

AMERICAN HOSPITAL ASSOCIATION

GUIDELINES

HOSPITAL IN-SERVICE VOLUNTEER ACTIVITIES DURING AN EMPLOYEE WORK STOPPAGE

As a result of some of the problems faced by volunteers during a work stoppage by hospital employees, the American Hospital Association's Committee on Volunteers has developed these guidelines concerning the role of volunteers during a work stoppage. This document is intended as a guide for hospital administrators and managers and includes specific guidelines for the director of volunteer services and for volunteers. The guidelines were approved by the AHA House of Delegates on February 1, 1978.

When a hospital is struck by its employees, many important patient care services can only be provided through the generous services of volunteers. A hospital strike may result in substantial anxiety and fear on the part of patients. However, these can be minimized through the invaluable assistance of volunteers in calming patients and meeting many other patient needs. Such volunteer services provide needed continuity of patient care during a strike.

These guidelines are intended to assist hospital management in planning for the effective, proper, and safe use of volunteers during an employee work stoppage. Inasmuch as labor organization strategies vary depending on a number of factors, these guidelines should be modified in any given work stoppage in accordance with the recommendations of the institution's labor relations counsel.

Advance planning

The National Labor Relations Act (Taft-Hartley Act) requires that a labor organization give a 10-day notice to a health care institution prior to a strike. Although a hospital has this 10-day period to prepare for a strike, it should not wait until this "eleventh hour." Rather, it should prepare a standby plan long before a work stoppage becomes imminent. Included in the plan should be a comprehensive educational program to inform in-service volunteers about union strike and picket line tactics, employee reactions and how to cope with them, and pertinent provisions of the Taft-Hartley Act.

An employee work stoppage is usually a traumatic experience for everyone involved—employees, patients, management, and those volunteers who offer their services during a strike in an effort to keep the hospital open and functioning for the benefit of its patients and to ensure essential continuity in patient care. This trauma can be minimized or reduced if management plans its course of action prior to a work stoppage. If such a plan includes the utilization of in-service volunteers, the details should be thoroughly reviewed jointly by the director of volunteer services, the hospital administrator, and the labor relations counsel. Likewise, if the plan includes utilization of volunteers from the community, the policy should state how they will be screened, in what areas they will be utilized, and in what capacity they will be utilized and should designate the responsible management person.

Because in-service volunteers often work side by side with employees, some of the hospital's core in-service volunteers who-serve regularly in the hospital may find it difficult to remain untouched by the atmosphere created during an employee work stoppage. They may find it equally difficult to remain indifferent to the community's reaction to such labor-management disputes. Present-day labor relations has taken on a social as well as an economic character and therefore affects the institution's relationship to the community.

Plan of action

The following is designed to orient directors of volunteer services and volunteers to actions to be taken and precautions to be observed prior to, during, and following an employee work stoppage.

Prior to a work stoppage

- The director of volunteer services should be familiar with the hospital's policy concerning the use of both regular inservice volunteers and/or volunteers recruited from the community during an employee work stoppage. Some administrators prefer not to use in-service volunteers. Others attempt to augment in-service volunteers with specially recruited volunteers from the community.
- If the policy dictates the use of volunteers, the director of volunteer services and the hospital administrator should meet with the institution's labor relations counsel for guidance in determining the role and activities of volunteers during the work stoppage.
- The director of volunteer services should conduct an audit of volunteer skills. The information obtained by means of this audit will assist in assigning volunteers to tasks they can perform most effectively.
- A poll of the volunteers should be conducted in order to compile a list of those willing to serve during a work stoppage. This decision may be affected by an individual volunteer's philosophy and the attitude of immediate relatives concerning the volunteer's serving during a work stoppage. The poll should determine what assignments the volunteers prefer, how long they are willing or able to serve (days, weeks), which days, and the number of hours they are able to serve, and what shift they are willing to serve on daily.

- The administration should determine how many volunteers will be needed. This number may vary according to the number of employees involved in the work stoppage and the department(s) and skills involved.
- The minimum age of volunteers who will be permitted to serve should be established.

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During a work stoppage

The director of volunteers should:

- Arrange with management for volunteers to be escorted through the picket line when entering and leaving the hospitals. Safe entry and exit can be provided in several ways.
 - Management personnel can personally escort the volunteers.
 - 2. Local police officers assigned to the picket line can escort the volunteers.
 - 3. Arrangements can be made to meet the volunteers for each shift at a predetermined location away from the hospital, bring them in at one time in a convoy of autos or a bus, and return them to the pickup point at the end of their shift.
- Arrange for volunteers to be escorted to and from public transportation, if such action is indicated.
- Arrange for the safekeeping of volunteers' personal cars that are parked on hospital premises.
- Instruct volunteers not to wear their uniforms. A distinctive uniform makes, volunteers readily identifiable to pickets. Because striking employees often resent the use of volunteers that they call strike breakers, volunteers should not wear their uniforms.
- Issue volunteers official entry passes. These passes will make an escort available to them and will keep unauthorized persons out of the hospital.

Volunteers should:

- Obtain instructions from the supervisor on safety rules and practices related to job performance prior to beginning an assigned task.
- Check with the supervisor before performing patient care tasks that could subject the volunteer or the hospital to a malpractice suit or that legally should be performed by a specially qualified person.
- Immediately report to the supervisor the presence of a stranger in the work area. Union representatives will sometimes try to enter the hospital in order to learn who is

- working or to publicize an alleged lack of adequate patient care.
- Not communicate in any way, either at home or at the hospital, with persons from the news media. Volunteers who work in a limited area often are not aware of the total picture and may give information that is incomplete or inaccurate. All such inquiries should be referred to a person who is designated in advance by management.
- Not discuss with patients their personal feelings about the work stoppage, the predicted outcome, and so forth. Such talk could have an adverse effect on patients and should be done only in reply to a direct question and then in a discreet manner.
- Inform relatives how they can be reached at the hospital by telephone, if necessary. Normally, it is difficult to reach a person directly by telephone during a work stoppage because the hospital switchboard is open only to urgent calls.

Whether a record of volunteer hours served during a work stoppage should be maintained for service record purposes is a matter for each volunteer to decide. For a number of reasons, some volunteers may not wish to have such service made a matter of official record.

Following a work stoppage

Depending on the length, intensity, and outcome of the work stoppage, considerable bitterness may be evidenced by the strikers against those who crossed the picket line to work. Under the best of circumstances, a strained relationship will exist until wounds are healed and emotions cooled.

Volunteers can make an important contribution toward the return to normal employee relationships by:

- Participating in a poststrike orientation program attended by the hospital administrator, the labor relations counsel, and the director of volunteer services. At this time, volunteers should be advised of the outcome of the strike, the resentment they may encounter from employees, and possible responses to any employee ill will that may be directed at them or at others.
- Serving as ambassadors of good will in order to alleviate any employee bitterness.
- Refusing to take sides or become involved in employee arguments concerning the work stoppage, its conduct, or its outcome.

Although health care institutions do not wish to anticipate employee work stoppages, contingency plans for the continuity of patient care and for the possible use of in-service volunteers during such occurrences are needed.