Children's Minnesota | MNA 2019 Negotiations

Issue(s) Tentative Agreement May 24, 2019

On 5/24/19, Children's Minnesota and Minnesota Nurses Association reached a tentative agreement on the following issue(s):

Modify Minneapolis Article 19(e)(1), (3), and (8) as follows. Modify Children's St Paul Article 29(e)(1), (3), and (8) as follows.

[Mpls Article 19 / St. Paul Article 29] **COMMITTEES**

(e) <u>HEALTH AND SAFETY</u>

(1) Safety Policy

It shall be the policy of the Hospital that the safety of the nurses, the protection of work areas, the adequate education, and necessary safety practice and the prevention accidents <u>and workplace violence occurrences</u> are a continuing and integral part of its everyday responsibility. Further, the Hospital is committed to providing employees a work environment that is free from hostile, <u>violent</u>, abusive, and disrespectful behavior.

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

It shall also be the responsibility of all nurses to cooperate in programs to promote safety to themselves and to the public, including participation on committees, and compliance with rules promulgated to promote safety and a violence-free workplace. This nurse responsibility shall include the proper use of all safety devices in accordance with recognized safety procedures.

A nurse is allowed to decide if fatigue prevents her/him from delivering safe patient care.

(2) Report of Injury

All nurses who are injured during the course of their employment shall file a report no matter how slight the injury, according to Hospital policy. The nurse may submit a copy of the report of injury to the Association.

(3) Equipment. Environment and Facilities

The Hospital will make every effort to provide nurses with safe and adequate equipment, working environment and facilities, and a violence free workplace.

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.

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(8) Physical Violence and Verbal Abuse

Each facility will have a trained response team(s) which will respond to all emergency situations where physical violence, the threat of physical violence, or verbal abuse occurs. A process will be developed to record and report these incidents of a non-emergency nature. These records will be evaluated by the Nursing Health and Safety Committee when the situation involves a nurse.

Employers will encourage nurses who are victims of assault in the workplace to recognize the potential emotional impact and offer counseling or other delayed stress debriefing.

In addition, a nurse who has been assaulted at work and is unable to continue working 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, Employee Health Services (EHS), HR and the nurse leader will explore options with the nurse including programs and resources available such as paid leave as described below and assistance with the Workers Compensation process.

Upon receipt of verifiable medical certification confirming physical or emotional injury necessitating additional time off beyond the day of the incident, the Hospital agrees to grant the nurse up to three consecutive calendar days off without loss of pay immediately following the date of the incident, in the form of paid administrative leave. Furthermore, the incident of workplace violence must be reported by the nurse in order to be eligible for any paid administrative leave. However, if a report is made more than three days after the event (but in no event later than ten days) administrative leave may be provided retroactively.

A nurse who has experienced violence that was committed by a patient, that patient's family, or that patient's visitor shall not be required to assume the assignment of that patient on a future date without the consent of the nurse in collaboration with the nurse leader, or in the case of emergency.

Following the report of a violent event a debrief will take place as appropriate that includes staff involved and other members of a typical debrief team. The intent of the debrief is to create a safe space for staff to discuss the event. The debrief will be scheduled to occur as soon as reasonably possible (and reasonable effort will be made to have this debrief in 72 hours) after report of the event has been received.

Reported incidents of violence will be reviewed monthly in 2019 and regularly thereafter by the System Labor Management Committee or its delegate. The System Labor Management Committee will review trends and through mutual agreement make recommendations for change.

[This resolves U-10.]

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Children's Minnesota | MNA 2019 Negotiations

Issue(s) Tentative Agreement May 24, 2019

On 5/24/19, Children's Minnesota and Minnesota Nurses Association reached a tentative agreement on the following issue(s):

Delete the following language from Article 6(E) of the Minneapolis contract, with the rest of this section remaining the same.

Any casual nurse who works greater than four hundred sixteen (416) hours as a casual nurse in the previous calendar year will be eligible to be awarded position(s), pursuant to Section 16, Schedules and Postings, before easual nurses who have worked less than four hundred sixteen (416) hours in the previous calendar year. To qualify for this benefit, a casual nurse needs to have been in the casual status for a minimum of one (1) full calendar year.

Modify the respective paragraphs of the respective contracts as follows:

Mpls Article 16(C) second paragraph—

In filling any such bargaining unit position, other than an Assistant Nurse Manager and/or Clinical Educator position, the primary consideration shall be whether the applicant meets the required qualifications to perform the duties of the open position. The transfer of a nurse to the position for which the nurse has been accepted may be postponed for a period not to exceed three (3) months if it is necessary to provide the proper skill level on the unit from which the nurse will be transferring.

Subject to the foregoing, nurses meeting the required qualifications shall be given preference over nurses not currently employed by the Hospital, and as between nurses employed by the Hospital,-preference shall first be given to the most senior regularly scheduled nurse within the bargaining unit. Preference shall then be given in seniority order to any casual nurse who has worked greater than four hundred sixteen (416) hours as a casual nurse in the previous calendar year. To qualify for this benefit, a casual nurse needs to have been in the casual status for a minimum of one (1) full calendar year. Should there be no nurses in the previous two categories, preference shall then be given in seniority order to casual nurses who have worked less than four hundred sixteen (416) hours in the previous calendar year. Should there be no nurses in this last category, preference

St. Paul Article 14(C) middle paragraph-

filling any position, the primary In consideration shall be the qualifications to perform the duties of the position. When the qualifications of two or more nurses are equal, preference shall be given to a nurse employed by the Hospital over nurses not currently employed and as between nurses employed by the Hospital, preference shall be given to the most senior nurse within the bargaining unit holding a regularly scheduled or casual or per diem position. If there are no nurses applying or eligible within the regularly scheduled or casual status, then preference shall be given in seniority order to per diem nurses prior to nurses not currently employed by the Hospital.

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shall then be given in seniority order to per diem nurses.

In filling any position, the primary consideration shall be the qualifications to perform the duties of the position. When the qualifications of two or more nurses are equal, preference shall be given to a nurse employed by the Hospital over nurses not currently employed and as between nurses employed by the Hospital, preference shall be given to the most senior nurse within the bargaining unit holding a regularly scheduled or casual or per diem position.

Modify the following sentence in Minneapolis Article 18(E), and in St. Paul Article 16(F), as follows, with the rest of these sections remaining the same.

Nurses transferring into Contract from Non-Contract positions do not bring any bargaining unit seniority with them, unless they have maintained casual <u>or per diem</u> status in the Contract while working in the Non-Contract position.

Revise Mpls §13(j) and St. Paul 11(j) as follows:

Association Activities

Leaves of absence without pay of reasonable duration shall be provided nurses for the purpose of attending meetings, conferences and conventions of the Association on a local, district, state or national level, including the AFL-CIO. The number of nurses attending such functions shall not exceed a reasonable number at any one time and the granting of such leaves shall be predicated on the Hospital's staffing requirements. For the purpose of attending the Minnesota Nurses Association convention, delegates, and alternate delegates, to this convention will be given priority in the granting of flex time requests. For the purpose of attending the American Nurses Association National Nurses United convention, delegates, as well as alternate delegates whose status is upgraded to delegate, will be considered separately from the vacation requests.

In addition, nurses elected to serve as a regular or alternate member of the nurses' Negotiating Committee for the Employment or Pension Contract shall be given credit toward eligibility for and accumulation of benefits for all hours spent serving in this capacity.

Nurses serving on MNA committees will notify schedulers of all meetings dates/times as soon as such meetings are scheduled. The schedulers will accommodate these meetings in the nurses' base schedules when possible, or in the adjustment phase. The nurses will verify, in the adjustment phase, that scheduling accommodations have been made. If accommodations have not been made, the nurse shall notify the scheduler.

Revise Mpls §16(c) and St. Paul §14(c) as follows. This is complementary to the above TA involving the same sections; this does not supplant or supersede that TA.

Minneapolis Article 16(c)

16. SCHEDULES AND POSTING

(c) Posting and Filling of Positions

If a nursing position is or will be open, the Hospital will post on the bulletin board a notice for a period of at least five (5) days before permanently filling the position. Said notice shall include a listing of the station unit, the number of shifts per payroll period, the shift rotation, the required qualifications for the position and the person to whom to apply.

In filling any such bargaining unit position, other than an Assistant Nurse Manager and/or Clinical Educator position, primary consideration shall be whether the applicant meets the required qualifications to perform the duties of the open position. The transfer of a nurse to the position for which the nurse has been accepted may be postponed for a period not to exceed three (3) months if it is necessary to provide the proper skill level on the unit from which the nurse will be transferring. Subject to the foregoing, nurses meeting the required qualifications shall be given preference over nurses not currently employed by the Hospital, and as between nurses employed by the Hospital, preference shall first be given to the most senior regularly scheduled nurse within the bargaining unit. Preference shall then be given in seniority order to any casual nurse who has worked greater than four hundred sixteen (416) hours as a casual nurse in the previous calendar year. To qualify for this benefit, a casual nurse needs to have been in the casual status for a minimum of one (1) full calendar year. Should there be no nurses in the previous two categories, preference shall then be given in seniority order to casual nurses who have worked less than four hundred sixteen (416) hours in the previous calendar year.

Should there be no nurses in this last

St. Paul Article 14(c)

14. SCHEDULES AND POSTING

(c) Posting and Filling of Positions

If a nursing position is or will be open, the Hospital will post it on the bulletin board for a period of at least five (5) calendar days before permanently filling the position. Said notice shall include a listing of the position, requirements, the shift, the unit involved, the number of shifts per payroll period, and the person to whom to apply. The Association will have input into the qualifications for any Assistant Nurse Manager and any Clinical Educator positions, before positions are posted.

In filling any position, the primary consideration shall be the qualifications to perform the duties of the position. When the qualifications of two or more nurses are equal, preference shall be given to a nurse employed by the Hospital over nurses not currently employed and as between nurses employed by the Hospital; preference shall be given to the nurse most senior within the bargaining unit holding a regularly scheduled or casual position. If there are no nurses applying or eligible within the regularly scheduled or casual status, then preference shall be given in seniority order to per diem nurses prior to nurses not currently employed by the Hospital.

A nurse will be limited to two transfers to two (2) different units in two (2) years, unless the nurse and the manager mutually agree to a different timeframe. Any transfer to a newly-opened unit will not be subject to the foregoing limitation.

A nurse is not eligible or qualified to apply for a position on a different unit until the nurse has been working on the nurse's current unit for a period of one year, unless the Hospital determines to waive this

category, preference shall then be given in seniority order to per diem nurses.

A nurse will be limited to two (2) transfers to two (2) different units in two (2) years, unless the nurse and the manager mutually agree to a different timeframe. Any transfer to a newly-opened unit will not be subject to the foregoing limitation.

A nurse is not eligible or qualified to apply for a position on a different unit until the nurse has been working on the nurse's current unit for a period of one year, unless the Hospital determines to waive this limitation or disqualification.

The Association will have input into the qualifications for any Assistant Nurse Clinical Manager and any Educator positions, before such positions are posted. In filling any Assistant Nurse Manager and/or Clinical Educator position, primary consideration shall be the qualifications to perform the duties of the position. When the qualifications of two (2) or more nurses are equal, preference shall be given to a nurse employed by the Hospital over nurses not currently employed, and as between nurses employed by the Hospital, preference shall be given to the nurse most senior within the bargaining unit.

limitation or disqualification.

[The above resolves U-2, U-7, U-9, U-4, and ER-6. Withdrawn are U-8, U-11, U-15, and U-17 (A & B) and ER-7.]

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MNA signature(s)/initials

Date 24-19

Date 5-24-19

Children's | MNA 2019 Negotiations

May 24, 2019 Issue(s) Tentative Agreement

On 5/24/19, Children's Minnesota and Minnesota Nurses Association reached a tentative agreement on the following issue(s).

APPENDIX B - RECOGNIZED CERTIFICATION PROGRAMS

- (1) Effective June 1, 2019, the recognized certifications are those certifications that appear on the American Nurses Credentialing Center (ANCC) list of accepted certifications that Magnetrecognized hospitals may report in the Demographic Data Collection Tool (DDCT), as that list may be revised from time to time.
- (2) In addition, for the period of the 6/1/19 through 5/31/22 collective bargaining agreement, the following certifications shall be deemed as recognized certifications even if they are not the ANCC list referenced above.

ENPC Instructor ENPC TNCC Instructor TNCC Certification for Neonatal Infant Massage NTMC Certified Lactation Counselor CLC **ACLS Instructor ACLS APRN** Advance Practice RN BLS **BLS** Instructor **CPS** Child Passenger Safety Tech **ENA ENA Instructor** Healing Touch Practitioner **HTCP NRP** Instructor **NRP PALS Instructor PALS**

STABLE Instructor

STABLE-1

Neonatal Developmental Care Specialist Designation

(3) For the June 1, 2019, certification bonus payments, a nurse may qualify for the certification bonus by holding a recognized certification identified in Appendix B of the of the 6/1/16—5/31/19 collective bargaining agreement (even if it does not appear on the ANCC list and is not identified in paragraph (2) above). However, for the June 1, 2020, certification bonus payments, and the certification bonus payments thereafter, the certification must appear on the ANCC list referenced above on the date of the payout or be specifically identified in paragraph (2) above.

(4) If, during the term of the collective bargaining agreement, a nurse obtains a certification while it is on the ANCC list, and that certification is subsequently removed from the ANCC list, then that nurse will continue to be eligible for the certification bonus payments through the end of the 6/1/19 through 5/31/22 collective bargaining agreement, as long as the nurse's certification is active and not expired.

[This resolves ER-1.]

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Children's Minnesota | MNA 2019 Negotiations

Issue(s) Tentative Agreement May 24, 2019

On 5/14/19, Children's Minnesota and Minnesota Nurses Association reached a tentative agreement on the following issue(s):

The following is a new Letter of Understanding.

LETTER OF UNDERSTANDING

This Letter of Understanding (LOU) shall be effective from June 1, 2019, through May 31, 2022.

Children's Minnesota and Minnesota Nurses Association hereby agree as follows.

The parties have a mutual interest in making sure that nurses are able to use flex time that is earned. Children's Minnesota and Minnesota Nurses Association are therefore committed to developing and validating a methodology for determining the ideal number of nurses that can be approved for time off while maintaining the ability to appropriately staff the patient care units.

On an annual basis, the parties will discuss in System Labor Management Committee meetings the allocation of vacation slots for the upcoming year. This will occur prior to the bid period that includes vacation time for the upcoming summer.

As part of addressing the allocation of vacation slots for the upcoming year, the parties will review and consider (a) the prior utilization of vacation slots on that patient care unit in a manner that takes into account patterns and seasonality, (b) the amount of flex time accrued by the nurses on the unit during the year, (c) banked flex time hours for the nurses on that patient care unit, and (d) the hours of operation and staffing plan for the patient care unit.

If a mutually agreed-upon resolution is reached as to the allocation of vacation slots for the upcoming year for a particular patient care unit, that resolution will govern the vacation slots for that unit for the upcoming year.

In the event that the parties are not able to reach a mutually agreed-upon resolution despite their best efforts, the parties will participate in mediation under the auspices of a Federal Mediator from the Federal Mediation and Conciliation Service (FMCS).

This LOU shall expire at the end of the day on May 31, 2022.

[This resolves U-3.]

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