

Contract Rejection Votes Being Scheduled

CNA Team Rejects UC Offer; Impasse/Mediation Ahead

UC Concedes Pension/Retiree Health Protection

- Recognizing that UC RNs will not give up our hard-won pension and retiree health protection, UC included pension and retiree health protection **for the first year** in their final offer. This provides baseline protections for when the contract is finally settled.

UC Final Offer grossly inadequate: salary, no to PTO, other staffing/RN protections

- UC made their "final offer" in bargaining October 17; UC is proposing a 3-year contract, with reopener bargaining in the 2nd and 3rd year (to bargain 2nd, 3rd year wages and benefits). UC proposes that UCI be locked into 3-year rates now.
- The CNA negotiating team feels the UC offer is grossly inadequate both in terms of salary, no to PTO, as well as other staffing/RN protections (see chart below).
- CNA has requested impasse determination by PERB and the help of a state mediator to try to reach a settlement. If mediation is unsuccessful, a fact-finding panel lead by a third party neutral will listen to CNA's and UC's issues, and issue a non-binding recommendation for settlement. Your CNA negotiating team will continue to work hard to try to reach an agreement with UC that protects and improves RN compensation, benefits and staffing/practice.

Contract Rejection votes are being scheduled starting November 4 so your voice can be heard on UC's final offer.

- Look for flyer coming soon listing date/times/locations of upcoming contract rejection votes.
- We want to send a clear message to UC that 10,000 UC RNs reject UC's insulting final offer.**

Outstanding Issues

| Issue | UC Final Offer Inadequate | CNA Proposal |
|--------------------------|---|---|
| Salary | <ul style="list-style-type: none"> Raises offered by UC are much less than RNs at the major California hospital chains are currently receiving. | <ul style="list-style-type: none"> 9% across-the-board raises, new longevity steps, and improvements in on-call and other ancillary pay. |
| PTO | <ul style="list-style-type: none"> Nurse must use 24 hours of vacation time before accessing sick leave UC is only proposing mandatory PTO for new hire RNs. This is a back-door way of forcing PTO on everyone in the next round of contract bargaining. | <ul style="list-style-type: none"> No to PTO. PTO encourages RNs to come to work sick, thus endangering our patients. It should be up the RN's professional judgment when you are too sick to come to work. We want to protect first day access to your sick leave benefit. |
| Preceptor differential | <ul style="list-style-type: none"> None | <ul style="list-style-type: none"> Establish hourly preceptor differential at all locations to recognize this important work. |
| CNA ed leave | <ul style="list-style-type: none"> No full-shift ed leave allowed; no carry-over of unused ed leave (use it or lose it). | <ul style="list-style-type: none"> Full-shift ed leave if miss a work shift; carryover allowed if ed leave denied |
| Union Protections | <ul style="list-style-type: none"> UC wants to be able to declare large groups of UC RNs (such as charge nurses or CN3s) as supervisors and thus no longer eligible for union protection | <ul style="list-style-type: none"> No UC RNs covered by the CNA contract could have their duties changed in order for UC/PERB to declare them supervisors. Union protection means patient advocacy protection! |
| Mandatory shift rotation | <ul style="list-style-type: none"> UC wants to be able to mandate shift rotation regardless of seniority as long as they give 48 hours rest between rotations. | <ul style="list-style-type: none"> Permanent ban where no MSR currently (D,I,SD) At locations that allow MSR (SF, LA), nurses with 3 or more years seniority would not be required to rotate |
| Technology protections | <ul style="list-style-type: none"> None | <ul style="list-style-type: none"> New technology cannot replace RN's professional judgment. |
| Floating protections | <ul style="list-style-type: none"> None | <ul style="list-style-type: none"> Establish floating clusters beyond which nurses cannot be mandated to float. ---Continue on page 2 please--- |

| Issue | UC Final Offer Inadequate | CNA Proposal |
|--------------------|---|---|
| No cancellation | <ul style="list-style-type: none"> None | <ul style="list-style-type: none"> A nurse cannot be cancelled if meal/break coverage inadequate, the charge nurse is not free of patients, or the ratios not being met at all times. |
| Lift teams | <ul style="list-style-type: none"> None | <ul style="list-style-type: none"> 24/7 lift teams protected in the contract |
| Layoff protections | <ul style="list-style-type: none"> Nurses with "special skills" can be exempted from layoff CN4s, AN1s and NP3s can be laid off regardless of seniority | <ul style="list-style-type: none"> Remove the "special skills" exemption that allows supervisor favoritism and subjectivity to affect this important decision. CN4, AN1 and NP3 protected from out-of-seniority layoff (and delete contract reference to UCLA ROP program) |
| Promotions | <ul style="list-style-type: none"> UC can hire an outside applicant over a qualified internal applicant. UC can decide which applicant is 'most qualified' for each open position. | <ul style="list-style-type: none"> Qualified internal applicants get priority. If 2 applicants qualified, the most senior nurse is awarded the position. Stop the supervisory favoritism and subjectivity that currently influences this decision. |
| Nurse rep and PPC | <ul style="list-style-type: none"> Reduce the amount of time CNA nurse reps have to work with the PPC on staffing issues. UC can prohibit CNA from addressing RNs at new employee orientation | <ul style="list-style-type: none"> Establish a PPC chair to coordinate the PPC work of addressing facility staffing/practice issues. Establish nurse rep council to help coordinate improvements, correct problems in the facility New employee orientation is a critical way for CNA to educate new RN employees on their rights and how to work with CNA to address staffing and other concerns. |

Medical Centers: Proposed First Year Raises Insufficient

| | UC Davis October | UCSF Oct + March | UCLA Oct + May | UC Irvine* October | UCSD October |
|-----------------------------|---|--|---------------------|--|---|
| New or Changed Steps | NONE | New 30-yr step (2%); new CRNA steps | NONE | year 1: 2-5.6%; year 2: 2-3.6%; year 3: 1.8-4.8% | New 15-yr (w/10 UC) (+2%); New 20-yr (w/15 UC) (+2%) |
| Ancillary Increases | Chg \$2 (+\$1); w/e \$1.60 (+0.60) on-call \$9 (+\$2) | Chg \$2.20 (+0.45) | On-call \$10 (+\$2) | On-call \$6.50 (+.25) Yr 2 \$6.75 (+.25) | Noc \$3.85 (+0.10) On-call \$8 (+\$1) |
| Clin Nurse 1-4 | 6% | 3% + 2% | 2% + 2% | See above | 5% |
| Per diem Nurse | 6% | 3% + 2% | 2% + 2% | 4% | Freeze n,we (non-we day +\$2.50) |
| Resource RN (LA) | n/a | n/a | 2% + 2% | n/a | n/a |
| NP 1-3 | 6% | 3% + 2% | 2% + 2% | 1-3.1% | 4% |
| PD NPs | 8.7% | 3% + 2% | 2% + 2% | 0% | Freeze all NP pd rates |
| CRNA | 2% | increases | 2% + 2% | 1.4-2.9% | 2% |
| PD CRNA | 2% | 3% + 2% | 2% + 2% | No proposal | Freeze d, we (non-we noc +\$1.25) |
| HH 1-3 | 6% | 3% + 2% | 2% + 2% | n/a | n/a |
| PD HH | 6% | 3% + 2% | 2% + 2% | n/a | n/a |
| Transp/RN coord | n/a | 3% + 2% | 2% + 2% | n/a | n/a |
| AN 1 | n/a | 3% + 2% | 2% + 2% | n/a | 5% |

*UC wants to lock in UCI rates now for all 3 years. With these locked in 3-year rates, the top UCI CN2 will continue to be FAR BELOW the new grad rate at UCSF--this is grossly unfair and unacceptable. In addition, UCI RNs with less than 5 years experience are only being offered 5.8% total over 3 years. Again, unfair and unacceptable.

Student Health Centers: Proposed First Year Raises Insufficient

| | UC Berkeley | LBNL | UC Santa Cruz | UC Merced | UC SB | UC Riverside |
|------------------|---------------------|------|---------------|-------------|-------|--------------|
| Benefited | 8% plus 6 new steps | 3.5% | 3% | 4% | 2% | 3.5% |
| Per Diem | 8% | n/a | 3% | No proposal | 2% | RN 5%; NP 4% |

10,000 UC RNs Will Be Heard; Sign the Open Letter; Wear a Red Ribbon

For more information, contact your CNA rep or labor rep, or email CNA at ucdivision@calnurses.org.

CNA Hotline: 1-800-284-4518

www.calnurses.org