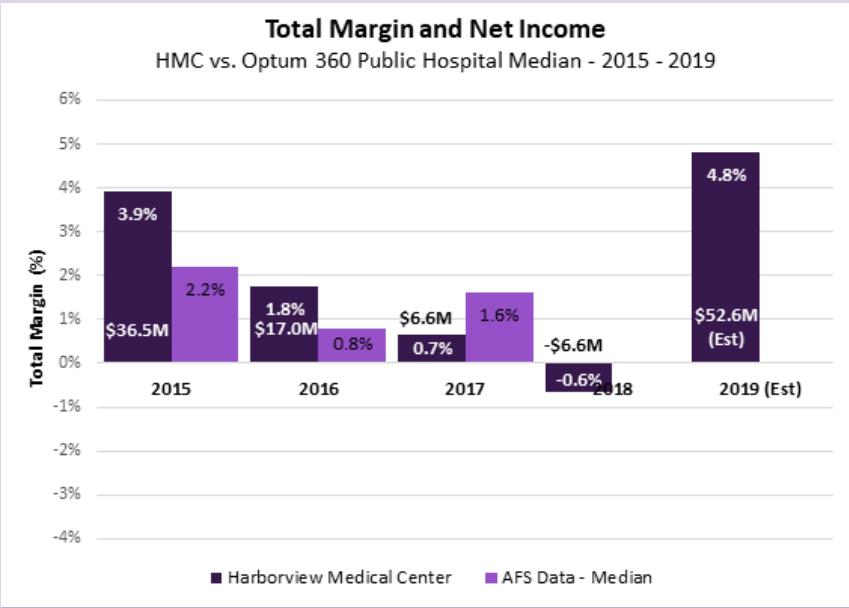


UW Medicine and Harborview can afford to invest in us

Last year in coalition bargaining, UW told us that they had not budgeted enough money to provide cost of living wage increases for staff that was higher than 2%. They asked us to join them in Olympia to raise funds for higher wages. Because we talked to elected officials, we were able to increase funding for Harborview and UW Medicine to support wage increases. We know because of our work and partnership in Olympia, Harborview and UW Medicine can afford to fund our priorities and invest in us, the frontline staff who make Harborview the best place to receive emergency and safety net care.



Sources: Harborview Medical Center Audited Financial Statements, 2017 and 2018
Harborview Medical Center Financial Statements January 2019
Government – Local Median, Almanac of Hospital Financial and Operating Indicators, Optum 360°, 2019

New Funding for Harborview and UW:

- \$20 million dollars over the next two years by eliminating Harborview’s B&O tax burden
- \$5 million in extra funding for workforce and operations
- Additional appropriations for wage increases for UW staff
- Using financial data from seven months of Fiscal Year 2019, we are projecting a higher operating and total margin than we have made since 2015

Our unity with Airlift NW is making a difference

Our unity through action and community support has made a big difference in bargaining and Airlift NW management has begun to take many of their proposals to cut care and standards off the table. We are making good progress towards a contract we can all stand behind, but we need to continue to put pressure on Airlift NW management to ensure we are able to continue to provide excellent, emergency critical care to our communities.

Highlights include:

- Retaining our current scheduling practices and protections. Management will not be able to change out schedules once posted without mutual consent.
- Protecting our union voice and will continue our JLMs as normal so we can address our concerns.

We still have work to do to maintain the RN/RN model, retain shift premiums for those of us that work 24 hours shifts, and get a fair wage increase. It will take each of us uniting with our colleagues at Airlift NW to achieve a contract that raises our standards.



SEIUHealthcare®
United for Quality Care

Harborview Medical Center
Airlift Northwest

June 7, 2019

BARGAINING UPDATE

We are the of Harborview

Without our care, our union voices, and our expertise, Harborview and Airlift NW would not be the institutions for our communities that we are. We have worked through the years to raise standards for our patients and for us. That’s why we wore stickers to remind HMC and UW Administration that our care can’t exist without us, the frontline and bedside caregivers. We are the heart of Harborview, and we are calling on management to value the essential role we play by agreeing to a contract before June 30 that moves us forward together.

We still need administration to invest in many of our priorities:

- Organizational Equity and Inclusion (OEI) Committee to address impacts of racism, discrimination, bias, and harassment while we are at work
- Parity with UW Medicine standards, including premiums because equal work should have equal pay
- A strong voice in the staffing our patients need and guarantees for uninterrupted breaks with our break relief program and adding a break relief nurse to 4WH Rehab
- Across the board wage increases that value our work with patients and recruits and retains highly skilled co-workers



“EDI was born in 2015 from patient discrimination toward a female Somali Muslim staff member. The work of EDI, while very important, has since focused on *discrimination from staff toward patients*. We need management to address organizational/peer bias and *discrimination toward staff*. The time is now for meaningful action against racism and oppression of staff.”
Sonja Bring, ARNP, HCS

We need a workplace where all of us feel like we belong

In our work with administration to advance our Organizational Equity and Inclusion proposal, we have been having discussion about how our proposal would interact with ongoing work by the Equity, Diversity, and Inclusion Council. We know our proposal will fill a critical piece of creating an organizational culture at Harborview where all of us feel like we belong.



“What the EDI Committee is doing is good for patient care, but it is ironic that the EDI Committee started as a reaction to the 2016 election and how Muslim staff were being treating by patients. Staff gets discriminated and harassed by patients, other staff and management. We don’t have a place to report because who you report to are part of the system. We need it to be clear where people can report issues and have them addressed. It won’t eradicate discrimination but it will be a step in the right direction. This is one of the most important things that our union and management can collaborate on. As a union we have acknowledged there is a problem and we are trying to do something that addresses the problems we face. I implore management join us on this cause. Administration cannot stop someone from being racist or harassing us, but they can try to work with us and show genuine effort. We know if we do this it will also improve our patients care.” **Peter Njoroge, 4W, RN**




“Implementing our OEI proposal will enable us to recognize necessary tools and skills for fair and safe practices for staff and is vital for staff to feel empowered and strive at the workplace.”
Neeru Kaur, RT

www.seiu1199nw.org • 1-800-422-8934

Follow us and be part of the conversation
@SEIUHealthcare1199NW
seiu1199nw.org



Proudly Produced by
the members of SEIU
1199NW & Staff Union
bb 060719 hmc



"I wore a sticker to show support for a fair contract. We need to maintain patient safety by keeping break RNs and current scheduling practices. Changing our schedules would create fatigue, stress, and anxiety. Given the cost of living in our community, 1% is not a fair wage offer to staff."
Tanya Al-Ghazi, RN3, 3EH



"If management can change my schedule with only 5 days' notice, I wouldn't have a babysitter. I would have to call out sick and I don't want that for my patients or my co-workers. They rely on me to be there and that's why I wore a sticker."
Hiwet Asfaha, RN, 5EH

