

The Power of > One

more than

Dear Colleagues,

October 22, 2007

When we decided to form our own organization with the Michigan Nurses Association, we knew that it would not be easy; however, for those of us involved from the inception of this organizing campaign, we felt we had no choice. We chose the name of “DMC Organizing Committee for Change” because it represented not only who we are, but what we desired – a change for the better.

The old saying, “Change doesn’t come easy,” applies here. At every step of the way we have overcome hurdles; many of us were not familiar with unions and knew only what we heard in the media or through others, so we had to educate ourselves. We also didn’t know each other very well, but have found that we have more in common than we realized. Most importantly, early on we recognized that as nurses, there is a conscious or unconscious acceptance that we do not have the power to create change for our working environment and ourselves.

So what happened? We started talking to each other, we started believing in each other, and many of us found the inner strength to become part of something bigger than ourselves. We stepped outside of our comfort zone of acceptance and got involved. When we thought we were alone in this struggle, community leaders, clergy, nurses and other unions stepped forward to support us, and our campaign grew stronger.

Management’s response to our organizing has been extremely disappointing. Many of our supervisors, administrators, and VPs have come from where we are now – working to care for patients in what some would consider difficult circumstances. **Have they forgotten?** We would like to think that it doesn’t matter, but unfortunately it does.

For too long in the healthcare industry, as staff RNs, we have followed, not led; we’ve answered, not questioned; we give to others, yet never expect for ourselves.

We ask every bedside nurse this important question: Do you want or need administration to take care of you? If your answer is yes, we respect that, and you will continue on the path that you are on. If your answer is no, we ask you grab one of our hands and join with us, because we will continue to fight for our patients, for our rights, and for our practice.

Election Update: Over the summer MNA, with the consent of the organizing committee, approached CEO Mike Duggan several times in an attempt to reach a Fair Election Agreement.

A Fair Election Agreement is an agreement between DMC administration and the Michigan Nurses Association on a set of principles that guide the organizing, election, and bargaining process. This Agreement ensures that DMC would not delay the election through a lengthy board hearing by using a 2006 decision from the National Labor Relations Board. This bad decision allows employers to claim that a nurse who performs 10% of their time as a charge nurse is considered a “supervisor” and therefore ineligible to join a union.

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CHRONOLOGICAL SUMMARY

Will DMC become the next Oakwood? We are now at a pivotal point of our campaign. The following is a chronological summary on what has taken place since the filing.

Thursday, October 11, 2007 – MNA representatives and Mike Duggan met to begin discussions on reaching an agreement.

Monday, October 15, 2007 – Based on the petition for an election filed on Harper Hutzell, the NLRB postponed the Board hearing to allow DMC and MNA time to reach an agreement on the bargaining unit and resolve the charge nurse issue. There was movement on both sides addressing the charge nurse issue and an appropriate unit consisting of the main campus.

Tuesday, October 16, 2007 – Talks continue between MNA and DMC. By late evening, talks break off.

Wednesday, October 17, 2007 – NLRB begins hearing. DMC has six attorneys from various law firms to represent them, including the lead attorney from the Oakwood case.

DMC arguments:

- Harper and Hutzell are separate hospitals.
- 661 Rotating Staff Nurses would be excluded from Detroit Receiving, Children's and Harper Hutzell based on the 10% Oakwood decision.
- Nurse Practitioners, Educators, Coordinators, CRNAs and other specialty nurses are appropriate classifications and should be included in bargaining unit.

Our position:

- Rotating Charge Nurses are not Supervisors; no supervisory authority is delegated to them.
- Harper Hutzell, through a merger became a single facility, therefore a single unit.

Once the NLRB agent notified us of DMC's arguments, it was necessary for MNA to subpoena and request information to prepare for the hearing.

The NLRB hearing is ongoing Monday – Friday, from 10am – 6pm and is open to the public. The expectation from the Board is that this hearing will take up to 6 weeks from the filing of the Harper/Hutzell petition before an election can be scheduled.

What does it all mean? We find ourselves exactly where we did not want to be – in a lengthy Board hearing that is costing our hospital thousands of dollars in attorney fees and staff time. Despite management's assertions that they are following the law under the NLRB rules, employers are not mandated to follow the Oakwood case. CEO Mike Duggan has the authority and the ability to sign an agreement with MNA which would resolve all issues and allow an election to proceed.

We call on Mike Duggan to be a leader in the healthcare industry by signing a Fair Election Agreement. In doing so, precious resources will not be wasted on expensive attorneys and labor consultants, and we can all focus on providing patient care and ensuring DMC continues to be the hospital of choice in Detroit.

The DMC Organizing Committee for Change