

# Summary of Proposed Contract Changes

For RNs at Garfield Medical Center

& Greater El Monte Community Hospital

## Compensation

- The wage scale will increase by 2.25 percent each year of the three-year contract.
- All RNs will receive a minimum 2 percent pay increase each year.
- RNs below the wage scale can receive a maximum increase of 10 percent in 2012 and 2013 to bring them closer to the wage scale.
- **RN pay raises for 2012 are retroactive to April 1, 2012** (Limited to RNs employed by Garfield or El Monte at time of payment.)
- In 2014, all RNs will be brought to wage scale pay rates no matter how much it takes to bring the RN to scale.
- Greater El Monte RNs will receive a shift differential for the 11 a.m. to 11 p.m. shift.

## Clinical Ladder

- Program begins October 2013
- Bonus incentive for first year of the program will be \$500 for Clinician III and \$1,000 for Clinician IV.
- Existing Bargaining Unit members may achieve Clinician III with documented proof of obtaining a BSN or National Certification, or with 17 years of acute clinical experience.
- Existing Bargaining Unit members may achieve Clinician IV with documented proof of obtaining a BSN or National Certification, or 20 years of acute clinical experience.
- The 17 and 20 years of clinical experience may be achieved throughout an existing RN employee's career at AHMC to satisfy the years of experience criteria.
- New employees must have a BSN or MSN degree or National Certification to achieve Staff Nurse III and IV.
- Clinical Ladder compensation after 2014 to be negotiated.
- RNs who volunteer to float when needed at Greater El Monte will receive Clinical Ladder points for volunteer floating assignments.

## Clinical Ladder Criteria

Clinician III     must meet 4 criteria  
Clinician IV     must meet 6 criteria



	Required Points
Clinical Excellence — Quality Patient Care	31
Safety	10
<u>Service Excellence/Improved HCAHPS Score</u>	<u>24</u>
TOTAL:	65

## Article 11 — Hours of Work, Overtime and Scheduling

Language not noted below remains the same as previous contract.

A. 1. Employees are required to swipe in/out as follows:

# Our Bargaining Team Recommends a 'Yes' Vote.

- a. At the beginning of the employee's shift. Employees are not permitted to begin work until their scheduled start time. If the employee actually performs work prior to their scheduled start time, the employee must report this to their immediate supervisor or designee and complete an E-time Adjustment form to reflect the time they actually started their shift. This does not affect the payroll rounding rule for calculation of regular and overtime hours.
- b. At start of Meal Period
- c. At end of Meal Period
- d. At end of Shift



## D. Meal and Rest Periods

1. a. Employees are provided a second 30-minute unpaid meal period if they work more than 10 hours but can waive the second meal period if they do not work more than 12 hours.
4. Replace current language with the following: "If an employee is not able to take their meal period(s), or start their meal period(s) within the required time limits, the employee must notify his/her supervisor or designee, and complete the missed meal/rest period form on the same day but no later than the end of the following shift. If an employee is not able to take their rest period(s), [for] a full 10-minute uninterrupted period(s), or take their rest period(s) within the required time limits, the employee must notify his/her supervisor, and complete the missed meal period form on the same day but no later than the end of the following shift."

J. "Full-time employees shall satisfy their commitment of hours before part-time employees receive additional hours. Part-time employees shall satisfy their commitment of hours before per-diem employees receive additional hours.

## Article 12 — Floating

The employer will float RNs according to agreed-upon clusters or matrices for each facility and floating inconsistent with such clusters or matrices shall be voluntary, except in the event of an emergency.

RNs will float in the following order: 1. Volunteers 2. Registry 3. Travelers 4. Temporary 5. In-House Registry 6. Per Diem by rotation 7. Regular Full-Time and Part-Time I

- RNs who volunteer to float when needed at Greater El Monte will receive points toward Clinical Ladder.



## Garfield Floating Clusters

(additions underlined and deletions are in **bold**)

<u>Home Dept / Unit</u>	<u>Destination Dept / Unit</u>
<u>Cluster One</u>	
<u>2 East / Med-Surg</u> 3 East / Med-Surg	3 East / Med-Surg, <b>4S MS (Pediatrics)</b> , 3 West (Tele), ERII ( Med-Surg / Tele Patients only), 4 East / Rehab, <u>2 East</u>
4S/Med-Surg / Peds	<u>2 East / Med-Surg</u> , 3 East / Med-Surg, 4E / Rehab, 3 West (stable Tele patients only), ERII ( Med-Surg patients only)
4E / Rehab - does not float until computer competent	<u>2 East / Med-Surg</u> , 3 East / Med-Surg, <b>4S / Med-Surg / Peds, 3 West (Tele)</b> <b>ERII</b> ( no Telemetry or Pediatrics), ERII / Med-Surg
<u>Cluster Two</u>	
Critical Care (ICU, CCU, CSU)	<b>Cath Lab / Recovery</b> , 3 West / Tele, 2E / Tele, 3E / Tele ERII (for critical care and Tele patients <b>only on a voluntary basis</b> ) until a Tele nurse can be arranged.)* see side letter
Cath Lab / Recovery	Critical Care (ICU, CSU, CCU), PACU, ER Overflow, ERII on voluntary basis only.
3 West (Tele)	<b>2 East, 3 East, 4E / Rehab, &amp; 4 South / Med-Surg, Peds )</b> , Critical Care (select stable patients only); ERII; 2 East, 3 East, 4 South / Med-Surg, 4E / Rehab volunteers only
Emergency Room ER 11	ERII <u>Cross trained only</u> 3 West / Tele, Med-Surg (2E, 3E, 4S) Critical Care (stable patients only)
<u>Cluster Three</u>	
Nursery	<b>NICU PostPartum - babies only</b> Baby Friendly Unit (cross-trained)
NICU	Nursery
<u>Cluster Four</u>	
Postpartum	(L/D)*, L/D Recovery, (*Overflow Postpartum patients) <u>Postpartum nurses will not be admitting babies.</u>
L&D	Postpartum
<u>Separate Depts / Units</u>	
Surgery	GI Lab
Outpatient Surgery (OPS)	GI Lab
GI Lab	OPS
Hemodialysis	<b>Not Float</b>
PACU	L/D Recovery

## Article 17—Health and Safety

Addition of Safe Patient Handling Equipment that states: "Employees are required to participate in patient handling equipment training and use the equipment in accordance with facility policy."