

Resolutions Submitted by Ontario Council of Hospital Union

Resolution No. 74 Page 51

CUPE NATIONAL WILL:

Convene an annual meeting of health care provincial central bargaining teams to discuss cross-Canada bargaining issues.

Because:

- The economic crisis, growing government deficits, and a new wave of concession bargaining by employers makes bargaining coordination by CUPE National much more important, and
- CUPE has achieved province-wide central bargaining in health care in almost all provinces, and
- Strategies adopted by health care employers in one province are being adopted by health care employers in other provinces, and
- Strategies adopted by health care employers in other countries are being adopted by Canadian health care employers, and
- Greater coordination by CUPE will allow us to anticipate and respond more effectively to these strategies and threats, and
- A meeting bringing together the key central bargaining leaders will enable a significant improvement in CUPE's coordination of bargaining.

Resolution No. 83 Page 54

CUPE NATIONAL WILL:

Convene a national conference for trades.

Because:

- CUPE represents a significant number of tradespersons and;
- The trades share common issues across provincial borders, especially with the advent of interprovincial trade agreements.

Resolution No. 126 Page 71

CUPE NATIONAL WILL:

- 1. Undertake a review of the digitization, regionalization, and automation of clerical work and its impact on our members.
- 2. Vigorously oppose any attempt to move publicly funded office work to international locations.

Because

- Digitization, speech recognition software and automation are eliminating many jobs once done by clerical staff represented by CUPE; and
- Other countries are beginning to see public and private sector office work moved offshore to international locations; and
- At least 150,000 CUPE members work in clerical jobs.

Resolution No. 142 Page 78

CUPE NATIONAL WILL:

Undertake a national campaign involving the healthcare and school sectors, farmers and environmental groups to produce and serve healthy food, grown locally.

Because:

- In the United Kingdom, there is an excellent campaign to produce and serve healthy food using local ingredients, prepared by school matrons in the educational system.
- It is better for the environment to buy local produce and it helps local farmers.
- Many of our members who work in food production are threatened by contracting-out to multi-nationals, whose food product is abysmal and unhealthy

Resolution No. 213 Page 107

CUPE NATIONAL WILL:

Conduct an assessment of the effectiveness of the Canadian Health Coalition by consulting with its health councils and divisions.

Because:

The Canadian Health Coalition has been a disappointment to healthcare activists because of its focus on issues other than privatization of the public health care system, and its lack of energy and leadership, nationally.

Resolution No. 214 Page 108

CUPE NATIONAL WILL:

Mount a national campaign aimed at increasing public recognition of and respect for the training and skills of registered practical nurses/licensed practical nurses.

Because:

• Some provincial nurses' unions are speaking out and/or conducting advertising campaigns that suggest that RPNs/LPNs are not qualified nurses, which is not true.

• CUPE represents about 50,000 RPNs/LPNs who are offended by these statements/campaigns and who want CUPE to be more active in advocating for them

Resolution No. 215 Page 108

CUPE NATIONAL WILL:

Continue its advocacy work and campaigning nationally around healthcare acquired infections, including a call for national cleaning standards and mandatory public reporting of healthcare acquired infections and deaths.

Because:

- Healthcare acquired infections are a leading cause of death in Canada;
 and
- Being advocates around hospital acquired infections allows us to fight the contracting-out of healthcare cleaning and to fight for the hiring of more healthcare cleaners and nursing staff; and
- CUPE issued a report on healthcare acquired infections in 2009, which was widely reported; and
- CUPE brought a British expert on healthcare acquired infections to Canada for a national tour, in 2009, which was widely reported.