

THE HOSPITAL GUARDIAN

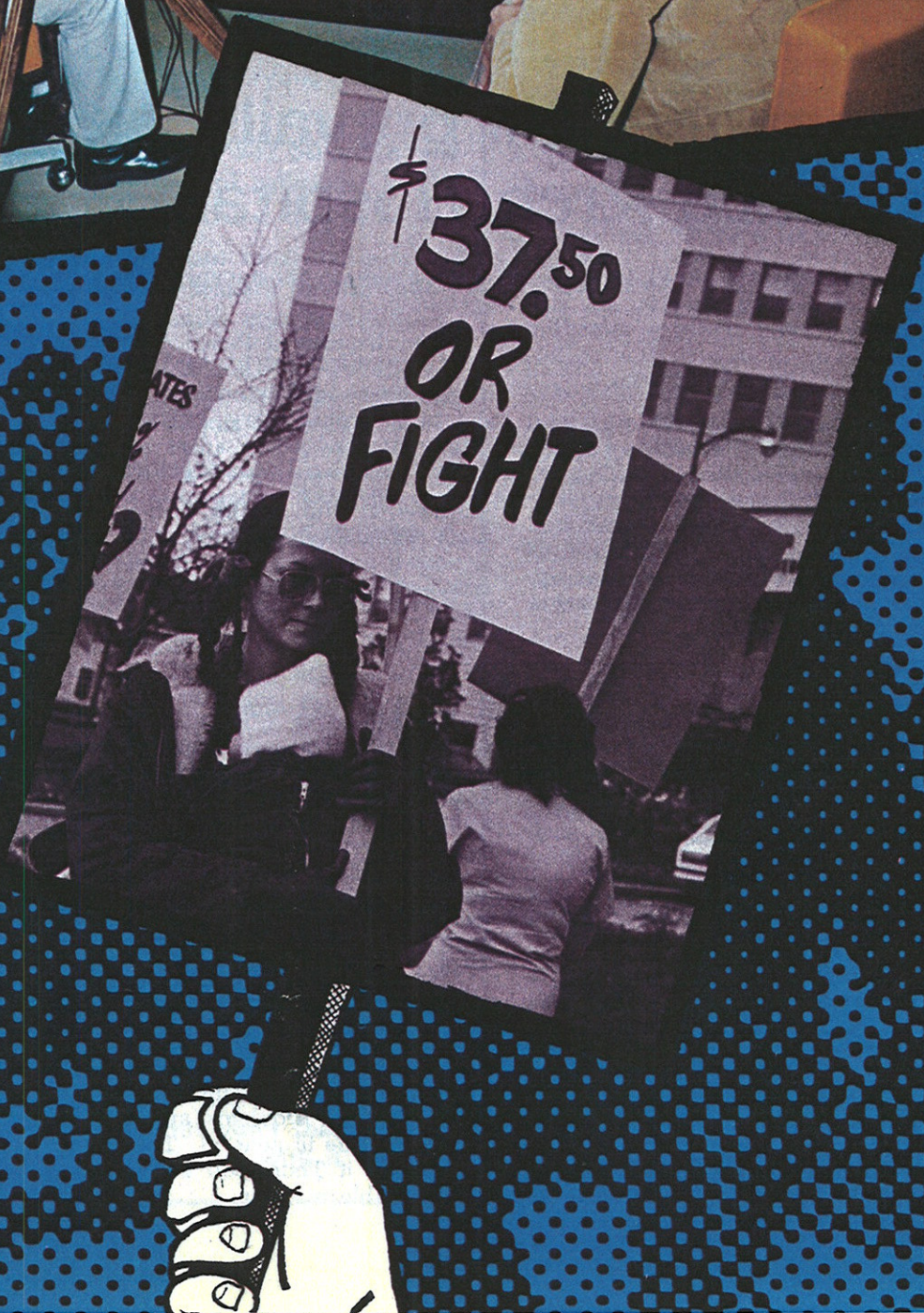
HOSPITAL EMPLOYEES' UNION, 180

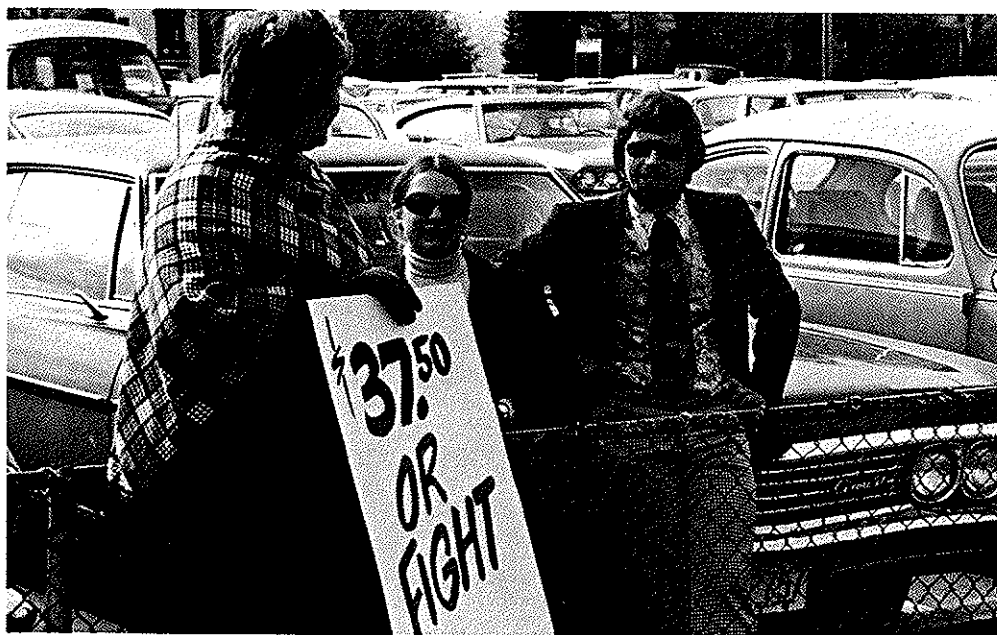
Vol. XIII

VANCOUVER, B.C., MARCH-APRIL, 1976

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No. 2





BEHIND FENCE near demonstration at Vancouver General Hospital, Nancy Conrod and Glen Smail of the Registered Nurses Association of B.C. observe H.E.U. members while talking to Staff Rep Bernie Gehring. Bernie then rejoined demonstrators. (See pages 6, 7).

Arrogance still prevails at Peace Arch Hospital

Employee relations at White Rock's Peace Arch District Hospital are still poor, with several issues outstanding because of lack of co-operation by administrator Derrald Thompson.

The latest dispute stems from Thompson's original refusal to provide job descriptions for most job categories at the hospital. Some months ago, after much prodding by the Union and an investigation by the Labor Relations Board, Thompson sent in job descriptions — but they included violations of the B.C. Human Rights Code.

Cleaners, orderlies and utility employees (among others) were described as "males," and the discriminatory title "maid" was used.

Other clear violations of human rights legislation discriminated against the handicapped with uses of such phrases as "must have no physical impediments" and "must be in good health without limiting physical handicaps."

After unsuccessfully trying to alter the job descriptions between the parties, H.E.U. called in a Human Rights officer who visited Thompson's office and weeded out the violations. Thompson's reaction: all of the hospital's job descriptions were withdrawn.

The Union has had to call on the Labor Relations Board once again to

enforce the establishment of job descriptions.

Other disputes at Peace Arch being investigated by the LRB include Thompson's refusal to discuss the firing of a probationary employee and intimidation of nurse aides (reported in the November-December Guardian).

However, the Health Labor Relations Association, of which Peace Arch is now a member, has refused to get involved with Thompson and his problems.

The federal Unemployment Insurance Commission has also been asked by the Union to look into complaints by employees that they have never received UIC rebates which are supposed to be paid to employees by the hospital each December under the premium reduction plan.

The Union has asked the Commission to confirm whether the monies have been returned each year to the hospital and, if so, what happened to them.

Despite all of this Thompson fancifully insists that morale at the hospital is "amongst the best in the industry."

H.E.U.'s aim in this mess is to solve the individual problems and help to elevate morale in general. That would be possible if Thompson would act in a responsible manner.

Union wins for engineers at Surrey

A long-standing dispute over wages for five operating engineers at Surrey Memorial has been settled in H.E.U.'s favor by an arbitration decision.

A monthly increase of \$72 for the third class chief engineer and \$63.50 for four fourth class engineers resulted from an award by arbitrator Harry Slade.

Although it goes back further, the dispute took a new turn in a previous arbitration chaired by Bert Blair who ruled that operating engineers should receive a higher rate of pay when performing maintenance duties outside the boiler room.

Since the same principle applied in the Surrey case the five engineers involved were also awarded higher rates — but not before H.E.U. embarked on a lengthy battle with the employer that required intervention by the Labor Relations Board.

H.E.U. and staff sign agreement

Contract talks between H.E.U. and its 20 unionized employees were concluded recently, resulting in a one-year agreement that has been ratified and signed by both sides.

The employees, members of the Hospital Employees' Staff Union, work at



MEDIATOR Ed Sims.

the provincial office and regional offices in Victoria and Kelowna.

Mediator Ed Sims assisted during the final stages of bargaining, which was more protracted than in previous years.

THE HOSPITAL GUARDIAN

Published by

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

BROADWAY PRINTERS LTD.

UIC, WCB featured in column

A regular column will appear in the Guardian beginning with this issue to give members information on Workers' Compensation, UIC and superannuation legislation.

Letters from members seeking information will be welcome.

Workers' Compensation

Hospital employees should be reminded of the importance of informing a supervisor as soon as possible after an on-the-job injury has occurred. The appropriate WCB form should be filled out, but the most important procedure initially is to inform management of the injury. Compensation has been denied on many unfortunate occasions because of failure to do this.

Unemployment Insurance

The following are some "wrongs" and "rights" on UIC claims procedures if you find yourself out of work.

Unemployment Insurance Claims

Don't . . .

1. Insist on working in a small local area.
2. Don't restrict yourself to working a certain number of hours or days per week.
3. Don't be tricked into demanding a certain rate of pay — say "I will accept the prevailing rate."
4. Don't sign any statement presented by the benefit control officer unless you understand everything it says and agree with it; take it home and study it or ask your Union rep or some other knowledgeable person for assistance.

Do . . .

1. Go to the UIC office nearest your residence immediately you become unemployed and apply for unemployment insurance.
2. Register with Manpower.
3. Make a reasonable effort regularly to find a job.
4. Keep a list of all the places you went to for a job.
5. Follow any instructions given to you by a UIC officer or Manpower officer concerning finding a job.
6. State that you are available for any suitable employment.
7. Keep in touch with your Union office or Staff Representative with respect to any UIC problems.
8. If you feel you are disqualified unjustly **appeal** and **attend** any hearings with an advisor if possible.

EDITORIAL

BARGAINING BRINKMANSHIP

The futility and dangers of confrontation have been proven on other occasions, but not being content with the lessons of history some hospital employers recently had to edge everyone toward a cliff once again.

The dispute over anti-discrimination payments of \$37.50 per month showed once again that in health care industrial relations, brinkmanship is hazardous to your health.

B.C. hospital employers — not all of them but most of them — know as well as anyone else that it was not necessary for the Union to be forced into serving strike notice on health care institutions.

It was not necessary for strike vote meetings to be held and it was not necessary for the working atmosphere and security of patients to be put in jeopardy by the threat of job action.

However, it WAS necessary for the employer to live up to an agreement made on January 5 to pay the retroactive \$37.50 payments to some 10,000 H.E.U. members for each of the months of 1975.

The employer in this dispute has consistently hidden behind the Minister of Health, claiming that it was up to the Union to sort it all out.

The employer claimed he didn't have the full amount of funds to cover the payments.

But in many cases the cheques were already made out but were withheld on instruction from the Health Labor Relations Association. That same bargaining organization, HLRA, also had agreed on January 5 to the \$37.50 payments.

By forcing the Union to act the hospitals were shirking their responsibility — and it's not the first time they've done that. It's as if MacMillan Bloedel were to tell the woodworkers to force up lumber prices before coming to the forest company to negotiate wages.

The hospitals have always wanted more authority in the delivery of health care in B.C.

The problem is, they want the authority but don't seem willing to strive for and exert the responsibility that comes with it.



VANCOUVER GENERAL shop stewards meet at provincial office to discuss, among other things, shift scheduling, layoff threats and demonstration which was set for later in the week.

Chaotic scheduling leads to VGH confrontation

The Union is considering pressing for enforcement of options within provincial labor laws to correct a deterioration in shift arrangements at Vancouver General Hospital.

The conflict came to light in the latter part of 1975 when many H.E.U. members at the hospital found they had been short-changed of statutory holidays.

To date — three months into 1976 — the hospital hasn't paid the employees for the days owed to them, and the matter is being grieved.

The sloppy shift scheduling that caused the problem has also resulted in an inequitable sharing of weekends.

Provincial law calls for five days on the job followed by two days off in the case of full time employees, unless mutually agreed to by the Union and management. But much of the scheduling at VGH was not agreed upon mutually, and grievances were insti-

gated.

The problem remained in the grievance stage for many months until both sides agreed upon 6-2, 6-3, 6-2 and 6-4 scheduling.

But that formula has been observed less and less by management since it went in. In addition, the hospital has refused to turn over any schedules to the Union, insisting instead that H.E.U. give blanket approval to future scheduling that would leave the membership vulnerable to wide-open abuse. The Union can enforce the 5-2 schedule provided by law, but is giving the hospital the option of coming to its senses before taking that route.



"When he wants something, you'll know."

Talks begin

Negotiations are under way for employees at five more private hospitals.

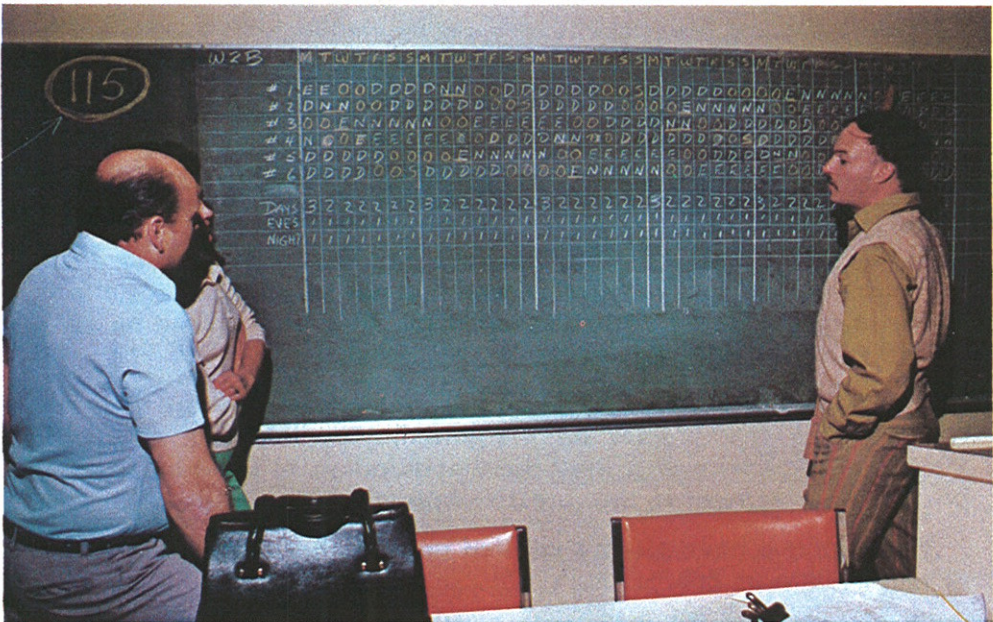
The hospitals are Delta, Carlton (Burnaby), Como Lake (Coquitlam) and Inglewood and Altamont, both in West Vancouver.

Representatives of the hospitals at the bargaining table indicated to H.E.U. that they would be happy to accept the Weiler arbitration award which resulted in a first contract for five other private hospitals earlier this year, provided that all cost benefits are eliminated and existing rates are increased by only 10 per cent.

That would bring wages to \$3 an hour with no benefits. The Union obviously rejected the proposal. Bargaining is continuing.

Two other private hospitals — Kensington (Vancouver) and Willingdon (Burnaby) — are bargaining with H.E.U. under mediator Ed Sims after six months of negotiations. A settlement is anticipated soon.

SHARE + YOUR
GOOD HEALTH!
BE A + BLOOD DONOR



CHIEF SHOP STEWARD Bob Davies of Vancouver General points out to shop stewards Jim Bilton and Joan Slater how a major hospital should not arrange shift schedules. Poor scheduling at VGH has led to loss of statutory holidays and fair weekend distribution.

FEES INCREASED

Day care strike wins point

Day care workers in the Lower Mainland have something to smile about this month.

Shortly after a one-day strike protesting government regulations that kept day care staff at 1974 wages, the members of the Social Services Employees' Union were back on the job with a new rates formula for child care workers.

The main results of the new rates will be a workable system of collective bargaining — and a wage increase.

Prior to the one-day strike Human Resources Minister Bill Vander Zalm had responded to the notice of strike action by threatening to close the centres down.

But immediately following a rally of day care workers at the Vancouver Courthouse on March 30 — the day of the strike — the government promised a rate increase effective April 1.

Speaking at the rally on behalf of the Hospital Employees' Union, Staff Representative Sharon Yandle told the assembled 200 striking employees and concerned parents of H.E.U.'s support for their cause.

This support, she said, was given not only because day care workers are fellow trade unionists fighting for improved wages and job security, but also because they provide a service that many working women, including H.E.U. members, require in order to be in the labor force at all.

Referring to the government's hostile stance and the generally negative attitude of radio hot-line hosts, Yandle said that the attack on day care is really an assault against women who

work outside the home and against "what surely must be the most fundamental right of all human beings: the right to earn our own living".

Noting that 20 per cent of the female work force have pre-school children, Yandle said it is in the interests of all women, whether or not they are part of that 20 per cent, to support day care, maternity leave and all other measures that allow women to enter and remain in the work force on an equal basis.

"Similarly," she continued, "it is in the interests of all workers, men, as well as women, to promote whatever measures are necessary to ensure that quality exists not only in name, but in fact."

"To the extent that women receive the same wages, working conditions, job security and opportunities as men, to that very same extent will women stop being marginal workers, a reserve pool of cheap labor that can be alternately moved in and kicked out of the work force and used to drive down all wages generally, male and female."

Prior to the new rates, most day care centres, which are administered by the parents of children attending them, received a total of \$2,400 per month. This sum, according to government regulations, was the total available for the wages of three employees (all of whom must have two years of university education) fringe benefits, janitorial and bookkeeping services, food, toys and all other equipment and supplies for the children, hydro and telephone costs and office supplies.

In most centres — even where the parents used their days off to do the

cleaning, maintenance and clerical duties — this budget left between only \$550 to \$600 per month for the day care worker.

The new rates increase the fee per child from \$120 to \$140 per month. This amount is paid by the parent or, in the case of low income families (usually single parent), by the government.

New regulations also allow each centre to increase the fee per child beyond the minimum \$140.

The new ability of centres to raise fees independent of government is not, however, without problems.

Those centres with well-off parents who can afford fee increases will likely grant them, while others in less affluent areas may not, posing a problem of one standard of day care for the rich and a lower standard for the poor.

And the structure of payments leaves another problem: the wages of day care workers will still be paid out of the pockets of parents. Working women (parents) will finance other

(Continued on page 11)

— ROUNDUP —

Plans for construction of a \$30 million children's hospital in Vancouver were announced recently by Health Minister Bob McClelland. The 200-bed hospital should be in operation in three years, McClelland said in a March press release.

The project, he said, was part of a \$220 million allotment toward improvement of health care facilities in greater Vancouver over the next five years. A major thrust in financing the new hospital was offered recently by the Variety Club of Western Canada, which pledged a public fund raising effort over the next several years.

★ ★ ★

Requests for the seniority dates of all H.E.U. members have been sent to administrators by Staff Representatives of each unit. The need to have the dates on file at the provincial office has grown more acute by the threat of layoffs in some hospitals.

Compliance with the Union's request is a contractual requirement for hospital administrators.

Replies have been coming into the provincial office as the computerized information is compiled.

Copies of the information will be sent to all units.



ADDRESSING RALLY of striking day care employees is Staff Representative Sharon Yandle, who represented H.E.U. to support one-day walkout. Steady rain didn't dampen enthusiasm of employees, whose demonstration led to increase in fees needed to pay for improved wages and steadily rising day care costs.



VGH demon

Several hundred H.E.U. members from lower mainland hospitals took to the sidewalks recently in a three-hour demonstration against shabby treatment of health care workers across the province.

Combined with the solidarity shown by H.E.U. members in three hospitals where strike votes had been taken, the demonstration at Vancouver General emphasized the fruits of protest: a telegram from hospital employers was circulated among the information pickets announcing that the hospitals would pay the \$37.50 anti-discrimination monies promised in early January.

It was the employers' failure to make those payments that had sparked the demonstration, although members were also protesting threatened layoffs and unfair shift scheduling at Vancouver General.

Employees from VGH, Shaughnessy and other hospitals have a right to be proud of their display of unity. Even before the day of the information picketing — March 25 — several evenings were given up by the employees, who handpainted 250 picket signs with the assistance of H.E.U. staff members.

Once completed, the signs were stored at the provincial office while organizers of the demonstration hoped for sunshine.

Amid a week of otherwise solid rain, the clouds parted on the morning of the 25th and H.E.U. members walked



ration draws several hundred

the sidewalks in front of VGH under a sunny, blue sky. (The clouds returned shortly after the demonstration ended.)

The telegram announcing the impending \$37.50 payments was sent by the Health Labor Relations Association, and gave the go-ahead to hospitals to pay the monies. Many of the

hospitals already had the cheques prepared and a few had previously made the payments. (See editorial, page 3.)

The payments, to be made on a one-shot basis, are an interim measure pending the completion of the government's job evaluation program. A total of \$450 for the year 1975 is to be paid

to hospital employees whose wages fall below the cleaner rate, or a portion of the \$450 to bring them up to the cleaner rate.

The agreement struck on Jan. 5 was between H.E.U. and Health Minister Bob McClelland. HLRA also agreed to the terms.

Executive withdraws strike threat

The threat of strike action against B.C. hospitals was called off by the H.E.U. Provincial Executive at a meeting which followed the announcement that anti-discrimination monies would be paid to eligible employees.

The Executive's decision was released at the end of March to the news media.

Strike votes had been taken in three hospitals — Royal Columbian, Lions Gate and Shaughnessy — where members voted overwhelmingly in favor of strike action to back up the Union's demand that the \$37.50 payments be made.

Strike notice had been served on hospitals across B.C.

BCMC board thanks Union for support on project

H.E.U. received a letter of thanks recently from B.C. Medical Centre chairman Wally Ross and personnel administration director Bob Grant for the Union's assistance during the formation of the BCMC, which has been axed by the new Social Credit government.

"Both of us wish to thank you for the time and effort which you gave to the work of the (personnel services) committee," the two men wrote in their letter to Secretary-Business Manager Jack Gerow.

"Your support was much appreciated, and it is our hope that some of the work of the committee will be used in the future delivery of health care in British Columbia."

The BCMC, set up by the NDP government in mid-1974, comprised a superboard of administrators and

the facilities of Shaughnessy Hospital, Vancouver General, St. Paul's, the University of B.C. Health Sciences Centre, the Cancer Control Agency and G. F. Strong Rehabilitation Centre.

The BCMC, with a board of 12 directors, a paid staff and 300 volunteers, was in the midst of a three-year development program when the axe fell. It had been given an operating budget of \$10 million and was part of the NDP's plan of a multi-facility super hospital on the lower mainland.

The plan included a \$60-million child maternity unit at Shaughnessy Hospital, a project that was scrapped by the new provincial government along with the rest of the BCMC concept (see separate story on new children's hospital, page 5).



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AT CONVENTION**Emmons, Prairie Fire to perform in June**

Country singer Blake Emmons will join the vocal-comedy group Prairie Fire in providing entertainment on banquet night at the Union's Tenth Biennial Convention this summer.

A record 300 delegates will attend the Convention, set for June 21 to 24 at the Holiday Inn on Broadway in Vancouver.

Toronto-born Emmons, now based in Nashville, encompasses both the traditional country and current pop styles that have merged in recent years on Nashville recording labels.

Well known on television and concert circuits, Blake Emmons has also devoted many hours to telethon drives. Some of his early years were spent at Toronto's Sick Children's Hospital waging a personal battle with meningitis and polio.

His appearance after the banquet with Prairie Fire will be on Monday, the first day of the four-day Convention.

Although it was reported in the last Guardian that a dance will be held on the Wednesday evening of the Convention, a change in plans has caused the cancellation of the dance.

Resolutions to be put before the Convention are already in the works, with one meeting having been held by the subcommittee of the Provincial Executive.



COUNTRY singers Blake Emmons, right, and Prairie Fire, below, will headline entertainment this year at H.E.U.'s Tenth Biennial Convention at Holiday Inn on Broadway in Vancouver.

**Little pink box puts RN's noses out of joint**

A mini-issue at St. Paul's Hospital has put Registered Nurses there in a tiff.

The object of their displeasure is the "Nurse of the Month Award," an honor(?) which is bestowed on RNs deemed worthy by virtue of their appearance.

Balloting for the competition is done with the aid of a little pink box in the hospital's cafeteria, into which employees are encouraged to drop monetary donations for "most professionally dressed nurse," and, presumably, the donor's vote on the selection.

While no plans have been announced for the allotment of gold stars for the RN with the cleanest fingernails, the nurses have been sufficiently infuriated to make complaints to management.

"The very idea that someone feels that money rather than professional pride will make RNs spruce up their appearance is disgusting," huffed one RN who preferred to remain anonymous.

"We are very embarrassed and ashamed every time we pass that box," she said.

Perhaps the matter would be better tackled if the RNs considered adding various types of "donations" of their own to the pink box, such as meal leftovers or whatever. The possibilities are mind boggling, but never let it be said that we suggested anything untoward.



"I've been waiting for you — I watched the last three games that you umped."



Private hospital employers battling new grievances

Virtually all grievances which have followed the establishment of H.E.U.'s first private hospital contract remain unresolved as management collectively digs in its heels against the Union.

At least three are going to arbitration: the elimination of the afternoon coffee break at Grandview; failure to make complete sick leave payments at Richmond Private Hospital; and failure

to pay full retroactive wages at Parkridge.

In the second grievance, Richmond's management refuses to count employees' service prior to Jan. 1, 1976, the date the contract was handed down by arbitrator Joe Weiler (Weiler made it effective July 1, 1975).

All of the five hospitals governed by the Weiler contract are trying out these tricks, but the grievances are being handled separately in the case of each of the facilities. The Union offered to let the hospitals deal collectively with each issue before an arbitrator but management refused — with the result that legal costs will be higher, despite the hospital owners' pleas that they are in financial trouble.

Other grievances are also outstanding, with management adopting the practice of involving their lawyer in even the most minor disputes.

At Parkridge in Maple Ridge management is refusing to pay full retroactive wages to July 1, 1975, as specified in the Weiler award.

The staff worked an eight-hour day before, but the contract sets the work day at seven and one-half hours, effective last July 1.

The hospital argues that it was too generous before by paying employees for eight hours. In fact, a notice went up at the hospital stating that employees owe the hospital money at the rate of a half hour a day for that period.

It's a formula that only an employer could come up with.



"It's a house call doctor . . . your house."

Editor Blakey hits the road

With the arrival of spring weather in Vancouver, Guardian Editor Bob Blakey has decided to put his itchy feet into motion again.

This will be the last regular Guardian put out by Blakey, who has been on staff at the H.E.U. provincial office for a little over two-and-a-half years.

His final duties include the production of a special issue of the Guardian covering details of the collective agreement proposals negotiated at recent provincial bargaining.

Blakey says he has enjoyed immensely his work with H.E.U. staff and members, and in the trade union movement in general.

He now plans to take his camera and notepad to a few faraway places for a while, preferably where there's an abundance of sun-bleached sand.



UNIT CHAIRPERSON at Burnaby's Fellburn Hospital, Doris Waite, talks with patient before attending meeting with H.E.U. Representative and administrator. Fellburn employees are in process of receiving healthy retroactive pay following implementation of first collective agreement.



BOB BLAKEY . . . gets travelling bug.

Business hopping at transfusion ser

If there's one "business" that never has to worry about declining demand it's the three-storey white building on Vancouver's busy Oak St. which deals in a vital commodity.

It's the Canadian Red Cross Blood Transfusion Service. And behind those concrete walls is a team of workers,

many of them members of H.E.U., who perform daily the crucial work entailed in getting one person's blood into the arteries of another.

Some 115,000 units of blood will be collected there this year and they'll all be needed. (Although most people think blood is collected in "pints", the

units are now measured in metric quantities that roughly approximate the size of a pint).

With only 21 days useful life for the blood it's a demanding task to see that it is processed with minimum wastage. The Transfusion Service in Vancouver, which supplies all of B.C., keeps the wastage under 10 per cent — a remarkable figure under the circumstances.

Components within the Oak St. complex include the blood bank lab, which handles donor testing; the prenatal lab, which serves B.C. doctors; research lab which does cross-matching and screening as necessary; plasma lab for the preparation of plasma products; the frozen blood lab; and the RIA lab, which tests for hepatitis, using radioactive beads.

There is also the transport division, with in-town and out-of-town duties — an essential part of meeting that 115,000-unit quota.

When a unit of blood is collected there are a number of processes it may go through. It might be used as "whole blood" immediately or within a short time after being stored in a cooler. Or plasma may be separated from the cells (red or white) and used for a number of purposes.

Certain components in blood are used to combat diseases such as hemophilia, an affliction caused by the absence of Factor VIII, the blood-clotting agent.

Rare types of blood are saved, often beyond the normal 21 days because of modern freezing facilities that can lower temperatures to a numbing -85

IN H.E.U. PRIVATE HOSPITALS

Gone forever: the boss who is all-powerful

Management's reluctance to improve private hospital patient care, which has often fallen to atrociously low levels, has not yet been reversed by the organization of employees into the Union. But the patients' lot is on the way to being improved because of unity among the work force and a feeling of strength fueled by Union protection.

In what amounts to one of countless such stories that evolve in the daily life of the private hospital worker, details of an outbreak of scabies at King George Private Hospital were given to H.E.U. recently.

Beginning among the patients, the skin disease quickly spread to staff members and was diagnosed as scabies by one of the nurse-aides.

Management generally dismissed her assessment as "nonsense," and insisted the affliction was "senile rash," or a symptom of medication.

But pressure from the Union committee brought the hospital inspector around, followed by a dermatologist, and the nurse aide's original diagnosis was deemed correct.

The patients were put under quarantine, but nurse aides were not issued with quarantine clothing. They refused to go into the quarantine area and knew they could make such a refusal because they are now in a Union. Result: a hurried visit by management to nearby Surrey Memorial Hospital, which supplied the employees with the clothing they needed.

As one member said to H.E.U. Rep-

resentative Sharon Yandle afterwards: "You would have to know what it used to be like to understand how different it is now.

"I can't tell you how many times girls used to be called into the administrator's office and would come out crying because they had lost their jobs."

At Grandview Private Hospital in Vancouver, another instance of the employees' concern for patients led to a confrontation. Incontinent pads, for patients without control of their bowel movements, were in short supply.

Employees told management of the decreasing number of pads but the warnings went unheeded. When the

pads finally ran out, aides were told to "use anything."

Rags were utilized but when there were no longer any of those either, employees had nothing left to use but plastic bags and bread wrappers.

The Grandview employees put it to management: no supplies, no work.

Their new-found courage was echoed by another hospital worker who recalled similar confrontations at King George.

Describing an occasion when the owner at King George called the entire Union committee on the carpet, she said he was furious at the employees. But his anger was mostly because of his inability to take action against them without cause, unlike in pre-Union days.

"The Union," she later told fellow members at a meeting, "will protect us."

'I can't tell you how many times girls used to be called into the administrator's office and would come out crying because they had lost their jobs.'

Research leads to convention in Finland

There's more going on at the Red Cross Blood Transfusion Service in Vancouver than simply gathering and distributing blood.

Research is an important part of the process, as shown by employee June Humphries, who discovered a new antibody during her work in one of the labs.

The discovery resulted in a trip to Helsinki, Finland, where she presented a paper to a convention of the International Association of Blood Transfusion.



IDENTITY of units of blood is checked by Bonnie Graham. Blood is kept in refrigerated area until transported to hospitals.

degrees Celsius. Under such conditions the blood can be stored for two years or longer, in quantities of up to 1,000 units at the Vancouver facility. It's an expensive process, pushing the cost per unit up to \$50 from the normal \$30, but lives can be saved by the availability of rare types.

Of course, lives are saved by all types of blood, and it's that message that the Transfusion Service must constantly get across to the public when supplies run low — which they do all too often. Because of the demand placed on common types, the easiest types to obtain are usually the kind most needed.

Administrator "Robbie" Robinson emphasizes the importance of public awareness of the Transfusion Service



BLOOD is grouped by Leanne Jordan after small sample is taken from donor.



DAWN SEWARD manages bag that will hold unit of donor's blood to ensure the liquid flows properly. Some 115,000 units of blood will be donated this year in B.C.

and its function in health care. Without it, hospitals throughout B.C. would be unable to perform many of their duties. As much as the facility tries to meet the requests of hospitals it often has to send out fewer units than ordered.

"A hospital might ask for 20 units," says Robinson, "but we may be able to send only 12. The demand just can't always be met . . ."

The Transfusion Service is joined by Telex to most B.C. hospitals. The blood usually stays in the province but there is an exchange system linking the facility with all of Canada, and even the United States, under certain circumstances.

The demand for blood is unlikely to subside as the population grows and new medical techniques are developed. So when the call goes out for blood donations in your area — remember that the most important role in a vital process involving dozens of people is yours, the blood donor's.

Day care strike . .

(Continued from page 5)

working women (day care staff) — even though women in general remain the low-paid members of the labor force.

While day care workers can claim a victory from their strike action, their anticipated wage increase — to approximately \$700 per month — still falls far short of the level of wages their training, talent and responsibilities should command.

It's not much, but to B.C. day care workers in over 50 centres it's a start, and something to build on.

H.E.U. organizes Arbutus staff

An active organizing campaign is being conducted by the Union among employees of Arbutus Private Hospital in Vancouver.

Some 55 employees are eligible for membership.

The hospital was taken over by St. Vincent's Hospital on April 1.

H.E.U. has applied for certification for the unit.



"That's very kind of you, sir, but there's no such thing as a 'fat' donation."

Business hopping at transfusion service

If there's one "business" that never has to worry about losing its mind it's the three-story white building in Vancouver's busy Oak St. which deals in a vital commodity.

It's the Canadian Red Cross Blood Transfusion Service. And behind those concrete walls is a team of workers,

IN H.E.U. PRIVATE HOSPITALS

Gone forever: the boss who is all-powerful

Management's reluctance to improve private hospital patient care, which has often fallen to atrociously low levels, has not yet been reversed by the organization of employees into the Union. But the patients' lot is on the way to being improved because of feeling of strength fueled by Union protection.

In what amounts to one of countless such strikes that evolve in the daily life of the private hospital worker, details of an outbreak of scabes at King George Private Hospital were given to H.E.U. recently.

Beginning among the patients, the skin disease quickly spread to staff members and was diagnosed as scabies by one of the nurse-aides.

Management generally dismissed her assessment as "nonsense," and insisted the affliction was "simple rash," or a symptom of medication.

But pressure from the Union committee brought the hospital inspector around, followed by a dermatologist, and the nurse aide's original diagnosis was deemed correct.

The patients were put under quarantine, but nurse aides were not issued with quarantine clothing. They refused to go into the quarantine area and knew they could make such a result. Result: the staff by management a nearby Street. At the hospital, which supplied the employees with the clothing they needed.

As one member said to H.E.U. Rep- us."

many of them members of H.E.U., who perform daily the crucial work entailed in keeping blood flowing through the arteries of one person's blood into the

Some 115,000 units of blood will be collected there this year and they'll all be needed. (Although most people think blood is collected in "pints", the

representative Sharon Yandle afterwards "You would have to know what it used to be like to understand how different it is now."

"I can't tell you how many times the girls used to be called into the administrator's office and would come out crying because they had lost their jobs."

At Grandview Private Hospital in Vancouver, another instance of the employees' concern for patients led to a confrontation. In a room where patients without control of their bowel movements were in short supply.

Employees told management of the decreasing number of pads but the warnings went unheeded. When the

pads finally ran out, aides were told to "use anything."

Rags were utilized but when there were no longer any of those either, employees had nothing left to use but public bags and bread wrappers.

Research leads to convention in Finland

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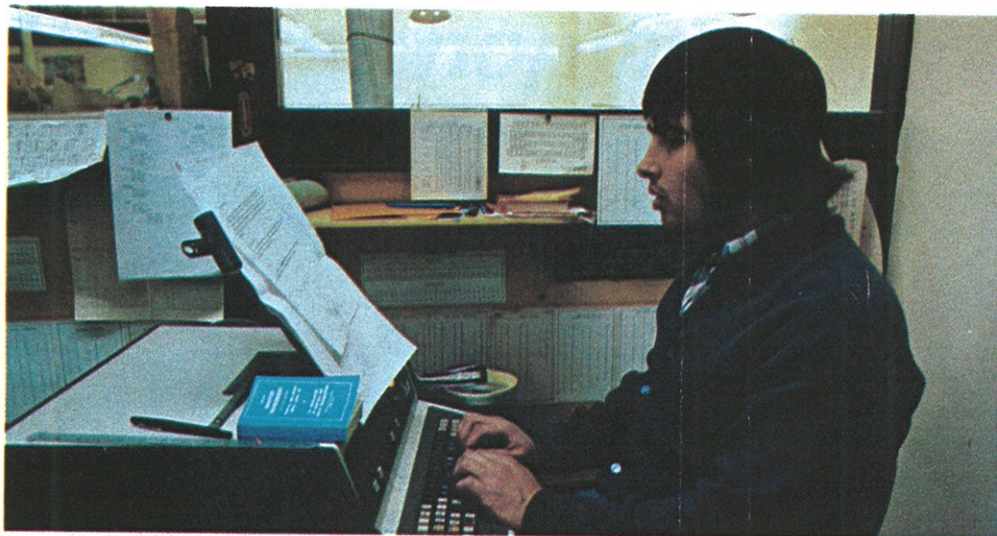
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MASTER AGREEMENT for H.E.U. is already on production line as Broadway Printers teletype setting operator Al Kostyshin begins typesetting process for contract language approved at the bargaining table. Machine run by Kostyshin produces punched tape which is later fed into computerized system that converts it into printed type.

Work begins on printing new contract

Type is being set at Broadway Printers for the new provincial master agreement, although some items are outstanding pending a report from Industrial Inquiry Commission Bert Blair.

Some 20,000 copies of the agreement will be printed. The opening of the H.E.U. Convention in June is the target date for delivery of the agreement.

Between 500 and 1,000 of the agreements will be published in loose leaf binder form to accommodate insertion of new wage rates from time to time.

The remainder will be in the traditional bound form.

HOSPITAL BARGAINS INDEPENDENTLY

Port Alberni talks stall pending report by Blair

Negotiations have stalled at Port Alberni's West Coast General Hospital, where H.E.U. is bargaining with the board of trustees for a new collective agreement.

The hospital board refused to join the Health Labor Relations Association, making it the only hospital currently bargaining with H.E.U. that isn't represented by the health industry's bargaining agency.

The release of Industrial Inquiry Commission Bert Blair's report is ex-

pected to move talks in Port Alberni one way or the other.

Blair chaired bargaining sessions between the Union and HLRA until early March, and his non-binding report was expected to be released within a week of the Guardian going to press.

Staff Representative Bob McCartney is handling bargaining for the Union in Port Alberni, while the hospital is being represented by spokesman Eric Pemberton, chairman of the hospital board, and other bargaining committee members.

Seminars planned for contract interpretation

Contract interpretation seminars will be held around the province following ratification of a new collective agreement.

The seminars will be similar to those held after the signing of the previous collective agreement. They will be held for two days, in the various regions covered by H.E.U. — the lower mainland, Okanagan, north, Vancouver Island, Fraser Valley and Kootenays.

A representative from the Union's provincial or regional offices will go through the new contract in detail for the benefit of unit officers, shop stewards and participating management personnel.



WEST COAST REGIONAL HOSPITAL . . . Port Alberni trustees opt out of HLRA hearings.



"You win, Ted. I never dreamed it would do 150."