



COSCO News

Council of Senior Citizens' Organizations of B.C.

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December 2009

Here's your chance to speak out on the HST – complete the enclosed survey today

**By Sylvia MacLeay,
President,
COSCO**

The Harmonized Sales Tax (HST) will make the Canadian taxation system more unfair to consumers. It will reduce taxes for business and shift this huge cost to the already overburdened consumer. We want to hear how it will affect you. Please fill out the survey in the middle of this edition of COSCO News and mail it in today.

Oliver Wendell Holmes once stated, "I don't mind paying taxes. They buy me civilization." Seniors would agree that society needs taxes to provide the necessities of life. Quality health care, affordable housing, transportation, safe infrastructure like roads and bridges, safe water, sewage and garbage service are just a few examples of our needs.

Unfortunately, the past 28 years have seen the development on an unfair taxation that J.K. Galbraith called "a war between the rich against the poor." He saw in the Regan/Thatcher era that taxes on unearned capital gains and corporations kept declining which cost the public endless billions of dollars. Meanwhile write offs allowed big business to pay zero taxes or a lower percent of taxes than the poor paid. This war is waged constantly at all

levels of the tax system with even more tax evasion, offshore banking, tax loopholes, transfer pricing, and corporate shell companies that combine to get even lower up front tax rates for the wealthy. Mel Hurtig wrote in "Pay the Rent or Feed the Kids" that in the 1990s the number of families below the poverty line multiplied five times faster than the family population. "The bottom fifth of the income earners have seen their incomes drop by 31% since 1984, with even average personal incomes declining by 6% - the biggest drop since the Great Depression. And all while the wealthy got a lot wealthier," he said.

The tax system allows the distribution of wealth from the public and the poor to the wealthy. Meanwhile social programs like benefits to the unemployed, low income seniors, students, and the disabled are drastically cut. RRSPs are too expensive for low income people and not now

considered to be a good investment for those who can afford them. Attempts to reform taxes will run into international trade edicts set up to protect the status quo set up by the wealthy.

The HST will raise the cost of any presently taxed items to 12% and tax many presently untaxed goods and services at 12%. This will hurt seniors and most consumers since everyone needs staple items like toothpaste and toilet paper, while the rich will scarcely notice the tax. B.C. must not implement this tax. A Commission must be set up to study and change the taxation system to make it fair. It won't be easy but the future cannot be controlled by the interests of a small but hugely wealthy minority.

COSCO is working with other seniors organizations to reject the HST. The help of any like minded groups or individuals would be appreciated.

If undeliverable, please return to 14372 Ridge Cres., Surrey, V3X 1B6

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Soren Bech

Letter to the Editor

Race to the bottom

As a pensioner I watch the news about this labour dispute with particular interest.

However, we all have a stake: The use the HandyDART service may be in the future of any one of us – we are one accident or a few years of degenerating body parts away.

Selfishly, when need arises, I want it to be there.

The workers should not have to subsidize the service to the disabled and seniors.

From all I have seen and heard, the American contractor seems to be hell-bent on dispatching the workers (our children, grandchildren, neighbours and friends!) on the US-type race to the bottom that promises lower wages, few benefits and no pensions to the employees – going backwards...

Shame on the provincial government and TransLink for allowing this to happen! It wouldn't surprise me if they didn't orchestrate this situation.

If nothing else, they created the problem by contracting to this foreign company. (There are similarities between this and hospital services being contracted out to American companies)

Still ambulatory in Vancouver,

G. Langolf

COSCO News

Council of Senior Citizens' Organizations of B.C.

COSCO News welcomes your letters, contributions and suggestions. Please send your letters and comments to soren.bech@shaw.ca, or to COSCO News editor, 23088 - 16 Ave., Langley, B.C. V2Z 1K7.

For information about individual membership or group affiliation, please see the form on page 12 of this newsletter.

You can visit COSCO on-line at **www.coscobc.ca**.

COSCO calls on TransLink to step in and help restore HandyDart services

The intransigence of an American for-profit contractor has unnecessarily lengthened a strike by HandyDART employees, and is disrupting the lives of seniors and people with disabilities, the Council of Senior Citizens' Organizations of B.C. (COSCO) said today.

“While MVT’s negotiators have gone back to California, thousands of men and women who depend on HandyDart to get to medical appointments and pick up groceries are virtually trapped in their homes,” said Lorraine Logan, Chair of COSCO’s Transportation Committee.

A strike by HandyDART workers, members of Amalgamated Transit Union Local 1724, began Oct. 26 following ten months of unsuccessful negotiations. The American contractor hired by TransLink – MVT Bus – says the drivers, office staff and maintenance workers must agree to give up their pension plan before it will return to the table.

“It’s time for TransLink to get involved and help restore this service,” said Logan. “TransLink is responsible for HandyDART. It can’t duck its responsibility to seniors and people with disabilities by signing a contract with an American corporation.”

“It is evident in the work they do, and the personal assistance they provide to their clients, that HandyDART drivers care deeply

about the people they serve. They have also made a very unusual offer by proposing binding arbitration to settle the contract. This would immediately get the service back in operation,” she said.

“Seniors, people with disabilities,

and HandyDart workers are saying it’s time to get the buses back on the road. The for-profit contractor says no. And while thousands of individuals struggle to get around and keep their lives together, TransLink is hiding behind a wall of silence. It’s time for that silence to end.”



HandyDART users have been left with nowhere to turn – and walking isn’t an option. It’s time for TransLink to step in and help end the dispute.

New residential care rates will mean higher costs for thousands of families

By Alice Edge, Chair
COSCO Health Committee

On October 8, 2009 the Health Minister, Kevin Falcon announced a new rate structure for residential care services. The government's "take" on these new rates is that they will "enhance patient care".

Since nothing else is going to change in the services provided, what is there to enhance? Could it be that the short fall imposed on facilities by the implementation of the HST must now be covered by seniors on fixed incomes living in residential care facilities? Or is it the budgetary short-fall imposed by the provincial government on health authorities?

Minister Falcon's spin is that it will be "fairer". The question is fairer to whom?

According to the Minister's news release everyone will pay 80% of their after tax income with a caveat that the resident must be left with a minimum of \$275 per month for personal incidentals like cablevision, telephone, personal equipment, special transportation etc. all of which will be subject to THE HST at an

additional 7%. Suddenly \$275 does not seem like much.

Thank heavens the rates have a cap at \$2,932 a month (well at least until there is another pronouncement from the government.)

To muddy the waters even more the Minister has provided a provincial comparison chart, in an attempt to make us feel better about the

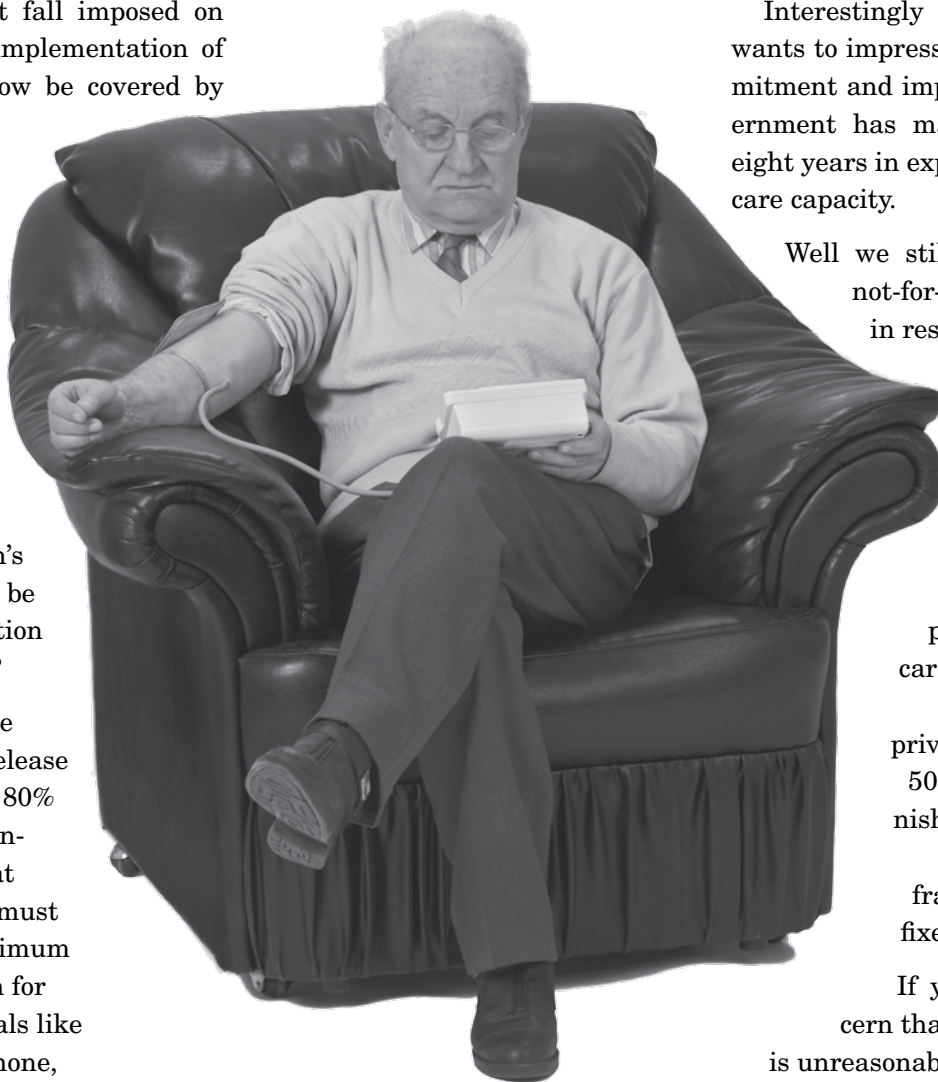
changes. The Minister goes on to explain that the fees will be phased in over two years, commencing January 2010, to reduce the impact on existing clients and I would add the families of those residents.

It seems from phone calls and e-mails COSCO has received that the fees may be implemented immediately. We need family members and residents in care to let us know what is happening and when.

Interestingly the announcement wants to impress you with the commitment and improvement the government has made over the past eight years in expanding residential care capacity.

Well we still have the 3000+ not-for-profit bed shortage in residential care under this government. They did build more beds but they were assisted living beds, which do not provide the complex care that is needed. To compare the cost of private care at \$4000 – 5000 per month diminishes the needs of the frail and medically fragile individuals on fixed pension incomes.

If you share our concern that this rate increase is unreasonable then you need to contact the Health Minister, the Health Authority where the resident lives, and your MLA.



Guaranteed to send up the blood pressure, rates are going way up.

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"How do I go about finding a place for a senior who can no longer manage on her/his own?"

By Gail Harmer, Chair,
COSCO's Housing Committee

This is a question often put to me through the COSCO website. Here is a condensed overview of the options and procedures.

The first thing to determine is whether the senior might remain at home with home support.

NB. Limited home support is available to low income seniors through their local health authority or in the case where money is not a barrier, private companies abound. If 'home support' won't be adequate to keep the senior safe then referral to residential options may be necessary. If the senior's resources are limited, then the entry process is only through the local Health Authority.

Options available:

24 hour nursing care – The rates for professional nursing care are per diem based on income. As of Jan. 2010 those rates will be \$29.40 to \$96.40 per day, depending on senior's income level. The system is supposed to leave the low income senior with at least \$275 a month for personal expenses such as telephone, medical equipment, supplements, clothing, etc. No senior is to be turned away due to insufficient income.

Supportive living – very few public units available. (Low income) housing with a combination of services like housekeeping, emergency response, meals. Cost is 50% of after tax income. Intake is through BC Housing and the local Health

Authority. Private supportive living such as Abbeyfield with 8-10 seniors living together with separate bedrooms may be eligible for SAFER for the rent portion of their monthly cost.

Assisted Living – rates vary for private patients who require no referral from the Health Authority from \$1400-\$6000 per month. Low income seniors pay 70% of their after tax income and will only be eligible if the Health Authority deems they are unsafe at home because home support is insufficient to meet their needs for meals, bathing, dressing and mobility. Private paying seniors will find that province-wide the present vacancy rate is very high so that they have considerable choice of location. (Almost all of the federal funds for seniors' housing in BC last January went to build assisted living facilities, most of which are set up for private paying seniors!)

Residential care – The local Health Authorities all have a special section called either 'Continuing Care' or 'Home Health' or 'Long Term Care'. You'll be referred to the office that serves the senior's current residence.

The service will take information about the senior and ask preliminary questions as to why you think the senior is no longer able to cope. The next call will be from an 'intake nurse' who will ask further questions and, if it is still deemed necessary, that nurse will assign a 'case manager' who will conduct a home visit and an assessment to determine the physical, mental and financial need and make recom-



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mendations. Occasionally, the case manager may recommend that the senior remain at home with a trial of home support, ie. help with dressing, bathing and mobility.

It should be emphasized that when residential care such as 'assisted living', 'supportive living' or '24 hour residential care' is recommended, the senior is prioritized on the local wait list matching the level of care the Health Authority recommends.

The senior is expected to accept the first opening that becomes available and is given a very short number of hours to move into the facility. Failure to do so may well place the senior at the bottom of the list. Transfer from facility to facility is possible once the senior is placed and a more preferred facility becomes available.

COSCO HEALTH REPORT

Residents' Bill of Rights fails to address concerns about minimum staffing levels and funding

**By Alice Edge, Chair
COSCO Health Committee**

On October 22, 2009, the Health Statutes (Residents' Bill of Rights) Amendment Act, 2009 was introduced into the Legislature. It is virtually a carbon copy of the Ontario version of Residents' Bill of Rights.

The Act applies to all facilities where adults are cared for: acute, residential, public or private.

In the Act the following items are addressed:

- Commitment to care
- Rights to health, safety and dignity
- Rights to participation and freedom of expression
- Rights to transparency and accountability
- Scope of rights
- Complaints resolution

The Residents' Bill, to be posted visibly in all residential care facilities, also supports social, cultural, religious, spiritual and other rights of residents.

The rights state that residents will be free from abuse and neglect, while they also promote respect of the personal privacy of residents, including their personal records, bedroom, belongings and storage spaces.

The Bill of Rights will be added as a schedule to the Community Care and Assisted Living Act.

It will apply to adults who live in residential care facilities licensed under that act. This includes long-term care, mental health and substance use, community living, hospice and acquired brain injury facilities.

The Residents' Bill of Rights will also apply to private and extended care hospitals, which are regulated under the Hospital Act. The schedule will not apply to Assisted Living facilities.

(The above is based on a media release from the Ministry of Healthy Living and Sports.)

Upon closer examination of the Bill of Rights, one can find some glaring omissions, which would more concretely address concerns about care.

For instance, the Bill of Rights does not include any commitments to minimum staffing, patient/care-giver ratios and funding levels to ensure that residents can, in fact, get the individualized care promised in the act.

The BC Care Providers have also added their voice to the critique of the Bill.

Their response stated, "While we support the establishment of a Bill of Rights for residents, we are again concerned that the government has moved forward without any substantial consultation with care providers, seniors and other stakeholders," said Ed Helfrich, BCCPA CEO.

"This approach does not reflect

the complex nature of the senior's care partnership and does not take into account the valuable perspectives of care providers and family councils in communities across BC."

BCCPA has contacted the Minister of Healthy Living requesting a meeting to confirm her commitment to consultation and explore ways to make the Bill more meaningful in advance of the Ombudsperson's upcoming report on the state of senior's care in BC.

Among other things, the BCCPA has asked the Ministry to consider a number of improvements to the Bill including:

- full disclosure of funding rates for all residential care facilities in BC to promote transparency and help families/residents understand funding levels
- guarantee of adequate funding levels to ensure quality care and increased staffing rates
- responsibilities of residents to treat their fellow residents, staff, visitors and volunteers with dignity and respect
- commitment to minimize waiting times for senior's care

This would be an excellent topic to bring to a Family Council meeting to obtain feedback from the administration of the facility and to educate all family members who have someone in care.



We're gathering the facts:

What will the HST cost your family?

What do you think of it?

Should we be trying to stop it?

It's easy to participate.

1. Fill in this questionnaire.
2. Remove it from the middle of COSCO News.
3. Fold it in half and mail it back

Please do it today!

..... Fold here

Put a
stamp
here!

Council of Senior Citizens' Organizations of B.C.
c/o Sheila Gair, Secretary
14372 Ridge Crescent
Surrey, B.C.
V3Z 1B6

HST

Introduction

The Council of Senior Citizens' Organizations of BC (COSCO), the BC Retired Teachers' Association, Seniors on Guard for Medicare and other kindred groups are cooperating in distributing this survey to help our members realize the effect that BC's proposed Harmonized Sales Tax (HST) will have on their purses and wallets.

We will work together to contact the premier, his ministers, and the MLAs of all parties as well as federal MPs, to achieve the cancellation of the proposed HST.

Please fill in the survey to see how the HST may affect you. Use your combined household expenses if you do not live alone. The list is not meant to be complete, and some items may yet be exempted, but this exercise should give us all an idea of the HST's likely impact. **Then mail it, anonymously, to COSCO by December 31st.** We'll use this information to estimate the overall impact that the implementation of the HST could have on our members.

It will be helpful to us if we can calculate our members' average income, to see how much of that income will be nibbled away by the HST. Please complete the calculation below, anonymously of course, using income tax data from last year, again combining the income of all your household members if you do not live alone.

Taxable income _____

Income tax paid _____

After tax income _____

If you wish to contact your MLA and/or MP directly, feel free to make copies of this survey to send to them. **To mail it to COSCO, fold this insert with COSCO's address visible, and add a stamp.**

Thank you. Together we hope to make a difference.

HST

What will it cost you and your family?

What will the Harmonized Sales Tax do to your budget?

Fill out this table to get an idea. Just skip any areas that don't apply to you.

Then send it to COSCO so we can add it all up and estimate the total impact the HST will have on seniors in B.C.

Item	Annual cost	Calculate 7%
Cable TV (and Internet, if part of package)	_____	_____
Home phone, cell phone (and Internet, if part of package)	_____	_____
Prepared, processed, fast food and beverages, coffee shop and restaurant meals	_____	_____
Dietary supplements such as vitamins, minerals, plant extracts, etc.	_____	_____
Non-prescription medications, such as painkillers, cold remedies, etc.	_____	_____
Personal care services, including haircuts, styling, perms, etc.	_____	_____
Pet food and veterinary services	_____	_____
Newspapers and magazines	_____	_____
Physiotherapy, massage and podiatry services	_____	_____
Strata fees	_____	_____
Professional services such as accounting, legal, tax preparation, etc.	_____	_____
Health or fitness club fees	_____	_____
Home and property maintenance, and safety and security provisions	_____	_____
Household appliance repairs	_____	_____
House cleaning services	_____	_____
Vehicle maintenance and repairs	_____	_____
Transit, taxi and Canadian air travel	_____	_____
Parking fees	_____	_____
RV parks and campgrounds	_____	_____
Entertainment, sports, hobbies, tickets, fees	_____	_____
Other regular expenses - presently PST free	_____	_____
Total both columns. See how much the HST will likely add to your costs each year.	_____	_____

HST

**Tell us what
you really
think!**

	Strongly Agree	Agree	Disagree	Strongly Disagree
I like the HST. I think it's one of the best things the B.C. Liberals have ever done	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Under the B.C. Liberals, taxes have been skewed more and more to benefit the few. The HST is just one more example of that	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I don't mind paying my fair share of taxes, but I object to paying more sales taxes just so big corporations can save \$1.9 billion a year.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The B.C. Liberals lied about the HST, just as they lied about the size of this year's deficit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B.C. needs a fair, progressive tax system, based on ability to pay, to support services like public health care, education and services to isolated seniors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Whatever else you say about it, the HST is good for big corporations and that means it's good for B.C.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: *(add additional sheet if necessary)*

National Pensioners' and Seniors Citizens' Federation meet in convention in Toronto

By Gudrun Langolf

October seems long ago... Oct. 21 – 24th a group of COSCO delegates attended the 65th Convention of the National Pensioners' and Senior Citizens' Federation (NPSCF) in Toronto. This truly national organization works to advance seniors' interests in Ottawa. Most of the member organizations are groups like ours, retired teachers, old age pensioners, former government workers, autoworkers, former union members, clubs and provincial groups like the Council of Senior Citizens' Organizations of BC (www.coscobc.ca).

The new executive for the NPSCF is: Art Kube (BC) – President, John Gatens (Ont) – Vice President, Sheila Righi (Sask) – 2nd Vice, Mary Fleck (Nova Scotia) – 3rd Vice, Sandra Carrigato (Ont) – Treasurer, Fern Haight (Sask) – Secretary, Members-at-Large: Winnie Fraser Mckay (PEI) and Jack Morrison (Manitoba)

The Deputy Mayor of Toronto welcomed us to his city. Other speakers were politicians of all persuasions – you know seniors are always popular, particularly around election times. Ken Lewenza, the president of the Canadian Autoworkers spoke passionately about his members' struggles in the auto industry and how he was so very proud to lead a group that didn't sell out their pensioners at bargaining time. Jeff Connell from the Canadian Generic

Pharmaceutical Association spoke at some length about the struggle around patent protection. He recommended a book written by a political rival... It exposes the scandal around patented medication and patient safety: Death by prescription by Terrance Young.

The delegates received some practical advice from an independent Securities Consultant, Diane Urquhart – much of it accessible on the internet www.ismymoneysafe.org. Andrea Horwath, the newly elected leader of the Ontario NDP spoke about the unfair taxation, the so-called 'harmonized' sales tax also known as HST.

Between the speakers, the delegates debated, amended and passed approx. 65 motions ranging from the mundane, to pension reform, to climate change.

It wasn't all work though – George Hewison sang for us one evening.

On the Saturday we had a little time off 'for good behaviour'. Many delegates went to see the world-famous and spectacular Niagara Falls.



B.C.'s legendary organizer Art Kube was re-elected as NPSCF President.



Some of the B.C. delegates who attended the NPSCF Convention.

IN MEMORIAM

Jack Nichol (1926 – 2009)

The Canadian trade union movement lost a giant from its ranks with the passing of Brother Jack Nichol. Born April 6, 1926 in Hanover Ontario, he passed away in Vancouver November 6, 2009.

Jack is survived by his beloved wife Rose, and seven children: Jim, Gail, Bob, Julie, Richard, John, and Cathy. A dedicated family man, Jack was especially fond of his grandchildren.

Jack was a veteran of the Canadian Navy, serving for two years during World War II.

After the war he found work in the West Coast fishing industry as a cold storage worker for the Canadian Fishing Company.

Over the years Jack became increasingly interested in workplace issues and soon came to represent union members as a shop steward, bargaining committee representative and local union delegate to United Fisherman and Allied Workers Union conventions.

In 1963, he went to work for the UFAWU as a full-time organizer, and a year later, was elected as an officer, taking on the position of business agent.

Jack's initial focus was on shore-workers' issues, and he distinguished himself as a skilled negotiator on behalf of fresh fish, cold storage and cannery workers, tendermen, and whalers.

In 1967, Jack served time in prison, along with UFAWU secre-



Jack Nichol, who passed away in November, was a leader in both the labour movement and in the B.C. seniors' movement.

tary-treasurer Homer Stevens and president Steve Stavenes, for courageously defying a court injunction ordering striking fishermen at the Prince Rupert Fishermen's Co-op back to work.

In 1973, among his many career accomplishments, he negotiated a landmark collective agreement that established pay equity for women and men in UFAWU-certified fish processing plants.

In later years, Jack became deeply involved in the complex policies and issues facing the fish harvesting side of the industry.

In 1985 he was appointed as

an alternate commissioner representing Canada on the new Pacific Salmon Commission. Shortly afterwards he was appointed to the minister's advisory committee – the senior advisory panel on west coast fishing issues. Later, he co-chaired the Commercial Fishing Industry Council.

In 1994, he and Don Millerd co-chaired the Fish Processing Strategic Task Force, a special task force appointed by the provincial government to look into fish processing issues. Three years later, he was appointed to the board of the Crown corporation, Fisheries Renewal B.C.

A long-time supporter of the New Democratic Party, Jack also served on countless labour committees and bodies. In the mid 1980s he was elected to the executive council of the B.C. Federation of Labour and later became one of its vice-presidents.

Jack was also a strong supporter of environmental causes, well before the advent of today's environmental organizations.

More recently, he was an active leader of the B.C. Federation of Retired Union Members, a COSCO affiliate, serving four terms as President.

Jack will be sorely missed by his many relatives, friends, colleagues, and associates.

His legacy in British Columbia is profound and will be lasting. In lieu of flowers the family requests that donations be made to the B.C. Children's Hospital.

Security, fairness and adequacy key values in labour campaign to improve pensions

The Canadian labour movement has launched an aggressive campaign to win “retirement with dignity” for all Canadians.

“There is a crisis in our pension system,” said Carolyn Rice, secretary-treasurer of the New Westminster and District Labour Council, as she opened a public forum on pensions Nov. 5. As a result of the economic downturn, many have lost a large portion of their retirement savings and pensions are threatened, she said. “Many, including those with good paying jobs, are wondering when or if they can retire,” she said.

Joel Harden, Canadian Labour Congress pension specialist, says the pension debate has been dominated by banks and life insurance companies.

“We need to pressure finance ministers to meet the priorities of people, not the wishes of banks,” he said.

Harden noted that governments have spent \$13 trillion – ten times the annual output of the entire Canadian economy – to bail out financial institutions which continue to collect disproportionately high management fees on workers’ RRSPs.

For workers nearing retirement, it’s a grim time. “One third of workers have no retirement savings. Household debt is higher than it’s ever been,” said Harden. A majority of workers have no pension plan.

The labour movement’s pension proposals – based on the values of

security, adequacy and fairness – would be phased in over seven years.

While the plan addresses the retirement needs of everyone, the full benefit of the pension proposals would mainly be felt by workers who are under 45 today.

The plan would:

- Double CPP benefits, financed by gradually increasing worker and employer contributions from the current 4.95 percent of salary to 7.8 percent over seven years. This will benefit younger workers the most, and help ensure the next generation of workers can count on a dignified retirement.
- Immediately increase the Guaranteed Income Supplement by 15 percent to help lift seniors out of poverty. This would cost less than 3 percent of what is currently spent on tax subsidies for RRSPs and would immediately benefit the poorest seniors.
- Create a national pension insurance fund – similar to the insurance that protect deposits in banks or credit unions – to ensure workers’ defined benefit pensions are not at risk if their employer goes under or a speculative bubble bursts.



Sylvia MacLeay, President of COSCO, poses a question to panelists at public pension forum in New Westminster.

“No bank, bond holder or special interest should be able to take your pension away from you,” said Harden.

Jim Sinclair, President of the B.C. Federation of Labour, told the crowd that 70 percent of B.C. private sector workers have no pension plan, the worst level in the country.

He also noted that in today’s economy, workers change jobs frequently – they’re not with a company long enough to build up a pension, and frequently have no belief the company will be there in 30 years.

“Workers today need portability, and that’s good for the economy as a whole,” he said. The CLC is organizing lobbies of Members of Parliament to urge them to support these pension reforms, and Sinclair says the labour movement will make pensions an issue in the next election. “It’ll be a long fight, but it’s worth fighting,” he said.

Defending public health care is a challenge:



Health care privatization is occurring at an ever increasing pace in B.C., says Lew MacDonald, Coordinator of the B.C. Health Coalition. It's taking place in many forms, including contracting out important workers, private cleaning, turning over long-term care and seniors' services to the private sector, for-profit testing, and so-called market-based funding.

Private care is a growth industry, and you see the whole gamut here, said MacDonald in a recent speech to retired workers.

"B.C. has the distinction of being at the forefront of that industry nationally. The private sector in our province are organized, and there's a drive by them to open up our health care system to further expansion of these facilities.

"In the last five years, the number of private clinics has grown dramatically. It has more than doubled. There are now 73 clinics which provide service on a for-profit basis," he said.

Ironically, this booming industry is only financially viable if it is publicly subsidized.



private for-profit care is exploding in B.C.

“Many of these facilities charge user fees, facility fees or membership fees to allow people to queue jump.

“This is a clear violation of provincial legislation that’s designed to protect equal access to health care on the basis of need, and not on the ability to pay.

“This is happening. it’s illegal. The provincial government is essentially not doing anything about it,” he said.

MacDonald said even if there were no laws against them, for-profit clinics are just bad for British Columbia and bad for patients.

“They cost more. They cherry-pick. They increase wait times, and they reduce patient care and quality.

“The hourly rate they charge is far more than in public facilities. They choose the patients they can turn over quickly and leave the more complicated patients for public facilities.

“Despite the claims of private for-profit operators, there’s clear evidence wait times overall increased with the establishment of these

facilities in the health care system (because they drain resources from the public system).”

MacDonald said the number of private clinics are increasing in B.C. because the provincial government has a privatization agenda, and a health minister who has publicly supported health care privatization.

He said the B.C. Health Coalition is calling for an end to public funding of private clinics, complemented by an immediate expansion of not-for-profit surgical and diagnostic facilities.

The for-profit clinics are aggressively pursuing even more expansion.

“This January a group of them, led by Brian Day, launched a lawsuit to challenge the constitutional validity of our laws,” said MacDonald.

“They’re contending that our health care legislation, which prohibit the clinics from charging the kind of fees I’ve just outlined, is unconstitutional. They’re also contending that government has no statutory power to audit or inspect them.

“This case is a crossroads for Medicare. It will likely end up in the Supreme Court of Canada.

“What’s very troubling is that the lawsuit casts the B.C. government as the major defender of Medicare.

“It’s a perverse situation when room anyone who cares about public services knows we can’t trust (the government) to protect health care

in the courts,” he said.

Fortunately, in a decision announced Nov. 17, Madame Justice Smith of the B.C. Supreme Court granted the B.C. Health Coalition and their pro-Medicare partners the right to participate as intervenors in the case.

Justice Smith also announced that the Medical Services Commission will be allowed to move forward with the audit of Dr. Day’s Cambie Surgery Center and Specialist Referral Clinic.

Day, who was seeking to prevent his clinic from being audited, has admitted to unlawful billing practices but has not disclosed the nature and extent of that unlawful activity.

MacDonald said the case was a serious threat and a serious challenge.

“We’re hoping that we can continue to raise awareness of the real agenda – nothing to do with patient care, all about private profit, and opening up our public health system to private insurance companies.

“If they can legalize private insurance, then that’s where the money is.

“They’ll force all of us to start paying private insurance corporations for what was previously public insurance, and they’ll get access to that money through private insurance companies. That’s the real agenda,” said MacDonald.

“We definitely have our work cut out for us. It’s a challenge to defend public services such as health care.”

Lew MacDonald, Coordinator of the B.C. Health Coalition, says a case currently before the B.C. Supreme Court casts the provincial government as the major defender of Medicare – a role for which the government has demonstrated a marked lack of enthusiasm and commitment. BCHC and its pro-Medicare partners have won intervenor status in the case.

Managing your medications

By Norbert Boudreau

When was the last time you cleaned out your medicine cabinet? I'm sure you must have noticed that on medicine and vitamin bottles there's always an expiry date. Like me, you've probably ignored that many products have a limited shelf-life. After doing some research on the matter, I realize that I was wrong. A semi-annual check-up of your medicine cabinet is highly recommended.

Are there any expired or unused medication bottles in your cabinet? Research tells me that the potency of the product is much less after the expiry date and sometimes it can become toxic.

Medications or even vitamins do

not last forever. If expired, it's time to toss and restock.

What should you do with these useless or even potentially dangerous medications? Throw them down the toilet or in your garbage bin? Of course not! Bring them to your local drugstore for disposal in an environmentally friendly manner. Most drugstores will do that for you.

Where do you keep your medication? In the bathroom? On the kitchen counter? Either makes sense as they are very convenient. But are they the best and the safest place to store important medicine or vitamins? Humidity from hot baths and showers can diminish the potency of your medication as can a hot stove. Unless your medication needs refrigeration, find a place in your bed-

room to store them. Always keep them away from grand-children too.

Remember that prescribed medicine is for you and not for anybody else. You should also review your medications regularly with your family doctor or when you go to the hospital.

This is especially true when you start a new medication.

You may want as well to check vitamins, herbal remedies and over the counter medication such as pain killers, cold remedies and even Gravol. Some medication combined with others in your body may create unhealthy reactions.

Be a partner in your health with an up-to-date medicine cabinet.

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