

RATIFICATION VOTEElectronic Voting

Opens: Tues April 21 at 1930

Closes: Thurs April 23 at 1930

What You Need to Know:

- Ballots will be sent at 1930 on Tuesday 4/21 when vote opens.
- You can vote any time during that 48-hour period.
- Ballots will be sent to the email address nurses have on file with WSNA.
- Each Ballot link is unique to each individual nurse and can only be used once.
- To vote, you must be a dues-paying member in good standing.
- You can verify your status by checking your pay stub for WSNA dues deductions.
- If you need to update your email or confirm your membership, please reach out as soon as possible to ensure you receive your ballot.

WSNA Nurse Representative

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Longtime Central RN Weighs In

Many of us know Laura Gaukroger-Holland. It's hard not to. She started at Central in 1981 and worked in Peds, OB, ED, home health & hospice, and now is a nurse navigator in oncology infusion in the Mares building.

What some of us might not know (but wouldn't be surprised by) is that Laura was quite the mover and shaker in her nursing career. Her commitment and investment to this community runs deep. She started the fetal loss program in OB and the SANE program in ED, managing it for 28 years.

It's no wonder that she is 1 of only 2 nurses that earned the "Nurse of the Year" award twice! Laura also raised a daughter who is now a nurse at Confluence, caring for geriatric patients in our community. Not only has Laura had an indelible mark on nursing and our community in Wenatchee, she has a very specific perspective on what's happening right now for nurses at Confluence.

Laura is one of the many Oncology Infusion (Mares, Omak, Moses Lake) nurses that supported and voted on an MOU with the Central nurses to join the WSNA contract in 2024, with the full support of Central RNs. When asked about the recent conversations about people voting no, here's what Laura had to say:

"I wish I understood better why some Central nurses want to vote no and not support the nurses at Mares joining us. I just went through this when we organized and joined the Central contract 2 years ago. I would have been very upset if we had been treated this way. It makes me sad to know there are RNs that aren't represented and don't have the same safeguards as we do. I work in the Mares building now and I would hope that every nurse working under the CH umbrella should have the same protections, benefits and pay potential.

I recently had knee surgery at Mares and I received excellent care. I had firsthand experience with every single nurse along the way making a difference for me as a patient.

I'm going to vote yes. I just turned 70 and I'm retiring soon. Though this won't affect me, I'm voting yes because I've always been focused on what's best for the community – and that's all of us nurses finding strength together."

- Laura Gaukroger-Holland, Nurse Navigator, Central RN, Mare Campus



FOLLOW UP FAQ

Thanks all who joined one of the info sessions. A few questions came up that we thought worth clarifying.

SENIORITY: The current CBA's language in Art. 6.9, App. H, and App. I credits years of work as an RN at Central, Mares, Omak, or Moses Lake towards seniority. If nurses vote to accept the MOU, *all nurses will get all their seniority as an RN from Central, Mares, Omak, Moses Lake or Mares.* With a combined bargaining unit and seniority list, nurses will have more flexibility over the course of their careers in the Wenatchee Valley. Nurses could move between facilities and specialties without losing any pay.

1. If a nurse working in the ED at Central wanted more flexibility in the years before their kids started school, they could move into a pool nurse role in the ED at Mares at the same rate of pay and continue to accrue seniority.
2. If a the nurse's kids are older, they may want to shift gears in their career and try out a new specialty by taking on a role as a resident in the OR at Mares. The seniority they accrued in the bargaining unit across both facilities would make them a strong applicant for a specialty residency program.
3. If a mid-career nurse has a number of years experience and seniority, would be ideal candidates for open staff RN positions in the OR at either Central or Mares based on their qualifications alone. If another nurse was equally qualified, the job would go to the nurse with the most seniority, making it, especially helpful that this nurse never stopped accruing seniority, even as they moved between facilities, jobs, and specialties.

These 3 examples could be the same RN over one career. Point being: none of the moves would be easy under separate contracts but under the MOU, they could make all 3 moves without losing pay, retirement benefits or seniority.

700 BETTER THAN 550: There is no question that 700 united WSNA nurses in central WA will fare better than 550 in negotiations. The next largest hospital in the area is Kittitas, with 130 RNs. Voting yes to the MOU would mean *WSNA nurses at Confluence Health would be positioned to protect and raise standards of care in the region.*

NOT NEW: Many groups of nurses have joined existing WSNA bargaining units—and that's just in the last year. 3 different groups of case managers joined their bargaining units (Mary Bridge, Seattle Childrens, Tacoma General). 106 pool nurses joined and voted with the bargaining unit to ratify an MOU at Tacoma General. *Nearby clinic nurses joined their WSNA BU at Kittitas Valley Healthcare* and a group of Oncology Triage nurses are set to vote next week to join their colleagues at Good Sam. What's happening here isn't new. The circumstances around Confluence and the merger may have been different, but nurses organizing join collective voices is not.

MORE WHAT IF'S: What if the doctor's group does not re-up the lease for Mares and the campus closes? That kind of closure would be treated like any other unit closure. We would follow the lay off language in the contract.

MISSING SOLIDARITY: A Mares nurse expressed feeling disrespected by some of the Central nurses, making them want to vote no just for that. We understand that inclination. But it's important to remember that the loudest voices are not the only voices. Many nurses at Central have expressed a different opinion too. *If you are a Mares nurse that knows you would benefit from this MOU, vote yes because that's what matters to Mares nurses in the long run.*

NO HARM, NO FOUL: Central nurses might want to know what's in this MOU for them. To sum it up: it's all good things. *There are zero takeaways and only improvements in this MOU.* Central nurses would gain: 2 more paid re-release time positions for negotiations, more preceptor pay access, protection against unexpected weekend work, 30 additional minutes of paid time for conference committee, and stronger protections for our longstanding bilingual premium program. Mares nurses would gain the protections of the Central contract, including the 403(b) program and Central's wage scale, and both facilities would keep the vacation approval process that works for them. In short: everybody wins.