



Summary of CNA/KP Bargaining 2006

Maintaining a Strong RN/NP Union in Kaiser Permanente

CNA, as the most aggressive voice for registered nurses in California and nationally, established priorities essential to protect our union and the profession, and which were achieved in this bargaining:

- Kentucky River precedent setting language to protect CNA represented RNs/NPs right to union representation
- Update Jurisdiction Side Letter to guarantee more CNA represented positions
- New Technology language guaranteeing that technology will not replace the professional judgment of the RN
- Provide leave of absence for elected CNA officers and short term union leave
- One hour for Nurse Leader to meet with new RNs during NEO
- KP will pay for up to 25 members of CNA bargaining team
- Payroll deduction for CNA Federal PAC
- KP will pay for contract copies for new hires
- Five years, CBA to expire 8/31/11

Patient Care Protections and Nursing Practice

A comprehensive list of RN/NP Clinical Practice Tentative Agreements establish CNA represented members at KP as having the premiere environment to practice Nursing, providing our patients with the delivery of safe, therapeutic and effective patient care. These new TAs are added to an Agreement which already contains the groundbreaking No Cancellation Program (now incorporated into the Agreement), No Mandatory Overtime, the historic Quality Liaison Program, and extensive PPC and Clinical Ladder Programs, and include:

- Outpatient and NP PPCs meet eight hours/month
- Regional Home Health PPC, meets every other month for eight hours
- Inpatient PPC/NQF meets eight hours/month, plus optional additional three hour meeting
- Model of Care language, RN as Coordinator of Care, delegates tasks to LVNs
- No patient assignment for Inpatient and ED Charge Nurses
- Guarantee "zero-lift" policy for safe patient handling at all times in hospitals

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- No cancellation of PPC meetings except in true disaster
- NQF meetings increased to four hours in conjunction with PPC
- Pilot mentor program in two Medical Centers
- One hour per month paid prep time for NQF co-chair
- Preceptor pay when precepting new employee or transfer
- No floating of preceptee during preceptorship
- Preceptor/preceptee share a single assignment
- GRASP recommendations to be carried out within 30 days
- Expanded responsibilities of GRASP committee
- All disputes over staffing or GRASP issues are subject to arbitration
- One RN from each Inpatient unit and ED on GRASP committee
- Complete ratio language added to contract
- Clarify release time and backfill for GRASP members and co-chairs
- Annual education of all staff RNs on GRASP
- GRASP Audit recommendations to be implemented within 60 days
- Regional GRASP recommendations to be implemented within 60 days
- Side Letter - focus on building Float Pools to eliminate involuntary floating
- Implement strategies from Outpatient Staffing Committee for backfill
- Recognize Home Health point system for staffing, not as a productivity tool
- KP guarantees respect for RN title, time for Web Wiz in the AACCs
- Maintain Home Health and NP Peer Groups
- Substantially revised definition of NP and NP practice
- Provide reimbursement of DEA certification for all NPs unless they do not furnish scheduled drugs.
- If new clinical skills, procedures, technologies required, appropriate education is provided
- Guarantee establishment of NP peer review educational process participation of NP PPC in peer review educational process and NP participation
- KP guarantees education for basic competency in new P&Ps and technologies
- KP to encourage NPs to volunteer as Preceptors/Mentors, no unreasonable denial to precept/mentor
- Clarify intent of mentor program to be widely used for newly hired NPs and NPs transferring to a new clinical area
- Clarify NP II definition and length of mentorship required
- KP commits to more facility-based, free CEs and better communication of CEs
- Three additional QLs (total 36) when three new hospitals open
- Only two applicants will be required for each QL position

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- KP will backfill each QL's hours
- Simplify QL reporting requirements
- More flexibility for RNs to serve on Facility Selection Committees
- Replace "clinical pertinence" with language for "peer review"
- Facility Selection Committees to provide decision within defined time
- CNA leadership activities count toward Clinical Ladder qualifying
- Appeals of denials to be in writing, Regional Appeals decision in 30 days
- Update qualifications and eliminate outdated 2002 language
- Maintenance of National Certifications to be reimbursed
- Identification of recognized National Certifying Bodies for Medicare eligible NPs
- CNA leadership activities count toward Clinical Ladder qualifying
- Possess health-related Masters degree, post-Masters certification, doctoral degree, completion of same for NP Clinical Ladder qualifications

Benefits

In a time in history when Medical and Post-Retirement Medical Benefits and Defined-Benefit Pension Plans are the number one cause of strikes in the U.S., and are under attack or being lost entirely, the CNA Bargaining Team has reached Tentative Agreements which reverse this trend at Kaiser Permanente:

- No premium copay for retiree health at 65 for RNs/NPs with 15 years of credited service and retiring after 4/1/07
 - ✦ *CNA agreed to the Employer's \$5 office visit co-pay, effective 4/1/07*
- Increase pension multiplier to 1.45% per year of credited service, 1/1/07
- One extra year of lookback (credited service) for RNs who didn't get three years last time and if on payroll as of 1/1/08
- Increase annual dental cap to \$1200 for each family member/dependent, effective 1/1/08
- Expand eligibility for orthodontic benefit to dependents up to age 25
- Employer-paid Long Term Disability coverage starting 1/1/08
- If any other KP union gets Retiree Health before age 65, CNA gets it also
- If any other KP union gets access to Long Term Care, CNA gets it also
- All RNs/NPs can be reimbursed costs for one voluntary certification
- NPs will be reimbursed costs for required certifications
- Expand definition of family for funeral leave to include in-laws, etc.
- Provide two additional days funeral leave for funerals over 300 miles away
- Remove limits on home study
- Remove limits on use of education leave on non-work days.

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- Allow some confirmed shifts in advance for Per-Diems so that vacation time off for regular RNs can be covered
- No more “wait-listing” of vacation requests, grant vacations promptly
- Sick Leave Cash Out: details to be worked out post-bargaining
- Clinic nurses guaranteed the right to work during “near holiday” closures
- Former St. Dominic’s RNs get credit for previous service toward retiree health
- KP will provide an annual statement of credited hours for pension service

Compensation

The breadth and significance of the compensation issues CNA secured is unprecedented, especially when other Union members, including other professionals are under attack and forced to accept massive takeaways. We have been able to advance the profession of nursing in this CBA, by providing for both enhanced recruitment and retention provisions:

- 6%, 5.5%, 5%, 5%, 5% effective first pay period of each year beginning January 2007
- Eliminate Sacramento/Fresno wage tier in four stages, with parity 7/1/09
- Sacramento/Fresno step progression will match Bay Area as of 7/09
- Eliminate Fresno NP wage tier effective January 2007
- New 30 year Step at 3% above previous top Step at 25 years
- Expands RHC differential to anyone performing in a lead capacity
- Call-back provisions apply even if continuous with regular shift
- Makes progression from HHI-II and NPI-II automatic after six months
- Shift differential will be paid for attendance/participation in meetings
- Remove workday limitation from double-time provision
- Paid Travel time in contract
- Mileage allowance in contract
- Bilingual differential: details to be worked out post-bargaining

Contractual Rights—Building Our Union

CNA’s Bargaining Team consistently bargained enhanced rights for RNs/NPs under this Agreement:

- Change priority for daily overtime to seniority (was by rotation)
- Apply Regional Scheduling Guidelines to all settings
- Allow laid-off RNs to maintain seniority and preference rights up to one year, add option to work per diem
- Clarify use of “standby;” not as substitute for adequate core staffing

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- Any time on "investigatory suspension" will be paid by KP
- Prohibit use of evaluations to deny transfers
- Prohibit reliance on discipline to deny transfers unless patient-care related and there is an uncompleted plan of correction
- Reduce length of time discipline stays active to 12 months
- Open bids for one-day postings to be coordinated by originating department
- Traveler agreement updated and incorporated as contract language
- Eliminate sub-standard scheduling provision for AACC nurses (four weeks advance)
- No cancellation permanent feature of contract
- TAP agreement continued through 2011
- Allow temporary positions for up to 90 days
- Clarify location of facility postings: facility bulletin boards and internet
- Modify in "layoff" language per the recognition of permanent "No Cancellation"
- Delete phrase "provided such assignment will not adversely affect patient care" from layoff and job bidding language
- Clarify Float Pool RNs bidding rights
- Best efforts to allow reductions/increases in schedules
- CNA/KP agree to set up awareness campaign re extended work periods "Work/Life Balance"

Clarifications

Additional enhancements which were bargained:

- Add Multi-site and multi-facility agreements to the contract
- List all provisions for wage structure in one place
- Guarantee the 5% differential is correctly calculated for NP III
- Update language on sick leave accrual to show current standard
- Update language on vacation accrual to show current standard
- Move Paid Education Leave into separate Article
- Move Funeral Leave into separate Article
- List brief descriptions of all classifications in one place

More

In addition to all of the above there were also 59 TAs which provide clarification of CBA language, incorporate Side Letters of Agreement into the CBA, or make the CBA more user friendly. There will also be an expanded Table of Contents and Index.

