

OPEN ACCESS

ISSN 2280-4056

*E-Journal of  
International and Comparative*

# LABOUR STUDIES

Volume 2, No. 2 May-June 2013



**ADAPT**  
[www.adapt.it](http://www.adapt.it)  
UNIVERSITY PRESS

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# A Blueprint for Union Revival? Strategy and Structure in a Successful Organising Union

James L. Tierney and Christina Cregan \*

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## 1. Aims and Methods of Study

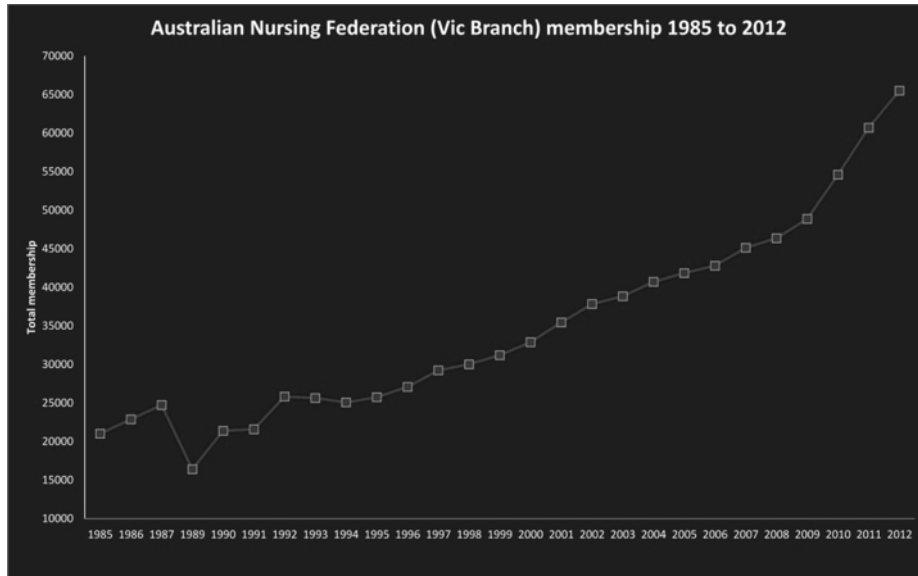
The aim of this study was to examine the organisational strategies and structures of the Victorian Branch of the Australian Nursing Federation (ANF(Vic)) that were put into place over the period 1989-2010 to support the development of the organising model of recruitment and retention. During this time, Branch membership climbed steadily. Since 1989, there have been just two Branch Secretaries of the ANF(Vic): Belinda Morieson and Lisa Fitzpatrick. At the start of Morieson's tenure in 1989, membership stood at 15,712. By the time she relinquished the position in December 2001, membership had doubled to reach 30,464. Fitzpatrick oversaw a further major expansion as membership more than doubled yet again, reaching 50,000 in 2010. By December 2012, membership was 65,500. This prolonged rise was in sharp contrast to trends in most unions

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in Australia and most other developed countries where long-term declines were experienced (see Figure No. 1).

*Figure No. 1 – ANF(Vic) Membership, 1985-2012.*



*Source: Australian Nursing Federation (Victorian Branch) Archives, 2013.*

In response to continuing state government proposals for financial cutbacks in healthcare, nursing shortages and workload expansion, Morieson and Fitzpatrick set out to transform the union through the principles of the organising model. They implemented industrial action in the form of a strategically-planned long-term series of mobilisation campaigns as a prelude to enterprise bargaining negotiations. In order to support this policy, they transformed the union's organisational strategies and structures.

An extensive case study was conducted of the ANF(Vic) from October to December 2009. Interviews of staff members, past and present, and observations of procedures were conducted by the primary researcher who spent three months on a full-time basis at union headquarters in Melbourne. Union archives and media reports were examined. Observations of processes and procedures (for example, meetings and interviews) took place. Follow-up visits were conducted in early 2010. An in-depth analysis was also carried out of archival data, and secondary sources. This report presents findings of the case study to explain how

Branch Secretaries directed the adoption of the organising model in relation to the development of the strategies and structure of a highly effective trade union.

## **2. Union Organising and Transformational Leadership: Definitions**

From the early 1990s, the executive - that is, the Branch Secretary in conjunction with the Branch Council - of the ANF(Vic) consciously developed the organising model of union recruitment and retention. The organising model emphasises the role of elected job representatives in attracting other workers to the union by involving them in workplace disputes to solve their problems. Union organisational structures become decentralised as the union is transformed into a membership-driven recruitment machine.

The inspirational elected leaders envisaged by union organising can be described as transformational leaders. Transformational leaders are not selected by bureaucracy but arise from within the group; they are exceptional; they elicit intense trust and commitment from group members; they motivate members to disregard their self-interests and pursue the goals of the collective; their role is to change the group by developing a vision for the future. Transformational leaders may exist at different levels of a union's organisation. This study investigated the role of the leadership of the executive, in the form of the Branch Secretaries. Both Morieson and Fitzpatrick were nurses who emerged from the rank-and-file as elected job representatives. Both were elected to the position of Branch Secretary, Morieson in 1989 and Fitzpatrick in 2001. Each of them consciously directed the application of organising principles in the ANF.

The characteristics of the organising model are most unlike those of the conventional servicing model of union recruitment whereby, using a centralised structure, the union provides experts to negotiate wages and conditions, settle disputes, protect jobs, and provide advice for members. The paid officials of the servicing model are described as transactional trade union leaders.

### 3. The Transformation of Strategies and Structures

The ANF(Vic) is a union with a largely professional membership of nurses. It is affiliated with the Australian Council of Trade Unions, but not with the Australian Labor Party. Traditionally a conservative union, in 1984, nurses voted to remove the union's "no-strike" clause. Nurses walked off the job for the first time in 1985. In 1986, a historic 50-day strike took place. Although the strike was a major achievement which resulted in wage gains and a clear career structure for nurses, victory came at a price. Mass withdrawal of labour from hospitals caused divisions in the ANF(Vic), the union movement, and public opinion. When elected in 1989, Morison and her Council set about adapting the organising model to suit the aspirations of its professional membership whose average age is 44. This strategy was continued and developed by Fitzpatrick and her Council.

#### *3.1. The Creation of an Industrial-professional Union*

The ANF encouraged nurses to view themselves as defenders of essential public services and the quality of patient care. Public sympathy was sought by extensive publicity that linked nursing shortages to a decline in health standards. In the late 1990s, nurses engaged in concerted industrial action across the State as part of their enterprise bargaining strategy, which resulted in hospital bed closures and the cancellation of elective surgeries. Mandatory nurse-patient ratios were a fundamental aspect of the ANF's log of claims. In 2000, after a period of sustained industrial action and tension between the ANF and the State government, the Australian Industrial Relations Commission issued the "Blair decision", in which the Commission introduced a mandatory nurse-patient ratio of 1:4 in all "A" Hospitals; different ratios were introduced in level B, C, and D hospitals. Continuing attempts by successive governments to undermine the ratios resulted in an ongoing series of mobilisation campaigns, in the form of state-wide mass meetings, stop-work meetings and overwhelming support for bed-closures. Ratios are highly valued by individual nurses and entrenched feature of patient care in Victoria.

The advancement of professional goals of nurses was also located within the ANF(Vic). The union became a professional educational body. In 1992, the ANF(Vic) Education Unit was opened and became a registered training organisation with ongoing education programs for nurses and midwives. By 2010, professional training was carried out over two floors

of the ANF(Vic)'s headquarters. The program includes a wide variety of professional and skill-based courses. Finally, professional services – available only to members – were introduced and developed to encourage membership. Professional indemnity insurance was re-introduced in February 1989. Through its association with Ryan Carlisle Thomas, the union provided legal advice and representation to any nurse charged with professional misconduct. In 1995 an office of the legal firm was established within the ANF headquarters, allowing members easy access. The Victorian Nurses Health Program was set up in 2006 by the ANF (Vic) together with the Nurses Board of Victoria to treat nurses and nursing students experiencing substance use and mental health issues. Under the program, confidential assessments were conducted, individual management plans were developed and treatment was co-ordinated, including the arrangement of appropriate referrals.

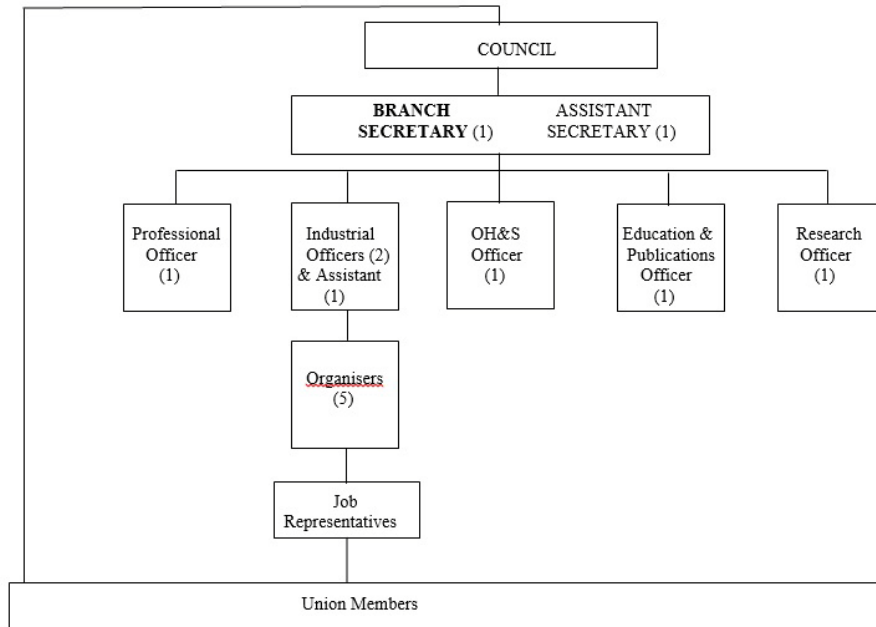
In summary, the leadership of the ANF adopted strategies whereby the professional and industrial goals of nurses were aligned through union membership: industrial action was equated with patient care; an educational unit was established, offering professional qualifications and advancement; and professional union services available only to members were developed.

### *3.2. Job Representative Stake Centre-stage*

Under the traditional servicing model, unions negotiated wage gains and provided services (such as the settlement of disputes) to workers in return for the payment of fees. The role of paid officials was central, in particular, that of Industrial Officers who argued cases and negotiated disputes. In 1985, prior to the development of the organising model, non-executive ANF(Vic) roles comprised Industrial Officers and Organisers (paid union officials), and unpaid elected job representatives (see Figure No. 2).



Figure No. 2 – Organisational Structure of the ANF(Vic) in 1986.



Source: Australian Nursing Federation (Victorian Branch) Archives, 2013.

In the organising model, however, elected job representatives (or delegates) – not paid officials – took centre stage. Shaping, developing and supporting the changing role of job representatives, therefore, became a key part of the ANF(Vic)’s organising strategy. In consequence, the recruitment, training, support and mentoring of job representatives to undertake their workplace recruitment and activist roles were seen to be fundamental issues. From the early 90s, the ANF(Vic) devoted considerable resources to job representative training based on organising principles. The role of Training Officer was created in 1992. Training officers conduct seminars for job representatives throughout the year. Training programs are also held in regional Victoria. Two specialist training programs aimed at identifying and training “passionate” job representatives were adopted. The Anna Stewart Program gives female delegates the opportunity to experience the union working environment. The Belinda Morieson Program, open to men and women, allows committed job representatives to work “in house” within the ANF Branch. The roles of existing paid officials were adjusted to focus on the recruitment and support of the job representatives. Although advocacy

still forms a major part of the job, Industrial Officers also developed strategic forms of industrial negotiation, supervising and co-ordinating a team of Organisers. As well as carrying out their industrial work, Organisers were also to seek out new job representatives. Support and encouragement for job representatives, allowing their voice to be heard, was achieved through the creation of the Delegates' Conference. The first conference took place in a small meeting room at Dallas Brooks Hall in Melbourne in 1993 and was attended by 40 job representatives. The 2009 conference was attended by 459 delegates. Job representatives can pass resolutions at the conference by pure majority and although these decisions are not binding, as of early 2010, the Council had endorsed every resolution that had been passed. Council is the policy and governing body of the ANF.

In summary, formal training programs for job representatives were established, the roles of Organisers and Industrial Officers were refined to facilitate the union's core function of job representative mobilisation of the rank-and-file, and the Delegates' Conference helped ensure that the "voice" of job representatives was heard.

### *3.3. The Union Becomes a Recruitment/Retention Machine*

The entire union organisation became involved in recruitment/retention in a number of ways. Every ANF(Vic) officer was expected to actively recruit continually. A series of visits to workplaces was instituted: ANF officers visited every ward in every hospital annually. Prior to this, wards would only be visited if a representative or member raised an issue; mandatory twice-yearly visits by Organisers to every workplace within their purview were introduced; organisers visited workplaces together with the newly appointed Recruitment Officer in targeted roadshows to promote the union and advise nurses of the range of benefits available. Organisations that had a relationship with the ANF were invited to take part and outline the specific benefits they offer members; officials visited universities and technical and further education colleges to deliver information regarding both professional and industrial issues; visits provided an opportunity to gather accurate membership statistics.

Communication with existing members became a priority. The information service, InfoLine, was expanded. Its function was to respond directly to telephone queries from members. In 2005, the union began to regularly survey its members about nursing and employment issues. Email updates provided members with professional information and indicated

what the ANF was doing for them. In 1997, the union commenced calling un-financial members to encourage them to become financial again. By 2010 the union called each new member, welcoming them and addressing any concerns regarding membership entitlements. Advertising campaigns were an ongoing part of the ANF activities, targeting current issues such as the right to claim overtime.

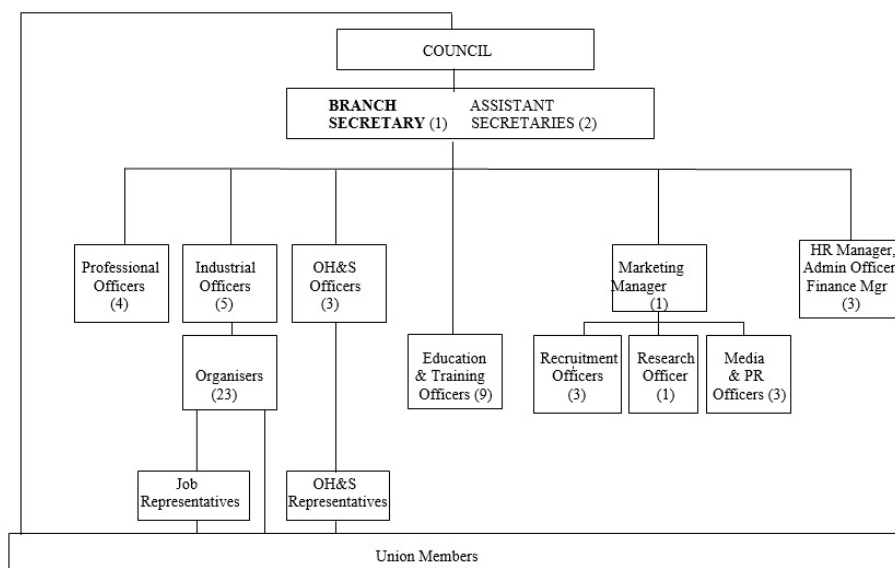
The union collected, analysed and publicised membership records. A computerised system was established in 1999. Under Morieson industrial and professional staff were presented with figures and trends at every staff meeting. This practice was continued and further developed under Fitzpatrick. Copies of the Membership Statistical Report were distributed. Membership numbers per month were tallied for each Health Service Provider, and also for each hospital. Figures were also presented for the regions for which each Organiser was responsible. The Organisers and Industrial Officers discussed membership fluctuations. Any major increase in membership resulted in applause – communal recognition of achievement – for the relevant Organiser. Job representatives who achieved 100% membership in their ward or unit received \$10 per member to spend on rewarding the staff.

In summary, the entire union became a recruitment and retention machine. Ongoing direct contact with members took place; all union staff were involved in recruitment/retention, often by workplace visits; membership figures were accurately recorded and reported on a continual, formal basis.

#### *3.4. Decentralisation of a Member-driven Organisational Structure*

The adoption and development of the strategies to transform the ANF (Vic) into an organising union led to the emergence of a more complex and decentralised organisational structure (see Figure No. 3) as pre-existing roles were changed and new roles were introduced.

Figure No. 3 – Organisational Structure of the ANF(Vic) in 2010.



Source: *Australian Nursing Federation (Victorian Branch) Archives, 2013.*

The ANF bureaucracy grew considerably, reflecting the rise in membership and the growth in the diversity of roles and functions of officials. At the end of this study (early 2010), the union employed 97 full-time staff to deal with issues concerning 1990 job representatives and 3000 workplaces. In almost all instances, Fitzpatrick followed and developed Morieson's policies. The growing numbers in the union, began to pose administrative problems for the leadership and, in two instances, Fitzpatrick adopted an innovative approach. In 2009, a Marketing Manager was appointed. The office-holder was not a nurse and previously worked in the corporate world. In the same year, a Human Resource (HR) Manager was also employed. Following business practices, the brief was to implement and refine the Federal ANF's newly formulated "benchmarks" which specified performance indicators for each role within the union's organisation. The HR Manager planned to use the benchmarks as a framework to develop and administer performance appraisals of union staff – initially on a voluntary basis. Other HR practices were also in development: a strategic plan and a mission statement.

In summary, strategic changes in the roles of ANF staff members, reflecting the member-oriented focus of union organising, brought about the emergence of a decentralised structure, characteristic of the organising

model. The growing bureaucracy led to the adoption of some corporate roles and functions. There was an awareness, however, that these roles should be carried out in the spirit of a trade union and not a business organisation. The functions of pre-existing roles in the “transformed” organisation and the new roles that were created (1989-2010), are presented in the Appendix.

#### 4. Conclusions

From 1989 onwards, the Branch Secretaries of the ANF – Morieson and Fitzpatrick – adopted the organising model of recruitment and retention whereby workers are encouraged by job representatives to take ownership of their workplace by participation in industrial action to solve their grievances. The organisational strategies and structure of the ANF were adapted to support the model. Although the foundations of strong professional-industrial unionism had been constructed by previous Branch Secretaries, Barbara Carson and Irene Bolger<sup>1</sup>, Morieson and Fitzpatrick directed the transformation of the ANF’s organisation structures. Professional goals – the quality of patient care – were allied with industrial goals to heal existing rifts and gain public support. New organisational roles were created; existing roles were adapted and realigned. The entire union was turned into a recruitment and retention machine through the development of an organisational structure in which

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<sup>1</sup> During the early 1980s, prior to the adoption of the organising model, foundations had already been laid. The election of Barbara Carson as Branch Secretary in 1980 had heralded an ideological shift within the ANF (Vic) which had traditionally been a conservative organisation. A program of college-based training with professional examinations was introduced and Carson persuaded Council to allow students to apply for union membership. A policy of concerted industrial action was adopted with bans on non-nursing duties. In 1984, Carson lobbied successfully for the removal of the “no-strike clause” from the Branch Rules and, in 1985, led the first nurses’ strike ever carried out in Victoria. When Carson took office, there were 13,000 members. When she resigned in January 1986, membership had risen to 21,148. Under Irene Bolger, who succeeded Carson, a historic 50-day 1986 nurses’ strike occurred. The 1986 strike was a major catalyst in shifting the internal focus of the Branch from servicing to organising. Bolger developed the role of job representatives. The role of the Organiser was expanded. They were explicitly taught industrial strategy and how to “whip up” support for industrial action amongst members. They were required to report in writing to her, and were assessed on how many new members they could sign. She established “Infoline”. Most ANF officials credit Bolger with establishing and developing an industrial consciousness amongst members and also nurses in general.

the capacity for mobilisation was embedded. Growth in numbers and complexity of organisational roles led to the emergence of a decentralized organisational structure. A shift in focus occurred with the establishment of democratic, membership-based decision-making at all levels.

These findings support the view that “managed activism”<sup>2</sup> has been important for effective organising in the ANF(Vic). While union officials and Organisers directed and supported the process<sup>3</sup>, the source of union renewal lay in the rank and file through participative democracy<sup>4</sup>. Our results found no tension between these influences. Transformational central leadership developed organising strategies and structures that allowed the voice of the rank and file to be heard. Morieson and Fitzpatrick transformed the union’s bureaucracy so that, in turn, workplace leaders could transform the union. Drawing their power from the rank-and-file – as elected leaders, through resolutions of the Delegates’ Conference and mass meetings of nurses – they used their personal executive and administrative leadership qualities to persuade Council to develop an organisation structure that would allow for the development of a collective consciousness. Collectivism, therefore, overcame the constraints associated with the gender-based stereotype that had previously rendered many nurses passive or uncertain with regard to participation in struggle. By 2010, the ground was prepared for more overt and risky forms of industrial conflict.

There were some differences between Morieson and Fitzpatrick, but these may have been due to changing organisational imperatives rather than personal inclination. Fitzpatrick’s introduction of roles usually associated with business corporations – Marketing and HR Managers – were a direct response to the effectiveness of the organising strategy, in terms of growing numbers. However, unlike business organisations, the union’s membership-driven structure provided a check on oligarchical tendencies. Like the Justice for Janitors movement in the United States, the ANF (Vic) could offer a strategic and structural blueprint for unions intent on developing an organising model. Unions that have the potential to develop and harness strong grassroots activity might benefit from adopting the ANF(Vic)’s approach. At a time when people seriously began to debate the possibility of the end of trade unionism, Morieson

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<sup>2</sup> M. Simms, *Managed Activism: Two Union Organising Campaigns in the Not-for-Profit Sector*, in *Industrial Relations Journal*, n. 38, 119-135, 2007.

<sup>3</sup> E. Heery, J. Holgate, M. Simms, *Union Voices: Tactics and Tensions in Union Organizing*, Cornell University Press, Ithaca, 2013.

<sup>4</sup> P. Fairbrother, *Unions at the Crossroads*, Mansell, London, 2000.

and Fitzpatrick's direction of the ANF(Vic) provided a new form of representation. It institutionalised the capacity of a female-dominated union in a "caring" profession to undertake unusually effective ongoing grassroots mobilisation that brings about continuing gains for nurses and patients alike.

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## Appendix: Roles of Union Officers in 2010

### *Existing roles*

**1. Professional Officers** are qualified nurses. They support member concerns in relation to all matters of a professional nature, including the improvement of standards of nursing care and education. All Professional Officers have specialised portfolios, for example, aged care, drugs/poisons, and midwifery. They also advise on industrial matters. They assist Organisers with member issues. Their knowledge of the Nursing Board of Victoria (NBV – since replaced by the Nursing and Midwifery Board of Australia: NMBA on 1 July 2010) scopes of practice is particularly important with regard to industrial issues. It allows them to advise members, help members in negotiations with management, and to convince management to develop more efficient and appropriate policies. They attend bargaining negotiations and members' meetings with Industrial Officers and Organisers, acting as an advisory resource on standards of care and legislation. They visit workplaces in a recruitment capacity.

**2. Industrial Officers** are responsible for negotiating enterprise bargaining agreements. Advocacy forms a major part of their role. Industrial Officers do not need to seek Secretarial or Branch Council approval before taking industrial action, but usually inform Branch Council. They supervise and co-ordinate a team of Organisers and advise Organisers on how to deal with member complaints, referring matters to Fair Work Australia, and meeting with senior hospital officials where necessary.

**3. Organisers** are responsible for specific hospitals and other care facilities, and therefore, for groupings of job representatives. The Organiser's main role is to implement Branch policies and enforce compliance with negotiated conditions within the workplace, contained in the Enterprise Bargaining Agreement (EBA). Organisers are also required to respond to and resolve complaints and concerns brought to them by their job representatives and members. If an individual member concern is likely to reflect a common concern (for example, where a term of the EBA is being breached), the Organiser will liaise with their Industrial officer and seek to formulate a collective response. Organisers can call and conduct members' meetings if industrial action is required. But, following the member-oriented character of union organising, Organisers may not implement industrial action themselves but only initiate members' meetings about such action. They are required to maintain an active presence in the workplace, engage in recruitment and retention of representatives and members, and be responsive to rank-and-file concerns and views.

**4. Occupational Health and Safety (OH&S) Officers** advocate and support members, representatives and other Branch officials in the specialist areas of OH&S, workers' compensation and return-to-work issues. They provide professional advice to other parties on the current practices relating to OH&S, nursing and midwifery. They provide approved OH&S training to ensure that Health and Safety representatives to guide them in their voluntary capacity. They develop and deliver seminars and conferences on contemporary issues faced by members in the workplace. They campaign for nurses and midwives to have improved workplace health and safety and compensation in external forums such as WorkSafe Victoria, Department of Health and other stakeholder organisations.

**5. New roles** The new roles are: Recruitment Officer (1992), responsible for the development and co-ordination of recruitment policy and practice throughout the ANF and, by 2009, each officer specialising in recruitment, retention or graduate/financial support; Education and Training Manager and Officers (1992); Media/Public Relations Manager(1997); Research Officer (2005); Marketing Services and Events Manager (2009) – to manage the recruitment team; Human Resource Manager (2009) and an additional Assistant Secretary (2009).



# Adapt International Network



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