

August 22, 2018

BARGAINING UPDATE

Safety now, listen to staff!



It's important for us to be safe at work so we can do our jobs without the fear that we will be assaulted and injured. Our patients deserve to have the right staffing that ensures they get the care they need.

We are the reason DSHS and DOH are able to function. Without us, the work would grind to a halt.

That's why we took action when two of our coworkers were assaulted in a three day period. We marched on administration to share our stories and concerns. We told management enough is enough. It is time for management at WSH to listen to us, value our input, and include the frontline staff in the allocation of staff for patients. It is not appropriate for us to have patients in areas where we are not only short staffed but also don't have the appropriate equipment and training.

We have come together from all over our union to send a strong message to our governor and to management that they need to do better. And it is working. But we know they can and should do more. Their proposals need to reflect the value we have as front line caregivers.

We expect management to work with us on taking the necessary steps to turn things around at our hospital. We will stay united and continue to take actions until the necessary changes are made.

Our next bargaining date: September 11



"It was powerful to see us all united across unions tell management that enough is enough and they must act to make sure we can have a safe work environment that protects us and our patients. We will stay united and will continue to take action until management makes the necessary changes, we cannot wait any longer, I don't want more assaults. Management needs to act now."

Janie Palafox,

Organizational Development, WSH



"Management needs to realize that our objection to mandatory overtime isn't just about the time taken away from our families, about our health, and about our lives outside of work. It is about safety for the patients and the staff. It is about being able to provide quality care and preventing caregiver fatigue and burnout. The

evidence has been out in the medical community for years. In order to provide the highest quality of care to our vulnerable population, the staff need adequate rest. When management cannot commit to even considering eliminating the use of mandatory overtime they demonstrate their lack of interest in providing high quality care for the patients. It's disrespectful to the RNs and their families. It makes us doubt if they are truly interested in retaining experienced and quality nurses."

Melissa Staples RN3, Eastern State Hospital



"Until a robust float pool is in place, RNs who have to float off their home unit should be given an hourly premium. This will increase employee satisfaction. We need this to recruit and retain our RN staff."

Van Braas RN2, Eastern State Hospital



"Everywhere else in the healthcare field has a 40 hour standard work week, not 45. Management wants consistency, so why are they against changing the wording to 40 hours a week so it is consistent with all other employees of DSHS? Management needs to make working conditions respectful for all employees. Identifying one

group of nurses to work 45 hours before they can request exchange time when other nurses receive time and a half for any hours over 40 a week is disrespectful and inconsistent."

Betty Diaz, Yakima RCS

We must stay united for our clients, our patients and our families.

Improvements for better care, better lives	We're united for change	Management's position
Charge nurse hourly premium for RN2s required to perform charge duties.	We see this premium as an important way to respect and cultivate the specialized skills it takes to charge.	No.
A robust Float pool.	We need to have nurses whose sole purpose is to float to units that need more staff. A float pool will keep us working in our home wards.	Move people who are working wards into float positions, creating more holes in the schedule that need to be filled. Ineffective.
Redeployment premium when staff RNs are required to float.	If a nurse is assigned away from their home unit for a shift, they should be paid an hourly premium.	No.
Preceptor hourly premium.	Yes.	Yes.
Discipline.	Demotions and pay cuts have no place in a just culture. We are proposing a process that expedites the process of investigations and eliminates the practice of demoting and reducing peoples pay as a form of discipline.	Prefers to keep archaic and punitive measures.
Nurse consultants; Exchange time: working 45 hours and being paid for 40 hours..	Nurse Consultants can only get exchange time after 45 hours a week. Which means they are working 20 hours per month without pay.	Management prefers to leave this provision in place.
Mandatory overtime	Create timelines and deliverables for making staffing functional and mandatory obsolete .	Agrees to meet a statewide taskforce beginning October 2018 to revamp the unscheduled leave, overtime and mandatory overtime policies.
Across the board raises.	4% in 2019, 4% in 2020.	2% in 2019, 1% in 2020.
Additional top step.	Add pay increase at year 23, add additional 2.5% at step 26.	No.
Comp time.	All nurses under the same contract should be afforded comp time, if they choose, when they work a holiday or overtime.	No. Management can treat nurses at different facilities differently.



Our bargaining team

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