



# MGB UNION FAQ

## Who is CIR?

- ✦ At MGB, **WE are CIR**—it is our union and we will make decisions about how it is run.
- ✦ **The Committee of Interns and Residents is the largest resident union in the country**, representing over 24,000 interns, residents and fellows. **Founded by residents in 1957**, members fight for improved working conditions and better patient care + advocate for important issues across the nation

## How much are dues and when will I start paying?

- ✦ **1.6%** – this was decided by a vote of CIR resident and fellow members. Dues cover stuff like contract negotiation expenses, union reps, office + support services, & legal services, to name a few!
- ✦ **No one pays dues until the union membership has voted to ratify a contract.** CIR members have never ratified a contract with benefits that do not outweigh the cost of dues.

## What are the benefits of a union? What will we bargain for in our first contract?

- ✦ As a union, we'll have the federally protected right to bargain over our terms and conditions of employment, including things like pay, benefits, leave time, and workplace policies. This will all be protected by a legally enforceable contract.
- ✦ **This is our union and what we bargain for will be up to us!** To determine what issues matter most to MGB housestaff, we'll distribute comprehensive surveys, polls and hold union meetings.

## I'm afraid of retaliation. Can they take away our benefits and perks?

- ✦ It is illegal for an employer to retaliate against their employees for unionizing, and that includes taking away benefits.
- ✦ Without a union MGB can change our working conditions at any time. **But with a union, we'll have the power to make positive changes in our jobs + protect and advance our interests.**



Scan me & sign your authorization card today!  
[bit.ly/mgbhousestaff](https://bit.ly/mgbhousestaff)

## What have other CIR residents won?

- ✦ **UC Davis bargained a \$6,500/annual housing stipend subject to yearly % increases;** UCLA won a \$4,000 ratification bonus
- ✦ **NYC Health + Hospitals bargained a \$3,500/year childcare reimbursement.** BMC won \$88,000 for a housestaff-run diversity committee.
- ✦ **All CIR contracts are viewable at [cirseiu.org/benefits](https://cirseiu.org/benefits).** Click through to find other CIR wins!

## I'm worried the new contract won't be tailored to our department-specific needs. Will the new contract be one-size-fits-all?

- ✦ This is not a "one-size-fits-all" agreement, but a "no department left behind" one. CIR contracts simply ensure that all housestaff receive the same base level of benefits, not prevent additional ones.
- ✦ **Many CIR chapters have bargained for department-specific benefits** like full time reading room assistants in Radiology at UCSF and \$1200 reimbursement for Ortho loupes at Valley Consortium, the list goes on!

## Will I be forced to go on strike? How will we get things done w/o striking?

- ✦ **Striking is rare. and you will never be forced to go on strike.** No CIR chapter can go on strike without the approval of the chapter's members.
- ✦ **We have other tactics** that we would use before deciding to escalate to a strike vote: button ups, petitions, unity breaks, political pressure etc.

## What is our plan to win?

1. Collect "union authorization cards" to send to the **National Labor Relations Board (NLRB)**, the federal agency that oversees unions. Our goal is to have a supermajority of MGB housestaff sign cards before filing for election.
2. **After we demonstrate that there is strong support for an MGB union**, the NLRB will supervise a secret ballot election. We need a simple majority to form a union and win!
3. **We democratically decide on our priorities by sending a bargaining survey to all MGB housestaff** and electing a bargaining committee with representation from all specialties to negotiate a new employment contract with MGB.



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## I'm afraid of creating an adversarial relationship with my program leadership. Will voting "yes" impact my career?

- ✦ **A union should not get in the way of preexisting relationships with specific faculty.** Instead, 1.) it protects our interests and rights in case the attitudes or personnel of leadership changes and 2.) allows us to seek changes that program leadership are unable to achieve on our own

## Since each program is different, how does a union deal with that in negotiations?

- ✦ **By listening to our members!** Before we begin bargaining, we'll form a bargaining team made up of housestaff from every department so all needs and concerns are heard and advocated for across the board.
- ✦ **It's important to remember that what we negotiate in our contract is not a 'ceiling', but a floor.** There is nothing inherent to a union contract that would limit department-specific resources and stipends from being granted. Holding back those benefits would be purely at the discretion of the department and the GME.

## Does joining a union interfere with my education in any way (e.g. duty hours restrictions leading to missing cases)?

- ✦ **Nope!** Members set the priorities at all CIR bargaining tables and if the membership do not have a desire to press on certain issues that implicate education, they will not be moved.
- ✦ **For example,** we would not mandate a 'universal approach' to electives and team structures as this is not how clinical care is conducted.

## We have a GME office and chief residents who already represent our interests. Why rock the boat with a union?

- ✦ **A union is our collective voice** with the sole purpose of advocating for improvements with the people in power above our program directors. GME can be a great ally, but their responsibility is to the institution.
- ✦ When residents have a unified voice, it can actually empower GME and the Chiefs to better advocate for changes otherwise unseen by hospital administrators.