

**Highlights of the Tentative Agreement
Between
UFCW 3000 and Providence Regional Medical Center Everett RNs
In-person Vote February 20th and 21st**

After almost ten months of negotiations, we have reached a tentative agreement with Providence Everett (PRMCE)! When negotiations commenced, our primary objective was to address the pressing issues of staffing shortages and patient safety concerns.

Throughout the bargaining process, we ensured that our voices were heard. We talked with our patients and community to highlight the critical nature of our staffing crisis, culminating in the decisive action of a strike.

Following our “NO” vote in December, we returned to the negotiating table with a clear focus on addressing the areas of improvement identified through our survey. Through collective effort, we secured significant victories like being the first hospital in WA state to have binding mediation for unresolved chronic staffing issues and a staffing premium for RNs when their unit is staffed below the Hospital Staffing Committee’s staffing plan, which is created by nurses and nurse managers.

We won language on market analysis triggers and a full contract opener by March 31, 2026, meaning we can get to the table as early as December 31, 2025 to negotiate a new agreement and remain competitive with other hospitals.

The bargaining team recommends a “YES” vote

**Below is a summary of changes to the 2020-2023 contract
(bold text is a change from the December 2023 TA)**

Economic Articles

- Article 9 Compensation
 - 9.1 Longevity steps will now be every 12 months instead of every 1872 hours worked
 - 9.2 Market Analysis of wages will be conducted every September, and the results will be shared with the Union. If there is a difference between the current average wage of the RN wage scale and the average wage of the market analysis, the Hospital will meet to discuss solutions, like wage increases or bonuses, to make PRMCE more competitive
 - **Float pay will be extended to Alternative Care areas like the boarder area in the ED. Also PRMCE will make every reasonable effort not to assign more than two ICU patients to a nurse’s boarder assignment**

Premium	Previous Amount	New Amount
Evening shift differential	\$2.75	\$3.00
Night shift differential	\$5.00	\$5.25
Low Census standby	\$4.25	\$4.75
Standby Differential	\$4.25	\$6.75
Relief Charge RN Pay	\$2.75	\$3.00
Preceptor Pay	\$1.75	\$2.00
Float Pool Pay	\$4.00	\$5.00
Float Pay	\$1.50	\$2.00

- Article 6 Employment Practices
 - **6.12.2 Extra shift incentive: If a unit has 20% of its shifts vacant when the final schedule is posted, then an extra shift incentive will be offered. For example, if a nurse picks up an extra shift after the final scheduled is posted and on the day of the extra shift 100% of the unit's shifts are filled that nurse will still receive the extra shift incentive.**
 - Eligibility requirements:
 - Full-time RNs (.9 – 1.0 FTE) who pick up an extra shift beyond their FTE shall receive double time.
 - Part-time nurses (.5 -.89 FTE) who pick up an extra shift beyond their FTE will receive 1.5 their regular rate of pay and will receive double time if they work above a .9 FTE.
 - Per diem nurses who work more than 2 shifts per pay period shall receive 1.5 their regular rate of pay and double time if they work above .89 FTE.
 - The Employer can offer an incentive above this requirement, but this is now the minimum incentive that nurses must receive when picking up an extra shift.
- Article 8 Hours of Work and Overtime
 - 8.5 President's Day is replaced with Dr. Martin Luther King Day (MLK). **Night shift nurses will receive holiday pay for only one Christmas Day qualifying shift, defined as Christmas Eve night through 7am December 25th or 6:30pm December 25th through 7am on December 26th.**
 - 8.5.1 Holiday Substitute: Nurses can switch a holiday for a day of importance to them. **If an employee cannot be scheduled off on their chosen day of significance, the employee will receive time and one-half premium pay.** Example: switching MLK Day for your birthday
 - 8.5.3 Nurses working standby during holiday shall be paid 2x the nurse's regular rate of pay
 - 8.8.1 Low Census: traveler RNs will be low censused before agency RNs
 - **8.14.1 Break Relief RNs: the Hospital will hire twelve .9 FTE nurses into the float pool 21 calendar days following ratification. The number and function of break relief nurses will be discussed in Hospital Staffing Committee. Additionally, Hospital Staffing Committee will discuss implementation of break relief nurses for closed units.**
 - **8.17.1 Weekend pay: Weekend pay is extended to Sunday night shifts for night shift RNs. Nurses who work only one weekend shift will receive weekend pay for one shift. Nurses who work any combination of night weekend shifts will be paid weekend differential for a maximum of two shifts.**
- Article 10 Paid Time Off/ Extended Illness Bank
 - **10.6 EIB will now be paid out on day 1 of an illness upon the employee's request**
- Article 11 Health and Safety
 - Monthly health insurance premiums will not increase more than 10% on a blended average in 2024 or 2025
 - Declared State of Emergency: shortened time period from 28 days to 14 days to meet to discuss safety measures and included disaster relief pay as item for discussion.

- Article 13 Leaves of Absence
 - 13.11 Bereavement leave shall increase to 40 hours of paid time for spouses, significant others, or children
- Article 16 Nursing Education/ License
 - 16.2 Professional development leave: 40 hours prorated by FTE
 - 16.2.2 Continuing education increased from \$650 to \$700 for .75 - 1.0 FTE and from \$450 to \$500 for .6 - .74 FTE
 - 16.4 Tuition Reimbursement: Up to \$5,250 for .75 FTE or more and up to \$2,625 for .74 FTE to .5 FTE. The Employer has other reimbursement avenues which may reimburse nurses additional amounts please reach out to Anthony Cantu.

- Appendix A

Wage Scale (see page 4 and 5):

2023- Two pay periods following ratification, the wage scale will be implemented. The new base rate of \$43.91 aligns with Swedish Edmonds and the top of the scale exceeds Swedish Edmonds through June 2025. On average nurses will receive a 21.5% increase for the life of the contract. The step increments (% between steps) on the wage scale vary ranging anywhere between 0% to 4.5%

2024- Effective first full pay period following 10/1/2024 nurses will receive a 4% increase

2025- Effective first full pay period following 10/1/2025 nurses will receive a 4.5% increase

Bonuses:

- **Nurses who were on payroll on December 31, 2001 and were continuously on payroll on the ratification date, will receive a \$4,000 bonus pro-rated by FTE. Per diem will be prorated at .25 FTE. Bonus will be paid out on the second full pay period following ratification.**
- **If the CBA is ratified by February 29th: All nurses on payroll on the ratification date will receive a \$1000 bonus prorated by FTE. Per diem will be prorated at .25 FTE. Bonus will be paid out on the second full pay period following ratification.**

RN	Current Scale	2nd Pay Period after Ratification		10/1/2024		10/1/2025
Base	\$37.71	\$43.91	Base	\$45.67	Base	\$47.73
1	\$39.37	\$45.68	1	\$47.51	1	\$49.65
2	\$41.04	\$47.57	2	\$49.47	2	\$51.70
3	\$42.67	\$49.42	3	\$51.40	3	\$53.71
4	\$44.36	\$50.90	4	\$52.94	4	\$55.32
5	\$45.98	\$52.79	5	\$54.90	5	\$57.37
6	\$47.63	\$54.54	6	\$56.72	6	\$59.27
7	\$49.36	\$56.39	7	\$58.65	7	\$61.29
8	\$50.99	\$58.28	8	\$60.61	8	\$63.34
9	\$52.67	\$60.15	9	\$62.56	9	\$65.38
10	\$54.38	\$61.83	10	\$64.30	10	\$67.19
11	\$55.31	\$62.78	11	\$65.29	11	\$68.23
12	\$56.26	\$63.66	12	\$66.21	12	\$69.19
13	\$57.19	\$64.34	13	\$66.91	13	\$69.92
14	\$58.13	\$65.52	14	\$68.14	14	\$71.21
15	\$59.05	\$66.81	15	\$69.48	15	\$72.61
16	\$59.87	\$67.83	16	\$70.54	16	\$73.71
17	\$60.74	\$68.80	17	\$71.55	17	\$74.77
18	\$61.56	\$69.80	18	\$72.59	18	\$75.86
19	\$62.37	\$70.82	19	\$73.65	19	\$76.96
20	\$63.30	\$71.60	20	\$74.46	20	\$77.81
21	\$63.30	\$72.35	21	\$75.24	21	\$78.63
22	\$64.76	\$73.48	22	\$76.42	22	\$79.86
23	\$64.76	\$73.48	23	\$76.42	23	\$79.86
24	\$66.38	\$74.66	24	\$77.65	24	\$81.14
25	\$68.66	\$75.92	25	\$78.96	25	\$82.51
26	\$68.66	\$75.92	26	\$78.96	26	\$82.51
27	\$70.37	\$75.92	27	\$78.96	27	\$82.51
28	\$71.61	\$78.43	28	\$81.57	28	\$85.24
29	\$71.61	\$79.21	29	\$82.38	29	\$86.09
30	\$72.91	\$80.00	30	\$83.20	30	\$86.94
31	\$72.91	\$80.00	31	\$83.20	31	\$86.94
32	\$74.34	\$80.80	32	\$84.03	32	\$87.81
33	\$74.34	\$80.80	33	\$84.03	33	\$87.81
34	\$76.19	\$81.61	34	\$84.87	34	\$88.69
35	\$77.75	\$82.43	35	\$85.73	35	\$89.59

Charge RN	2nd Pay Period after Ratification		10/1/2024		10/1/2025
Base	\$46.91	Base	\$48.67	Base	\$50.73
1	\$48.68	1	\$50.51	1	\$52.65
2	\$50.57	2	\$52.47	2	\$54.70
3	\$52.42	3	\$54.40	3	\$56.71
4	\$53.90	4	\$55.94	4	\$58.32
5	\$55.79	5	\$57.90	5	\$60.37
6	\$57.54	6	\$59.72	6	\$62.27
7	\$59.39	7	\$61.65	7	\$64.29
8	\$61.28	8	\$63.61	8	\$66.34
9	\$63.15	9	\$65.56	9	\$68.38
10	\$64.83	10	\$67.30	10	\$70.19
11	\$65.78	11	\$68.29	11	\$71.23
12	\$66.66	12	\$69.21	12	\$72.19
13	\$67.34	13	\$69.91	13	\$72.92
14	\$68.52	14	\$71.14	14	\$74.21
15	\$69.81	15	\$72.48	15	\$75.61
16	\$70.83	16	\$73.54	16	\$76.71
17	\$71.80	17	\$74.55	17	\$77.77
18	\$72.80	18	\$75.59	18	\$78.86
19	\$73.82	19	\$76.65	19	\$79.96
20	\$74.60	20	\$77.46	20	\$80.81
21	\$75.35	21	\$78.24	21	\$81.63
22	\$76.48	22	\$79.42	22	\$82.86
23	\$76.48	23	\$79.42	23	\$82.86
24	\$77.66	24	\$80.65	24	\$84.14
25	\$78.92	25	\$81.96	25	\$85.51
26	\$78.92	26	\$81.96	26	\$85.51
27	\$78.92	27	\$81.96	27	\$85.51
28	\$81.43	28	\$84.57	28	\$88.24
29	\$82.21	29	\$85.38	29	\$89.09
30	\$83.00	30	\$86.20	30	\$89.94
31	\$83.00	31	\$86.20	31	\$89.94
32	\$83.80	32	\$87.03	32	\$90.81
33	\$83.80	33	\$87.03	33	\$90.81
34	\$84.61	34	\$87.87	34	\$91.69
35	\$85.43	35	\$88.73	35	\$92.59

- Appendix B Year for year experience
 - All nurses will receive one step for one year of continuous experience. Nurses with 12 months or less shall be placed on the corresponding step the second full pay period following February 1st, 2024, according to their resume on file. Within 60 days from ratification, current nurses shall have the opportunity to resubmit their resumes to HR to adjust their wage steps. Effective the second full pay period following March 1, 2024, nurses will be placed on the corresponding step based on their resume on file.
- Letters of Understanding
 - **Staffing Premium-\$500 staffing bonus, prorated by FTE, per month when a shift on a unit is staffed at 85% or less in the month (the staffing plan will be used to calculate the staffing percentage). Nurses must work 85% of their regular shifts to receive the bonus. Per diems will be prorated at .3**
 - **2.5 year agreement- Upon request from either the Hospital or the Union contract renegotiation can start 90 days prior to March 31, 2026, allowing for negotiations to be closer to other hospitals' contract expirations like Swedish Edmonds and Providence St. Peter and Centralia.**
 - Standby Bonus: Nurses scheduled for more than 500 hours of standby during each half of the calendar year (Jan through June, and July through Dec) in a unit that requires call, nurses will receive a bonus of \$800. For more than 800 hours, the bonus shall be \$1100. For more than 1100 hours, the bonus shall be \$1250. For more than 1300 hours, the bonus shall be \$2000.
 - Wage step increases- Wage step increases will now be calculated based on a 12-month period rather than 1872 hours. All current nurses' wage step increases will be recalculated. Every year, nurses will advance one additional step on their work anniversary after the agreement is ratified. By 2026, nurses will progress through the remaining steps to reach the correct level. For example, if a nurse, working at a .75 FTE, should be on wage step 14 based on a 12-month calculation but is currently on wage step 10 due to the 1872-hour calculation, their wage steps will be adjusted. They will receive two step wage increases in 2024 and 2025 and then be moved to their correct step in 2026.
 - Modified Baylor Shift- Positions will be posted 30 days after ratification for positions which will work a .6 FTE only on the weekends. All weekend shifts will be paid at 1.5 regular rate of pay and additional shifts will be paid at straight time, unless overtime rules apply. Benefits will be paid at .6 FTE.
 - Longevity Night shift differential- Night shift nurses, who have 24 months or more working on night shift, will receive an annual bonus of \$1,500 (prorated by FTE), with the first bonus being paid on January 1, 2025.

Non-economic and Staffing Articles

- Article 2 Union Matters
 - Union membership- Nurses who are members at the time of execution of the CBA must remain members for the duration of the agreement. Newly hired nurses will now have 21 days to decide whether to join the union or 14 days to opt out of union membership. Previously, nurses could be terminated within 30 days if they didn't decide on union membership after notification from the Union to the Hospital. This change gives nurses more time to make a decision and avoids termination for non-compliance. If newly hired nurses neither opt in nor opt out, they will be removed from the schedule within 30 days of the Union notifying PRMCE. If a nurse doesn't decide within 90 days after PRMCE receives notice, they will be discharged. Nurses who object to joining a labor organization due to religious reasons can opt out and donate their union membership fee to a non-religious organization. Personal emails and phone numbers will be provided to the Union.
- Article 4 Union Representation
 - 4.1 Access to conference rooms on units: The Union representative shall have access to the conference rooms on the floor for greater accessibility to nurses.
- Article 5 Definitions
 - **5.7 Charge nurses and relief charge nurses shall not be expected to take a patient assignment. A charge nurse will only take a patient care assignment if it is mutually agreed upon by the charge nurse and management.**
- Article 6 Employment Practices
 - 6.1 Non-Discrimination language which reflects diversity, equity, and inclusion
 - 6.2 Discipline: Disciplines after 18 months (about 1 and a half years) will not be used for progressive discipline, as long as it was not related to patient care or serious behavior/conduct violations. Upon nurse request, written warnings will be removed after 18 months and not related to same issues as listed above.
 - 6.3 Coaching will be removed after 9 months, upon request.
 - 6.12 Staffing: The Hospital Staffing Committee members will be comprised of 50% or more nurses per SB 5236 staffing law and decisions must reach consensus. Subcommittees shall review CSIs for their units and make recommendations to the Hospital Staffing Committee.
 - Binding Mediation- Chronic staffing issues existing within the same category for at least 90 calendar days can be moved to binding mediation one time per year. A mediator will hear solutions from the Hospital and the Union and then make a recommendation on a solution. The solution will be sent to the Hospital Staffing Committee on whether to adopt the solution.
 - The Hospital will review exit interviews, CSIs with adverse events, and retention interviews.
- Article 7 Seniority
 - 7.7 Updated Skill departments
 - 7.9 Nurses can email the Hospital if they wish to accept a recall position

- Article 11 Health and Safety
 - Employer will provide vaccinations and screenings recommended by national and local health guidance at no cost to nurses
- Article 15 Committees
 - Conference Committee expanded to 1 nurse from each division and Union Rep
 - Nurse Staffing Steering Committee will sunset 12/31/23 and be replaced by Hospital Staffing Committee and appointed subcommittees
 - Updated and strengthened Hospital Staffing Committee language to be in accordance with State Law
- Article 17 Grievance and Arbitration
 - Clarified contract language which identifies the Union as part of the grievance process
- Article 19 Duration
 - **Contract will expire on October 30, 2026, unless opened 90 days prior to March 31, 2026, per the early contract reopener**
- Addendum: Nurses may agree to work individual 4 (four) and 6 (six) hour shifts.
- MOU Collaborative Approach to Full Staffing- Commitment from Providence to staff the right staff, in the right place, at the right time. And timeline/process for working together through the Hospital Staffing Committee. (See redline for full MOU)
 - Goals set:
 - 4 months post ratification (25% initial calculation open jobs filled)
 - 6 months post ratification (50% initial calculation open jobs filled)
 - 9 months post ratification (80% initial calculation open jobs filled)
 - 1 year from ratification RN turnover goal is set to 15%
 - 1 year from ratification First Year RN Turnover:
 - Over 25% flagged as top priority department, between 20-24% “at risk dept”, between 16-19% “watch list dept”, at 10% or below “share best practices”. Whenever a department is at 20%+ FYTO, a process is triggered to identify root causes for turnover and immediate solutions for retention.
 - Innovative staffing models, like the co-caring model, require approval by consensus from the Hospital Staffing Committee (**no “sunset” language**)
 - The Hospital will pay nurse techs for clinical hours.
 - Adoption of the Healthy Work Environment (HWE) standard: skilled communication, true collaboration, effective decision making, appropriate staffing, meaningful recognition, authentic leadership, and workplace violence.
 - Hospital Staffing Committee and Subcommittees will meet to review the open positions in units, review retention interview data and exit interview data, review, adjust, and employ tactics for retention and recruitment.
 - Core leaders and nurse volunteers will visit job fairs and schools to recruit nurses.