

HPAE 5105

SETTLEMENT HIGHLIGHTS

HOSPITAL

Staffing:

- Hospital posts multiple positions including Med-Surg, Critical Care, new MCH float pool positions and 4 tech positions in order to address short staffing (including 1:1 issues)
 - ICU/PCU float pool 2- Full time
 - MCH float pool 2.7 FTE's
 - Med Surg 6 FTE's
 - PCTs 3.6 FTE's
- Online Unsafe Staffing form to be developed by end of October
- ED Staffing Committee: to monthly address issues of critical short staffing
- ED positions posted
- Staffing Committee to review impact of tele-sitter program and increase in PCTs against issues in unsafe staffing forms
- Protection of numbers of staff for Endo unit
- Side letter for shifting Cysto work to OR including:
 - Increases in staffing
 - Adequate education
 - Delay start until Jan 2018

PTO

- Virtua must give reasons for denial. Union can now keep better track of reasons and address.
- Union intends to grieve any denials for chronic unfilled vacancies

Wages:

- 2.75%- 2%-2% for Full time, part time and limited time
- 2%- 2%-2% for per diems
- Increase in Certification bonus to \$1000 for full time and \$500 for part time

Clinical Ladder (PDAP)

- Union to appoint bargaining unit members for oversight of program
- Participation is voluntary—may still receive certification bonus without PDAP participation
- Union may arbitrate adverse decisions
- Bonus for completion of Level 3-- \$3000 FT, \$1500 PT, Level 4--\$5000 FT, \$2500 PT

Benefits

- 5% cap on increase of employee premiums from year to year (see handout)
- Reasonable comparable remains except in determining number/identity of docs
- Cadillac tax must be negotiated

Defeated:

- Virtua proposed expansion of clinical groupings – ICU to PCU and MBU to L & D for stork nursing, Med Surg (Virtua proposes to delete all units in contract)
- Proposed increase in on call requirements for PACU and OR
- Mandatory assignment of open on call shifts to employees who have already met their max
- Residency program—giving away jobs to students
- Giving away Union work to non-bargaining unit members in Endo and changing work hours
- Make up for call outs on weekends, holidays and on call shifts (mandatory and voluntary)
- Rescinding CSB for call outs later in the week
- Increase to 2 Hallmark holidays for per diems

Misc. Wins

- IR and full time on call increased sleep time
- ED Bulletin board
- EPIC—protections for members who become trainers and those left on the unit as well

CNS Specific issues

Pushed Back:

- Increase visits for both 8 hr and 12 hr nurses
- Make up for weekend on call call outs
- Increase weekend on call
- Increase on call for per diems
- HCC required to immediately work one weekend a month
- If emergencies arise may assign patients in reverse order of seniority to visits

Won:

- MOVE Bulletin Board to supply closet hallway
- Per Diems may stay hourly and/or convert from per visit to hourly
- CONSENTS count as 2 patients
- If admission nurse unable to reach a manager by end of day, RN can tell scheduler to make the patient a 2 patient visit for next day
- Preceptors only have 5 patients
- Critical PTO identified and can be requested early in year