



QUESTIONS & ANSWERS

Nurses have been asking questions about the possibility of going on strike. While a strike is a last resort option and not something we are planning to do right now, it is vital to inform ourselves and prepare for the possibility. Here are some answers to common questions:

Question: Are we going on strike?

Answer: The decision to strike or not to strike would be made by all Nurses United members at a meeting held for the purposes of discussing and voting on the proposed job action. At this time, there are no concrete plans to go on strike. It is our hope that negotiations will conclude successfully with a contract we can all feel good about. If the employer is unwilling to move in a positive way, refuses to address the staffing and quality issues nurses have identified as priority, or insists on dramatic take-backs, then we would consider the options for lawful group protest action. Going on strike is a last resort. Prior to any strike vote, there would be a lot of discussion and education about what is involved in striking. Whether or not we choose to strike, we must prepare well for the possibility, so that we are in a strong position. Nurses United is actively working to secure our options, should it become necessary.

Question: What happens if we are not done with negotiations by April 24?

Answer: There are several possible scenarios based on what happens at the negotiation table. If good progress is being made, but both parties agree that a bit more time is needed to finish, the contract could be extended -- by a few days, a few weeks, or longer. We may also choose to work without a contract rather than extending it. Ordinarily, when a contract expires, most of its terms would continue during negotiations for proposed changes; but where the employer has presented a final offer and we have reached an impasse, the employer might implement changes that were part of that final offer. We can also implement internal campaigns to make our voices heard and press for a better agreement.

Question: If we go on strike, will the employer be able to fire us and will we have jobs to return to?

Answer: The answer depends on what kind of a strike is called. In a strike protesting an employer's Unfair Labor Practice (for example, anti-union discrimination or bad faith bargaining), you cannot be permanently replaced. In other, so-called "economic strikes" (generally, a strike over contract proposals or other lawful issues involving working conditions, such as improved staffing, wages, or maintaining our current benefits), there is a risk that nurses could be replaced permanently, not just temporarily. However, there are some factors that could make this scenario unlikely – and it would be difficult for the

hospital to *permanently* hire so many new nurses. In 1978 and 2000, all striking nurses were able to return to their jobs at Washington Hospital Center.

Question: As a new nurse, this is very confusing. How do I make sense of this and figure out what is really going on?

Answer: Being a new nurse is already overwhelming. Contract negotiations may add to this but keep in mind our goals – better staffing, higher quality patient care, positive working conditions. Always feel free to contact your shop steward with questions or email nursesunitedorg@aol.com. Use your peers as resources. Many of your coworkers have a lot of history and experience at WHC and were present for the 2000 and/or the 1978 strikes. Ask them questions. We are asking the more experienced nurses to please share your wisdom and talk about your perspective on the strike and on what nurses have gained over the years through the union's efforts.

Question: I'm new and still on probation - is my job at risk if I strike?

Answer: New nurses who are still on probation are certainly full members of our collective bargaining unit and should be able to participate in any lawful union-related activity. In both the past strikes, probationary nurses participated alongside their more veteran coworkers, and no one lost their job. Everyone was able to return to their jobs after the strikes. This is not a guarantee, but it gives you an idea of how it has gone before.

Note: Even where a Collective Bargaining Agreement makes termination of probationary employees not subject to the grievance and arbitration process, federal law makes it illegal to discriminate against an employee based on their union activity; so we could bring Unfair Labor Practice charges to challenge threats, retaliation and other unlawful treatment of probationary nurses.

If the possibility of striking became a reality, each nurse would have to make this choice for herself or himself, and it can be a very difficult choice. For many of us, it is a matter of standing up and fighting for our values and needs, as well as the wellbeing of our patients, and we are willing to take some risk with the hope and knowledge that our workplace can be better and we have the power to make change.

Question: Is management trying to push us to strike, and are they trying to break the union?

Answer: It's difficult to know their intentions. We will be best situated if we are well prepared -- then we will have options to choose from. We know that the presence of a union in a workplace gives workers rights and protections, and a Collective Bargaining Agreement means that managers must treat us in a fair and equitable manner. Union representation levels the playing field so that the union may interact with management as equals, defending nurses' rights. And they must negotiate with us over nurses' wages, benefits and working conditions. From the employer's perspective, it would be much

more convenient if there were no Nurses United and management had unlimited power over nurses. We must stand strongly together -- whether or not management is trying to break the union -- because it is as nurses together, Nurses United, that we have the most strength to make positive changes.

Question: If we were to decide to strike, when would we go on strike?

Answer: We would not strike before our Collective Bargaining Agreement expires, because the CBA includes an agreement that there will be no strikes and no lockouts as long as the CBA is in effect. (A “lockout” is when the employer withholds work from employees during a labor dispute). Because we work in a health care facility, the National Labor Relations Board requires a 10-day written notice of a strike and/or picketing at the hospital (including an informational picket). In the negotiation ground rules, NU and the hospital have agreed on an additional deferral of the timing, so that a strike or lockout would not take place for the first 10 days after the CBA expires. At that point, even if there is an affirmative strike vote, we could choose whether to go on strike as early as permitted or to spend several weeks or months preparing.

Question: If we go on strike, what happens to my health insurance?

Answer: Federal law (the COBRA legislation) requires that you receive written notification if your employer-provided insurance coverage is being terminated as a result of your going out on strike. You must be advised in advance of your right to elect to continue your coverage by self-payment, the amount of the COBRA premium you will need to pay, and the deadline for making payment. It is important to apply for COBRA when on strike so that you can preserve all your options and protect yourself for an extended period.

Question: What are some other options besides a strike? Do we give notice to the employer for those options?

Answer: Options short of a strike include solidarity and communication campaigns, like wearing ribbons, organizing petitions, and holding rallies and forums. We can reach out to government officials, community allies, and other unions to develop support, challenge the employer, make our voices heard and press for a decent contract. Another powerful option is public informational picketing with signs and flyers at the entrances to WHC property. The decision to do an informational picket would be made with the membership, and we must give 10 days notice for an information picket.

Question: When does Federal Mediation and Conciliation Service (FMCS) get involved?

Answer: FMCS is a governmental agency that makes free services available to unions and employers to assist in contract negotiations and promote labor-management cooperation. For example, when collective bargaining negotiations need a boost, a neutral mediator from the FMCS can communicate confidentially with the union and the

employer, help to keep the parties talking, try to resolve disputes without job actions, and help both sides come to agreement on a final contract. There is no charge for these services. FMCS has already received routine notice of our contract negotiations, and they could become involved at any point.

Question: How is Nurses United preparing for the possibility of a strike?

Answer: Nurses United intends to be prepared for whatever it takes for nurses at the Washington Hospital Center to successfully bargain a good contract. Since forming in 2003, we have developed a substantial “rainy day” savings account. In preparation for these negotiations, we put out the Negotiation related newsletter, have been holding regular rolling meetings, have held two focused “mobilization days” with shop stewards and other NU leaders, and promptly and confidentially respond to all member emails and correspondence. We are securing action headquarters and meeting space. NU has reached out to community and labor organizations as well as elected officials. This Q&A is in direct response to questions members have asked.