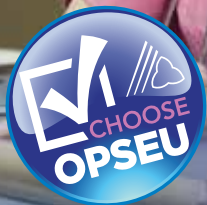


 **OPSEU** Ontario Public Service  
**SEFPO** Employees Union  
Syndicat des employés de la  
fonction publique de l'Ontario

# OPSEU ONTARIO'S UNION FOR CHANGING TIMES



## Ontario's union for health care workers



# OPSEU, Ontario's union for health care workers

## Strong contracts and effective advocacy

The Ontario Public Service Employees Union is a key player in Ontario's health care system.

We represent more than 40,000 people working in many aspects of health care: in hospitals, medical laboratories, ambulance services, home care, mental health services, and more.

They include more than 18,000 hospital professionals in more than 200 technical occupations (technologists, therapists, pharmacists, dietitians and more) working in some 80 public hospitals.

They are also professional and support staff in home care and nursing homes, they are ambulance paramedics, they staff mental health programs, and they work for Canadian Blood Services. They work in health administration, community agencies and more. Still others work in the Ontario Public Service and in community colleges.

Combined, they make up about a quarter of OPSEU's total membership.

Reflecting their distinct perspectives, OPSEU has organized these workers by sector: ambulance, long term care, hospital professionals, hospital support, community healthcare professionals, mental health and Canadian Blood Services and Diagnostics. Each sector has its own structure within the union, and a province-wide sector executive to advance the concerns of its members. On broader issues they come together as the Health Care Divisional Council.

OPSEU looks at health care in Ontario from a very broad perspective, as we draw on the experiences and knowledge of our diverse membership. It gives us the authority to speak on many different issues affecting health care in Ontario and from a wide variety of perspectives.

OPSEU was one of the founding members of the Ontario Health Coalition, a network of more than 400 grassroots community organizations. On the coalition board, OPSEU is engaged in public policy discussions on health care and healthy communities. OPSEU also participates in the Canadian Health Professional Secretariat, promoting health care professions other than doctors and nurses. These forums give the union an opportunity to push for minimum staffing standards in nursing homes and similar measures to address staff shortages and the staggering workloads in health care.

# Here are some of the things OPSEU has done to improve health care in Ontario – for workers and for the patients they serve:

- OPSEU took on the government's policy of competitive bidding in home care.
- This disruptive policy required providers to bid against each other, and forced Community Care Access Centres (CCACs) to award contracts to the lowest bidder. This put non-profit agencies with decent staff relations at a disadvantage compared to lower-paying profit making corporations. The policy prompted two strikes in the Hamilton area. The Victorian Order of Nurses struck over low pay as they were losing trained workers to other employers. Then staff at the CCAC itself struck, also bleeding staff to surrounding agencies.
- When a contract changed, home care workers lost their jobs, or moved to another position at lower pay. Clients were faced with a new person providing often personal and intimate assistance. In 2004, the government put a moratorium on the practice. When that was about to be lifted in 2008, OPSEU worked with other community and labour organizations to organize a mass rally in Hamilton, with comedian Mary Walsh, radio personality Jason Farr, the Hamilton Tiger Cats, federal NDP leader Jack Layton and recording artist Tom Juravich. The moratorium was extended.
- Further pressure followed, in the fight for a stable system of home care in Ontario and, in 2012, the government announced a complete end to the competitive bidding practice.
- OPSEU was part of a coalition fighting against needle-stick injuries.
- Advocacy on this issue, working with other unions in health care, led to mandatory use of safety-engineered sharps in all hospitals in 2007. In 2010, that policy was extended to all health care workplaces. The move saves about 33,000 injuries annually.
- OPSEU identified workplace violence as an issue in health care and raised the issue publicly. As a result of the campaign, press conferences and advertising, the government established a specialized team of inspectors to look at violence and other health and safety issues in health care workplaces. It even resulted in the Ministry of Labour laying charges against employers who did not do enough to alleviate the problem.



Experience  
*imagination*  
**results**



- OPSEU publishes a regular critique of health care policy called *Diablogue*. Readable at [diablogue.org](http://diablogue.org). Diablogue is widely consulted by media, government, hospital administrators, community groups and members who have an interest in health care. It is one way the union helps set the agenda in the health care debate. Among other things, a recent posting prompted a three-part series in the Ottawa Citizen dealing with hospitals discharging patients who need alternate levels of care to retirement homes which are not licenced to provide health care. Many other postings have also prompted follow-up stories in mainline media.
- OPSEU has provided an on-going critique of P3 financing in health care. A University of Toronto study shows it costs 16 per cent more to finance a project through a “public-private partnership.” But governments like the secrecy involved and the fact that the money doesn’t show up in public accounts. P3s can come in several forms, where the private partner just designs and builds the facility, to where it designs, builds, finances, maintains and operates it. In the last most-inclusive case, the private partner provides everything that isn’t clinical – food, security, information technology, and so on – at a profit. That practice has stopped when it became clear staff couldn’t bring a jug of water to a meeting as the P3 had the contract to sell bottled water. Staff couldn’t move a table across a room without calling maintenance or it would invalidate the warrantee on the furniture. That piled on costs across the operation, and when unions pointed out the problem, the government stripped ancillary services out of the P3 contracts.
- OPSEU protects community services. It took the Central East Local Health Integration Network to court for transferring mental health services from Ajax to Scarborough. There was a heavy demand for the service in Ajax where programs were well used. Scarborough was better served to begin with. The LHINs sign agreements with the province when they get money for service, spelling out their targets, budgets and other parameters. As a result of OPSEU’s court action, they now have to consult when they transfer programs within their service area. This gives the union and other community organizations an opportunity to take action if a LHIN’s plan poses problems. OPSEU is also pushing for greater public input to LHIN boards, with the result that two of them now allow for public presentations on issues before them.
- OPSEU fights for smaller communities. Working with the Ontario Health Coalition and others, OPSEU prompted the government to look more closely at rural and northern hospitals during discussions about consolidation. As a result many rural Emergency departments were kept open. The government had argued that smaller hospitals didn’t do certain procedures often enough to maintain expertise, but a committee of stakeholders looked at it from the perspective of how far should people have to travel for emergency help.
- OPSEU stands up for better labour relations. In its dealings with health care administrators across the province, OPSEU advocates better labour relations and works to make relations less confrontational, while at the same time speaking up strongly for the workers it represents.

- OPSEU will have more to say when the review of the LHIN program finally comes up. OPSEU wants the LHINs to be more responsive to their communities, to be more democratic. OPSEU advocates more consistent operations across the province, more public access to LHIN boards to make presentations on policy, and a greater degree of openness.

OPSEU is an activist union, with a focus much broader than the next collective agreement.

Where OPSEU represents members, it looks at policies affecting their work through a wide-angle lens.

When it comes to health care, OPSEU works with its community partners to advocate progressive health care policies for Ontario, better service to communities and better care for patients, with an understanding that better ways of doing something don't necessarily mean more expensive solutions.

OPSEU's high profile in health care helps make this advocacy more effective.

And yes, OPSEU also negotiates strong contracts for its members, and enforces those contracts effectively.

OPSEU has the experience of working with many health care employers and advocacy groups to represent the interests of patients and workers. It has the imagination and resources to take on issues in a ways that engage members and the public.

**That's why it gets the results.**

**That's why OPSEU is Ontario's union for health care workers.**



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## OPSEU ONTARIO'S UNION FOR CHANGING TIMES

To reach an OPSEU organizer:

from the Greater Toronto area: 416-448-7440 from anywhere in Ontario: 1-800-268-7376

2550 Victoria Park Ave., Suite 400, Toronto, ON M2J 5A9

[www.joinopseu.org](http://www.joinopseu.org)

