

*Rec'd from  
MNA 13 Apr 13  
3:32 pm.*

## MNA Comprehensive Package Proposal

April 12, 2013

1. Staffing –
  - Staffing – MNA/U #44; MNA/M #21 – as modified see attached
  - Resource/Charge RN – MNA/U #4; MNA/M #10- see attached
2. RN Job/Work Protections –
  - Recognition – MNA/U #37; MNA/M #26
  - Subcontracting – MNA/U #3; MNA/M #3
3. Campus Parity –
  - Overtime cancellation – MNA/U #15
  - Vacation coverage – MNA/U #23
  - Cancellation of Travelers – MNA/U #24
  - LOA – MNA/M #19
  - On-call callback pay – MNA/M #30
4. Benefits –
  - Retiree drug coverage – MNA/U #5; MNA/M #6
  - Dental Choice – MNA/U #43; MNA/M #19
5. Wages – MNA/U #38; MNA/M #27 and MNA/M #35

### Modify as follows:

#### Effective April 6, 2012 –

- 1% across the board wage increase and increase all scales by 1%, including per diems

#### Effective April 6, 2013 –

- 1.5% across the board wage increase including per diem RNs and increase all scales by 2%

#### Effective April 6, 2014 –

- 2% across the board wage increase including per diem RNs and increase all scales by 2%
- Add 2% to step 17

Contract expiration – January 31, 2015

*see in  
MNA - 0 1  
12 Apr 13  
3:25 pm*

4/12/13

**MNA Staffing Package Proposal:**

1. Resource –see attached
2. No RN will be assigned 6 patients
3. Emergency Department
  - Memorial - TBD
  - University – add 2 RNs 7-3 and 3-11 7 days per week and 1 RN 11-7 7days per week.
  - Add: "Critical care patients will receive the same level of care regardless of their location in the medical center."
4. No erosion to current staffing matrix: maintain the current STAT RN assignment and add 1 critical care STAT RN 24/7 (University) for a total of 2 critical care STAT RNs and 1 Acute Care STAT RN 24/7 (University) and add :  
"STAT RNS will not be used for routine staffing."
5. Maternity –
  - in accordance with AWHONN Standards - no more than 3 mother/baby couplets per RN
6. Any units not referenced specifically and all new Units – staffing will be determined at joint Labor Management provided that will not result in a diminished standard of care

**4/12/13 MNA Resource Proposal:**

**Med-Surg/Tele –**

*U=3E, 3W, 4E, 4W, 4Admissions, 6E, 6W, 7E, 8W*

*M=W1, W3, S3, S5, S6*

*7-3 and 3-11 – no more than 1 patient; starts shift with 0 patients*

*11-7 – no more than 3 patients*

**\*Stepdown:**

*U=3Lakeside*

*M=S2*

*24/7 – no more than 1 patient; start with 0 patients*

**ICU's:**

*U=Lakeside2ICU, Lakeside3ICU, 3ICU, 5ICU, 6ICU, 7ICU*

*M=CCU, SICU, NICU*

*24/7 – no assignment*

**\*Emergency Dept including EMH:**

*U=North, South, Pedi, EMH*

*M=Main ER*

*24/7 – no assignment*

**PEDI - no more than 1 patient starts with 0 patients**

**\*OR:**

*U=Main OR*

*M=Main OR*

*24/7 – no assignment*

*Hahnemann= OR/PACU/SACU*

*3 Resource RNs – 1 no assignment, 2 with limited or no assignment*

**\*PACU:**

*University and Memorial*

*24/7 – no assignment*

**Psychiatry:**

*University -*

*PTC and 8East*

7-3 and 3-11 - no more than 2 patients; starts with 0 patients

11-7 - no more than 3 patients

**\*Maternity:**

*Memorial -*

*Mother/Baby = S4, E4 post-partums, 2 Nurseries,*

*Labor/Delivery = East 4 (Labor and Ante-partum and Triage)*

24/7 - no assignment

**Pediatrics:**

*University - 5E*

24/7 - No more than 1 patient; start with 0 patients

**\*SACU (University)/Surgical Admissions (Memorial):**

No assignment

**Specialty Areas:**

Dialysis - by acuity\* - *University and Memorial*

IV - full assignment - *University and Memorial*

Cath Lab - no assignment\* - *University*

2 Shortstay - no assignment - *University*

Endo - no assignment\* - *University and Memorial*

IR - no assignment\* - *University and Memorial*

EP Lab - no assignment - *University*

BMTU - by acuity\* - *University*

Hem Onc/Infusion Center/ACC 6<sup>th</sup> Floor - no assignment - *University*

Clinics - maintain current status quo

\*status quo