

Informed RN

INFORMATION YOU NEED TO KNOW NOW

First and foremost, what or who is the CNA / NNOC?

California Nurses Association (CNA) and its national arm, the National Nurses Organizing Committee (NNOC) is a nursing and health care union. They have nearly 80,000 members in 50 states. The CNA is not part of the American Nurses Association (ANA) – they broke away from the ANA in 1995.

The majority of the CNA employees are NOT nurses, nor do they have a known nursing background. However, the CNA does have some active RNs on their payroll – some of these nurses will be present at union activities to persuade or influence you about the CNA.

What's Happening?

In July 2008, the CNA / NNOC will be entering our facility with the intent to engage enough signatures from RNs to enable an election. The National Labor Relations Board (NLRB) will accept 30% of the employees signatures (RNs in this case) as an 'interest' required to conduct an election. Here's how you may be asked to sign a card of interest:

1. You may be asked to 'sign a card' to get a free, catered lunch, dinner or breakfast. Do not be fooled, the card you may be signing could be a binding written agreement for the CNA to speak for you at your workplace. Do not let the enticement of a free meal take away your voice!
2. You may be asked to 'sign a card' to get more information – **DO NOT SIGN ANYTHING FROM THE CNA** – if you want more information, research it on line – you will get a better, bigger picture of the truth.
3. You may receive a card in your mail at home. Please take the time to read about the CNA / NNOC and other nurses' experiences BEFORE you sign over your voice.
4. **Be wary of any piece of information requiring a signature!!!**

Next...

IF the CNA / NNOC receives an interest of 30% of RNs at our facility (by means of signing a card), an election will be held to either vote YES or NO to the CNA / NNOC as the sole and exclusive representative for the RN employees. ALL VOTES COUNT – if an election comes to fruition, all eligible RNs should exercise their right to vote – if you are against the unionization of nurses, you must vote NO. **Since only the ballots are counted, if you don't vote "NO", then the "Yes" votes will win. Cypress Fairbanks Hospital's vote was 119 vs 111 in favor of the union – and nearly 30 RNs did NOT exercise their right to vote – which could have changed the outcome!!!!**

Let's Talk Money...Your Money...

Texas is a "Right to Work State", which means that you do not have to 'join' the union if it should win at our facility. (Visit <http://www.nrtw.org/c/txrtwlaw.htm> to read about the National Right to Work states and Texas Labor Codes). ***"If you work primarily in a Right to Work state, except on certain federal property, you not only have the right to refrain from becoming a union member, you cannot be required to pay dues or an agency fee to the union unless you choose to join the union."*** (Taken from the National Right to Work web site)

Monthly union dues are estimated to be 2.2 times the individual members' base hourly rate – not to exceed ~\$80 / month. Reportedly, the union dues may start out at 1x your base hourly rate, but will likely ***never decrease and only increase over time***. Since your dues are based on your hourly rate, when you get a raise, your dues will increase also – when you earn more money, the union gets more money.

Let's do a little math:

Informed RN

Example: RN making \$27/hour, IF you joined the union, your monthly dues would be \$59 (based on 2.2x your base rate). Over a three-year contract, the total amount of money paid to the union would be \$2138. This does not take into account any raises – remember, if you get a raise, so does the union.

Speaking of raises – Working in a union hospital levels / flattens the playing field and every RN gets the same raise across the board, *regardless of performance*. This method of compensation does absolutely nothing to differentiate the best from the rest.

What are the dues paying for? Do you know in 2007, the CNA's dues and agency fees totalled over \$50 MILLION? The union is a business and its goal is to increase membership. As a business, the union has a hierarchy like every other business, which includes presidents, vice presidents, sales, marketing, etc. The majority of your dues are paying for these salaries. Very little of the dues paid will go back into improving nursing care or work conditions. The unions also use your dues to pay for Political Action Committees (PAC). The CNA / NNOC may be supporting efforts that you may not personally support – this could be anything from religious values to politics.

Additional Points to Think About:

- If the CNA were so great, why are nurses at union hospitals trying to decertify the CNA from representing them?
- Read what the California Hospital Association has said about the CNA / NNOC – find the link at <http://informedrn.googlepages.com>
- CNA web site says that the number of actively licensed RNs in California increased from 246,068 in 1999 to 332,043 as of Jan. 2008. While part of that statement is true (# of active licenses in California) the bigger truth is the total number of **WORKING** nurses is only 236,545 – a difference of ~95,000 nurses (<http://www.cinhc.org>)
- Quality of Care - Of their ~82 union hospitals in California, 2 hospitals had “Worse than US National Rate” for 30-day death rate for heart failure – St. Joseph’s Medical Center of Stockton and Mercy Medical Center Redding. **AND 4 of the union hospitals in California were not in compliance with JCAHO standards** – Brotman Medical Center, Kaiser San Rafael Medical Center, Kaiser South San Francisco Med Center, Long Beach Memorial Medical Center. **Houston Northwest Medical Center: averages ‘No different than the US National rate’ for heart failure or heart attack – and we don’t have a union. So how does a union hospital have better quality of care?** (Researched on www.jointcommission.org)
- The union cannot guarantee better salaries, improved nurse patient ratios (NPR), or better benefits. If they say they can, **demand that they put it in writing up front**. Remember, the hospital administrators continue to manage and control the hospital’s business and do not have to yield to ANY of the demands that the CNA proposes. Regarding Nurse Patient Ratios – there is a national nursing shortage – (California has one of the worst shortages amongst our 50 states). More than 75% of the hospitals in California utilize agency and traveling nurses to meet the staffing mandates. Furthermore, the CNA does not speak for EVERY RN in California – of the 330,000+ RNs in their state, the CNA only represents about 20% of them (~65,000). (<http://www.onevoice-ourvoice.com/home>)

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- Increased Nursing Salaries – remember anything that the CNA ‘says’ they can do for you **MUST** be negotiated with hospital administration. Also, you need to consider cost of living (COL) differences. Check out the COL comparison on our web site: <http://informedrn.googlepages.com>
- Also, are you willing to walk away from your patients and go on strike? The CNA has had numerous strikes on record – which is not consistent with goals of patient safety or quality of care. The CNA has one of the worst strike records of any union organizing in healthcare. The CNA may tell you that they will never ask you to strike, but the truth of the matter is their track record tells a different story. Past behavior and performance is a good indicator of future behavior and performance...
- Houston has some of the best healthcare systems in the country. If we do not keep the union out of our hospital, we potentially jeopardize any future opportunity to work anywhere else. The reason for this is simple – most hospitals work very hard to encourage an ‘open-door policy’ with their staff members. The potential threat of having a nurse who has been involved in a union hospital is counter effective to their ‘open’ environment.
- The nurses at Houston Northwest Medical Center do not need a 3rd party to speak for them – keep the CNA / NNOC out of our house – **BE INFORMED and BE PROFESSIONAL!**

This information is brought to you by the Informed RNs at Houston Northwest Medical Center.
<http://informedrn.googlepages.com>