
From: Dave Regan [mailto:DRegan@seiu1199.org]
Sent: Mon 2/11/2008 5:11 PM
To: Sal Rosselli
Cc: 'Andy.Stern@seiu.org'
Subject: Response to Sal's Resignation

February 11, 2008

Sal Rosselli, President
SEIU United Healthcare Workers – West
560 Thomas L. Berkley Way
Oakland, CA 94612

Dear Brother Rosselli:

As members of the SEIU International Executive Committee we were saddened to learn that you have resigned from the Committee. Your decision leaves the 130,000 members of UHW without a voice when key strategy decisions are being debated about how to build a stronger and more united movement of working people in this country and in the healthcare industry in particular.

To understand just how disappointed we are with your actions, it is important to remember four historic changes that have taken place in our union since 1996.

The first is that local union leaders like us have been called upon to act as the collective national union leadership and to take on the responsibility of jointly developing a strategy to improve the lives of working people in North America. Recognizing that no one person can have all the answers, we have all been given unprecedented opportunities to contribute ideas, debate options, and reach decisions as a group. The collective leadership structure encouraged by President Stern, rather than one-person rule, has carried with it a new responsibility to act based on the long-term interests of workers in our core industries and not just on our own power or prerogatives as local leaders.

Our collective role as national leaders and not just local leaders has also carried with it a responsibility to practice the fundamental principles of democracy. Just as we expect members of our local unions to unite behind a common strategy after there has been full debate and a majority has reached a democratic decision, we as leaders must do the same.

The second historic change has been to put far greater emphasis on helping more workers join our movement to make us all stronger. It is simply not realistic to think that over the long term our current members can maintain and improve their pay, benefits, and working conditions as a unionized island in nonunion industries and a nonunion country where fewer and fewer workers have health and retirement coverage or a living wage. About 7.4 percent of private sector

workers in America have a union – the lowest level since before the Great Depression. At most, 10 percent of healthcare workers have a union. Virtually all of the population growth in the U.S. in the next 20 years will be in the mostly nonunion South and Southwest, and the industries that are growing fastest are the industries that are most nonunion.

The third big change in our union has been to unite our financial, political, community, and staff resources to a much greater degree so that workers seeking to join us have the support of the entire union, not just one local, so we can all achieve higher pay and benefit standards. Many of the employers we deal with today are regional, national, or global in scope. We all have recognized that to match their strength we too have to be united on a larger scale.

The fourth change has been to restructure ourselves to unite the strength of people who do the same kind of work. As you know, SEIU used to have multiple local unions in the same industry in the same geographic area, a system that protected the interests of certain individual local leaders but divided workers' strength in dealing with employers and elected public officials. The New Strength Unity Plan adopted by local union delegates to the 2000 SEIU Convention mandated an end to that system and established democratic procedures for uniting members' strength along industry lines.

These four changes have made it possible for SEIU to help more than a million more workers add their strength to ours since 1996 – the most successful organizing record of any union in American history. Our members set the standard for pay, benefits, working conditions, and quality care in the health care industry. As the New York Times said about us on October 30, 2007, “After the union said it would not consider endorsing anyone who did not put forward a plan for universal health coverage, all the leading Democratic candidates produced one.” We also were widely recognized in the news media as having played the key role in getting agreement between Republican Gov. Schwarzenegger and the Democratic leaders of the California legislature on a plan to cover more than 4 million of the uninsured and set a precedent that could lead to coverage for millions more throughout the country.

Until recently, you participated in, approved of, and benefited from these major changes in our union:

- The members of our local unions, as well as all other SEIU locals, contributed millions of dollars, staff, political strength, and organizing leadership through our International Union to a four-year campaign that resulted in more than 15,000 Catholic Healthcare West workers having a union and a master contract as part of UHW.
- We all also contributed to the national strategies that resulted in more than 13,000 workers in hospitals owned by Tenet becoming part of your local.

- With your enthusiastic support, the principles of the New Strength Unity Plan were applied to a democratic merger of the 27,000 members of Local 399 in Southern California with your local.

All in all, national strategies and national resources contributed by SEIU local unions outside California have played a major role in transforming what was Local 250 with 65,000 members into UHW with more than 130,000 members.

Now, when it is time for UHW to help more healthcare workers join our movement, all of a sudden you don't want to apply the principle of strength in unity and instead want to take your ball and go home.

- Now that the hard-working members of our local unions have helped build workers' strength in California, you bemoan being asked to do the same for workers in other parts of the country for everyone's benefit.
- Now you have a problem with there being one unified national strategy to help workers unite in Catholic hospitals, which represent 1 of every 7 hospital beds in America.
- Now you have a problem with uniting the strength of all long-term care workers in California.
- Now you have a problem with there being one unified strategy for helping nursing home workers gain a union and win improvements for themselves and their clients.
- Now you leak unfounded letters to the news media that undermine the joint bargaining strategy set by the National Nursing Home Unity Council in which you participate.
- Now when your support was needed to help Tenet workers outside California gain a union, the internal disunity you contributed to jeopardized that goal.

As you acknowledge in your resignation letter, the strategies to build more strength and unity that you oppose are strongly supported by an overwhelming majority of the other SEIU local unions in general and the SEIU healthcare local unions in particular. Instead of accepting this and doing your part to make our united strategies succeed, you increasingly have sabotaged our joint decisions, attacked other SEIU leaders, and even refused to attend all or part of key meetings where decisions were being discussed.

Your pattern of refusing to participate in a unified decision-making process is particularly perplexing given how much we all have to learn from each other. Last year you helped 888 more workers unite in SEIU. You helped fewer workers unite with us last year than our local union in Nevada and fewer in the past two years than our local in Florida, even though both of them have only a fraction of your membership base and must operate in so-called "right to work" for less states. In the last three years, your success rate at helping workers unite with us per organizing dollar spent has been less than a quarter of the average success rate for all SEIU local unions. To hold yourself out as having the only true vision of how to build workers' strength in America does not square with the record.

With the 2008 SEIU Convention less than four months away, the local unions of SEIU are engaged in an exciting process to take the positive changes we have made since 1996 to the next level.

- We are building the country's first truly national union of healthcare workers, already more than 1 million strong and capable of eventually uniting the strength of the 9 million who have no union.
- We are building a grassroots movement to work with a new President of the United States and a new Congress next year to finally win affordable, quality health care for all.
- We are helping to lead a broad-based movement to address growing economic insecurity for working people while the top 1 percent enjoy the greatest wealth in the history of the world.

Achieving these goals will require more unity, not less – more pooling of strength and resources, not less. This is no time to divide SEIU members' strength. The proud members of UHW should be represented at the table while we develop our collective strategy for the next four years and beyond.

We ask that you practice the principles of real democracy and commit yourself to unity and majority rule. If you have concerns you want to discuss, they should be brought to the National Health Care Steering Committee and the SEIU Executive Committee for resolution. Conducting a continued campaign of distortion and division is a profound disservice to the members of your local union as well as to every member of SEIU and the millions of not-yet-organized workers in our industries and our country.

Whether you personally decide to participate constructively or to isolate yourself and try to divide and undermine, we are going to build on our past successes and create the strong and united movement that all working people and healthcare workers in particular need. That is our responsibility and our mission, and we will continue to unite all SEIU members to achieve it.

Sincerely,

Dave Regan, President
SEIU District 1199WOK,
Vice-President, SEIU

Tom DeBruin, President
SEIU Local 1199P,
Vice-President, SEIU

Monica Russo, President
SEIU Florida
Healthcare Union,
Vice-President, SEIU