

FEDERAL MEDIATION AND CONCILIATION SERVICE

Washington, D. C.

"Mediation's Role in Non-Profit Hospitals
Under the New Law"

An Address

by

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Federal Mediation and Conciliation Service

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LET ME SAY IT'S A REAL PLEASURE
TO BE HERE.

I'VE ALWAYS HAD A LOT OF FAITH
IN HOSPITALS. IN FACT, I WAS BORN IN ONE.

BUT SOMETHING HAPPENED A FEW
YEARS AGO THAT CAUSED ME TO WORRY JUST
A LITTLE. I WENT INTO A HOSPITAL -- NOTHING
SERIOUS, YOU UNDERSTAND -- AND GOT OUT
IN JUST A FEW DAYS. AND WHEN I GOT HOME,
THERE WAS THE BILL WAITING FOR ME. BUT
THAT DIDN'T TROUBLE ME AS MUCH AS THE WAY
IT WAS ADDRESSED:

"TO THE ESTATE OF W. J. USERY, JR."

I SUPPOSE EVEN HOSPITALS CAN'T
AFFORD TO TAKE CHANCES ON GETTING PAID.

TAKING CHANCES, HOWEVER, IS A
PART OF LIFE. AND ALL OF US TAKE STEPS TO
MINIMIZE RISKS.

THE STORY GOES THAT WHEN KING ARTHUR WAS RIDING OFF TO WAR, HE DECIDED TO MINIMIZE HIS RISKS ON THE HOME FRONT BY PUTTING A CHASTITY BELT ON QUEEN GUINEVERE -- AND GIVING THE KEY TO SIR LANCELOT.

THE KING AND HIS PARTY HAD ONLY BEEN GONE ABOUT AN HOUR WHEN SIR LANCELOT-- HIS HORSE SWEATING AND PANTING -- CAME RIDING UP TO THE KING.

"SIRE," HIS FAITHFUL KNIGHT SHOUTED, "YOU GAVE ME THE WRONG KEY!"

HERE I HAVE A CONFESSION TO MAKE.

I WASN'T ORIGINALLY PLANNING TO BE HERE TODAY. IN FACT, I HAVE A SPEECH TO GIVE TOMORROW IN HAWAII, AND IT MEANS TAKING A HELICOPTER FROM HERE TO THE AIRPORT THIS AFTERNOON TO GET THERE IN TIME.

BUT WITH THE NEW LEGISLATION EXTENDING COVERAGE UNDER THE NATIONAL LABOR RELATIONS ACT TO NONPROFIT HOSPITALS, I FELT LIKE SIR LANCELOT---THE SITUATION WAS SO SERIOUS, I JUST HAD TO MAKE A SPECIAL TRIP.

THE SITUATION IS SERIOUS--BUT NOT OMINOUS.

I DON'T SEE ANY GREAT WAVE OF STRIKES GROWING OUT OF THE NEW LEGISLATION, AND I'LL EXPLAIN WHY.

BUT FIRST I'D LIKE TO DISCUSS LABOR RELATIONS IN GENERAL IN ORDER TO PUT CURRENT HOSPITAL LABOR-MANAGEMENT RELATIONS IN PERSPECTIVE.

I AM SURE THAT EACH AND EVERY ONE OF YOU IS AWARE OF THE NURSES' STRIKE THAT OCCURRED EARLIER THIS SUMMER IN THE SAN FRANCISCO AREA.

IT WAS THE LARGEST AND LONGEST NURSES STRIKE IN OUR HISTORY. MORE THAN 4,000 NURSES WALKED OFF THEIR JOBS IN 43 HEALTH CARE FACILITIES.

AND IT WAS ONE OF THE MOST INTERESTING NEGOTIATIONS I'VE EVER BEEN INVOLVED IN. FOR ONE THING, THERE WERE 35 BEAUTIFUL WOMEN AND ONLY ONE MAN ON THE NURSES' NEGOTIATING COMMITTEE.

BY THE TIME I HAD BEEN INVITED TO HELP THE PARTIES REACH A SETTLEMENT, BOTH SIDES WANTED IT ENDED.

THE NURSES HAD SOME VALID DEMANDS, INCLUDING WAGES, HOURS AND PROPER TRAINING IN THE USE OF NEW EQUIPMENT. AFTER A FINAL BARGAINING SESSION THAT LASTED 43 LONG AND GRUELLING HOURS, WE WERE ABLE TO WORK OUT A SETTLEMENT.

SHORTLY AFTER THAT AGREEMENT WAS REACHED, CITY EMPLOYEES IN BALTIMORE WENT ON STRIKE.

NOW YOU'RE PROBABLY ASKING WHAT DOES THAT HAVE TO DO WITH HOSPITALS AND HEALTH CARE?

NOTHING IN AND OF ITSELF. BUT THE BALTIMORE STRIKE IS JUST ONE MORE EXAMPLE OF THE GROWING NUMBER OF WORK STOPPAGES BY PUBLIC EMPLOYEES WHO, LIKE EVERYONE ELSE, ARE TRAPPED BY INFLATION AND WANT HELP.

I COULD GO FURTHER AND DRAW ATTENTION TO THE NUMBER OF TEACHERS' STRIKES WE'VE SEEN IN RECENT YEARS.

TEN OR TWENTY YEARS AGO, IT WAS UNHEARD OF FOR TEACHERS TO GO ON STRIKE-- MUCH LESS NURSES.

WHAT HAS HAPPENED?

TWO THINGS.

FIRST, THE TRADE UNION MOVEMENT-- AND THE COLLECTIVE BARGAINING PROCESS-- HAS SPREAD FROM BLUE COLLAR CRAFTS AND INDUSTRIES WHERE IT BEGAN TO WHITE COLLAR AND SERVICE EMPLOYEES.

SECOND, INFLATION HAS PUT THE SQUEEZE ON WORKERS AND MANAGERMENTS EVERYWHERE. LET'S TALK ABOUT THAT FOR A MOMENT.

IT'S OBVIOUS THAT WE CANNOT GO ON SUFFERING DOUBLE-DIGIT INFLATION--AS WE HAVE FOR THE PAST YEAR--WITHOUT EVENTUALLY SUFFERING A SERIOUS BREAKDOWN IN OUR ECONOMY.

WE HAVE ALL SEEN THE CRACKS AND STRAINS THAT INFLATION IS CAUSING, NOT JUST IN AMERICA, BUT THROUGHOUT THE WORLD.

TAKE THE PRICE OF BEEF. IT'S TOO HIGH FOR MOST HOUSEWIVES AND TOO LOW FOR MOST CATTLE PRODUCERS.

THE HIGH COST OF MONEY IS ANOTHER DISTORTION. THE HIGH INTEREST RATE THAT MONEY NOW COMMANDS IS DRIVING INVESTORS AWAY FROM THE STOCK MARKET. IT'S MAKING BUSINESS LOANS AND EVEN HOME LOANS DIFFICULT TO OBTAIN. AND EXPENSIVE.

I DON'T NEED TO GO INTO WHAT INFLATION IS DOING TO THE CONSUMERS--ESPECIALLY THE LOW AND MIDDLE-INCOME FAMILIES.

I POINT THIS OUT AT THE BEGINNING BECAUSE AS WE GO ON TO DISCUSS HOSPITAL LABOR-MANAGEMENT RELATIONS, IT IS IMPORTANT TO KEEP IN MIND THAT WE ARE NOT TALKING ABOUT SOMETHING THAT IS ONLY HAPPENING IN THE HEALTH-CARE INDUSTRY, WE ARE TALKING ABOUT TRENDS AND PROBLEMS THAT ARE AFFECTING THE ENTIRE NATION.

HOSPITALS, HOWEVER, ARE DIFFERENT FROM OTHER INDUSTRIES. YOU KNOW THIS. I KNOW THIS. AND SO DOES THE CONGRESS OF THE UNITED STATES.

AND THAT'S WHY CONGRESS DID MORE THAN JUST AMEND TAFT-HARTLEY TO INCLUDE NONPROFIT HOSPITALS.

CONGRESS TOOK INTO CONSIDERATION THE SERIOUS CONSEQUENCES THAT A HOSPITAL STRIKE CAN HAVE, NOT ONLY ON THE HOSPITALS AND THEIR WORKERS, BUT ON THE COMMUNITIES THEY SERVE.

AND CONGRESS INCLUDED IN THE NEW LEGISLATION SPECIAL BARGAINING REQUIREMENTS FOR HOSPITALS AND HEALTH CARE FACILITIES DESIGNED TO INSURE THAT EVERY POSSIBLE APPROACH TO A PEACEFUL SETTLEMENT IS FULLY EXPLORED BEFORE A STRIKE CAN BE CALLED.

WHAT DOES THE NEW LEGISLATION REQUIRE, AND HOW DOES IT DIFFER FROM THE REQUIREMENTS PLACED ON OTHER INDUSTRIES?

FIRST, IT REQUIRES EITHER PARTY TO NOTIFY THE OTHER 90 DAYS IN ADVANCE OF ANY CONTRACT MODIFICATION OR TERMINATION.

SECOND, IT REQUIRES THE PARTY TO NOTIFY THE FEDERAL MEDIATION SERVICE AT LEAST 60 DAYS BEFORE ANY CONTRACT MODIFICATION OR TERMINATION.

THIRD, THE LEGISLATION MAKES IT MANDATORY THAT WE--THE FEDERAL MEDIATION AND CONCILIATION SERVICE--BECOME IMMEDIATELY AND ACTIVELY INVOLVED IN TRYING TO BRING ABOUT A PEACEFUL SETTLEMENT. IN DISPUTES IN OTHER INDUSTRIES WE BECOME INVOLVED WHEN INVITED OR WHEN WE BELIEVE THAT IT IS IN THE BEST NATIONAL INTEREST.

FOURTH, THE LAW GIVES UP SPECIAL AUTHORITY TO APPOINT A BOARD OF INQUIRY TO LOOK INTO A DISPUTE AND TO MAKE RECOMMENDATIONS FOR A SETTLEMENT. IF SUCH A BOARD IS APPOINTED, IT MUST BE ESTABLISHED AT LEAST 20 DAYS BEFORE THE CONTRACT EXPIRES, AND IT MUST MAKE A FULL WRITTEN REPORT TO BOTH PARTIES AT LEAST 15 DAYS BEFORE THE CONTRACT ENDS.

LET ME EMPHASIZE THAT SUCH BOARDS ARE NOT MANDATORY. THE LAW SAYS THEY MAY BE ESTABLISHED WHEN (QUOTE)"A THREATENED OR ACTUAL STRIKE OR LOCKOUT AFFECTING A HEALTH CARE INSTITUTION WILL, IF PERMITTED TO OCCUR OR CONTINUE, SUBSTANTIALLY INTERRUPT THE DELIVERY OF HEALTH CARE IN THE LOCALITY CONCERNED..."(END OF QUOTE).

OBVIOUSLY THIS IS A MATTER OF JUDGMENT...A DELICATE DETERMINATION WHICH WE MUST MAKE. WE ARE WORKING NOW TO ESTABLISH SOME CRITERIA TO HELP US DETERMINE WHEN A BOARD SHOULD BE APPOINTED.

I WANT YOU TO KNOW THAT AS DIRECTOR OF THE FEDERAL MEDIATION AND CONCILIATION SERVICE, I RECOGNIZE THE GREAT RESPONSIBILITY THAT IS INVOLVED IN MAKING SUCH A DECISION. LOGIC TELLS US THAT IF THE APPOINTMENT OF BOARDS OF INQUIRY IS TO BE EFFECTIVE. . . IF THIS ACTION IS TO CARRY SUFFICIENT WEIGHT TO ADD TO THE PEACEFUL RESOLUTION OF DISPUTES--THEN IT MUST NOT BE USED INDISCRIMINATELY.

FINALLY, THE LAW REQUIRES THAT ANY UNION MUST GIVE AT LEAST 10 DAYS' NOTICE BEFORE CALLING A STRIKE. THIS PROVISION WAS PUT INTO THE LAW SO THAT A HOSPITAL COULD TAKE THE NECESSARY STEPS TO TRANSFER PATIENTS AND OTHERWISE INSURE THAT COMMUNITY HEALTH IS NOT AFFECTED, OR AFFECTED ONLY MINIMALLY.

THE SAME 10-DAY NOTICE IS REQUIRED WHEN A STRIKE IS CALLED DURING INITIAL CONTRACT NEGOTIATIONS--EXCEPT THAT AT LEAST 30 DAYS NOTICE IN ADVANCE MUST BE GIVEN TO THE HOSPITAL AND TO THE FEDERAL MEDIATION SERVICE OF THE DISPUTE BEFORE A STRIKE CAN BE CALLED. THIS MEANS THAT IN ALL AT LEAST 40 DAYS MUST ELAPSE BEFORE A STRIKE CAN OCCUR DURING AN INITIAL CONTRACT NEGOTIATION.

FMCS HAS THE SAME POWER TO APPOINT A BOARD OF INQUIRY DURING AN INITIAL CONTRACT NEGOTIATION AS IT DOES DURING CONTRACT NEGOTIATIONS, EXCEPT THAT THE BOARD MUST BE ESTABLISHED WITHIN 10 DAYS RATHER THAN THIRTY.

NOW I HAVE BEEN ASKED FREQUENTLY SINCE THE LAW WAS PASSED WHETHER THIS MACHINERY I HAVE JUST DESCRIBED WILL PREVENT WORK STOPPAGES. TO BE HONEST WITH YOU, THE ANSWER IS "NO."

THIS LAW HAS BEEN DESIGNED TO REDUCE CONFLICTS THROUGH THE APPLICATION OF TRIED AND TESTED COLLECTIVE BARGAINING METHODS-- AND WE WILL DO OUR BEST TO MAKE IT WORK.

BUT THE MACHINERY ITSELF CANNOT
PREVENT STRIKES.

ONLY THE PARTIES INVOLVED IN NEGOTIATIONS CAN DO THAT.

MANY PEOPLE ASK ME FROM TIME TO TIME, WHY DIDN'T CONGRESS SIMPLY PASS A LAW MAKING STRIKES ILLEGAL? THE ANSWER IS THAT HISTORICALLY SUCH LAWS JUST DON'T WORK.

WE HAVE HAD SUCH LAWS IN THE PAST, AND WE PAID A HEAVY PRICE FOR THEM IN THE BLOODY WARFARE BETWEEN LABOR AND MANAGEMENT IN THE RAILROAD INDUSTRY, IN THE MINES, IN THE STEEL MILLS AND IN THE TEXTILE MILLS.

IN MORE RECENT YEARS, NO-STRIKE LAWS HAVE LARGELY BEEN LIMITED TO PUBLIC EMPLOYEES AT THE LOCAL, STATE AND FEDERAL LEVEL. THESE LAWS EXIST ON THE BASIC THEORY THAT NO ONE HAS A RIGHT TO CALL OR TAKE PART IN A STRIKE AGAINST THE PUBLIC.

ARGUMENTS HAVE BEEN MADE ON BOTH SIDES OF THE QUESTION FOR MANY YEARS.

YET THE FACT IS THAT WE HAVE WITNESSED A GROWING NUMBER OF WORK STOPPAGES AGAINST LOCAL AND STATE GOVERNMENTAL UNITS. EVEN AT THE FEDERAL LEVEL--WHERE IT IS A FELONY TO STRIKE--WE SAW POSTMEN WALK OUT IN 1970 AND WE HAVE SEEN A SMATTERING OF SMALLER AND BRIEF WORK STOPPAGES SINCE.

IN MANY CASES, THESE LAWS HAVE BEEN RIGIDLY ENFORCED, WITH UNION LEADERS BEING JAILED AND THEIR ORGANIZATIONS FINED HEAVILY. AND STILL THESE AMERICAN WORKERS STRIKE WHEN THE GRIEVANCES BECOME SUFFICIENTLY SEVERE -- AND WHEN THERE IS NO OTHER ALTERNATIVE ACTION THAT CAN BE TAKEN.

THE NEW COLLECTIVE BARGAINING LAW FOR NONPROFIT HOSPITALS AND THEIR EMPLOYEES PROVIDES THAT ALTERNATIVE. AND IF WE USE IT WISELY, IT WILL WORK WELL.

IT GIVES US THE OPPORTUNITY TO INSURE THAT EVERY PEACEFUL EFFORT CAN BE MADE TO SETTLE A DISPUTE SHORT OF A WORK STOPPAGE.

ONE OF THE FIRST THINGS I DID EVEN AS THE LAW WAS BEING CONSIDERED WAS TO DRAW TOGETHER AS MUCH INFORMATION ON HOSPITAL LABOR-MANAGEMENT RELATIONS AS I COULD.

SOME OF THE THINGS I FOUND SURPRISED ME, AND MAYBE THEY'LL SURPRISE YOU.

AS MANY OF YOU KNOW PROPRIETARY HOSPITALS HAVE BEEN INCLUDED UNDER TAFT-HARTLEY FOR SEVERAL YEARS. WORKERS IN THESE HOSPITALS COULD FORM THEIR OWN UNIONS LIKE ANY OTHER PRIVATE EMPLOYER.

SO IT WOULD SEEM ON THE SURFACE THAT A HIGHER PERCENTAGE OF PROPRIETARY HOSPITALS WOULD HAVE CONTRACTS. BUT THIS IS NOT THE CASE.

A 1970 SURVEY BY THIS ASSOCIATION FOUND THAT WHILE 12.4 PERCENT OF NONPROFIT HOSPITALS HAD CONTRACTS, ONLY 8 PERCENT OF ALL PROPRIETARY HOSPITALS WERE ORGANIZED.

IN 1973, A SECOND SURVEY FOUND THAT THE PERCENTAGE OF HOSPITALS WITH CONTRACTS HAD RISEN AMONG BOTH PROPRIETARY AND NON-PROFIT HOSPITALS. BUT AGAIN NONPROFIT HOSPITALS HAD A GREATER PERCENTAGE OF CONTRACTS--15.7 PERCENT COMPARED TO 12.4.

THESE FINDINGS TELL ME THAT ORGANIZATION EFFORTS AS A WHOLE HAVE NOT BEEN HELD BACK IN NONPROFIT HOSPITALS BECAUSE OF THEIR EXEMPTION FROM TAFT-HARTLEY.

SOME OTHER STATISTICS WERE EQUALLY EYE-OPENING.

A 10-YEAR SURVEY OF HOSPITAL WORK STOPPAGES, COMPILED BY THE BUREAU OF LABOR STATISTICS FOR THE PERIOD 1962 THROUGH 1971, FOUND THAT APPROXIMATELY TWO-THIRDS OF ALL DAYS LOST TO STRIKES RESULTED FROM UNION RECOGNITION EFFORTS. ONLY ABOUT 20 PERCENT OF TOTAL DAYS LOST WERE ATTRIBUTED TO STRIKES OVER WAGES.

THIS SUGGESTS THAT UNION EFFORTS TO ORGANIZE--RATHER THAN MILITANCY OVER WAGES-- HAS BEEN THE GREATEST THREAT TO HOSPITAL LABOR-MANAGEMENT PEACE.

AND THIS SUPPORTS THE PROPOSITION PUT FORTH BY SEN. ROBERT TAFT JR. THAT EXTENDING THE NATIONAL LABOR RELATIONS ACT TO COVER NONPROFIT HOSPITALS COULD ACTUALLY REDUCE--NOT INCREASE--THE NUMBER OF STRIKES.

ON THE OTHER HAND, I THINK WE SHOULD ALSO RECOGNIZE THAT THE PASSAGE OF THIS LEGISLATION HAS GIVEN A LEGAL AND PSYCHOLOGICAL SHOT IN THE ARM TO UNION EFFORTS IN THE HEALTH CARE INDUSTRY.

LABOR ORGANIZATIONS THEMSELVES SAY THAT THEY WILL INTENSIFY THEIR EFFORTS. AND I THINK IT IS SAFE TO SAY THAT THE PERCENTAGE OF HOSPITALS WITH CONTRACTS WILL RISE SHARPLY DURING THE NEXT FEW YEARS.

NEITHER YOU, NOR I, NOR THE UNIONS-- FOR THAT MATTER--WANT STRIKES. EVERYBODY WOULD BE MUCH HAPPIER IF CONTRACTS COULD BE NEGOTIATED PEACEABLY.

THIS IS THE GOALS OF THE NEW LEGISLATION. AND IT IS THE GOAL OF THE FEDERAL MEDIATION AND CONCILIATION SERVICE IN ALL OF ITS EFFORTS.

BUT IF WE ARE GOING TO HAVE HOSPITAL LABOR-MANAGEMENT PEACE IN THE DECADE AHEAD, BOTH SIDES ARE GOING TO HAVE TO FACE SOME HARD REALITIES.

FIRST, HOSPITAL WAGE SCALES ON THE WHOLE ARE LOW. AND NOT WITHOUT REASON. FOR YEARS HOSPITALS WERE LOOKED UPON PRIMARILY AS SEMI-CHARITABLE ENTERPRISES PROVIDING HEALTH SERVICES FOR THEIR COMMUNITIES. MANY OF THE FIRST WERE STAFFED LARGELY BY VOLUNTEERS.

TODAY HOSPITALS STILL HAVE VOLUNTEER "CANDY-STRIPERS" AND HOSPITAL AUXILIARIES WHO DONATE THEIR MEMBERS' SERVICES.

IN ADDITION, MUCH OF THE LABOR EMPLOYED BY HOSPITALS HAS COME FROM THE RANKS OF WOMEN AND MINORITY GROUPS, WHO HAVE TRADITIONALLY BEEN UNDERPAID.

AS A NATION, WE NO LONGER ACCEPT THE IDEA THAT WOMEN AND MEMBERS OF MINORITIES SHOULD BE DISCRIMINATED AGAINST IN TERMS OF WAGES. CONGRESS HAS PASSED STRONG LAWS THAT ARE BEING ENFORCED WITH INCREASED DETERMINATION TO END ALL ECONOMIC DISCRIMINATION.

IT HAS NOT BEEN EASY FOR HOSPITALS TO SUDDENLY SWITCH PAST PRACTICES AND COME UP WITH LARGE SUMS OF MONEY TO MAKE SUBSTANTIAL WAGE INCREASES POSSIBLE.

BUT WHETHER THE PRESSURE FOR WAGE ADJUSTMENTS COMES FROM THE LAW. . . OR FROM A TIGHT LABOR MARKET. . . OR FROM LABOR NEGOTIATIONS, IT IS OBVIOUS THAT CHANGES ARE COMING TO YOUR INDUSTRY.

WHEN IT COMES TIME TO CONSIDER HOW BEST TO USE THE PRECIOUS DOLLARS YOU HAVE UNDER YOUR CONTROL, I URGE YOU TO REMEMBER THAT HOSPITALS--LABOR INTENSIVE AS THEY ARE--MUST GIVE A HIGH PRIORITY TO THE LEGITIMATE NEEDS OF THEIR EMPLOYEES SO THAT THEY, IN TURN, WILL HAVE THE DESIRE TO GIVE THEIR VERY BEST TO THE HOSPITAL.

I HOPE THAT YOU KNOW THAT I'M NOT PAINTING ALL HEALTH CARE INSTITUTIONS BLACK WITH THE SAME BRUSH. MANY HOSPITALS TODAY PAY EXCELLENT WAGES. BUT MANY STILL DON'T.

NOW PLEASE DON'T THINK I'M PREACHING AT YOU. IT'S JUST THAT BACK IN GEORGIA WHERE I COME FROM EVERYBODY EITHER IS A PREACHER, KNOWS A PREACHER, OR HAS ONE IN HIS FAMILY.

I JUST CAN'T RESIST A CALL THAT MIGHT HELP SMOOTH THE WAY TO LABOR-MANAGEMENT PEACE.

BEFORE I STEP DOWN I THINK THAT I SHOULD SAY A FEW WORDS ABOUT BARGAINING.

THE HARDEST, BITTEREST, AND LONGEST STRIKES IN OUR HISTORY HAVE COME ABOUT ON THE ISSUE OF UNION RECOGNITION. THIS IS A LESSON THAT ALL OF US SHOULD REMEMBER.

THE EXTENSION OF THE NATIONAL LABOR RELATIONS ACT TO NONPROFIT HOSPITALS MEANS THAT THE PROCEDURES FOR UNION ORGANIZATION AND RECOGNITION UNDER THE NATIONAL LABOR RELATIONS BOARD NOW APPLIES. AND ALONG WITH THE CONGRESS, I THINK THIS IS A WISE MOVE .

I AM NOT SAYING THAT YOU MUST WELCOME UNION ORGANIZERS WITH DONUTS AND COFFEE. BUT I AM SUGGESTING THAT YOU CONSIDER YOUR REACTIONS CAREFULLY. AND IF YOUR EMPLOYEES DO FORM A UNION, THEN SUGGEST THAT YOU TAKE THE INITIATIVE TO BARGAIN IN GOOD FAITH.

IF YOU HAVEN'T YET HIRED A TRUE PROFESSIONAL IN THE FIELD OF LABOR-MANAGEMENT RELATIONS, LET ME SUGGEST THAT YOU GIVE SUCH A MOVE TOP PRIORITY. JUST AS YOU HIRE TRUE PROFESSIONALS TO RUN YOUR KITCHENS, YOUR X-RAY FACILITIES AND YOUR CARDIAC UNITS, YOU WILL NEED THE SERVICES OF A LABOR RELATIONS PROFESSIONAL WHO KNOWS THE PROBLEMS OF HOSPITALS.

COLLECTIVE BARGAINING HAS BECOME A SKILL AND AN ART--A SOPHISTICATED COMBINATION OF HUMAN AND ECONOMIC RELATIONS. IT CAN FUNCTION BEAUTIFULLY WHEN IT IS PRACTICED BY A PERSON WITH THE TALENT--THE "FEEL"--FOR WHAT IS RATIONAL, JUST AND FAIR. AND IT CAN--AND OFTEN DOES--FALL APART WHEN LEFT TO THE INEPT HANDS OF THE AMATEUR.

YOU WILL SAVE TIME AND MONEY AND HEARTACHES BY PLACING YOUR LABOR-MANAGEMENT RELATIONS IN COMPETENT, TRAINED HANDS.

AS YOU CAN SEE, I ENJOY TALKING ABOUT COLLECTIVE BARGAINING. AND I COULD PROBABLY SEND SPEND ANOTHER HOUR UP HERE DISCUSSING THE SUBJECT.

BUT I RECALL THE EXPERIENCE A FEW YEARS AGO OF A PROMINENT GOVERNMENT OFFICIAL WHO WAS ASKED TO SPEAK TO A LARGE GATHERING LIKE THIS. HE TALKED. . . AND HE TALKED. . . AND HE TALKED.

AFTER ABOUT 45 MINUTES, ONE OF THE MEMBERS OF THE AUDIENCE GOT UP TO GO TO THE REST ROOM. ON HIS WAY BACK, HE MET ANOTHER MEMBER MAKING THE SAME TRIP.

"HAS HE FINISHED YET?" THE FIRST GENTLEMAN ASKED.

"HE FINISHED 20 MINUTES AGO," THE SECOND MAN REPLIED. "HE JUST HASN'T STOPPED TALKING YET."

WELL, EVER SINCE THEN I HAVE BELIEVED THAT THE BEST TIME TO STOP TALKING IS WHEN I'M FINISHED.

I DO, HOWEVER, WANT TO CONGRATULATE THIS ASSOCIATION FOR HELPING ITS MEMBER HOSPITALS COPE WITH THE INITIATIVE YOU'VE SHOWN ALL DURING THE DISCUSSIONS IN CONGRESS ON AMENDING THE ACT...FOR THE INITIATIVE THAT YOU HAVE TAKEN SINCE THEN TO COME TO TERMS WITH WHAT IT MEANS...FOR THE INITIATIVE YOU HAVE DISPLAYED IN MAINTAINING A REGULAR LIAISON WITH OUR AGENCY.

I APPRECIATE THE ATTITUDE OF FULL COOPERATION YOU HAVE SHOWN IN RESPONSE TO OUR PLANS TO CONDUCT LABOR RELATIONS SEMINARS AND TRAINING PROGRAMS IN THE HEALTH CARE FIELD.

THIS ATTITUDE OF CARE, COUPLED WITH YOUR IMMEDIATE ACTION, IS SURE TO ADD TO OUR CHANCES OF GAINING ALL OF THE BENEFITS AVAILABLE UNDER THE NEW LEGISLATION.

I BELIEVE THAT YOUR EFFORTS WILL PAY OFF HANDSOMELY IN BETTER LABOR-MANAGEMENT RELATIONS AND IN BETTER HEALTH CARE FOR THE NATION.

LET ME SAY, IF I HAVEN'T SAID IT BEFORE-- AND IF I HAVE, LET ME SAY IT AGAIN--THAT I AND ALL THE FMCS MEDIATORS WILL WORK WITH YOU IN ANY WAY WE CAN FOR THE COMMON GOALS WE SEEK--PEACEFUL, FAIR AND JUST SETTLEMENTS OF LABOR-MANAGEMENT DISPUTES.

IN PURSUIT OF THIS GOAL, I AM ANNOUNCING HERE THE ESTABLISHMENT OF THE NATIONAL LABOR- MANAGEMENT HEALTH CARE ADVISORY COMMITTEE.

MEMBERS OF YOUR ASSOCIATION AND OTHER LEADERS IN YOUR FIELD, KEY LABOR OFFICIALS, PROMINENT REPRESENTATIVES FROM THE WORLD OF COLLECTIVE BARGAINING AND PUBLIC OFFICIALS WILL BE NAMED TO THE COMMITTEE.

IT IS MY HOPE THAT THIS COMMITTEE WILL WANT TO EXPLORE THE POTENTIAL GOOD THAT COULD COME FROM STATE AND REGIONAL COMMITTEES WITH A SIMILARLY BROAD MIX.

IT HAS BEEN SHOWN THAT COMMITTEES CONSISTING OF REPRESENTATIVES FROM LABOR, MANAGEMENT, GOVERNMENT AND THE PUBLIC CAN BE HIGHLY EFFECTIVE IN THE PROMOTION OF RESPONSIBLE AND REASONABLE COLLECTIVE BARGAINING PRACTICES.

THIS IS JUST THE FIRST IN A WIDE ARRAY OF PLANS THAT WERE DISCUSSED ALL DAY YESTERDAY IN A MEETING WITH OUR SEVEN REGIONAL DIRECTORS AND OTHER FMCS LEADERS. EACH AND EVERY ONE OF US IS COMMITTED TO DOING EVERYTHING WE POSSIBLY CAN TO BRING A CLIMATE OF UNDERSTANDING AND GOOD WILL TO LABOR-MANAGEMENT RELATIONS IN THE HEALTH-CARE FIELD.

AS I CONCLUDE, I WOULD LIKE TO TAKE JUST A MINUTE OF YOUR TIME TO MAKE AN OBSERVATION.

YOUR BUSINESS IS HEALING. MINE IS PEACEMAKING. I CAN THINK OF NO OTHER PERIOD IN THE PEACE-TIME HISTORY OF OUR BEAUTIFUL NATION WHEN HEALING AND PEACEMAKING WERE IN GREATER DEMAND.

WE HAVE JUST EXPERIENCED SOME TRULY DIFFICULT TIMES. OUR SYSTEM HAS WEATHERED THE STORM--AND HAS EMERGED STRONG AND FREE.

YES, WE STILL HAVE SERIOUS CHALLENGES AHEAD OF US.

LIKE MOST AMERICANS, I AM CONFIDENT THAT WE CAN MEET TODAY'S CHALLENGES BY CALMLY, INTELLIGENTLY AND LOGICALLY RENEWING OUR COMMITMENT TO THE NEVER-ENDING SEARCH FOR THE BETTER LIFE--FOR THE LIFE WHERE EVERY PERSON CAN LIVE IN DIGNITY AND PEACE.

WE ARE FORTUNATE TO HAVE IN PRESIDENT FORD A MAN WHO POSSESSES THE CALM, THE INTELLIGENCE AND THE LOGIC TO GUIDE US TOWARD THAT GOAL.

SO IN LEAVING YOU TODAY, I ASK THAT
EACH OF YOU JOIN WITH ME IN PLEDGING TO DO
WHATEVER WE CAN TO HELP PRESIDENT FORD IN
HEALING OUR WOUNDS--AND BUILDING THE PEACE.