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# The Review

## IN THIS ISSUE

- 2 / A Word from the Secretary General**
- 2 / Democracy? What Democracy?**
- 3 / How will Bill 10 Affect Services?**
- 4 / What's the point of demonstrating?**

### 2015 Calendar

**Conseil général**  
Palais des congrès in Québec  
May 4, 2015

**General Council**  
Laval Sheraton Hotel  
June 3 and 4, 2015

**Conseil général**  
Le Concorde Hotel in Québec  
October 7 and 8, 2015

**General Council**  
Laval Sheraton Hotel  
December 2 and 3, 2015



## BILL 10 AND ITS DEVASTATING EFFECT ON OUR CARE FACILITATORS

by Rémi Arsenault

IT'S A DONE DEAL. MINISTER BARRETTE HAS FINALLY PASSED BILL 10. SOON WE'LL ALL HAVE TO WORK IN MEGASTRUCTURES DUBBED CISSSS OR CIUSSSS. AND THIS BILL WILL MOST CERTAINLY AFFECT OUR WORK CONDITIONS.

### Decisions centralized

First of all, the aim of the reorganization is to centralize decisions to achieve cost savings. Since this was already the purpose of creating the CSSSs in 2005, these changes will make the system even more hospital-centric than ever. In other words, decisions will likely involve hospitals more than other types of institutions such as CHSLDs, CLSCs, etc. That means that budgets earmarked for specific services might be reassigned to hospitals and, as a result, some smaller institutions might have to close their doors, leading to the elimination of positions. What's more, work settings will continue to be reorganized. Given the sheer size of the territories, the managers who will be planning the new projects will be disconnected from the reality in the field. As a result, as was the case with the CSSSs, decisions will be made without even consulting those on the front lines. In addition, employers will be forced to centralize staffing, callback lists and payroll. These services will also cover a huge territory and thousands of employees, and those who supervise them will have trouble carrying out their assignments properly. There's a huge period of adaptation in store for workers and I see a lot of grievances on the horizon !

### Privatization

Since the network was reorganized in 2005, privatization has steadily expanded. This upcoming reorganization will do nothing to stop this trend. The main services covered by the private sector are maintenance, food service and cafeterias, but other services might follow. And of course, privatization leads to job cuts and erosion of work conditions.

### New local agreements

Whenever institutions are merged, new certification and renegotiation of local agreements follow. Local unions will have to renegotiate their agreements after the collective agreements are signed. This promises to be an arduous task because the new local unions will have to merge all the existing local agreements of the unions involved and



select the best features from each in order to retain the benefits that have been earned. This will naturally be a lengthy process in which local agreements stand to lose benefits.

In conclusion, Bill 10 will have implications for our work conditions, including job cuts, privatization, and decision making without prior consultation. This will be the sad reality at Minister Barrette's famous CISSSs and CIUSSSs, not to mention that we'll once again have to rebuild our union organizations !

## A word from the President

by Pierre Soucy



Bill 10 is a disgraceful piece of legislation. Why introduce a bill that nobody wanted in the first place?

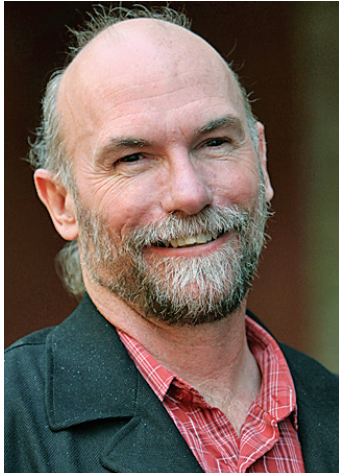
It quickly went from a draft bill to a bill passed under a gag order that's now being rammed down the throats of workers in the health and social services network. I keep re-reading it and

am astonished to see that almost every page contains variations on the same theme:

Only the Minister may act; the Minister may modify them or establish them; the Minister is responsible for allocating budgets to institutions; the Minister must ensure the coordination of the activities; the Minister may develop information [...] tools; the Minister may [...] appoint a single public health director to be responsible for two or more regions determined by the Minister; the vacancy is filled by the Minister; the Minister may [...] designate the same person more than once, and so forth.

TO BE CONTINUED ON PAGE 3





# A Word from the Secretary General

by Michel Jolin

## Why?

That's the question I've been asking since Bill 10 was first tabled. WHY? Why reorganize the health and social services network and create megastructures?

To close the agencies? Why close them? To save money? You really have to be out of touch to think that the agencies' staff don't make a valuable contribution. No matter where they work, whether at an agency, the new CIUSSS or CISSS or the Ministère, these employees are crucial to the day-to-day running of the network.

Or is the reorganization intended to reduce the number of managers? Cut out the bosses? Who believes that? It's true, there will be fewer CEOs, but how many unionizable non-members (SNS) will

step in to perform managerial roles? Oh, WAIT. They don't exist anymore. Jean Charest and his Liberals got rid of them in 2003!

To save money? Even Minister Barrette doesn't believe that's going to happen. He's aiming to slash 0.5% from the health and social services budget. BIG DEAL!

So why then? To privatize the network? That seems a plausible answer. And why privatize? To please his cronies, that's why.

# DEMOCRACY? WHAT DEMOCRACY?

by Ronald Boisrond

OUR CURRENT GOVERNMENT THINKS IT HAS THE RIGHT TO REORGANIZE THE ENTIRE HEALTH AND SOCIAL SERVICES NETWORK JUST BECAUSE IT WAS VOTED IN AFTER THE LAST ELECTION.

On closer examination, however, its mandate isn't as clear as it appears. During the last elections, the Liberal Party garnered 42% of the vote and won 70 seats, becoming a majority government as defined under the Québec majority vote system.

However, since 58% of voters did not vote for the current government, the Liberals didn't win the popular vote. And since the last election had a 71 % voter turnout, that means that 29% of voters didn't even cast a ballot.

Far be it from me to call our democracy into question, but in light of the numbers, you have to admit that our system isn't perfect. And here's another point: there was a 2.2% gap between the PQ and the CAQ, but under the current electoral system, that gap translated into a difference of eight seats in favour of the PQ. What's

more, some political parties received the majority vote in some areas but didn't get elected.

Why is it that some political parties receive support from part of the population but are not allowed representation on the Conseil des ministres?

And why can't smaller parties like the Green Party or Option Nationale have representatives in the National Assembly when they receive a critical number of votes?

## Majority election vs. proportional representation

A proportional voting system would allow a fair representation of resources and smaller political parties, thereby ensuring a diversity of viewpoints and ideologies within a government. In turn, this diversity would allow more flexibility and better reflect each and every voter's aspirations.

If Québec had adopted a proportional system for the last election, the Liberal Party would have won 18 fewer seats and the other parties would have gained a few more. Option Nationale and the Green Party would have had an MNA if they had won a certain percentage of the votes (more than 2%, for example).

None of the current programs of Quebec's major political parties suggest switching to the proportional system. Only Québec Solidaire has proposed a combined system in which 60% of members would be elected according to the current system, while the rest would be elected proportionally by region.

Only a few countries around the globe, Israel and Scotland being two examples, have adopted proportional representation in one form or another. But wherever this method has been introduced, voter turnout has risen from 5% to 6%.

Supporters of the current system say it helps elect stronger and more stable governments. And that's quite true. But a strong government is not above making mistakes or digging in its heels on the wrong occasion. That's what's happening in Québec, with Minister Barrette being given free rein to tamper with our health and social services network.



Demonstration on Highway 15, March 4, 2015



# How will Bill 10 Affect Services ?

by Sylvain Lemieux

Minister Gaétan Barrette imposed Bill 10 on Saturday February 7. The controversial law was passed under a gag order despite opposition from general practitioners, specialists, pharmacists, community organizations, unions, ordinary citizens, and other segments of society.

According to Minister Barrette, the bill is the first step in reorganizing the network. Apparently, both the bill and the changes it will bring are intended to improve delivery of services to the public. I find that puzzling. If Bill 10 is truly going to improve user services, why won't the Minister produce some proof? The only positive outcome disclosed so far is a projected reduction in the number of hospital cards, which will be issued by centralized CISSSs. Is that it? Won't the bill have any other impact? Let's make some predictions.

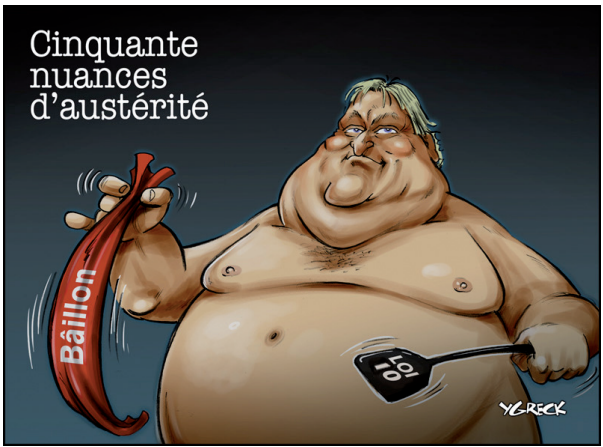
## Cuts to health and social services agencies

The minister has promised \$220 million in savings, or a paltry 0.5% of the current healthcare budget, by slashing staff at the health and social services agencies. He's assuming that these employees are expendable, an assumption that is not only completely false, but also downright insulting. The work they do now will inevitably have to be done by someone else. Who will monitor epidemics? Who will promote illness prevention with the public or monitor public services? Who will allocate and manage budgets? Who will assess the need for investment in infrastructures?

Let's think back to the last reorganization of the network, orchestrated by Premier Couillard, then health minister. After the creation of the CSSSs in 2005, we were left with fewer services, fewer points of service, more managers and more expenses. In addition, the private sector was allowed to provide some healthcare services (knees, hips and cataracts).

## Privatization of healthcare services

After being consolidated, institutions will be merged into a CISSS or a CIUSSS. We already know that the Minister will be centralizing the merged institutions' payroll and IT services. Will this open the door to further privatization? We know that privatization already exists within the network. Once the mergers are complete, some decision-makers might be strongly inclined to privatize the merged services (food service, laundry and maintenance, etc.) because they are large and



expensive. But it has been shown time and time again that privatization costs more, which makes it more likely that Bill 10 could lead to an increase in the cost of these services.

## Fewer services for users

Based on an analysis of the creation of the CSSSs by Coalition solidarité-santé, we can make a number of projections. The merger of institutions has reduced access to care and the number of points of service. Would it be surprising if the Minister were to seek the centralization of some types of health care after the mergers? For example, would he want to keep five obstetrics centres within the territory of one CISSS or would he be tempted to centralize them at one or two locations?

We also see another potential problem on the horizon: the difficulty of making appointments. We all know that wait lists are long and making an appointment can be a harrowing experience. Will merging institutions and services make the process any easier?

I doubt it!

## Conclusion

Once the reform is underway, we'll have to be patient. The government will eventually find it easy to claim that the health and social services network is inefficient and too costly. That may prove true, and the Minister will be the only one to blame.

If we want to keep our health care system public, we have to continue to condemn the repercussions of Bill 10. If we don't, one day the network may no longer be the public, free, accessible and universal system that we, as a society, decided to establish.

## A WORD FROM THE PRESIDENT / CONTINUED FROM PAGE 1

Bill 10 revolves around the Minister and provides no additional services for taxpayers. As for the savings promised, the changes aren't likely to produce any, as happened with the last merger. This is the worst piece of legislation I have ever come across in my 36 years in the health and social services network!

In short, it's a sickening law that only business organizations can agree on because it's another step along the road to privatization.

CARE FACILITATORS: BARRETTE  
MUST BE STOPPED!



# The Review

Newsletter published by the  
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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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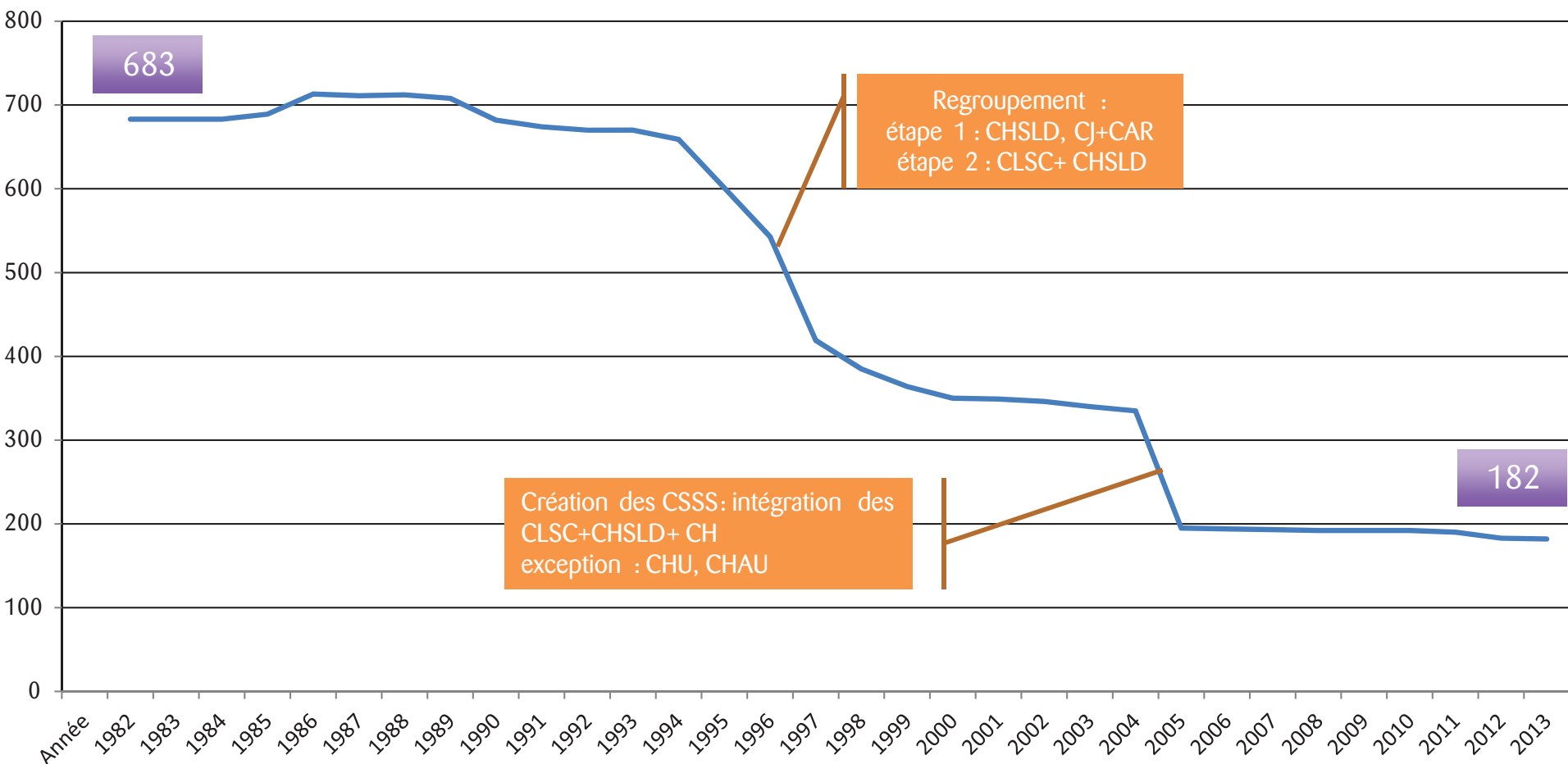
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# Reduction in the number of public institutions since 1982





# What's the point of demonstrating ?

by Vincent Leclair

Union members often ask if demonstrations serve any purpose. This crucial question deserves a better answer than just a shrug of the shoulders.

Some supporters nearly always show up to demonstrate, whatever the cause. On the opposite end of the spectrum, others always say no regardless of the event. In fact, they never participate in anything and sometimes even have the nerve to criticize us. As Pierre Falardeau used to say, "Those who go nowhere always think the rest of us go too far."

But some moderates are still out there despite the cynicism we see in almost every faction of society. In the end, it seems that most people want answers and are ready to get on board if they see a point to it. After

all, what's the sense in taking part in a demonstration if you're convinced that it won't change anything ? It's true that the effects of demonstrations aren't immediately evident, otherwise the decision to participate would be too simple. It takes more than a small demonstration to get the government to change its mind. People take to the streets when other forms of communication and lobbying just don't work.

**Well, we've been taking to the streets !**

Here's a list of demonstrations by the CPAS against Bill 10.

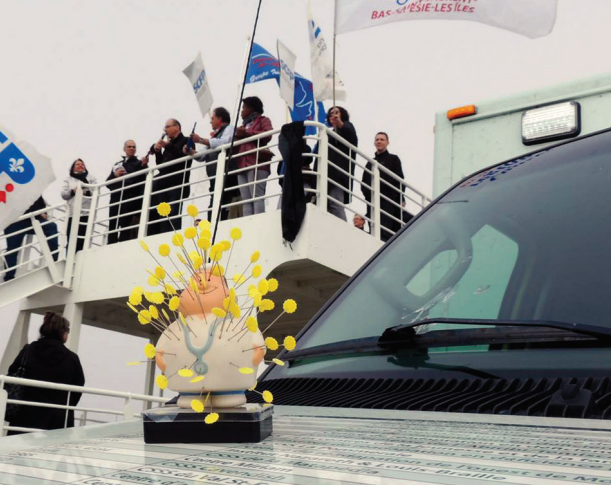
Photos and events involving the CPAS and Bill 10.



Demonstration at CSSS Jardins-Roussillon, December 15, 2014



Demonstration in front of Hôtel Dieu de Québec, December 17, 2014



Demonstration in Rimouski, October 2, 2014



Huge demonstration, November 29, 2014



Demonstration in front of Chinese Hospital, December 10, 2014



Demonstration at Institut Philippe-Pinel, October 23, 2014



Demonstration at CSSS-IUGS, February 4, 2015