Union organizing activity in the healthcare industry is on the rise. Reality is that survival is at stake, unions have looked to expand the nature, scope and geographic breadth of their organizing activities. Traditional labor unions (such as the Teamsters, United Food and Commercial Workers, the United Steelworkers, and the International Association of Machinists) seeking to stem the tide of membership losses, as well as more sophisticated service (such as the Service Employees International Union, National Nurses United, and the California Nurses Association), are focusing their organizing efforts on hospitals and healthcare systems across the United States. Healthcare is an attractive target, in part, because of the sheer number of jobs that it provides and projections for continued and rapid growth.

Besides being labor intensive, healthcare is community-based. Unlike their counterparts in the manufacturing sector, healthcare employers do not have the option of relocating or outsourcing their jobs to lower-cost, less union areas. Healthcare employers must remain within the communities they serve and are especially sensitive to public goodwill. Certain healthcare employers may find it difficult to effectively advance a strong anti-union position consistent with their mission, core values and community image. A well-crafted union message may resonate with a broader constituency, including the employees, members of the employer's own board of directors and the public-at-large. These are among the reasons why healthcare employers, and faith-based organizations in particular, are so vulnerable to union organizing efforts.

Specific Organizing Initiatives Directed at Healthcare Employers

To more effectively organize healthcare employers, unions have increased their organizing budgets and resources, consolidated and joined forces in the SEC/corporate, accounting/tax, banking, litigation, as well as other business and financial service areas when appropriate.

In 2007, the Service Employees International Union (SEIU) launched a one-million-member healthcare union, with an annual budget of about $120 million and 4,000 organizers, to sign up the 10 million unorganized workers in the United States. The plans include drives targeted at national hospital and nursing home chains.
Catholic and other faith-based institutions, investor-owned teaching institutions.

In March 2008, three SEIU locals representing 90,000 home, health and child care workers in Illinois and to form a single union. More recently, the SEIU announce organizing strategy that includes integrated organizing pl healthcare division, training for thousands of new organiz coordinated political action efforts.

In March 2009, the SEIU and California Nurses Association Organizing Committee (CNA/NNOC) ended years of bitter signing a "peace treaty," which calls for the CNA/NNOC to while the SEIU organizes the remaining non-supervisory unions announced an intensive national organizing camp immediate focus on larger hospital systems, including Tenet Corp., HCA and Catholic hospital chains. The unions have to win representation votes at several hospitals in Texas, state which traditionally has been one of the least organi country. They have identified Florida, where the SEIU has presence over the years, as among their next targets.

In December 2009, the United American Nurses (compris nurse unions), the CNA/NNOC, and the Massachusetts N merged to form the 150,000-member National Nurses Ur has vowed to change the face of nursing in the United Sts 2010, the NNU adopted national collective bargaining sta its union contracts, which also represent the NNU's progr unrepresented RNs. The standards emphasize improvements patients, including:

- enhanced RN staffing, based on individual patient ac minimum, specific RN-to-patient ratios and contract l enforce staffing ratios
- restrictions on unsafe floating
- a ban on mandatory shift rotation and mandatory on
- mechanisms to contain exposure of patients and nui and other communicable diseases
- improved retirement security through adequately fu guaranteed defined benefit pension plans and employ retirement medical benefits
- limits on the introduction of new technology that dis their professional judgment
- workplace safety protections to provide for RN health
- provisions that enhance and promote unity and colle union RNs

In June 2010, the members of SEIU Healthcare Florida w 1199SEIU United Healthcare Workers East, the largest he local in the country. The merged union, which has more t members, is being called the "Partnership for Power." Acc merger agreement, 1199SEIU will:

- funnel money and personnel into Florida to help org healthcare workers and negotiate first contracts for th
- mobilize its member-retirees living in Florida to help representation and political campaigns
- support nurse organizing, including joint work with t
New Organizing Tactics

Regarding organizing tactics, many unions active in the healthcare industry have supplemented (or effectively replaced) the traditional, adversarial approach with a more contemporary model that takes full advantage of new technology; attempts to position the union as an advocate for employees and patients; and addresses broader issues such as staffing, safety, quality of care, charity care, hospital collection practices, and nursing practice. The more sophisticated unions (including the SEIU and the CNA/NNOC) have made more frequent use of multifaceted corporate campaigns designed to exert legal, regulatory, economic, social and political pressure on employers to agree to their organizing agenda. These campaigns targeted appeals to a healthcare organization’s sponsors, board of directors, patients, physicians and other stakeholders, who may be easily misled by the disguised organizing rhetoric.

Focus on Faith-Based Healthcare Organizations

As part of these campaigns, the unions have attempted to discredit faith-based healthcare organizations (particularly Catholic hospital systems) by developing detailed position statements outlining "union-busting tactics" and "unfair labor practices" that allegedly violate workers’ rights and applicable religious social doctrine. In July 2010, an organization called "Interfaith Work comprised of religious leaders from a variety of faith traditions, issued a position statement against three hospitals in Michigan owned by Ascension. The position statement, titled "Ascension Health: A Fall From Grace," sets forth "workers' rights abuses" (many of which seem to involve legitimate, employment decisions), and calls upon Ascension Health to "return to its mission of non-profit, faith-based values and to respect workers rights by following the recommendations outlined in the United States Conference of Catholic Bishops publication, "Respecting the Just Rights of Workers: Guidance and Options for Catholic Health Care and Unions."

The referenced Catholic Bishops’ publication, which was issued in June 2009, was the product of years of dialogue among leaders of the labor movement, healthcare, and the Bishops’ Conference regarding how Catholic social teachings should shape the actions of unions, management and others in assuring workers a free and fair choice on questions of representation in the workplace. Motivated by a recognition that the conflict and controversy that, at characterized management and union relationships, have not resulted in the formation of resources, have not been conducive to building a community of trust in the workplace, have not been in the interests of workers, and have not the mission of Catholic Health Care ministry. The publication contains a number of compromises, including an agreement that management will not use union tactics and unions will refrain from publicly attacking Catholic organizations. It includes detailed “options and guidance” (as opposed for union and management conduct during organizing campaigns that provide the foundation for a “fair and just” process for workers to form a union without undue influence from either side. It also contains a joint acknowledgment that “a fair and just workplace may exist without a union.”

What This Means for Healthcare Employers

Given these trends in healthcare union organizing, and the new sense of empowerment that unions and workers are feeling as a result of President Obama’s pro-labor agenda, it is more important than ever for healthcare employers to:

- strategically assess (or re-assess) their position regarding union organizing in their facilities
- develop and communicate a clear and consistent position with their vision, mission and strategic plan with the support of all relevant stakeholders
- assess (or re-assess) their vulnerability to union organizing activity and take appropriate steps to promptly and effectively address any areas where there is exposure.
create a culture of transparency, organizational consistency, and trust through the development and implementation of policies that demonstrate the employer’s commitment to positive employee relations.

Employers also must ensure that their supervisors, managers, executives, and board members understand their respective roles in implementing the union and have the training necessary for them to do so most effectively. They must be prepared to identify – and promptly and effectively respond to – any activity that may arise notwithstanding the employer’s good faith efforts at prevention. Particularly in faith-based healthcare organizations, it is of the stakeholders to understand both that there are many legitimate reasons to aggressively resist union organizing efforts and that there are ways and with respect for workers’ rights and freedom of choice.

Related Practices

Healthcare & Life Sciences

Labor, Employment and Benefits