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Minnesota Nurses Association Proposal to Allina Health June 4, 2019

ML UNION PROPOSAL #45

PROCESS IMPROVEMENT PROJECTS

All Sections/paragraphs not addressed in this Proposal are to remain status quo unless otherwise addressed in the Local Union Proposals.

Add the following new Language to the CBA as a LOU for Abbott Northwestern/Phillips Eye Institute, Unity Hospital, and United Hospital

LETTER OF UNDERSTANDING

SUBJECT: Process Improvement Projects

Notwithstanding <u>Nursing Practice</u>, <u>Professional Practice and Nursing</u> Care Delivery Committee provisions in the collective bargaining agreement, other provisions of the collective bargaining agreement, or other agreements between the parties regarding process improvement initiatives, the Hospital and the Minnesota Nurses Association agree the parties will engage as described in the bullet-point steps outlined below for engaging about process improvement projects that are designed to develop rapid process changes with ongoing evaluation and modification (if appropriate):.

- The MNA steward (or other Union Designee) will be involved in each <u>Rapid Process Improvement Workgroup</u> (RPIW) event.
- The names of the other RNs invited to participate in an RPIW will be sent to the MNA chairs for discussion and input before the staff are notified/invited.
- MNA chairs will be invited to each report-out at the end of a process improvement event. The Union will be given as much notice of the event and report-out as possible.
- Immediately after the report-out of a process improvement event, there will be a
 meeting to which, at minimum, the following parties will be invited: the Hospital's
 Vice President of Patient Care (CNO), the Hospital's Vice President of Human
 Resources, MNA's Labor Relations Specialist, MNA's co-chairs, and the steward

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(or other union designee) involved to review the report-out and any questions/concerns MNA may have.

• There shall be a standing item on the meeting agendas to the appropriate labor management committee to review current RPIWs in progress.

The bullet point steps outlined above uses the term RPIW. However, for purposes of this agreement a process improvement initiative refers to any Kaizen, lean management project, RPIW, or similar rapid process improvement mechanism designed to develop rapid process changes with ongoing evaluation and modifications (if appropriate).



Minnesota Nurses Association Proposal to Allina Health June 4, 2019

ML Union Proposals

- 1) #2 Waiting Management Response
- 2) #5 Waiting Management Response
- 3) #6 Waiting Management Response
- 4) #7 Resubmit Breaks
- 5) #9 See attached Capacity Pay
- 6) #10 Salary Increase 2019 6%, 2020 5%, 2021 4%
- 7) #13 Waiting Management Response
- 8) #18 Resubmit Weekend Differential
- 9) #24 Union withdraws E) from this proposal and resubmits F). Waiting Employer Response
- 10) #25 Union withdraws proposal back to status quo
- 11) #32 Resubmit Maternity/Paternity/Adoption
- 12) #35 Union withdraws proposal back to status quo
- 13) #41 Resubmit Health Insurance
- 14) #42 Current Lou (through 2021) and beginning in 2022 the employer contribution will be \$300 annually.
- 15) #44 Duration
- 16) #45 See Attached

ANW/PEI

- 1) #4 Resubmit Supervisory Non-Contract Position
- 2) #10 Resubmit Part-Time Nurses Holidays
- 3) #23 Resubmit NP

Unity

- 1) #2 Resubmit MLN
- 2) #4 Resubmit PTO
- 3) #5 Resubmit_NP
- 4) #7 Resubmit Attendance
- 5) #8 Resubmit Health Program

Mercy

- 1) #2 Resubmit (Give Aways)
- 2) #3 Resubmit (Start Times)
- 3) #6 Resubmit (Vacation Scheduling)
- 4) #15 Resubmit Non-Nursing Functions
- 5) #Weekend On-Call Rotation

United

1) #1 Resubmit (16.5 Hours)



Minnesota Nurses Association Proposal to Allina Health June 4, 2019 Time:

ML Union Proposal #9

Section 4: Salary

New Subsection S.: Capacity Pay

A Capacity Page will be utilized in any unit Emergency Department, Mother Baby, Pre-Operative, Post-Operative, and ICU's when staffing needs cannot be filled by the Can Work/ Available List or Group Page process. At that time, the Charge Nurse, Patient Flow Supervisor/Admin Supervisor, and Manager/Manager on call will assess staffing needs and determine whether a Capacity Page should be initiated via the group paging system. The Capacity Page will direct the nurse to call the Staffing Office to be considered and the Capacity Shift will be confirmed in the order of calls received, 1st come basis. For areas that are not covered by the Staffing Office, the Capacity Page will direct the nurse to call the Charge Nurse. The length of the Capacity Pay shift will be communicated at the time the nurse responds to the Capacity Page.

A nurse responding to the Capacity Page must be able to report to work within forty-five (45) minutes from the time the Capacity Pay Shift is confirmed or the start of the Capacity Shift. The nurse will be expected to do the work for which the Capacity Page was called. The nurse cannot choose a different work assignment, or bargain for additional time off.

If a nurse is contacted through the Can Work Process and turns down a shift or does not respond to a call for which they made themselves available prior to a Capacity Page, they will not be eligible for Capacity Pay.

The Capacity Pay Nurse will receive double time for the hours worked with a guaranteed minimum of four (4) hour pay. Per Diem nurses will be paid at a rate that is double (2) the rate of pay that they would receive as a regularly scheduled RN. If an on-call, Per Diem, or a casual nurse picks up a Capacity Shift, it will not count towards casual shift requirement.