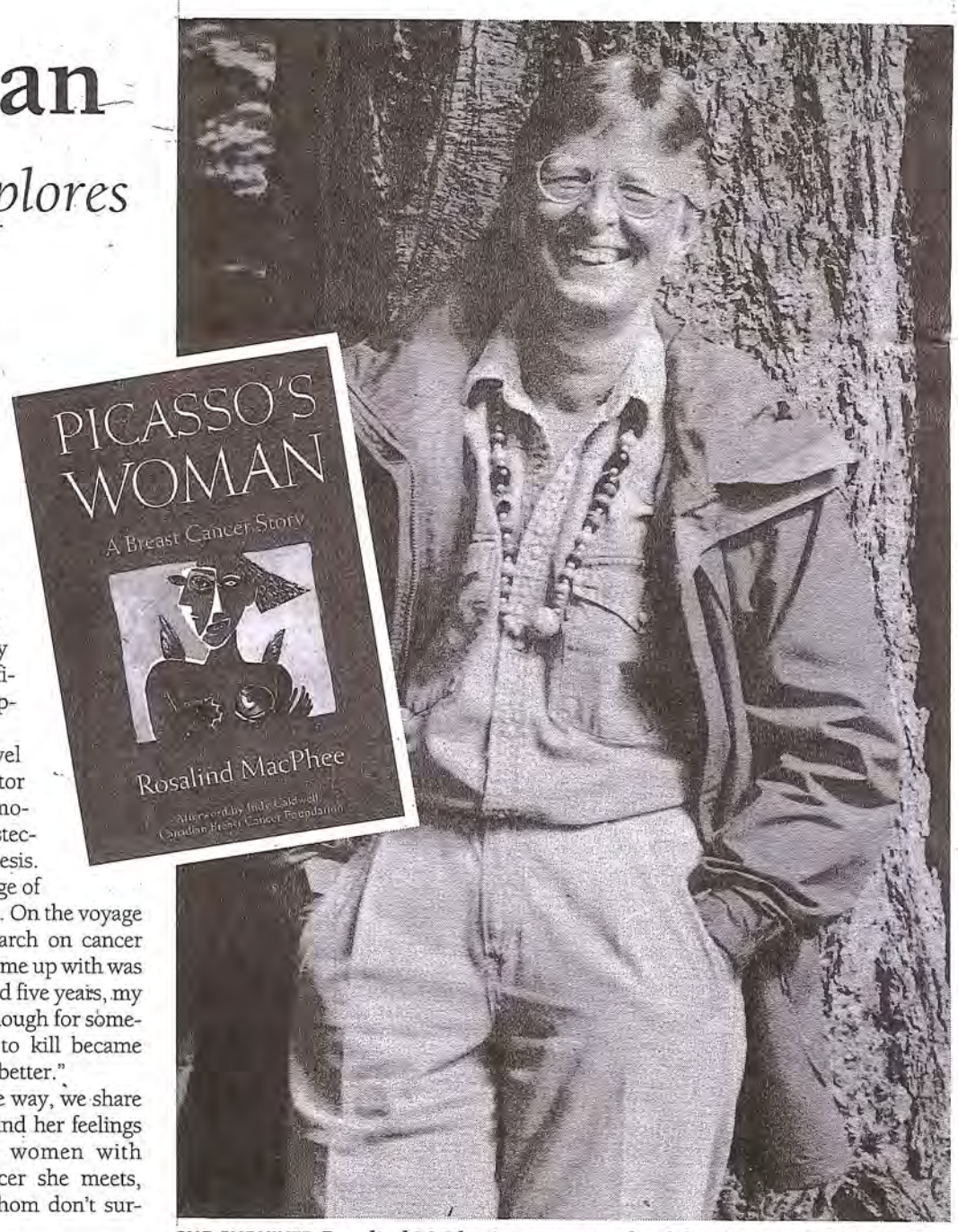
It is interesting that, with this most terrifying prospect, Rosalind cannot share her fears with her family or with her women friends. As she goes back and forth between being tough and being scared she says, "Since my childhood, I'd been used to dealing with things on my own." When she eventually does confide in her family and friends she has a difficult time letting them support her.

In the book we travel with her from family doctor to specialist, to mammogram to biopsy to a mastectomy to getting a prosthesis. Her experience is a voyage of adventure and discovery. On the voyage she does extensive research on cancer and the best she could come up with was "a feeling that if I survived five years, my chances of living long enough for something else to kill became better and better."

Along the way, we share with Rosalind her feelings about the women with breast cancer she meets, some of whom don't survive.

Then, just when life is getting back to normal, she discovers a lump in her left breast. There is the fear, the return to hospital, and finally the report that all is clear.

I give the final words to Rosalind MacPhee – "I thought how a lot of things had been taken away from me in the past few months. But a lot of things had been given back too. I had what I wanted. The normal rhythms of the family were restored. And tomorrow would be another day. A new morning. Life was full of endless possibilities, and I was eager to live as fully as I could for the rest of the sweet life that was given to me. Because now I was not dying of cancer – I was living with it. I knew there might be challenges ahead. But then, I've always liked adventures."



SHE SURVIVED Rosalind McPhee's captivating book has been widely praised.

Published by Douglas and McIntyre, Vancouver, *Picasso's Woman* costs $24.95 (hardcover) and can be purchased or ordered from your local book store.

• *Carole Cameron is a CUPE job evaluation representative working in B.C., an avid reader and a regular contributor to the Solinet Books Workshop.*

HEABC rejects union offer to improve stores, purchasing reorganization

Health employers boss Gary Moser has categorically rejected an HEU offer to work together to design an efficient stockless inventory program for B.C.'s health care sector.

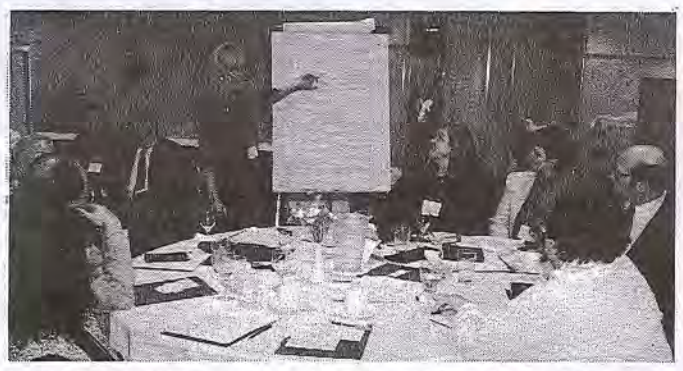
The union offer, made last year amid signs of the haphazard approach individual facilities are taking to reorganize purchasing, stores and delivery services, was meant to avoid serious labour relations and care delivery problems.

"These scattered approaches lead to waste and inefficiency," the union told Moser in a recent letter. "They also lead to dependence on multinational companies [like the giant Baxter Corp.'s Value Link]."

Moser claimed that the "manner in which health care organizations handle their inventory is a local matter."

That's a troublemaking response says HEU secretary-business manager Carmela Allevato. She slammed Moser for not seeing "HEABC's role as one of leadership in resolving problems before they become major labour relations issues."

Allevato left the door open for joint work on the inventory system should Moser come to his senses.



HEU Provincial Executive member Della McLeod leads a discussion group at a recent special meeting of HEU, HSA, and BCNU executives in Vancouver.

RCMP crime squad still eyeballing ex-boss Austin

The Mounties commercial crime squad was supposed to have wrapped up its investigation into the financial scandal involving former health boss Gordon Austin months ago. But now a recommendation on whether to lay criminal charges may take another 10 months.

Inspector Ken Guy, the white collar crime specialist who's heading up the case, said that another forensic audit has been ordered into the financial scandal that sparked Austin's firing as B.C.'s top health care boss 15 months ago.

"That's all I can say," a tight-lipped Guy said.

Austin, the former head of the old Health Labour Relations Association, was pink slipped in October 1993 after his scandalous financial perks and abuse of expense accounts created a public uproar.

While parts of the scandal involved other HLRA top brass, Guy said that only Austin is under investigation.

"If in the course of the investigation new facts become known, other investigations will be pursued," he said.

Cap College courses build members' skills

HEU members in the Lower Mainland should check out the latest spring course offerings from the Labour Studies Program at Capilano College in North Vancouver.

Provincial Office will cover registration fees for any member who attends a course.

The courses range from advocacy techniques for stewards and labour history, to the new provincial freedom of information law and computer-based communications.

"These courses help build the skills base of our activists and make HEU a stronger and better union," said Carmela Allevato, HEU's secretary-business manager.

Health reform can restore LPN's key role

B.C.'s licensed practical nurses are urged to take advantage of the opportunities provided by health care reform to win back lost ground and restore LPNs as an integral part of the nursing team.

The Licensed Practical Nurses Association of B.C. says LPNs must "join together to work to reassert our role as a viable and valuable asset in the provision of health care to the citizens of B.C."

In an open letter to 6,000 practical nurses working in B.C., the LPNABC says that LPNs "have for too long borne the brunt of downsizing and been at the mercy of health care reform."

But it says that Victoria's health care reform plan "creates new opportunities for LPNs," and it urges LPNs to get active in HEU, local LPN committees and within the LPNABC.

"We now have the opportunity to reassert our rights and responsibilities to the government and public."

The LPNABC serves the professional needs of practical nurses. It administers a code of ethics and a standards practise. Contact Donna Lanz, LPNABC treasurer at 769-0308 for information on how to join the organization.

Chilliwack caregivers lobby health minister for PFC review

by **Stephen Howard**

HEALTH WORKERS at Chilliwack General Hospital are stepping up the pressure on Victoria to hold an independent and accountable outside review of the introduction of patient focussed care at their hospital.

And the unions want Ramsey to order a temporary halt to the implementation of PFC at about a dozen other B.C. hospitals until the review is complete.

In a comprehensive proposal sent Feb. 2 to health minister Paul Ramsey, HEU, BCNU and HSA outlined a process, terms of reference, timeline and methods to provide a voice for the community that a review should follow to separate fact from fiction in the controversy that's dogged the hospital since it arbitrarily implemented PFC late in 1993.

Chilliwack union leaders also want a meeting with Ramsey, and they're writing their counterparts at B.C. hospitals to get support for their demands.

CHILLIWACK tri-union leaders Deanna Kenney, left, from BCNU, Audrey MacMillan, centre, from HSA, and HEU's Connie Larabie want B.C.'s health minister to take an outside look at patient focussed care.

Meanwhile, Gordon Campbell's Liberal party has waded into the PFC controversy firmly on the side of the bosses. After a brief "fact finding mission" to the hospital Jan. 30 to talk with senior administrators but not health workers, party health critic Linda Reid declared that CGH was on "the leading edge" of health care reform.

Reid issued unqualified support for PFC and she dismissed the unions' quality care concerns as "posturing over who owns the workplace."

The tri-union review pitch to Ramsey incorporates many of the recommendations made in early January by a special team of ministry bureaucrats that was dispatched to Chilliwack just before Christmas because of community complaints about quality care issues.

The bureaucrats, who met with local union leaders, chided the hospital for failing to carry out proper evaluation procedures. They called for a speedy review, and questioned hospital claims of windfall savings from the PFC model.

The much-touted PFC cost savings were also called into question when Surrey Memorial Hospital announced Jan. 30 that it was cancelling plans to introduce a form of PFC because of high costs.

Ottawa, Victoria team up to tackle profit-driven private clinics

by **Chris Gainor**

Federal and provincial politicians have promised to get tough with profit-driven doctors and entrepreneurs whose private clinics for the rich are undermining medicare.

The action started with federal health minister Diane Marleau promising that by Oct. 15, Ottawa will penalize provinces which allow private clinics to charge "facility fees" and other fees to patients.

She was backed up by B.C. health minister Paul Ramsey who pledged to create laws that will allow Victoria to regulate the clinics.

"Our government is firmly committed to the principle that all Canadians should have access to universal health services, regardless of ability to pay," Ramsey said. "Medicare cannot be preserved by charging the sick."

Marleau said she will use the Canada Health Act to reduce the health care transfer payments to provinces that continue to allow privately run clinics that provide medically necessary services.

"When clinics which receive public funds for medically necessary services also charge facility fees, people who can afford the fees are being directly subsidized by all other Canadians," Marleau said. "This subsidization of two-tier health care is unacceptable."

But she was silent on the issue of federal cutbacks to transfer payments to the provinces, which has led some provinces to cut services, opening the door to private clinics.

The B.C. Medical Association, which supports privatized health care, attacked Ramsey and threatened to break off its cooperative efforts with the government, such as joint management of fees paid to doctors.

Many of the targeted private clinics are owned by BCMA-member doctors.

HEU secretary-business manager Carmela Allevato pledged the union's support for Ramsey's legislation.

"We will be urging the government to take even stronger measures to eliminate profit-driven services," she said.

The Canadian Health Coalition supported Marleau's decision.

"Those who believe the false idea that competition will lower costs need only look at the American system, where costs are nearly 40 per cent higher for a system that doesn't provide coverage to nearly 40 million Americans," coalition executive coordinator Stephen Learey said.

PRESIDENT'S DESK

The northern exposure tour

by **Fred Muzin**

THE NEW YEAR got off to a quick start. During the first week of January, I toured many of our Locals in the North – from the Chilkotin-Cariboo to Prince George to Kitimat. The warmth and hospitality of our members more than compensated for the -25 degree temperatures and 80 km/h winds.

We had an opportunity to discuss HEU's constitutional review process "Making our Union Strong." We talked about preparing for bargaining in 1996 against employers determined to scrap the Employment Security Agreement. We shared information and opinions about HEU's involvement in New Directions and the need to maintain continuity of quality patient care services.

There are unique challenges in the North. The distances and weather contribute to a sense of isolation. Involvement in community health councils and communication between locals can be difficult. The strong attachment to one's community means that bumping becomes the only realistic labour adjustment option. Facilities attempt to balance budgets from shared risk funding with little effort to push for Closer to Home alternatives.

In some areas, retirees from down south and European immigrants are increasing the demand for health services. Unfortunately, added resources are not being provided, impacting our members' workload.

'The warmth and hospitality of our members more than compensated for the -25 degree temperatures'

Elsewhere, there are inadequate home care hours provided for those who are permanently bedridden. Housing design can be unsuitable for the elderly, necessitating admission into hospital.

There are numerous First Nations communities in the Northwest. One example of health care initiatives in the area is the Nisga'a nation's efforts in developing community health services. The belief is that this will serve as a model.

HEU has much work to do to improve channels of communication as first nations people in the North become empowered.

Many of our licensed practical nurses are being underutilized or laid off. This sharply contrasts with the South where many administrators are finally realizing that LPN's are cost effective bedside specialists.

The lack of extended and multi-level facilities is noticeable. The difficulty in retaining medical specialists requires frequent usage of air ambulances. The delay in capital funding from Victoria means that buckets line hallways to capture water leaking from the roofs that didn't get repaired in time for the winter.

Our strength as a union derives from the diversity of our members. We have the inside knowledge, all over this province, as to what works and what is administrative nonsense.

As we grow as a union, our challenge is to continue to be sensitive to our grass roots members. Our solutions to the problems that face us as a result of restructuring will be effective if we listen and learn from our members everywhere. Then we will be prepared for action.

VIOLENT TURN For sterile supply technician Lucy Dillon, the shooting of Dr. Garson Romalis, who performs abortions, has been traumatic.

Shooting causes fear

by **Stephen Howard**

Sterile supply technician Lucy Dillon cried when a nurse delivered the news that Vancouver gynaecologist Dr. Garson Romalis had been shot at his home by a sniper.

"I started to cry because I knew why he had been shot," says the Vancouver Hospital surgical daycare centre worker. "He was a doctor who performed abortions and he was outspoken about a women's right to choose abortion.

"Everyone was very scared," says Dillon, who asked that her real name not be used to protect her personal safety. "I guess I was at the top of the list. I didn't think something like that could happen."

Dillon didn't know Romalis personally, but the doctor was on staff at the hospital and she'd picked sets and preferences for a lot of his cases.

Vancouver police are still investigating the early November shooting that's been linked to anti-abortion extremists and similar attacks that have killed health workers at U.S. clinics.

Though the hospital provided counselling to surgical daycare staff on paid time, for workers like Lucy, the trauma left its mark.

"For the first week, every time I walked out the front door I looked to see if there was anyone in a parked car out front. When I left work I always checked my rear view mirror to see if I was being followed.

"Once the immediate shock of the shooting wore off, for the first month people were aware that what happened to Romalis could happen again."

That's why, she says, she and her co-workers were reluctant to talk about it.

Dillon is critical of the tactics of the anti-abortion movement.

"Everyone has a right to their opinion, but there's no need for the picket lines, no need for the violence."

Things are slowly returning to normal but security for the surgical daycare remains a problem because it's set off from the main VH facility and is easily accessible. It's something the hospital and the health ministry are urgently trying to solve.

"I've still got that fear, but you have to learn to cope with it. It will never disappear, it will always be there."

One day, she says, Dr. Romalis will be back at work performing procedures. "If he's got the guts and courage to do it, so will everyone else."

NOTEBOOK

How doctors are paid must change

by **Geoff Meggs**

B.C. doctors say their idea of health care reform is a two-tiered system that provides one standard of care for the rich and another for the rest of us. It's a strange prescription from a group which was effectively let off the hook by the provincial government as it set out to overhaul our medicare system. If implemented, it will have a devastating impact on our universal medicare system and undermine the wages and working conditions of HEU members.

While health care workers hammered out an agreement with Victoria and hospital administrators in 1993 to reduce the acute care system to the level mandated by the Royal Commission on Health Care and Costs, the B.C. Medical Association fought Victoria to a standstill to win increases in every year of a five-year contract.

The result – doctors are seeking to jam more and more work through an acute care system that is already operating below the target and is still reducing. When operating rooms aren't available or patients face a longer wait for surgery, the BCMA's answer is privatization.

"It wouldn't harm the public, it would help the public," says BCMA president Dr. Mark Shonfeld. He wants doctors to be able to operate their own clinics and charge patients for the privileged access.

'Many doctors may be more concerned about protecting their incomes'

But health minister Paul Ramsey has vowed to fight privatization. "I cannot accept a situation where access to health care services depends on your ability to pay."

Schonfeld's proposals suggest that many doctors may be more concerned about protecting their incomes than in providing a cost-effective service. The alternative to privatization is a complete overhaul of primary care, including firm measures like those now in place in the hospital sector to reduce inappropriate utilization .

A recent paper produced by Canada's federal, provincial and territorial deputy ministers of health suggests that our current "fee-for-service" payment system for physicians is a big part of the problem.

"Canadian and American studies report reduction in inpatient use of from 20 to 40 per cent on the part of physicians paid by other means," the report says. It cites a 1993 B.C. study which concluded that between 18 and 26 per cent of hospital admissions were inappropriate. The potential savings are staggering.

That's the problem Schonfeld has so far refused to discuss. If inappropriate admissions were reduced, millions of dollars could be saved for investment in a reformed health system. Workloads in hospitals would ease. Waiting lists would come down.

The BCMA agreement with Victoria doesn't reduce funding for doctors, it just caps it. Real reductions through the use of new medical models of primary care delivery are necessary to complete the health reform process. If this problem isn't tackled during the next stage of health care reform, all British Columbians will be losers.

Labour

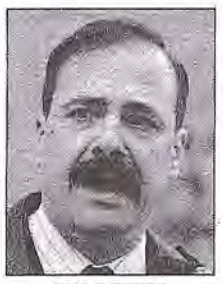
NOTEWORTHY NEWS ABOUT ISSUES AFFECTING WORKING PEOPLE HERE AND ABROAD

Corporate tax breaks cause deficit ills

Chrysler wins BCFed's trough race of greedy tax-dodging companies

TAX BREAKS and handouts to corporations – not social program spending – are the biggest problems facing Canada's economy, says B.C. Federation of Labour president Ken Georgetti.

Speaking at the labour federation's third annual Corporate Tax Freedom Day Jan. 26, Georgetti challenged the Liberal government to make the rich and corporations pay for the deficit they've helped to create.



GEORGETTI

He charged that 50 per cent of Canada's debt is attributable to loopholes used by corporations and the rich, "yet we've never had a government with the guts to review the corporate tax system.

"If Paul Martin is serious about reducing the debt in the federal budget, he'll introduce a minimum corporate tax ... and close off selected tax breaks," Georgetti said.

In addition, he called on the Liberals to start charging interest on the billions of dollars of deferred taxes owed by corporations.

He pointed out that in 1991 alone, 62,000 Canadian companies racked up profits of more than $12 billion without paying a penny in tax. According to federation research corporations get further breaks by being able to defer taxes owing without having to pay interest like normal working people do. In 1992 corporations owed more than $36 billion in deferred taxes, including Bell Canada ($2 billion owing), Canadian Pacific ($1.7 billion), and Imperial Oil ($1.5 billion).

"It's not social spending that's out of control," Georgetti said, "it's Canada's corporate tax system.

"If belts have to be tightened, corporate Canada should be the one to cinch them in a bit – not students, not unemployed workers, not single mothers on welfare."

A high profile media event, Corporate Tax Freedom Day featured nine battery powered pigs, each representing a tax-dodging Canadian company, racing for the trough of government handouts.

Jan. 26 is the symbolic date when corporations effectively stop paying their share of taxes for the year.

This year's trough-winner was Chrysler Canada, which racked up 1993 profits of $419 million, but through various loopholes paid less than $10 million in tax – a tax rate of 2.3 per cent.

Georgetti also slammed the business community, calling corporate barons "hypocritical" for promoting deep social spending cuts, while at the same time refusing to pay their fare share.

Other race-for-the-trough entrants included Inco, a big mining company which paid no tax on profits of close to $50 million in 1992 and 1993 and received more than $1 billion in tax credits in the same two years to offset future taxes owing.

THEY'RE AT THE POST Canadian Labour Congress president Bob White, right, urges his corporate pig on at the B.C. Federation of Labour's third-annual Corporate Tax Freedom Day. Chrysler Canada won the race between Canada's most profitable tax-dodging companies.

Top 10 corporate tax dodges

How do corporations rack up huge profits, and then pay little or no tax? It's easy when Ottawa is so generous with lucrative, legal loopholes. Here's the annual cost to the public purse of the top 10 dodges:

$2.1 billion	reduced tax rate on first $200,00 profit
$548 million	tax credit for research and development
$505 million	withholding tax exemption on foreign currency deposit interest
$446 million	fast write-off for Canadian exploration expenses
$417 million	partial exclusion of capital gains
$357 million	deductions for meals and entertainment expenses
$315 million	reduced tax rate for manufacturing, processing
$156 million	fast write-off for Canadian development costs
$89 million	deductions for charitable contributions
$81 million	refundable capital gains for investment corporations

Postal workers win employment security

Canada's postal workers have reached a tentative contract deal with Canada Post that includes new employment protection measures that continues the trend of Canadian unions winning stronger job security for their members.

"It's a true victory for postal workers," says Philippe Arbour, chief negotiator for the 50,000-member Canadian Union of Postal Workers.

In addition to the job security provisions, CUPW won an employer commitment to create new jobs, and a new process to allow casual employees to use seniority to obtain regular employment.

"The government is bent on increasing unemployment and eliminating social programs," Arbour said. "We must do our part to break that trend. Getting an agreement that not only preserves jobs, but also creates new ones is an important part of that effort."

The two sides reached the tentative deal just prior to Christmas after 14 days of round-the-clock bargaining accompanied by a creative workplace campaign by postal workers to press the employer to settle. CUPW members will vote on accepting the deal in balloting that concludes Jan. 29.

Arbour said the union's ability to reach an agreement was a result of its past history of struggle and its willingness to take strike action.

Meanwhile, in other bargaining news members of the United Auto Workers on strike at a General Motors parts plant in Michigan won a new contract Jan. 22 that forces the auto giant to hire new employees instead of using overtime to meet production targets.

Under the pact GM will boost employment by about 10 per cent – almost 700 new jobs.

The deal is a victory for unions and the unemployed in the ongoing battle with employers who use excessive overtime to avoid hiring more workers.

Georgetti grinds Starbucks over Guatemalan beans

The Starbucks coffee chain is one of the biggest importers of coffee beans from Guatemala, and the B.C. Federation of Labour wants the mega-popular Seattle company to take action to improve the dismal working conditions of the Guatemalan workers who pick the beans.

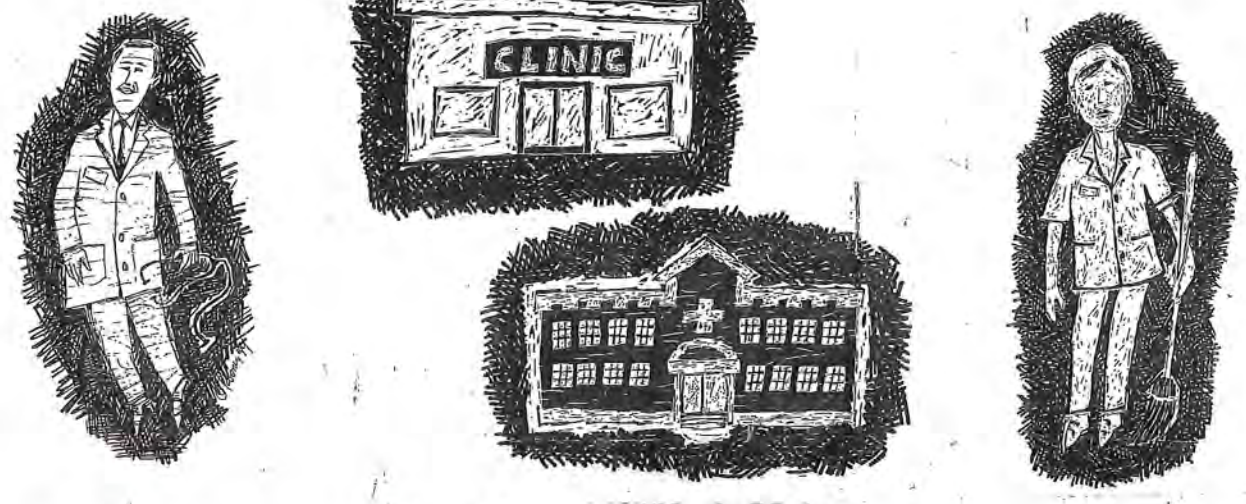
Federation president Ken Georgetti urged Starbucks to implement a code of conduct that Guatemalan plantation bosses would have to follow and guarantee safe working conditions and decent wages for coffee workers.

In a letter to Starbuck's top executive, Georgetti said that the extreme poverty, unsafe living and working conditions, trade union repression and the use of child labour in Guatemala were well documented.

"As a major purchaser of coffee beans, your company can exert pressure on Guatemalan plantations so that they refrain from using child labour, respect the rights of workers to organize, provide clean housing, safe working conditions and fair wages," Georgetti wrote.

"Your company can take proactive steps and use its tremendous economic leverage to guarantee decent living and working conditions for coffee plantation workers."

The health care elite isn't pulling its weight



Why the workload crunch?

by Geoff Meggs

TWO YEARS after the provincial government announced its New Directions health reform program, B.C.'s health care workers are meeting or exceeding the targets for downsizing the acute care hospital sector as resources shift to the community.

But frontline workers report their workloads have never been so intense. Hospital occupancy rates are rising, patient aren't admitted until they are acutely ill and patient turnover is increasing.

One result is consistent high rates of injury, sick leave and long-term disability which health employers forecast will cost the system $161 million for HEU members alone between 1992 and 1996.

Why the workload crunch? An HEU review of the New Directions program two years after it was launched indicates that:

- the demand for hospital services is still rising as population increases and doctors reap the benefits of a five-year contract that allows steady increases in physicians' income;
- B.C.'s hospital system, the leanest in Canada, is already far below the level of 2.75 beds (850 patient days) per thousand citizens recommended by the Royal Commission on Health Care and is still reducing;
- within that system, paid hours worked by excluded supervisory staff have actually increased while the paid hours worked by health workers have dropped;
- community services are still far from sufficient to make up for service reductions in the acute care sector.

"HEU supports the New Directions philosophy," says union secretary-business manager Carmela Allevato, "and we've done our share to reduce the acute care sector without layoffs as set out in the Employment Security Agreement.

"But it's time for the government to turn its attention to the powerful vested interests who so far haven't joined the reform process. Doctors and hospital administrators are, in some cases, standing in the way of health reform that will protect our medicare system."

HEU rejects the two-tiered system proposed by the B.C. Medical Association as contrary to medicare, Allevato said, "but reform of primary care delivery has to be a priority if New Directions is to succeed."

Health reform advocates like Dr. Michael Rachlis, co-author of two best-selling books on Canada's medicare system, agrees that at least part of the problem stems from the successful campaign waged by B.C. doctors to resist reductions to their share of the budget. Government efforts to impose a cap on doctors' billings led to a bitter confrontation that ended with a five-year agreement signed in August, 1993.

Rachlis charges that the agreement gave the doctors "everything they wanted" without tackling the tough question of how to deliver care effectively.

"Unless you create new models of primary care delivery, like community health clinics, you can't expect the system to be more efficient," Rachlis said in a recent interview. "If you just trim around the edges and don't deal with how services are delivered, you won't reduce illness or the need to use hospital beds."

A recent study prepared for Canada's federal, provincial and territorial deputy health ministers concluded that inpatient use of hospitals could be reduced from 20 to 40 per cent just by ending the "fee-for-service" system that sees physicians paid a set rate for every procedure they perform. Solving this problem would go a long way to reducing or resolving the acute care workload crisis.

MOCHRIE

But Rachlis and other health reformers warn that fee-for-service is only part of the problem and community clinics only part of the solution.

"We need a team medicine approach that focusses on prevention," Rachlis argues. "Without the right service early enough you get more hospitalization, particularly with the chronically ill and older people."

But alternative physician payment models are not on the BCMA's agenda, nor are they a major part of the five-year agreement achieved in 1993.

BCMA president Dr. Mark Shonfeld rejects suggestions that doctors won annual increases as a result of their agreement. Contributions to overhead are eaten up by inflation, he told the *Guardian*, so "at best we're revenue neutral or the salary level is kept frozen."

But he agrees that population growth and more services required to treat B.C.'s older citizens contributes to workload pressures in a tighter hospital system.

"You have tremendous pressures. We've been squeezing the inefficiencies out of the system by reducing bureaucracy and increasing the turnover."

He simply doesn't accept claims in the report of health deputy ministers that a large part of primary care is "inappropriate utilization" that could be weeded out.

"That may have been true years ago, when people were admitted to surgery the day before, but those inefficiencies have been largely eliminated."

He says the BCMA's work with the government on core services – the basic services all communities must have – and clinical practice guidelines, which are designed to reduce inappropriate procedures, will help reduce waste further. And the BCMA will explore alternatives to fee-for-service, provided that doctors have the choice to select the payment method they prefer.

SHERA

The agreement simply requires the BCMA to consult with government on possible pilot projects on alternative models.

John Mochrie, chair of the Medical Services Commission, argues that the agreement required significant compromise and commitment from both parties. The government asserted its right to control the Medical Services Plan budget, he notes, and physicians insisted on their right to determine what is medically necessary.

"The agreement says the government sets the amount of compensation, but doctors will have a say in managing that."

The final agreement includes a cap on fees in each year, but the doctors won an increase of 1.5 per cent in each of the first three years of the deal, two per cent in the fourth year and a re-opener clause "if inflation returns" to cover "office overhead."

Unlike the Employment Security Agreement negotiated with the health unions, which set targets for a real reduction in acute care services as programs moved to the community, the BCMA agreement requires no reductions in physician payments. It simply reduces the size of the increases.

To meet the new, lower targets, the government and the doctors agreed to several measures, including:

- a program of public education designed to reduce unnecessary use of the system;
- a program to reduce the numbers of new doctors;
- a program to reduce the number of services covered by the plan; and
- a program to introduce "clinical practice guidelines" to reduce inappropriate use of medical procedures.

All told, these programs are expected to reduce the increase in physicians' billings by $370 million over four years. (By contrast, the government believes the Employment Security Agreement will save taxpayers more than $450 million in just three years.)

Deborah Shera, executive director of the commission's resource management division, says education is expected to save up to $20 million a year. An important part of the program is support for doctors who take steps to discourage patients from insisting on unnecessary or inappropriate treatment.

The largest reductions, however, will come from clinical practice guidelines. Hospital workers are familiar with one form of the guidelines, which set out how particular types of patients should be treated once they are admitted. Doctors' guidelines are designed to control when a particular procedure – from a chest x-ray to screening for prostate cancer – is performed.

A guidelines committee including representatives from the commission, the BCMA and the general public identifies procedures that need guidelines, Shera says, then develops them with assistance from doctors. Areas currently under review include prenatal ultrasound tests, treatment of back pain, cholesterol testing and treatment of hypertension.

For example, a test for prostate cancer has been done up to 86,000 times a year in B.C., Shera says, but has a 70 per cent rate of false positive results. New guidelines will attempt to control what may be a worthless expenditure on the tests.

"It's important to allay concerns that we are compromising the quality of care," says Mochrie. "In fact, we should provide better care."

Elimination of unnecessary hospital work could help frontline caregivers deal with their workload crisis, providing their numbers aren't cut still further. In the meantime, acute care workers will be stuck carrying the full weight of health care reform while they wait for physicians and the community sector to catch up.

Hospitals hire more bosses as health workers downsize

It's official: the paid hours worked by B.C's hospital bosses have actually increased by almost two per cent during a year in which health workers saw their employment decline by four per cent.

The astonishing figures, which confirm the workplace experience of HEU members province-wide, were released in December by the Health Labour Adjustment Agency as part of a paid hours monitoring system required by the Employment Security Agreement.

Under that agreement, all three unions and administrators are to downsize by 10 per cent. But the bosses have been going backwards, adding to their numbers while they displaced front-line caregivers.

"These figures show that health care workers are doing their bit to assist in health reform," said HEU secretary-business manager Carmela Allevato, "but hospital administrators are actually increasing their paid hours while frontline caregivers face major reductions."

According to the agency's analysis, health care workers saw their paid hours decline by 3.62 per cent – the equivalent of 1,382 full-time jobs or 2.7 million paid hours – between December 1992 and July 14, 1994.

By contrast, non-contract employees say their paid hours increased by 1.9 per cent.

Health employers reacted to HEU's release of the agency report by condemning the union for "self-serving misrepresentation of the facts."

Gary Moser, president of the Health Employers' Association of B.C., said "the perceived 1.9 increase results from the employers success in reclaiming approximately 130 unionized positions that should have been non-union positions to begin with." (Most of the positions Moser referred to were those of head nurses which the B.C. Nurses' Union believes should be within union jurisdiction.)

Moser later attacked the health unions by charging that "they haven't met their targets either."

Doctors are guaranteed more work ...

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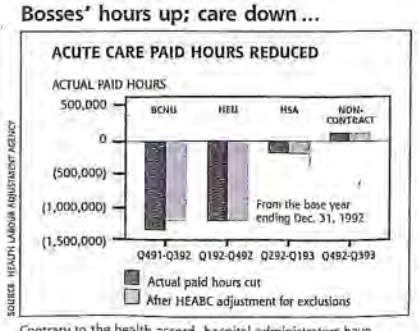
Bosses' hours up; care down ...



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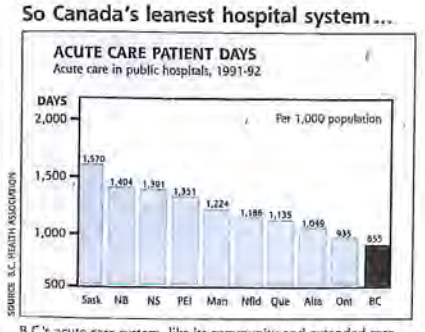
So Canada's leanest hospital system ...



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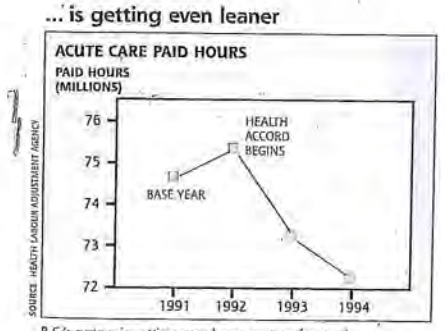

B.C.'s system is getting even leaner as transfers to the community and just plain tight money reduce the availability of hospital services and the workers who provide them.

The health care elite isn't pulling its weight

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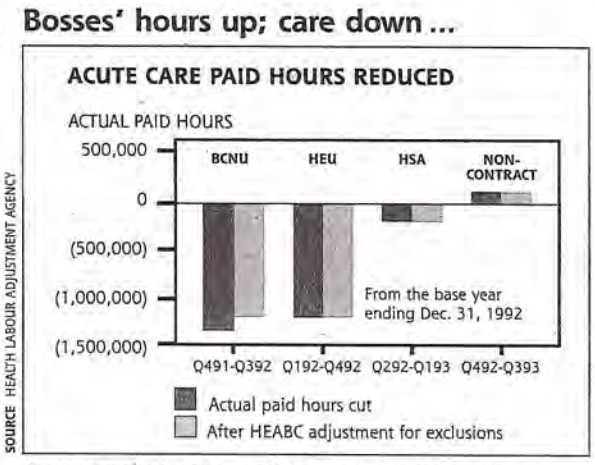

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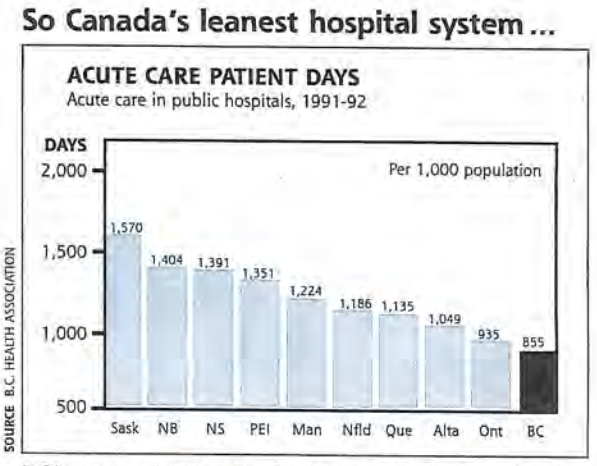

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Deborah Shera, executive director of the commission's resource management division, says education is expected to save up to $20 million a year. An important part of the program is support for doctors who take steps to discourage patients from insisting on unnecessary or inappropriate treatment.

The largest reductions, however, will come from clinical practice guidelines. Hospital workers are familiar with one form of the guidelines, which set out how particular types of patients should be treated once they are admitted. Doctors' guidelines are designed to control when a particular procedure – from a chest x-ray to screening for prostate cancer – is performed.

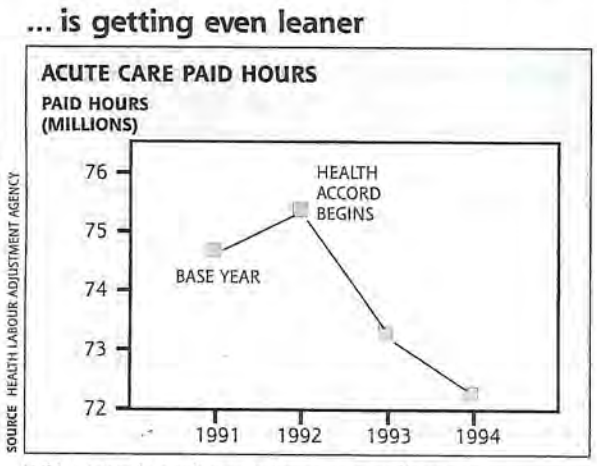
A guidelines committee including representatives from the commission, the BCMA and the general public identifies procedures that need guidelines, Shera says, then develops them with assistance from doctors. Areas currently under review include prenatal ultrasound tests, treatment of back pain, cholesterol testing and treatment of hypertension.

For example, a test for prostate cancer has been done up to 86,000 times a year in B.C., Shera says, but has a 70 per cent rate of false positive results. New guidelines will attempt to control what may be a worthless expenditure on the tests.

"It's important to allay concerns that we are compromising the quality of care," says Mochrie. "In fact, we should provide better care."

Elimination of unnecessary hospital work could help frontline caregivers deal with their workload crisis, providing their numbers aren't cut still further. In the meantime, acute care workers will be stuck carrying the full weight of health care reform while they wait for physicians and the community sector to catch up.

... is getting even leaner



B.C.'s system is getting even leaner as transfers to the community and just plain tight money reduce the availability of hospital services and the workers who provide them.

Hospitals hire more bosses as health workers downsize

It's official: the paid hours worked by B.C's hospital bosses have actually increased by almost two per cent during a year in which health workers saw their employment decline by four per cent.

The astonishing figures, which confirm the workplace experience of HEU members province-wide, were released in December by the Health Labour Adjustment Agency as part of a paid hours monitoring system required by the Employment Security Agreement.

Under that agreement, all three unions and administrators are to downsize by 10 per cent. But the bosses have been going backwards, adding to their numbers while they displaced front-line caregivers.

"These figures show that health care workers are doing their bit to assist in health reform," said HEU secretary-business manager Carmela Allevato, "but hospital administrators are actually increasing their paid hours while frontline caregivers face major reductions."

According to the agency's analysis, health care workers saw their paid hours decline by 3.62 per cent – the equivalent of 1,382 full-time jobs or 2.7 million paid hours – between December 1992 and July 14, 1994.

By contrast, non-contract employees say their paid hours increased by 1.9 per cent.

Health employers reacted to HEU's release of the agency report by condemning the union for "self-serving misrepresentation of the facts."

Gary Moser, president of the Health Employers' Association of B.C., said "the perceived 1.9 increase results from the employers success in reclaiming approximately 130 unionized positions that should have been non-union positions to begin with." (Most of the positions Moser referred to were those of head nurses which the B.C. Nurses' Union believes should be within union jurisdiction.)

Moser later attacked the health unions by charging that "they haven't met their targets either."

Health bosses against safer workplaces

by **Chris Gainor**

With health care bosses taking the lead, B.C. employers are trying to sink the Workers' Compensation Board's proposed ergonomics regulations, calling them expensive and unworkable.

The Health Employers' Association of B.C. is fighting tooth and nail against the changes because they are the first set of WCB regulations to directly attack the epidemic of workplace injuries.

"HEABC would like to have people believe that these regulations were pulled out of the air," said HEU health and safety director Karen Dean. "But in fact these regulations are based on sound ergonomic practice that comes out of the corporate world – including corporations like Ford and Kodak."

The explosive growth in health care injury rates and claims against WCB and long-term disability, prove that HEABC's arguments against the new ergonomics regulations are extremely weak.

Even HEABC's own Healthcare Benefit Trust agrees that they are weak.

The trust recently issued to employers a Back Health Resource Kit, which falls short of dealing effectively with the back injuries plaguing health workers.

But an analysis of the kit by HEU's occupational health and safety department shows the kit endorses many of the features of the same ergonomics regulations which HEABC is attacking.

Where the HEABC submission attacks the suggestion that rest breaks be increased as an "expensive, time consuming proposal," the trust says, "In general, it makes sense to get up and walk around during a rest pause, to have a change in scene, get a breath of fresh air, chat with people and so on."

'HEABC is abdicating its responsibility for the health of its workers'

Where the HEABC complains that a 33-question Risk Identification Checklist in the regs is a "substantial administrative burden," the trust's kit prints the same 33 questions as an example of what such a checklist should look like.

Another chart outlining questions for a job analysis is attacked by HEABC as having "far too many questions," yet the trust's kit contains a similar analysis which is more complicated and has more questions.

HEABC complains about employers having to consult with workers and with occupational health and safety committees, but the trust kit endorses employee involvement, saying that, "Employees truly understand the challenges within their own work environment ..."

And where HEABC pushes for two-person lifts in the case of mechanical lifts, the trust's kit quotes Vancouver Hospital's policy on lifts – "No physical lifting of patients will occur unless the use of a mechanical device is medically contraindicated."

In all, HEU's comparison of the HEABC submission and the HEABC Healthcare Benefit Trust's Back Health Resources Kit found 15 key places where the two documents contradicted each other.

"No ergonomist could write a manual for prevention of back and other injuries that does not draw heavily on the WCB's ergonomics regulations and code of practice," Dean said.

"HEABC is abdicating its responsibility for the health of its workers. The employers' attitude is totally irresponsible."

MUSH! Health employers and doctors are cracking the whip on health care workers to do more work with fewer staff. Health workers are on track to meet downsizing targets, bosses aren't.

Comparability, bargaining are the top priorities in HEU's balanced 1995 budget

HEU's Provincial Executive adopted in January a balanced $18.3 million operating budget for 1995 that provides for some new initiatives and allows the union to prepare for the key issues of bargaining an extension of the Employment Security Agreement and comparability, both of which come up for negotiation in 1996.

HEU financial secretary Mary LaPlante said it was a tough, lengthy process that involved some changes in existing programs. "It's an ambitious financial plan to meet the needs and goals of our members," she said.

LaPlante said she was comfortable with the outcome, but "it involved intense discussions with the Provincial Executive to set the goalposts on where we're going in the future."

In the key area of bargaining, LaPlante said the budget provides for a $700,000 special fund to begin membership mobilization around expiry of the Master Agreement and the ESA in March 1996, and to expedite first contract negotiations for new locals. In addition, the wage and policy conference will be moved up to October instead of early 1996.

Comparability is another key issue for 1996, and LaPlante says much of the preparation must be done this year in HEU's fight to win pay rates that are similar to the wages earned by B.C. Government Employees' Union members in the same job classifications who work directly for the provincial government.

The focus on comparability has required a shuffle of resources, LaPlante says. Summer school is one program that will be changed for this year. In place of the normal two-week education program with a variety of course offerings, HEU will hold a special comparability conference to begin to prepare local activists for what will be a hard fight to win wage justice.

The summer school change "was the most difficult decision the Provincial Executive had to make," LaPlante said. "But comparability is a major issue for members – it's money in their pockets."

She said other key programs in HEU's education program like shop stewards and occupational health and safety training programs will be continued in full.

The budget also incorporates programs and projects mandated by last October's convention. These measures include dealing with issues of equity within the union so that HEU can better reflect the broad diversity of the membership.

There's also funding for special convention-approved campaigns to deal with employers' workplace re-engineering schemes like TQM and patient focussed care. In addition a $100,000 local projects fund has been set up to assist HEU locals with financial resources to run campaigns on local issues.

To meet these priorities and the day-to-day contract servicing demands of a growing union, LaPlante said additional staff representative and clerical support positions will be created.

ANNUAL JOB POSTING

Staff opportunities for HEU members

Have you considered applying your trade union and technical skills to a staff position with your union? There are approximately 83 employees working at HEU's five offices throughout the province – many of them former health care workers just like you.

Conditions are good, and the jobs carry a full range of benefits. Wages range from $18.66 an hour for building services person to $22.77 per hour for secretarial work and up to $24.12 per hour for rep/organizer.

When working for HEU you must be on union leave from your facility, you still maintain your hospital seniority and you can return to your hospital job.

When vacancies for servicing representatives, researchers, communication staff, secretaries, accounting, building and maintenance persons occur, HEU attempts to fill the permanent positions with applicants from union members. Temporary employment for relief and holidays is also available.

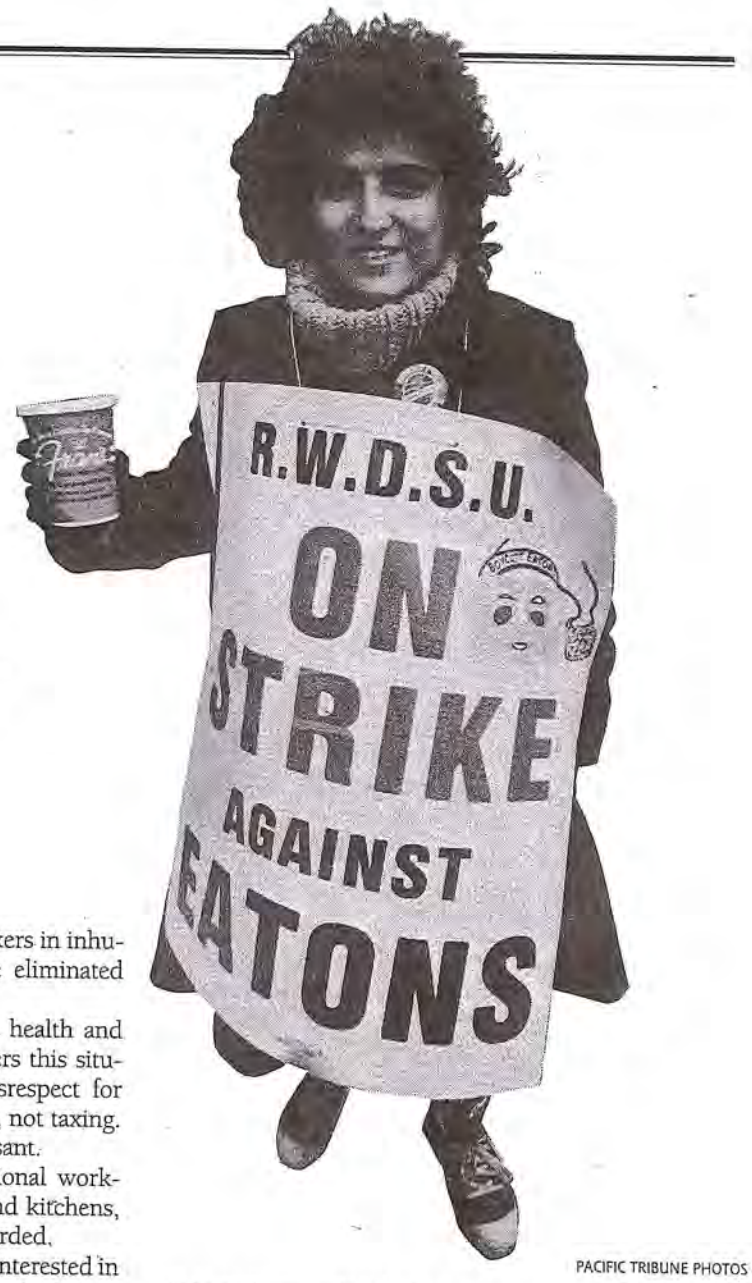
If you are interested, please submit a resume detailing your employment history, union experience, and a brief summary of your educational and personal background. Indicate your field of interest, work area (i.e., Prince George, Kelowna, Provincial Office, etc.) and whether you are interested in full-time, part-time or both.

Mark your envelope "confidential" and send your resume to Carmela Allevato, secretary-business manager, at the Provincial Office by March 3.

If you have applied under annual job postings in previous years, you must apply again and submit an updated resume in order to be considered.

We march for wages, for a better life for working people, and 'a sharing of life's glories'

International Women's Day born from women's workplace struggles



PACIFIC TRIBUNE PHOTOS

by Mary Rowles

ON MARCH 8, 1907, 15,000 women marched in the streets of New York city. They demanded an end to the abuse of children through the practice of child labour. They demanded improvements in the brutal and dangerous working conditions of the New York sweatshops, and they demanded a fair day's wage for a fair day's work – and an end to pay inequities. They demanded the right to vote.

This was neither the first, nor last time that working women took to the streets to assert their rights, particularly in an era when women were denied the vote, had no access to legislatures to effect change, and were scarcely represented in the trade union movement.

As the women marched, they invoked the memory of the women garment workers of New York City who, 51 years earlier on March 8, 1857, occupied the same streets to protest inhuman working conditions and callous disregard for safety that caused the deaths of 64 women and children in a fire at the Triangle Shirt Waist Factory.

They didn't know it at the time, but their demonstration for basic justice would mark the first celebration of International Women's Day.

It would be a day borne out of the protests and political activism as working women entered the industrial workforce at the beginning of the 20th century. It would be a day for women to celebrate and reflect on the status of their progress and to consider further action still required to end injustice and discrimination.

From that day in 1907 and the struggles of women around the world, March 8 had become a traditional day of protest for working women and was formally proclaimed International Women's Day. It has been observed, if not celebrated, in countries around the world since then.

The day belongs to working women, and has brought together trade unions, left and progressive organizations and non-aligned community-based groups to advance demands for the equality of women.

But sadly, many of the demands of the demonstrations and marches of 1857 and 1907 are still featured prominently on the flyers and banners of International Women's Day events a century later. That's great for recycling, but bad for morale.

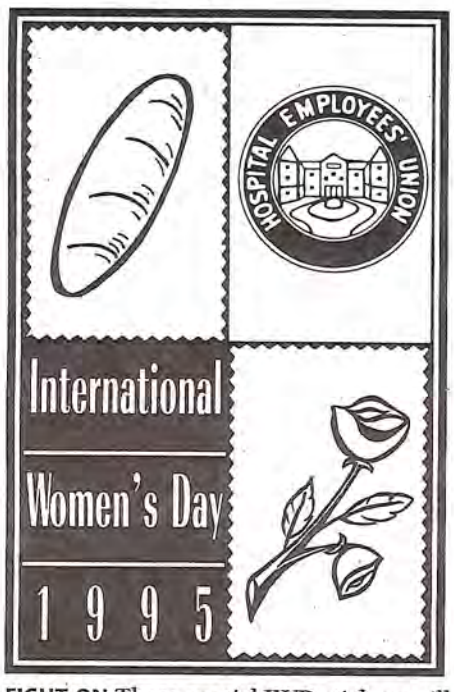
Granted we have legislated an end to child labour at least in some countries, but we certainly haven't succeeded in halting the exploitation of workers in inhumane, unsafe workplaces, nor have we eliminated wage discrimination against women.

Our economy has little regard for the health and safety of workers, and for women workers this situation is made worse by a sustained disrespect for women. Our work is assumed to be easy, not taxing. It is supposed to be safe, simple and pleasant.

The health hazards of women's traditional workplaces, the hospitals and offices, stores and kitchens, are often unrecognized, as well as unrewarded.

Employers and governments remain uninterested in the long term effects on workers' health, of the new technologies, work processes, equipment and chemicals introduced to women's workplaces. Sick building syndrome, even repetitive strain injuries, are still regarded by many "authorities" as the products of women's imagination.

Far too many working women continue to be victimized, harassed, and verbally and physically assaulted by employers, by members of the public, by clients and patients, and by co-workers.



FIGHT ON These special IWD stickers will be distributed to HEU members to wear in the workplace March 8. Women's Day marches and rallies advance the cause of justice and equality for all women workers.

The wage inequalities between men and women workers have changed little over the past century, when male employers were quite open about exploiting women workers.

Take one boss who boldly declared in 1920 that he didn't "treat the men bad, but I even up by taking advantage of the women. I have a girl who can do as much work, and as good work as a man; she gets $5 a week. The man who is standing next to her gets $11."

The practice of paying women a lower wage for the same work is no longer accepted, but it persists in many workplaces in a hidden way. Often the identical nature of the work performed by men and women in a single workplace is camouflaged by a difference in job titles that justifies a substantial difference in pay.

Over the last century, wage discrimination has been institutionalized in our economy. Men and women are segregated in different occupations. There are men's jobs and women's jobs in our economy, and there are men's wages and women's wages.

This allows government representatives and economists to say, with a straight face, that women receive lower wages because they work at lower paid jobs. It's an explanation that neatly avoids any examination of the fact that women's jobs are lower paid simply because the work is done by women.

In 1911 women earned 53 per cent of men's wages; now, in 1994, women still only earn about 72 per cent of men's wages.

In 1857, the women garment workers returned from the streets to their workplaces and organized themselves into a union. The lesson for women in succeeding years has been to organize the power unionization brings. This has been the greatest tool in achieving permanent improvement in the lives of working women.

Women have secured some important legal rights. We have the vote. We have some presentation in the legislatures. The legal balance of power has changed to a degree, but the most important change in power has been the organization of women into trade unions. The power unionization brings has been the most important tool in achieving permanent improvement in the lives of working women.

At the bargaining table, women workers are securing pay increases, pensions and benefits, health and a safety protection, family leave provisions, child care provisions, and access to training and jobs. And trade unions have helped secure these improvements in legislation.

But there is still reason to march. Pay equity, that long-standing demand for an end to wage discrimination, will end the poverty of working women.

On International Women's Day, we still march for bread and roses, as the lyrics of the old song go. We march for wages, for a better life for working people, and "a sharing of life's glories."

• *This International Women's Day feature is an updated version of a story by B.C. Federation of Labour research director Mary Rowles that first appeared in the Guardian in 1991.*

WORKING CLASS SCRAPPER Super Bario, at right in a sea of police, is a symbol of discontent in Mexico. A popular left-wing political figure, the masked man fights for the underdog in the battle for justice and democracy.

FRIDA HARTZ/LA JORNADA PHOTO

Wrestling with trouble

The free falling peso capped a year of chaos in Mexico

by **Stephen Howard**

LAST YEAR was a troubled one for Mexicans. First the country erupted in rebellion with the Zapatista uprising in the dirt-poor Chiapas region timed to coincide with the start of the North American Free Trade Agreement.

Then the shoe-in candidate for president was riddled with bullets. The assassination sparked a coverup controversy amid speculation that the execution was ordered by elements of his own party.

The carefully stage-managed late summer elections that followed hid widespread electoral fraud from North American observers and made it seem that the country finally had its democratic opening. But the hotly disputed results for many state governors rekindled the Chiapas conflict and pushed Mexicans closer to the barricades.

Finally, the peso hit the sewer.

¿Que pasa? – what's happening – is a question a lot of Mexicans were asking about events in their country. But there weren't a lot of clearcut answers, says Mexican economist Salvador Peniche.

"One of the common points shared by all Mexicans is that no one knows what's going on," said Peniche in a mid-December interview.

Politically, Peniche says the assassinations of top figures of the normally tightly-knit ruling Institutional Revolutionary Party are a sign of unparalleled conflict within the party that's run Mexico with an iron hand for decades.

He said the party is divided into two confrontational camps. One side, linked to former president Salinas, is pushing economic modernization plans, like free trade, accompanied by a more democratic and open society. The other camp, popularly labelled the dinosaurs, supports economic changes but not a fairer redistribution of wealth, and vehemently opposes democratization.

Who's winning the battle? Without doubt, says Peniche, the dinosaurs are.

While newly-elected president Ernesto Zedillo officially holds the reigns, behind the scenes it's the hardliners, who Peniche says also have shadowy links to the country's drug barons, that control the power and set the government's agenda.

PENICHE

"If something is clear in these political assassinations," says Peniche, "it's that the dinosaurs did the killing."

Mexico's powerful elite pitched free trade as the magic answer for severe economic problems. But, at the end of the deal's first year there wasn't a lot to celebrate.

According to Mexican analysts, the much-heralded trade deal has not helped solve but only worsened serious economic and social injustices borne by Mexican working people.

"We've lost more than we've gained," says Bertha Lujan about NAFTA's first year. A trade union activist, Lujan is with the Mexican Action Network, an organization that, like our own Action Canada Network, fought for a fair trade deal between the three countries. Now MAN monitors the day-to-day impact of NAFTA on the Mexican economy.

In a highly critical report that received surprisingly wide media coverage in December in Mexico's tightly controlled media, MAN says the Mexican government hasn't delivered on promises of growth, jobs and prosperity. Neither is any headway being made to solve serious social problems facing working people that were the "cost" of getting Mexico ready for a formal free trade agreement.

"In Mexico small and medium businesses sustain the economy," Lujan said. Yet this key sector of the economy that employs 80 per cent of Mexican workers is the one most affected by a flood of cheap U.S. imports.

In the first four months of 1994, 75,000 manufacturing jobs were lost, entirely in small and medium industries.

It mirrors Canadian workers' experience from the first free trade deal with the U.S. when hundreds of thousands of manufacturing jobs disappeared.

"The widely-advertised hope that NAFTA will create jobs is false," says the MAN report. "More jobs are being lost than created."

The jobs question is particularly volatile says economist Peniche. Just to keep pace with population growth, "we need a million new jobs a year," he said. "But the government has promised only 250,000 new jobs for 1995, not including the ones that will be lost to NAFTA."

Peniche notes with irony that small business owners are emerging as the strongest opponents to free trade.

One outcome of the trade policies put in place to prepare for NAFTA is concentration of wealth. Under the rule of former president Salinas that ended in November, Mexico's billionaire club

NAFTAmath:

Why Mexico's currency took the big plunge

by **Maude Barlow & David Robinson**

One year after the implementation of NAFTA, the "winner" in the deal is in crisis. Not long ago, Mexico was touted as the economic dynamo of Latin America. Today, the peso has lost a third of its value and emergency austerity measures threaten to stall economic growth.

What caused Mexico's star to fade so quickly? While NAFTA is not the only cause of the crisis, free trade did accelerate the run on the peso. Despite the promised benefits of NAFTA, Mexico's current account deficit ballooned to $28 billion by the end of last year.

The privatization of state-owned enterprises helped offset the effect of this outflow of capital, but only temporarily. In fact, the peso should have been devalued earlier, but the Mexican government hesitated, afraid to jeopardize first the signing of NAFTA.

The recent decision to let the peso "float" on the world's money market attracted international speculators, contributing to the currency's unsteadiness.

BARLOW

Then, political instability in Chiapas resurfaced late last year. When foreign investors got word that Mexican billionaires were selling off pesos, they quickly cashed in their portfolios, rapidly driving the peso through the floor.

Now Canada has committed $1.5 billion to support an austere stabilization plan. The package announced by President Zedillo includes privatizing public services, spending cuts, wage controls and interest rates boosts.

These steps, however, do nothing to address the fundamental problem in the Mexican economy – the growing gap between rich and poor, the erosion in social services and the steady decline in wages. Canada's response to the crisis holds two lessons. One is that the government, rather than pressing for a regulation of the foreign exchange market, is itself acting as a speculator by loaning Mexico $1.5 billion at an inflated rate of return.

The second lesson is that the Bank of Canada can intervene to control interest and exchange rates. Paul Martin has promised deep spending cuts in the next budget because interest rates are out of our hands."

But isn't it odd that the Bank of Canada can impose onerous conditions to steady the peso and yet be unable to take progressive measures to help stabilize Canada's deficit by financing more of the debt and controlling interest rates?

This is not to suggest that Canada should have done nothing. But we could have made our loan contingent upon the Mexican government addressing issues of human rights, poverty and unemployment. By ignoring these fundamental problems, we are simply delaying another major crisis.

• *Maude Barlow is the volunteer national chairperson of the Council of Canadians. David Robinson is a researcher and campaign co-ordinator with the council.*

grew from one member to 24 in the space of six years. Half the population, 40 million Mexicans, live in poverty.

While the billionaire club was growing, real wages for Mexican workers continued to fall. In the first four months of 1994, industrial wages declined by four per cent. "The reality is that NAFTA has not helped to improve salaries, and for its very logic, it does not appear that it will do so in the future," Lujan says.

'There will be a social explosion if the distribution of wealth isn't changed'

The promise of jobs through increased foreign investment has been a bold faced lie. 1993 was a record breaking year for foreign investment in Mexico, but it was also a year of massive job losses.

"Yes, we have new investment," she said, "but it's parasitic, speculative investment mostly in the Mexican stock market, not in productive industries."

Another measure of NAFTA's failure are the special accords that were supposed to protect workers' rights. Lujan's group argues that violations of basic rights for workers – to organize, strike and bargain collectively – continue to increase especially when they involve workers of foreign multinationals.

TRADE WATCHER Berta Lujan, above, says Mexico has lost more than it's gained after year one of NAFTA. One major loss has been jobs, especially at small businesses. A U.S.-style instant print service would be a death notice for hundreds of jobs at this plaza of small printing shops in Mexico City.

STEPHEN HOWARD PHOTOS

ABOUT THE only good thing about the peso plunge is that it spared a blood bath in Chiapas. And that sits fine by Luis Manuel Ortiz.

In mid-December, as the Zapatista rebels sparred with the Mexican government over the fraudulent election of the Chiapas state governor, the Mexican army went on red alert to put an end to the insurgency once and for all.

Ortiz is an activist in a Mexico City assembly of working class neighbourhoods, called barios in Spanish. The bario assembly was also on red alert. "If war breaks out we're ready to mobilize to support the Zapatistas," Ortiz said.

The bario movement grew from the aftermath of the devastating mid-1980s Mexico city earthquake that caused widespread homelessness. A decade later, 500,000 people in the city are without housing and two million more live in intolerable conditions.

Tied to Mexico's left-wing opposition, it's dedicated to basic community issues like housing, education and social services and democracy.

Ortiz cut his teeth politically in the fight to build the 900-family cooperative housing complex where he still lives in an industrial area in the late 1980s. From the ground up it took demonstrations and occupations to build it, obtain water, sewers and electricity and basic social services like a community school.

Ortiz also has a Clark Kent identity. He's one of a handful of progressive activists who wears the brilliant red masked costume of Super Bario – an immensely popular political figure who fights for the underdog and powerless.

Super Bario is a working class anti-hero born from Mexico's popular wrestling culture but with a modern political intent. You see Super Bario leading political rallies, camped outside of city hall, or in the ring at political wrestling matches where he takes on corrupt politicians in a battle of good versus evil with a twist.

"The image of Super Bario was born to be a different symbol for Mexico. Not Batman, not Superman, but a Mexican one that's honest and fights for justice," Ortiz says. "He's real, he doesn't have a body of steel, he eats tamales and fights the landlord and city government. He's a fighter and politician and he represents the mistakes and virtues of working people."

While Mexicans are unclear about what's gone on last year, they're equally uncertain about where things will go in the future.

Peniche says that the pressure for economic and social change and a move to democracy is mounting.

And if it doesn't happen soon "there will be a social explosion if the distribution of wealth and power isn't changed," he says. "All the warning signs are there."

• *Howard, the Guardian's coordinating editor, travelled to Mexico in December and met with a number of political activists.*

VOICES IN VERSE

Lament of a Latex Allergy Victim

by **Mary Ellen Beavers**

Latex is found everywhere
It is in our food and underwear
It is in our shoes and in the air
It is in our cosmetics and in our hair

Latex is in our work and play too
It is even in the gum we chew
Latex invades our love life too
It makes us wonder what to do

Yes latex abounds everywhere
It is in our bed and in our chair
Latex has many names and faces
It hides in unexpected places

Latex robs us of our
careers and health
It makes us feel unwarranted guilt
Latex gives us rashes, red eyes and welts
It is the utmost evil of all stealth

Latex is everywhere we sigh
It makes some people think we lie
Latex makes us sneeze, wheeze, and cry
Sometimes it even makes us die!

• *Beavers is a Kelowna care aide who suffers from a severe latex allergy.*

I Have Known Women

by **Lisa Schmidt**

I have known women
who learned to kill chickens
with a quick snap of the wrist
who smile lovingly
as they pluck the feathers
and thank the heavens for food

I have known women
who left the mainland
searching for soft breezes
and the love of men
and finding them,
lived pruned and ensnared
like rose bushes
behind white picket fences
only nodding sadly
in the sudden gusts
of late afternoon wind

I have known women
who plant seeds in the earth
and in the hearts of children
children who go on to love with
hearts as big as stars
as deep as night

I have known women
who danced barefoot
in candlelight
on dusty persian rugs
who bared their souls to me
over wine
over lunch
over and over again

And women
who, like myself
are quiet
seem uncertain
who love life
and friends and apricots and cats
but who stay off the stage
out of spotlights
and conversations
just to be safe
wounded so deeply at so young an age
that the scars have become dimples
others mistake
for laugh lines

• *Lisa Schmidt is a poet and freelance writer who lives in Toronto.*

Don't think of me as that

by **Elana Hansen**

Don't think of me as that
money hungry, uneducated, whiny
staff member at the Nursing Home!

Give up the thought that
I don't have a degree or
years of education!
Maybe I have
and just plain picked this job!

But you don't think of me
like that!

Hey! Maybe you could
think of me
as the first person
Momma sees in the morning
the one that says, "Morning Pretty Lady,
can I help you get ready
for the day?"
I could be the one that
combs Dad's hair
gives him a shave, pats on the aftershave,
and tells him, "There, you look marvellous Darlin!"
Or gives him that backscratch he's
been asking for all evening, but not
before I tell him, "You men are all
the same."

You could also think of me
as the one that gives Mom
a hug and says, "Don't worry about it,
that's what we're here for!"
And gives her her goodnight kiss
before turning out the light!

Occasionally you could think of me
as the somebody that sneaks in
the big bag of popcorn you found
in Mom's drawer
or those chocolate bars she loves so much!
I might even be the one
that takes Mom's clothes home to wash
just to help her out!

And very often you could think of me
as
the first one to notice Dad just isn't himself, isn't looking very comfortable
hasn't eaten his usual and definitely doesn't want what you just offered him!

Sometimes you should think of me
as someone who puts on the soft music,
dims the lights and holds Daddy's hand
until it's time for him to go

Most often
you could think of me
as the nursing home staff member
that goes home from work, rubs herself
from head to toe with A535,
pops a couple of Tylenol and slips off to sleep
with the heating pad on high!

You don't have to think of me
like this

But you could!!!!

• *Hansen is a nursing home worker in Leduc, Alberta and a CUPE member.*

POETS' CORNER

FEB. 27/28
HEU table officers meeting, Lower Mainland coastal region, Vancouver.

MARCH 2/3
HEU table officers meeting, Lower Mainland central region, Vancouver.

MARCH 6/7
HEU table officers meeting, Vancouver Island south, Victoria.

MARCH 8
International Women's Day.

MARCH 9/10
HEU table officers meeting, Vancouver Island north, Nanaimo.

MARCH 13/14
HEU table officers meeting, North, Prince George.

MARCH 14 – 16
Introductory shop stewards course Okanagan region, Kelowna.

MARCH 20/21
HEU table officers meeting Okanagan north, Kamloops.

MARCH 22/23
HEU table officers meeting, Okanagan south, Kelowna.

MARCH 27/28
HEU table officers meeting, Fraser Valley region, Abbotsford.

MARCH 28 – 30
Introductory shop stewards course, Kootenay region, Castlegar.

MARCH 29/30
HEU table officers meeting, Lower Mainland centennial region, Vancouver.

APRIL 3/4
HEU table officers, Northwest, Prince Rupert.

APRIL 4 – 6
Introductory shop stewards course, Prince George, Northern region.

APRIL 5/6
Introductory occupational health and safety seminars begin with the Okanagan region.

APRIL 10/11
Introductory OH&S seminar, Lower Mainland region.

Ottawa's block funding plan a real threat to social programs

According to media reports, the government is considering a proposal to move to block transfers to the provinces, eliminating federal funding for social programs under the Canada Assistance Program and Established Program Financing.

Under this proposal, there would be a significant reduction in the global amount allocated to federal funding of social assistance, health care and post-secondary education. The federal government would lose the power to enforce national standards and universality in these critical areas.

CUPE National president Judy Darcy has sent an urgent message to Prime Minister Jean Chretien opposing this proposal.

"With rising inequality in incomes and living standards across the country, it is now more important than ever to maintain and exercise this federal power," said Darcy. "If anything, we should be moving toward strengthening the federal government's financial commitment to social programs."

The government's dispute with Alberta over public funding of private medical clinics demonstrates the importance of maintaining the federal ability to enforce national standards.

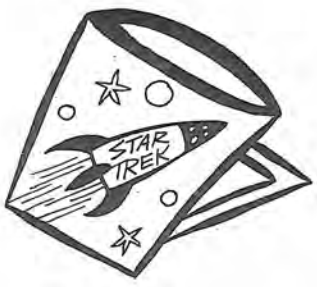
What's wrong with block funding? Three key things says Darcy:

- By reducing federal transfers and surrendering federal power to enforce national standards, the shift to block funding would further erode the public services that Canadians depend upon most directly.
- Abandoning of federal cost-sharing under the Canada Assistance Plan will eliminate the fifty-cent dollar incentive for provinces to develop new programs, and maintain existing ones. This will likely create an insurmountable barrier to the creation of a national child care program.
- The end of direct cost-sharing for welfare means that federal transfers to the provinces will no longer increase when provincial welfare costs go up. This is particularly serious in light of the recent – and proposed – cuts to Unemployment Insurance which will force more and more people onto welfare.

'The proposal would unleash a race to the bottom'

Said Darcy, "I am fearful that the proposal would unleash a "race to the bottom" as provinces use their increased discretion to further cut jointly funded social programs.

Coffee break



All stories guaranteed factual. Sources this issue: CALM.

What a Mickey Mouse idea

Japan Airlines flight attendants are wondering if their bosses are from another planet, like maybe Pluto.

JAL has painted huge Mickey Mouse and Donald Duck characters on three jets. And they want flight attendants to wear Mickey Mouse ears on the job.

Their union is protesting.

A royal event

Where would you think that a conference on cuts to Canada's social programs that involved government officials would be held?

In a simple community hall? No. Maybe a hotel? Forget it.

Well, how about a castle in the English countryside? Bingo.

It's true. Queen's University in Kingston sponsored a think-tank on reforming Canada's social programs last December.

Lloyd Axworthy was there along with some high-flying business and academic leaders.

They yakked about the plight of Canada's poor and unemployed in the gentile confort of Herstmonceux Castle, south of London. No castles in Canada, eh? Pity.

Ontario lawyers rah rah Rae days

Ontario's so-called social contract law imposed on public sector workers has turned into another gold mine for the legal profession, generating dozens of costly and often absurd disputes.

Who says so? Labour lawyers themselves!

Some of the legal wrangling results from the ambiguity of the hastily patched together law.

"There's something absurd about taking 30 days of arbitration to determine the meaning of something that took two or three days to draft," said a Toronto arbitrator recently.

Gainers workers docked for each flush

Workers at the Gainers meat packing plant in Edmonton are now being docked pay for the time they spend in the washroom. Their union is fighting the "pay-for-pee" policy.

"Our members are wild about this," said UFCW local 28 president Dan McGee.

Women members are particularly outraged at the degradation of having to explain their personal needs to supervisors.

HEU people

In memory of Stuart Lake activist Bruce Amyot

HEU members at Stuart Lake Hospital in Fort St. James are mourning the death of maintenance department worker Bruce Amyot, a union activist and the husband of local chairperson Sue Amyot.

Amyot made a great contribution in preparing a petition to stop bed closures. He held the chief shop steward position for several years and even was brave enough to run against his wife for the chairperson position, which Sue won.

Amyot was born in Montreal, Quebec. An accountant by training, he lived most of his life around Montreal and Huntington, Quebec, where he attended Huntington Academy and Sir George University. He obtained his degree in accounting. Amyot loved music, art, playing the clarinet and saxophone, and was very creative in many ways.

The Amyots moved to Prince George in 1967 and then to Fort St. James in 1969 – Bruce was working for Ben Ginter and then B.C. Rail before starting his own bookkeeping and accounting business. In 1978 he started working at Stuart Lake Hospital, in the maintenance department, where he was until his death.

The hospital was a wonderful atmosphere with Bruce around. He was known for handing out candies and sweets, telling great jokes, making unique signs and posters and being the best smelling man around. For several years he organized and was head of the hospital recreational softball team.

Bruce had many friends from all walks of life – had a great sense of humour, very generous, would never see a person go without. His smile, jokes and great personality will be missed by everyone.

AMYOT

Helga Peters says goodbye to Noric House

Helga Peters, a housekeeper since 1981 at Noric House, a long-term care facility in Vernon, retired last year.

Fighting ill health, Peters had to go on long-term disability, although she had hoped to work till age 65.

"HEU always treated me fair and square," said Peters, who plans to enjoy life and maintain good health.

Russell, Zahara depart Chilliwack General

LPN Lorainne Russell and housekeeper Theresa Zahara retired last year from Chilliwack General Hospital.

Russell, a local shop steward and trustee for a dozen years, starting working at the hospital in 1967, and had been a member of HEU since 1960. She plans to travel extensively in the southern U.S.

Zahara says she made a lot of friends during her 14 years at the facility. She plans to "enjoy my family."

Ponderosa's Johansen dies suddenly

Ponderosa Lodge members are marking the death of one of their members, Isabel Johansen, who died November 14, two days after her last shift. An HEU member since 1986, Johansen "inspired everyone by her tenacity and her courage to perform the duties of her job," said Ponderosa local secretary-treasurer Teresa MacIsaac.

Clearwater receptionist bids adios, has big plans

Loisann Sonneson, a receptionist at Dr. Helmcken Hospital in Clearwater, retired in November after 17 years of service.

"My husband has been retired for three years now, and I'm ready to join him," Sonneson said in an interview published in the local paper.

What's she got planned? A little fishing, a desire to visit all the observatories in North America, cross country skiing, more time to spend with her family, and possibly a visit to the birthplace of her mother in Russia.

"I will miss my co-workers and especially the patients. They have been like an extended family for years," said Sonneson, who was honoured with a retirement dinner.

Hail the new billionaires!

The world gained 47 new billionaires in 1993.

Children around the world may be dying of preventable diseases, and even in first world countries like Canada people go homeless and hungry. But the rich keep getting richer.

The total number of billionaires world-wide now stands at 358.

Five of them live in Canada, 120 in the U.S. and 24 in Mexico.

The Canadian billionaire barons and their "worth" are:

- Kenneth Thompson, $5.2 billion (newspaper chain owner);
- New Brunswick's Irving family, $4 billion (they own their native province);
- Charles Bronfman, $2 billion (Seagram's liquor boss);
- Ted Rogers, $1.3 billion (cable TV);
- Galen Weston, $1 billion (grocery store president).

How words undermine lefties

More than one-in-ten people are born left-handed.

Yet this natural-born tendency has been viewed with disdain in most cultures, and many common items like scissors, pencil sharpeners, vegetable peelers and golf clubs are designed specifically for righties.

Even the word left has negative connotations in many languages.

In French, the word for left is *gauche*, which also means awkward.

The Italians say *mancino* (deceitful), the Germans *linkisch* (clumsy) and the Russians *na levo* (sneaky).

In English, the word comes from an Anglo-Saxon root, *lyft*, which means weak or broken.

The Spanish say *no se zurdo* to tell someone "don't be stupid," but it translates literally as "don't be left-handed."

The $20,000 slogan

Believe it or not, but amid high unemployment and the Liberal's plans to gut unemployment insurance, the federal government dropped a fast $20,000 market testing new slogans to decorate the walls of UIC offices across the country.

Most of the people involved in the study weren't able to find a promise of service in the test slogans.

Even those who could still saw the department with a mixture of distrust and disbelief.

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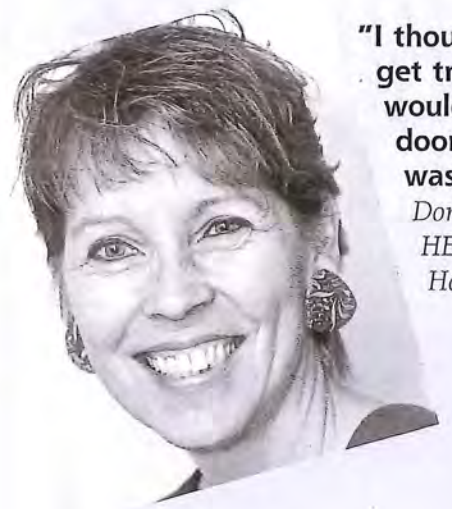

"I thought I would get training that would open new doors for me. It was fantastic!"
Doreen Hiebert, HEU Menno Hospital local

"Knowing more about computers will give me a greater edge in getting a job."
Linda Fuerst, HEU Merrit local

Training opportunities for health care workers

You can develop new skills to be part of the change in B.C.'s health care system.

All regular health workers covered by the Employment Security Agreement can apply for training assistance through the Health Labour Adjustment Agency to learn new skills or prepare for a new job.

The HLAA and your employer will cover the following costs for approved applicants:

- wages and benefits for a maximum 26-week training program;
- tuition, books and materials;
- transportation and accommodation;
- childcare;
- preapplication career counselling and vocational assessment to help you sort out all your options.

What's the catch? Your application for training must meet a labour adjustment purpose, as determined by the HLAA.

That means avoiding or reversing the displacement of a worker at your facility, or creating a vacancy to be filled by a displaced worker from outside your facility.

Find out more about training opportunities. Contact your HEU representative on your local Health Reform/Labour Adjustment Committee, or contact the HLAA hotline, 660-9400 (Lower Mainland) and 1-800-667-9116.

An important part of progressive health reform

Guardian

VOL. 13 NO. 1 THE VOICE OF THE HOSPITAL EMPLOYEES' UNION JANUARY/FEBRUARY 1995

Fighting wage controls

Quesnel Alcohol and Drug workers hit the picket line Jan. 31 after Victoria's "wage guidelines" blocked their bid for a fair contract.

PAGE 3

Corporate piggies

While Chrysler was winning the race of Canada's top tax dodging companies, the B.C. Federation of Labour demanded action to end Canada's lavish system of corporate tax breaks and handouts.

PAGE 7

Workload crunch

Powerful elites like doctors are standing in the way of health reform. For HEU members that means escalating workloads that have never been so intense. A Guardian feature,

PAGE 8

It's women's day

International Women's Day is celebrated around the world March 8. It's a day that was borne out of women's workplace struggles.

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