



Coronavirus Update: Standing for Safe Staffing at All Times

The coronavirus outbreak means that we are testing the ability of our hospital to handle a public health crisis. Our commitment is to provide and advocate for safe staffing at all times. We are committed to being there for our patients. We held an emergency labor-management meeting call with management to discuss staffing and patient safety. Our concern is that when we are short staffed, it puts patients and current staff at greater risk of exposure or quarantine.

	Our Proposal	CHI Proposal
Pay for Quarantined Staff	Full pay from the employer, without depleting our accrual banks, similar to Valley, Evergreen and other area hospitals	No- staff must use sick time or vacation time or go unpaid
Incentive Pay that will keep our hospital staffed during this challenging time	1.5x pay for per diem staff, + \$15/hr extra pay for part time and full time staff	1.5x pay for per diem staff, +\$5/hr extra pay for other staff

CHI Needs to Pay Us for Our Quarantine Time

We are there for our patients, and that means that CHI needs to be there for us. It is unacceptable that we have to deplete our own sick and vacation banks in order to be paid when we were exposed to coronavirus while on shift, doing our jobs providing care to every patient who walks through our doors. We are demanding that CHI Highline do the right thing by paying people on quarantine. CHI also needs to promote adequate staffing at all times by paying adequate incentive pay for staff to pick up additional shifts during this challenging period.

Staying on top of any new outbreak depends directly on the response available from us, the frontline staff. We will continue with actions to ensure the safety of our coworkers, patients and the community.



“It’s not our fault that we were exposed at work and our quarantine time should not come out of annual or sick leave because we need that time for when we are really sick. We are high risk and care directly for the patients. This should be paid because we got

it from work and should be full paid without taking our sick or vacation time. I’ve already been out for three days and don’t know if I will miss another three days. I cannot afford to go without pay. Going forward we need better measures for the hospital to isolate and treat contagious patients.” **Adiam Gidey, RN, PCU**

Staying Safe at Highline

If you believe that you may have been exposed to COVID-19, notify Employee Health and notify your union delegate if you need additional support. Management said on our conference call that they are continually developing resources to support us and training staff on the floor to use protective equipment properly. If you need more support than you are being provided, please notify a delegate or staffing committee member.

Patient Staffing Win: No patient assignments for Charge RNs on our new surgical unit

We used our new contract language to guarantee higher staffing levels and dedicated charge nurses for our patients. When CHI proposed opening the new 5 Cedar Surgical floor, the first staffing plan they proposed had no CNAs and only RNs. We said this was unacceptable, that it would not work to have no CNAs for these patients recovering from surgery. Management came back with a new grid that meant that charge nurses would take up to 6 patients. Nurse union members on the staffing committee held management accountable to our new contract standard that charge nurses would not normally take patients and demanded that management redo the staffing grid to reflect our new standards. **Our staffing committee was able to work out a new grid to reflect this new standard and now 5 Cedar will have a dedicated charge nurse as well as CNAs.** Our patients, coworkers and Highline as a whole will benefit following this new approach to patient staffing.



“We stand for changes that will support the safety of staff and patients. Our new contract language means that charge nurses will not normally take patients. We made a new proposal to management for the Surgical floor that meets our contract standard and now charge

nurses on the Surgical floor will not be assigned patients. Our next effort will be to review the present practice of the buddy system and examine and propose changes to the RN buddy system for safe and uninterrupted lunch and rest break coverage.”

Marghee Baldrige, RN, Emergency Department

Our next steps: Dedicated break relief nurses, dedicated charge nurses, and higher staffing standards throughout the hospital

When we are short staffed we know that our breaks, alertness, and patient safety are all in jeopardy. Our commitment going forward is to our patients and coworkers. We are willing to work with management and take action in order to win higher standards, and while we won a commitment to dedicated charge nursing standards, we know that there are departments where that is still not happening. We also know that the right thing to do is bring back the popular break relief RN program that was piloted on 6 Birch. We want Highline to be a safe and attractive place to work and when staffing shortages mean missing breaks, or making errors, it is the wrong solution for Highline and our community. Talk to your staffing committee member about setting the right staffing standards for your unit.

If your department does not have a dedicated charge nurse, fill out a short staffing form and talk to your nurse staffing committee or bargaining team member.

Contract Calendar: Raises and Open Enrollment

Our new contract means everyone will get at least a 4 percent pay increase. We will see the increase on **March 13. We will also see retro pay on March 13, including an additional pay period of retro pay beyond what we originally bargained to account for the fact that our raises started the second pay period after ratification, not the first pay period.** We also can expect some job classes to get adjustments that will mean even higher raises.



“We are very happy about the raises that will start on March 13. It’s something that we needed in order to recruit and retain staff. Now we need to recruit more staff, and the raises and benefits will help. It’s important that to make sure we have enough staff at all times as well so we do not miss breaks or work short staffed. This is the most important issue to address now so that we can retain our new staff and continue providing good care.”
Levorn Glover, HUC, Medical

Details of our raises in our new contract

Retro pay	3% retro payment going back to July 2019, paid in March 2020
Raises on ratification	4% increase, minimum, for all coworkers. Higher for many service workers (details below)
Raises 7/1/20	2% across-the-board increase + 2% market adjustment (4% increase) – RNs
	2% across-the-board increase, NEW top step 26, 1% lump sum bonus – service workers
Raises 7/1/21	2.25% increase for all coworkers
CONTRACT EXPIRATION 6/30/22	

Details of raises for Service workers on ratification

2 percent increase to every step of the pay scale for every job classification

+

2 percent further increase to every step of the pay scale for several big job classifications that are especially behind – CNAs, Unit Secretaries, EVS, Cooks,

+

NEW Step 11, 2 percent above Step 10, with every step above Step 11 moved up a further 2 percent

68 percent of Service coworkers will benefit from this by being at Step 11 or higher

+

NEW Step 24, 2 percent above Step 22

Over 100 coworkers will get 6 or 8 percent raises or higher right away from the combination of these four increases

Additional increases:

- Increasing minimum wage to \$16.34/hour (up from \$15.05/hour now)
- Consolidated Dietary pay scales – meaning big immediate raises for Early Tray and Late Tray positions
- 4 percent increase guarantee: Any coworker who does not get a minimum 4 percent increase from these raises together will move up an extra step on the pay scale on ratification—bringing their total increase to 4 percent or above

We won a voice in healthcare over the length of our contract

- No premium increases for 2021
- If premiums go up in 2022, CHI needs to pay at least half the cost
- Access to the wellness plan for everyone
- Protections from collections and access to financial assistance for hospital visits

Open Enrollment for those of us currently on the Zenith plan will be April 1 through April 15. We will have more information coming later this month so that every coworker can choose the health plan that is best for us and our families.