In October, Antioch steward Mary Anne Beach organized an action to show management that NUHW members have the right to come together as union members and that we won’t back down when intimidated. The action was in response to management’s reaction to a September gathering at which stewards and members greeted their new NUHW organizer, Pysay Phinith. We had a huge turnout with more than 75 percent of the our members attending — the largest turnout we’ve had in nearly a year.

Members greeted each other with smiles and laughter, introduced themselves to their new organizer, asked questions about union issues, and shared concerns about their working conditions. Within 30 minutes, a manager walked in and told us that we could not meet and that he knew “many of you don’t have lunch” on their schedules. The manager’s arrival created such fear in the room that group disbanded within minutes.

In response, Mary Anne organized a social picnic on the lawn directly across the street from the clinic and in clear view of the manager’s office window. Despite some initial trepidation, we gathered and sent a message to management: “We are united and strong!”

## OUR 2018 BARGAINING GOALS — PREPARING TO WIN!

This year, three of our four Kaiser bargaining units — IBHS, Psych-Social, and Health Care Pros — will head into contract negotiations. While each bargaining unit has had different struggles in the past, we share a common goal — staying united and winning the best contracts! At NUHW’s Leadership Conference in October, our Kaiser stewards convened and set bargaining goals to help achieve this.

Our bargaining goals:

1. Ensure that every member knows the history of our IBHS bargaining unit
2. Improve communication across worksites and between members and the bargaining committee
3. Ensure as many voices as possible are included in all bargaining steps
4. Engage every member in worksite and regional actions to strengthen our bargaining efforts.

We’re also planning to expand our political power by getting involved in local, state and political elections. Through endorsements, door-knocking, and increased contributions to our COPE political fund, we will work to ensure that our elected leaders are strong advocates for healthcare, social safety net programs, and mental health parity.

To win the best contracts possible, we all need to get involved — in our workplaces, in negotiations, and in the political realm.

## OUR CONTRACT: DID YOU KNOW?

If you report to work and “become ill, or need to leave work due to an emergency, sick child, or for some compelling reason,” or if you have a scheduled MD appointment during a normal work shift, you will be paid for the day as if it were a normal work day with no deduction from PTO. *(Article XV, Sec 4.3 & Article XXIII, Section 2)*

We have a right to have an NUHW member from the department involved in the interview committee whenever a vacant position is being filled *(Article X, Section 2)*

*continued on reverse*
One of the best ways to be a part of shaping the next contract is to join the bargaining committee! Our NUHW IBHS contract expires September 30, 2018. We would like to begin negotiations in July and complete bargaining by October. We’ll send updates and share how you can get involved throughout the entire bargaining process.

There is no limit to how many members can be on the bargaining committee. However, Kaiser will only pay for eight members to attend any one session, so you must be willing to attend some of the sessions without a guarantee of pay.

To seek nomination, you must agree to:

• Represent the interests of your co-workers
• Attend bargaining sessions and planning meetings
• Keep members informed during the bargaining process
• Organize co-workers to participate in actions to accomplish our bargaining goals
• Help craft union proposals to respond to management’s proposals

If you’d like to be a member of the bargaining committee, please notify your steward or organizer to learn more about the process.

RECRUITMENT AND RETENTION SURVEY RESULTS

In the fall of 2017, we administered an 18-item survey focused on recruitment, retention, engagement, and contract communications to our IBHS membership. The response rate was 42 percent — a total of 606 responses out of 1,428 surveys distributed.

NUHW presented these results December 13 to Kaiser’s senior leadership team as well as to the Regional Mental Health Administration management team. We stressed that dissatisfaction (to put it mildly) with Schedule Management and lack of return access were two major themes. These results have helped us convince them that we cannot wait until bargaining to address the multiple issues involved with Schedule Management, although how and when we begin addressing the issues is yet to be determined.

Highlights and key findings from the survey:

What feedback do you have for KP regarding your recruitment process experience?

Some of the more common themes that arose from responses to this question included: 1) length of time for the hiring process; 2) lack of clarity and communication about the hiring process; and 3) a confusing online system for hiring.

I would recommend KP to a colleague as a good place to work.

Responses to this question revealed that, as respondents’ length of employment at Kaiser Permanente increased, an increasing number responded “Disagree” or “Strongly Disagree” to the prompt. Respondents working in the Psychiatry Department generally had fewer people recommending KP as a good place to work.

What things can KP do to attract and retain more clinicians?

Responses varied for this open-ended question. Nevertheless, nine themes or categories emerged: Performance Metrics, Pay and Benefits, Access, Advancement Opportunities, Respect, Fairness, Transparency, Student Loan Repayment, and Collaboration. “Other” was included as a category to capture responses that did not clearly fit into any of the remaining nine categories.

Excluding responses coded as “Other,” more than one in three responses addressed the issue of performance metrics such as schedule management and the 4:1 ratio. The supermajority of clinicians generally held unfavorable views of these performance metrics and many stated that the implementation of such tools had increased workload and, for some, led to burnout. Others stated that schedule management had shifted the focus towards productivity and away from quality care.

Contact any of your NUHW stewards or organizers for the full summary of the survey.