

How Collective Bargaining is Different from What RUMC Nurses Have Today

Today, leaders and staff nurses collaborate to determine staffing, unit scheduling, professional development, paid time off and a host of issues that shape our culture and work experience.

But who will speak for you in the future? While we collaborate today *as clinicians* over terms and conditions of employment, under collective bargaining, *lawyers* and business agents (for the union and health system) would control the bargaining process.




Individual RUMC nurses could lose their direct voice over their terms and conditions of employment, which would be at risk in bargaining. **See more about this on the back page.**

Here are some basic facts about collective bargaining:

- ❑ **Individual RUMC nurses could be sidelined:** When you elect a union, you may find that you forfeited your voice and your right to deal directly with leaders over your terms and conditions of employment; the union represents everyone, and Rush must deal with the union, not nurses, on important issues like wages, benefits, and work rules.
- ❑ **The process is often not collaborative:** RUMC nurses should be concerned that, rather than resolving issues and fostering unity, collective bargaining under NNOC/NNU could create *division, confusion and conflict* at RUMC. It certainly has elsewhere.
- ❑ **There are no guarantees:** If the union is elected, RUMC leaders would bargain in good faith, but union representation isn't a *guarantee* of increased pay or different benefits. During bargaining, the union can *ask* for anything, but management has a legal right to say "no" to proposals that are not right for Rush or our patients.

All of this would occur while potentially redirecting millions of dollars in employee wages to the union through negotiated contract terms that may require all nurses to pay mandatory dues to keep their jobs.

- ❑ **Strikes are possible, especially when NNOC/NNU is involved:** When NNOC/NNU makes demands that hospitals are unwilling to accept, the union often resorts to conflict and strikes.
- ❑ **Unionization could result in less flexibility *without delivering real solutions*:** Anything can happen in collective bargaining; in many cases, union contracts have left employees with restrictive work rules that don't work for them and lost flexibility, while failing to deliver on union campaign promises (*i.e.*, big pay increases or benefits enhancements).



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Does the Union's Sales Pitch Sound Too Good to Be True?

Professional organizers are paid to convince you to buy what the union is selling; if they are successful, RUMC nurses will be expected to pay the union millions of dollars in dues each year to keep their jobs after negotiations. NNOC/NNU organizers want you to believe *you can have it all with no risk*.

But is that realistic? Consider how much division, conflict and confusion their organizing campaign has already created.

During bargaining, all your terms and conditions of employment would be on the table and at risk.

During contract negotiations, lawyers for the union and the employer negotiate over everything.

This means that everything you have and count on at RUMC would be on the table and at risk in the bargaining process, including the following specific items:

- All pay rates and practices
- All benefits, including:
 - ✓ Health insurance (cost, quality, network, etc.)
 - ✓ Dental, vision and prescription insurance
 - ✓ Educational assistance (all programs)
 - ✓ Retirement savings (plan design, match, etc.)
 - ✓ Health savings and flexible spending accounts
 - ✓ Life insurance
 - ✓ Accidental death and dismemberment insurance
 - ✓ Disability (STD and LTD)
- Paid time off (*most unionized RUMC employees have the same PTO plan as Rush nurses*)
- Floating and low census, unit scheduling
- Discipline process
- Seniority rules (which may affect shift preference, work schedules, job transfers, promotions, extra shifts/hours, time off preferences, layoff, recall, etc.)
- Discounted fitness center membership rate
- Wellness counseling services that include group therapy, 24/7 wellness triage pager, peer support, group coaching, wellness talks, therapy dog visits, summer yoga, mental health forums, mental health first aid certification program



Did you know: Professional organizers probably won't tell you that nurses at the University of Chicago Medical Center lost their defined pension benefit plan in 2017 following collective bargaining.