Fairview Southdale Hospital and the University of Minnesota Medical Center, Fairview – West Bank Opening Proposals

March 15, 2019

Our patients come first and our nurses are our partners in their care. Together, we must balance a variety of needs with limited resources and create a sustainable outcome for everyone.

We continue to hope for a productive and cooperative negotiation. We need to reach a contract agreement that allows us to meet the needs of our patients and the challenges of the changing health care environment.

To encourage and support a spirit of congenial and collaborative 2019 negotiations, Fairview first offered an option to bargain a wage-only contract renewal. The MNA rejected that offer. We remain open to that approach at this time.

We are now moving forward—as we do in a normal bargaining process—to offer our initial, opening proposals. Our intent is to reach a reasonable agreement that is good for our patients, our nurses and our hospitals in this negotiation.

Opening Proposals

Replace the <u>University of Minnesota Medical Center</u>, <u>Fairview – Riverside Campus</u> with the <u>University of Minnesota Medical Center</u>, <u>Fairview – West Bank</u> wherever that name is used in the contract.

Add language to limit the number of double shifts a nurse can work on consecutive days (Section 3 A).

Allow exceptions to the call restriction in in situations that would have the effect of depriving patients of needed nursing service (Section 5).

Replace the first paragraph of Section 5 A and B with language stating that the off-premise on-call pay rate shall be \$9.86 at Fairview and on-premise on-call pay shall be paid at the State or Federal minimum wage, whichever is higher.

Allow exceptions to the holiday restrictions in situations that would have the effect of depriving patients of needed nursing service (Sections 6 B and 8 G).

For contract cleanup purposes only, update the outdated language related to the minimum work requirements for casual nurses (Section 6 E).

To identify staffing needs more accurately, allow for 1-1/2 hour notice of low need (Section 6 E and 14 D).

Provide a more equitable process and higher thresholds for low need (Section 14 D).

Delete Section 15 E as it is no longer applicable (Offer of Employment in Other Contracting Hospitals).

For clarification purposes only, modify all references to job postings in Section 16 to reflect the current website job posting process.

Nurses filling open positions will need to work one year in their current position or obtain manager approval to be eligible for a transfer to a different unit (Section 16 C).

Delete Section 32 and LOU IV for contract cleanup purposes only.

Clarify the Hospital's dues deduction obligation ends with the expiration of the contract absent an agreement to extend or renew the contract (Section 35 A).

Delete the last sentence in Section 42 requiring that bargaining proposals shall be submitted by March 15 of the year the contract has been reopened.

The Hospitals propose a new three-year contract agreement (Section 42).

To ensure the competency level of newly hired nurses is appropriately evaluated, add an assessment period for newly hired nurses.

The Hospitals reserve the right to add to, amend, change or withdraw items from the list set forth herein.