

**CUPE Health Care Council Update on Essential Services – November 21, 2008**

**Thoughtless and unreasonable:**

On Monday, November 17<sup>th</sup>, your negotiating team helped the media and the public understand how unfair the Essential Services legislation is by holding a press release “scrum” on the steps of the Legislature. Both CUPE and SEIU spoke to how the legislation has already negatively impacted collective bargaining, and how it is likely to in future. Gordon Campbell, President of the CUPE Health Care Council, and Barbara Cape, President of SEIUWEST, spoke clearly of hindered progress at the negotiating table, and the lack of clarity and fairness in the essential service negotiation process.

The health regions have provided their lists of essential services positions in case of strike – but not all of the information required in the Act – and people might be pleased to know that virtually all of us are considered essential. If almost all positions and classifications are considered essential at close to 100% coverage, health care workers would be unable to strike effectively – if at all – or take any appropriate job action. Make no mistake, *The Essential Services Act*, brought by the government into law earlier in the year, severely lessens the leverage your Union has at the negotiating table.

There have been strong and clear signs that this employer enjoys wielding the sword of *The Essential Services Act*.

Thankfully, the media are now becoming very interested in this issue. On Wednesday, November 19<sup>th</sup>, the CUPE negotiating team returned to the Legislature, since Essential Services was the hot topic during question period. Rob Norris, Minister of Advanced Education, Employment and Labour, weakly deflected some very pointed questions about the new law, while Don McMorris, Minister of Health, was clearly grasping at straws in his defense of the actual essential service positions of the health regions.

Media interviews that followed the session brought further difficulties for the ministers. McMorris finally admitted that, “Health regions need to be reasonable when compiling lists of jobs they think are essential” [Leader Post, Thursday, November 20, 2008]. A letter from SAHO was produced by the media, and it directed the health regions to be reasonable in their lists of essential services. It was clear that our efforts had produced a bit of backpedaling from the sitting cabinet.

While we are largely essential, sadly the employer has not wanted to pay us as if we are essential. In fact, the upcoming Dagnone Report is expected to point the way toward privatization of many jobs and functions within Saskatchewan health care, and with privatization will come an attempt to lower wages and bring health care for profit. Tony Dagnone, the consultant hired by the Saskatchewan Party government to conduct a review of provincial health services, is noted for bringing privatization to Ontario hospitals. It is expected that the Dagnone Report is something that will bring great difficulty to CUPE members, and privatization of health care to the Saskatchewan public.

In Solidarity,

Your CUPE Health Care Bargaining Committee