

Tentative Agreement Reached on New Contract!

Throughout our last contract term, numerous issues came to light and grievances were filed. Because you brought these issues to our Union's attention, we were able to fight for contract language that will hopefully put an end to some of these issues and problems. We were also able to stop many take-aways that management proposed, from Clinical Ladder to destruction of our wage scale. Our Bargaining Team is proud of this new contract and what it adds and maintains. Take a look... we think you will be proud, too! **Your Bargaining Team: Jim Owen, PACU; Sandy Thompson, ER; Karen Pelone, L&D; Kathy Parlevliet, CVICU; Sue Stephens, NICU; Joanna Tan, Clinical Lab.**

More Info

October 7 & 8
6 to 8 p.m.
NCR 3 or 4

Ratification Vote

Wednesday, Oct. 9
6 a.m. to 2 p.m.
6 p.m. to 8 p.m.
Table Outside of Cafeteria

Our Bargaining Team recommends a YES vote!

Summary of Contract Additions & Changes

Employee Benefits

Our team was insistent on maintaining our health benefits at the levels without increased costs. Members won't have to worry about any increases in premiums or out-of-pocket costs in 2014, and in 2015 increases are limited to no more than 10 percent on a blended average basis.

- Retained health incentive funding for 2014 and 2015. This pays \$700 for the employee and up to \$1,400 for the employee plus dependents in the HSA or HRA account, and \$400 employee and \$800 employee plus dependents in the HMO plan.

Wages

This was a hard-fought win by our Bargaining Team. After accepting a wage freeze in our last contract, our team would accept nothing except an acceptable wage increase for dedicated Tarzana employees. We scrutinized every cost and every avenue to come up with this part of the agreement.

2013: Up to .5 percent bonus which would be paid upon ratification to anyone who didn't receive a step increase in July 2013 and/or received less than .5 percent in July 2013.

2014 and 2015

- Our wage scale will increase by 1 percent, allowing everyone to receive at least a 1 percent increase.
- 1 percent increase for anyone who is currently above scale.
- 4 percent – Full-time and part-time employees whose base hourly wage is below their appropriate step will receive an increase of up to a maximum of 4 percent to bring them closer to, but not to exceed, the appropriate step rate.
- Evening differential will increase to \$3.25 per hour and night differential will go up to \$4.25 per hour.
- RNs with less than one year of experience will earn the "start rate" and the new grad rate will be eliminated.
- Our Union stopped management's attempt to eliminate both the "In-lieu of" benefits payments to employees who waive health insurance benefits, and the "pay option," which would have impacted long-term RNs.
- Case managers who receive their ACM Certificate will receive a 5 percent wage increase effective Oct. 1, 2015.

Clinical Ladder

Management wanted all RNs to start fresh at Clinical Nurse I in the new Clinical Ladder program. This would have resulted in many RNs losing wages. With nurses under attack, our Union fought for and won the right for all RNs to be grandparented in at their current level so there is no reduction in Clinical Ladder levels. Employees can apply for new Clinical Ladder levels May 1 and increase their base pay from 5 to 16.3 percent.

- *Copies of the Clinical Ladder proposal will be in a colored folder in each unit so everyone can view the changes. Contact our Union Representative if you would like a copy emailed to you.*



Changes to the Contract

Job Vacancies, Posting and Bidding

Has this happened to you? Has the hospital ever held positions open when there were qualified internal candidates? That shouldn't happen anymore because once a position has been posted for at least seven calendar days, the employer will make a good faith and reasonable effort to fill the position within 30 days.

Discipline

Get a new manager? First thing they want to do is put an employee on investigatory suspension. This shouldn't happen because we now have guidelines under which an employee may be put on investigatory suspension.

Hours of Work, Overtime and Scheduling

Electronic scheduling system? Does it work or not? Our Team addressed scheduling concerns and fairness issues for per diem and part-time employees. We hope this helps resolve some of the many scheduling concerns that are out there.

- We won equitable distribution of extra shifts by negotiating language that allows per diems to work 24 hours in a work week before those hours are considered extra shifts.
- The employer has also agreed to equitably distribute extra shifts before the final schedule is posted.
- We can now plan vacations more normally! We will have the ability to request vacations when we make our plans **at any time**. The limits on when you can request vacations has been removed.
- **Call-offs:** We needed to create a system for call-offs that was fair to everyone. SuperFloat and Charge RNs (when relief Charge RNs are available) will now be included in the call-off rotation.

Floating

- NICU nurses will be happy to know that in response to longstanding concerns regarding floating, the hospital will now only assign NICU RNs to patients three months of age or younger unless there are severe overriding circumstances. When a NICU, PICU, or Peds RN is floated, the hospital will not assign her/him to admit a patient if at all possible.
- We re-negotiated how Rapid Response RN shifts are assigned so that RNs who are uncomfortable with serving as RRN will not have to fill the position on a regular basis, and the coverage will count as a float. If no competent RN is available to work the shift, a charge RN in either CVICU or ICU will fill the shift.

Education Benefits

We recently had a number of grievances on tuition reimbursement that spurred these contract changes.

- Employees can now choose to use their tuition reimbursement or for student loan repayment (as funding is available). As more of us return to school for further education, this is very important.
- When we've had to take mandatory classes, our paychecks came up short because the class was shorter than our regular shift. We were able to add language that says if an employee is scheduled for a mandatory class but the class is of shorter duration than the employee's regular shift, the employee may use available PTO to make up the difference in hours.

Leaves of Absence

Governor Brown recently changed California leave law to allow employees to use half of their own sick time to care for siblings, grandparents, grandchildren and parents-in-law, starting in July 2014. We cemented these rights by adding them to our contract.

Per Diem Agreement

We heard your concerns and in response to concerns from professional employees about their per diem agreement, and with Joanna Tan leading the team for the Professionals, our agreement was updated to include Professional employees and their needs regarding minimum shift requirements, holiday requirements / department closure and guidelines, scheduling, and call-offs.

SuperFloat Pool

The SuperFloat Pool job is hard enough without feeling like you're under attack all the time. Our Union was able to turn around the hospital's proposals to eliminate the pool and make sure SuperFloat skills are utilized effectively and fairly.

Union Rights

Union rights give us power when negotiating contracts and fighting for our rights on the job.

- Our new contract officially recognizes all new RN jobs that were created during the last few years.
- We gain an additional steward to represent members.
- We won additional rights to negotiate.

