



# FIGHTING FOR JUSTICE AND A BETTER FUTURE AT UWMC-NORTHWEST

## FAIRNESS, EQUITY, JUSTICE, RESPECT – WHAT DO THESE WORDS MEAN?

We brought proposals to management that would fix issues around the hospital where we're currently facing a lack of fairness, equity, justice, and respect. We explained the impact of being treated differently than our coworkers in the UW system.



"UW Medicine administration set up a biased system where certain employees get paid better while others are being denied the same benefits. CNAs, EVS, Radiology, Transporters, Cath Lab, Respiratory Therapy and the list goes on. When nurses work 12 hours, anything on top of that is a double time where other employees are denied that privilege. When nurses float away from their home unit, they get float pay while when CNAs float away from their home floor they are denied float pay unlike the nurses. I say this is a systematic bias. We will fight until we are treated fairly and with respect. The demographics of the employees in these departments are BIPOC employees. I believe when you see something like this in the system you need to fix it or you become part of the problem." **-TJ Drammeh, CNA, Bargaining Team Member**

## WE DESERVE THE SAME STANDARDS AND PROTECTIONS OTHER HOSPITALS HAVE!

### → LOW-CENSUS FUND

This fund would allow us to continue working instead of being sent home, up to a set number of hours. Most hospitals have a low-census fund to protect against workers having less money in our paychecks when census varies. We would do administrative work or projects that we can't usually complete during work hours. Using the fund is totally voluntary for those who wish to complete their hours, versus going home and using vacation hours to complete your FTE.

"We propose that management establish low census protection. It's very important to have this protection at NWH. This will help cover us when we're put on low census, you still get paid. We do let them know that other hospitals like Swedish have low census funds, and we do need this too, so that we don't have to use our vacation time to cover our pay." **-Ade Adeyemo, CNA, Bargaining Team Member**



----> **DOUBLE TIME AFTER 12 HOURS**

Our current contract already states that any employee who is working beyond 14 hours a shift will automatically receive double time for all the hours worked after 14 hours. The nurses at UWMC-NW and 1199NW healthcare workers at Harborview receive double time after 12 hours. The bargaining team told UW administration that it is unjust to have a lower standard at UWMC-NW, and that it impacts us as hard-working employees to be treated differently than other UW workers. Management denied this without a reasonable explanation and said they are not interested in changing it to 12 hours.



“We work hard to make our patients happy and fulfill their needs while in our care, we deserve fairness and equality, we deserve to feel appreciated, we deserve float pay and double time pay after 12 hours, we deserve respect.” **–Kendra Townsend, CNA and Bargaining Team Member**

----> **FLOAT PAY**

For years, we have been floating to different units and locations like OPMC on a regular basis to help with staffing. UW requires us float to cover unexpected vacancies without the proper training or pay, or because they don’t want to hire permanent staff on that location or unit. Floating is disruptive; we have to work in unfamiliar locations making our work harder. We deserve compensation like RNs who receive float pay. UW administration chooses to treat us with lower standards than our coworkers and it is unacceptable.

----> **SOCIAL WORKERS’ CLINICAL SUPERVISION HOURS**

Social Workers are required to spend a certain number of hours with a professional. Most experienced social workers in the field can give credit for those hours towards the completion of the requirements to obtain a license to continue working at UWMC-Northwest. Social Workers get paid while taking supervision hours except for those working evening shifts. Night shift isn’t any different and should be paid like the rest of the staff.

“Social workers have been struggling with inadequate and inequitable access to clinical supervision, and approached management at the bargaining table to create language that will standardize the program for everyone. While we didn’t result in official contract language, management showed a commitment to collaborate and make changes on a departmental level. We are already seeing more momentum through working with the union than we ever did before on this issue. When we show solidarity on issues, leadership listens and we all win!” **–Hannah Lessing, Sr. Social Worker and Bargaining Team Member**



----> **SECURITY OFFICER SAFETY**



“Hospital security officers are required to wear specific footwear while working. Although it is not only expected but required to be a part of our uniform, it is not provided by our department. It is crucial for our officers to have the proper footwear due to the conditions and types of work we do. Including going hands-on with combative patients which often are in hazardous environments such as liquids, bodily fluids, garbage/food waste. Outdoors we are presented with needles, and dirt or debris that are thrown at us, and patrolling all over our campuses on foot. Due to the specific type of boots needed for the job, and the majority of the security having financial hardship in purchasing these expensive work boots, it is necessary for these boots to be a part of our budget and provided for us to complete our jobs safely and competently.” **–JJ Abatayo, Security Officer and Bargaining Team Member**