



Safe Staffing Saves Lives

Taking Action Together to Fix Staffing

We are united for better wages that would recruit and retain, and we are committed to ensuring safe staffing so we can continue providing quality patient care. Management, on the other hand, wants us to do more with less. They came to the bargaining table proposing to fix our staffing problems by mandatorily floating all job classes between all UW facilities. Their proposal would float us whenever they want to, for whatever reason.

That is why hundreds of us took action throughout the hospital and clinics — wearing stickers, showing our solidarity with the bargaining team and with each other, and telling UW to “Fix Staffing.” We have made proposals that would do this, and we are united to win for the safety of our patients.



Respect Us, Protect Us, Pay Us

Flip over for the bargaining update!

Floating

Our Proposal

We proposed that for anyone who is floated outside of their home department or clinic, that they get a premium depending on how far it is they are floated. We are not proposing floating to Montlake and its clinics.

- * Floating outside home department/clinic: \$3.75 per hour
- * If transportation must be used (clinics only): \$6 per hour
- * If outside of your region (clinics only): \$8 per hour

Management's Proposal

Management has not yet responded to our proposal for float pay premium within Northwest Hospital and clinics. Rather, they proposed mandatory floating between Montlake and UWMC NW for a \$4 premium. Their proposal included no minimum notice, which could lead to us floating to Montlake mid-shift for any reason.



"I asked management in bargaining about training and orientation for this floating. What kind of training I will get for a floor I don't know? And they said it depends, case by case. My experience is that people are busy, and they will train you for a few minutes, but with our patients' lives, there is no room for error. You are in an unfamiliar work area with unfamiliar equipment, and if you make an error, HR will come for you. They are setting up their employees for failure with this proposal."

TJ Drammeh, CNA, Medical



"Seems like we are just interchangeable job classes to upper management – uniform checker pieces that they can move around, resources that they can leverage. It isn't safe for us to go work at a new place without full-on training. Every site is so different. It shows how disconnected our leaders are that they don't get this. Any serious proposal for mandatory floating of all staff that would change our lives so dramatically, both professionally and personally, would need to have every detail spelled out and include incentives. This proposal was made without thinking about the realities, like how costly it would be to have so many people cross-trained appropriately and regularly re-trained. Much safer and cheaper to staff appropriately and pay people fairly and limit need for floating people all around the Puget Sound."

Liv Brakstad, Pharmacist

Market Adjustments

Our Proposal

We proposed wage scale increases for ALL job classes that are being paid less than the going rate for our area. This is in addition to the 5% proposed raise this July and 5% next July.

Management's Proposal

Because we have taken action, management proposed small wage scale increases for two job classes: MAs and Recreational Therapists. This is a small step in the right direction, but the MAs and all of us need a much greater investment for recruitment, retention, and staffing.



"Management proposed raises for Medical Assistants because they know that MAs make up the largest job class in our union. They are trying to drive a wedge in our solidarity. We will not fall for this blatant attempt to divide and conquer. EVERYONE deserves a raise! We stand united. We stand strong. We will not be divided."

Judy Sohl, CMA, The Sports Medicine Clinic

Consecutive Weekend Premium

Our Proposal

We didn't propose a change to our contract. It currently says that for the second weekend worked in a row, we will be paid time and a half.

Management's Proposal

They're proposing we are only paid time and a half for the sixth weekend shift worked in a four-week period.

HUGE TAKEAWAY!

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Call and Standby

Our Proposal

We propose that UW comply with the law regarding mandatory call, so that no one is required to take pre-scheduled call to cover normally scheduled shifts or absences.

- * A new FTE will be created if 50% of scheduled call shifts lead to callbacks or if management is abusing standby*
- * Call rooms or hotel vouchers will be provided for all required to return to work within a specific time frame*
- * Increased standby premium to \$6/hour plus \$1 additional for all hours after 36 standby hours in a pay period*
- * Eight hours rest between shifts to also include between call shifts and regular shifts*

Management's Proposal

Management proposed a multicampus voluntary standby pool with no incentives. This would include Harborview, Montlake, and Northwest. There was nothing in their plan about training or transportation.



"Being on standby/ on call, in addition to doing our regular work

schedule, is exhausting and frustrating. Some day call will disappear, but until it does, we have proposed many ways to make it a little easier on the worker, and increase the amounts paid to be more in line with Montlake, Harborview and other hospitals in our area. Instead of trying to make taking call not such a hardship, management's only solution is to have a voluntary call pool among Northwest, Montlake and Harborview. The employee would be paid under the contract of their "home" location. This means that for most of us at Northwest, if we took call at Montlake or Harborview we would be

working alongside people doing our same job with the same or less experience than us who would make more money per hour than us, and get paid in a financially better way for taking call. I for one would not sign up to do something I don't like in the first place for less money than the other people working around me — that's ridiculous! Management needs to pay us what we've proposed, and ultimately get rid of mandatory call altogether."

Genevieve Sanford, Ultrasonographer, SEIU Healthcare 1199NW Executive Board Member

Recognition for Past Experience

Our Proposal

We proposed that new employees are given one step for each year of their work experience, which is a standard already at Harborview. We also proposed that members can have their work experience reviewed.

Management's Proposal

They agreed to give new employees one step for each year of their work experience but rejected our proposal to give current employees the option to review their work experience.

NEXT STEPS

Talk to your bargaining team members about the action we need to take to win a good contract.

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