Guardian

NOVEMBER/DECEMBER 2000 • VOL. 18 NO. 4 HOSPITAL EM ION

Victory, Victoria

Health care workers in the capital city rack up a major win.
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Getting ready to bargain

At HEU's 15th Wage Policy Conference 900 demands from locals around the province were a starting point for delegates.
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Health care action plan

NDP makes major funding commitment. **PAGE 3**

Caregivers must have input

An HEU study shows how a new model for caring for people with dementia can work. **PAGE 8**

Closure imminent

Burnaby hospital is closing down Cascade, the largest single closure since Shaughnessy.
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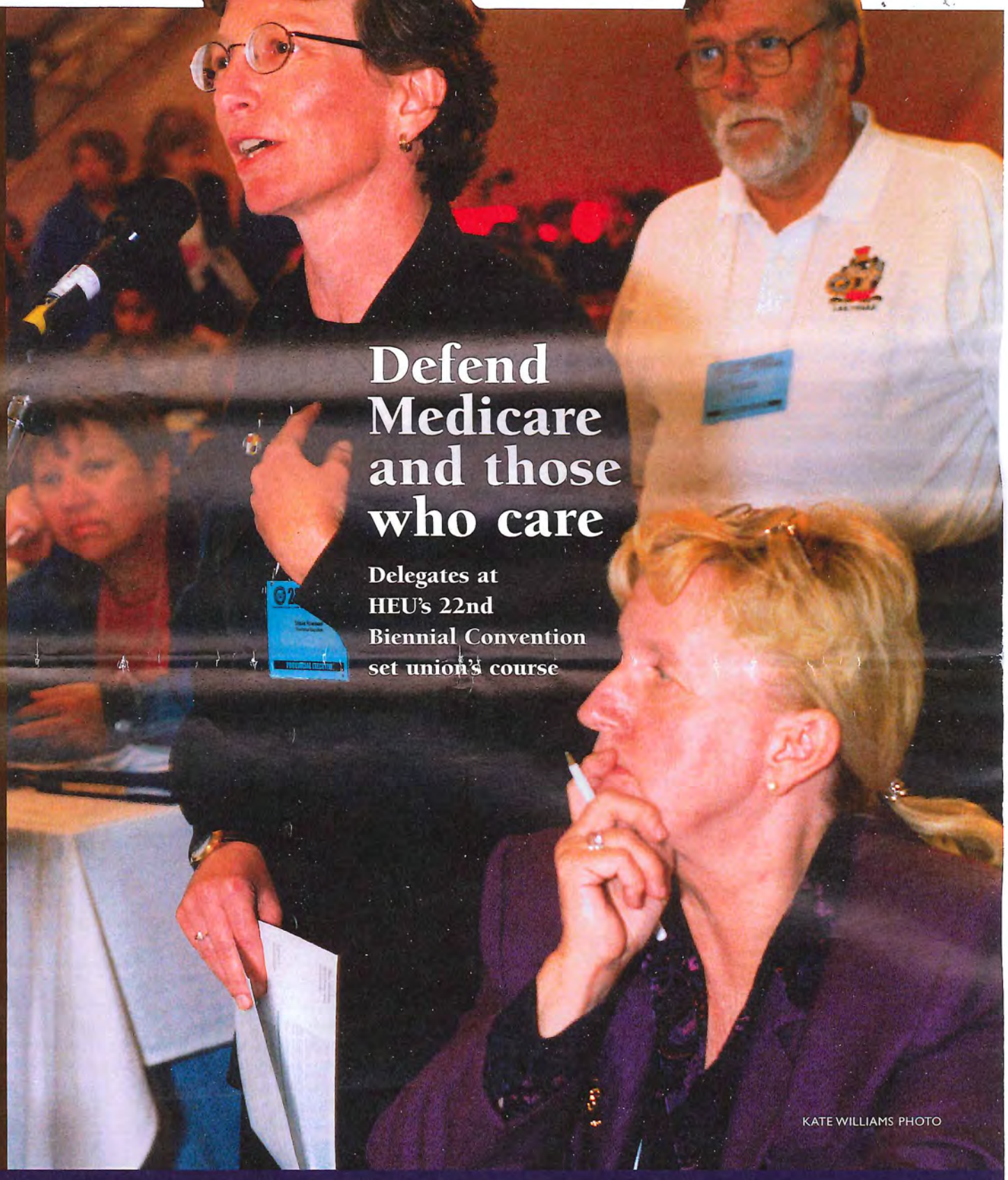

Defend Medicare and those who care

Delegates at HEU's 22nd Biennial Convention set union's course

KATE WILLIAMS PHOTO

Provincial Liberal leader Gordon Campbell

STEPHEN HOWARD PHOTO

MOVING TO THE MIDDLE?

In an interview with the *Guardian* Gordon Campbell announces some surprising policy shifts on a variety of health care issues. Is the opposition repositioning itself to win votes? **PAGE 16**

COMMENT

Politicians got the message – no two-tier

by **Chris Allnutt**

ONE OF THE lasting images of the recent federal election campaign is that of Stockwell Day holding up a hand-made sign saying "No two-tier." Even though the election results were disappointing, that picture represents a sweet, sweet victory for HEU and other Medicare advocates.

Along with CUPE and other unions right across the country, HEU has been fighting tooth and nail against the notion that our health care system is not working and we can fix it by privatizing parts of it. In other words, converting it to a two-tier system. This slogan – "No two-tier" – comes from the people leading this fight to save Medicare. And that includes HEU – front and centre.

Medicare advocates were in politicians' faces all during the election campaign, applying pressure wherever and whenever we were able.

That the most right-wing of the political parties would find it unacceptable to say, "Yes, I think it's all right to privatize some parts of health care," means we had a significant impact on the direction taken by the election campaigns of all the political parties. Health care became the leading campaign issue, and no politician – publicly – supported a two-tier health care system. It would have been political suicide, and they knew it.

'Health care became the leading campaign issue'

Of course, Day did not become prime minister. Chretien did. Now we need to do everything we as a union and part of the labour movement can do to make sure that the politicians in power deliver on their commitments, that they remember what Canadians want – a public health care system that has been revitalized by restoring transfer payments back to the provinces.

Federal politicians are not the only ones who are feeling the heat, either.

The interview with Gordon Campbell in this issue of the *Guardian* reflects that pressure. He knows who will read the interview, that HEU members are among the strongest of Medicare's advocates, and that we will defend our hard-won gains of the last 10 years. Gains like job security and comparability.

We should be cautious about accepting his pronouncements at face value. We will remain vigilant about what he and his caucus members say to others about health care and health care workers. However, trusting what any politician says is not enough.

Our upcoming round of bargaining provides us with the opportunity to put into the collective agreement effective measures to protect and enhance our public health care system. By the time this *Guardian* lands on your doorstep, bargaining will have begun in earnest. With the community and facilities subsectors' contracts expiring on March 31, 2001, our goal is to have one contract for these two subsectors.

One contract that will protect our members and the people they care for. And when the provincial election is called, health care will again be the leading campaign issue.

We'll see to that.

voice/mail

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Home support workers worth more

While browsing through the *Guardian* one day, one thing really caught my attention – the wage gap between Care Aides in facilities and Home Support Workers II.

The $16.30 the HSW IIs make is at the top end of the scale. That's as much as they can make. We have workers who have been with us for 15 years or more and they are still making that amount.

When I started with Home Support four years ago, the top salary range was $16.00. This means we've only increased our salary by 30 cents.

We are basically doing the same work as the Care Aide.

The difference for the facility workers is they work in a controlled clean environment with a support staff and have an onsite RN.

Whereas we go into client's homes in isolated areas with no back-up, sometimes at the end of nowhere, on gravel roads in horrible winter weather conditions, night or day.

Also, some of the places we visit are filthy dirty and unbelievably cluttered with no proper equipment such as mechanical lifts, bath chairs, hospital beds etc.

We deal with mental health clients and dementia clients in a wide variety of difficult situations.

We have a dedicated group of professionals who do the best job they can looking after "your" parents, grandparents, aunts, uncles or whoever, so they can stay in their own home.

So please support us in the next round of bargaining, and bring down the wall between facilities sector and community sector, have one collective agreement for all, and give us the wages and respect we so richly deserve.

Thanks.

APRIL BOUCHER,
Chairperson,
Parksville Home Support Local

Mental health was at forum

In your most recent publication of the *Guardian*, you make mention of the Liberal "round table" discussions regarding health care and the fact that the Hospital ıployees' Union did not have ɔresentation at the table. The Mental Patients' Association lvocacy Program was invited to :end the Burnaby round table. I ıs there to represent mental alth.

Although mental health is ɔmewhat removed from the sues that HEU wanted to take to ıe table, it is a very important ıealth" and "social justice" issue.

Since the introduction of the 1998 Mental Health Plan, only $10 million in funding has been allocated, which is over $43 million short of the $54 million that should have been allocated to meet the plan commitment of $125 million in seven years.

The magnitude of the impact of mental illness on the health care system is staggering.

In the recent federal transfer payments to the provinces for health care, not a penny was allocated to mental health in this province.

Following are some statistics from the *Mental Health Monitoring Coalition Report*, Aug. 23, 2000.

Over 700,000 British Columbians, or 20 per cent of the population of British Columbia will experience some form of mental illness in their lifetime. (CMHA, 1999). Of this number approximately 70,000 people will suffer from serious and persistent mental illness.

The demand for mental health care on the larger health care system in British Columbia is significant. Mental health takes up seven per cent of the total health care budget.

Impact on the health care system: mental illness accounts for the second highest utilization of hospital days after circulatory diseases according to the Canadian Institute for Health Information, Hospital Mortality Database, 1994/95 and 1995/96.

There are 22,000 people with a diagnosis of a major mental illness discharged per year from acute hospital beds in B.C. (Ministry of Health and Ministry Responsible for Seniors, 2000).

In the Capital Health Region, nearly one-third, or 32 per cent of all hospital bed days are used by people with a mental illness.

The province average utilization on inpatient acute care beds by people with a mental illness is 22 per cent, or more than one in five of the patient population.

The impact is significant.

Many admissions to acute care hospital beds of people with a mental illness can be avoided when there are adequate mental health services and supports in the community.

Mental health concerns are the number one reason why people become unable to work.

It was nice to see at the recent Biennial Convention that the Disability Standing Committee had literature on mental illness and have made it a part of their agenda.

A person who has a mental illness and applies for long-term disability is much more likely to have great difficulty in receiving this status.

So, even though all of HEU's issues were not addressed at the Liberal health discussion in September, mental health was.

I hope that HEU will continue to educate itself about mental health, as it is a vital part of our health care system.

JUDY SHIRLEY,
Outreach Coordinator,
MPA Local, Community Sector

Guardian

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

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What we're up to

Trip of a lifetime

Sister Donna Dickison, a member of HEU's women's committee, celebrated the World March of Women 2000 with a river rafting quest to address violence against women, the justice system and transition houses.

"Our Fraser River Journey for Justice" was organized by the Aboriginal Women's Action Network (AWAN) and was supported by many unions and women's groups.

Donna Dickison enjoys her time on the river as she and other women from northern B.C. journeyed down the Fraser as part of a Women's March 2000 project to encourage Aboriginal women to speak out about restorative justice and violence against women.

In September, 16 women began their trip down the Fraser, stopping to put on workshops in Prince George, Soda Creek, Lillooet and Yale where women shared their stories and discussed ways to improve the systems that should be protecting women and helping them to heal from violence and abuse.

The adventure gathered more rafters along the way and by the end of the journey, 45 women were part of the trip. Dickison says, "We were welcomed into each community with open arms. Women were out there to greet us with their drums and hospitality. What a magnificent experience!"

HEU women among thousands

HEU members Margaret Phinney and Vivian Johnson of Nanaimo travelled to Ottawa to participate in the Canadian leg of the World March of Women 2000. Tens of thousands of women from across the country rallied on Parliament Hill on Oct. 15 to support international demands to end women's poverty and violence against women.

HEU assistant secretary-business manager Zorica Bosancic sent solidarity greetings on behalf of the union. "HEU has a proud legacy of fighting and winning equality for women. Our hearts, minds and spirits are with our sisters and all the marchers in Ottawa today," she said.

The event, the largest in Canadian herstory, was ignored by Canada's media and by the majority of the nation's politicians.

continued on page 4

HEU sisters Darlene Bown of Victoria and Margaret Phinney and Vivian Johnson of Nanaimo proudly display one of the Women Unite banners created by the union's women's committee in honour of the World March of Women 2000.

New NDP health plan opens doors

A COMPREHENSIVE series of progressive new health care initiatives by the NDP and a commitment of $320 million in new health funding announced earlier in December is a very positive step and will improve health care services for British Columbians and fight against two-tier health care, says HEU.

"These are concrete solutions that will help get our public Medicare system firing on all cylinders," says secretary-business manager Chris Allnutt. He said he was extremely pleased with three specific areas of the announcement: nursing strategy, more long-term care beds and increased home support funding.

The strategy to deal with the nursing shortage is broad-based and includes new opportunities for LPNs, Care Aides and other HEU nursing staff.

"Combined with the announcement of 2,000 more long-term care beds along with $32 million in new funding for home support, these initiatives will significantly improve care services for our seniors and our disabled," says Allnutt.

"It will also reduce pressures on acute care hospitals by providing better care in a more appropriate setting."

'The LPN theme was frequently cited'

In fact, the LPN theme was frequently cited by new health care minister Corky Evans when he made the announcement. "Many years ago," Evans acknowledged, "hospitals decided to phase out LPNs and eliminate the nursing team." He then went on to announce a series of commitments that will include practical nurses and Care Aides, like more training seats, new scholarship programs and other forms of financial assistance to support training, more LPN positions in acute care and expanded use of non-registered nursing staff to reduce RN workloads.

DALE FULLER PHOTO

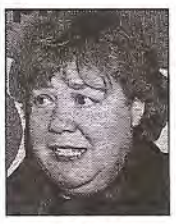
HEU LPNs, Care Aides and other nursing team members at the recent Nursing Team Conference learn of the details of the government's just-announced health action plan.

Other important measures that are part of the NDP's health action plan include:

- more intensive care, ICU beds and flex beds for hospitals; and a province-wide bed tracking system to end delays in finding beds for patients;
- another big whack of equipment funding;
- a palliative care drug benefits plan which will cover drug, equipment and supply costs for individuals who choose to die at home that will reduce financial burdens significantly (these costs are covered by Medicare in hospitals, but not in the community);
- 20 new community health clinics over the next four years to expand crucial primary health care services.

Davies elected to second term as MP

Voters in the working class, multi-cultural riding of Vancouver-East have returned HEU staffer Libby Davies to the House of Commons as their member of parliament for a second term.



DAVIES

But the NDP's Nelson Riis lost his Kamloops riding to the Canadian Alliance leaving Davies and veteran Burnaby-Douglas MP Svend Robinson as the lone NDP MPs from B.C. Nationally, the NDP caucus shrunk to to 13 members in the Nov. 27 election that gave Prime Minister Jean Chretien his third majority government.

Davies, a long-time Vancouver city councillor who is on leave from her position at HEU as human resources co-ordinator, more than doubled her 1997 lead over the runner-up Liberal candidate.

"In East Vancouver, people are very worried about the state of health care and other programs they depend on," says Davies. "In this election, we asked them to stand up to the Liberals and they responded."

Throughout the five-week campaign Davies and national NDP leader Alexa McDonough kept the focus on health care.

The NDP platform called for increased federal funding for health care linked to growth in population and the economy.

The platform also included national home care and pharmacare programs and a commitment to introduce a legislative ban against public dollars going to private hospitals.

At one point during the campaign, Davies and McDonough visited the Women and Children's Emergency Shelter at St. James Community Services in Vancouver's Downtown Eastside to target the Chretien Liberals for failing to carry through on their commitments to shelter funding.

"It's no secret that there is a strong link between adequate housing and health care," says Arlene Schimmelpfennig, chairperson of the St. Jame's HEU Local. "I'm glad that people like Libby and Alexa McDonough kept issues like this front and centre during the election."

WHAT WE'RE UP TO

continued from page 3

The WMW2000 ended on Oct. 17, the International Day for the Eradication of Poverty, and special ceremonies in New York focussed on the United Nations and wrapped up the seven months of North American activities.

HEU members vote approval

HEU members approved major changes to the union's main pension plan last month when they voted 89 per cent in favour of a tentative agreement that moves the plan from sole government control to one where unions and employers share control equally under a new structure called joint trusteeship.

Under joint trusteeship, plan members through their unions and employers will share control of the plan and determine contribution rates and plan benefits. Surpluses will be shared and used to improve pension benefits, reduce contribution rates by workers and employers, strengthen indexing protection and protect against future contribution increases.

Gurmeet Gill, a junior clerk at Vancouver Hospital, casts her ballot during the ratification vote regarding joint trusteeship of the Municipal Pension Plan. "We should have input. We're working for it," Gill said.

"This new arrangement will help us to have greater control over our pension plan," said HEU secretary-business manager Chris Allnutt.

HEU members who work in private for-profit long-term care facilities are not currently part of the municipal plan. Most community health workers aren't either, nor are community social services caregivers.

"Having a decent income in retirement is a critical issue in HEU. That's why it's our bargaining goal to ensure that all members are covered under the Municipal Pension Plan," said Allnutt.

Don't forget life before Medicare

HEU joined with the B.C. Seniors' Summit, the B.C. Seniors' Network and the 411 Seniors' Centre to co-sponsor an interactive health care forum to raise awareness about our public system and mobilize action to preserve and strengthen it.

Seniors Action to Save Canadian Health Care featured Medicare activist and actor Shirley Douglas and health care expert and author Colleen Fuller. Premier Dosanjh opened the event and Summit Health Working Group chair, Joyce Jones, moderated.

Shirley Douglas, daughter of Medicare founder Tommy Douglas encouraged the more than 150 seniors who packed the room to see her to talk to their children and grandkids about what it was like before Medicare.

Douglas recalled the battle to achieve universal Medicare, and reminded people that we're in another fight to keep it because profit-motivated, privatization forces – many of which opposed public health care when it was formed – are still around and eager to make money at the expense of people's health and well-being.

Drawing comparisons to other countries' health care systems, Douglas noted that Canada's is the envy of the world because all citizens are looked after, not just those who can pay.

"Money for health care is not in the psyche of Canadians," she said to enthusiastic applause.

Jill of all trades, but always union

by **Dale Fuller**

MERRITT NEWS PHOTO

UPON HER RETIREMENT from the ambulance service, Laura Besse received a pin and a certificate of excellence, symbols of her community's appreciation for 20 years of service.

WHEN LAURA BESSE graduated from high school in the early 1960s, she made a beeline for Vancouver Vocational Institute to study to be a nurse. After 10 months in the Licensed Practical nursing program, she emerged with her diploma.

Although the route from high school to college was a straight line, her life has taken many twists and turns since then. But mostly she has been a dedicated health care worker, in one guise or another.

Besse stayed in the Lower Mainland at first, got married, had children. She worked as an LPN at St. Mary's Hospital in New Westminster and then at Surrey Memorial Hospital.

Then in 1973 Besse moved with her three children – two boys and a girl – to Merritt in the Nicola Valley and began the life of a single parent. "Looking back now, I don't know how I did it," she reflects. "It was a real juggling act."

'Ahead of her lay a crazy quilt of jobs'

Ahead of her lay a crazy quilt of jobs, occupations and activities: caring for her children, working as an ambulance paramedic and for the highways department as a flag person and, of course, as a Licensed Practical Nurse.

But first she had to get her bearings. She was able to collect unemployment insurance for a short time, and it was then she organized the area's first Meals on Wheels program.

"Back then the government actually gave out grants that enabled people to create jobs for themselves and others," Besse says. "We were able to put that program together and hire people to deliver meals to people in the community. There was a group that provided home care to people, and they helped set it up." The project is still up and running after all this time, says Besse. She's very proud that she was involved in the development of this valuable community service.

She signed up as a casual LPN at the Nicola Valley General Hospital in the mid-1970s. She did that until about 1980, when she began a three-year stint as a flag person. "The weather was quite an experience, but the job paid very well. I really liked the people, and it was a fun job," she says. Even this job was linked to her health care background, as she was picked for the job because of her industrial first aid certificate.

As a member of the British Columbia Government and Services Employees' Union, she could count on a decent wage. Now most of the flagging jobs are contracted out, are not unionized and don't pay well at all.

When she returned to work as a casual LPN at NVGH, she started to get more interested in her union. "I was pretty apathetic before," she says. "In fact I was about the most apathetic member in my local. But I guess I just like to help people, and that's why I got interested in being more active in the union."

Right now she is the HEU OH&S representative at her facility and a shop steward. She's also served as chairperson and vice-chair of her local.

She's been to shop steward courses and Wage Policy, but was particularly impressed with the Nursing Team Conference she attended last year. She hopes to be able to be a delegate again in the future. "I really appreciate what HEU is doing to try and raise the profile of Licensed Practical Nurses," she says.

Not only does she work at NVGH – full-time now since 1985 – she has also been working as a casual LPN at Lytton Hospital for many years. That work has tapered off a bit, but she still does it now and then. "It's a long drive, but I don't mind a bit," Besse says.

As if that were not enough, there is a whole other layer to this story, and one she is very proud of. In 1976 she began her career as a casual ambulance driver and paramedic (and CUPE member).

They gave her a pager, and called her when she was needed. She had to be ready to respond at any time of the day or night. That presented some problems with her children. But luckily the eldest boy was old enough to babysit the younger children when mum was called away.

BALANCING IT ALL

For reasons of confidentiality, she cannot discuss the particulars of any single case she encountered while she was driving ambulance. But she does recall one winter's day when she showed up at the ambulance station to go out on a call and it was so cold that the doors of the ambulance were frozen shut. "I remember frantically trying to get inside the vehicle, which we finally did." They invested in a better heater after that.

Besse performed that community service for 20 years. She retired in 1998, when she was awarded with a pin and certificate of excellence for all the years of her service.

"All my kids are out of the house now," she says, but her many grandchildren are frequent visitors.

Her daughter, Pam McDougall, is also an LPN and an HEU member. But she is returning to school in January to become a registered nurse. "She's very happy because HEU gave her a bursary to help her with expenses," says Besse.

• *BALANCING IT ALL is a regular* Guardian *column about the challenges facing women activists.*

Cathy Hamilton of the Kamloops local attended the December 6 Day of Remembrance and Action to Stop Violence Against Women ceremony at Vancouver's Thornton Park.

Help wanted at HEU

The union's Annual Work Opportunity postings have gone out and interested HEU members need to respond quickly to the call.

The HEU Annual Work Opportunity is a chance for members to express their interest in working for the union, on a temporary or permanent basis, in positions that include a building services worker, clerical and accounting support, research and communications staff, servicing representatives and organizers.

Your resume must be mailed to the Provincial Office with a complete cover letter stating all the following information: your name and phone number(s); which job you are interested in – i.e., organizer or accounting clerk or one of the other jobs listed on the postings; whether you want permanent or temporary, and part-time or full-time employment; and where in the province – i.e., Vancouver Island or Okanagan, etc. – you wish to work. Applications must be received before 5:15 p.m. on Friday, Jan. 26, 2001, as late applications will not be accepted. Much more information regarding the Annual Work Opportunity has been sent to the locals so check your union bulletin board or contact your local secretary-treasurer for details.

More security for HEU

HEU welcomes approximately 40 security officers from Delta, Langley Memorial, Peace Arch and Surrey Memorial hospitals in the South Fraser Health Region and Lions Gate Hospital in the North Shore Health Region, into the union.

Effective April 1, 2001, the guards will be brought in-house and therefore covered by the facilities sector collective agreement.

In South Fraser, security at all four hospitals will become a regionally-managed, in-house service and security officers will be recognized as hospital, not regional, employees. At LGH, the officers will also become employees of the hospital.

Earlier this year, security officers in the Simon Fraser Health Region became HEU members when, in a precedent-setting ruling, arbitrator Don Munroe determined that the guards performed bargaining unit work and that the health region was the "true employer." That award set the tone for the agreements reached in South Fraser and at Lions Gate.

HEU officers Chris Allnutt, Fred Muzin and Mary LaPlante congratulate newly re-elected B.C. Federation of Labour president Jim Sinclair. He won his second term by acclamation. One hundred and eighty HEU delegates participated in B.C. Fed's 44th convention.

STEPHEN HOWARD PHOTO

Sandra Vicic and Mary Nicholls take time out from the Wage Policy Conference to help launch study on Nursing Team utilization and answer media's questions.

We've got the solutions

A joint union/employer report on LPN and Care Aide utilization provides B.C.'s new health minister Corky Evans with a road map to help navigate through a serious nursing shortage.

"This research report clearly supports the need for broad-based solutions, and provides comprehensive directions on how to achieve them," said Chris Allnutt who joined several LPNs and Care Aides to release the report at a press conference Oct. 25.

It's the result of a 15-month joint project between the Health Employers Association of B.C. and health care unions led by HEU.

The study finds that LPNs and Care Aides are underutilized in the delivery of nursing care in B.C. And it calls for increased government funding for LPN positions and a range of education and retraining initiatives to tap the full potential of these important nursing professionals.

Allnutt said the union has briefed Ministry of Health staff on the findings. He was hopeful that the report's recommendations will be reflected in a major government announcement of a new action plan on the nursing shortage that's expected shortly. (see page three)

Victoria workers win one for us all

Unionized caregivers at Victoria Chinatown Care Centre are entitled immediately to the full wages, benefits and working conditions of the facilities sector collective agreement, said arbitrator Nicholas Glass in a decision released Nov. 23.

Approximately 23 staff at the seniors' long-term care facility will receive significant wage increases, much improved benefits and employment security as a result of the ruling that is retroactive to June 11, 1999, the date the workers certified with HEU.

"This is a real victory for our Victoria Chinatown Care Centre sisters and brothers and for the union," says HEU secretary-business manager Chris Allnutt. "This ruling is about more than wages and benefits; it's about justice and respect."

HEU claimed that all new certifications are automatically covered by the master agreement. The Health Employers Association of B.C. unsuccessfully argued that instead, this new certification was subject to the levelling process and with no more money in the levelling fund employees would have to accept inferior non-union wages and benefits until the next round of bargaining produced a new collective agreement.

"We call on HEABC to do the right thing and implement the decision immediately," says Allnutt. "Any further delay on the part of employers will poison labour relations."

It's wrong to close Cascade

HEU says the Simon Fraser Health Board's announced plan to close Burnaby Hospital's 205-bed, extended care Cascade Residence in the face of widespread opposition from residents, family members, health care workers, politicians and other concerned groups and individuals, is wrong.

The closure cuts Burnaby Hospital's total bed count of 380 by more than half and places the future of the acute care facility in jeopardy.

"It is unfortunate that the health board is making the wrong decision and moving forward unnecessarily with a plan that will reduce by 100 the number of extended care beds in the region when more beds for aging and frail seniors are urgently needed," says HEU secretary-business manager Chris Allnutt.

"Many people with very legitimate concerns have encouraged the board to slow down and rethink its plans to close Cascade Residence. But it appears that the board is not listening to front-line health workers, residents, their families, nor the broader community."

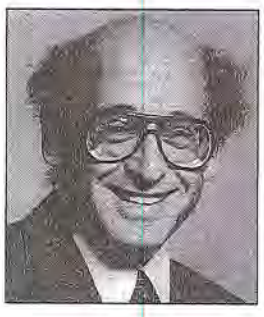
'It appears that the board is not listening'

Cascade is an extended care facility attached to Burnaby Hospital. The health board has decided to replace it through a public/not-for-profit partnership with the Burnaby-based New Vista Society. A new facility will have 150 multi-level care beds and 50 assisted living units for a total of 200 spaces. Of the 150 multi-level care beds, only 100 would be extended care. That's a 105-bed reduction in extended care.

"It's encouraging that the health board has chosen the New Vista Society as its partner in this project – despite the lack of clear direction from Victoria to health authorities to consider public/not-for-profit cooperative ventures," says Allnutt, adding that partnering with not-for-profit organizations is a better way to build affordable housing and provide health services for our seniors.

This decision puts more pressure on Victoria to stop stalling on developing solutions to provide better care for seniors. A government-ordered study outlining a progressive plan to deal with the long-term care bed shortage has been gathering dust since March.

PRESIDENT'S DESK



A gift to last from health care workers

by **Fred Muzin**

AS WE RACE around, finalizing last minute arrangements for the holiday season, it's no wonder we're getting ready for a well deserved rest. Just one year ago, we entered the Year 2K with trepidation that computer systems would crash, that our modern society would grind to a halt and we would enter a state of emergency.

HEU members, especially our technical support teams, waited on-call last New Year's eve, ready for any eventuality to ensure that our public health care system continued to provide essential services to all citizens. Despite the fact that we came through with flying colours, we have had to spend the rest of the year fighting for the survival of Medicare.

CUPE was at the forefront through rallies, demonstrations, lobbies and a cross Canada ambulance tour in exposing and opposing Klein's Bill 11, the legalization of private hospitals that permits profits from illness through "enhanced services."

'We demanded and achieved restored federal funding for health care as a key starting point to modernize Medicare'

Working with the NDP, other unions and our social justice partners, we demanded and achieved restored federal funding for health care as a key starting point to modernize Medicare. Our continued pressure for B.C. to embrace the Nursing Team, including LPNs, Care Aides, unit clerks and orderlies is reflected in the B.C. government's recently announced Health Action Plan.

Our joint study of LPN utilization clearly shows that allowing people to perform to their full scope of practice is a logical step to alleviating the RN shortage.

Supporting quality home care and mental health services and establishing a national pharmaceutical program makes sense. Educating the public about wellness and setting up community health centres, staffed by multi-disciplinary teams of providers will reduce wait lists. Staff shortages can only improve if we reverse workload overload and start valuing and stop injuring more than 7,000 health care workers per year. Health outcomes can only improve if we eliminate poverty and homelessness.

Why should anyone be surprised that we have workable solutions? We're on the frontlines every day. Over six days, our delegates to convention demonstrated their expertise about how services actually get delivered. We have the knowledge and determination to be a part of the solution.

We must recharge over the holidays for the struggles in the New Year. Profiteers determined to plunder Medicare remain relentless.

Our seniors had to fight to get Medicare. We'll have to fight even harder to keep it.

Our Christmas gift to people is our work and commitment, 365 days of the year.

All the best for a healthy and happy holiday season!

DAVE SANTELLA and his dog Belle became a familiar sight at HEU's recent Biennial Convention and Wage Policy Conference. Belle was a real hit at the rally in front of the WCB on the fourth day of convention.

He stands up for dogs

by **Dale Fuller**

Dave Santella works one-on-one with people who are having a hard time in their lives. He's a crisis program worker at CRESST in New Westminster and very much a people person. But he's also a person who loves animals.

So much so that he used to go down to his local SPCA on his lunch breaks and take dogs that were being kept there out for walks. He says that he has always had a special rapport with dogs. "And they have always taken to me, too – regardless of their disposition."

He realized that many of the dogs at the SPCA were not there because they were lost. "Owners would run into aggressive behaviour problems with their dog, and drop them off at the pound because they didn't want to deal with it. Or didn't know how."

That upset Santella, because he felt it wasn't the dogs' fault.

So he decided to do something about it. He studied and became a certified and registered dog trainer with the North American Guard Dog and Training Academy. Then he set up his own kennel and dog obedience school, and now teaches dogs how to behave themselves.

"I learned that most dogs act aggressively because they have no confidence in themselves – they are afraid." So he teaches them how to not be afraid. "I give them the freedom they need to approach other dogs" is how he puts it.

The first thing he does when a client brings a pet in is to determine if they have any level of previous training, i.e., if they obey commands to sit, stay, etc. "Then I 'introduce' him to another dog – who is tied up. Little by little I let the dog get closer to the tied-up dog. Using commands – this is why some previous training is important – I tell him what to do as we get closer." If the dog reacts aggressively, he starts all over again. In the end he will have enough confidence to lie down next to the tied-up dog and be seemingly oblivious of its presence.

According to him this method works like a charm. "I don't believe you have to be mean to a dog to get him to behave. You just have to show him what is expected of him," says Santella.

He takes his dogs to work sometimes, too. "Pets are very therapeutic," he says. "People love my dogs." He lives with two rottweillers, Belle and Qranc, and two cats.

He hasn't figured out how to train the cats, yet, but he's trying.

NOTEBOOK

Decoding Campbell

by **Stephen Howard**

I have to confess that for the first time ever on a *Guardian* assignment, I was a little nervous. There I was in the office of the Leader of the Opposition, sitting round a coffee table across from Gordon Campbell – a political figure with whom HEU hasn't always seen eye-to-eye on health care and other important issues.

In the end, the butterflies subsided and the interview – which ran to 10,000 words of Campbell's views on health care and other topics of which about 2,200 run on page 16 of this issue – went reasonably well. It follows the same ground rules set for a similar feature with Premier Dosanjh in our last issue.

Fresh from a province-wide health care tour – where he says he heard from scores of HEU members – the Liberal leader was well schooled on issues. And he outlined a series of commitments on funding, training, not-for-profit seniors' care, employment security and privatization, that represented significant changes in Liberal positioning, or in some cases dramatic about faces. But on concrete solutions, he had nothing that came close to matching the depth of the NDP's early December health action plan announcement

So how would I decode Campbell's interview? First, the obvious political imperatives. Campbell has to be knowledgeable on health issues because an election is looming, and health care is the top issue for British Columbians. So with the 2001 election campaign already unofficially underway, Campbell's going to be on the hook to spell out how he'd do it better than the NDP.

'Right-wing economists admit that tax cuts have to be paid for somehow'

Polls showing British Columbians don't support two-tiered health care solutions to make Medicare better are also driving Campbell's positioning. Have the Liberals supported private clinics before? Yes. So Campbell's about face on this issue is clearly public opinion driven, and a sign that the efforts of HEU and other groups to tackle private health care have paid off.

He also needed to do a dance step or two to wallpaper over past comments from him and his caucus members. Has Campbell said he would cut health care funding and cancel our employment security agreement? Have his MLAs criticized our pay equity plan and suggested we're paid two much? The answer is yes on all counts.

And then there's his fixation with tax cuts and the notion that you can cut more than a billion dollars in revenue to reduce taxes to the bone without cutting health and education, the two big spending items in the provincial budget. Here Campbell seems too entranced with his own voodoo logic. Even right-wing economists admit that tax cuts have to be paid for somehow.

On the other hand, HEU members shouldn't diminish the importance of the commitments he made. They are huge departures. They are a sign of grudging respect for the depth of our commitment to Medicare and our capacity to defend it. But that doesn't mean we won't have to hold his feet to the fire should he become premier.

Labour

NOTEWORTHY NEWS ABOUT ISSUES AFFECTING WORKING PEOPLE HERE AND ABROAD

We didn't vote for that, say Ontario workers

The Ontario Federation of Labour is in the fight of its life. On Dec. 5, in response to the threat of a dramatic attack on workers' rights in that province, labour and social activists occupied the constituency offices of Ontario premier Mike Harris and his minister of labour, Chris Stockwell.

Under the guise of modernizing his province's labour law, Ontario Tory premier Mike Harris is set to ram massive changes through the province's legislature. Ontarians did not vote for these changes, nor were they consulted.

Workers' rights will suffer a severe setback if they do go through. While other parts of the world, Europe in particular, are moving towards cutting the work week and enhancing workers' rights, the Ontario government seems poised to move backwards.

Some proposed changes to the province's Employment Standards Act – circulated in a government consultation paper – are truly draconian.

A combination of expanding the legal work week to allow employers to intimidate employees into working 60-hour weeks – along with requiring overtime pay only after an individual has worked over 132 hours in three weeks is a giant step in the wrong direction.

OFL's submission to the government in response to the paper attacks a 60-hour work week as archaic.

In B.C., HEU secretary-business manager Chris Allnutt warns that B.C. Liberal leader Gordon Campbell might take the same tack as Harris if he becomes the next premier.

"Although Campbell is a Liberal and Harris is a Tory, these two individuals are very close in their ideas on favouring big business to the detriment of workers. If B.C. elects Campbell, we may also be fighting a backward tide."

The federation has better ideas on how to modernize Ontario's Labour Code: no exemptions from employment standards, raising and indexing the minimum wage, kicking in overtime pay after an eight-hour day or a 40-hour week, three weeks vacation after five years, more paid holidays, equal pay for part-time workers, rights to sick and personal leaves, protection for homeworkers, just cause legislation to protect employees from wrongful dismissal and protection for dependent contractors.

WORKERS AT QUADRTECH give the victory sign after hearing of ruling. They earn $5.75 an hour and work under hot difficult conditions, often standing during 10-hour shifts.

California jewellery workers force employer to stay put

A GROUP OF California minimum wage workers and their union have bucked a global trend and stopped their employer from relocating to avoid labour laws.

Workers at Quadrtech Corp., a 20-year old jewelry and accessories manufacturer outside Los Angeles, celebrated their victory when a federal judge ordered their employer to stop the company's planned move to Tijuana, Mexico on Nov. 21.

'Employers frequently threaten to close plants to thwart union organizing'

The preliminary injunction – requested by the National Labour Relations Board – also orders the return of equipment already shipped to the Tijuana location. The 118 Quadrtech workers – all but two of whom are women – joined the industrial division of the Communications Workers of America earlier this year.

The organization drive took years, during which the workers were intimidated and threatened. The owner even shut down the factory for a few days to back up his threats.

But the workers were determined. Serious concerns about health and safety conditions that had resulted in a growing number of injuries, and the constant speed-up of work gave the workers the courage they needed to go vote yes to certify with the union. By a wide margin.

Owner Vladimir Reil responded by announcing that he would lay off the majority of workers and move operations to Mexico by Nov. 17. He told his employees that if they were to decertify and tell him they were sorry, maybe the factory would stay and they wouldn't lose their jobs.

The immediate response of the workers and their union was to file charges and press the National Labor Relations Board to seek the injunction.

The injunction will remain in place while dozens of NLRB charges are reviewed; a hearing is set for Dec. 11.

Kate Bronfenbrenner, an expert in labor education research at Cornell University whose research has found that employers frequently threaten to close plants to thwart union organizing, called the ruling "an incredible decision. The courts have always weighed the employer's right to make profit against the workers' right to unionize," she said.

In this case, the court has ruled that the freedom of association of workers "is a right of greater value than business decisions and profits," she said.

Nicaraguan women benefit from solidarity

AGUIRRE

Nicaraguan working class women have shown incredible resourcefulness in the face of attacks on their ability to support themselves and their families over the last 10 years. Mabel Aguirre of the Maria Elena Cuadra (MEC) Movement of Working and Unemployed Women was in Vancouver during the recent B.C. Federation of Labour Convention to talk to labour activists about how their support and solidarity have made a genuine difference in the lives of many women in her country.

American president George Bush was able to support and finance opposition politicians and engineer the defeat of the Sandinista party in Nicaragua's 1990 elections.

"One of the first things the new president did was to close many factories which employed women, throwing thousands out of work," says Aguirre.

To have such a large pool of unemployed women was one of the factors that contributed to the proliferation of the maquila sweatshops in Nicaragua.

Realizing there was no one else to fight for their rights, a group of women – among them Aguirre – organized to end discrimination and violence against women and fight for equal opportunities for women. They held their first congress in 1994 and called themselves Maria Elena Cuadra Movement of Working and Unemployed Women.

They set out to accomplish these goals, with zero resources because most of them were unemployed. But MEC now receives assistance from abroad. Through CoDevelopment Canada, labour groups in B.C., including HEU, who are one of their principal sources of support.

With this help MEC has succeeded in setting up training programs in "alternative employment" like electricity, refrigeration, carpentry and mechanics. They also teach women about labour rights, health and conflict resolution.

"Sometimes women who go to the police to report they have been physically abused end up as prisoners, so another important tool MEC gives women is training in the Penal Code," says Aguirre.

Because women often have skills they can use to produce goods they can sell, MEC has set up a rotating fund to give them small business loans.

Aguirre says these programs have helped thousands of women – including those in the infamous maquilas. "Your solidarity is so important to us. The struggle of working people is the same all over the world, and you have made us feel that our struggle is also yours," says Aguirre.

WCB re-injuring injured workers

by **Marta Colorado**

WCB continues to re-injure workers daily in so-called rehabilitation programs, which are provided by private for-profit companies.

My story is too typical of what is happening to injured workers in B.C. I was injured at my workplace taking care of an extended care resident. The injury to my left shoulder and neck happened on Feb. 7, 2000 and my claim was approved March 2. It was actually a re-injury, since I had an approved WCB claim in 1992 in the same area.

My doctor sent all progress reports to WCB. However, on March 6, WCB called me to ask why I was not back at work. On March 7, I had another call stating that after eight weeks off work I would have to seek other sources of income. A letter followed in which I had to prove my earnings. On March 8, WCB called for an update on their files, since I was still off work. This is personal harassment.

On March 10, I was sent to a work conditioning program. The physiotherapist there said that I was not ready for their program. A few days later, WCB sent me to OT Consulting Occupational Rehabilitation Program for assessment. This company accepted me. WCB sent me a letter stating in part, "... absences, without a valid reason, will result in deduction from your benefits."

'My story is too typical of what is happening to injured workers'

I provided information about my medication and participated in the program until April 14, when I felt very ill. I requested my blood pressure to be checked, which was reluctantly done. It was 204/110. After resting for 20 minutes, I was asked to return to my exercise routine without checking my blood pressure. This is an extremely unsafe practice. I said "no" and went to see my doctor. Four hours later my blood pressure was still elevated. My doctor sent me to emergency, afraid I was having a heart attack.

On her advice I did not resume the "treatment" at OT Consulting Occupational Rehabilitation Program. WCB cut my benefits on April 17 (presently under appeal.) A four-week graduated return to work on May 23, however, was approved. The elevated blood pressure remained for four months. I ended up having to see a cardiologist, with whose help I was finally able to get it under control.

WCB's treatment of injured workers is inconsistent with their mandate, which is to prevent injuries and to treat injured workers. Its use of private for-profit companies puts a burden on the public health system, because that's where the workers go when they are re-injured.

It is time that we demand adherence to that mandate and a stop to all these irresponsible acts!

• *Marta Colorado is an activity worker at George Derby Centre in Burnaby.*

New model of caring for elderly can work

But new study says front-line caregivers must have input

NANCY BLECK PHOTO

ADEQUATE STAFF-TO-PATIENT ratios and a home-like setting are two elements front-line staff identified as essential for caring for elderly patients with dementia.

ACROSS Canada health authorities are embracing new ideas in dementia care that favour flexible, client-centred approaches based on the activities of daily living. Gerontology consultant Nancy Graedinger worked with the HEU research department to produce a report on new approaches to caring for the elderly with dementia. Called *CHANGES in Long-term Care for Elderly People with Dementia: A Report from the Frontlines*, the document, commissioned by HEU, considers how new models of care impact on patients and their families.

'This model is extremely challenging to implement'

This important study takes into account the opinions and experiences of front-line caregivers. "This is the first time in Canada this kind of research has been done," says secretary-business manager Chris Allnutt.

As part of the study, caregivers were asked to envision their idea of an ideal long-term care facility for people with dementia, somewhere they would not hesitate to send their own family members. Not surprisingly, they responded they would want a home-like, and not institutional, setting. Residents' days would be flexible, providing them with a choice of activities.

The philosophical framework of the new model of care coincides with the caregivers' wish list. The 32 front-line health care workers who participated in focus groups felt positive about some components of the new model – the clustering of residents in small groups, a respectful management philosophy and their involvement in decision making.

However, this model is extremely challenging to implement in practice.

The study recommends concrete ways to implement the new model to the benefit of everyone, including the health care providers. At the top of the list is increasing the staff-to-resident ratio. It advises to mix residents in terms of level of physical care. Stop building large hospital-like buildings to house and care for elderly people with dementia, and modify and make home-like the existing institutional facilities by creating small clusters with a maximum of 12 residents.

Education in dementia is key.

Include front-line staff in decision making, says the study. Front-line teams or issue-specific committees should be formed to problem-solve and share information, and, where possible, to include casual workers.

Staff who are working directly with residents with dementia should be given the option of rotating their shift and/or unit every three to six months.

"These recommendations could go a long way towards providing what HEU considers to be essential information when policy is made about the health and well-being for our seniors," says Allnutt.

And already head nurses and regional health authorities are asking for copies of the study. "That's a very positive sign," adds Allnutt.

Home support needs repair, says report

An important element in care for seniors and the disabled is home support, but access to this important service has eroded seriously over the last decade.

If you are old or disabled and live in poverty, your access to home support will be severely restricted.

Without Foundation, a report recently published by the Canadian Centre for Policy Alternatives, HEU, BCGEU and BCNU, concludes that although the need for home support services have increased, the availability of services is steadily decreasing. And private for-profit giants are ready to fill the gap.

Donna Vogel, a researcher with the CCPA, acknowledges B.C. has done better than other provinces in Canada, and this in spite of drastic federal cutbacks. But still, although hospital stays are declining, there is an appalling lack of parallel investment in the community and continuing care (CCC) sector.

"The cuts to CCC affect some of the most vulnerable members of our society," says Vogel. "And most seniors and people with disabilities who live in poverty are women."

The cuts affect patients, family members and care providers. Declining health because of poor nutrition, stress and lack of care result in more hospitalization, lost work hours for relatives and at least the potential of poor care. Caregivers suffer from burnout, higher injury rates and low job satisfaction.

Perhaps most insidiously, private for-profit corporations are all too ready to jump in to fill the gaps in the public provision of long-term care, seniors' housing and home care.

The threat of a two-tier system in this sector is very real, and would leave the poorest of the seniors and disabled out in the cold.

The study concludes that Medicare is in dire need of repair.

"B.C. must pursue cost-sharing arrangements with the federal government to bring all CCC programs and services under the public health program," says Vogel. "We also need more research into the implications of increased privatization of community and continuing care."

• Without Foundation *is published in three parts, authored by Donna Vogel, Michael Rachlis and Nancy Pollock. It can be ordered from CCPA.*

CUPE B.C. president **Barry O'Neill** spoke on CUPE's struggle

CUPE Quebec president **Claude Généreux** said "tear down the wall."

Musqueam Nations hereditary chief **Walter Stogan** welcomed delegates to First Nations land

CUPE Alberta president **Terry Mutton** spoke on privatized health care

Vancouver and Dist. Labour Council secretary-treasurer **John Fitzpatrick** spoke on activism and solidarity

our future, our health care

2000 HEU 22ND BIENNIAL CONVENTION

KATE WILLIAMS PHOTO

Convention delegates enthusiastically greeted Premier Dosanjh's commitment to tear down the wall between community and facilities workers in health care.

Delegates chart union's future course

FIRST TIME delegates

Suzanne Taylor
COOK/DRIVER/PROGRAM WORKER
Belair, Comeshare, Good Shepherd, Grandview

"Every union member should have the opportunity to come here. It provides for more strength with all the solidarity."

Betty Avaiki
CARE AIDE
Nanaimo Regional General Hospital

"I'd like to thank my local for sending me. I've learned a lot about the union, and I've learned that criticism is good if it's positive."

Mike Dominelli
CARE AIDE
Yaletown

"I was happy to see that the union is run very democratically. Everyone can speak their mind and no one holds it against you."

Convention signals determination to defend Medicare, build on gains HEU members have made

More than 600 B.C. health care workers gathered in Richmond for HEU's 22nd Biennial Convention from Oct. 15 to 20. Interspersed with solidarity greetings, officers' reports and elections, delegates debated a whole range of issues, including proposals to strengthen Medicare, improve health care delivery and fight privatization.

Proceedings got underway only after Walter Stogan of the Musqueam First Nation welcomed delegates, respectfully reminding them and their guests that they were meeting on Musqueam land. "You care for our elders, our neighbours and our children," Stogan told delegates, giving his blessing to the proceedings which were to follow.

An important discussion on the convention's first day was sparked by a motion calling for a seven point campaign to force improved conditions in long-term and home care. Speaker after speaker relayed the dangerous, demoralizing and disrespectful conditions that exist in continuing and community care around the province. Many described how facilities and agencies injure workers and put residents at risk.

Many of HEU's newly organized members work in long-term care and in the community, with hostile employers who delay bargaining beyond the four-month freeze period outlined in the Labour Code. The bosses then feel free to wreak vengeance on workers who support the union. Delegates passed a resolution calling on HEU to lobby government for more protection for newly certified workers.

Local mergers were a very hotly debated issue. All agreed there are problems in the merger process, first mandated at the 1996 Biennial Convention. Some said bigger is better: there is strength in numbers and a vote to allow "demerging" would divide HEU. Others said smaller locals get lost when they are merged into bigger locals. Activism declines because they feel they have no voice. After long debate, an amended resolution was passed, which allows for "demerging" but only after the Provincial Executive lends support to merged locals that are experiencing problems, and then only after no less than two years have passed.

Delegates sent a strong signal to health employers that they're determined to win a strong collective agreement by raising strike pay by $50 a week to $250. As one Okanagan delegate stated, "It will be more difficult for HEABC to starve us back to work now."

All the action was not on the floor of the big tent. Noon-hour workshops introduced members to a new contracting-in toolkit and an important study on LPN and Care Aide utilization.

Evening socials provided a relaxed atmosphere to learn about the union's work in international solidarity and about its equity caucuses.

At a noon-hour rally in front of the nearby Workers' Compensation Board offices, delegates demanded that the WCB get out of private health care. "It's time to refocus our efforts on strengthening public health care so that all British Columbians receive timely treatment for their injuries," said secretary-business manager Chris Allnutt.

Delegates adjourned the 22nd Biennial Convention ready to carry on their fight for justice for health care workers and the people they care for.

our future, our health care

2000 HEU 22ND BIENNIAL CONVENTION

note BOOK

On unity, victory and rock and roll CUPE national secretary-treasurer Geraldine McGuire arrived on the third day of HEU's convention fresh from the World Women's March in Ottawa. "There were over 50,000 sisters and brothers. I was having such a wonderful time I lost track of time and missed my flight," she said.

McGuire saluted HEU members for their decision earlier in the week to maintain their affiliation with the 485,000-member strong national union. "CUPE and HEU are together because of the strength we bring to each other," she said, adding that this unity was especially important in assisting smaller, newly-organized locals.

McGuire, who has announced she will not be seeking re-election at the next CUPE convention, says she appreciates the opportunity to reconnect with union members. And she left delegates with this message: "We will unite and we will win and we will rock and roll!"

The P3 song James Richards, chair of the Little Mountain local, penned a song about P3s for convention delegates. The first verse goes: "Well, those public private partnerships, are really quite a scam; a blood letting of money, from the sick right to the Man."

Mount St. Mary's local received the convention gavel in recognition of the courageous campaign that their Victoria Chinatown Care Centre members are waging to gain justice, respect and fairness in their workplace. VCCC grassroots activists, supported by their local, the union and the community, are also fighting to keep the multicultural seniors' long-term care facility open in the face of the employer's financial hardship claims. Health workers at the Victoria Chinatown Care Centre certified with HEU in June 1999, and quickly mobilized to address widespread race-based employment discrimination at the centre. Local members Nicole Donaldson, Sandy Bath and Susan Hay joined Chris Allnutt, Fred Muzin and chair Heather Birkett, third from left, on the podium after she accepted the gavel.

The wall's going to fall, says Dosanjh

Convention delegates enthusiastically greeted Premier Ujjal Dosanjh's announcement that he is committed to combining the facilities and community sector bargaining units.

"I know that community and facilities support workers in health care are currently separated into two bargaining units," he told delegates. "I believe this division must end if we are to meet our objectives in health care reform."

Establishing a single bargaining unit in health care has been a long-standing goal of HEU and, more recently, of other major unions representing health workers. Dosanjh's commitment doesn't guarantee instant parity, but it will put the issue on a common bargaining table.

And it wasn't the only significant commitment made by the premier on the eve of a major round of public sector collective bargaining. "In 2001 there will be no mandatory imposition of zero, zero and two on the public sector by my government," said Dosanjh.

Dosanjh also restated his opposition to private health care and criticized B.C. Liberal leader Gordon Campbell for his plans to roll back health care workers' wages.

HEU's help was vital

CUPE National president credits health care workers for Medicare victory

On the second day of convention, CUPE National president Judy Darcy told delegates that the union's 150,000 health care members can take a lot of credit for Ottawa's recent injection of $21.7 billion into the health care system.

"The postcard campaigns, the public meetings, the coalition meetings, the rallies, the news conferences, our national ambulance tour that HEU did so much to make a success here in B.C. – those efforts have finally started to pay off," said Darcy.

"It's absolutely outrageous for Jean Chretien, Paul Martin, Allan Rock, Mike Harris and Ralph Klein to trumpet this new health care deal as proof of their commitment to our Medicare system," added Darcy. These are the guys who've been swinging the wrecking ball through our health care system, she said, in reference to Klein's dynamiting of a Calgary hospital.

"THAT MONEY HAS GOT TO GO TO THE FRONT LINE OF HEALTH CARE."

CUPE members will need to be vigilant, said Darcy, to make sure the money is spent on rebuilding and expanding the public health care system.

"That money must not be used to line the pockets of private health care corporations nor used to pay physicians hundreds of dollars an hour to be on standby pay. It must not be used to boost the profits of multinational drug companies. That money has got to go to the front line of health care."

After Darcy's speech, delegates voted overwhelmingly to support CUPE, rejecting a resolution to end HEU's CUPE affiliation.

And Darcy said that health care workers – and all union members – must stand together to maintain their gains and protect health care from the privateers.

"When CUPE wins a victory by stopping a P3 hospital in Prince Edward Island, it helps you in your struggle against privatization here, too," she said. "When CUPE's Ontario hospital workers stopped Mike Harris from taking away their contract protections against contracting out, it helps HEU members."

Darcy spoke on the split between the Canadian Labour Congress and the Canadian Auto Workers, saying she believes a negotiated solution is the only way to go. "History teaches us a pretty simple lesson: when workers are united, we win, when we're divided, the employers win."

When Darcy spoke to HEU delegates, the federal election call was imminent, and Darcy called on delegates to support Alexa McDonough and the NDP. She said that there is really not much difference between Stockwell Day and Jean Chretien.

president's REPORT

Muzin commends activists on HEU's frontlines

President Fred Muzin opened his report to convention delegates with high praise for the union's activists. "The work that you do makes an enormous difference and brings us all closer to our goals. You are key participants in the fight for a society that values all its citizens," he said.

Valuing all citizens includes access for all to medical care when it is needed. And HEU members are front and centre in the fight to protect and strengthen Canada's public Medicare system, Muzin said.

HEU joined CUPE and the Friends of Medicare in sending an ambulance to the steps of the Alberta legislature in February, to vigorously protest the Klein government's introduction of Bill 11 – a law that legalizes private hospitals and other health care services.

He applauded HEU's collaboration with CUPE on many issues: Medicare, the fight against privatization of other public services, the Women's March 2000 and the ongoing battle against poverty.

Muzin reflected on the many struggles HEU members have taken on in coalition with other social justice groups. He cited the examples of the defeat of the Multilateral Agreement on Investment, the protests against the World Trade Organization, the World Bank, International Monetary Fund and the General Agreement on Trades and Services. "We must continue to demand guaranteed protection for labour rights, water security, public health, education and women's rights," he said.

secretary-business manager's REPORT

HEU's strength is you, Allnutt tells delegates

Secretary-business manager Chris Allnutt used his report to convention to underline the strength HEU members have brought to their union over the last two years.

Referring to the banners overhead – all based on stickers produced for members' fights – Allnutt said, "They're a record of some of the hundreds of campaigns we've carried on to solve problems in the workplace, build stronger communities and to protect and modernize Medicare."

Allnutt commended HEU members for their

Strong unions mean healthy communities

B.C. Federation of Labour president Jim Sinclair congratulated HEU activists for their role in challenging B.C. Liberals and the business community's push for gutted labour laws and privatized health care during recent province-wide tours.

"Rather than talking about their agenda, we talked about ours," Sinclair told delegates.

He reflected on the historic role working people and their unions have played in the fight for Medicare. And he criticized health care privateers.

"Will waiting lists get shorter? Not a chance," said Sinclair. "For 45 million Americans with no health insurance, the wait is forever."

He asked delegates to consider the gains working people have made under the NDP such as anti-scab legislation and Canada's highest minimum wage.

Safeguard Medicare for all our sakes

Eileen Connolly, secretary-treasurer of the Service Employees International Union, Local 1199, urged HEU delegates to defend Canadian Medicare. "Many in the U.S. believe the Canadian health system has got it right," said Connolly. "If you lose your fight here, we will lose our chance to change our health care system."

Local 1199 represents 15,000 health care workers in Pennsylvania. Almost all health care delivery in Pennsylvania is private for-profit and that includes health care in prisons – a fact which evoked cries of "shame" from delegates.

She described how seriously ill citizens in her state who are without health insurance are driven around in ambulances until they find a facility which will accept them. "Health care is about people, not profits," said Connolly. "Keep up the fight."

HEU equals solidarity, says Heyman

British Columbia Government and Service Employees' Union (BCGEU) president George Heyman told convention delegates that when he thinks of solidarity between unions, he thinks of HEU.

His appreciation grows out of the work the two unions have done together on tearing down the wall between the community and facilities sectors.

"Who in this room two years ago," said Heyman, referring to his own appearance at the last HEU convention, "would have thought that we would find a way to work together to bring down that wall?"

Premier Ujjal Dosanjh's announcement to convention delegates that he is committed to combining the facilities and community sector bargaining units is the fruit of lobbying by BCGEU, HEU and UFCW over the last two years. He said that now the unions will be able focus on home care, keeping health care public and making sure that the provision of health care is seamless between the community and facilities.

"All health care workers will be treated equally," he said. "What a tremendous success."

DALE FULLER PHOTO

Alberta Dorval, Mary LaPlante and Bernice Gehring were three of the four women HEU honoured for their contributions to their union and the labour movement. Gwen Parrish was there in spirit, but on her way to Australia to visit her newest grandchild.

HEU honours World March 2000, four women pioneers

The third day of convention proceedings started out with much fanfare when women delegates marched onto the floor and onto the stage with banners emblazoned with signatures and comments of HEU women. The banners had been sent out to locals around the province earlier in the year, and HEU women were asked to express their thoughts about what it means to be a woman and a health care worker in B.C.

"Where is woman? Wherever she is necessary," they sang on their way up to the stage – the words to a song from Sierra Leone in Africa.

The colourful banners became the backdrop for a ceremony of special recognition of four pioneering HEU women.

Sisters Bernice Gehring, Alberta Dorval, Gwen Parrish and Mary LaPlante all received a plaque recognizing their contributions to HEU. Besides the plaque they were given a loaf of bread and a single red rose – an internationally recognized symbol of women's struggles for equality – and a World March 2000 silk scarf.

Gehring was the first woman servicing representative and later the first woman director for HEU. That was in the 1970s. She's impressed by the advances women have made in the union since then. "I really notice how many more women there are at the conventions and conferences now," she said. "I'm happy with this award, not only for myself, but because it represents the tremendous achievements women have made in our union."

About the same time, Dorval became the first woman vice-president of the predominantly women's union. "I want HEU members to know how exciting it was to be on that podium after 10 years away, and sharing that honour with my good friends Bernice Gehring and Mary LaPlante, and sharing it also with Gwen Parrish who couldn't be there in person," said Dorval.

And before LaPlante was elected as financial secretary in 1984, no woman had ever held that position.

Parrish was a Vancouver General local activist for more than 30 years. She was not able to pick up her award in person as she was on her way to Australia.

Earlier that morning HEU's Women's Committee hosted a breakfast, after which women and men listened to Jacqueline Davis and oncologist Dr. Karen Gellman talk about their experiences with breast cancer, both as healers and survivors.

"ALL RECEIVED A PLAQUE RECOGNIZING THEIR CONTRIBUTIONS TO HEU."

Davis told of her experiences as a First Nations woman with the disease. There was little support, she found. Although she sought help in time, many First Nations women do not. "So many let their cancer go too far before they look for help," she said. To help combat this reluctance, Davis established the First Nations Breast Cancer Society, which offers help and has networks across Canada.

Gellman stressed the health of the health care system itself as a preventative tool. "We need to protect our health care system or we will lose consistency of care and treatment. That is what is improving the breast cancer survival rates in B.C.," she said.

CUPE National president Judy Darcy agreed with Gellman. "Fighting for women's health is part of a progressive health care system."

achievements: pay equity, employment security, the fight to "bring down the wall," gains for community social services workers and inroads on the restoration of the nursing team.

Allnutt turned his attention to the future, highlighting the challenges the union faces – including reducing the health care injury carnage, ending inequalities among members in the facilities sector and negotiating a fair general wage increase. From a servicing standpoint, he also said that the union must do more to make sure that it provides "the right support, in the right place, at the right time for activists."

He had harsh words for the Liberal leader Gordon Campbell's agenda that includes huge tax cuts for the rich, privatization of health care services and threats of roll-backs to health care workers' wages.

"We're capable of what lies ahead," he said. "Because we're committed to fighting for our members and for the patients, residents and clients we serve."

financial secretary's REPORT

LaPlante presents dazzling look at HEU finances

HEU's financial secretary Mary LaPlante produced a lot of oohs and ahs with the dazzling multi-media display that accompanied her convention report. The presentation was spectacular but the content was serious as she described HEU's financial picture.

"There are far more legitimate demands on our money that we can possibly afford," LaPlante told delegates on the first day of the convention. "The job of your leadership is to make the tough decisions that are necessary to keep us financially viable and able to continue defending and extending our members' rights."

She drew a strong link between the union's ability to take on key struggles like the fight to save Medicare and the 12-week long community social services strike in 1999 with HEU's membership in CUPE. She acknowledged the cost, but said it cannot be measured only in dollars and cents.

"With the provincial election looming in the short-term, being part of the broader labour community through CUPE will be crucial for us," said LaPlante.

HEU members were able to get a glimpse of the architect's rendering of their new headquarters to be built next year in Burnaby. Despite some large expenditures in the offing – like the new building – LaPlante says the union is on a sound financial footing, ready to face challenges that are coming up in the near future.

"Winning in tough times requires careful financial planning, anticipating our needs and balancing those needs with our available resources," she concluded.

Julia Amendt | Donisa Bernardo | Kelly Knox | Joanne Foote | Marty Norgren | Marilynn Rust

Next two years full of challenges for new Provincial Executive

Fifteen seasoned incumbents will show the ropes to six newcomers

HEU's newly elected Provincial Executive met recently and developed an action statement for the next two years. The statement emphasizes that the union's strength and solidarity lies in the locals, the membership and the staff. The PE reaffirms HEU's role, through its locals and activists, as a strong grass roots advocate for labour and social justice. It pledges to increase political awareness and progressive change through involvement with community groups, labour councils and broader political organizations. The PE is committed to working toward achieving a single solid collective agreement, sector balance and equality through the elimination of all walls and barriers.

PRESIDENT

Fred Muzin begins his fourth full term as president. Muzin worked as a biomedical electronics technologist at St. Paul's Hospital in Vancouver and served on the local's executive for 11 years. In 1986 he was elected to the PE and provincial bargaining committee. He assumed the presidency in 1993, after serving as 3rd vice-president and 1st vice-president. Muzin's priorities for this term in office include mobilizing for bargaining, working towards maintaining a progressive government when the provincial election is called and increasing HEU's integration at all levels with CUPE. He will work with the Provincial Executive to improve their outreach to local activists and sees that as one way to strengthen the union. He continues to work with our social justice partners to defend Canada's universal health care system and all public services.

SECRETARY-BUSINESS MANAGER

Chris Allnutt is confirmed as secretary-business manager for a third term. In this position he is the chief administrative officer and spokesperson for HEU. Before he assumed office in 1996, he had been the union's assistant secretary-business manager for six years and an HEU researcher. He currently serves on the board of directors of the Healthcare Labour Adjustment Agency and the Occupational Health and Safety Agency. Allnutt sees the next two years as challenging. As a member of the bargaining committee, he will be pushing for a fair and just collective agreement for HEU members. The provincial election will also figure prominently, and he will work to ensure that whoever is in government knows that HEU's members support the strengthening of our public health care system.

FINANCIAL SECRETARY

Mary LaPlante has been re-elected to her eighth term as the union's chief financial officer. She began working at Prince Rupert Regional Hospital in 1972 as a clerical worker and was instrumental in organizing the facility's clerical staff into HEU in 1980. She was first elected to the Provincial Executive as the North's regional vice-president in 1982 and, in 1984, when she became the financial secretary, she also made HEU herstory as the union's first full-time, elected female officer. She is one of the directors on the board of Pacific Blue Cross. LaPlante is looking forward to the breaking down of the wall between the facilities and community subsectors in the upcoming round of bargaining, and to coordinating HEU's move into the new headquarters

Chris Allnutt | Fred Muzin | Mary LaPlante

VICE-PRESIDENTS

David Ridley begins his fourth term as 1st vice-president. A biomedical technologist at Royal Jubilee Hospital in Victoria, Ridley served on the local executive from 1989-1993, overlapping Provincial Executive duties as 5th vice-president in 1992-1993. He is the labour appointee to the Capital Health Region board and an active delegate to the Victoria and District Labour Council. He's a member of the Council of Canadians, a strong social justice advocacy group, and is on the constituency executive of the Beacon Hill NDP. During his last mandate, Ridley was an energetic opponent to public/private partnerships, especially in health care. This term, he is looking forward to furthering social justice and equality for all regardless of the barriers the employer continues to invent.

Dan Hingley moves from 4th to 2nd vice-president as he enters his third term on the Provincial Executive. He is a long-term care aide at Nanaimo Regional General Hospital and remains active in the local and in the community at large. Hingley is the union appointee on the Central Vancouver Island Regional Health Board, where he has continued to speak out against the encroachment of public/private partnerships and other forms of privatization into the public health care system. He continues to be an advisor to Bladerunners, an organization that helps prepare disenfranchised youth for employment by partnering them with construction companies.

Colleen Fitzpatrick returns as 3rd vice-president, maintaining a record of service on the Provincial Executive that began in 1986 when she was elected as the regional vice-president for the North. Since then she has held the offices of trustee elect, senior trustee, and 5th, 3rd and 2nd vice-president. Fitzpatrick, an accounting clerk at Prince Rupert Regional Hospital, was first elected to her local executive in 1982 and is currently the vice-chair and chief shop steward. She is also a labour council delegate, a union counsellor and the labour appointee to the North Coast Community Health Council.

Thomas (Tom) Knowles is back as 4th vice-president, adding to the resume of positions he has held on the Provincial Executive since 1990 that include 2nd, 3rd and 4th vice-president and trustee. He has also served on the 1988 and 1998 provincial bargaining committees. A precision instrument technician at St. Paul's Hospital, Knowles has been an activist in the local for 27 years and is currently secretary-treasurer. And he's a member of the local's newsletter editorial committee, a union peer counsellor and on the political action committee. In his spare time, he's a little league baseball umpire and an avid golfer and curler.

John Evans | Jackie Pretty | Kathy Dunn | Iris Reamsbottom | Casey O'Hern | Mary Nicholls | Gilbert Tessier

Louise Hutchinson, first elected to the Provincial Executive in 1996, returns as 5th vice-president. A dedicated activist for social justice and equality, Hutchinson is the chair of both HEU's equal opportunity committee and women's committee, and co-chair of CUPE's national women's committee. She works at Children's and Women's Hospital as a bed booking clerk and is trustee of the local, a position she's maintained since 1996. Her extensive labour and community involvement includes being a delegate to the Vancouver and District Labour Council, a board member of the Women in View Performing Arts Society and a member of the Vancouver Women's March 2000 planning committee.

TRUSTEES

Julia Amendt, a Surrey Memorial accounting clerk on long-term disability, assumes the position of senior trustee-elect, replacing Linda Hargreaves. She brings experience to the position, having served in it from 1988 to 1992 and in 1994. Amendt was first elected to her local executive in 1976 and has held numerous positions over the years. She has also been on three provincial bargaining committees and sat on the union's political action and women's committees and the people with disAbilities standing committee.

Donisa Bernardo, first elected to the Provincial Executive in 1998 as the regional vice-president for the Okanagan, is the new senior trustee-elect. A pharmacy technician at Royal Inland Hospital in Kamloops, she has been active in the Kamloops/Thompson local since 1990 and is currently the chairperson. Bernardo is the 1st vice-president and trustee of the Kamloops and District Labour Council and an outspoken activist in the fight for universal Medicare and against public/private partnerships in health care. Her political work includes campaigning against the World Trade Organization and its anti-worker policies. She's the number one fan of the Kamloops Blazers hockey team and claims that hockey at all levels is her best stress reliever.

Kelly Knox begins his third term on the Provincial Executive by moving from Lower Mainland Coastal regional vice-president to trustee. He comes from the St. Paul's local and was first elected to the local executive in 1991 where he has served as vice-chair, chief shop steward, harassment advisor and conductor. Knox has a keen interest in occupational health and safety issues and believes that the work of the Healthcare Occupational Health and Safety Agency is essential in decreasing the injury rates of health workers, and improving working and caring conditions for staff and patients.

Joanne Foote, a recreational aide at Holyrood Manor in Maple Ridge, is a member-at-large and one of the new faces on the Provincial Executive. She is from the Fraser Crossing local and was first elected to the local executive in 1990. She served for eight years as the local's secretary-treasurer, is currently acting secretary and remains a shop steward. Foote chaired HEU's First Nations standing committee from 1996 - 1998, and is the chairperson of CUPE's rainbow committee. She has recently stepped down as a board member of the Ridge Meadows Child Development Centre after eight years of involvement. The foundation of all Foote's activism in the union and in the community is the unshakeable belief that all people should be treated with dignity and respect.

Marty Norgren begins his first term on the Provincial Executive as a member-at-large. He is an employment counsellor at the Coast Foundation Society in the Lower Mainland and has been active in the Coast Foundation local (formerly CUPE 3495) since 1982. He has held every local officer position except treasurer and served on HEU's last bargaining committee. Norgren is also the chair of his housing cooperative and the Provincial Council delegate for the Mt. Pleasant NDP.

REGIONAL VICE-PRESIDENTS

Iris Reamsbottom retains her position as Fraser Valley regional vice-president for the third consecutive term. Active in her local since 1987, Reamsbottom, a medical imaging clerk at Ridge Meadows Hospital, is currently the acting chairperson and chief shop steward. She is also a delegate to the New Westminster and District Labour Council, an HEU women's committee member, chair of the union's political action committee, and on the B.C. Federation of Labour PAC. Among her many community activities, Reamsbottom is the Provincial Council delegate for the Maple Ridge-Pitt Meadows NDP, a Council of Canadians' member and a Block Watch captain.

David Ridley | Tom Knowles | Colleen Fitzpatrick | Dan Hingley | Louise Hutchinson

Gilbert Tessier from the UBC local starts his first term on the Provincial Executive as Lower Mainland Coastal vice-president. He is the coordinator of volunteer services at UBC Hospital and has been vice-president and secretary-treasurer of the local. He is also co-founder of HEAL-Vancouver, an organization that offers non-traditional health information to people diagnosed HIV positive or living with AIDS. As a member of the Provincial Executive, Tessier wants to make the public more aware of the value of unions and the real contributions they make to our communities.

Mary Nicholls begins her second term as regional vice-president for the North. She has been active in her local for approximately 10 years, eight of those as secretary-treasurer, and is currently the chairperson. Nicholls works at Mills Memorial Hospital as an LPN and activity worker and is a strong advocate for LPNs and the Nursing Team. She is serving a second term as a director on the board of the College of Licensed Practical Nurses of B.C. Nicholls is an active member of her community and is involved in a variety of sports and other non-profit organizations in Terrace.

Jackie Pretty is the new vice-president for the Centennial region. This is her first term on the Provincial Executive, and she comes from an activist background at the Buchanan local, where she is the secretary-treasurer and a shop steward as well as co-chair of the joint OH&S committee. Pretty is a care aide on long-term disability and is currently working toward a certificate in health sciences (OH&S) at the British Columbia Institute of Technology. She is involved in her church, and her home provides a safe haven for abused and mistreated animals.

Marilynn Rust also joins the Provincial Executive for the first time – as regional vice-president for Vancouver Island. She is a residential care worker at the Dartmouth Group Home, Western Human Resources. She was the chairperson of the Community Social Services Bargaining Committee (1998-1999), and she emerged as a leader during those contentious negotiations. Rust says that she is looking forward to learning about and supporting all the sectors in HEU during her term on the Provincial Executive.

John Evans, also a first-timer, serves as the Provincial Executive's Kootenay regional vice-president. He hails from the Pioneer/Swan local and is a cleaner at the Swan Valley Lodge in Creston. He is currently chairperson of his local. He started out as a union activist at Mount Saint Mary Hospital in Victoria in 1978. In 1992 he moved to the Kootenays, started working at Swan Valley, and continued his union activism. Between the two locations, he has served in all the local executive positions and has been shop steward, chief shop steward and on the OH&S, labour adjustment and essential services committees. He's availed himself of several educational opportunities offered by the union, attending HEU's summer school, the Canadian Labour College in Ottawa and many workshops.

Kathy Dunn is the new Okanagan regional vice-president, and this is her second stint on the Provincial Executive. She served in the same position from 1994-1996. She's a stores attendant at the Vernon Jubilee Hospital, and is currently chairperson of her local, a position she has held since 1996. Like many activists, she has served in several other positions and committees in her local, and this is not her first time as chairperson. Right now she is sitting on the labour adjustment committee and is a delegate to the labour council in Vernon. At the recent convention, Dunn was the chair of the resolutions committee. In her community, she is active in the Women Take Back the Night committee.

Casey O'Hern begins his second term as vice-president for the Central region. He joined the Provincial Executive midway through last term when as elected alternate, he took over from Tony Gomes. O'Hern is a cleaner at St. Mary's Hospital in New Westminster, where he has worked since 1988. He was first elected to his local executive in 1993 as trustee/shop steward. In 1994 he became vice-chair and in 1998 was elected chairperson, a position he continues to hold. He has been active in the Simon Fraser caucus since 1996 and currently serves as chair. He is also a delegate to the New Westminster and District Labour Council.

The bargaining committee that will represent HEU on the HS&S Bargaining Association is made up of 10 elected members plus the president, secretary-business manager and financial secretary of the union

OUR BARGAINING TEAM IS READY

Chris Allnutt
SECRETARY-BUSINESS MANAGER
HEU

Fred Muzin
PRESIDENT
HEU

Mary LaPlante
FINANCIAL SECRETARY
HEU

Leo Bibo
ELECTRICIAN
VGH

KATE WILLIAMS PHOTO

Jaana Grant of Finnish Care Facilities in Vancouver doesn't agree with the bargaining demand committee's recommendation. Dave Pellerin of Surrey Memorial waits his turn.

conference NOTEBOOK

MELVIN

DRICOS

Musical voices Music is always part of HEU's conventions and conferences. Whenever there is a pause in the proceedings, you can count on someone approaching the microphone to sing. Sometimes they need to be coaxed – a little. For this Wage Policy Conference, several singers filled the bill. Katherine Melvin, she of the funny hats, from Kardel Consulting Services in Victoria, treated the delegates to her lovely, lilting voice. And Sophia Dricos from Mt. St. Francis in the Kootenays belted out some powerful musical messages. Cindy Dodd, a delegate from Haney Intermediate Care Centre in Maple Ridge, is always in demand at HEU conferences, and she didn't disappoint. These interludes take the edge off when delegates are tired or restless, making everyone feel a little better.

UFCW head brings greetings Brooke Sundin, ex-home care worker and president of United Food and Commercial Workers Local 1518, addressed HEU delegates on the conference's second day. He said he is looking forward to the next round of bargaining, especially after the premier's commitment to tear down the wall between the community and facilities health sectors.

This will bring the three largest unions in the province together – HEU, BCGEU and UFCW – as part of the HS&S Bargaining Association he said. And we'll all benefit from this solidarity, he added.

Caring for a living Marilynn Rust, chairperson of the community social services bargaining committee in 1998-99, hands the committee's strike scrapbook to president Fred Muzin.

Agreement will set standard

After three days, Wage Policy Conference delegates gave clear mandate to bargaining committee

On the first day of HEU's fifteenth Wage Policy Conference secretary-business manager Chris Allnutt told delegates, "We are here to determine for HEU – one of the unions in the Health Services and Support Bargaining Association – what we want from bargaining." And after three days of intense debate, the newly-elected Provincial Bargaining Committee got the message loud and clear – we want a fair contract.

About 200,000 public sector workers – 60,000 of them in the HS&S Bargaining Association – will be negotiating new contracts next year, Allnutt said "This collective agreement will set the standard."

Before the conference even began, the bargaining demands committee went through the hundreds of demands sent in from locals around the province. Chris Duckett, chair of the committee, explained the criteria they had used to determine the committee's recommendations to delegates:

- Is it consistent with the goals and philosophies of the union?
- Is there a definite benefit to members?
- Would it marginalize any group of members?
- Will it aid in removing the wall between the community and facilities sectors?
- Is it equitable?
- Do we have jurisdiction?
- Is it inferior in any way to our actual contract?
- Could it be a loss to any group of members?
- Would it limit the ability of the Provincial Bargaining Committee to negotiate better or new language?

"WE HAVE A CONCRETE UNDERTAKING FROM THE PREMIER THAT NEGOTIATIONS WILL TAKE PLACE AT A SINGLE TABLE"

The committee didn't waste any time getting down to business once the conference was over. They met almost immediately to frame a comprehensive package to present to employers when negotiations start.

The 13 members of the committee identified five main bargaining goals.

To cover employees who work in the facilities and community subsectors under one master agreement is first and foremost a matter of fairness. With agree-

Five steps forward for our future and our health care

ONE CONTRACT FOR ALL
One agreement for all is in the best interest of progressive health care reform and addresses the key issues of fairness and treatment of caregivers. In order to ensure a seamless continuum of care between the facilities and community sectors, HEU will be bargaining for an end to wage and benefit discrimination against health services and support workers based on where they work.

EMPLOYMENT SECURITY
To ensure effective utilization of the current health care workforce, the bargaining committee will be looking to strengthen the current provisions of employment security, improve training and educational leave opportunities, reduce the contracting out of work in health care, utilize the skills of our Nursing Team members, achieve fairness for casual employees and improve severance provisions.

Barb Burke
O.R. WARD CLERK
PENTICTON

Chris Duckett
PLUMBER, MAINTENANCE WORKER
POWELL RIVER

David Lowther
STERILE SUPPLY
VICTORIA GENERAL HOSPITAL

Frank McCann
DISTRIBUTION COORDINATOR
ROYAL COLUMBIAN

Laura Neil
UNIT CLERK
ROYAL JUBILEE

Ronnie Nicolasora
LAUNDRY WORKER
TILBURY

Bob Peacock
LAUNDRY AIDE
BROADWAY PENTECOSTAL

Sheila Rowswell
CLERICAL WORKER
G.F. STRONG REHABILITATION CENTRE

Dave Santella
CRISIS PROGRAM WORKER
CRESST

Unions, employer to begin bargaining before year-end

The Provincial Bargaining Committee will commence bargaining with health employers for a new collective agreement on Dec. 19, 2000. Chris Allnutt expects this first meeting to focus on establishing a general framework for bargaining. A further 10 days have been scheduled with the Health Employers Association of B.C. between Jan. 10 and Feb. 1, 2001. The collective agreements covering general and support workers in the community and facilities subsectors expire March 31, 2001.

The B.C. Government and Service Employees' Union is also part of the HS&S Bargaining Association. BCGEU president George Heyman says, "Our goal is to bargain a new collective agreement covering all community and facilities health care workers before the current contracts expire. That's why we served notice to bargain at the earliest possible moment."

DALE FULLER PHOTO

Hundreds of Wage Policy delegates gave their bargaining committee a mandate to seek a fair contract, a task the committee immediately set about to accomplish

The unions in the association have agreed to be bound by a process that would require an agreement of the largest union – HEU – and at least one other union on any proposals or agreements as a way of ensuring the protection of the rights of minority unions.

KATE WILLIAMS PHOTO

ment between the unions in the bargaining association and movement on the part of the government, this is now an achievable goal.

"There is some resistance from health employers to bargaining across the facilities/community wall," says Allnutt. "But we have a concrete undertaking from the premier that negotiations will take place at a single table – and we'll hold health employers to that commitment."

There will be levelling, comparability, pension and LTD supplementary benefits provisions included under this category. New certifications will automatically be included in this contract, retroactive back to April 1997.

The bargaining committee will be seeking to strengthen the employment security provisions which HEU members currently enjoy, with a longer security period, improvement in bumping rights and more training and educational leave opportunities.

Conference delegates spent a lot of time debating about casuals, and the bargaining committee will be demanding fairness for casual status employees.

Employers and the union will also be discussing the rights and roles of volunteers to create a more positive relationship with front-line care providers.

An across-the-board flat general wage increase in the first year of a two-year contract and a fixed percentage increase in the second will be an important item in the package the bargaining committee presents to the employer. The package will include demands for a cost of living allowance so workers' salaries will be cushioned from inflation.

Health care workers suffer from some of the highest rates of on-the-job injuries, and they're fed up. They want safe workplaces, and they've identified concrete ways for their employers to make this happen.

HEU members want fairness and justice and feel there are many inequities that must be addressed at the bargaining table. Those who are on long-term disability are victims of gross injustice, and the bargaining committee will be seeking to remedy this. Other fairness issues include compassionate leave, child care, grievances and equity.

Donna Dickison of the Haro Park local address one of the hundreds of bargaining proposals.

KATE WILLIAMS PHOTO

Timing, strategy are the keys

It's important to get to the bargaining table early and conclude collective bargaining as quickly as possible – but not at any cost. That's the first element of the union's strategy to win a fair collective agreement in the upcoming round of bargaining, according to HEU secretary-business manager Chris Allnutt.

"HEABC wants to delay bargaining until after the (provincial) election," Allnutt told delegates to the fifteenth Wage and Policy Conference. "They expect their friends will get elected."

Allnutt compared HEU's situation with the experience of Ontario public sector workers who chose not to settle a collective agreement at the end of former NDP premier Bob Rae's government and instead took their chances with Mike Harris. The result? Thousands of jobs were lost as Harris changed the laws making privatization and contracting out easier.

"We will fight no matter what," said Allnutt. "But we must be in a position to make a choice.

"We will not come to you with a collective agreement that is inferior. If an early agreement does not address your needs, we won't bring it to you. If we have to deal with a new government, we will. But we need flexibility."

"BARGAINING PRIORITIES MUST BE BACKED UP WITH ACTION IN THE WORKPLACE."
• Chris Allnutt

Another critical element in the strategy to win a fair collective agreement is putting essential services levels in place by April 1. Front-line health care workers will negotiate essential services levels that protect the health and safety of patients and residents but will not tolerate levels biased in favour of the employer.

And Allnutt told delegates that HEU's bargaining priorities must be backed up with action in the workplace. "We have to launch and be involved in local campaigns in the workplace," said Allnutt.

A successful conclusion to bargaining will require coordination among all public sector workers and their unions through the B.C. Federation of Labour. It's especially important for HEU and its allies to work closely on bargaining issues shared with the Health Sciences Association and the B.C Nurses' Union. "When unions aren't together the boss cheers," said Allnutt.

COMPENSATION
In order to attract and retain health care workers in a strong public health care system we need a two-year agreement which provides for an across-the-board flat general wage increase in the first year and a fixed percentage increase in the second, with a COLA clause. Bargaining needs to abolish increment steps, to target discrepancies in benchmarks, to improve on-call, call-back language and to improve extended health and dental benefits.

SAFE WORKPLACE
A healthy workplace will be achieved by bargaining language that ensures replacement for absent staff, safe staffing ratios, the use of mechanical lifts, payment of premiums for first aid attendants, an employee assistance program for all employees and their families, strengthening of the OH&S provisions, reduction of excessive overtime, minimum standards for maintenance and plant services.

FAIRNESS AND JUSTICE
To achieve fairness and justice, there must be improvements in the long-term disability plan, barriers to union representation under regionalization must be removed and improvements to provisions for compassionate leave, child care, grievance procedures and equity in the workplace.


PHOTOS BY STEPHEN HOWARD

MOVING TO THE MIDDLE?

There's still a hard, pro-business edge to B.C. Liberal boss Gordon Campbell and a fixation with tax cuts. But in an exclusive interview with *Guardian* editor **STEPHEN HOWARD**, the opposition leader outlines some big policy shifts on key issues like employment security, privatization and seniors care. Is it calculated political posturing designed to demobilize his opponents? Or a pre-election olive branch? The trust issue looms large.

Put yourself in the shoes of an HEU member. What's it like on the frontlines now in our health care system?

IT'S pretty stressful for HEU workers. They're working extremely hard, under very difficult circumstances and they are worried about whether they're able to deliver the service that people expect of them, that they want to provide to people. There are days when they go home and they're exhausted and they wonder how they are going to start the next day. I think they are trying to provide excellent service and they understand how important the service is to people.

You've toured the province extensively on health issues. You've said we need a short term plan and a longer term one that provides for some fundamental changes. Sketch it for us.

The first part of the plan is to recognize the foundation for a good, strong public health care system is people. And there is a continuum of care and of talent that has to be applied to patients' needs when they come into the health care system. My plan is to make sure that people get the care they need where they live and when they need it. If I get sick I want to be sure there is a doctor there to diagnose what the problem is. That doctor has to know there are nurses there behind so that they can provide the support. Those nurses have to know that there are Care Aides and LPNs behind them to give them the support so they can apply their professional expertise. We have to have a long-term health plan that looks at human resources, at capital plant, and machinery and equipment. If I have heard one thing in our dialogue for health care, it is that there is no plan.

Governments across the country are wrestling with nursing shortages, overburdened hospitals, "bed-blockers" and a lack of long-term care places for seniors. What kinds of solutions would you introduce?

First, we will empower the health committee of the legislature to meet on a regular basis with players in the health care system. Second, you have to recognize a human resource crunch is coming. We have to provide that training within the system. We have to increase nursing training positions, we have to increase LPN training positions. I think the advantage of LPN training programs is that they are much quicker into the system. The advantage of the Care Aide program is that they are much quicker still so that you can build a ladder of expertise and response to deal with nursing. I agree with you in regard to the problem with long-term care users in the acute care system. If you don't provide the home care people need, if you don't provide the facilities so that people can move in, then frankly what you are doing is pushing a lot of health care problems out on to the street. And they're coming back as acute issues, back into the hospital, which we don't want.

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Would you continue the precedent set by the NDP in terms of increased health funding?

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If I thought we were going to reduce a billion and half dollars in revenue because we're giving people a tax cut then that would be a real issue. I don't believe that happens. And the only tax that we've talked about, for the upcoming election, is personal income tax for the bottom two brackets of the income scale. Your workers in the HEU have watched, well maybe not your workers but I bet they have, their average take home pay has gone down. The average take home pay for B.C. working families has gone down by $1,700 a year over the last decade. I believe when you cut personal income tax, you are increasing pay cheques for everyone in this province. And they will then spend that money in the local economy which will create jobs. So effectively, you have more people at work, paying a lower tax rate but generating more revenues to government.

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I favour not-for-profit because when you deal with not-for-profit in communities you are actually building communities as well as health care. We have to remember that people want to give to their communities. And when you create the environment that allows them to do that, I think you do more than just take care of the people who need long-term care. You take care of the spirit of community. You provide a quality of care, and quality of facility that I think is significantly better.

There are groups who are more friendly to your party than to the government who are saying we need to privatize all seniors' care.

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The short elaboration is, as far as I'm concerned we always have. Clearly I don't want people paid different amounts of money because of their gender. I think that this is not right. My mother is a perfect example of why you need pay equity. My mother worked in her job for 25 years and her union consistently asked for an increase in her rate because of what she did. But they were consistently told no. She left and suddenly they put a vice-principal in her place. She was a school secretary. That is not right to me and not just because it was my mother. You have to recognize what people do and you have to value their work: I can tell you, you take the words pay equity and you look at every union contract in the province of B.C. and you'll find different definitions in different places but I'm for pay equity as a principle. And I think the public is.

"The B.C. Liberals recognize the importance of HEU workers to the public health care system."

Monitoring the pulse of HEU members, their sense of a Gordon Campbell government would be the privatization of health care services and their jobs.

I don't think they have to worry about it. Their sense should be that Gordon Campbell and the B.C. Liberals recognize the importance of HEU workers to the public health care system. They are frontline workers who are necessary. You can't talk to anyone in the health care system who doesn't recognize that and I want HEU workers, like other workers in the public health care system or in the public service to recognize their value and we will value them.

So you don't subscribe to the notion advanced by the Fraser Institute, the B.C. Business Summit and elements within the BCMA that what we need to do to protect Medicare is to maintain direct patient care services in the public sector and hive off and privatize the "hotel" type services that are also an important part?

I think our job is always to get the best value for patients. In terms of medically necessary services, I think we should be providing those through the public health care system. [When he was mayor of Vancouver] I found that the workers in the city, nine times out of 10, were providing way better value in terms of what we were doing than "private" sector workers would. I would be shocked if HEU workers don't believe that themselves. What they want is a fair opportunity to provide their service in the best possible way and that is what they are going to get.

A 48-year old housekeeper, who has finally, after decades of struggle, come up to the average wage in B.C. Does she have anything to worry about privatization from a Gordon Campbell government?

I say no. What she's going to find is that people in British Columbia and the government are recognizing the value of the work she does. More importantly, she's going to find the quality of work she's able to do is more rewarding and fulfilling.

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So there will be no legislative initiatives to remove it from the Collective Agreement?

I don't plan on it, no.

What role should private clinics play in our health care system?

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Why should HEU members, why should British Columbians vote for Gordon Campbell?

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PHOTOS BY STEPHEN HOWARD

MOVING TO

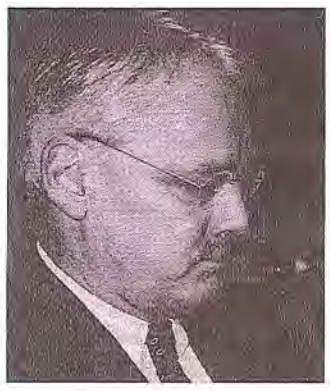
There's still a hard, pro-business edge to B.C. Liberal boss Gordon Campbell and a fixation with tax cuts. But in an exclusive interview with *Guardian* editor **STEPHEN HOWARD**, the opposition leader outlines some big policy shifts on key issues like employment security, privatization and seniors care. Is it calculated political posturing designed to demobilize his opponents? Or a pre-election olive branch? The trust issue looms large.

Put yourself in the shoes of an HEU member. What's it like on the frontlines now in our health care system?

IT'S pretty stressful for HEU workers. They're working extremely hard, under very difficult circumstances and they are worried about whether they're able to deliver the service that people expect of them, that they want to provide to people. There are days when they go home and they're exhausted and they wonder how they are going to start the next day. I think they are trying to provide excellent service and they understand how important the service is to people.

You've toured the province extensively on health issues. You've said we need a short term plan and a longer term one that provides for some fundamental changes. Sketch it for us.

The first part of the plan is to recognize the foundation for a good, strong public health care system is people. And there is a continuum of care and of talent that has to be applied to patients' needs when they come into the health care system. My plan is to make sure that people get the care they need where they live and when they need it. If I get sick I want to be sure there is a doctor there to diagnose what the problem is. That doctor has to know there are nurses there behind so that they can provide the support. Those nurses have to know that there are Care Aides and LPNs behind them to give them the support so they can apply their professional expertise. We have to have a long-term health plan that looks at human resources, at capital plant, and machinery and equipment. If I have heard one thing in our dialogue for health care, it is that there is no plan.



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December 19
Facilities/community subsectors' bargaining begins.

December 25/26
Christmas Day and Boxing Day, HEU offices closed.

2001
UN International Year of Volunteers.

January 1
New Years Day, HEU offices closed.

January 19
Vancouver & District Labour Council, Robbie Burns Night.

January 21-February 16
CLC Pacific Region Winter School.

February
Black History Month.

February 4
CLC Pension Conference.

February 13-15
HEU Introductory Shop Steward Seminar, Vancouver Island.

February 20-22
HEU Introductory Shop Steward Seminar, Lower Mainland.

March 8
International Women's Day.

March 21
International Day for the Elimination of Racism.

This is the real toy story

CHILDREN love their toys. They always have and they always will. There has always been a romance about toy factories. Children's movies and books show happy workers having an awful lot of fun making playthings for kids.

But what happens when toys are made by children working in inhuman conditions? What if children die making toys? Or what if toy makers get sick from handling and breathing poisonous chemicals?

That is precisely what is happening, according to Victoria writer and researcher Sarah Cox. In *The Secret Life of Toys*, Cox tells of factories in the Far East where workers earn as little as six cents an hour for a 12-hour shift.

"What I discovered is that, espe-cially if a toy is made in a third world country like China, Malayasia, Thailand or Vietnam, the chances are that it was made under exploitative conditions," Cox told the CBC television program *Marketplace*.

The CEO of the giant toy manufacturer Mattel earns a salary of U.S. $5,000 per day. "It would take a Chinese worker making Japanese Barbies working seven days a week for four-and-a-half years to earn that much money," Cox says.

The production of Barbies is a perfect illustration of the globalization of the toy industry. The Puerto Rican Barbie is produced in Malaysia, the Japanese Barbie in China and the First Nations Barbie is made in Indonesia.

"Yet even as Barbie gives new meaning to the concept of the global village, the unfettered global economy means we know far less about the factories that toys come from or who makes them and how," says Cox.

Workers in North American toy companies mostly assemble and package toys that were produced overseas, where workers earn next to nothing and have zero protection from disease and even death.

Cheap labour and tax breaks have lured toy companies out of the U.S. and Canada. And more often than not, health and safety regulations, if they exist at all, are not enforced.

Two particularly horrendous incidents have drawn the world's attention to the working conditions of people – mostly young women, some of them as young as 12 – who make the toys that are so popular with today's children. Like Barbie. Like the little plastic toys that McDonalds hands out to children.

Almost 300 women died in two fires in Asia a few years ago. The workers were locked inside the buildings so they wouldn't leave before their work was completed.

As international pressure focuses on giant toy companies like Mattel and Hasbro, they protest that they enforce a "code of conduct" in the places that make their toys. But they will not permit independent monitors.

CLC president Ken Georgetti recently toured several factories in China. He was shocked at the working conditions.

"Canada has to take a stand," he says. "We, as a country, have to demand and expect certain standards."

The CLC has been lobbying Ottawa to make decent labour standards a part of any trade pact Canada signs with other countries.

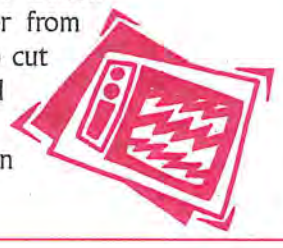
Cox says it's important for parents and others who buy toys to demand to know where and how toys are made.

"I do not want my daughter to have toys produced by another child," she says. "When I watch her play, I do not want to see shadowy images of fires and poisonings and 16-hour shifts."

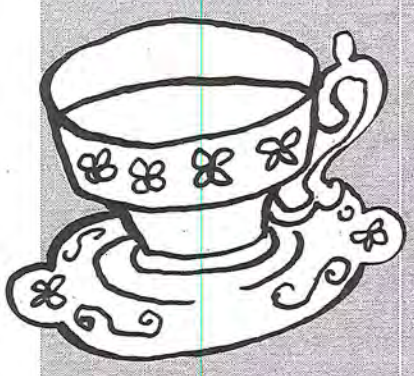
WORKING TV

On the web, now in Broadband: available across B.C. and all of North America, check out the new high quality webcasts by our new Broadband server at *www.workingtv.com*.

On community television: Good news for Lower Mainland viewers. Shaw cable has taken over from Rogers as of Dec. 1, but have agreed NOT to cut programming, including Working TV until Sept. 2001. Watch this space for news on the campaign to keep community access television on Shaw.



Coffee break



All stories guaranteed factual. Sources this issue: United Features Syndicate, George W. Bush, www.worktrauma.com

Satisfaction

A frog goes into a bank and approaches the teller. He can see from her nameplate that her name is Patricia Whack.

"Miss Whack. I'd like a $30,000 loan so I can go on holiday."

Pattie looks at the frog in disbelief and asks his name.

The frog says his name is Kermit Jagger, and it's okay because he knows the bank manager.

Pattie explains that he will need to secure the loan with some collateral.

The frog says, "Sure, I've got this," and produces a tiny porcelain elephant, about half an inch tall, bright pink and perfectly formed.

Very confused, Pattie says she will have to consult with the bank manager and disappears into a back office.

She finds the manager and says, "There's a frog out there called Kermit Jagger who claims to know you and wants to borrow $30,000. He wants to use this as collateral."

She holds up the tiny pink elephant. "I mean, what in the world is this?"

The bank manager looked back at her and said, "It's a knick-knack, Pattie Whack, give the frog a loan, his old man's a Rolling Stone."

Office jargon

- Blamestorming: sitting around in a group, discussing why a deadline was missed or a project failed, and who was responsible.
- Seagull manager: a manager who flies in, makes lots of noise, poops all over everything and then leaves.
- Chainsaw consultant: An outside expert brought in to reduce the employee head count, leaving top brass with clean hands.
- Cube farm: an office filled with cubicles.
- Idea hamsters: people who always seem to have their idea generators running.
- Prairie dogging: when someone yells or drops something loudly in a cube farm, and people's heads pop over the walls to see what's going on.

Strategic management

In the beginning was the Plan.

And then came the Assumptions.

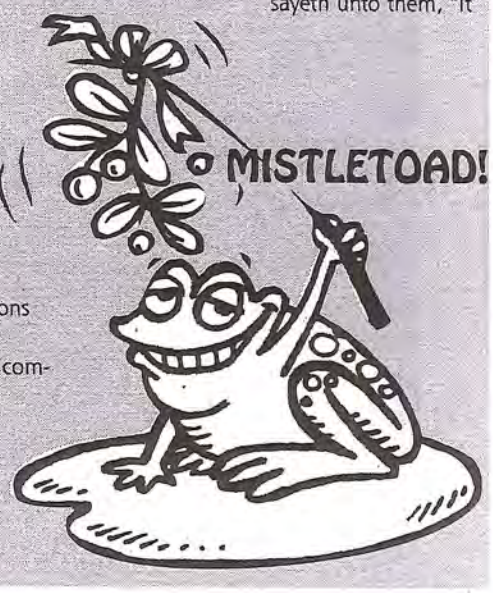
And the Assumptions were without form.

And the Plan was completely without substance.

And that darkness was upon the face of the workers, and they spoke among themselves, saying, "It is a crock of s—- and it stinketh."

And the workers went unto the Supervisors and sayeth, "It is a pile of dung and none may abide the odour thereof."

And the Supervisors went unto the Managers and sayeth unto them, "It



HEU people

Richmond food worker retires

Patricia Dempsey who worked in the food and nutrition department at Richmond Hospital retired on Nov. 30 after more than 24 years of service. On Nov. 29 her co-workers presented her with a certificate in appreciation of all the years of service to her union local as secretary-treasurer, chairperson, shop steward and vice chairperson. She says she doesn't have any definite plans for her retirement yet, but she's sure she'll think of some way to keep herself busy.

Retired, but lots to do

Nanaimo Travellers Lodge long-term care aide **Eileen Wilkinson** plans on volunteering at the day surgery department at Nanaimo Regional General Hospital after her retirement in September. She began work at the lodge in October 1986.

She's also busy tutoring her grandson Dakota and spending more time with her other five grandchildren as well. This Christmas will see her in Saskatchewan with her family. She says she has the time now to enjoy her knitting, crocheting and reading.

Her co-workers mis her and wish her the very best.

PAQUETTE

Sister **Annette Wilkins-Smietana** of Royal Columbia Hospital passed away this past summer. She was an active union member and served on her local executive in many positions, including as chairperson. "She was a true HEU activist and guided the next generation of activists into the fold," says Robert Nolette, past chairperson of the RCH local.

Into the fray – again

HEU communications secretary **Gail Paquette** accepted the nomination to run for the New Democrats in Richmond in the recent federal election. She made a respectable showing by coming in third on a slate of seven candidates.

"It was very intense, a lot of fun, I really enjoyed it," said Paquette of her three-week campaign. "I ran in the provincial election in 1996, in the municipal election in 1997, for the federal election in 2000, and I don't plan on running again," she says.

In Memoriam

MORTON

Vivi Morton loved her job at Cumberland Health Centre, where she worked for the past 10 years as a care aide. She played an active role on the Cumberland local executive and is sadly missed by her sisters and brothers in HEU. Vivi lost her battle with cancer at the young age of 59 on Sept. 10.

WCB and comparability

If you are a regular full-time or part-time employee who has had a WCB claim since April 1, 1996, and whose claim was closed between that date and Sept. 8, 2000, you should have received your pay adjustment directly from your employer to cover the period on WCB. If not, contact your payroll department immediately. You should not be taxed for any retroactive period you were on a claim.

If you are a regular full-time or part-time employee, your claim is current, and you have not received an adjusted compensation rate by Jan. 31, 2001; a casual employee who has had a claim any time since April 1, 1996; if you at any time received vocational rehabitional benefits; or any HEU member who has received a permanent partial disability pension from the WCB since April 1, 1996, and has not had the pension readjusted due to comparability, send in the information requested below to the appropriate address.

Information required: name, WCB claim number, address, telephone number, social insurance number, employer and location, pay grade, approximate period of disability, type of WCB benefit (wage loss, rehabilitation, pension).

INTERIOR/NORTHERN B.C. 110-2045 Enterprise Way, Kelowna V1Y 9T5, Att: Trevor Alexander.

LOWER MAINLAND: 6951 Westminster Hwy, Richmond, V7C 1C6, Att: Klaus Kolmeyer.

VANCOUVER ISLAND: 4514 Chatterton Way, Victoria V8X 5H2, Att. Paul Kismer.

If you have any further questions contact your servicing representative.

EQUITY PHONE LINE

1.800.663.5813, ext. 514
Lower Mainland 739.1514

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Ethnic Diversity

One union, many colours! Working across our differences! To participate, please call and leave us your name!

press 2

First Nations

First Nations members would like to hear from you! Please call if you would like to help educate our union brothers and sisters on issues that affect First Nations people.

press 3

Lesbians and Gays

For support: afraid of being identified, feeling isolated, want to know your rights? Call for information on same sex benefits, fighting homophobia and discrimination.

press 4

People with disAbilities

We'd like to hear from you, if you are on WCB or LTD. Or if you are invisibly or visibly disabled in the workplace, let us know how the union can better meet your needs.

ALL CALLS ARE CONFIDENTIAL

TALK TO US ... TOLL-FREE!

You can call any HEU office toll free to deal with a problem or to get information. It's fast, it's easy and it's free.

PROVINCIAL OFFICES:
- Vancouver site 1-800-663-5813
- Abbotsford site 1-800-404-2020

NORTHERN OFFICE:
- Prince George 1-800-663-6539

OKANAGAN OFFICE:
- Kelowna 1-800-219-9699

VANCOUVER ISLAND OFFICES:
- Victoria site 1-800-742-8001
- Nanaimo site 1-800-347-0290
- Courtenay site 1-800-624-9940

KOOTENAY OFFICE:
- Nelson 1-800-437-9877

is a container of excrement and it is very strong, such that none may abide by it."

And the Managers went unto their Directors and sayeth, "It is a vessel of fertilizer, and none may abide its strength."

And the Directors spoke amongst themselves, saying one to another, "It contains that which aids plant growth, and it is very strong."

And the Directors went unto the Vice-Presidents and sayeth unto them, "It promotes growth and is very powerful."

And the Vice-Presidents went unto the President and sayeth unto him, "This new Plan will actively promote the growth and efficiency of the organization, and in these areas in particular."

And the President looked upon the Plan, and saw that it was good, and the Plan became Policy.

This Is How S—- Happens.

Potentially presidential

The following are quotes from speeches and comments made publicly over the last 10 years by an American politician with aspirations to the presidency.

Read on to find out who the leader-wannabe is.

"I stand by all the misstatements that I've made."

"I have made good judgments in the past. I have made good judgments in the future."

"We are ready for any unforeseen event that may or may not occur."

"If we don't succeed, we run the risk of failure."

"A low voter turnout is an indication of fewer people going to the polls."

"People that are really very weird can get into sensitive positions and have a tremendous impact on history."

Governor George W. Bush

Dilbert's words of wisdom

1. I can please only one person per day. Today is not your day. Tomorrow's not looking good either.

2. I love deadlines. I especially love the swooshing sound they make as they go flying by.

3. Tell me what you need, and I'll tell you how to get along without it.

4. Accept that some days you're the pigeon, and some days you're the statue.

5. I don't have an attitude problem. You have a perception problem

6. On the keyboard of life, always keep one finger on the escape key.

7. I do not suffer from stress – I'm a carrier.

8. Never argue with idiots. They drag you down to their level then beat you with experience.

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by notifying us promptly of any change of address. Just clip this coupon, which has your mailing label on the back, fill in your new address below and mail to the *Guardian*, 2006 West 10th Ave., Vancouver V6J 4P5.

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WIN

A COVETED HEU JACKET

All you have to do is send us your e-mail address, and we'll throw your name into the barrel. We'll pick a winner on January 31. By the time you read this, we'll already have sat down with the boss to begin bargaining our next contract. Once we get into the thick of it, there will be times when we'll need to mobilize with lightening speed to back up our demands. Getting the word out – fast – could make all the difference.

That's why HEU is collecting as many e-mail addresses as we can. And what better incentive than the possibility of winning one of our beautiful jackets, complete with fleece zipped-in vest, a $230 value. If you send in your e-mail address by January 31, along with your name, which local you belong to – we'll throw your name into a draw. Winners will be announced in the first 2001 *Guardian.*

You can mail this form to:

HOSPITAL EMPLOYEES' UNION
c/o Kristina Vandervoort
Communications Dept.
2006 West 10th Avenue
Vancouver, B.C., V6J 4P5

Or, you can fax or e-mail this same information to:

fax: 604.739.1526

e-mail: kvandervoort@heu.org

PLEASE PRINT

Name: _____

E-mail address: _____

Fax number: _____ ❑ home ❑ work ❑ union local

HEU Local: _____

Facility site: _____

Home address: _____

Home telephone number: _____

Are you on local executive? _____ Position? _____

Are you on any of HEU's committees? _____ If so which ones? _____

_____

Guardian

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LPN wins Merritt

Laura Besse is recognized by her community for her years of service.

PAGE 4

Research project completed

A report on Nursing Team utilization in British Columbia was released to the public on Oct. 25.

PAGE 5

Employer foiled in California

Organize a union and I'm moving to Mexico, he said. No you're not, said the Labour Relations Board.

PAGE 7

Toy story, too

Parents should know that a lot of toys they buy for their kids are made by other children.

PAGE 18

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