

MedStar associates turn to their leaders as trusted sources of information. To support your ability to talk comfortably and knowledgeably with your associates about unionization topics, refer to the conversation points below and follow the links for more detailed information.

Topic	Conversation Points	Learn More
Associate Rights	We respect our associates' right to make free and informed decisions. Further, we support our associates' legal right to choose for themselves whether or not to unionize.  Associates have the right to:  Refrain from union activity.  Engage in union activity and support the union.  Campaign against the union.	NLRB Your Rights During Union Organizing
Authorization Cards	<ul> <li>A union authorization card is a legally binding document that might:</li> <li>Give away your voice to the union to speak on your behalf.</li> <li>Give away your right to privacy, allowing the union to use your personal information in ways you don't want, including sharing it with other people.</li> <li>Give away your opportunity to work directly with your leader on workplace matters such as wages, benefits, schedules, and to resolve issues.</li> </ul>	Join Usl  If you're interested in organizing a union at your facility, we can help fill out the following confiderabl form, and we will be in touch.  First name*  Last name*  Ennall address*  Phone*  City  State  0  ZiP Code  Hospital name.*  City you work in:*  I want to organize with NNU  Ves  Are you a registered nurse?*  O're you work and you current member with NNU?*  Are you a current member with NNU?*  Are you a current member with NNU?*  * denotes required field
Union Promises	<ul> <li>NNU and other unions might make a lot of promises, and they might sound appealing. But the union's promises aren't automatically granted, and the union can't require that certain things be negotiated, even if it says it can.</li> <li>A union cannot guarantee higher pay or better benefits.</li> <li>A union cannot require us to hire new nurses or direct how units are staffed.</li> <li>A union cannot change hospital policies or procedures.</li> </ul>	NLRB Basic Guide to the National Labor Relations Act



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Collective Bargaining  OCOC	<ul> <li>It typically takes a long time to reach a first-time bargaining agreement in healthcare - 528 days.</li> <li>While you wait for a contract, changes cannot be made on wages, benefits, and other terms and conditions of employment unless the union specifically agrees. Sometimes, a union will withhold agreement on employer proposals to secure an agreement on another issue that is important to the union.</li> </ul>	In our region, nurses at two hospitals are experiencing this state of uncertainty firsthand. At Ascension Saint Agnes Hospital, nurses voted to unionize in November 2023, and as of May 2025 are still without a contract, and in fact, attempted to decertify their union earlier this year.  Similarly, in Washington, D.C., nurses at George Washington University voted to unionize in July 2023, and as of May 2025, a contract has not been reached.  NLRB Collective Bargaining Rights
Dues	<ul> <li>If our nurses were unionized, they would likely be required to pay dues or fees as determined by NNU, which can accumulate over time.</li> <li>For full-time RNs, NNU dues are currently 2.2 times your base hourly wage rate every month, which could add up to as much as \$2,042.64 per year.</li> <li>For part-time/per diem RNs working 12 hours or less per week, per pay period, dues are 50% of the full-time RN dues amount, which could add up to as much as \$1,021.33 per year.</li> <li>Many unions spend more on their own administration than they do on their members. For example, NNU spends 70.1% of dues money to pay for their own NNU employees' salaries and benefits, business expenses like travel and office space, political donations, and other internal expenses.</li> </ul>	According to the Bureau of Labor Statistics, the typical household in D.C. spends \$6,483 annually on groceries. So that means if you were paying dues, you'd lose more than 21% of your yearly grocery budget.  Calculate your dues online at your nurses facts website.  The NNU's official financial report filed with the Office of Labor-Management Standards, called the LM2, is available on the Department of Labor's website.



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What Could Be Different With a Union?	Under a collective bargaining agreement, simple issues can become more challenging to resolve because the focus is on the bargaining unit, not on you and your individual needs.  Pay	Ask about what happened at MWHC when hospital leaders asked NNU to open the contract with its nurses one year early so that the hospital could increase their pay–the NNU said no.
	Generally, in unionized workplaces, pay increases are negotiated collectively. This means that your individual accomplishments and successes are less likely to result in career advancement or pay increases.  Scheduling	
	<ul> <li>A union contract could prevent your ability:</li> <li>To leave work early to accommodate your child's sports event, go to a concert, or another after-work activity.</li> <li>To flex to another unit to work more hours and/or overtime.</li> <li>To modify your shift's start or end time to accommodate an urgent need or personal matter.</li> </ul>	
	<ul> <li>Most notably for many associates, the relationships with their supervisors, and even between nurses and other associates, might change in a unionized workplace. Instead of going to your supervisor to resolve certain work issues, unionized associates would have to talk with a union representative first.</li> <li>The collaboration and ease of flexibility in working alongside colleagues can be strained by the terms of the labor contract. This can cause misunderstanding and resentment that harms working relationships and, ultimately, affects patient care.</li> </ul>	



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Staffing	Unions can't mandate staffing. Importantly, unions can't create more nurses. The staffing needs of healthcare aren't unique to MedStar, and we are being more aggressive than ever in our recruitment and retention activities.  The recent "safe staffing" bill in the Maryland General Assembly did not include a direct staffing mandate. The bill would have required us to expand our nurse-driven staffing huddles to include ancillary team members from Environmental Services, Facilities, and Food and Nutrition.  Currently, we review staffing internally four times a day with leaders and frontline charge nurses, and twice a day with our sister hospitals. Our priority is to ensure the staffing resources our nurses have established as a standard are in place, with our charge nurses free from direct patient care.  Without question, we support safe staffing and value the voice of our nurses in ensuring quality patient care.	"unionized hospitals are more likely to navigate RN shortages by temporarily closing beds, limiting inpatient admissions, and delaying elective procedures."  - ScienceDirect.com
Union Elections  VOTE	When the NLRB holds a union election, the outcome is determined by a simple majority (50%+1) of those who vote.  That means if only 20 people vote and 11 people vote "yes," ALL nurses in our unit would be unionized regardless of whether they voted.  That's why it's so important to let your voice be heard now - if you don't want to be unionized, now is the time to speak up.	NLRB Conducting an Election



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Don't Unions Do Good Things?	Historically, labor unions have helped shape some positive changes in business and industry. Today, however, the role of labor unions has evolved and is often focused more on the goals of the union leadership than on the individual needs of its members. Unions also use their influence to lobby for political causes that may or may not align with your personal beliefs.  We encourage you to research if unionization can address the issues most important to you, how unions spend its members' dues money, and how being unionized would affect your work experience and your personal life.	"The evidence for unions' impact on other outcomes, particularly non-wage nurse outcomes, is limited and mixed."  - Academy Health Abstract  "unionized nurses were less likely to report turnover, but were more likely to experience job dissatisfaction."  - National Library of Medicine