Allina Health / Minnesota Nurses Association 2019 Metro Negotiations April 18, 2019

The following tentative agreements have been reached by Allina Health and the Minnesota Nurses Association.

ANW/PEI Collective Bargaining Agreement:

Tentative Agreements Reached on March 27, 2019:

- 1. The parties agreed to delete LOU #5 (Movement to MNA Carve Outs) from the Abbott Northwestern/PEI collective bargaining agreement.
- 2. The parties agreed to delete LOU #16 (Special Care Nursery Weekend Work) from the Abbott Northwestern/PEI collective bargaining agreement.
- 3. The parties agreed to delete LOU #19 (Recognition of LPN or Other Non-RN Experience) from the Abbott Northwestern/PEI collective bargaining agreement.
- 4. The parties agreed to delete LOU #22 (Health Insurance 1) from the Abbott Northwestern/PEI collective bargaining agreement.

ANW/PEI Union Proposal #13

- 8. HOLIDAYS FOR FULL-TIME NURSES:
 - A. Paid Holidays:

A nurse who requests a vacation shift or benefits under Short-Term Flexibility for Time Off, Section 3 "Hours," for the Easter holiday will not have that time counted against the number of weekend shifts a nurse is eligible to take on a year-to-year basis.

Annual Holiday Sign-Up:

Each station/unit/department will post an annual holiday sign-up. This sign-up will take place in the first <u>full</u> pay period in September for the following calendar year. The sign-up will include the holiday only. Nurses will sign up according to seniority, most to least, for Christmas every other year and Thanksgiving and New Years on the alternate year and a total of three holidays. An RN who wishes to work greater than three of six holidays will not be denied the opportunity to work and be paid the holiday bonus.

Tentative Agreements Reached on April 3, 2019:

ANW/PEI Union Proposal #17

9. VACATIONS:

- D. Vacation Scheduling:
 - 1. The primary factor governing the scheduling of earned vacation shall be availability of RN staff to provide patient care on each nursing unit. If two or more nurses on a station unit request concurrent vacation times and staffing for patient care does not allow granting of all requests and such conflict is not resolved on a mutually agreeable basis between the nurses involved, the vacation shall be given to the nurse making the earlier request for such vacation. In the case of simultaneous requests, the nurse on a station unit having greater bargaining unit seniority length of employment length of employment in the hospital as defined in Section 14 "Temporary Staffing Adjustments" shall be given preference. Where a hospital utilizes an annual defined vacation sign-up period, all requests submitted during such period shall be considered as simultaneous requests. Consistent with the foregoing, the hospital may maintain and reasonably enforce a nondiscriminatory policy specifying the way in which requests for the same or overlapping periods of vacation time shall be given consideration.

No other qualifications on the scheduling of vacations shall be applied except as set out in this Agreement or as required by unavoidable situations in which granting of requested vacation time would have the effect of depriving patients of needed nursing service.

2. Eligibility for Weekends Off: <u>Nurses working less than every fourth (4th) weekend may not utilize</u> <u>vacation on their weekend to work but, the nurse may replace themselves</u> <u>on the schedule or trade shifts.</u>

ANW/PEI Union Proposal #20

- 12. HEALTH AND SAFETY:
 - D. Exposure to Blood or Body Fluids:

Following a job-related exposure to blood or body fluids, the hospital will provide, upon request of and without cost to the affected nurse, screening for <u>blood borne</u> <u>diseases to include but not limited to</u>, <u>HIV and Hepatitis</u>AIDS. Such screening shall be done by a reputable independent laboratory and confidential results shall be provided to the nurse. Results shall not be a part of the nurse's personnel or employee health record.

Any policy developed by the hospital relating to the post-exposure management of blood-borne disease shall be consistent with the following: