

**UNITED STATES OF AMERICA
BEFORE THE NATIONAL LABOR RELATIONS BOARD
REGION 32**

STANFORD HEALTH CARE
Employer

and

Case 32-RC-386413

**SERVICE EMPLOYEES INTERNATIONAL UNION,
UNITED HEALTHCARE WORKERS - WEST**
Petitioner

DECISION AND DIRECTION OF ELECTION

Stanford Healthcare (the Employer) is a California corporation engaged in the provision of health care services at its facilities located at 300 Pasteur Drive, Palo Alto, CA; 2452 Watson Court, Palo Alto, CA; 725 Welch Road, Palo Alto, CA; and 875 Blake Wilbur Drive, Palo Alto, CA. On May 5, 2026, Service Employees International Union, United Healthcare Workers – West (the Petitioner or Union) filed a representation petition (the Petition) under Section 9(c) of the National Labor Relations Act (the Act) seeking an *Armour-Globe*¹ self-determination election to add 23 Radiation Therapists to an existing bargaining unit comprised of Social Work Clinicians/MSW, Licensed Clinical Social Workers, Advanced Licensed Clinical Social Workers, Relief Social Work Clinicians, Relief Licensed Clinical Social Workers, Mental Health Clinicians, and Social Worker Resource Coordinators employed by the Employer at its facility located at 725 Welch Road, Palo Alto, CA as well as all nonprofessional employees performing service and patient care functions employed by the Employer at its facilities located at 300 Pasteur Drive, Palo Alto, CA, 2452 Watson Court, Palo Alto, CA and 725 Welch Road and 875 Blake Wilbur Road, Palo Alto, CA, including those occupying job classifications set forth in the Recognition Clause and Appendix A of the Collective Bargaining Agreement between the parties that extends from September 7, 2023, through September 6, 2026.² Petitioner does not seek to include any other unrepresented employees.

A hearing officer of the National Labor Relations Board (the Board) held a hearing in this matter on May 14, 2026. At the hearing the parties stipulated and I find that, pursuant to Section 9(b) of the Act, the petitioned-for unit constitutes a distinct, identifiable segment of the Employer’s employees. At the hearing, Petitioner confirmed it would not want to proceed to an election in a stand-alone unit of the petitioned-for Radiation Therapists if an *Armour-Globe* election is deemed

¹ *Armour & Co.*, 40 NLRB 1333 (1942); *Globe Machine & Stamping Co.*, 3 NLRB 294 (1937).

² The existing unit was certified pursuant to petitions in cases 32-RC-5574, 32-RC-281963, and 32-RC-374456. The current number of employees in the existing bargaining unit is not found in the record.

inappropriate. The only issue before me is whether the petitioned-for group of employees shares a community of interest with the employees in the existing bargaining unit.

Based on the record and relevant Board law detailed below, I find that the Radiation Therapists share a community of interest with the existing unit. Accordingly, I am directing a self-determination election to allow the Radiation Therapists to decide whether to join the existing bargaining unit represented by Petitioner or remain unrepresented.

I. The Employer's Operation

The Employer operates hospitals and clinics providing healthcare services, including emergency care, cancer care and primary care. Across its facilities, the Employer employs approximately 19,000 employees.

II. Board Law

When determining an appropriate unit, the Board delineates the grouping of employees within which freedom of choice may be given collective expression. At the same time it creates the context within which the process of collective bargaining must function. Therefore, each unit determination must foster efficient and stable collective bargaining. *Gustave Fisher, Inc.*, 256 NLRB 1069 (1981). On the other hand, the Board has also made clear that the unit sought for collective bargaining need only be an appropriate unit. Thus, the unit sought need not be the ultimate, or the only, or even the most appropriate unit. *Overnite Transportation Co.*, 322 NLRB 723, at 723 (1996). As a result, in deciding the appropriate unit, the Board first considers whether the unit sought in a petition is appropriate. *Id.* When deciding whether the unit sought in a petition is appropriate, the Board focuses on whether the employees share a “community of interest.” *NLRB v. Action Automotive*, 469 U.S. 490, 494 (1985). In turn, when deciding whether a group of employees shares a community of interest, the Board considers whether the employees sought are organized into a separate department; have distinct skills and training; have distinct job functions and perform distinct work, including inquiry into the amount and type of job overlap between classifications; are functionally integrated with the Employer's other employees; have frequent contact with other employees; interchange with other employees; have distinct terms and conditions of employment; and are separately supervised. *United Operations, Inc.*, 338 NLRB 123 (2002).

III. Application of Board Law to the Facts of the Case

a. Organization of the facility

In weighing department organization in the *Armour-Globe* context, the Board considers whether the proposed unit employees work in the same department as the existing unit employees. See *Public Service Co. of Colorado*, 365 NLRB 1017 at 1017 fn. 4 (2017) (self-determination election appropriate where “most of the planners work in the same department as unit maintenance employees, and all of the planners are more broadly part of the energy supply area”). The Board also generally looks to whether the petitioned-for voting group conforms to an administrative function or grouping of an employer's operation. For example, the Board would not approve a unit

consisting of some, but not all, of an employer's production and maintenance employees. See, *Check Printers, Inc.*, 205 NLRB 33 (1973).

Here, the Employer's cancer service line encompasses approximately nine departments. Tr. 16. The petitioned-for radiation therapists work in the radiation oncology department, which includes dosimetrists, clinical nurses, physician assistants, medical assistants, and the scheduling team. Tr. 18. There are no bargaining unit employees in the radiation oncology department. Tr. 24. Within the cancer service line, there are several bargaining unit employees: lab and administrative employees in the cellular therapy facility and the new patient coordinator. Tr. 24-25.

Radiation therapists work on the ground floor of the Employer's facility at 875 Blake Wilbur Drive, the comprehensive cancer center. Tr. 19, 41. Their work location is on the same floor as the radiation oncology social worker and the MRI technicians, both of which are bargaining unit classifications. Tr. 99, 123. Other bargaining unit employees, including housekeeping, service staff (such as café workers), lab staff, and pharmacy staff also perform work on the ground floor. Tr. 27-28.

While there are no bargaining unit employees in the radiation oncology department, the petitioned-for radiation therapists serve the same patients as bargaining unit employees and constitute a distinct administrative grouping of the Employer's employees. I find that this factor weighs slightly against finding a community of interest.

b. Interchangeability and contact

Interchangeability refers to temporary work assignments or transfers between two groups of employees. Frequent interchange "may suggest blurred departmental lines and a truly fluid work force with roughly comparable skills." *Hilton Hotel Corp.*, 287 NLRB 359, 360 (1987). As a result, the Board has held that the frequency of employee interchange is a critical factor in determining whether employees who work in different groups share a community of interest sufficient to justify their inclusion in a single bargaining unit. *Executive Resource Associates*, 301 NLRB 400, 401 (1991), citing *Spring City Knitting Co. v. NLRB*, 647 F.2d 1011, 1015 (9th Cir. 1081). Also relevant is the amount of work-related contact among employees, including whether they work beside one another. Thus, it is important to compare the amount of contact employees in the unit sought by a union have with one another. See *Casino Aztar*, 349 NLRB 603, 605-606 (2007).

Here, there is no interchange between the petitioned-for radiation therapists and other bargaining unit employees, as no other bargaining unit employees can substitute for radiation therapists in their absence. Tr. 41.

However, the record contains evidence of frequent work-related contact between radiation therapists and bargaining unit employees. Other employees enter the area where radiation therapists work, including the physics team, radiation oncologists, the nursing team, PET techs, pharmacists, and housekeeping staff. Tr. 43; Er Exh. 10. Housekeeping circles through the department throughout the workday to ask other radiation therapists and other employees what

each treatment room needs to see, for example, if they should change out the sharps containers or the linen. 97.

If a procedure requires anesthesia, radiation therapists work closely with anesthesia technicians, who are bargaining unit employees. Anesthesia technicians come over from the main hospital, retrieve their equipment from the dedicated closet on the ground floor, and set up the treatment rooms where the radiation therapists perform their work; after they're done, radiation therapists may help them unload. Tr. 93. They give the patient the sedative and remain present during the whole treatment; radiation therapists and anesthesia technicians monitor the patient together on cameras outside the room, watching the patient's vitals. Tr. 93. If a patient needs an MRI, radiation therapists interact with MRI technicians, who are bargaining unit employees: radiation therapists walk the patient over to MRI and do a hand off, for example, instructing the patient to get changed for the MRI and give IV access to the MRI technicians. 94. Brachytherapy patients often have devices in their body that need to be stabilized between CT and MRI. MRI technicians bring the gurney and together the radiation therapist and MRI technician transfer the patient and wheel them off to MRI; the radiation therapist stays with the patient during the MRI. 95. There is a shared changing room area for patients where radiation therapists drop patients off and MRI technicians and CT technicians pick them up. 123.

As radiation therapists often see their patients on a daily basis, they are in a position to identify resources a patient might need from a social worker; in that case, they reach out to the most appropriate social worker (a bargaining unit employee) for the patient and might escort the patient to their office. Tr. 98-99. Radiation therapists also interact with bargaining unit employees in the context of scheduling. After a patient's initial consult, new patient schedulers set their first appointment and notify the therapist; if a patient needs to reschedule, radiation therapists work with the new patient scheduler. Tr. 100. Treatments that require a lot of coordination, such as bone marrow transplant, require extensive contact with schedulers as they are frequently postponed. Tr. 100.

Given the extensive amount of work-related contact between the petitioned-for radiation therapists and bargaining unit employees, I find that this factor weighs in favor of finding a community of interest.

c. Common supervision

Another community-of-interest factor is whether the employees in dispute are commonly supervised. In examining supervision, most important is the identity of employees' supervisors who have the authority to hire, to fire or to discipline employees (or effectively recommend those actions) or to supervise the day-to-day work of employees, including rating performance, directing and assigning work, scheduling work providing guidance on a day-to-day basis. *Executive Resources Associates*, supra at 402; *NCR Corporation*, 236 NLRB 215 (1978). Common supervision weighs in favor of placing the employees in dispute in one unit. However, separate supervision does not mandate separate units. *Casino Aztar*, above at 607, fn 11. Rather, more important is the degree of interchange, contact and functional integration. *Id.* at 607.

Here, Radiation Therapy Managers Jason Dixon and Jotsna Singh directly supervise the petitioned-for radiation therapists. Tr. 21. Dixon and Singh report to Senior Director of Radiation

Oncology Network & Proton Center Vahagn Nazaryan; Nazaryan reports to Executive Director of Radiation Oncology & Networks Ashley Robinson; and Robinson reports to Vice President of Cancer Destination Service Line Maria Gonzalez. Tr. 20; Er Exh. 14. Dixon and Singh do not supervise any other employees represented by the Union. Tr. 46. Gonzalez is the first common supervisor between the petitioned-for radiation therapists and other bargaining unit employees. Tr. 24.

Given that the petitioned-for radiation therapists and bargaining unit employees do not share a common supervisor below the level of vice president, I find that this factor weighs against finding a community of interest.

d. Nature of employee skills and functions

This factor examines whether disputed employees can be distinguished from one another on the basis of job functions, duties or skills. Evidence that employees perform the same basic function or have the same duties, that there is a high degree of overlap in job functions or of performing one another's work, or that disputed employees work together as a crew, support a finding of similarity of functions. Evidence that disputed employees have similar requirements to obtain employment; that they have similar job descriptions or licensure requirements; that they participate in the same employer training programs; and/or that they use similar equipment supports a finding of similarity of skills. *J.C. Penny Company, Inc.*, 328 NLRB 766 (1999); *Brand Precision Services*, 313 NLRB 657 (1994); *Phoenician*, 308 NLRB 826 (1992). Job functions need not be completely identical or interchangeable to weigh in favor of finding a community of interest. See *Walt Disney Parks & Resorts, U.S., Inc.*, 373 NLRB No. 99 (2024), citing *IKEA Distribution Services, Inc.*, 370 NLRB No. 109, slip op. at 11 (2021). Where there is also evidence of similar terms and conditions of employment and some functional integration, evidence of similar skills and functions can lead to a conclusion that disputed employees must be in the same unit, in spite of lack of common supervision or evidence of interchange. *Phoenician*, above.

Here, the petitioned-for radiation therapists are responsible for running the machines that deliver radiation treatment to patients with cancer and other diseases and managing the patient through their course of treatment. Tr. 21-22. First, radiation therapists simulate the patient's treatment position; then, they double-check the treatment plan created by the oncologist. Tr. 49. In delivering the treatment, radiation therapists first take an image to confirm that the patient is accurately set up, then they deliver the dose, monitor the side effects, and continually assess the patient. Tr. 49-50. As discussed above, the record contains ample evidence of radiation therapists working closely alongside bargaining unit employees to accomplish shared tasks.

As for job requirements, radiation therapists must attend an accredited school; then they apply for a certification through the American Registry of Radiologic Technologists (ARRT); they must then pass a board exam and finally apply for a license from the California Department of Public Health. Tr. 34-35. Radiation therapists must maintain the ARRT certification on an annual basis and submit CE certifications on a biannual basis (12 credits focused on radiation therapy). Tr. 36. The ARRT also certifies CT technicians and radiology techniques like MRI and fluoroscopy. Tr. 37. Radiation therapists must also hold a basic life support (BLS) certification from the American Heart Association, a requirement that some bargaining unit employees share. Tr. 40, 82.

Radiation therapists are subject to some requirements that also apply to bargaining unit employees, including the requirement to hold a basic life support (BLS) certification and CPR certification. Tr. 40, 82, 125. Radiation therapists must also follow certain hospital-wide procedures that also apply to members of the bargaining unit: the C*I* CARE principles (which govern patient interaction), the patient-identification policy requiring three forms of identification when delivering care, safe patient handling training, and “health stream” trainings covering sexual harassment, HIPAA laws, and workplace violence. Tr. 70, 80, 126, 130.

Given the similarity in licensing requirements between radiation therapists and some bargaining unit employees and the shared Employer trainings and policies, as well as the evidence of radiation therapists working closely alongside other bargaining unit employees, I find that this factor weighs in favor of finding a community of interest.

e. Degree of functional integration

Functional integration refers to when employees’ work constitutes integral elements of an employer’s production process or business. Thus, for example, functional integration exists when employees in a unit sought by a union work on different phases of the same product or as a group provides a service. Evidence that employees work together on the same matters, have frequent contact with one another, and perform similar functions is relevant when examining whether functional integration exists. *Transerv Systems*, 311 NLRB 766 (1993). Functional integration is present when employees must work together and depend on each other in order to accomplish their overall duties. See, *Walt Disney Parks & Resorts*, above. Evidence that employees work together on the same matters, have frequent contact with one another, and perform similar functions is relevant when examining whether functional integration exists. *Transerv Systems*, above.

Here, the petitioned-for radiation therapists are responsible for guiding patients through the course of their radiation treatment. Tr. 21. As discussed above, in this capacity, radiation therapists interact with new patient coordinators, MRI technicians, anesthesia technicians, social workers, and housekeeping staff, all focused on the ultimate goal of delivering patient care. Tr. 64, 93, 95, 97-98. Radiation therapists rely on bargaining unit employees (and vice versa) to perform critical tasks in delivering patient care and navigating patients through all aspects of their treatment. Given this high degree of functional integration, I find that this factor weighs in favor of finding a community of interest.

f. Terms and conditions of employment

Terms and conditions of employment include whether employees receive similar wage ranges and are paid in a similar fashion (for example hourly); whether employees have the same fringe benefits; and whether employees are subject to the same work rules, disciplinary policies and other terms of employment that might be described in an employee handbook. However, the facts that employees share common wage ranges and benefits or are subject to common work rules does not warrant a conclusion that a community of interest exists where employees are separately supervised, do not interchange and/or work in a physically separate area. *Bradley Steel, Inc.*, 342 NLRB 215 (2004); *Overnite Transportation Company*, 322 NLRB 347 (1996). Differences in

employment terms “may reasonably be expected in the *Armour-Globe* context” because unit employees’ terms have been obtained through the collective bargaining process. *Pub. Serv. Co. of Colo.*, 365 NLRB 1017 (2017) at fn. 4.

Here, the petitioned-for radiation therapists’ average hourly rate of compensation ranges from \$74.50/hour to \$108.15/hour. Er Exh. 9. There is a significant range in the hourly compensation of bargaining unit employees, from \$28.39/hour to \$58.30/hour. Pet. Exh. 1. Radiation therapists, like bargaining unit employees, receive health insurance from the Employer. All employees share the same HR department. Tr. 86.

Radiation therapists are subject to some requirements that also apply to bargaining unit employees, including the requirement to hold a basic life support (BLS) certification and CPR certification. Tr. 40, 82, 125. As discussed above, radiation therapists are subject to certain Employer policies that also apply to members of the bargaining unit: the C*I* CARE principles (which govern patient interaction), the patient-identification policy requiring three forms of identification when delivering care, safe patient handling training, and “health stream” trainings covering sexual harassment, HIPAA laws, and workplace violence. Tr. 70, 80, 126, 130.

While radiation therapists’ compensation is outside the range of most bargaining unit employees, they do share work rules and the HR function with many bargaining unit employees. I find that this factor bears neutrally in the community of interest inquiry.

IV. Conclusion

In determining that the unit sought by Petitioner is appropriate, I have carefully weighed the community-of-interest factors cited in *United Operations*, supra. I conclude that the unit sought by Petitioner is appropriate because the record reveals a high degree of work-related contact between the petitioned-for radiation therapists and the bargaining unit, significant functional integration of the Employer’s facilities, and similarity of functions.

Based upon the entire record in this matter and in accordance with the discussion above, I conclude and find as follows:

1. The hearing officer’s rulings made at the hearing are free from prejudicial error and are hereby affirmed.
2. The Employer is engaged in commerce within the meaning of the Act, and it will effectuate the purposes of the Act to assert jurisdiction herein.
3. The Petitioner is a labor organization within the meaning of Section 2(5) of the Act and claims to represent certain employees of the Employer.
4. A question affecting commerce exists concerning the representation of certain employees of the Employer within the meaning of Section 9(c)(1) and Section 2(6) and (7) of the Act.

5. The following employees of the Employer constitute a unit appropriate for the purpose of collective bargaining within the meaning of Section 9(b) of the Act:

Included: All full-time, part-time, and per diem Radiation Therapists employed by the Employer at or from its facility located at 300 Pasteur Drive, Palo Alto, CA 94304.

Excluded: All other employees, all other service and technical employees, employees represented by a labor organization, confidential employees, office clerical employees, guards, and supervisors as defined by the Act.

There are approximately 23 employees in this unit.

V. Direction of Election

If a majority of valid ballots are cast for Service Employees International Union, United Healthcare Workers – West they will be taken to have indicated the employees’ desire to be included in the existing unit currently represented by Service Employees International Union, United Healthcare Workers - West as set forth in the parties’ existing collective bargaining agreement that extends from September 7, 2023 through September 6, 2026. If a majority of valid ballots are not cast for representation, they will be taken to have indicated the employees’ desire to remain unrepresented

A. Election Details

The election will be held on **Wednesday, July 8, 2026**, at the Stanford Health Care conference room, located at 300 Pasteur Drive, Stanford CA, 94305 during the hours of 7:00 a.m. to 8:30 a.m., 11:30 a.m. to 1:00 p.m. and 4:00 p.m. to 5:00 p.m.

B. Voting Eligibility

Eligible to vote are those in the unit who were employed during the payroll period ending **Saturday, June 6, 2026**, including employees who did not work during that period because they were ill, on vacation, or temporarily laid off. In a mail ballot election, employees are eligible to vote if they are in the unit on both the payroll period ending date and on the date they mail in their ballots to the Board’s designated office.

Employees engaged in an economic strike, who have retained their status as strikers and who have not been permanently replaced, are also eligible to vote. In addition, in an economic strike that commenced less than 12 months before the election date, employees engaged in such strike who have retained their status as strikers but who have been permanently replaced, as well as their replacements, are eligible to vote. Unit employees in the military services of the United States may vote if they appear in person at the polls.

Ineligible to vote are (1) employees who have quit or been discharged for cause since the designated payroll period, and, in a mail ballot election, before they mail in their ballots to the Board's designated office; (2) striking employees who have been discharged for cause since the strike began and who have not been rehired or reinstated before the election date; and (3) employees who are engaged in an economic strike that began more than 12 months before the election date and who have been permanently replaced.

C. Voter List

As required by Section 102.67(l) of the Board's Rules and Regulations, the Employer must provide the Regional Director and parties named in this decision a list of the full names (that employees use at work), work locations, shifts, job classifications, and contact information (including home addresses, available personal email addresses, and available home and personal cell telephone numbers) of all eligible voters.

To be timely filed and served, the list must be *received* by the Regional Director and the parties by **June 23, 2026**. The list must be accompanied by a certificate of service showing service on all parties. **The Region will no longer serve the voter list.**

Unless the Employer certifies that it does not possess the capacity to produce the list in the required form, the list must be provided in a table in a Microsoft Word file (.doc or docx) or a file that is compatible with Microsoft Word (.doc or docx). The first column of the list must begin with each employee's last name and the list must be alphabetized (overall or by department) by last name. Because the list will be used during the election, the font size of the list must be the equivalent of Times New Roman 10 or larger. That font does not need to be used but the font must be that size or larger. A sample, optional form for the list is provided on the NLRB website at www.nlr.gov/what-we-do/conduct-elections/representation-case-rules-effective-april-14-2015.

When feasible, the list shall be filed electronically with the Region and served electronically on the other parties named in this decision. The list may be electronically filed with the Region by using the E-filing system on the Agency's website at www.nlr.gov. Once the website is accessed, click on **E-File Documents**, enter the NLRB Case Number, and follow the detailed instructions.

Failure to comply with the above requirements will be grounds for setting aside the election whenever proper and timely objections are filed. However, the Employer may not object to the failure to file or serve the list within the specified time or in the proper format if it is responsible for the failure.

No party shall use the voter list for purposes other than the representation proceeding, Board proceedings arising from it, and related matters.

D. Posting of Notices of Election

Pursuant to Section 102.67(k) of the Board's Rules, the Employer must post copies of the Notice of Election accompanying this Decision in conspicuous places, including all places where notices to employees in the unit found appropriate are customarily posted. The Notice must be

posted so all pages of the Notice are simultaneously visible. In addition, if the Employer customarily communicates electronically with some or all of the employees in the unit found appropriate, the Employer must also distribute the Notice of Election electronically to those employees. The Employer must post copies of the Notice at least 3 full working days prior to 12:01 a.m. of the day of the election and copies must remain posted until the end of the election. For purposes of posting, working day means an entire 24-hour period excluding Saturdays, Sundays, and holidays. However, a party shall be estopped from objecting to the nonposting of notices if it is responsible for the nonposting, and likewise shall be estopped from objecting to the nondistribution of notices if it is responsible for the nondistribution. Failure to follow the posting requirements set forth above will be grounds for setting aside the election if proper and timely objections are filed.

VI. RIGHT TO REQUEST REVIEW

Pursuant to Section 102.67 of the Board's Rules and Regulations, a request for review may be filed with the Board at any time following the issuance of this Decision until 10 business days after a final disposition of the proceeding by the Regional Director. Accordingly, a party is not precluded from filing a request for review of this decision after the election on the grounds that it did not file a request for review of this Decision prior to the election. The request for review must conform to the requirements of Section 102.67 of the Board's Rules and Regulations.

A request for review must be E-Filed through the Agency's website and may not be filed by facsimile. To E-File the request for review, go to www.nlr.gov, select E-File Documents, enter the NLRB Case Number, and follow the detailed instructions. If not E-Filed, the request for review should be addressed to the Executive Secretary, National Labor Relations Board, 1015 Half Street SE, Washington, DC 20570-0001, and must be accompanied by a statement explaining the circumstances concerning not having access to the Agency's E-Filing system or why filing electronically would impose an undue burden. A party filing a request for review must serve a copy of the request on the other parties and file a copy with the Regional Director. A certificate of service must be filed with the Board together with the request for review. Neither the filing of a request for review nor the Board's granting a request for review will stay the election in this matter unless specifically ordered by the Board.

Dated: June 18, 2026



Hokulani Valencia
Acting Regional Director
National Labor Relations Board
Region 32
1301 Clay St Ste 1510N
Oakland, CA 94612-5224