

WEST ANAHEIM MEDICAL CENTER

# ENOUGH IS ENOUGH!

## Vote to authorize our info picket

Bargaining with West Anaheim has been moving very slowly. We're out of patience. It often appears that management does not prepare for negotiations until the day we meet. They are not taking our concerns seriously. They simply reject the majority of our proposals by ignoring them. We have reached very few tentative agreements toward improving our contract, which provides little incentive for us reaching an agreement.

**Our NUHW bargaining team is calling for a vote authorizing them to issue a 10-day notice for an informational picket in front of the hospital.**

NOTE: An informational picket is not yet a strike. An informational picket is how we show the hospital that we are united and ready to fight for what we deserve! Unlike a strike, informational picketing is not a work stoppage, rather it is picketing on our non-work time in front of our hospitals (before or after work, and on breaks).

### SUMMARY OF CHANGES TO THE AGREEMENT

**Bereavement Leave:** Workers will be able to take up to five days bereavement leave in the case of the death of a member of the immediate family, three of which are paid by the employer and the other two may go either unpaid or supplemented by the worker's PTO.

**Jury Duty:** The maximum number of hours a worker can have for jury duty was increased from 24 hours to 80.

**Per Diem Availability:** Per Diem employees have three days before the posting of the schedule to indicate their availability for shifts. Selection for work will be done on a rotating basis.

**Posting of Vacancies:** The employer will post a physical copy of available jobs as a courtesy but the website will continue to be the official posting.

**Investigatory Suspensions:** No employee shall be held in investigatory suspension for more than five days without notice to the union and the employee. An employee will not be paid for the suspension unless they are cleared of the purported infraction.

**Inactive Discipline:** Disciplinary actions will continue to be inactive after 12 months. The time for which disciplinary actions regarding gross misconduct remain active has been reduced from 36 months to 24 months.

### INFO PICKET VOTE

**Monday, March 31 – Friday, April 4**

Point your camera phone at the QR code below to vote. The Bargaining Team recommends a YES vote.



### INFO PICKET FAQ

**Is an info picket the same as a strike?**

An informational picket is NOT a strike or work stoppage. A picket is a public demonstration in front of the hospital that lets us show the community that something is wrong at West Anaheim Medical Center and that management needs to bargain with us in good faith.

**Will I lose pay for joining this info picket?**

We do not miss work for a picket. We join the picket during our non-work hours to share information with the community about our struggles. If you are scheduled to work, you go to work. We can join the picket before or after our shift, on our lunch or rest breaks, or on our day off.

**Will I get in trouble for joining the picket?**

No. It's a protected right under federal law. It's against the law for management to discipline you or retaliate in any way for taking action with your union. If they try to, we will file a charge with the National Labor Relations Board. It's also illegal for managers to talk to you about the action or question you about your plans to participate.

**Is picketing legal?**

Informational picketing is a legal tactic in support of our negotiations — as long as we keep our picket lines on public sidewalks around the hospital.

*continues on back*

## SUMMARY OF ISSUES THAT STILL REMAIN UNRESOLVED

### WAGES

- **The employer is proposing a three-year agreement with minimum wage increases for employees of 3 percent in each year.** Management's proposal includes a wage grid that places an employee upon ratification on a step of the grid based on experience but the employee does not advance from that step for the duration of the agreement. Per Diem employees would get only one increase of 3 percent upon ratification and no other increase during the term of the contract. The employer refuses to recognize the Cardiac O.R. Tech as a separate classification and the two levels of Cath Lab classifications.
- **Our NUHW bargaining committee is proposing a four-year agreement with across-the-board raises beginning 1/1/2025 and minimum across-the-board increases for each year of the contract of 5 percent in the first year, 4.5 percent in the second, and 4 percent in each of the following two years.** Employees would progress through the scale based on years of experience. The wage scale would not be a static wage grid as currently exists, but a wage scale that would increase with each anniversary of the agreement based on the minimum across-the board increases.
- We are close on some classifications on an initial scale, but the big difference is a static grid vs. a real wage scale and the across-the-board minimum increases.

### OTHER PAY ISSUES

- **Severance:** The employer continues to refuse to offer severance in the case of a layoff.
- **Holidays:** The employer does not want to pay 10 or 12-hour shift employees holiday pay based on their shifts.
- **Crisis Pay:** We have proposed an equitable system of providing Crisis pay.
- **Standby Pay:** We are proposing ½ time while on standby.
- **Incentive Program:** The employer is requiring an employee to work all scheduled shifts in a pay period if the employee has taken a shift with incentive pay.
- **Radiology:** Techs II and III who do CT or MRI should get the equivalent pay for the shift in which they perform either of those modalities.

### FLOATING

- The employer wants to be able to float employees twice in a shift, meaning they could work in three separate locations during their shift. Our NUHW bargaining committee is proposing that employees only float once and are paid a differential of 5 percent; and in unusual situations where an employee floats twice, 10 percent.
- We are proposing that O.R. Techs not be required to float to GI.
- We are proposing that nursing staff in Subacute and BHU not be floated outside their unit.

### VACATIONS

- We propose improving vacation accruals by 5 days a year.
- We have proposed a standard system for requesting vacations that allows for seniority, dividing the year into two bidding periods but also allows for granting additional vacation requests on a first-come, first-served basis after the initial bidding process.
- We are close to resolving the vacation donation proposals for members who are facing personal major medical challenges.