

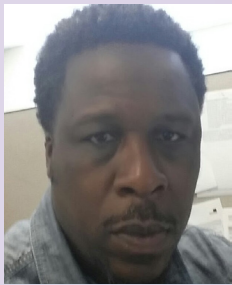


Our bargaining proposals uphold our values and protect our patients

We are determined to continue negotiating to reach a fair contract, and the proposals presented by our bargaining team at bargaining move us closer to an agreement without compromising on our values.

Our proposals are the right solutions to the problems we see every day on every campus. When Providence refuses to bring strong commitments to staffing or a package that will recruit and retain, our patients suffer. That's why our bargaining team is standing strong for our proposals that put patients before profits.

We have bargaining scheduled for December 30, when management can choose to bring movement that addresses our concerns regarding patient safety, racial justice and recruitment and retention.



"We deserve to have wages that we can depend on. We live in Seattle, one of the richest cities in the world and I'm about to move to Puyallup all because I can't afford to live here. I feel that what we're asking for is very fair, when you look at the top of the line, the CEOs who get the bonuses -- Providence executives get those bonuses because of us. We are the workers and we do the work. We all chose to stay here and fight because we chose to take care of our patients and work with our co-workers. We're not asking to break the bank, were just asking to be able to take care

of our families and serve the patients and communities we work for because we are all talented healthcare workers. We won't stop fighting for what we deserve until we get a fair contract." **Tony Jackson, Authorization Specialist, Met Park**



Neuro Critical Care, Cherry Hill

"We deserve to have our safe staffing proposals taken seriously by management and not dismissed. We deserve to be treated with respect. Swedish is not upholding its obligations to bargain in good faith with us but we will not give up. We will fight for the proposals that we know will make our patients safe and our lives better despite Swedish's unfair labor practices. We will win."

Cara Alderson, Charge RN,

Issue	Our Proposals	Management's Proposals
Safe Patient Care Our hospitals are in crisis. We know what our patients need for safe patient care because of our experience at the bedside. Our proposal is a step in the right direction to make sure our patients get the care they deserve. We're tired of working short staffed, of not being able to take breaks, of going home late. We know that the right staffing conditions have a direct link to better patient outcomes and staff retention.	RN and NAC ratios to guarantee a maximum patient assignment Transparent core staffing and FTE equation that allows us to flex for acuity Break relief staff for RNs, NACs and ED Techs because we know the buddy system does not work ALL PSAs in addition to our matrices Concrete measures for workplace safety including personal safety alert devices, mandatory safety trainings and appropriate staffing levels	NO response NO response A committee to help manager's understand why we're missing our breaks Additional job classifications for PSAs with no commitments to additional FTEs Management proposed a subcommittee to a safety commitment
Wages that recruit and retain Our bargaining survey showed: <ul style="list-style-type: none"> We are commuting an average of 84 mins/day Over 58% of us are NOT able to afford to live near where we work Over 47% of us struggle to pay our rent or mortgage 	7/1/19 - 7% <u>6.75%</u> 7/1/20 - 6% <u>5.75%</u> 7/1/21 - 5% 7/1/22 - <u>5.75% (new duration to 10/31/22)</u>	Upon ratification - 2.5% 1 year later - 2.5% 1 year later - 2% 1 year later - 2%

<p>Quality Infection Control</p> <p>We are protecting patient safety by uplifting the infection control standards of Environmental Services.</p> <p>All workers deserve respect and appreciation for the roles we play.</p>	<p>Set workload limits to ensure that there is enough time and staff to provide quality infection control and create a plan for escalating workload and staffing concerns</p> <p>Address issues of favoritism, racism and sexism in our hospitals, including the prohibition of EVS workers in many break rooms</p> <p>Expand training opportunities.</p> <p>Set assignments based on a commitment to staff according to the need, and to ensure that we are not injured on the job, as well as guaranteed light duty</p>	<p>NO response</p> <p>NO response</p> <p>NO response</p> <p>A commitment to follow through on their 2015 commitment of set assignments, not based on the need</p>
<p>Organizational equity and inclusion to address racism, sexism, discrimination in the workplace</p> <p>We are creating a culture of belonging together by listening to each others' experiences and uniting with each other for a better patient care environment and a more just place for workers.</p>	<p>A labor management partnership to guide, build skills, train, review data and build a plan for systemic change to improve equity and inclusion at Swedish</p> <p>An urgent action structure to address acute issues of racism and discrimination</p> <p>Prohibit sexual harassment and include an annual in-person sexual harassment prevention and response training for all managers and union members</p> <p>Protect our co-workers from having to provide their citizenship information repeatedly or have it unnecessarily scrutinized.</p> <p>Accommodate religious practices by requiring Swedish-Providence to provide scheduled breaks in accordance with an employee's prayer schedule, including access</p> <p>Accountable relationships between Swedish and law enforcement that help us do our jobs</p>	<p>A subcommittee of the ABC committee NO response</p> <p>NO response</p> <p>NO response</p> <p>NO response</p> <p>NO response</p> <p>NO response</p>
<p>Respectful standby/call</p> <p>For those of us who work in areas with mandatory call, we take pride in being where we need to be to give life-saving care. Our pay and conditions need to reflect that commitment.</p>	<p>Increase standby pay to Seattle minimum wage</p> <p>Recognition for working call on holidays</p> <p>Alignment with the new state law - mandatory call can only be used for urgent/emergent needs</p> <p>Sleep room guarantee</p>	<p>NO response</p> <p>NO response</p> <p>"Robust feedback loop" for inappropriate use of call</p> <p>"Create and evaluate solutions" for the people who cannot get to the hospital in 30 minutes</p>
<p>Quality, affordable, accessible medical benefits</p> <p>We must be healthy to provide quality care to our patients. That's why we are eliminating cost barriers that keep us from getting the care we need or putting us into debt when we do.</p> <p>Our vision includes big improvements for the PPO plan, under which all Providence workers have access to the same great benefits</p>	<p>Improvements in PPO:</p> <p>Network: expanded, including behavioral health</p> <p>Co-insurance: 100% coverage</p> <p>Deductible: 0%</p> <p>Copays: \$0</p> <p>No Virgin Pulse requirement</p> <p>More affordable urgent care, ER visits</p> <p>Expanded alternative care</p> <p>Expanded vision and dental coverage</p> <p>Bring PPO plan design to all Providence workers</p> <p>Keep prescriptions affordable and available in 90-day supply</p>	<p>NO</p> <p>NO</p> <p>PPO Deductibles go up in 2021 to \$375 and \$400 in 2022</p> <p>NO</p> <p>More demanding Virgin Pulse requirements</p> <p>NO</p> <p>No alternative care coverage</p> <p>No vision plan assistance</p> <p>NO</p> <p>NO</p>
<p>Sick and family leave when we need it</p> <p>We can't count on perfect health for us and our families throughout our entire careers. "PTO," where management combines our sick and vacation banks, creates the risk that sick time will not be available when we need it.</p>	<p>Maintain our separate sick and vacation banks so we have sick leave for ourselves and our families</p> <p>Align with the state law - workers cannot be disciplined for legitimate use of sick leave</p> <p>Employee premiums for the new state Paid Family Leave would be paid by employer</p> <p>Backup care for family members and children in an emergency</p>	<p>NO - Management has proposed a "PTO," where management combines our sick and vacation policy that reduces our leave hours by up to 80 hours annually.</p> <p>NO</p> <p>NO</p> <p>NO response</p>

<p>Dignified retirements</p> <p>We all need to know that, after years of dedication and commitment to Swedish patients, we can retire with dignity.</p>	<p>Increased contributions in the 401K to meet the Kaiser standard of 6% base and 3% match</p>	NO
<p>Social workers and counselors are part of our team</p> <p>Yes they are!</p>	<p>Inclusion of social workers and counselors in our Tech contract and the same standards as all Swedish workers</p> <p>A wage scale with year-for-year credit for past experience that matches Edmonds social workers.</p> <p>A counselor scale at 10% below the social worker scale</p>	<p>NO</p> <p>Management has proposed a wage scale for social workers and counselors but without credit for experience.</p> <p>Management proposed a scale at 30% below the social worker scale.</p>
<p>A voice during reorganization</p> <p>We see tremendous change and restructuring at Swedish. During change, safety is paramount and our voice in the process is essential.</p> <p><u>Grievance procedure</u> It is always our goal to solve problems at work at the lowest possible level of the grievance procedure. However, when this can't happen we need stronger language to improve the grievance procedure and ensure our contract and rights are being protected.</p> <p><u>Solving problems at work</u> Our labor-management committees are our continued voice at work to make Swedish a great place to give and receive care. We deserve recognition for the value we bring to these committees and to Swedish</p>	<p>Formalizing the beginning of the process</p> <p>Creation of an explicit pause before moving into implementation for check on safe patient care and readiness. Adding right to expedited grievance process</p> <p>Expedited grievance procedure for issues regarding staffing, restructure and other key areas to ensure speedy resolution of contract violations.</p> <p>Grievance process for common issues to unify our contracts</p> <p>Ensuring release of committee members, including night shift, so all of our voices are heard in committees. Swedish compensates all wages lost from committee participation so committee members can be kept whole.</p>	<p>NO</p> <p>NO – and Providence proposed to be able to subcontract any work in the hospital. They have not made specific proposals about any specific work areas but want the right to do so with a limited notice period Providence proposed to be able to subcontract any work in the hospital. They have not made specific proposals about any specific work areas but want the right to do so with a limited notice period</p> <p>NO</p> <p>NO</p> <p>Also, management proposed that grievants who file grievances that go beyond 180 days without resolution automatically lose disputes.</p> <p>NO</p>
<p>Preparation for unexpected events</p> <p>As healthcare workers, we know to expect the unexpected and we understand our lifesaving role, even when it's snowing. We need to plan for disaster events so we can do our best work.</p>	<p>Preparation for and rights during natural disasters and snow days</p> <p>Updating low census banks to reflect the current size of the organization</p>	<p>NO response</p> <p>Management has proposed some increases in the low census hours for most job classes.</p>
<p>Recognition for our flexibility when floating, and retaining staff who give great care in our home units.</p> <p>The top priority in floating assignments must be the safety of our patients. Floating should be a last resort.</p>	<p>Creation of new multi-campus float pools for Outpatient Clinics, Respiratory Therapy, Emergency Departments, Social Workers</p> <p>Creation of floating workgroups for NACs, Social Workers and Respiratory Therapists, plus updating and protecting our existing floating workgroups in recognition of the specialized care we provide</p> <p>Ensuring critical care nurses can maintain their competencies by limiting floating outside of ICUs.</p> <p>Recognizing the changing scope and expectations for our float pool staff, we propose an increase in the premiums for RN, NAC and HUC float pools.</p>	<p>NO</p> <p>NO and major changes to existing RN floating workgroups that would allow managers to float core staff even more</p> <p>NO</p> <p>NO</p>
<p>Raising standards in our outpatient clinics around the system</p> <p>Our clinics play a critical role in the ongoing care our patients need. Our proposal prioritizes respectful treatment and recognition for all workers, including clinic staff.</p>	<p>Creation of a new labor management committee to represent ALL clinic employees to address our specific needs</p> <p>Creation of a new multi-campus float pool just for clinics with RNs, MAs and PSC-II/Llc to help address our chronic short staffing problems</p>	<p>NO response</p> <p>NO</p>

Building community awareness and strength

We have built relationships and created strong bonds with local leaders and members of our community, and we will continue strengthening those bonds because our community deserves to know what is happening at all of our campuses. We are letting them know we do not want to strike; we want a fair contract that centers on patient care, not profits.

Along with other union members from around the Providence system, we attended the annual Providence Gala to ensure that big donors know our priorities, and to make it known that Providence is slowing this process down by not agreeing to a fair contract.

