

# Guidelines

## for Unions and Management of Religiously Sponsored Healthcare Institutions



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## ABOUT THE GUIDELINES

*These guidelines were developed in the midst of great change and tension in the healthcare industry. Healthcare providers are under pressure to reduce costs and improve value to customers/purchasers. There is increasing union organizing activity in the healthcare industry. In too many situations, organizing activity and contract negotiations lead to a deterioration of the relationship between workers and management. Both union leadership and management desire ways unions and religiously-sponsored healthcare organizations can better approach working with each other.*

*As people of faith, the National Interfaith Committee for Worker Justice seeks justice in the workplace and justice for those who are ill. We believe in the dignity of labor, a safe and healthy work environment, a living wage for all workers, and the advantage of working together to achieve that which we cannot achieve alone. Work is sacred because through our work we are given our life sustenance, the ability to express our creativity and the ability to contribute to the building up of our society.*

*The purpose of this document is to help union leadership and healthcare management understand one another, communicate respectfully and build healthy working relationships.*

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## ADVISORS

This document was developed under the auspices of the National Interfaith Committee for Worker Justice, and its Religious Employers Project.

The following people reviewed earlier drafts of this document and offered revisions that are reflected in this final version. Although not everyone agrees with every line, each gave substantial feedback and we are grateful for everyone's expertise. The reviewers' participation in this project reflect a broad commitment to worker justice and a desire to contribute to creative solutions to the current labor-management tensions in religiously-sponsored healthcare institutions. Associations are for identification purposes only and do not indicate a commitment of the individual or the institution to all of the opinions expressed in this document.

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## WHY SOME WORKERS WANT UNIONS

*For workers who want unions, the following are reasons most frequently cited:*

### **Workers want a voice in decisions.**

People need to be involved in the decisions that impact their lives. Workers want a voice in issues that affect them, such as hours, scheduling and safety concerns. Some are concerned about workloads, especially when down-sizing has eliminated so many positions. Others are concerned about the quality of patient care with fewer skilled staff, increased patient-staff ratios and the increased level of need of patients. Some institutions have strong processes for involving workers in decisions. Many do not. As workers feel insecure during times of transition, they understand the strength that comes with a united effort. Unions provide a collective voice.

### **Workers want living wages.**

The work that people do should afford more than the basic necessities to support themselves and their families. Without good wages it is difficult to save for college, improved housing, etc. Unions have been successful in raising workers' wage standards through creative initiatives, such as wage pass-through legislation for nursing home workers.

### **Workers want comprehensive benefits.**

To flourish in this society, people need employee benefits, especially healthcare coverage for families. Although most hospitals provide healthcare insurance, the co-pays for family members may be too high for low-wage workers. Many nursing home workers do not have employer cost participation healthcare insurance for their families. Unionized workers have a record of acquiring affordable healthcare insurance and other benefits.

### **Workers want job security.**

Many people are being forced into part-time or contingent work. Healthcare institutions are "outsourcing" many jobs, especially housekeeping, maintenance, laundry and food service. These workers in particular may be worried about their job security. Union contracts provide reasonable job security and/or equitable termination arrangements.

### **Workers want a fair workplace.**

People need a stable, structured environment in which they understand the rules and have a system of appeal regarding decisions that seem unfair. Unions have been successful in providing recourse to neutral third-party mediation and/or arbitration. Many union contracts also reward seniority, which seems less arbitrary to most workers than most supervisor-controlled merit systems.

## WHY SOME MANAGERS RESIST UNIONIZATION

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*For managers who don't want unions, the following are reasons most frequently cited:*

### **Managers want flexibility and reasonable control over the workplace.**

In this time of enormous change in the healthcare industry, managers express concern about needing to honor compensation and staffing arrangements that are too costly given existing reimbursement rates. Some feel unions will destroy faith-based health care. The added layer of negotiating with union representatives is a time consuming, costly, control-modifying process which they feel could be better handled in the existing institutional structures.

### **Managers want to assure continuity of care.**

Many managers equate unions with strikes and thus carry a great concern about the vulnerability of the patients due to work disruptions.

### **Managers want a direct, positive relationship with workers.**

Managers want to be able to deal directly with individual employees. Additionally, many managers have been conditioned to feel that the presence of a union is a sign that they are bad managers.

### **Managers want lower costs.**

Union relationships are seen as increasing the cost of running an institution.

### **Managers want dedicated, involved, cooperative, insightful workers willing to share ideas and energy to make the institution more effective.**

Union activity is perceived as creating a divisive, adversarial atmosphere within the institution.

### **Managers believe they care more about workers than unions do.**

Some managers have the perception that unions have special interests that aren't necessarily in the best interest of the worker. Additionally, some question a particular union's ability to represent the professional interests of the workers.

### **Managers reflect and carry out the positions of their Board of Directors.**

Institutional corporate board members are generally opposed to unions in the decision-making process of the agency.

## GUIDELINES FOR BOARDS

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- 1) Examine the human resources policies and practices in the light of the Mission Statement and Core Values.** The human resources policies and practices should reflect the just treatment of workers, including the right to organize.
- 2) Review management practices in light of the social teaching of the sponsoring religious organization related to worker justice.**
- 3) Provide clear directives to managers on respecting the rights of workers to organize.**
- 4) Address ways to enhance employee satisfaction and fulfillment in contributing to the accomplishment of the organization's mission.**

## AREAS FOR MUTUAL COOPERATION

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- 1) Begin cooperating by talking together about these guidelines.** Clarify what you will do and will not do during an organizing campaign. Develop a new relationship around this undertaking.
- 2) Make joint plans to improve quality of care or services.** Unions and management have lots of ideas for improving quality of care or services that could be developed by working together. Management should ask unions about their positive experience in other healthcare facilities. Management may have thoughts about what's working well for employees in other facilities.
- 3) Develop joint plans for improving health and safety for workers.** Healthcare work is dangerous for many workers. Nursing home and hospital workers have higher injury rates than workers in most other industries. Unions and management can work together to reduce injuries, thus safeguarding employees and lowering the institutions' worker compensation rates.
- 4) Pursue joint union-management programs for training healthcare employees.** In many industries such programs are very effective and cost-saving for management.
- 5) Advocate with elected officials for jointly shared goals and values.** Many of the limitations placed on healthcare institutions are caused by public policies, such as Medicaid reimbursement rates and staffing ratios. Joint lobbying campaigns can be developed to advocate for mutually-shared goals that will benefit both workers and patients, such as better funding for staff compensation and higher reimbursement for uncompensated care.

## THE CURRENT ORGANIZING ENVIRONMENT

the most pressure in one-on-one meetings with supervisors and mandatory closed-door group meetings where they are routinely told how bad a union is. Remind managers that it is illegal to question workers about their position on the union or to threaten workers related to their union position. Consider providing open forums where workers are allowed to hear both sides in order to decide democratically.

**7) Commit to inform employees of the religious organization's policy on the right to organize.** Many religious traditions have policies and social teachings on the dignity of the worker and the worker's right to organize. Use them in your educational campaign. Assure that the organization's policy reflects the religious sponsor's values.

**8) Recognize the power imbalance between worker and management.** Employers have a lot more power than do individual employees. What may seem to management to be a nice "discussion" about the union may be perceived as an intimidating threat by employees. Most workers live paycheck to paycheck. Employers hold workers' economic livelihood in their hands, thus, workers are very sensitive to comments from employers.

**9) Be attentive to which law firms or consultants you hire to manage your response to workers' organizing.** Management firms dedicated to keeping your workplace "union-free" often orchestrate behaviors and activities that workers find very intimidating. These agencies specialize in pressuring workers to the fullest extent allowed by law, and sometimes beyond the law. Unfortunately, what is legal may not be ethical and may still be intimidating to workers. If you hire someone to guide your response to an organizing drive, make sure they know that their primary role is to advise you on your legal rights and obligations. Be sure that they treat union organizers and workers respectfully, and that they do not cast the union in a negative light.

**10) Consider allowing card-check recognition.** Card-check recognition is an alternative to the standard election procedure. Although it may seem to be more fair to workers to conduct an NLRB election, that process has frequently been used against workers and unions. In light of the fact that 10,000 workers per year lose their job for union organizing and 75 percent of employers aggressively oppose workers' unions (Cornell University Labor Studies), the current NLRB procedures are inadequate. Card check recognition is practiced in Canada, is currently allowed under US labor law and avoids costly and divisive legal battles.

**11) Any challenge or delay of elections should be honestly and objectively justified.** One tactic for undermining unions is to challenge elections and delay negotiating a contract. When this happens, differences are not resolved and the possibility of developing a mutually beneficial contract is reduced.

As workers seek to address basic human needs and secure basic human rights, there has been a rise in union organizing in healthcare institutions. Workers are hearing about unions more frequently because eighteen different unions are currently organizing in healthcare institutions. Until 1974, the National Labor Relations Board (NLRB) rules made organizing in the healthcare industry virtually impossible. A new ruling that protects the right of healthcare workers to organize has resulted in a disproportionately large share of NLRB representation elections in the healthcare industry. Additionally, the AFL-CIO has committed significant resources to recruitment efforts, resulting in a major increase in organizing activity in healthcare institutions, including those in religiously-sponsored facilities.

Given the transitions in healthcare, the stressful working conditions for many workers in healthcare, the union tradition of improving conditions for workers, and the targeted organizing of healthcare, it is likely that there will be more groups of workers who decide they want a union and who seek a collective bargaining agreement with the institutions. The tensions that have occurred in the last few years between religiously-sponsored institutions and workers in their institutions are likely to escalate unless unions and management agree to some guidelines governing their "engagement" with each other during times workers are organizing and contracts are being negotiated. Both management and labor would benefit from an examination of the dynamics that union organizing activity sets in motion.

The following guidelines are suggested as a way to reduce tension and wasted resources and to focus jointly on ways to improve workers' lives and the quality of care for patients.



## GUIDELINES FOR UNIONS

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**1) Loyalty to the institution is not the same as anti-unionism.** Workers have a right to the opinions they have developed in good conscience. Their positions should be respected. Continue to treat all co-workers as the valued employees they are.

**2) Be honest about the institution.** As chaotic as transitions in the health-care field can be, don't scare workers about the future or malign the honest changes necessary in healthcare. Don't distort things the institutional leadership says or does.

**3) Assume management wants the best for both workers and patients.** The management or the sponsoring religious organization may not be perfect, but they usually have both their institution and its workers' best interests at heart. It is not honest or fair to distribute literature describing every fault the management may have. They are not "evil" people. Do not vilify them.

**4) Negotiate in good faith.** Once the union is established, seek to negotiate a first contract within three to six months.

**5) Commit to positive employee relations throughout the organizing effort.** Maintain good faith and avoid an adversarial approach to the management. Respect both the letter and the spirit of labor laws and religious teachings on workers' rights. Allow workers to decide democratically in an atmosphere free of intimidation, coercion or harassment.

**6) Be honest about what you can deliver.** Don't make unrealistic promises about what can be negotiated in a contract. Healthcare institutions operate in a very fluid market. You won't be able to secure everything people desire or deserve.

**7) Respect the religious traditions.** Religiously-sponsored institutions have special religious traditions, such as services in the chapel, special meals or celebrations. Allow those traditions to operate without disruption or ridicule. Also, be careful not to distort the religious teachings about workers' rights. Most religious teachings emphasize both rights and responsibilities.

**8) Understand the decision-making structures.** Religiously-sponsored healthcare institutions have changed enormously in the last decade. Institutions that used to be directly owned and operated by religious organizations have now merged into broader systems with independent boards. Some health systems have sponsor boards (composed of the religious sponsors con-

cerned about philosophy of care) and management boards (composed primarily of local business people concerned about operations). Make sure you are talking with the correct people.

**9) Respect the right for continuity of service.** In the event that a strike becomes a last resort, provisions for the continuance of essential care for the patients must be made.

## GUIDELINES FOR MANAGEMENT

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**1) Support of the union is not the same as disloyalty to the institution.** Sometimes those who are most loyal to the institution are the strongest union organizers because they want to improve the work environment and are willing to risk the possibility of job loss. Workers have a right to the opinions they have developed in good conscience, as well as a moral and civil right to have a union. Their positions should be respected. Continue to treat all workers as the valued employees they are.

**2) Be honest about unions.** Many religious traditions teach that unions are perhaps the best voice of working people. Don't distort things the union says or does. Don't distort union histories. Don't scare workers about what unions may possibly do or how they may possibly affect an institution.

**3) Assume the union wants the best for both workers and patients.** Unions may not be perfect, but usually unions and their leaders have both the workers and the institution's best interests at heart. It is not honest or fair to distribute literature describing every fault a union may have. They are not "evil". Do not vilify them.

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**6) Adopt a position of respect for the duration of the campaign.** Workers need to know the union position regarding unionization and appropriate contract issues annually decided by workers in order to make a free, informed decision. If you share reasons why you don't want a union in the institution, do so without devaluing unions in general or a particular union. Workers feel