

GUARDIAN



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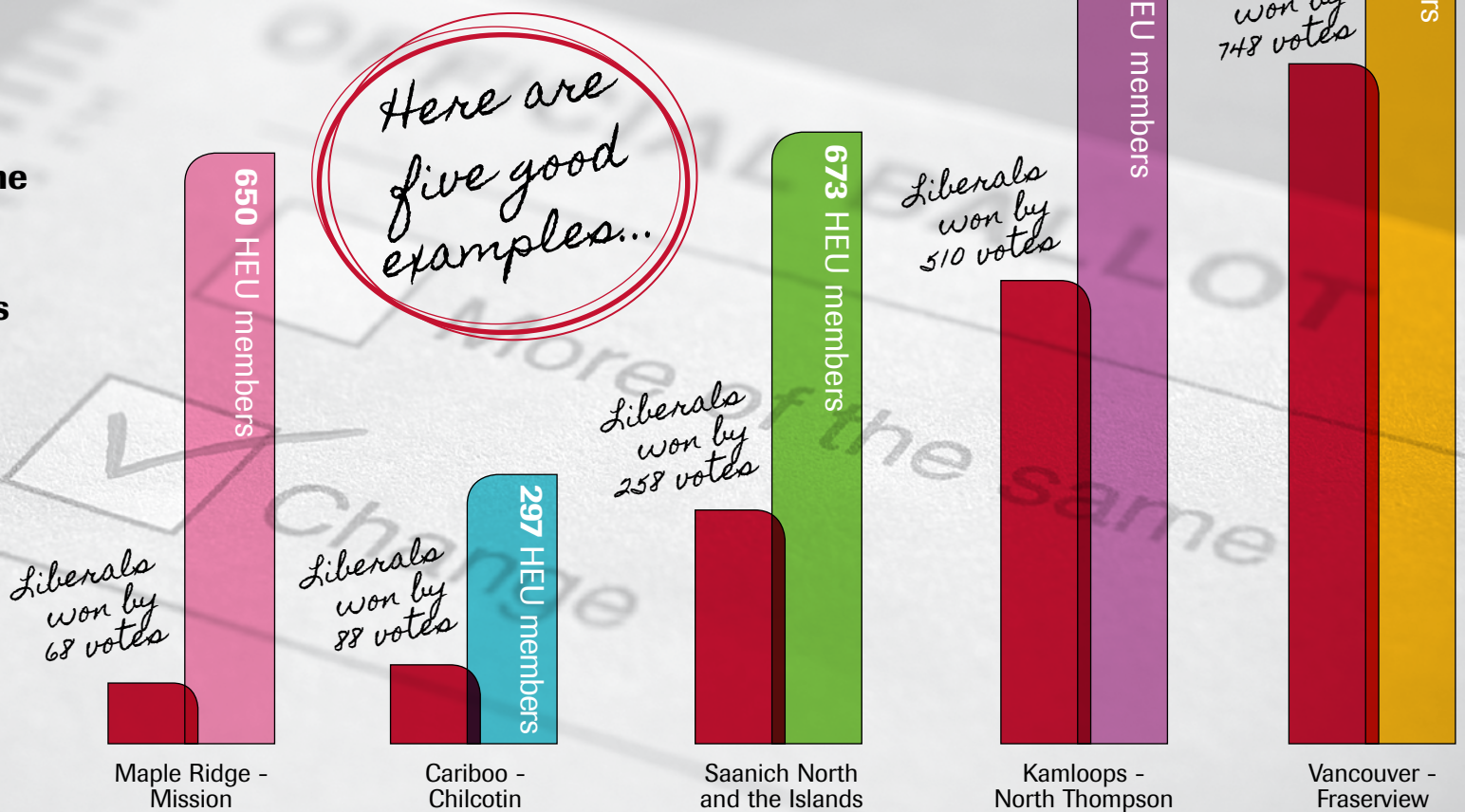
As British Columbians get ready to head to the polls, the *Guardian* talks with NDP Leader Adrian Dix.

PAGE 8

No matter where you live in B.C., HEU members can make a difference

in the outcome of
this election.

In some ridings, the
number of HEU
members outstrips
the BC Liberal
margin of victory
in 2009.



Time for a change. Up to the challenge.

As this issue of the *Guardian* goes to press, the battle over who will form B.C.'s next provincial government is well underway.

In every constituency, there are HEU members supporting the candidates they believe will help create a better future for themselves, their families and their communities.

Over the last 12 years, HEU has been at the forefront of numerous campaigns to improve the lives of our members and the people they care for.

Whether it's opposing cuts to health care and other public services, campaigning for improved care for seniors and other vulnerable citizens, fighting contracting out and privatization, promoting living wages, or standing up for greater equality, environmental protections, and accountability from government – your union has been pushing hard for a change of direction.

That change is now within our grasp.

What it will take to make that change on May 14, is your vote. And like all elections, every vote counts.

The Gordon Campbell-Christy Clark record – which has consistently put corporate profit-making ahead of the real needs of British Columbians – has been devastating for health care and other public services.

No one knows this better than HEU members who have experienced first-hand the impact B.C. Liberal policies have had on themselves and those in their care.

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about finding a better way. One that builds our province's economic resources and invests them in the things that matter most to HEU members – healthy communities, decent jobs and strong public services.

We know an NDP government, if elected, cannot undo all the damage the BC Liberals have caused during their 12 years in public office.

But what we do know is that an NDP government will be equipped with a very different vision for B.C. and will have the political will to make positive change happen.

We also know that HEU members have a tremendous amount of power at the ballot box. In some ridings, the number of HEU voters far outweighs the Liberals' margin

of victory in 2009.

On the eve of this critical election, we are urging every HEU member to make sure you exercise your right to vote. And we are asking you to do everything you can to encourage your family members, friends, co-workers and neighbours to cast their ballots for change.

In this election edition of the *Guardian*, we have featured an in-depth interview with NDP Leader Adrian Dix (*see p. 8*).

Dix is no stranger to HEU. Not only has he attended numerous union events at both the local and provincial level during his years in public office – prior to becoming leader of the party – Dix was a passionate, effective NDP opposition critic for health care, as well as for children and families.

This interview provides some important insight into how an NDP government, under his leadership, will deal with issues affecting workers, the economy and public services.

But of course, it's only part of the picture.

Talk to your local candidate, take a close look at their platforms, raise questions at all-candidates meetings and commit to making your vote count on May 14.



BONNIE PEARSON

Building our union for the future

With new collective agreements now ratified in our facilities, community health and community social services sectors, as well as in several independent long-term care facilities, HEU is preparing to launch a review of the union's operations.

Having so recently experienced the important role HEU members played in achieving those agreements – from delivering strong strike mandates to undertaking targeted job actions – I'm struck by how critical this review is to strengthening our union power.

And it couldn't be more timely.

We need to make sure our union is fully equipped to meet members' changing needs in their rapidly changing work environments.

rights continue to spread across Canada, with some of the worst aspects of anti-worker labour laws in the U.S. making their way across the border.

Like unions everywhere in these difficult times, our greatest challenge is not only achieving solid collective agreements, but also standing up for the fundamental values, rights and protections that are part of the foundation of collective bargaining.

Stephen Harper's Conservatives are bent on weakening organizations that provide any effective opposition to their right-wing policies. So it's no surprise that trade unions have become target number one. And one of Harper's strategies is to undermine members' confidence in their unions.

That's why attacks on collective bargaining

voice.mail

Outsourcing records puts privacy at risk

I work as an in-house medical transcriptionist (MT) and feel confident that patients' private medical reports are safe on the health authority's tightly secured computer system.

I have grave concerns about security breaches should Providence Health Care continue on its privatization path to have this work completely outsourced to home-based contractors.

Unless the private contractor has someone monitoring the network/IT/computers closely (which I highly doubt), then outsourced MTs don't have the same security that being in-house does. In-house has a lot of security.

For instance, I cannot use any of my removable media (USB stick, DVD drive) to copy anything from my computer. I doubt this is the case for contractors. There are also heavy-duty firewalls, spam blockers and security that the hospital probably spends millions of dollars on that is just not hap-

pening in a private contractor's home.

The equipment here belongs to the hospital and they run it. I cannot even update my flash program on this computer without IT's assistance. Again, I'm sure that doesn't happen with a contractor's equipment. They are open to any and all vulnerabilities that any home computer is open to.

If the *New York Times* and *Wall St. Journal* can be hacked – with sophisticated security systems in place – how can Providence Health Care guarantee a home-based computer is exempt from hacking? Most home computers have anti-virus software like Norton or McAfee, but that's minimal protection. And it puts patients' private medical information at risk of being breached.

At least in-house, we are piggybacking on expensive hospital security and equipment, which they have complete control over.

I also briefly looked into "key-stroke tracking" that I heard about a while back where a virus will get into the computer and hackers can track keystrokes, get passwords and then have access to everything on a hard drive. Not sure how far along that is, but that's another issue with a personal home-based computer or laptop.

British Columbians should be deeply concerned about this move to outsource medical transcription services.

KIM ROY

HEU medical transcriptionist
St. Paul's Hospital

The key to meeting that challenge is an active, informed membership in a fully inclusive union, where every member has a way to make their views known and their voices heard. Where every member is invested in stopping the erosion of collective bargaining rights in whatever form that takes.

Having weathered 12 long years of the BC Liberals' restructuring in care delivery, we need to make sure our union is fully equipped to meet members' changing needs in their rapidly changing work environments.

Delegates at HEU's 2012 convention passed Resolution 75, asking HEU to review its structure and membership.

It's in this context that we are launching the Responsive Union Project. In coming months, we will be reaching out to members in a variety of ways to talk about the changes we want to see that will strengthen our base, boost participation, create a more inclusive union culture, and make our day-to-day operations more effective on the ground and provincially.

Those first discussions will begin in May with the union's regional meetings, and they will be part of June's equity conference agenda. Additional opportunities will flow from those initial discussions and continue through to our 2014 biennial convention, where the Provincial Executive will bring forward a series of recommendations for member consideration.

It's about making sure our union is well-equipped for future challenges.

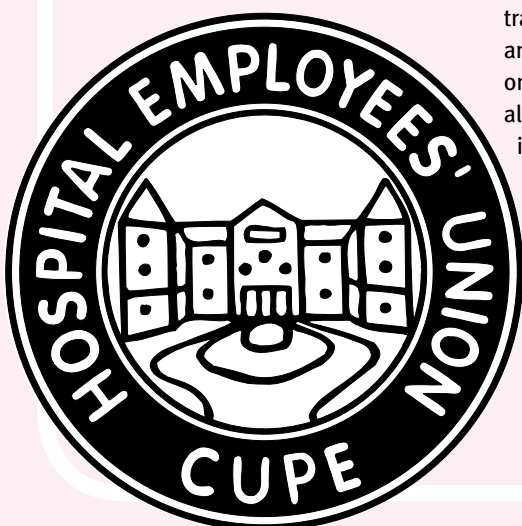


Ditch the bottle.

Choose the tap.

Of all our natural resources, drinking water is our most precious. Choose tap water instead of bottled water and help protect our public water systems and our environment.

Find out more at backthetap.ca **CUPE.ca**





Medical transcription privatization is putting patient records in jeopardy • 5

HEU's financial secretary describes how union dues build union power • 6

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What's wrong with Canada's temporary foreign workers program? • 11

Gripping new AIDS documentary a tribute to gay activism in U.S. • 14

Members mobilize for critical election

Gusting winds and heavy rainfall couldn't stop 12 teams of enthusiastic and determined HEU members from launching the union's first member-to-member foot canvass in Vancouver-Fraserview on March 2. Despite the nasty weather, they enthusiastically set out to talk to other HEU members about voting in the upcoming provincial election and voting for change.

Over two hours, more than 200 HEU households were canvassed. On a second Saturday, teams covered another 155 HEU homes in the riding.

HEU president Victor Elkins was out in Vancouver-Kensington and said the experience was energizing.

"Our HEU canvassers refused to let the weather dampen their spirits. And talking with other members was very rewarding. The response was excellent."

Mark Crawford, from the VGH local, said that the best part of canvassing was the welcome teams got from members.

"The reception we received was amazing. Just knowing that their union was at their door was exciting to the members we met," said Crawford.

Meanwhile, in Kamloops-North

Thompson, HEU members were door-knocking too. HEU financial secretary Donisa Bernardo returned to her hometown to be part of the canvass.

"Being part of the canvass in Kamloops-North Thompson meant hearing directly from members about what is important to them," said Bernardo. "It's no surprise that they want to make changes and elect representatives who will respect them and the work they do."

Whether in Kamloops or in Vancouver, members told the canvassers that this was exactly what their union should be doing and were appreciative and encouraging. They liked seeing HEU out early talking about the election and how important members' votes are in determining who is elected.

Member-to-member foot canvassing is not the only activity that's engaging HEU members in this election.

Member-to-member phone banks are happening across the province, including in Vernon, Kelowna and Prince George. HEU's Comox local



HEU members on the doorstep: On March 2, two dozen HEU members and staff descended on Vancouver-Fraserview to talk to fellow members about the upcoming election.

is connecting member-to-member phoning with the North Island Hospitals Project, a plan that will see new hospitals built in Courtenay and Campbell River through a public-private partnership deal. They're phoning to raise awareness about this specific concern as well as talk about the election.

On another front, HEU's First Nations Standing Committee will be distributing a voter information card on reserves and through friendship and drop-in centres, in towns and cities.

HEU equity officer Sharryn Modder said the project – that began as a mechanism to encourage First Nations people

to vote in provincial and federal elections – has developed over the years.

"This election's voter card does much more than simply inform people about the election. It promotes involvement. It highlights the barriers that First Nations people have faced in order to participate in the electoral process. And it leads to discussion about issues important to First Nations people who live on and off reserve."

And on March 26, HEU hosted a province-wide telephone town hall with NDP Leader Adrian Dix. Thousands of members from across B.C. listened to Dix as he answered questions from callers live on-air. Members covered a wide range of issues in health care and other areas, including privatization and public-private partnerships, contracting out and contract-flipping, seniors' care, community living, mental health, tax reform and inequality.

And once again members all around the province are volunteering in their ridings to support local candidates.

"They bring energy, experience and expertise to campaigns, and their personal commitment to our political process sets an example for others in the union and in their communities," says Elkins.

Whatever the activity, one thing is clear as we head to the polls on May 14 – HEU members are a force to be reckoned with.

MARGI BLAMEY

"The reception we received was amazing. Just knowing that their union was at their door was exciting to the members we met."

VOTE early!

HEU members who want to volunteer for a local campaign on May 14 are reminded to cast their ballots in the advance polls. They're open May 8 to May 11 (8:00 a.m. to 8:00 p.m.). This gives you an opportunity to pre-book a vacation or banked overtime day on Election Day so you can join the troops who'll be working to get the vote out.



COFFEE BREAK

Women didn't always have the right to vote, or hold elected office. Here are some of the hard-won "firsts" in Canada's electoral history.

1916 – first province to give women the right to vote – Manitoba. B.C. did so in 1917.

1918 – first federal election in which Canadian women were allowed to vote.

1921 – first Canadian woman Member of Parliament – Agnes Macphail.

1930 – first Canadian female senator – Cairine Wilson.

1951 – first Canadian woman elected mayor of a major metropolitan area (Ottawa) – Charlotte Whitton.

1960 – The *Canadian Bill of Rights* finally gave Aboriginal peoples the vote without making them give up treaty rights in exchange.

1972 – first Canadian black woman elected to public office – Rosemary Brown (elected to the B.C. Legislature).

1980 – first woman in Canadian history to lead a federal political party (the federal NDP) – Audrey McLaughlin.

1991 – the first female premier in Canadian history – Rita Johnston (B.C.).

1993 – first female Prime Minister Kim Campbell held office for five months. No woman has yet been elected Prime Minister of Canada in a general election.

1984 – first woman to be appointed Governor General of Canada – Jeanne Sauv e.

2009 – first Canadians to be appointed honorary senators – the Famous Five of the Persons Case (Emily Murphy, Henrietta Muir Edwards, Nellie McClung, Irene Parlby and Louise McKinney).

2011 – first party with official party status to have an elected caucus that was more than 50 per cent female – the Yukon New Democratic Party.



Bargaining continues with health care's major contractors

HEU members working for the five private employers in hospital support services are at the bargaining table, seeking contract renewals for collective agreements that expired early last fall.

Delegates from each of the five bargaining units, who attended a joint conference in September, identified three top priorities they're looking for in new agreements – respect and dig-

nity, safe workloads and fair compensation.

By all reports, negotiations are slow, but members aren't letting the slow pace of contract talks stop their advocacy for better working conditions.

A workplace campaign aimed at pushing employers to deal with the chronic lack of supplies in housekeeping and food service departments is

also underway. The campaign was first developed by members on the Aramark contract action team (CAT), but now includes action teams working for Sodexo, Acciona, Compass and Marquise.

Members are asked to keep in touch with their local CAT teams and bargaining team members as talks continue.

Know your rights

Exercising your right to vote

May 14 is the day British Columbians make their democratic voices heard at polling stations across the province.

And each time an Election Day rolls around, HEU members ask about their right to paid-time off work to vote.

Although the *B.C. Election Act* has language around workers having four consecutive hours away from work to vote during polling hours, it's not as clear cut as it may seem.

Time off entitlement

Section 74 (1) of the Act states: "An employee who is entitled to vote in an election or who, on registration, will be entitled to vote in the election is entitled to have 4 [four] consecutive hours free from employment during voting hours for general voting."

The polls will be open to registered, eligible voters on Tuesday, May 14 from 8:00 a.m. to 8:00 p.m. on General Voting Day.

Since health care is a 24/7 industry, most HEU members work various shifts in a scheduled rotation. For those working standard day shifts, commencing between 7:00 a.m. and 8:00 a.m. and finishing between 3:00 p.m. and 4:00 p.m., then your work schedule permits you to have at least four consecutive hours clear

of employment in order to vote. Therefore, you are not entitled to time off with pay.

If, however, your work schedule does not leave you with four consecutive hours before the polls open or close, then you are entitled to time off – at the discretion of your employer.

The time-off provisions are outlined in section 74 (2) of the *B.C. Election Act*, "If an individual's hours of employment do not allow for the consecutive hours referred to in subsection (1), the individual's employer must allow the individual time off from employment to provide those hours." And in section 74 (3), "The employer may set time off required by subsection (2) as best suits the convenience of the employer."

Workers are not allowed to show up for work at 12 noon if their eight-hour shift begins at 8:00 a.m. just because the Act permits four hours off work to vote. This provision is only if you work extended hours or shifts with start/end times that don't leave you with four consecutive hours off.

For example: if you work 10:00 a.m. to 6:00 p.m., you are legally entitled to two paid-hours off work, at your employer's discretion. Your employer may choose to give you two hours at the start or end of your shift, meaning you would report to work either at 12:00 p.m. or leave work early at 4:00 p.m.

By law – section 74 (4) – your "employer must not (a) without reasonable justification, fail to grant to an employee sufficient time off as required by subsection (2), or (b) make a deduction in pay for the time off or exact any penalty from

the employee for the time off."

Although the B.C. Election Act has language around workers having four consecutive hours away from work to vote during polling hours, it's not as clear cut as it may seem.

Voter registration

If you haven't received your voter registration card, you can try registering online (if time permits). You can also register by phone or in person at the polling station (you must have government-issued photo ID like a driver's licence, and/or two documents with your name and mailing address on them). Visit www.elections.bc.ca for more information.

<<newsbites>>

Big Oil's grasp on public policy

Just how much influence does the oil industry have when it comes to shaping public policy in Canada?

Too much, says a recently released report, which exposes the petroleum industry's extensive role in shaping Canada's legislative and regulatory regime.

"Big Oil's Oily Grasp" by the Polaris Institute digs deeply into reams of lobbying data (including the number of meetings between specific companies and individual cabinet ministers, members of parliament and high-level bureaucrats) to make the case for a full-scale inquiry into how the role of

government and the state in Canada is being remade in the interests of Big Oil.

Among its many findings, the Institute's investigation found that six main oil industry players (including Enbridge and TransCanada) met with federal cabinet ministers 53 times between September 2011 and September 2012, when the Harper Conservative government was designing *Bill C-38* – the controversial legislation that guts Canada's environmental laws.

But during this same time period, only one meeting between a federal cabinet minister and an environmental organization took place. In March 2012, Greenpeace met with federal environment minister Joe Oliver.



It also notes that between July 2008 and November 2012, some 35 corporations and associated oil industry advocate organizations logged over 2,700 reports of communications between in-house or hired consultant lobby firms and Canadian government officials.

"The influence the oil industry has over public policy in Canada and the amount of lobbying that takes place at

Outsourcing jeopardizes patient records

Plans to **expand privatization** of medical transcription in the Lower Mainland continues despite rising costs, **risks to patient privacy** and the alarming number of backlogged and inaccurate reports.

Lower Mainland health authorities are ignoring the warning signs and pushing ahead with their wholesale privatization of medical transcription (MT) services, and will begin laying off in-house MTs the day after the provincial election.

In February, after the union went public about the dangerous backlogs of transcribing patients' medical reports, health authorities offered exorbitant amounts of overtime to in-house medical transcriptionists, hired hundreds of extra workers, including those from a temporary agency, extended the contract of its current outsourced service-provider Accentus, and started training home-based MTs from the incoming private contractor M*Modal to deal with the crisis.

Providence Health Care (PHC), the management lead on MT services, even acknowledged in a March 13, 2013 staff memo that their MT services "continue to have turnaround times that far exceed appropriate standards for dictated reports. While we have made some progress, significant improvement is needed to minimize risks to the organizations and patients."

And although the backlogs have shrunk considerably with all hands on deck, in-house MTs have raised warning flags about the potentially life-threatening errors in these "rushed" reports. HEU also questions how PHC expects to keep the backlogs down once the service is completely outsourced?

"Why did the health authorities allow the backlog to reach such a crisis level?" asks HEU secretary-business manager Bonnie Pearson. "These backlogs didn't happen overnight. Clearly, it's been an ongoing problem. The health authorities should have been hiring more hospital-trained

medical transcriptionists, not bringing in a band aid solution once the public was alerted about the alarming extent of these backlogs."

Currently, 130 skilled and experienced in-house MTs – who have also been training workers from a temporary agency – are responsible not only for doing their own transcriptions, but are also charged with correcting the reports generated by outsourced and temporary workers.

For the past several years, Lower Mainland medical transcription services have been performed by a hybrid of in-house, hospital-trained MTs and a network of home-based MTs working all across Canada.

But the outsourced workers, employed by private contractors, do not have access to electronic medical records or hospital personnel, and are only paid per dictation minute. They are not paid to research information for accuracy. As a result, they often

generate reports filled with blanks and errors for in-house MTs to correct.

To compound the problem, work volume has steadily grown by about 10 per cent a year, according to PHC's own statistics – with the addition of clinics and medical personnel dictating reports – yet the health authorities stopped recruiting and filling in-house MT vacancies.

MTs currently transcribe reports for about 10,500 hospital personnel in the Lower Mainland.

But in 2011, PHC announced plans to completely outsource the service and lay off in-house workers, citing the move as a cost-saving measure.

Yet, in the fiscal year ending March 31, 2012, Lower Mainland health authorities paid \$7.8 million to private, for-profit outsourced companies – an increase of \$1.7 million from the previous year.

The first round of in-house layoffs is May 15. The remaining in-house



Hospital-trained MTs in the Lower Mainland are being replaced by home-based contractors.

MTs will be laid off on August 15, at which time all Lower Mainland medical transcription will be performed by home-based contractors across Canada.

BRENDA WHITEHALL

HEU's public sector **contracts** ratified

HEU's three major collective agreements – facilities, community health and community social services – have all been ratified now with modest wage increases for all workers.

The two-year contracts are set to expire on March 31, 2014.

The multi-union bargaining associations were able to reach the agreements in an extremely challenging negotiating climate under the BC Liberals' "cooperative gains" mandate.

Strong strike mandates in the community health and community social services sectors – backed up by strategic job action – enabled members to reach new contracts without the deep concessions that employers were after.

The Community Bargaining Association began talks with the Health Employers Association of BC (HEABC)

on January 23, 2012. The bargaining unit achieved an 86 per cent strike mandate last fall and began rotating job action across the province in November. Their contract – which includes a three per cent general wage increase, and improved workplace and scheduling provisions – was ratified on February 19, 2013.

The Community Social Services Bargaining Association began negotiations with the Community Social Services Employers Association on February 27, 2012. Members backed their bargaining team with a 90 per cent strike vote in community living, and an 85 per cent strike vote in general services. Rotating job actions rolled out across the province in October and wrapped up in January. On April 22, members ratified a two-year contract that includes wage increases, job secu-

rity measures, and the promise of a labour market adjustment review.

The Facilities Bargaining Association ratified their contract on December 21, 2012. Negotiations with HEABC began on February 7, 2012, and resulted in a contract that provides job security protections, an across-the-board three per cent wage increase, and maintains members' benefits.

Members backed the bargaining committee with a 96 per cent strike vote.

"HEU members played a huge role in achieving those agreements," says HEU secretary-business manager Bonnie Pearson. "There's no doubt in my mind that these agreements came about as a result of very strong strike mandates. Our members supported their bargaining committees at the critical hour and that had a significant impact."

the federal level is not widely understood or discussed outside of political circles in Ottawa and the oil patch," says Polaris.

You can read the full report at www.polarisinstitute.org.

B.C. needs new approach to reducing greenhouse gases

It's time to move on. Recycling is just not good enough, says a new joint study by the Canadian Centre for Policy Alternatives and the Wilderness Committee.

Closing the Loop: Reducing Greenhouse Gas Emissions Through Zero Waste in BC, calls for a new approach that would reduce the vol-

ume of materials entering the environment in the first place.

"A good model is beer bottles, which are re-used about 15 times before they are recycled due to deposit-and-return systems," says author Marc Lee.

A "zero waste" strategy would move B.C. away from an economic system in which raw materials are extracted, processed into consumer goods and then trashed.

Instead, in a "closed loop system," products like appliances would be repaired and reused for as long as possible, then broken down into parts that could be reused in new products or, finally, recycled.

Such a model, says the report, would generate green jobs by creating domestic capacity for recycling as well as jobs in repair, servicing and maintenance, and sorting and reusing bottles and containers.

Currently, most recyclable materials are exported to other countries for processing.

If B.C. can move to aggressive reduction and recycling of materials by 2020, the study estimates greenhouse gas emissions could be reduced by almost five million tonnes.

Recommendations include phasing out single-use products and packaging, instituting province-wide composting, tightly regulating toxic or non-recyclable materials – or banning them

outright – and limiting B.C.'s incineration capacity, which not only creates a demand for more waste, but also releases greenhouse gas emissions.

Breast Cancer Research

Are you an HEU member who works shifts and lives in the Lower Mainland?

If so, you may be eligible to participate in a study on the effect of improved sleep on women's breast cancer risk.

Results from this study will assist research undertaken to help reduce breast cancer.

Research has shown that women

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Why dues matter

In the last few years, we have seen greater attention paid to growing economic inequality in Canadian society.

Poverty rates are climbing. Plants are closing. More and more jobs coming onto the labour market are low-waged, with minimal benefits.

It's against this backdrop that Stephen Harper's Conservatives and other extreme right-wing politicians are working hard to destabilize the labour movement. And why wouldn't they? Unions are strong, vocal opponents to policies that drive down workers' wages and weaken workers' rights.

Having just passed *Bill C-377*, which will force unions to publicize their financial details outside of their own memberships, the next step is to try and gain members' support for getting rid of automatic dues payment.

Since it would be almost impossible to try and get rid of unions directly, they're using a much more underhanded strategy. Try and get union members to buy into the idea of making dues voluntary.

But of course, without membership dues, unions would not be able to function effectively, if at all. And without unions, there would be nothing standing in the way of the real goal, which is to make workers more vulnerable and less able to protect themselves.

Union membership is the best investment workers can make, for themselves and their communities.

Even the World Bank has confirmed that countries with higher rates of

unionization are better off economically.

That's because there are more people with decent family-supporting jobs who have enough purchasing power to contribute to their local economies. And that helps raise the standard of living for everyone.

Internally, union dues support everything from bargaining collective agreements, to helping members protect their rights on the job. They support education and training for local shop stewards and health and safety reps, campaigns, research, legal advice, communications, bursaries and service representation to resolve workplace problems.

They support member gatherings – bargaining conferences, policy conventions, regional meetings, and the list goes on.

And they provide members with all the advantages that come from having a union-negotiated collective agreement, which covers everything from wages and health benefits to the ability to

grieve unfair treatment.

The right for unions to exist and to bargain collectively is one of the most important rights we have. Since 1946, that right has been supported by a funding model known as the Rand Formula, which ensures all those covered by a collective agreement pay member dues.

Any attack on the Rand Formula is nothing less than a thinly disguised attempt to get rid of unions, and destroy their ability to protect workers' interests.

For the entire labour movement, and all those who depend on strong labour leadership, this is our line in the sand.



Donisa Bernardo
HEU Financial Secretary

Any attack on the Rand Formula is nothing less than a thinly disguised attempt to getting rid of unions.



VICTOR ELKINS

Think about what would have happened if there had been a different outcome in the May 2001 election.

No *Bill 29* and the subsequent contracting out of 8,000 HEU jobs. No *Bill 37* and the subsequent 15 per cent rollback.

We probably wouldn't have slipped from second place to ninth place among Canadian provinces in terms of provincial support for health care.

And the list goes on...

That's why our union, and the entire labour movement, is working hard to mobilize union members across the province to cast their ballots in this provincial election.

In some ridings, a good turnout by HEU members and their families could actually determine which candidate gets elected.

Think about how much of a difference it will make to be able to work with a government that actually values working people and their organizations.

Adrian Dix and his team are presenting a progressive and credible alternative to Christy Clark and the BC Liberals.

This is good news for our union. As health critic, Adrian Dix really got to know our issues. For many years, he's been a relentless advocate for our members and for the services we deliver.

And while we do not expect miracles from the NDP, what we do expect from an NDP government is fair treatment.

On May 14, we have the opportunity to elect a government that will treat our union and our membership with respect, and as partners in improving health care services, and community social services.

That's huge. Think about how much of a difference it will make to be able to work with a government that actually values working people and their organizations.

And that's why our union's political action work won't stop on Election Day.

Political action is about a lot more than electing candidates. It's about campaigning and lobbying between elections, and building public support, for the changes we want to see in our workplace and in our communities.

With a change of government, however, we'll be communicating with elected officials who share our fundamental values, understand the importance of public services, and respect the work we do.

Sisters and brothers, those changes alone will make a huge difference in what we'll be able to achieve together in the next four years.

But as I've said, the first step is doing what we can to put a new provincial government into office.

And on behalf of the entire Provincial Executive, I want to thank all those members who have been volunteering in local campaigns right across the province to get out the vote.

Together, we can make change happen – on May 14, and beyond.

PRESIDENT'S DESK

Members can make change happen

Sisters and brothers, we can't leave anything to chance in this election.

If the last 12 years have proven anything, it's that when power falls into the wrong hands, bad things happen.

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shift workers exposed to light at night are at increased risk for the disease. And it may help improve your quality of life. Better sleep not only helps reduce stress and mood disorders, but may also improve weight management, memory, and heart health.

This three-year project began in August 2012. To date, 18 women (four of them HEU members) have enrolled as participants, and researchers are looking for 42 more.

Participation is required over a 12-month period. Participants must be women

between ages 40 and 65, who work rotating shifts, or permanent nights, at least three times per month for at least two years; have had a mammogram taken within the past three years (or are willing to get one); and who currently live or work in the Greater Vancouver area.

For more information, contact Carola Munoz at 604-822-1315 or email <shiftworkers.cancerprevent@ubc.ca>. Check out UBC's Cancer Prevention Centre (CCS-UBC) site: <www.cancerprevent.spph.ubc.ca/shiftworkers>.

Seniors' advocate lacks independence

The call for an independent advocate to address the challenges seniors face in home and residential care has been sounded since December 2008. That's when former BC Health Coalition co-chair Joyce Jones first urged government to establish an office to investigate problems in seniors' care, with powers similar to that of B.C.'s representative for Children and Youth.

Four years later, and following two scathing reports from B.C.'s Ombudsperson

on the state of seniors' care, the B.C. Liberal government announced the creation of a seniors' advocate position.

But would this position be independent?

Under *Bill 10*, the *Seniors' Advocate Act*, the advocate's independence would be limited because it would not be appointed by the legislature and therefore would not report directly to the legislature.

"During community and stakeholder consultations last year, the overwhelming consensus was that a seniors' advocate must be independent," says HEU secretary-

business manager Bonnie Pearson. "It's critical that the position operate without government influence."

She says *Bill 10* provides for an office with the ability to investigate and report on a range of systemic issues, but ultimately will serve at the pleasure of cabinet and be under the control of the Ministry of Health.

"And that's problematic."

The NDP Official Opposition attempted to amend the legislation to make the seniors' advocate an independent body, but the amendment failed.

A decade of disrespect

During three terms in office, the BC Liberals ripped up contracts, rolled back wages, privatized health services, **contracted out decent-paying jobs** and closed hospitals and care facilities. In this election British Columbians will decide if 12 years is enough – and HEU members will **cast their verdict** on more than a decade of disrespect.

WE VOTE ON MAY 14

2001

The BC Liberals, elected with a massive majority in May, immediately bring in huge tax cuts, setting the stage for cuts to health care and other public services.

In December, the BC Liberals replace regional health boards and community health councils with the current health authority structure. Existing health boards, including worker representatives, are fired.

2002

In January, Premier Gordon Campbell breaks his promise not to rip up HEU members' collective agreements and jams *Bill 29* through the legislature in the middle of the night. The law effectively clears the way for the privatization of health care services and results in the largest mass layoff of women workers in Canadian history.

In April, the BC Liberals also break their promise to build 5,000 not-for-profit long-term care beds. Virtually all future construction of long-term care beds will be through public-private partnerships.

In May, they introduce legislation that weakens employment standards, shifts the *Labour Code* in favour of employers, and undermines workers' compensation protections for injured workers.

2003

The closure of long-term care facilities and hospitals begins in earnest.

In January, the BC Liberals announce their intent to use a public-private partnership to build a new hospital in Abbotsford, despite concerns raised by HEU and others that it would be cheaper to build it using traditional public procurement.

Pharmacare changes in February shift more of the burden of drug costs on seniors and families.

In June, the Vancouver Coastal Health Authority announces plans to privatize thousands of day surgeries. Other health authorities will soon follow.

In December, the BC Liberals introduce *Bill 94* which facilitates union-busting and contract-flipping in privatized, long-term care facilities.

2004

In April, striking HEU members maintain protest lines for several days after the BC Liberals pass back-to-work legislation that included wage roll-backs of 15 per cent.

In June, B.C.'s auditor general reported that neglect of workplace issues during restructuring and downsizing in health care caused workplace stress — affecting both workers and patients — and contributing to a startling increase in mental health claims by staff.

In November, the Vancouver Coastal Health Authority commissioned an external audit of hospital housekeeping after complaints over the lack of cleanliness. But the visual inspections — later adopted by all health authorities — failed to consider training, level of staffing, intensity of cleaning, and quality and quantity of cleaning supplies.

2005

A government-commissioned report into an infection outbreak at Surrey Memorial Hospital reveals an almost complete breakdown of infection control procedures in the hospital as a result of the restructuring forced on the Fraser Health Authority by the provincial government.

In May, government statistics reveal that the BC Liberals cut 1,200 hospital beds from the health care system in just four years.

In September, more than 1,400 Sodexo staff staged a strike that lasted until November. It was the first major strike by privatized hospital support workers in B.C. after *Bill 29*.

2006

In September, Premier Gordon Campbell launches a year-long "Conversation on Health" but HEU and other medicare advocates raise concerns that the outcome will be predetermined and favour expanded privatization. Health care workers are segregated from the public at 16 regional forums.

But the overwhelming consensus from conversation participants is in support of public solutions to improving health care — which is reflected in the final report issued the following year.

2007

In June, the Supreme Court of Canada ruled that provisions of the BC Liberals' *Bill 29* violated the constitutional rights of health care workers. The ruling established collective bargaining as a charter-protected right for the first time, and results in several months of negotiations between unions and the government leading to a total of \$85 million in compensation and training support for impacted workers.

In December, the BC Liberals announce plans for a massive consolidation of services among Lower Mainland health authorities that will plunge service delivery into a perpetual state of reorganization and leave many employees wondering who their managers are.

2008

The BC Liberals introduce a comprehensive "gag law" targeting restricting third-party advertising in the five months preceding provincial elections. Unions successfully challenge the law in court and in the court of public opinion. Government is forced to rewrite the law.

The Vancouver Island Health Authority announces plans to close Cowichan Lodge in Duncan in August. Although many care facilities were closed by the BC Liberals, this closure was notable because of the short notice of closure and the lack of consultation with the community, residents or their families. The closure spurs B.C.'s Ombudsperson to launch a comprehensive investigation into seniors' care. Her findings include a special report on the closure of Cowichan Lodge.

2009

In January, WCB issued more than a dozen orders against hospital housekeeping contractor Compass for failing to ensure the health and safety of their Vancouver Island-based employees.

After their May re-election, the BC Liberals admit their budget deficit is larger than forecast and begin to systematically cut a range of health programs and services to meet a shortfall of \$360 million.

In December, B.C. Ombudsperson Kim Carter releases the first part of her report into seniors' care, recommending the formation of family councils in residential care facilities and a residents' bill of rights.

2010

On January 1, the BC Liberals hiked fees for residents in long-term care facilities. An HEU report released in December 2010 shows how the fees have caused real hardship for seniors and their families.

Government imposes "net zero" on public sector collective bargaining.

In November, Gordon Campbell, the premier who promised he wouldn't rip up HEU collective agreements and then did, resigns.

Between March and December, 33 group homes closed as Community Living BC looks to cut costs by \$22 million.

2011

January 1 sees another increase to resident care fees, now the highest in the country, and 93 per cent higher than when the BC Liberals were elected in 2001.

In April, a coalition of community living advocates and unions release a report calling for urgent action to support adults with developmental disabilities who have been impacted by the chaos and program cuts in Community Living services.

2012

In February, B.C.'s Ombudsperson releases part two of her report into seniors' care calling for higher staffing levels, enforceable standards of care and action to address "large scale staff replacement."

In March, Lower Mainland health authorities announced plans to contract out medical transcription services. The first round of layoffs resulting from the move will take place one day after the May 2013 election.

2013

The last piece of legislation introduced by the BC Liberals before the election redefines health care bargaining relationships. Despite government's clear requirement to engage in meaningful consultation as established by the courts, *Bill 18* is adopted before any consultation takes place with HEU and other unions impacted by the legislation, with the exception of the BC Nurses' Union.

B.C.'s next premier Adrian Dix

DAYS BEFORE B.C.'s PROVINCIAL ELECTION got underway, **NDP Leader Adrian Dix** spoke with the *Guardian* about some of the issues that matter most to HEU members.



Children's and Women's Hospital



HEU Bargaining Conference



George Derby



CUPE Convention

01 PRIVATIZED HEALTH SERVICES

The last 12 years have seen the unprecedented privatization of health care services and the contracting out of health care workers. The result has been the loss of decent jobs, the deterioration of service quality and a lack of accountability.

What will an NDP government do to reverse this trend?

First of all, obviously, and very importantly, we are going to act to get rid of the rest of *Bill 29*. That is an important first step, although it's not a sufficient step, in dealing with this issue.

Secondly, we have to address the issues around contract-flipping, especially in the long-term care sector, although not exclusively there, in order to protect consistency in building patient care, and to ensure that a system that seems set up to be unfair to workers, doesn't continue.

Clearly overall, and HEU have been leaders on this question, we have to make sure that public solutions, in a time of scarce resources, are found to meet the challenges in the health care system and also to improve the health care system.

And there are many challenges on this score, including focussing on public clinics and making sure people have access in terms of rural care.

Most of those solutions are found in the public sector. A lot of the privatization we've seen has been inflationary in health care. We are going to need to improve and strengthen the public role if we are going to continue to provide a high level of service, given the federal cuts that are coming to health care in 2014-15.

02 LONG-TERM CARE

The B.C. Ombudsperson has recommended higher staffing levels and measurable standards of care to improve the quality of care for seniors living in B.C.'s nursing homes.

What would an NDP government do to follow through on those recommendations?

Our platform focuses on specific measures to improve standards of care, particularly to ensure that residential care homes, for example, see improved services around bathing and improved standards of care in general.

There are certain proposals in our platform on some of these questions. And obviously we're very focussed as well on care in home support, which we think is a very significant question for many people in health care – because most people, both seniors and others, don't want to go into care before they

need to. And right now, we don't have a home care system that supports that.

These are key proposals that we intend to follow through on. Further, we intend to create an office – an independent officer of the legislature – a seniors' representative who would be able to speak for seniors and the quality of care in the system.

03 PUBLIC-PRIVATE PARTNERSHIPS

The BC Liberals have relied almost exclusively on P3s (Public-Private Partnerships) to finance, build and operate new hospitals and other health facilities.

Where do you stand on P3s in health care?

Firstly, we have to understand that we have a very significant number of P3 facilities in the acute care sector right now. And that we're going to have to deal with those. Many of them have long-term contracts and we're going to have to deal with them in the coming years. And it seems unlikely that we would be able to do anything about those long-term contracts, so we'll have to manage with them in the context of the public health care system.

Secondly, there are parts of the health care system that have always been public and private, including significant parts of the care system that are not primarily public. So there's a mixed system.

All of that said, I tend not to think that P3s are a great model, especially for acute care facilities, for a number of reasons.

You get into 30-year contracts, which is what we're talking about. But we know that hospitals look very different, and operate very differently, than they did 30 years ago. And we would expect that that will be the same situation 30 years from now.

As an example, 30 years ago, HIV/AIDS had a huge impact on the way we deliver health care today. For many people, HIV is now a chronic disease which is a huge transformation. And of course the way we deal with that care has changed over 30 years.

The idea of locking into long-term contracts that limit our ability to manage the system is not that desirable and I am not supportive of it.

04 COMMUNITY SOCIAL SERVICES

As a former opposition critic for children and families, you know about the serious impact of under-resourcing in the community social services sector.

How will an NDP government address the situation to ensure vulnerable citizens receive the services they need when they need them?

Can Dix?

The Liberals tabled a budget that, if it were to be implemented, would see dramatic cuts to existing social services, and health care, and education services. Just as an example of this, there's a Community Living program, there are a number of disability programs, that are seeing per participant funding of 33 per cent cut in the first year, reaching a 50 per cent cut in the third year.

Generally speaking, the Liberals have hidden the impact of their budget, and have instructed public agencies not to produce budgets before the election. But we know what's coming, should the Liberals be elected – namely, dramatic cuts in community social services. And it's really hard to envision how those could possibly be implemented in any reasonable way.

Obviously, this is a major focus for us.

We have limited resources. We are going to inherit a difficult fiscal situation. So we are focussing specifically on children and families, on health services in the community which is a major focus of our plan in health care, and on community social services – in particular, Community Living.

These are absolutely key parts of the NDP's plan. And they will support other initiatives, like poverty reduction, which are going to be significant and will address the issues of growing inequality in our province.

05 TAX HIKES

It's clear that to solve some of the problems we've been talking about, government needs more revenue.

Will an NDP government raise taxes?

Yes. We've identified specific tax increases that we're going to bring forward.

We're going to raise the minimum tax limit on the big banks in our first budget, to pay for, to ensure, that people get access to post-secondary education. We're going to increase the tax rate on incomes above \$150,000 a year in order to address important budget priorities with respect to inequality.

We are going to raise the big business tax from 10 to 12 per cent. That's something we proposed more than two years ago. I was roundly attacked for it at the time – now the Liberals have at least moved it up one per cent, which I think reflects that we were correct in our analysis. And we will be doing one or two more things to address that.

Our tax increases, though, are limited and will not address the extent of the challenge facing our economy and our health care system.

I believe that most middle-class people, HEU



JOSHUA BERSON PHOTO

members and others, pay very significant taxation now, and are facing real pressures, especially in Metro Vancouver, but everywhere in B.C... for housing, child care, and so on.

So we have to be very prudent in that regard: not increasing the small business tax; not reinstating the corporation capital tax; not increasing income tax for anyone under \$150,000 a year – the first \$150,000 in income will not see an increase in taxes – and so on. That's so we have stability and economic growth, which are key priorities.

06 HEALTH SERVICES RESTRUCTURING

Over the last four years, our members have experienced tremendous upheaval as a result of the constant restructuring of health care service delivery, for example, Lower Mainland consolidation.

How will an NDP government restore stability to health care workplaces?

First, by giving priority to the public health care system, and secondly by putting rules in place, such as, for example, ending contract-flipping, which is inherently unstable for our health care system.

The truth, and I think everyone knows this, is that we're going to have to find efficiencies in the system, which is to an extent overmanaged.

In 2014-15, the federal government is going to cut the *Canada Health Transfer*. Our priority and goal will be to ensure that front-line services are given priority.

We'll have to find efficiencies, there is no question about it, especially in administration. But I do think it's important, in that context, to not be constantly reorganizing your health care system. We are not going to do this, even though I have concerns about the existing health authority structure. We'll see more public input on boards, for example, but we are not going to redesign the current health authority system.

I think when you're looking for efficiencies in your day-to-day challenges, constant restructuring tends to raise costs, not lower them. So our approach will be to focus in on those expensive costs, where we can find them, and not engage in reorganization for reorganization's sake.

07 CHILD POVERTY

B.C.'s track record on child poverty is scandalous.

What needs to change?

I think that there are many aspects to growing inequality and child poverty in our province. There are issues around housing, issues around income, there are issues around child care – that are all significant.

We're going to focus in our first years in office on addressing growing inequality in income in our society by implementing specific changes to raise people, we hope many people, families with children, above the poverty line.

This measure will be efficient in that it will address directly the issue of income disparity and I think it will give supports to families when they need it most.

One of the reasons why we see growing inequality is a huge differentiation in opportunities available for children based on their income. And we have to do something about that. We have to ensure that every child has the opportunity to achieve their dreams, not just those with means.

08 PUBLIC HEALTH CARE

Medicare, and our public health care system, is under attack from a variety of sources pushing more private health care.

What will your government do to protect and strengthen public health care in B.C.?

First, implement decisions to support public health care, which is efficient – both cost-efficient and fair. Many of those recommendations have been presented by the Hospital Employees' Union.

And secondly, enforce the law with respect to the *Medicare Protection Act*. I think that people would expect that such an Act should be enforced and it would be our intention to do so.

WE VOTE ON MAY 14

Vancouver Coastal ordered to stop punishing sick and injured workers

In a major victory for health care workers, the Vancouver Coastal Health Authority (VCHA) was ordered to stop engaging in practices that punish workers for being sick or injured.

VCHA's so-called Attendance Wellness Program was implemented in 2008. It included OT bans and reduced hours were automatically in effect for workers with higher than average sick time usage.

HEU, along with HSA, BCGEU, CUPE and UFCW, filed a policy grievance against the implementation of the program and hearings into the matter were held in 2011 and 2012.

In his decision, arbitrator Vince Ready ruled that VCHA must end the practice of denying overtime, reducing hours or threatening to fire workers for illness or injury, and that any worker that had their hours reduced under the program should have them reinstated.

The coercive measures not only violated workers' rights, said HEU, they also undermined employers' efforts to fight the spread of influenza in health care settings since many workers felt pressured to report to work when they were ill in order to avoid the loss of income or employment.

Ready ordered that the practice be stopped effective January 18.

UN member nations reach historic agreement on violence against women

Given the constant barrage of high-profile rape and sexual violence reports in the global media, along with all the accompanying outrage that's emerged in response to those incidents, one would think an international accord to end violence against women and girls would have been easier to reach.

But an historic United Nations declaration, achieved on the last day of a two-week UN Commission on the Status of Women meeting in New York, was nothing less than a hard-fought battle that pitched several conservative nations against the majority.

Nevertheless, the threat that some countries – led by Syria, Iran, Russia and the Vatican – would block the consensus, did not materialize.

And so, on March 15, amid a spontaneous uproar of cheers and thunderous applause, Michelle Bachelet, head of the UN women's agency, announced from the podium that consensus had been achieved.

"People worldwide expected action, and we didn't fail them," she told the meeting. "Yes, we did it."

It was no small feat. A 2003 attempt to reach agreement on a declaration to end violence against women failed. And from all reports it looked like this



Marching for women's rights



Michelle Bachelet

attempt, 10 years later, would also end in defeat.

Although the declaration is non-binding, and does not include explicit language defending lesbian rights, it is nonetheless being hailed by women's groups around the world as another step forward.

Of particular significance is a directive in the 17-page document urging member states "to refrain from invoking

any custom, tradition or religious consideration to avoid their obligations" with respect to eliminating violence against women and girls.

Other breakthroughs that survived conservative objections to the draft included ending the practice of child, early and forced marriage, and protecting women's right to control all matters related to their sexuality, including their sexual and reproductive health.

About 6,000 non-government groups from 193 UN member countries were engaged in the proceedings.

The final agreement was nothing less than a hard-fought battle that pitched several conservative nations against the majority.

HEU joins call for green jobs plan

As part of HEU's commitment to promoting environmental sustainability, the union recently endorsed the Green Jobs action plan.

The umbrella organization includes labour and environmental groups who are working together to push for good jobs that are socially equitable

and ecologically responsible.

An open letter to government, signed by several environmental and labour groups, including HEU, says B.C. needs bold action to meet our climate goals.

For more information, visit <www.greenjobsbc.org>.

>>voices>>



It is government's responsibility to ensure women's safety, equality and liberty.

Leadership needed to end violence against women

Violence against women and girls is an expression and reinforcement of women's inequality. Although individual men are committing this violence, it is government's responsibility to ensure women's safety, equality and liberty. And in B.C., government has failed.

So what does the next provincial government need to do to address violence against women and girls?

Alleviating women's poverty and ensuring an effective response from our justice system are imperatives.

Poverty is a major obstacle for women who wish to leave violent situations. Many do not earn enough to provide for themselves and their children, financially shackling them to an abusive partner.

Income assistance allowances do not meet even the most basic necessities of housing and food, let alone adequate housing and nutritious food.

And without adequate, affordable child care, women cannot pursue the education and training opportunities that would lead to steady jobs and an escape from poverty and violence.

That often means battered women are forced to stay with, or return

to dangerous relationships because of financial circumstances.

And too often the police do not arrest battering men. Sometimes they conclude the violent incident was a mutual fight, or will even arrest the woman for her attempt at self defense.

In most rape cases, the police are quick to decide that there is not enough evidence to bring the case forward. In cases of violence against women and girls, Crown counsel will more often than not, stay proceedings or drop the charges.

As a result, most violent men will never go before a judge.

Government needs to restore and resource a criminal, civil and family justice system that holds violent men accountable and will protect women from men's violence.

Our next provincial government must address women's poverty and take steps to end violence against women and girls. Leadership like that will begin to restore equality in B.C. and make a real difference in women's lives.

HILLA KERNER

VANCOUVER RAPE RELIEF & WOMEN'S SHELTER

What's wrong with the temporary foreign workers program?

Canada's temporary foreign workers program has been controversial since its inception. But two high-profile cases – the hiring of miners from China to work in northern B.C., and the most recent scandal stemming from the Royal Bank of Canada's plan to outsource IT jobs to a multinational firm – have created a public backlash.

The federal program was initially designed to provide temporary visas to foreign workers to fill vacancies in areas of skills or labour shortages *only* if there were no Canadians qualified for the positions.

It was not intended to replace Canadian workers with cheap labour from abroad.

Unfortunately, many employers have used the program to exploit workers by recruiting them to Canada, then underpaying them and stripping them of basic rights.

Some employers have manipulated the system by posting jobs at lower than standard wages with unreasonable criteria, knowing that Canadian workers would not apply for them. This is particularly a growing problem in the mining, fishing, hospitality, energy and construction industries.

B.C. Federation of Labour president Jim Sinclair has been a steadfast critic of the loopholes in the program, and an equally staunch advocate for defending the rights of the temporary foreign workers, including the Chinese miners and Costa Rican workers on the RAV line.

"There's two fundamental problems," Sinclair told the *Guardian*. "One is that employers are using this as the first choice, not the last resort, for filling job vacancies in many industries. These employees come into the coun-

try and they're virtually indentured to those employers. I've had employers say to me, 'I like the program because [workers] have to stay with me for two years. They can't quit their job.'

"So, they're completely vulnerable to being exploited, abused and underpaid."

By law, employers must pay temporary foreign workers minimum wage. But they are officially allowed – under the program – to pay 15 per cent below the Canadian industry rate. Sinclair says, however, that many employers pay far less than 15 per cent below the standard and there's not a clear policy on whether the "going Canadian rate" is based on union or non-union wages.

And most temporary foreign workers fear being deported by their employer if they speak out.

Sinclair says it's important to recognize that the temporary foreign workers program is separate from Canadian immigration policies.

"Workers can't bring their families, can't raise their kids here, can't do any of that. They're not immigrants – and that's the big confusion here. This is not immigration. The labour movement supports immigration. [But] this is exploitation and we don't support that."

Another problem, Sinclair adds, is that many of the jobs filled by temporary foreign workers are actually not temporary positions.

"It's very clear that in tens of thousands of cases, they're taking jobs that aren't temporary. There are a million Canadians unemployed today in Canada. This program is used by employers to substitute vulnerable workers for Canadian workers."

According to Stats Canada, there

was an average of 250,000 job vacancies a month in 2012. Yet 340,000 temporary workers were brought into Canada last year.

"The program is basically part of a high-level strategy by the Conservative government [for] employers to undercut wages, to undercut unions and to replace secure stable jobs with insecure and vulnerable employees. It's really that simple."

Sinclair says the program needs a major overhaul, starting with scrapping the Accelerated Program where employers can apply for a permit without proving there's an acute labour shortage;



"This program is used to substitute vulnerable workers for Canadian workers."

reducing the four-year temporary work visas to six months; only bringing in skilled workers where there's evidence to support a shortage; and consulting with unions.

"They have to consult with the trade union movement when they're making a decision about whether there's workers or not," says Sinclair. "Often, employers don't want to hire union workers, so they're discriminating against Canadians because they're members of unions and won't hire them."

That's not a labour shortage, that's an anti-union agenda.



Two unions have won the right to further their federal legal challenge of a mining company's plan to bring temporary workers from China for a project in Northern B.C.

"We've let our employment standards policy be taken over by the employers," says Sinclair. "They can decide who can stay in Canada and who can't. It's disgusting. There's nothing fair about this and it's very un-Canadian."

Sinclair acknowledges that protecting Canadian jobs may be misinterpreted as discrimination against non-Canadian workers, but emphasizes it's every trade unionist's responsibility to defend *all* workers' rights. He cited a recent example of B.C. construction workers being laid off and replaced by Irish workers.

"It's not that they're Irish or Chinese or American or British or Filipino, it's that they're exploited workers. That's why they're being brought here. That's the problem."

"We have to be loud and clear that we are not opposed to workers coming from other countries to work in Canada... We favour immigration and how the immigration system works so that people can come here, work, bring their families, spend their money in the communities, support our institutions, send their kids to schools – the whole nine yards. That's how we built the country."

BRENDA WHITEHALL

B.C. Liberal government redefines health care bargaining units

In a final act before facing voters, the BC Liberals enacted legislation that redefines health care bargaining units, and moves licensed practical nurses into the RN-dominated Nurses Bargaining Association (NBA).

As a result, about 1,400 HEU LPN members in the facilities and community health subsectors will be transferred into the NBA, although they will still be covered by the terms and conditions of the facilities collective agreement for the next year.

That's in addition to about 7,000 LPNs who are now BCNU members following last year's raid.

HEU will continue to assert its right to represent HEU member LPNs in the NBA. The union's LPN members in stand-alone independent collective agreements are not affected by the legislation.

Bill 18 (the *Health Authorities Amendment Act*) was introduced and passed by the B.C. Liberal

majority without meaningful consultation with HEU and other impacted unions. The sole exception was the BCNU.

HEU took issue with the lack of prior consultation, saying it is not in keeping with the 2007 Supreme Court of Canada decision that struck down provisions of *Bill 29* and established that governments have an obligation to engage in meaningful consultation on such matters.

The heads of B.C.'s six health authorities also took issue with the last-minute move, citing the need to consider the broader implications for health care service delivery before enacting the legislation.

"We believe that extensive consultation must take place to avoid some unintended result which would severely compromise the provision of effective and efficient care and in fact not be in our

patients' best interest," they wrote in a confidential April 4 letter obtained by the *Vancouver Sun*.

Despite claims by the B.C. Liberal government and BCNU, *Bill 18* does not affect union representation rights for about 7,000 LPNs who moved to the BCNU under the provisions of the *Labour Code*.

But HEU says the bill could undermine 10 years of policy work that have increased LPN numbers and utilization.

The current bargaining unit structure in health care was established in the 1990s after extensive consultation with unions and employers, including two separate commissions.

HEU secretary-business manager Bonnie Pearson called *Bill 18* "an act of political opportunism by a government that either doesn't understand its long-term consequences, or doesn't care."

Bridging deadline for Pharmacy Techs extended

Regulatory changes introduced by the College of Pharmacists – which now requires Pharmacy Technicians to complete bridging courses to become registered – has had a significant impact on HEU members working in pharmacy. And the union encourages members to seriously consider this upgrading opportunity.

In March, HEU and the Lower Mainland Pharmacy Services negotiated an extension to the Pharmacy Technicians conversion agreement timelines. This agreement supports HEU Pharmacy Technicians who want to pursue the new regu-

lated designation.

Members now have until November 2014 to complete their bridging courses for conversion under this agreement. The previous deadline was set for November 2013. This timeline extension applies to members with or without a conditional conversion opportunity (CCO).

Once members are successfully registered through the College of Pharmacists, they can keep their existing position without displacement or reposting, and receive the new higher rate of pay (grid 32).

So far, about 100 pharmacy members across the Lower Mainland have completed the bridging and have been upgraded. Many more are

scheduled to write their final exam this year.

HEU is looking to establish similar extensions, where appropriate, for Pharmacy Technicians elsewhere in the province.

The FBA Education Fund, renewed in the 2012-2014 contract, will be open for member applications shortly. Check the union's website for information and deadlines.

This fund has supported Pharmacy Technicians interested in pursuing the regulated title. Members can receive up to \$2,400 toward their bridging.

Questions about the Pharmacy Technician conversion agreement should be directed to your local shop steward.

Job review nets \$94,000 in retro pay

On March 20, HEU signed an agreement with Providence Health Care to resolve an outstanding Job Review Request (JRR) for members working in IMITS (Clinical and Business Solutions) for the Provincial Health Services Authority.

As part of the settlement, eight incumbents will receive close to \$94,000 in retroactive money.

The union was also successful in getting an interim job description with a pay upgrade to grid MB43. And this job description will be used for any job postings if vacancies exist.

"The employer will provide each of the incumbents with a copy of the agreement, and

the union will be instructing those members to file a new JRR, all of which, we hope to have sorted out by the IT benchmark review," says classification representative Teresa Ford. "It's important to note that this agreement is separate and distinct from the IT benchmark review."

HEU holds First Nations bargaining conference

Collective agreements for HEU members covered by the Gitksan Health Authority, Gitanyow Human Services, St'uminus First Nations, Skidegate Band Council, Nisga'a Valley Health Authority and Gitwangak Health Centre are up for renewal.

In preparation for bargaining, HEU is holding a First Nations

BALANCING IT ALL

CHRISTINA MONTGOMERY

Former secretary-business manager **Judy Darcy** says she carries the lessons, commitment and inspiration of HEU members with her as she campaigns for public office.

OUT ON THE CAMPAIGN TRAIL

The woman's story was tough enough to hear. But the matter-of-fact way she told it was heartbreaking. She was a single mother with three children under the age of seven, a former Safeway worker now on disability allowance – and now poor, she told Judy Darcy.

Out of work, the sole supporter of her family, she had lucked into a new coat for her son, donated by a local charity. It still had the price tags on it, and her son was so excited that it was hard to get it off him at bedtime. Next morning, when he put it on for school, he saw she had cut the tags off. And he cried his eyes out.

"She said it took a while for her to understand that he was crying because he never had a new coat, or anything new from a store," says Darcy, who was approached by the woman during her current campaign as the BC NDP candidate in New Westminster.

Darcy, HEU's former secretary-business manager, calls the story "a startling reminder of what health and safety activists say all the time – that all of us are just one accident or injury or crisis away from poverty."

The lessons, commitment and inspiration of health care workers are with her on the campaign trail, she says.

"I'm knocking on doors, attending community events, coffee parties in people's living rooms, answering email, tweeting, posting on Facebook,

finding volunteers.

"The best part of campaigning is knocking on doors. That's when you get to find out what happens in people's lives and what matters to them.

"I've talked to a lot of parents who are really deeply concerned about their special-needs kids in classrooms, and worried about what it might mean if a



JOSHUA BERSON PHOTO

Liberal government is re-elected. One woman was close to tears talking about the wonderful help her autistic son gets now in his classroom, and worried if he'll still have that in the future.

"I spoke to a nurse practitioner who wanted to know how the NDP saw the role of nurse practitioners. I told her that we believed that everyone in the health care system has to work to the full scope of

their training. She was very excited.

"That same day, I spoke to a couple of people whose parents were elderly, and one of them – a classic story health care workers know very well – was not getting the support they needed and ended up in emergency and acute care when they could be at home, and living independently longer, or in residential care.

"I've also spent a lot of time with students at Douglas College. It's so exciting; we have a whole raft of young volunteers who are part of Rock the Vote, a campaign to get more students registered to vote.

"They got involved because of the clear commitment Adrian Dix, our leader, made over a year ago, that we need to make sure that access to college and university doesn't depend on how much money your parents have in the bank, and that students shouldn't be burdened with terrible debt. They are thrilled about our promise of returning to a non-refundable student grant."

Darcy says she carries the commitment and inspiration of HEU members with her as she campaigns for public office.

"The best part of campaigning is knocking on doors. That's when you find out what happens in people's lives and what matters to them."

"My six-and-a-half years at HEU were a huge motivating factor in deciding to run for office," Darcy says. "I know that health care workers give of their hearts and bodies and souls every single day, that they absorb all pressures of a stressed system into their physical and emotional beings – at great cost.

"I think it's time that we have a government that respects and values health care workers. The NDP is committed to getting rid of *Bill 29* and *Bill 94*, which led to the contracting out of thousands of jobs and to privatization. I also saw firsthand working with health care workers that there are ways to improve the system and keep it public, and that's what my life's work has been."

Darcy says people are agreeing with her. "The appetite for change is palpable."

bargaining conference in Prince Rupert May 22 and 23.

During the conference, delegates will review the results of pre-bargaining member surveys, set bargaining priorities, and elect a bargaining committee.

Each collective agreement – that covers the Nation – is eligible to elect two bargaining committee members plus two alternates to ensure all members are represented fairly and equally at the negotiating table. Bargaining committee members will stay in touch with regular reports to their members during contract talks.

Crossroads closure creates service gap

Despite a community-wide fightback to stop the closure of non-profit Crossroads



TAMI BROUGHTON PHOTO

A January rally by HEU and BCGEU members called for IHA to keep Crossroads open.

Treatment Centre, the only comprehensive detox and addictions treatment program in the Okanagan, the Interior Health Authority (IHA) has forged ahead with its plan to recruit a private company or agency to deliver a service that's increasingly in high demand.

HEU – along with labour allies, concerned citizens, Crossroads clients and their families – had mounted a well-publicized campaign urging the IHA and the Crossroads Treatment Centre Society's board of directors to resolve the underlying funding issues to keep the

doors of the Kelowna-based facility open.

About 80 participants took that message to the streets of Kelowna on January 29 as they braved frigid temperatures to protest the pending closure of Crossroads.

But instead of ensuring that the struggling Society could remain open, IHA forced Crossroads to close.

IHA then issued a request for proposals seeking a private service provider, and the result will likely be inferior wages and working conditions for new workers.

Crossroads' residential treatment programs ended on March 28, while the detox beds are set to close on June 30. That leaves an alarming gap in services while IHA

selects a new vendor.

IHA has said services will still be provided, but critics question the impact on already congested acute care emergency rooms.

"For nearly 40 years, Okanagan residents have benefited from detox and addiction counselling services by trained professionals at Crossroads," says HEU secretary-business manager Bonnie Pearson.

"But unfortunately, Interior Health has abandoned the facility, along with its team of skilled and committed care staff. It's a senseless disruption to clients who rely on these critical life-saving services."

continued on page 14

AFTER THE SHIFT

PATTY GIBSON

Royal Jubilee member **Barbara Riggs** is a dedicated local activist who devotes thousands of volunteer hours to supporting political candidates and her party of choice.

FINDING A NEW POLITICAL HOME

A self-confessed extrovert, HEU member Barbara Riggs is a busy woman – on and off the job.

By day, she is an accounting clerk (cashier) in accounts revenue, based at Victoria General. But after the shift, she's an active member of her Royal Jubilee local, where she's currently secretary-treasurer and a delegate to the Victoria Labour Council.

And somewhere between her family responsibilities and volunteer work, which includes holding several positions in the New Democratic Party, Riggs has managed to complete a Bachelor of Commerce degree.

In July, she graduated from Thompson River University, after completing a rigorous schedule of courses by correspondence.

These days, her volunteer work is focussed on helping to elect NDP incumbent Maurine Karagianis in the Vancouver Island riding of Esquimalt-Royal Roads.

An HEU member since 1998, Riggs first became a Canadian citizen with the right to vote in October of 2001. She had moved to Canada from the United States after meeting and marrying her husband Bill, now a retired Canadian navy officer.

Upon gaining her citizenship, one of the first things Riggs did was canvass all the Canadian parties, looking for a political home in her new country. And that's how she first met Karagianis.

"Meeting Maurine was a turning point. She had

the same values I have," says Riggs. "She works for everyone – families, union workers, small business – and she believes in the same things I believe in."

After helping elect Karagianis to office in 2005, Riggs was hooked on volunteering in election campaigns.

So in 2005, Riggs took out a membership in the NDP and signed up to work on Karagianis' campaign.

Never having worked on a campaign before, Riggs had a lot to learn. On Election Day, she was running one of the campaign's "zone houses" (satellite neighbourhood offices) to help pull the vote.

"The whole experience was amazing," she recalls. "It was a real team effort, with everyone working as a team. I was so pumped. We had a friendly competition with a neighbouring zone house to see how many of our supporters we could get to the polls and we won."

They also won the election and from there on Riggs was hooked. Between then and now, she's volunteered as a financial agent for provincial and federal elections campaigns, which involves everything from getting campaign offices up and running, to keeping expenses on budget, and taking everything down after election day.

Currently, she is a member of the executive of the federal NDP, and the South Island regional rep on the NDP provincial executive.

It takes a lot of extra hours after the shift to

"In a campaign, everyone works together. Everyone shares in the rewards. It's about a lot more than one person."



HEU member Barbara Riggs (right) with NDP MLA for Esquimalt-Royal Roads, Maurine Karagianis.

carry out her many responsibilities between elections. But Riggs says she loves being involved.

"I love meeting people, I like the networking. And most of all I believe in the values of the party.

Currently, she's volunteering for Karagianis' re-election campaign as financial agent. But she's also out on the door step, meeting and talking with people, helping raise funds, and as she says, "working with a great group of people to pull things off."

Riggs has come a long way in the eight years since she first joined the NDP and took the plunge into helping get a local candidate elected. And she doesn't hesitate to recommend the experience to others.

"In a campaign, everyone works together. Everyone shares in the rewards. It's about a lot more than one person. That's what's so neat."

continued from page 13

HEU secures two new Pharmacy Tech benchmarks

HEU reached an agreement on February 14 with health employers for the implementation of two new benchmarks – Pharmacy Technician Supervisor I and Pharmacy Technician Supervisor II.

The agreement deals with benchmarks for supervisors charged with the supervision of regulated Pharmacy Technicians.

The *Final Settlement and Implementation Agreement* includes a process for health employers to match pharmacy supervisor positions to one of the new benchmarks based on the duties and responsibilities of the incumbent.

Affected employees will be classified to the appro-

appropriate benchmark once they become a Registered Technician and also begin supervising a Registered Pharmacy Technician. They must meet both criteria.

The effective date of reclassification will be the date at which the College of Pharmacists deems the Pharmacy Technician Supervisor to be registered.

The agreement also addresses the transition period for pharmacy supervisors who are not regulated themselves, but are supervising regulated Pharmacy Technicians. They'll be paid at the Grid 33 rate until they secure College registration as a Pharmacy Technician.

Issues or disputes arising out of the agreement will be jointly addressed by

the parties, subject to the appeal process contained in the *Maintenance and Classification Manual* and the facilities collective agreement.

The finalization of the Pharmacy III and Pharmacy IV benchmarks (representing the supervision of Pharmacy Assistants) remains outstanding. These benchmarks will be referred to a Classification Referee for final determination of wage rates.

Care Aide, LPN courses get thumbs up

Evaluations from a \$2.5 million grant that supported education courses for 2,400 care aides and 1,800 licensed practical nurses are in, showing a big thumbs-up from HEU participants.

Feedback provided upon

completion of each course received an average 89 per cent approval rating.

"Those evaluations confirm just how important additional training opportunities are to the care staff," says HEU secretary-business manager Bonnie Pearson. "Our union will continue to advocate for more education and training for our members to boost their knowledge, skills and confidence in meeting the complex health needs of their patients and residents."

The 13 courses, funded by the B.C. Health Education Foundation, wrapped up earlier this spring. The application was a joint initiative between the Facilities Bargaining Association and health employers, achieved

in 2010 bargaining.

Courses ranged from four-hour education sessions on specific topics for LPNs and care aides working in residential care, to longer courses in acute care.

As one of the 250 participants in the Acute Care Aide Course said, "This was an excellent source of info for me and really wished I had received all this info when I first started my employment."

Residential care courses included dementia care, care planning, and pain and falls.

HEU and health employers are jointly recommending that the Ministry of Health look for options to increase standardization and provide more opportunities for enhanced education to care aides and LPNs.

MAY

JUNE

JULY

MAY 21-23

HEU Regional meeting (Vancouver Island)

MAY 22-23

First Nations Bargaining Conference

MAY 27-29

HEU Regional meeting (North)

MAY 29-31

HEU Regional meeting (Fraser)

JUNE 3-5

HEU Regional meeting (Vancouver Coastal)

JUNE 5-7

HEU Regional meeting (Interior)

JUNE 8

World Environment Day

JUNE 10-12

HEU Equity Conference

JUNE 18-20

Provincial Executive Meeting

JUNE 21

National Aboriginal Day

JULY 1

Canada Day (HEU offices closed)

AIDs documentary 'a must see'

When a friend called me in early February to say she'd just seen "an amazing documentary" – and that in her opinion every community organizer, every health care advocate had to see it, I was more than curious. I hadn't heard of the film before, and then, the next thing I knew, it had received an

Academy Award nomination for Best Documentary Film.

When I finally watched *How to Survive a Plague* it didn't disappoint. The film, now out on DVD, was everything my friend had said it was.

The feature-length documentary is billed as the story of two coalitions – ACT UP (AIDS Coalition To Unleash Power) and TAG (Treatment Action Group) – whose activism and innovation turned HIV/AIDS from a death sentence into a manageable condition.

But it's a lot more than that.

It's the historical account of an almost forgotten time in our recent history when governments, scientists, the medical profession, and a frightened public turned their backs on a new disease that was primarily, but not exclusively, killing gay men.

For those among us who lived through that time, it is a stark reminder of the days when people who had contracted the illness were turned into untouchables. When gay men were shunned, whether or not they had been infected. When many hospital personnel were afraid to touch a person with AIDS. When those who died were packed out of some hospitals in black garbage bags to funeral homes that refused to take them.

And for younger generations, without any firsthand knowledge of the deep anti-gay discrimination that blocked action on the emerging AIDS epidemic, it's a shocking eye-opener about what it took to get those in authority to care.

When ACT UP burst onto the scene in 1987, there were 4,135 known deaths from AIDS in the United States, and thousands more worldwide.

This is where the film begins. Using a treasure trove of archival footage taken by 31 named videographers, *How to Survive a*

Plague captures the rallies, direct action confrontations, internal meetings and divisions of an in-your-face movement that refused to give up.

And it chronicles the increasingly desperate life and death struggle between 1987 and 1996 to push, and eventually work with, pharmaceutical companies to find an effective anti-viral to combat the disease.

To reach that goal, activists worked on every imaginable front, from learning the science behind AIDS, to infiltrating the pharmaceutical industry, to forcing drug manufacturers to cut the time between conducting experimental drug trials and making those drugs available to patients.

As the death toll mounts, and government indifference continues, we watch AIDS organizers press on with a variety of controversial civil disobedience tactics. In one particularly powerful, and tragic, segment of the film, people are shown at a mass rally outside of the White House, somberly strewing the ashes of their loved ones over the wire mesh fence onto the lawn.

Finally, in 1996, the protease inhibitor "cocktail" was developed, reducing the HIV/AIDS virus from a death sentence to a manageable, chronic illness.

And it's here that the chronology ends. Although the story is far from over.

If I have any criticism, it is only that this documentary would have benefitted from an epilogue referencing the millions who are currently dying in Africa, because they can't access the drugs they need. Nonetheless, filmmaker David France is to be commended for his extraordinary ability to weave together a compelling, insightful account of how a group of ordinary people in the U.S. made a profound difference for the millions who have survived this plague.

As one ACT UP activist puts it early on in the film: "Someday, there will be people alive on this earth who will hear the story that there was once a terrible disease and that a brave group of people stood up and fought, and in some cases died, so others might live and be free."

It's a must see.



Film Review

How to Survive a Plague

Directed by David France.

Produced by David France, Howard Gertler

Now available on DVD. (120 minutes)

PATTY GIBSON

Retirements

Care aide **Gail Jensen** (Holyrood) retired in November 2012 after 19 years as an HEU member. Chair of her local for most of her career, Gail fondly recalls her years of local activism as “a really good experience. I learned a lot!” She looks forward to spending more time with her parents in Alberta, her grandchildren, and her friends. And Gail eagerly anticipates a long trip to the Yukon and Alaska in the summer of 2014.

In March, **Debbie Leslie, Wilma Vanderwal** and **Deb Scott** (Royal Jubilee)

retired from their finance department positions. After 19 years as an accounting clerk, Debbie is moving on to another part of her life, as is Wilma who leaves her work as head cashier after 27 years of service. Deb retired after 16 years in finance. Her positions included clerk III, data entry clerk II, and accounts receivable clerk IV. Deb



LESLIE



VANDERWAL



SCOTT

told the *Guardian* she looks forward to gardening and fifth-wheel travel with her husband – south for the winter and summer camping on Lake Cowichan.

Cook-in-charge **Judi MacLeod** (Tofino) retired in March after 35 years in dietary. An energetic activist, Judi held many positions on her local executive – chairperson, secretary-treasurer, vice-chairperson, trustee and shop steward. “Patients and staff will miss the great food that came from her small site thanks to her culinary talents with spoon and spatula,” says local secretary-treasurer Jeanette Martinolich. Judi looks forward to travel, spending more time with family, relaxing, and enjoying her home and garden.

In April, **Lolita (Lita) Chew** (Berwick-on-the-Lake) retired from her housekeeping aide position in Nanaimo after eight years as an HEU member.

Her retirement plans include spending time with her husband, being at home in their garden, and enjoying the adventures of travelling. Lita’s colleagues, residents and staff wish her all the best.

In memoriam

Helen Burnell (Kelowna) passed away on March 17 at the age of 71. Over 250 people attended her funeral. For over 30 years, Helen

was as an HEU member at Kelowna General Hospital. In the late 1960s, she worked as an LPN/activity aide, and in the late 1980s, she moved to the position of laundry worker. Helen served on



BURNELL

HEU bargaining committees and for three consecutive terms on HEU’s Provincial Executive as Vice-President-Okanagan (1986-1988, 1988-1990, and 1990-1992). Due to a disabling back injury, Helen was off work on LTD from 1992 until she retired in 2006.

As well as being a lifelong activist, Helen was a tireless worker in her community.

For the past 12 years, she was the president of the Senior Citizens’ Association of B.C. (Rutland Branch 55); an elder of the Kelowna Métis Society; a member of the Rutland Residents’ Society, Rutland Centennial Park’s Society, and the Royal Canadian Legion.

Helen’s passions were her grandchildren and great grandchildren, her family, friends, her dog Niki, and playing cards.

Helen’s kindness will be deeply missed and lovingly remembered by her HEU sisters and brothers, her family and friends, and by the many people in the labour community whose lives she touched.

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pinktriangle@heu.org

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



pwd@heu.org

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women@heu.org

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