WSNA – Tacoma General
Contract Proposal Highlights

After nine bargaining sessions, the last one being 12 hours long, we have reached a tentative agreement (TA) with the hospital. We believe that the TA addresses the issues our membership identified as top priorities. As more fully outlined below, the TA includes many significant improvements, including wage increases, a BSN premium, increased standby pay, a bonus for experienced night shift nurses, and stronger staffing committee and workplace violence language. This Agreement reflects tradeoffs, including amending our proposal for increasing call pay after 24 and 48 hours and the requirement of 0.75 FTE to be full-time benefits eligible for new hires after Jan. 1, 2020. All existing MultiCare employees are grandfathered in to maintain this benefit at 0.6 FTE. We also agreed to their proposal of sharing the cost of monthly medical premium increases. We crunched the numbers, and the increases in wages and premiums far outweigh these costs. Lastly, we want to say that we fought until the bitter end to persuade management to increase the rest between shifts premium for nurses taking call for less than eight hours. They would not budge on this and withdrawing this proposal was a choice that we reluctantly made to bring this otherwise great package proposal to the members for a vote.

The Negotiating Team recommends a Yes Vote. **Highlights include:**

Wages and Benefits

- **Four & One-Half Percent (4.5%) Across The Board Wage Increase January 1, 2020.**
- **Four Percent (4%) Across the Board Wage Increase Effective January 1, 2021.**
- **Three & One-Half Percent (3 .5%) Wage Increase January 1. 2022**.
- **New Steps: 31 And 32.**
- **Shift Differentials:** Evenings $2.50 to $2.75, Nights $4.25 to $4.50.
- **BSN/MSN Premium:** An Additional One Dollar Per Hour for Nurses with A BSN, MSN, MN or PHD in Nursing.
- **Tiered Float Pool:** A New Tiered Float Pool for TG with three tiers for nurses with two or more year experience, including two dollars ($2.00) per hour for nurses who are able to work all units in one clinical cluster, three dollars ($3.00) per hour for nurses able to work all units in two clinical clusters and five dollar per hour ($5.00) for nurses able to work all units in three or more clusters.
- **Night Shift Bonus:** Nurses with at least four years of experience whose regularly scheduled shift includes four or more hours on the third shift (11PM-7AM) employed on December 31 of each year, shall receive a bonus of $1500 prorated by FTE.
- **Standby Pay:** Increase for standby pay in excess of 60 standby hours per pay period from an additional $.50 per hour to an additional $4.00 per hour for a total of $8.00 per hour.
- **New Washington State Paid Family Leave:** Establishes Nurses' right to choose whether to access PTO and EIT accruals or new Washington State Paid Family Leave. Nurses will be able to top off State Paid Family Leave with PTO or EIT to 100% of regular wages. Taxes will be paid by nurses and the employer per the new law.

- **Incentive Pay Plan:** TG Management can trigger an incentive pay plan which will pay incentive clearly communicated to nurses at the time of offer and which are not compromised by nurses prescheduled PTO or EIT.

- **Rest Between Shifts:** Neonatal Transport Team now will receive this premium.

- **Baylor Shifts:** The hospital will begin offer a 24-hour weekend shift composed of two twelve hour shifts paid at time and one half and treated as a full time position for benefit, PTO and EIT purposes. Extra shifts during the week shall be paid at the regular rate of pay. Those interested should check for details.

- **Medical / Dental Benefits**: Current nurses retain full time benefits at 0.6 and above. Newly hired nurses going forward will qualify for full time benefits at 0.75. Cost increases to medical premiums going forward will be shared on a 50/50 basis with a maximum of $50 per month. Dental benefits and premiums will be the same offered to non-represented employees.

Language Proposals

- **Staffing Ratio:** Medical/Surgical units (includes Medical, Post Surgery, Med Oncology and Tele units): 1 RN: 1:5 ratio and no RN/LPN teams.

- **Staffing Committee:** Improvements to Staffing Committee strength, requiring relevant information be provided and assuring the WSNA Nurse Representative may attend. During the six months following ratification, the Staffing Committee shall discuss, as a standing agenda item, PTO accessibility for RNs.

- **Workplace Violence:** Requires signage on each unit stating the Hospital's No Tolerance for Violence Policy. Assures Nurses will participate in the Equal Management/Labor Safety Committee now charged by the new WSNA sponsored workplace violence law with designing and implementing workplace changes, education, and facility assessment to improve safety for nurses, patients and visitors.

- **Float Nurse and Resource Nurse:** Distinct Definitions of each position are included in the Agreement. Clinical clusters have been adjusted to place Float Nurses in their own clinical cluster.

- **Evaluations:** Management may forego nurse evaluations.

- **Residency Period:** Maximum residency period extended from three to six months.

- **Low Census:** Nurses shall supply management with their current phone number for low census purposes.

- **Per Diem Nurse:** Per Diems may be scheduled for extra shifts due to emergent needs (defined as a hole in the schedule occurring within 24 hours of the start of the shift) ahead of FTEs.

- **10-hour shift differential.** If the majority of the hours of the employee's regularly scheduled shift fall within the designated evening (3-11 p.m.) or night (11 p.m. – 7 a.m.) shift period, the employee shall receive the shift differential for the entire shift.

- **Residency Agreement.** Change from one-year commitment to two-year commitment.

- **Charge Nurses as Preceptors**: Charge nurse are entitled to preceptor pay except when precepting other nurses for charge duties.

- **Pending Grievances:** WSNA agreed to withdraw eight grievances it determined were insufficient to warrant arbitration.

- **Negotiating Team Compensation**: Hospital will retroactively pay Bargaining Team members for actual time spent in negotiations (not including prep time).

- **Grievance Time Limits**: Improved language on grievance timelines.

- **Successorship**: Provides 60 days' notice of sale of Hospital and binds successor employer to Collective Bargaining Agreement.

Again, we believe that this is a strong Agreement which will improve and protect our professional lives and lay a strong foundation to build on in the future. In addition to the above, numerous minor contract changes, clarifications and language clean up are in the proposal. The Association encourages all RNs to take time to review the full draft Proposed Agreements which will be available at the ratification vote.

Your Bargaining Team Recommends a YES vote on December 16!

Sincerely, your RN bargaining team—*Ally Bure, OR; Charlene Sole, ER; Brenda Bowhay, Mother Baby; Cherie Griffith, Med/Surg; Michelle Stevenson, PCU; Danielle O'Toole, ICU; Liz Leske, Peri-Anesthesia; CJ Johnston, ER; Kayla Dougherty, NICU; Jess Oyler, OR*

Voting will take place in Classroom 1, 4th floor Commencement.

Vote times:

6:30-8:30 a.m.

2:00-4:00 p.m.

6:00-8:00 p.m.

Voting is in-person only. Only WSNA members in good standing are allowed to vote. Non-members may join at the vote by completing a membership application prior to the vote. Questions about membership? Contact WSNA at 206-575-7979 ext 0 or membership@wsna.org.