Local 1245's Advisory Council held its regular meeting on August 3rd and 4th, 1974. The meeting was chaired by Howard Darington, newly elected President of Local 1245. One of the first orders of business was the swearing in of all members of the Advisory Council for a three year term.

Various council members gave reports on unit meeting attendance, safety and economic conditions in the different geographic areas they represent.

Bus. Mgr. L. L. Mitchell presented a plaque to Brad Hitchen, Local 1245's Annual Scholarship contest winner. (See page two for photos and a reprint of the winning essay.) Brad is the son of Mr. & Mrs. Don Hitchen. Don is a Troublemaker employed by PG & E in the Easy Bay Division and a long time member of Local 1245.

The Council then listened to guests from Local 2131, IBEW who have been on strike against Rucker Electronic Co. for over 19 weeks.

The Advisory Council concluded their business on Sunday afternoon and will make reports on the meeting at the various unit meetings next month.

Rucker's Strike

Labor strife is much in the news today as strikes mushroom. Our Nation's economy is in a most perplexing state, with workers' buying power declining and unacceptable unemployment levels co-existing with runaway inflation and historic corporate profits. Under these conditions workers are understandably disturbed.

There is one strike in Concord, California which is not making national headlines but is vital to the I.B.E.W. and one caused by the most fundamental issue workers can face - the employer denying the employee the right to have a union and bargain over the wages, hours and conditions of employment. Local 2131 of the I.B.E.W. has entered the 19th week of a "life and death" struggle with Ruckers whose management defies the law and has pledged that they will never allow a union on the property. Local 2131 successfully won the right to represent the Rucker Electronics Company employees in an election conducted by the National Labor Relations Board. They have been upheld at the local level in their charges of unfair labor practices filed with the N.L.R.B. and sustained at the Washington level after appeal by the Rucker Company.

Rucker still defies the law while the strikers are restrained in their picketing activities by court injunctions. Any strikers defying these court imposed rules are arrested and jailed. The spirit and the will to win is kept alive by the strikers despite this unequal and unfair battle.

Organized labor in Contra Costa County is aiding with contributions, as are the I.B.E.W. locals throughout the country. Still more money is needed. I have asked all Local 1245 staff members to enlist your support in assisting these people by soliciting voluntary contributions. If they lose it will encourage other employers to follow suit, so these workers are also protecting our right to bargain and I would hope that each of you would give a bit to add to that which has been contributed by the Local in these people's cause.

International Convention

The I.B.E.W. Convention to be held in September should prove to be an interesting one as delegates review proposals from all over the U. S. and Canada to make revision of our Constitution. There will no doubt be a number of changes made due to requirements of changing law and changing technologies which have created jurisdictional problems. Your delegates will be actively participating in these deliberations to protect the best interest of the members in our industry. This convention will be an opportunity to renew old acquaintances and make new contacts with other utilities as we will compare (Continued on page two)
The recent energy crisis in the United States has been subject to much public ridicule and private concern, however, one fundamental question has risen above all others: was the energy crisis fact or fantasy? Inevitably the answer to this crucial American dilemma lies within the boundaries of moderation. It is far too simplistic to blame the crisis on the apparent lack of foresight or even to assert that no crisis existed at all, however, it is indeed more rational to combine the virtues of fact and fantasy into the final solution to America's energy shortage. Essentially some system of unique moderation is necessary through merely representing the opposing views of truth and untruth. Therefore, we must analyze the various areas of the past energy crisis and understand their imperative significance to our present society.

The basic fantasies of the crisis concern two opposing areas of national importance; definition and exploitation. Initially the actual definition of the energy crisis has caused severe social repercussions. While the oil manufacturers claimed massive energy shortages the governmental definition of a shortage remained constant. Even with those mile-long gas lines oil reserves in the United States never fell below a ninety day storage allotment, perhaps there was a shortage, but certainly there was no crisis.

The dilemma of definition is therefore obvious, but what of exploitation? The large oil companies were certainly part of this exploitation; closing out smaller competitors, limiting supplies, and raising prices, but just as large corporations were at fault so were the American people. Through the acceptance of lengthy gasoline lines, and the over indulgence of their private automobiles the American public fell prey to the fantasy of an energy crisis through restrictive definition and harsh exploitation.

While fantasies were evident, however, what of the facts? Essentially many truisms of the crisis exist, but two bear special significance. The most important problem of the crisis concerns the obvious fact that we are losing energy we cannot substitute. Every day millions of tons of natural energy is lost to the world forever, such a realization, however, is only elementary.

The secondary fact of the crisis lies in the waste of misused priorities. As millions of American cars and corporations use unheard of proportions of energy, we, as a people have no method of rationing specific energy categories or even conserving energy production. Because of these misused priorities and the absolute waste of energy, that cannot be replenished, our society is suffering the effects of an energy crisis, real or unreal.

Moderation is the key to the problem. Part of the crisis was probably fact and part was certainly fact, however, a realization of this fact is indeed necessary. We as Americans must be willing to remember both the fact and fantasy of our past energy crisis in order to preserve the balance that we have today. Without this important realization a totally factual crisis may occur in the future.

notes on the bargaining climate and the changes in contracts made over the last four years.

Training Conference

In order to conduct its business, Local 1245 has some 86 units which meet regularly each month. These separate gatherings when completed constitute the Local Union meeting for that month. These individual meetings scattered over the vast geographic area of our jurisdiction are most important to the proper functioning of our Local. To improve the conduct and the reporting of these meetings to our Executive Board a conference of Union Chairmen and Unit Recorders is being set for mid November.

The conference is being planned with the assistance of the Center for Labor Research and Education at the University of California. The conference agenda will be aimed at providing basic education in parliamentary procedures, the functions of the Chairmen and Recorders and the conducting of unit meetings.

It is the objective of this conference to provide the tools for unit leaders to develop unit committee structures needed to provide better communications within the membership and from the membership to the Officers. While our program is in the early stages of development, we believe we can provide a conference which will be informative and productive for those who attend.

The problems of housing and preparing facilities and a participatory program for over 200 potential conferencees is not an easy task as we continue our every day business. In any event, the job is going forward and we will have a conference call sent out to the participants shortly.

New Grievance Procedure Discussed


This photo shows Bud Brown, Sr. Ind. Rel. Rep., left and Dave Bergman, Ind. Rel. Rep., as they participate in a joint explanation of the new grievance procedure.

Shown above and below are Business Representatives of Local 1245 and PG&E Personnel Mgrs. and their assistants as they receive information on the new grievance procedure. This was the first joint meeting of this type.
September buying calendar: New President faces more inflation

by Sidney Margolius Consumer Expert for Utility Reporter

As Gerald R. Ford takes over the Presidency, he, and the rest of us, face an ominous shadow of inflation powered by a fresh advance in food prices on top of relentless increases in housing, transportation and health care.

These are the four components that have especially affected the cost of living in the past because they are major items in any family's budget, in any case, and have been especially explosive in the current inflation.

The last Administration's big mistake was that it failed to take needed steps to attack these four overriding problems with specific remedies. It tended to depend on overall gimmicks such as high interest rates, which have added to rather than curbed inflation. The first step toward whether President Ford will be more effective in holding down living costs will be his ability to deal with these four problems.

The most immediate price crisis you will have to deal with this fall is the cost of housing, transportation and health care. As the President has already stated, these costs have especially affected the cost of living for middle income families.

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On December 31, 1946 SMUD acquired the local electric system in Sacramento from PG&E and began operations as a Utility District. The District was actually formed in 1923 when the people voted to bring water down from the mountains and provide electric power for the area. Lengthy litigation and failure of bond elections ensued causing a 23 year delay before SMUD actually began operating. When the “take over” from PG&E actually happened, many of the PG&E employees stayed on and went to work for the District. Many of those who stayed were members of Local 1245 and the Local followed with them to their “new” employer and began representing them. It is interesting to note that when S.M.U.D. took over the electric system there were 65,000 customers and the peak load for one day was 67,000 kilowatts. That’s an average of just a little more than 1 kilowatt a day per customer. Today there are more than a quarter of a million customers and the maximum daily demand exceeds 1,200,000 kilowatts. An interesting story of growth, new technology, migration, etc. is told by glancing at and comparing the figures.

Shown above from left to right are: Ron Messina, Vice Chairman, Tim Curtis, Unit Recorder, Al Wolf, Chairman of Unit 3811-SMUD, and Bus. Rep. Dick Daugherty.

Shown above from left to right are Tool Repairmen Jack Kehrer, Art Katzenhorn and John Bostwick, Tool Room Foreman.

Mechanics M. L. Holmes, William Potter and Burl M. March are shown above from left to right.

Warehousemen Jerome Mitchell, Bill Johnson, Ike Williams, Ruben Rangel and foreman Bob Swayze are shown in this photo.
There is another story hidden in these figures, it is a saga about people - the employees of SMUD who belong to Local 1245. Along with the growth of the area the list of employees has grown accordingly. Two million, nine hundred and four thousand, two hundred and nineteen.

Local 1245 represents the employees in the operating and maintenance departments of the District. The percentage of membership has fluctuated over the years, which is another case of figures telling a story of good times and bad times, satisfaction and dissatisfaction, but at the present time we are at an all-time high of over 85% Union membership. The active members who worked hard to bring us to that level are to be congratulated and encouraged to continue their efforts until we reach the ultimate goal of 100%.

All the members of Local 1245 who are employed by SMUD are to be congratulated for maintaining a high level of participation in the Union.

The employees of SMUD make the system work. On pages four, five and six of this issue you will find photos of some of our members employed by SMUD as they perform their various job functions.

Shown above are Jack Pope, warehouseman, left, and crane operator, Oscar Bingen, show steward and negotiating committee member.

Linemen Ralph Griffen, top and Don Rodriguez are shown changing out transformers.

Ken Hogins, Shop Steward in the Maintenance Dept., is shown on the job.

Tree trimmer Dave Bince is shown holding hand line during tree trimming job.

Bill Paynter, left, appr. lineman and Harry Johnson are shown doing line work in a residential area.

An underground crew is shown working in a park in Elk Grove, Calif. Members of the crew are Al Glidden, Sarge Wilkens, Glen Campbell, Jim Phelan, Lynn Wallace and foreman Lou Earles.
Robert Lundy

did read the Utility Reporter and found his membership card number in the July issue of the paper. Brother Lundy is in the Elect. Department of P.G.& E. in the San Joaquin Division and we wish to congratulate him on winning the $50.

LOOK FOR YOUR CARD NUMBER
### San Jose Area Stewards Meet

Senior Assistant Business Manager Mert Walters is shown as he explains the new safety provision in the PG&E agreement.

Ory Owen, Business Representative assigned to the San Jose Division, is shown listening to a question on the new agreement.

The photos above, and in the lower right hand corner of this page show most of the participants in the San Jose Area Shop Stewards meeting. These stewards gave up a Saturday to be brought up to date on the changes in the PG&E agreement.

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### What do you do now?

(Continued from page eight)

respiration, your first objective is to dilute the dangerous substance regardless of what he has swallowed.

Corrosive or noncorrosive, petroleum product or drug overdose, dilute the substance with water or milk. (See first-aid chart for dosage.)

If the patient swallowed a corrosive or petroleum product - such as an overdose of a drug or medicine - your second objective is to induce vomiting (your first was to dilute the substance with water or milk).

To induce vomiting: The best way is to give one tablespoon (1/2 ounce) of syrup of ipecac, plus at least one cup of water. If no vomiting occurs within 20 minutes, the dose may be repeated only once.

Syrup of ipecac (not ipecac extract) is available at pharmacies and should be kept in the home for emergencies, especially if you have small children. You can buy one-fluid-ounce containers without a prescription.

Made from a South American plant, syrup of ipecac is almost sure to cause vomiting, for it makes the brain tell the stomach to really empty itself.

If syrup of ipecac is not at hand, induce vomiting by placing the blunt end of a spoon or your finger at the back of the victim's throat.

Do not give salt water to induce vomiting. Salt has been found to be dangerous as an emetic.

If, for some reason, no vomiting occurs within 20 minutes, repeat the syrup of ipecac dose only once as already described - but don't waste time waiting any longer.

Call your doctor or hospital again for further instructions. If you can't get those instructions, take the patient to the hospital immediately. Bring along the container, label or remaining contents as before - or, if vomiting does occur, a sample of the vomited material.

The first-aid chart and this article were prepared with the guidance and approval of the American Academy of Pediatrics. Study them carefully until they become a permanent part of your first-aid knowledge. Because they're designed for emergencies, both are simple and easy to understand.

But after you master them, don't forget the simplest and easiest antidote of them all: an ounce of prevention.

Better yet, why not increase the dosage and make that a pound of prevention? The only side effect is safety!

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### The Politics of Health Reform

(Continued from page three)

sible path through the health care maze, the AMA remains serenely certain it knows the right answers. Yet it is risky to present an AMA official with a fact; you may put him out of sorts.

At a hearing before Senator Edward M. Kennedy's subcommittee two years ago, four AMA spokesmen denied there was a health care crisis. Even the President had said there was a "crisis," responded Kennedy, who went on to point out that the number of tonsillectomies in California was four times the national rate, suggesting that the distribution of surgeons around the country might be uneven, "Where does that statistic come from?"

"I asked Harry Peterson, the AMA's chief lobbyist. The Senator replied that the figure was part of the Nixon health message. He then asked about the high rate of infant mortality in the U.S. Where does a dozen or so nations with lower rates?" Those figures are wrong!, cried Dr. Max Parrott, chairman of the AMA Board of Trustees. "They are absolutely wrong. They are used dishonestly."

The statistics came from the United Nations.

This spectacle of a temperamental giant flailing in the dark would merely be funny if the AMA was not so adept at keeping the rest of us in the dark, too. Each week, for example, about 40 million Americans watch the television series, Marcus Welby, M.D., a portrayal of fee-for-service Nirvana whose wise, kind and handsome protagonist is the very model of a modern general practitioner. The AMA serves as a technical consultant to the program, and last fall reporters learned that it was instrumental in having two scenes from a single show left on the cutting room floor.

In the expurgated scenes a surgeon, Dr. Jeliff, remarked to Welby that 80 per cent of the cost of an operation he had scheduled the next day would be paid by the patient's group medical insurance. Welby asked if that "isn't true in most of your cases?" Jeff replied, "No, I'm sorry to say many of those who need insurance the most don't have it."

Questioned about the cuts, the producers conceded that certain changes had been made "during editing."

Besides the AMA and the private insurance industry, lobbyists like Blue Cross and the American Hospital Association (AHA) carry some weight on the Hill, though Blue Cross observes a nominal neutrality toward bills under consideration. ("We support certain principles," says George Kelley, its chief lobbyist, "but we don't take stands on legislation.") Since the health care community is a loose coalition of interest groups, each scrambling for the dollar, the lobbying organizations do not always agree. For instance, during last fall's Congressional debate over the Emergency Medical Service bill, a measure that would have pumped Federal funds into hospital emergency units if the President had not vetoed it, the AHA found itself arrayed against the AMA. (The AMA won when the House, by four votes, failed to override the veto.)

Nevertheless, at this stage of the game the private lobbies recognize that they have much in common and frequently they synchronize their ad hoc campaigns. Last year, all the big-letter lobbies—AMA, HIAA and AHA—got together in strategy sessions intended to make the impending HMO bill conform more nearly to their interests. Among other things, they agreed to press for "dual choice," a provision putting private insurance plans on at least an equal competitive footing with HMOs (at the same time, they opposed requiring employers to include HMOs in the choice of insurance packages offered to employees). Blue Cross representatives attended some of these sessions, despite their insistence that they could take no position on proposed legislation.

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### C.P.I. Hits 148.3

The Consumer Price Index U. S. - All Items rose 0.6 percent in July which brought the Index to 148.3 points. Increases in mortgage interest costs and higher prices for automobiles, medical care services, restaurant meals and a wide range of other commodities and services accounted for most of the rise.

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If your child swallowed a poisonous substance, would you know what to do in the next few life - or death minutes?

Mrs. Linda Loomis of Mokena, Illinois knows what to do now, after her child was poisoned. She tells her true story to FAMILY SAFETY. 

One day after we had lunch, my two-year-old boy, Bobby, put a small pale orange bottle cap on the bathroom floor. I picked it up and it suddenly dawned on me that it was the safety cap off the children's aspirin bottle.

How to make the difference? First of all, have your medicine chest and - check - you could be mistaken. I will never forget that empty aspirin bottle on the shelf.

I called Bobby, age 3, into the bathroom and asked him if he knew what had happened to the medicine.

"I ate them, Mommy!"

Oh, my God, I thought. What do I do now?

The chart on the inside of the medicine chest door had been left by the previous owners of the house. I hadn't even glanced at it before. What was it about? Poisons and overdoses! I quickly scanned the chart and found the remedy for an aspirin overdose.

Give a glass of milk and induce vomiting. It had to be done - and quickly. Bobby drank the milk without any trouble.

I went back to the chart. To induce vomiting, it recommended syrup of ipecac (still don't know what it is). So I stuck my finger down his throat.

After Bobby managed to relieve himself of his food, including breakfast, I called the pediatrician and told him what happened and what I had done.

He said that since Bobby had managed to bring up the entire contents of his stomach within a few minutes of swallowing the aspirin, he didn't think it would be necessary to give ipecac. He just added that I should keep my eye on him pretty closely the rest of the day and if he became unusually drowsy to get him to the hospital emergency room.

Mrs. Loomis' story is true to life. But it came close to being true to death, for Mrs. Loomis was momentarily confused about emergency treatment.

When it comes to antidotes, counterdoses and other first aid procedures, you're probably confused, too - along with millions of other parents.

It isn't surprising when you consider the bewildering assortment of dangerous substances a child can swallow today: medicines such as aspirin, cold remedies, liniments, antiseptics, tranquilizers, vitamins and minerals; cleaning and polishing agents such as detergents, disinfectants, deodorizers, bleaches, drain cleaners and furniture polish; a miscellany of pesticides, cosmetics, turpentine, paint - the menu is as long as it is deadly.

Some are poisons, some are overdoses; some are corrosives, some are petroleum distillates; in some cases vomiting is urgently called for, in some cases vomiting could be fatal.

Even if you had a lot of time to determine the correct life-saving treatment, it would seem difficult to wade through the mind-boggling array of antidotes, counterdoses and emetics. But in an emergency, a lot of time is what you don't have.

The fact that emergencies not only can but do happen is borne out by statistics. In 1972, the latest year for which figures are available, the National Safety Council estimates there were 3,700 accidental deaths from poisoning - a casualty list that has doubled in 10 years. And according to the National Clearinghouse for Poison Control Centers, two-thirds of all accidental poison cases involve children less than five years of age.

Keep your cool and...

As you know, the best antidote for an emergency is prevention. That's why you keep all drugs and poisonous substances out of the reach of children - in original containers, clearly labeled, preferably under lock and key. (Purchase products as already described - but don't waste time waiting any longer. Call doctor or hospital again for further instructions. If you can't get those instructions, take patient to hospital immediately. Bring along the poison container, label or remaining contents to help identify the poison.

IF THE PATIENT SWALLOWED A CORROSIVE OR PETROLEUM PRODUCT

(see examples below):

Do NOT induce vomiting.

Dilute the poison with water or milk. Dosage: 1 to 2 cups for patients under 5 years of age - up to 1 quart for patients 5 years and older.

Get him to the hospital immediately - along with the poison container, label or remaining contents to help identify the poison.

IF THE PATIENT SWALLOWED AN OVERDOSE OR POISON THAT IS NOT A CORROSIVE OR PETROLEUM PRODUCT:

Dilate with water or milk. Dosage: 1 to 2 cups for patients under 5 years of age - up to 1 quart for patients 5 years and older.

Induce vomiting. To induce vomiting: 1 tablespoon (1/2 ounce) of syrup of ipecac, plus at least 1 cup of water. (If no vomiting occurs within 20 minutes, dose may be repeated only once.) If syrup of ipecac is unavaiable, induce vomiting by placing the blunt end of a spoon or your finger at the back of the victim's throat. Do not give salt water. When vomiting begins, keep patient face down with head lower than hips to prevent choking; place a small child across your knees in a "spanking" position.

The Safety Scene

What do you do now?

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