

Our Expertise Needs to Guide Our Hospital

As frontline staff we know what we need to make the best and safest experience for our patients. We want to be fully present for our patients and that means standing up for what we need to accomplish that. Our bargaining team is leading with our priorities with proposals to help make that happen.

- **Guaranteed staffing standards to give quality care to every patient every day**
 - Staffing ratios that will ensure patient safety
 - Med/Surg RN to patient ratios
 - RN 1:4
 - PCA 1:10
 - Units that follow national guidelines will continue
 - Charge nurses will have the authority to improve staffing ratios based on acuity, time intensity, location of patient rooms, and other considerations
 - OR staffing huddles in advance of days when the schedule exceeds scheduled staff
 - Med/Surg Float Pool will only float out of Med/Surg units voluntarily
- **Improving our Vacation access and accrual to have time away from work**
 - Increasing 16 vacation hours per year
 - Addition of a 16th year to the tier
 - Part time and full time Service workers accrue the same rate of hours like the RN and LPNs do
 - Large units able to have 2 people off at a time on each shift so we have better access to use our vacation time
- **Standards that protect us and our families**
 - New language in the Service contract to request decrease in FTE when they need it
 - WA State paid family and medical leave premium is paid by management so the burden doesn't fall on us and our families.

We stood up to management by continuing to lead on our values as healthcare workers. We know what is right for our patients and families and will continue to advocate for what we need in the face of management's bad initiatives like curtailing our ability to have our preferred delegate with us when we need one, having low level disciplines follow us for two years, and cutting the pay of our Per Diem co-workers. By standing together we're telling management they need to respect our expertise and focus on the values we have that we know are the right thing for our hospital. Talk to your bargaining team member about what we're doing together to take action to lead on our proposals and stand up against management's harmful initiatives



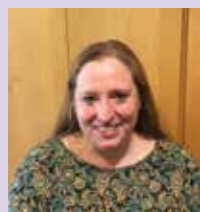
I suffer from several chronic issues as well as having a 5 year old son with autism. These take me away from work more often than I like and it can take a toll on my sick and vacations hours to keep my paycheck whole. Having access to this benefit would be great but I couldn't take another

burdensome cost to continue to care myself and my family. Having management pick up the full premium makes this less of an impact to my family. **Melissa Hawkins, MA, Covington**



We are mostly Medical/Surgical trained nurses in the float pool with a few of us having additional training. A hot topic and a source of anxiety and discontent is when we are forced to float outside of the Medical/Surgical units such as in ED or CCU. Being forced to work in units you are not familiar with and patients with higher acuity is an

unsafe practice. That's why we will only float outside of Medical/Surgical units on a voluntary basis. **Caesar Tuguinay, RN, Float Pool**



We need to keep retention and recruitment as a priority. We work with some really great and talented people and in order for Valley to stay competitive and employer of choice; we have to maintain industry standards by improving our vacation approvals and accruals.

Cori Lucas, RN, CCU/ED Float Pool



I currently work a 0.6 FTE to accommodate for school and since our vacation accrual is based on FTE, I miss out on about 67 hours a year. This affects what I can do for school as I am unable to take extra time off or volunteer for low census to study since I do not have any hours to

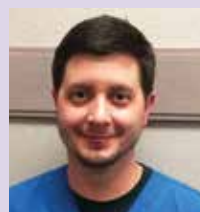
keep me from losing pay. **Mandy Becker, PCA, 7S**



Addressing ongoing issues in the Main OR will eliminate a lot of mandatory overtime right now. Management isn't enforcing block time scheduling so rooms are consistently being scheduled over the capacity of the staff scheduled and management isn't addressing it early so

we can be prepared day of. This language will bring staff together to find solutions to staffing issues days in advance instead of relying on Live Process and overtime the day of.

Kelci Berto, RN, Surgery



Being a delegate I have represented many of my co-workers in investigation and grievance meetings no matter their bargaining unit. Management trying to limit who can be a delegate for other co-workers doesn't work and is an attempt to pull us apart. We have a union

to have our voices heard together and we will continue to represent each other across job class as that's what works best for us. **Chris Lopez, RN, 2W/3E**