

Negotiations

UPDATE

Hospitals Present Common Wage Scale for STC Associates and Increases RN & STC Scales

Last Wednesday, Mercy, Kenmore Mercy, and St. Joseph Campus presented a common wage scale proposal for Service, Technical & Clerical associates, similar to the common wage scale proposal presented for RNs the week prior. With these proposals, the hospitals withdrew their initial 1% wage increase for the first year of the contracts. The hospitals followed that up on Friday by proposing increases to both the RN and STC common wage scales. The hospitals also filed an Unfair Labor Practice (ULP) charge against the union for bad faith and surface bargaining because the union has not presented any substantive counterproposals on wages or benefits. (You can learn more about the ULP by clicking [HERE](#).) The union must engage and begin bargaining in good faith if we are to settle negotiations before the contracts' expiration on September 30.

To develop the common wage scales, we created competitive pay grades for each RN/STC position along a 10-step scale ranging from 1 to 20 years of service. **Based on our increased wage scale proposals, following ratification, RNs would see an average increase of 2.4%. STC associates would see an average increase of 4.8%.** If an associate's current rate is above the new step scale, they would be "red circled" and receive a lump sum payment, rather than having the increase added to their base pay. **No one's pay rate would be reduced if they are above the step scale.**

Because Catholic Health was formed by independent hospitals with different pay scales, moving everyone to a common wage scale is a complicated process. However, we think it's a smart move that will put all our CWA-represented associates on an even playing field and help with our recruitment efforts.

Union Rejects Retention & Recruitment Initiative

On August 24, we proposed a Retention & Recruitment initiative designed to help fill RN, NA, and ITA vacancies and retain night shift staff. Our proposal included offering competitive payment incentives to FT and PT associates after orientation and at 12, 18, 24, and 36 months of service in the Med/Surg and Critical Care Float Pools, including new hires and current associates who sign a Recruitment & Retention Agreement. This proposal would go a long way in filling vacancies in the float pools, which help maintain staffing levels so associates don't have to be pulled from their home units to fill in for call-offs, no-shows and increased census on other units. The union rejected this proposal without providing a counterproposal or alternative to resolve this staffing issue. Mean-while, the union's staffing ratio proposal contributes nothing to fill vacant positions in the midst of a nationwide labor shortage. However, there is a growing trend in healthcare to offer sign-on bonuses. Offering these types of financial incentives now, will help us fill job vacancies and retain staff in hard-to-fill positions.

Because it's important to have the facts regarding bargaining, we will share regular *Negotiations Updates* with you. You may visit www.chsbuffalo.org/negotiations at any time for the latest news and information related to bargaining and to review copies of these updates and other FAQs.

Red Circling Explained

Creating a common wage scale would provide associates in the same position and the same years of service with the same rate of pay. When bringing three hospitals together on a common wage scale, it's likely some associates are paid more than the new step scale while others are paid less. To help lower-paid associates catch up without penalizing higher paid associates, the higher paid associates receive a lump sum payment until everyone in the same position, with the same years of service, has the same base rate of pay for their step. This common pay practice is known as red circling.