



Newspaper of
the Conseil provincial
des affaires sociales

CANADIAN UNION
OF PUBLIC EMPLOYEES

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The Review

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2012 Calendar

General Council
Hôtel Delta in Québec
October 3-4

General Council
Hôtel Delta Centre-ville in Montreal
December 5-6



The 20th CPAS Convention

by Ronald Boisrond

THE 20th CONVENTION OF THE CONSEIL PROVINCIAL DES AFFAIRES SOCIALES (CPAS) WAS HELD FROM JUNE 11 TO 14 IN THE MAGNIFICENT ABITIBI/ TÉMISCAMINGUE/NORD-DU-QUÉBEC REGION.



With their thoughts centered on the student crisis and the introduction of Bill 78, a scandalous law limiting civil liberties, over 125 people met in Rouyn-Noranda to discuss the issues and challenges facing our sector over the coming years and the solutions to deal with them.

To this end, the CPAS unveiled an extensive public awareness campaign highlighting the work of our members, entitled «**Plus de 20,000 périsoignants avec du métier et du cœur**»*. This three-step initiative is scheduled to culminate in a series of television ads in a few months. The campaign's main purpose is to highlight our members' expertise and help the public understand the quality of our work and the importance of our different assignments.

The delegates voted on a resolution to allow the CPAS to partially fund the campaign. Note that this campaign is in response to the members' request, proving once more that the best ideas often come from the grassroots!

One of our upcoming battles is the next round of public sector negotiations. The last negotiations were a success, due to our strategy of forming a common front with the other large unions. This turned out to be an appropriate decision, since we ended up gaining concessions through creative bargaining, even in the midst of an economic crisis. The CPAS executive is already thinking about the best strategy to adopt for the next round of negotiations in 2015.

Other topics examined were the attacks on our pension plans and the obscure but very dangerous CETA (Canada-EU Trade Agreement), which aims to sell our public services to foreign markets. If this abominable accord is signed, public services as we know them today will soon be a thing of the past. It would negatively impact on the quality of life of all citizens and constitute a blow to our jobs and social

justice values. Keep in mind that everything is at stake in these secret negotiations: infrastructures, health, water, etc. CUPE-Québec is working actively with other partners to lobby for amendments to the most damaging clauses of the agreement.

As in past Conventions, the delegates were treated to some very interesting presentations by National Secretary-Treasurer Charles Fleury and CUPE-Québec President Lucie Levasseur.

Several other delegates also gave presentations on topics currently affecting CPAS members.

This 20th Convention marked the last conference for Manon Pépin, who was the CPAS administrative assistant for 21 years. She received a warm and entertaining send-off, and now passes the torch to her successor, Marie Drouin. Happy retirement, Manon, and welcome on board, Marie!

* English translation to be found

A word from the President

by Marco Lutfy



Caring About our Image

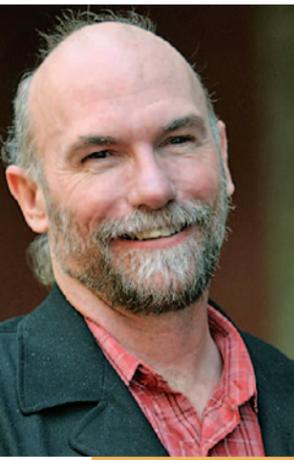
WHAT A GREAT 20th CONVENTION WE

HAD, AND WHAT BEAUTIFUL MID-JUNE WEATHER WE ENJOYED IN ROUYN-NORANDA! I'VE HAD A BLISSFUL SMILE ON MY FACE EVER SINCE.

It goes without saying that my Mona Lisa smile may have attracted some strange looks from art collectors on the street, not to mention from passersby. It's an expression that might make a Montrealer think that I was on some kind of hallucinogenic trip instead of experiencing a state of grace.

The real reason behind the smile? It's the utter and complete satisfaction you feel when genuine human contact comes your way. And for that I'd

TO BE CONTINUED ON PAGE 3



A Word from the Secretary General

by Michel Jolin

Du métier et du cœur

The 20th annual convention of the Conseil provincial des affaires sociales has just come to a close after a stimulating week of discussions on topics of concern to you, our members. During these talks, we came up with a new designation, «périsoignant(e)».

In Québec, the term «périsoignant» refers to employees in the institutions of the health and social services sector other than medical personnel (general practitioners, surgeons, dentists and so forth). «Périsoignant» designates all other employees who assume an array of tasks within the health care continuum. They may

care directly for beneficiaries, prepare medication, perform physical rehabilitation, work in intake, do laundry, work in kitchens, or perform administrative tasks or any of the other duties assigned to over two hundred job titles (such as social worker, building systems technician, orientation and mobility specialist or plumber).

Thanks to this new designation, we'll no longer be known as the civil servants or State employees that the newspapers love to disparage when they say, «Cut off the fat cats!» or «They're getting paid too much!» Will they now have the nerve to write something like, «Cut off those expert caregivers who know their work inside out and perform their tasks with heart

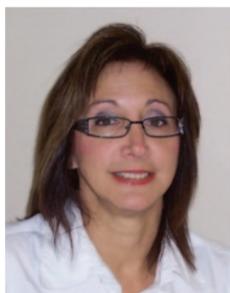
and skill»? I don't think so. In fact, «du métier et du cœur» they bring to their occupation is what makes the health and social services sector work because they are the ones who deliver the services that the public has chosen to fund.

I would like to thank the delegates who came from across Québec to attend the Convention. Thank you for your hard work, your respectful attitude, and your contributions to the discussions. Members of the CPAS Locals, I can assure you that you are well represented.

My deepest appreciation also goes out to the people of Abitibi/Témiscamingue/Nord-du-Québec, who treated us like royalty.

Last but not least, thank you for letting me represent you for another two years as the CPAS Secretary General.

Have a great summer!



Snapshot of the Estrie / Montérégie-Est / Mauricie / Centre-du-Québec region

by Francine Lamothe, regional vice president

The Estrie / Montérégie-Est / Mauricie / Centre-du-Québec region was formed after regional boundaries were redefined during the Convention of the Conseil provincial des affaires sociales held in the spring of 2006.

Here is a snapshot of our beautiful region. Six (6) Local Unions are affiliated with the Conseil provincial des affaires sociales and have about 2,500 members. The region is made up as follows:

Estrie

- Local 4475 / CSSS-Institut universitaire de gériatrie de Sherbrooke / Class 2
- Local 2385 / CSSS du Val St-François / Class 2

Montérégie-Est

- Local 1810 / CSSS La Pommerai (Centre hospitalier de Bedford) / Class 3
- Local 2304 / CSSS La Pommerai (Centre d'accueil de Cowansville) / Class 2

Each year, we hold four regional meetings during which union representatives from the Locals share their experiences. The range of topics includes relevant arbitration decisions and the policies of our respective employers. We also discuss the events at the CPAS General Councils and other CUPE meetings and events.

Mauricie et Centre-du-Québec

- Local 5436 / CRDI-TED Mauricie/Centre-du-Québec / Classes 3 and 4 /

Centre-du-Québec

- Local 4953 / CSSS d'Arthabaska-et-de-l'Érable / Class 3

FOUNDING ASSEMBLY RÉCIFS NOW A FORCE TO BE RECKONED WITH

by Guy Jolicoeur

Criticizing the New Public Management (NPM) methods that the Québec Minister of Health and Social Services is imposing on healthcare establishments, social services workers at the founding assembly vigorously denounced the turning of their work into anonymous assembly-line labour that leaves no room for creativity. «Our clients will be the ones who'll end up suffering from this performance-based demand where statistics are more important than quality of service.» was the unanimous conclusion of social sector personnel who work in the community, the health and social services network and education.

The founding meeting of RÉCIFS (French-language acronym for "social workers and social work instructors uniting, interacting and collaborating") confirms the necessity of a movement to create a forum for discussion, exchange and information, providing a platform for social workers from every workplace, subsector and Québec region that will help break their isolation. Several directors were elected, whose task is now to work on an annual action plan and publicize the movement by holding a membership drive across Québec.

By reorganizing work processes and setting targets, health sector executives are discouraging young people from becoming change agents and forcing them to function as case managers instead. The Department's only motto seems to be «Do more with less», even in the face of a crushing shortage of social workers and human relations agents, attested by the 680 positions that remained unfilled in December 2011. «This shortage is impacting our members' workload», explained RÉCIFS President Marjolaine Goudreau.

Having received numerous suggestions on how to be more efficient and gain greater exposure in the Québec media, RÉCIFS' new executives have their work cut out for them. Partnerships have also been recommended, as has collaboration with other community movements, including those in the English-speaking provinces. With members' expectations running high, everything should be in readiness by this coming fall. As the saying goes, «the die is cast».

Alea jacta est.

JUNE 15, 2012 GENERAL COUNCIL MEETING Curious about recent elections? The General Council meeting had plenty of them!

Elections were held on June 15, 2012 to appoint members to the CPAS's various committees. Here are the results:

Class 1

Johane Harrell and Benoit Piché, Institut universitaire de gériatrie de Montréal

Class 2

Danie Bouchard, Centre hospitalier universitaire de Québec, Annette Morin, CSSS de Beauce
Sylvie Gagné, Montreal Chinese Hospital

Class 3

Maureen Daley, Batshaw Youth and Family Centres
Jean Lavoie, Centre hospitalier universitaire de Québec, Martine Roy, CSSS de St-Léonard et St-Michel

Class 4

Guy Jolicoeur, CSSS de St-Léonard et St-Michel, André Vaillancourt, Centre jeunesse de l'Abitibi-Témiscamingue

Action Committee

Simon Beaulieu, CSSS Jardins-Roussillon, Frédéric Brisson, Institut universitaire de cardiologie et de pneumologie de Québec

Insurance Committee

Maureen Daley, Batshaw Youth and Family Centres, Sylvie Gagné, Montreal Chinese Hospital

Status of Women Committee

Élyse Boivin, Institut national de santé publique du Québec, Chérie Thomas, Batshaw Youth and Family Centres, COOPPP (Organizing Committee Opposing Public Private Partnerships), Danie Bouchard, Centre hospitalier universitaire de Québec, Robert Métayer, CSSS Jardins-Roussillon

Employment Evaluation Committee

Martine Roy, CSSS de St-Léonard et St-Michel, Louise-Anne Giguère, CSSS Jardins-Roussillon

Information Committee

Pierre Girard, Institut de réadaptation en déficience physique de Québec, Guy Jolicoeur, CSSS de St-Léonard et St-Michel, Sylvain Lemieux, Institut Philippe-Pinel de Montréal

Youth Committee

Simon Beaulieu, CSSS Jardins-Roussillon, Sabrina Daigle, Institut de réadaptation en déficience physique de Québec, Janick Mercier, Centre d'accueil St-Joseph de Lévis

Job Title Committee

Robert Métayer, CSSS Jardins-Roussillon

Occupational Health and Safety Committee

David Giroux, Centre jeunesse de Montréal-Institut universitaire
Dominic Laforest, CSSS Lucille-Teasdale
Julie Laramée, CSSS Jardins-Roussillon

like to thank all the local representatives for their legendary warm hospitality. You have every reason to be proud of your region!

The other reason I'm so elated is because our decision to emphasize the human values that set apart CPAS members has been more than vindicated. These values have led us to implement a wonderful project that will drive our initiatives for years to come.

The project consists in promoting the merit and value of the work and people represented by the CPAS, and acting as the spokespersons for those who work behind the scenes day and night so that our health institutions can function and deliver quality, human care.

Without fanfare, these people dedicate themselves to their work, their team, their community and the clients they serve, with one goal in mind: to care for others. From secretaries to plumbers, beneficiary attendants to social workers, people in a range of some 150 job titles put «*du métier et du Coeur*» into improving the quality of life of those who need help.

It's high time that a sense of worth and respect be accorded to those who take care of others for a living. It's also high time that we care about our image and claim our rightful place. And that's what we're doing in our workplaces and with the public: promoting the dignity of our work wherever we can.

Delegates, thank you for your solidarity and for showing your faith and support for our team once again.

We're more than 20,000 strong, putting «*du métier et du Coeur*» into what we do!

Thank you for believing in yourselves.

Have a great summer!



The Review

Newsletter published by the **Conseil provincial des affaires sociales (CPAS)**

CPAS is the amalgamation of the Unions of the Health & Social Services Sector of the Canadian Union of Public Employees (FTQ)

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GROUP INSURANCE WHAT IS CONTRACT 6000?

by Pierre Girard

THE INSURANCE COMMITTEE OF CUPE-QUÉBEC'S CONSEIL PROVINCIAL DES AFFAIRES SOCIALES (CPAS) HAS PREPARED A NUMBER OF INFORMATION CAPSULES ON THE CPAS GROUP INSURANCE PLAN TO HELP MEMBERS BETTER UNDERSTAND THIS IMPORTANT ASPECT OF THEIR BENEFITS. FIRST WE BEGIN WITH A DESCRIPTION OF CONTRACT 6000.

The contract

Contract 6000 is made up of all the workers in the public sector, including health and social services, education, and administration. Established in 1991, the contract has some 32,000 current members (45,000 when exempted members are included), who work for more than 250 employers. A call for tenders is issued every 10 years, the most recent being in 2009. This initiative should not be confused with renewals, which are made every year.

Only a few companies have the capabilities to insure a contract like the 6000, which is why bids are received from seven or fewer companies. To prepare a call for tenders, specifications are established for a basic plan, including the extra services desired. Companies are invited to submit a bid for a one- or two-year plan. When a contract is renewed, the figures for the previous year are used to calculate the cost of the renewed plan. These discussions and computations take place in August and September because the accounts payable staff needs to know the cost of the new premiums by October 15.

What are the major costs?

In reality, administrative expenses account for only 7% of the insurance costs. This part of the contract is the

subject of intensive negotiations during the tendering process. Continually changing insurers (or starting up a cooperative just for our members) would not result in any substantial costs savings; in actual fact, medication is one of the priciest features to consider in an insurance plan. Those little pills and granules in the legal pharmacopeia account for a sizeable 93.5% of premium costs! This is why having a PharmaQuébec would be really helpful (as described in the Québec solidaire platform), as that organization would, for example, control the price of medication, make group purchases, stabilize prices and use generic medications where possible.

Who prepares the call for tenders and renewals?

The contract is administered by a joint committee headed by an actuary and composed of eight employers' representatives and eight union representatives (including three CUPE representatives). The committee also hires an actuary (Carole Giroux of SAI, an organization that understands the needs of unions) to negotiate with the company. The actuary makes the calculations with the insurer and ensures that we don't get shortchanged with the next round of premiums.

Big business

Contract 6000 is big business. Being a conglomerate of groups from various public service sectors, it guarantees us superior negotiating clout (as embodied in the motto *L'union fait la force*) and helps us enjoy more stable premiums, a major advantage in the insurance industry.

We have learned that we have little control over the main factors behind premium increases (inflation and the price of medication). The solution to deal with these two aspects lies in governance, politics and legislation. Unfortunately, too many parties are clinging to unilateral neo-liberal beliefs that favour pharmaceutical multinationals over workers, everyday people and the common good.

WHAT IS THE COALITION SOLIDARITÉ SANTÉ?

by Karine Cabana, vice president for Montréal/Outaouais/Laurentides/Lanaudière/Montérégie

The CPAS is a member of the Coalition Solidarité Santé. Several of our members have asked us about the organization's purpose and scope of action, and the issues it will be tackling in the future. Here's a quote from the Coalition's website:

“[translation] *In May 1991, 13 unions and community organizations founded the Coalition pour le maintien de la gratuité dans la santé in order to address the Québec government's main health-care reform proposals.*

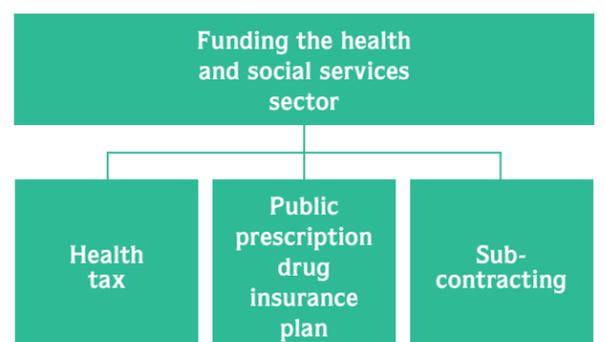
At that time, members decried not only the key proposals of health contributions and user fees, but, more importantly, the proposed major change to the health and social services social contract.

In 1993, the Coalition pour le maintien de la gratuité dans la santé became the Coalition Solidarité Santé. The organization today is still the only forum for inter-union and community information and dialogue on the future of the health and social services sector.

The Coalition Solidarité Santé is an alliance of Quebec unions, community organizations, religious groups and citizens committees, including women's' and seniors' organizations as well as groups for the disabled and caregivers. Since its inception in 1991, the Coalition has worked on many fronts to

defend Quebecers' right to health care, regardless of their status or income level. The defense of the bedrock principles on which the health care system was founded, i.e., public administration, free access, accessibility and universality, is behind all of the Coalition's initiatives. In 1991, the Coalition was made up of 46 national and regional organizations.”

The Coalition makes its decisions during general assemblies, which are held four or five times a year. During the December 2011 general assembly, members approved the flowchart below. The Coalition will be focusing its initiatives on the three issues in the diagram because it believes that such mobilization is key to improving the funding of the health and social services sector.





BENEFICIARY ATTENDANTS

WHAT ON EARTH IS A BENEFICIARY ATTENDANT?

A FEW ARE PICTURED HERE. YOU MAY BE ONE OF THEM TOO.

I WORK IN LONG-TERM RESIDENTIAL CENTRES, HOSPITALS, REHABILITATION CENTERS, AND IN INTERMEDIARY AND FAMILY-TYPE RESOURCES.

I TAKE CARE OF RESIDENTS, CLIENTS, USERS, PATIENTS, CHILDREN, ADULTS AND THE ELDERLY.

I'M YOUR FRONT LINE'S WORKER!

