

**Park Nicollet Methodist Hospital
And
Minnesota Nurses Association
Employer Response to Union -8 (Holidays)
May 6, 2019**

PACKAGE PROPOSAL:

4. HOLIDAYS:

A. Holiday Pay:

Full-Time Nurses:

Full-time nurses will be granted the following six (6) holidays with pay: Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, Christmas Day, and New Year's Day.

Full-time nurses shall be provided with three (3) personal floating holidays each contract year at a time mutually agreed upon between each individual nurse and the Hospital.

Part-Time Nurses:

A part-time nurse who works on Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, Christmas Day, New Year's Day, or the nurse's birthday will be paid, in addition to the regular rate of pay for the hours worked, one (1) hour of straight time pay for each hour worked on the holiday, regardless of the shift starting time. Holiday pay will be paid on all hours worked in the Holiday window. A Holiday shift worked is defined as a shift in which greater than 50% of the hours are worked within the Holiday window.

A regularly scheduled part-time nurse, as defined in Section 39 of this Agreement, shall be provided with two (2) personal floating holidays each Contract year at a time mutually agreed upon between each individual nurse and the Hospital.

(12)
Let hrs
& hrs
4 plus (8)

PACKAGED WITH: Union drops U-3 (L) change in block schedule from .8 to .7 FTE.

agreeing to pay

Minnesota Nurses Association
and
Methodist Hospital Negotiations

May 6, 2019
Counter Proposal

4. Holidays:
A. Holiday

Full-Time Nurses:

Full-time nurses will be granted the following six (6) holidays with pay: Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, Christmas Day, and New Year's Day. Full-time nurses shall be provided with three (3) personal floating holidays each contract year at a time mutually agreed upon between each individual nurse and the Hospital.

Part-Time Nurses:

A part-time nurse who works on Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, Christmas Day, New Year's Day, or the nurse's birthday will be paid, in addition to the regular rate of pay for the hours worked, one (1) hour of straight time pay for each hour worked on the holiday, regardless of the shift starting time. Holiday pay will be paid for any hours worked on the holiday. A nurse working a shift that is not part of his/her holiday obligation (see holiday scheduling guidelines and staffing and scheduling guidelines) will still be paid holiday pay for all hours of that shift that fall into the holiday pay window.

A regularly scheduled part-time nurse, as defined in Section 39 of this Agreement, shall be provided with two (2) personal floating holidays each Contract year at a time mutually agreed upon between each individual nurse and the Hospital.

Packaged with Union Drops U-3 (L) change in block scheduling from .8-.7 FTE

The Union reserves the right to amend, add, delete, or withdraw without prejudice any and all proposals submitted. The Union also reserves the right to submit future amended, revised or new proposals. Said proposals shall not be used in an Administrative Hearing or Arbitration as evidence of appropriate of interpretation of intent if the proposal is withdrawn by the Union.

**Park Nicollet Methodist Hospital
And
Minnesota Nurses Association
Employer SECOND Revised Counterproposal to Union -8 (Holidays)
May 6, 2019**

PACKAGE PROPOSAL:

4. **HOLIDAYS:**

A. **Holiday Pay:**

Full-Time Nurses:

Full-time nurses will be granted the following six (6) holidays with pay: Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, Christmas Day, and New Year's Day.

Full-time nurses shall be provided with three (3) personal floating holidays each contract year at a time mutually agreed upon between each individual nurse and the Hospital.

Part-Time Nurses:

A part-time nurse who works on Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, Christmas Day, New Year's Day, or the nurse's birthday will be paid, in addition to the regular rate of pay for the hours worked, one (1) hour of straight time pay for each hour worked on the holiday, regardless of the shift starting time. Holiday pay will be paid on all hours worked in the Holiday window. A Holiday shift worked is defined as a shift in which greater than 50% of the hours are worked within the Holiday window. (Example: a nurse not scheduled to work the Thanksgiving Holiday who works 7 p.m. Thursday to 7 a.m. Friday would be paid holiday pay from 7 p.m. to 11 p.m. but would not be credited with working the Thanksgiving holiday.)

A regularly scheduled part-time nurse, as defined in Section 39 of this Agreement, shall be provided with two (2) personal floating holidays each Contract year at a time mutually agreed upon between each individual nurse and the Hospital.

PACKAGED WITH: Union drops U-3 (L) change in block schedule from .8 to .7 FTE.

Minnesota Nurses Association and Methodist Hospital Negotiations
May 6, 2019
Counter Proposals

Hospital #4 Vacation Limits May to September
Union #7 Vacation Scheduling

D. Vacation Scheduling

Nurse may replace themselves with up to eight (8) hours of overtime per pay period ~~posted schedule~~ to cover a vacation request that was denied during the original vacation granting period. These hours maybe used in four (4) hour blocks.

Packaged with the agreement to employer # 4 as modified

No individual nurse maybe granted more than eighty (80) vacation hours during the six (6) week schedule blocks that include Memorial Day and Labor Day and the time period between the two holidays. If vacation days remain available after the vacation granting period, a nurse may be granted additional vacation hours by seniority during the period defined above. Vacation scheduling shall be reviewed quarterly by the Staffing Advisory Committee.

Minnesota Nurses Association and Methodist Hospital Negotiations
May 6, 2019
Counter Proposals

LETTER OF UNDERSTANDING

Designated Resource Nurse

During the negotiations for the ~~2007-2010~~ 2019-2022 contract between Methodist Hospital and the Minnesota Nurses Association, the following agreements were reached regarding Designated Resource Nurses:

~~As soon as practicable after June 1, 2007, The Hospital will add at~~ commit to **least six (6) Registered Nurse FTEs** to be used as Designated Resource Nurses. The Designated Resource Nurse will be an assignment and not a posted position. It is the intent of the parties that the Designated Resource Nurse will typically be assigned from the unit on which they will be utilized as an additional resource to augmt the provision of patient care used and would be in addition to authorized FTEs. The Designated Resource Nurse not counted into the staffing grid. -Nursing Administration, with input from the Staffing Advisory Committee and unit grid evaluation committees, will develop a process by which nursing units can request a Designated Resource Nurse FTE allocation.

The purpose of the Designated Resource Nurse is to:

1. Support novice staff while they gain the experience and confidence to develop their skills;
2. Provide clinical assistance for the bedside nurse when intensity is high;
3. Support all staff when new technologies/therapies/interventions are implemented or when other needs are identified by patient care staff.
4. Perform Admissions, Discharges, and Patient transfer Duties.

When done well, this will:

1. improve the timely provision of quality patient care;
2. improve overall staff satisfaction;
3. improve the personalized care and service given to patients and their families;
4. improve inter-departmental relationships (EC, lab, and x-ray) by making turnaround processes more efficient;
5. decrease incremental overtime.
6. Not to interrupt orientation/keep preceptors and orientees whole/together.

Starting no later than thirty 30 days following ratification of the 2019-2022 CBA and for twelve months thereafter, the Hospital and the Union agree to use Labor Management Committee process to gather and analyze data on DRN utilization. LMC will then use data to make recommendations designed to fully utilize allotted DRN support and patients and staff. Within thirty (30) days following the twelve (12) month review process above, nursing leadership will take action to begin implanting LMC's recommendations.

During the twelve (12) month review period one additional FTE will be allotted for House wide DRN to cover the off shifts.

To assist with creating relevant and current data the DRNs that are allotted in the June 2019 DRN application process will not be pulled unless one of the following are present:

1. The Unit is short Staffed, or
2. The Hospital is experiencing high patient acuity and or intensity, or
3. The Unit/Department is closed, or
4. Emergency Center, Operating Room and/or procedural areas are holding patient for an excessive amount of time.

Thereafter and for the life of the current CBA, LMC will continue to analyze data, assess the success of efforts to maximize the utilization of DRNs and mutually agree to any modification to the plan to fully utilize the DRNs.

The Union reserves the right to amend, add, delete, or withdraw without prejudice any and all proposals submitted. The Union also reserves the right to submit future amended, revised or new proposals. Said proposals shall not be used in an Administrative Hearing or Arbitration as evidence of appropriate of interpretation of intent if the proposal is withdrawn by the Union.

**Park Nicollet Methodist Hospital
And
Minnesota Nurses Association
HOSPITAL Counterproposal Regarding**

DESIGNATED RESOURCE NURSE LOU

May 6, 2019

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Presented*

**LETTER OF
UNDERSTANDING**

**Designated Resource Nurse
2019-2022**

During the negotiations for the 2019-2022 contract between Methodist Hospital and the Minnesota Nurses Association, the following agreements were reached regarding Designated Resource Nurses:

~~As soon as practicable after June 1, 2007,~~ The Hospital will ~~add~~ commit to at least six (6) Registered Nurse FTEs to be used as Designated Resource Nurses. The Designated Resource Nurse will be an assignment and not a posted position. It is the intent of the parties that the Designated Resource Nurse will typically be assigned from the unit on which they will be used and would be utilized as an additional resource to augment the provision of patient care. ~~in addition to authorized FTEs.~~ The Designated Resource Nurse is not counted into the staffing grid. Nursing Administration, with input from the Staffing Advisory Committee and unit grid evaluation committees, will develop a process by which nursing units can request a Designated Resource Nurse FTE allocation.

The purpose of the Designated Resource Nurse is to:

1. support novice staff while they gain the experience and confidence to develop their skills;
2. provide clinical assistance for the bedside nurse when intensity is high;
3. support all staff when new technologies/therapies/interventions are implemented or when other needs are identified by patient care staff.
4. Perform Admissions, Discharges and Patient transfer duties.

When done well, this will:

1. improve the timely provision of quality patient care;
2. improve overall staff satisfaction;
3. improve the personalized care and service given to patients and their families;
4. improve inter-departmental relationships (EC, lab, and x-ray) by making

- turnaround processes more efficient;
- 5. decrease incremental overtime;
- 6. Not interrupt orientation/keep preceptors and orientees whole/together.

Starting no later than thirty (30) days following ratification of the 2019-2022 CBA and for twelve months thereafter, the Hospital and the union agree to use the Labor Management Committee process to gather and analyze data on DRN utilization. LMC will then use that data to make recommendations designed to fully utilize the allotted DRNs to support patients and staff. Within thirty (30) days following the twelve (12) month review process above, nursing leadership will take action to begin implementing LMC's recommendations.

To assist with creating relevant and current data, the DRNs that are allotted in the June 2019 application process will not be pulled unless one of the following is present:

1. The Unit is short staffed, or
2. The Hospital is experiencing high patient acuity or intensity, or
3. The Unit/Department is closed, or
4. The Emergency Center, Operating Room and/or procedural areas are holding patients for an excessive amount of time.

Thereafter, and for the life of the current CBA, LMC will continue to analyze data, assess the success of efforts to maximize the utilization of DRNs and may mutually agree upon other modification to the plan.

Minnesota Nurses Association and Methodist Hospital Negotiations
May 6, 2019
Counter Proposals

Hospital #4 Vacation Limits May to September
Union #7 Vacation Scheduling

D. Vacation Scheduling

Nurse may replace themselves with up to eight (8) hours of overtime per pay period ~~posted schedule~~ to cover a vacation request that was denied during the original vacation granting period. These hours maybe used in four (4) hour blocks.

Packaged with the agreement to employer # 4 as modified

No individual nurse maybe granted more than eighty (80) vacation hours during the six (6) week schedule blocks that include Memorial Day and Labor Day and the time period between the two holidays. If vacation days remain available after the vacation granting period, a nurse may be granted additional vacation hours by seniority during the period defined above. Vacation scheduling shall be reviewed quarterly by the Staffing Advisory Committee.

**Park Nicollet Methodist Hospital
And
Minnesota Nurses Association
HOSPITAL Counterproposal #6 Regarding:**

Union #13 (Workplace Violence) MODIFIED:

May 6, 2019

Article 24, Section E

Workplace Violence

The Hospital and Association recognize the effects that incidents of violence have on patients, visitors and staff. The Hospital is committed to providing a safe, healthy and secure environment for patients, visitors, and staff. In order to ensure the professional longevity and continued health of staff who work in areas where violent events may occur, the Hospital and the Association are committed to working together to prevent and respond to incidents of violence.

The Hospital will ~~communicate~~ provide education on and reinforce its commitment to the Hospital's Violence Free Workplace Policy and will communicate its expectations to staff, patients and visitors.

The Hospital will continue to evaluate the appropriate use of technology, visual cues and other reasonable means for alerting staff that a patient, patient's family member or visitor has a history of violence on the Hospital campus.

Hospital security will be alerted and engaged as appropriate to support and promote a safe work environment.

Nurses are encouraged to report all incidents of workplace violence and to contact the Employee Occupational Health and Safety Department following any incident of workplace violence. Employee Occupational Health and Safety will contact the nurse's leader to coordinate the implementation of post-incident protocols. Employee Occupational Health and Safety will facilitate support and resources for the affected employee(s) such as the Employee Health Clinic, Employee Assistance Program and stress management resources.

A nurse who has experienced workplace violence will be given the opportunity to be free from duty without loss of pay for the remainder of that shift. If additional time away is needed the Employee Occupational Health and Safety Department will explore options with the nurse via programs, resources and offerings available such as paid administrative leave and assistance with the Workers' Compensation process.

Minnesota Nurses Association
and
Methodist Hospital Negotiations

May 6, 2019
Counter Proposal

4. Holidays:
A. Holiday

Full-Time Nurses:

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Part-Time Nurses:

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A regularly scheduled part-time nurse, as defined in Section 39 of this Agreement, shall be provided with two (2) personal floating holidays each Contract year at a time mutually agreed upon between each individual nurse and the Hospital.

Packaged with Union Drops U-3 (L) change in block scheduling from .8-.7 FTE

Minnesota Nurses Association
and
Methodist Hospital Negotiations

May 6, 2019
Tentative Agreement

4. Holidays:
A. Holiday

Full-Time Nurses:

Full-time nurses will be granted the following six (6) holidays with pay: Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, Christmas Day, and New Year's Day. Full-time nurses shall be provided with three (3) personal floating holidays each contract year at a time mutually agreed upon between each individual nurse and the Hospital.

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Packaged with Union Drops U-3 (L) change in block scheduling from .8-.7 FTE

Methodist Hospital _____

Minnesota Nurses Association _____