

WE ARE STAYING STRONG AT THE BARGAINING TABLE AND READY TO TAKE ACTION FOR OUR PATIENTS AND COWORKERS

As frontline caregivers, we come to work and pick up extra shifts without incentive, helping those in our community who need it the most. Kadlec management says they hear us when we speak on how overwhelmingly short-staffed we are, but we don't see change. It is time for management to listen to our united voices and bring proposals that show they care about the heroes who work at Kadlec.

Last week at the bargaining table, management did not commit to proposals that will raise the standard of care for our patients. It was also a day of low economic proposals that we could not see as a livable rate at the current cost of living in the Tri-Cities. Our patients deserve more, and so do we!

We are united for a Kadlec where we all feel a sense of belonging and we feel valued; we are strong for our patients and will continue to stand strong to raise standards in Central Washington. We have multiple tentative agreements, but we still have many outstanding issues, so we have asked for a federal mediator to step in. We are hopeful that this will help us move closer toward an agreement. We are committed to winning a fair contract and we will continue to voice our concerns as one!

We demonstrated our unity last month when we unanimously voted yes to authorize taking community action, up to an informational picket if needed. We are ready to invite our neighbors to join our public action and tell Kadlec to truly honor the Tri-Cities' healthcare heroes.

Proposals	Union	Management
Living wages for everyone	<p>1. 15.75% across the board in the next 3 years including retro from 1/1/21</p> <p>Year 1- 4%</p> <p>Year 2- 5.75%</p> <p>Year 3- 6%</p> <p>2.Fill in ghost steps at co-step %</p> <p>3.Caregivers on the top step receive \$1,000 on their anniversary on addition to ATB</p> <p>4.Move the following job titles up in pay grade:</p> <p>a. Radiologic tech-21</p> <p>b. OB tech-16</p> <p>c. CNA- 9</p> <p>d. ED Tech 1 & 2-11</p> <p>5.Change assistant cook title to cook 1 and cook title to cook 2 for recognition in the industry doing more than just assisting. This would not affect economics.</p>	<p>1. 6.25% across the board in the next 3 years. No retro.</p> <p>Year 1- 2.25%</p> <p>Year 2- 2%</p> <p>Year 3- 2%</p> <p>2. No</p> <p>3.No</p> <p>4.No. open to discussions.</p> <p>a. NO</p> <p>b. NO</p> <p>c. Yes</p> <p>d. NO</p> <p>5. No. Change cook assistant to associate cook</p>

Proposals continued on flip side! 

Proposals	Union	Management
Bachelor/ Certification premium	6. Credited for bachelor's and up to 1 certification. And to include <u>Respiratory Therapists</u> to be credited up to 4 certifications along with other job classes already covered. 7. Move language to body of contract to ensure practice continues.	6. Movement but no agreement. 7. NO. keep as a LOU
Credit for experience	8. Everyone will have the option to dispute their years of experience within 90 days of ratification if you believe you are not at the correct wage step and be moved to your full credit of years of experience. For those that completed the first audit process should move immediately after ratification.	8. Only caregivers who disputed their step placement following the current contract language will be placed correctly by 2023. Only caregivers hired between 3/8/19-12/31/19 who did not partake in the process can dispute their wage and get full credit by 2023. This would not be applicable to anyone else.
PTO	- Less than 3 years- 170 PTO + 69 sick = 239 hours - 3-5 years- 194 PTO + 69 sick= 263 hours - 5-10 years- 210 PTO + 69 sick= 279 hours - 10-15 years- 234 PTO + 69 sick = 303 hours - 15+ years- 250 PTO+ 69 sick= 319 hours a.] Safe-sick hours exceeding 108 will have the option to cash out or roll over into PTO bank at the end of the year.	- NO a.] NO
EVS tech position	9. Additional opportunities to advance in the EVS tech role, including being a part of the training fund, increase in pay through a certification, and having an impact on decisions for our working conditions of creation of home care assignments.	9. NO
Incentive shifts	10. Incentive to pick up shifts to help the department with short staffing, caregivers will be paid 1 ½ times the regular rate of pay + \$5 per hour over hours worked above your FTE.	10. NO. Management will determine if any extra shift incentives are necessary.
COVID-19 MOU	11. Protect our safe sick accrual by providing paid admin leave for any sort of quarantine that is required by Kadlec 12. Hero Pay to recognize we are working in a pandemic 13. Provide the Bright Horizon program emergency fund again if we have a mandated shut-down of childcare centers	11. Use PTO/EIB for the first 7 days of quarantine for community exposure unless you prove it is work-related 12. No. 13. No. Use PTO or EIB if you are not ill but need to stay home due to eldercare or daycare.
Overtime	14. Bring back the grace period when clocking in and out	14. NO

Proposals continued 

Proposals	Union	Management
Subcontracting	15. No subcontracting	15. NO.
Low Census	16. No mandatory low census pilot project	16. Movement but no agreement
Education and training	17. Have access to the SEIU Multi Employer Training Fund to go back to school for free and create a more equitable workforce environment and lower barriers to our success.	17. NO
Preceptor	18. A formation of a subcommittee in LMC to address parameters of preceptor programs which could include students, clinical and non-clinical. The parties would agree to meet on implementation	18. NO. Only open forming a subcommittee in LMC but NO commitment to implementation.
Standby/call back	19. Volunteers will be sought first before it is mandatorily assigned.	19. Movement but no agreement
Holdover premium	20. Anyone in OR, DI and Cath Lab required to stay past your shift in an emergent case will get paid the premium. 21. Anyone in OR, DI and Cath Lab scheduled standby after a shift ends will automatically result in callback if required to stay.	20. NO- only applicable to OR and Cath Lab and at the expiration of agreement the practice must be renegotiated. 21. NO
7/70 work schedule	22. Protect our 7/70 and full-time status	22. Yes, in agreement
Callback LOU	23. Anyone over 1,100 hours of standby will be paid at the rate of \$4.50	23. Movement but no agreement
Upward progression	24. Anyone who moves job classes with a higher starting base will receive no less than 2% increase.	24. Movement but no agreement
Nutrition Service Staffing	25. Four members from management and four members of the union will meet to discuss adequate staffing coverage and develop practice for folks with multiple positions.	25. NO commitment to developing a practice for folks with multiple positions.
Holiday	26. Increase recognized holidays and include a personal holiday. 27. If you your regular shift falls on a holiday, you should have the opportunity to work.	26. NO 27. NO
Equity and Inclusion	28. To make sure everyone has a voice, the parties will work together to develop practices of a more equitable workplace.	28. Movement but no agreement

MANDATORY OVERTIME IS PROHIBITED

As of July 1, 2020, surgical techs, diagnostic radiologic techs, cardiovascular invasive specialists, respiratory care practitioners, and CNAs are NO longer mandated to work overtime (including callback). The law does not specifically call out every job in a healthcare facility, but it does state **“no employee of a healthcare facility”** is required to work overtime. If you feel like this is happening in your department, contact an organizer or delegate.

What is mediation?

During mediation, a commissioner from the Federal Mediation and Conciliation Service (FMCS) can work with both management and our co-workers on the bargaining team to reach an agreement. Mediation is helpful, but it is no substitute for action in our workplace. Please check in with your delegate or bargaining team representative to learn more about next steps.

“We are still in a time of a pandemic, and we are risking our lives, we are in the Red Zone. We, the essential workers deserve better pay. We are risking a lot working in the hospital. We are working overtime to cover the areas; many are hurting and are leaving after they see the hard work AND extremely low salaries. We are risking the lives of our families and our lives for better patient care, but Kadlec pays very little and does not have adequate staff for quality patient care.

Although it was a year and a half with so many difficulties, and the community is suffering while Kadlec Providence earned \$72 million in a pandemic year, there is no respect for workers. What Kadlec is proposing right now are salary increases that do not help to recruit and retain employees. We are and have been short of employees for so long, no one wants to help cover the areas, and that affects patient care. It’s so important we take a stand in a united voice. We need hero pay and we need to demand better patient care.”

Norma Salinas, EVS

“Si estamos en un tiempo de pandemia, estamos arriesgando, estamos en la Zona Roja. Nosotros los trabajadores esenciales nos merecemos un mejor pago. Nosotros estamos arriesgando mucho más trabajando en Kadlec. Estamos trabajando overtime para cubrir las áreas, y muchos se están golpeando y lastimando. Los trabajadores se van despues de ver mucho trabajo y salarios extremadamente bajos. Nosotros estamos arriesgando las vidas de nuestras familias y nuestras vidas por un mejor cuidado a los pacientes, pero Kadlec paga muy poco y no tiene el personal adecuado para un cuidado médico de calidad.”

Norma Salinas, EVS



“I am very disappointed with Providence/Kadlec. Their most recent proposals are divisive, they continue to demonstrate that they have no problem in disrespecting their employees by offering us a measly 6.25% across-the-board raise over three years. They refuse to even consider paying us any incentives to cover the staffing shortages currently being felt by multiple departments. My department has had the worst staffing shortage that I have seen in six years of working here. My coworkers are exhausted and no longer want to cover gaps. Kadlec calls us “heros” but they treat us like “zeros”! I can go work for Trios right now and get a sign-on bonus higher than the raise they are offering me! The Tri-Cities cost of living is the third highest in the state, if Kadlec doesn’t increase the pay of their staff soon they will have no staff because we won’t be able to afford to live and work here.” **Stacey Belt, Phlebotomist, Clinical Lab**



OUR NEXT BARGAINING DATE, 1ST MEDIATION DATE IS JULY 26TH