

WSNA and PROVIDENCE SACRED HEART 2026 TENTATIVE AGREEMENT HIGHLIGHTS

March 24, 2026

Dear Members—

Our bargaining team is excited to announce that it has agreed to a Tentative Agreement on your new contract. We have secured some excellent wins and we believe that this is a great contract and a fair deal. **Our team recommends a YES vote on this agreement.**

The final “redline” version of the contract will be available to everyone prior to the ratification vote on April 2, 2026. In the meantime, please review the highlights and overview of the tentative agreement below.

Compensation:

- **5% wage increase three full pay periods after ratification. 1.5% additional wage increase first full pay period following September 1, 2026. That’s a 6.5% wage increase in Year 1.**
- **Year 2: 3.75% wage increase first full pay period following January 1, 2027.**
- **Year 3: 3% wage increase first full pay period following January 1, 2028.**
- We eliminated 3 ghost steps at steps 17, 28, and 29.
- **What this means:** nurses between steps 1-17 will see a **14% raise** over the life of the contract. Nurses between steps 18-29 will see a **16-17% raise**, and nurses at the top two steps will see a **19% raise**. The full wage table will come soon.
- **Ratification bonus:** Nurses will receive a **\$1,250.00 ratification bonus**, pro-rated by FTE. Supplemental nurses will receive bonus as a .2 FTE.

Increased Premiums, effective second full pay period after ratification.

- Increased **night shift differential: \$5.50**
- Increased evening shift differential: \$3.25
- Increased stand-by pay: \$4.25 regular/\$5.25 holiday.
- Increased preceptor premium: \$2.25.

NEW PREMIUMS

- **BSN Premium:** Effective the first full pay period following October 1, 2026, nurses who have a BSN and validate their education with the Hospital using the official process will receive a \$1.25/hour premium. Nurses who have their MSN or DNP will

receive a \$1.75 premium. Nurses who have either education and their certification will receive a combined \$2.00/hour premium.

- **Wound Ostomy premium.** Effective the first full pay period following August 1, 2026, nurses who work in the Wound Ostomy department will receive an extra \$1.00/hour.

Break Relief

- **Pilot program for break relief nurses.** The Medical Center and Hospital Staffing Committee will establish a pilot program within 180 days of ratification of the Agreement which identifies break relief resources for 2 units/departments. The UBCs of those departments, in consultation with the unit's manager, will develop a break relief plan, including the addition of break relief shifts. These plans could also include break nurses. After one year, another unit/department will be added to the pilot. After two years the Hospital Staffing Committee may, in collaboration with the Medical Center, decide to adopt, modify, or eliminate the pilot program.

PTO Protection

- **No more burning PTO on holidays!** For nurses who work in procedural units, they will now have the option of taking unpaid time, rather than having to use their PTO, on holidays when their departments are closed or substantially reduced. For nurses whose departments are either substantially reduced or closed but running a call team, nurses can opt for voluntary low census. For nurses whose departments are entirely closed without a call team, they can opt for unpaid time.
- **Protecting current policies for CDI nurses:** Under the new contract, CDI nurses' PTO and LOA practices are protected and the Hospital has to bargain any changes with the union. CDI nurses will also get the benefit of not having to burn PTO on holidays.

Self Scheduling

- **NEW** language in our contract that allows current units who use self-scheduling to continue their processes and allow units to try who may be interested.

Workplace Violence

- The establishment of a new, hospital-wide Workplace Violence Prevent Committee, with real authority over the Workplace Violence Prevention Plan.
- Commitment from the Hospital to present analysis about a weapons detection system to the Workplace Violence Prevention Committee for the Committee to consider.

- Paid admin time for the full rest of your shift if you experience serious workplace violence and determine that you need to go home.

Healthcare Transparency

What we learned: Healthcare was the hardest issue that we tackled in bargaining. We know that many of our nurses were negatively impacted, blind-sided, and frustrated when the Hospital changed from the Premera network to Aetna. We went in demanding that the Hospital change back to Premera, sharing many of your stories of how the change had been painful and expensive. We spent months bargaining about this issue and demanding transparency on what happened. We ended up meeting directly with the Hospital's benefits expert who explained to us what happened every step of the way. We learned that the main problem for why we were paying more for healthcare was skyrocketing healthcare costs—not the change to Aetna.

Where we ended up: In exchange for drastic improvements to the transparency around health care, we made the difficult decision to agree to very small increases in our blended premium costs over the next three years.

- A dedicated Aetna Navigator to help solve our Aetna problems: for the next nine months after ratification, the Hospital will make an Aetna Benefits Navigator available to our nurses to help with issues and questions regarding the transition to Aetna.
- The establishment of a Benefits Program Health Committee, with five nurses and five management representatives, with a commitment from the Hospital to tell us in the future if it considering changes to our benefits.
- A 1% increase to employee blended HRA/HSA premiums in 2028, and another 1% increase to blended premiums in 2029.
- A 2% increase to employee blended Kaiser premiums in 2028 and 2029.

Takeaways our team fought off

- Total removal of part time salary in lieu option
- Doubling mandatory low census cap hours
- Paying on average 50% of dental premiums (currently pay zero)
- Removing nurse's ability to secure lab testing under Article 13
- Harmful language for nurses earning over 200k gross to pay higher medical premiums and no access to health incentive funding
- Process for employer to unilaterally assign vacant call shifts in 24/7 departments
- Huge changes and modifications to our layoff/reassignment language

- Removing assurance that nurses will have at least every other weekend off
- Not allowing nurse residents to transfer for 2 years, and not allowing nurse fellows to transfer for one year

This TA is a huge win for all of our nurses at Sacred Heart and while we did not get everything we wanted, it provides some big wins, new premiums, and lots of more modest improvements that we can build on for the future. **We recommend you vote YES.**