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Patients Before Profits: 
The corporate takeover of healthcare

When I graduated from nursing school, it was illegal to advertise drugs or health services in the media, OB was a service, not a “product line,” and hospitals were run by people with medical or health administrative credentials. Healthcare was considered a community need—not a way for corporations to make money. There was even a system in place in Wisconsin that required hospitals to prove they needed to spend money on fancy, new equipment or on a new facility; and, it had to be based on what the community needed—not just on duplication. That was long ago and far away.

Today, we have a health system run by larger and larger corporations, some for-profit, and others so called ‘not-for-profit’ that act the same. Now, the Chief Financial Officer has more say than even the doctors about types of services to be offered. Our system is the most expensive in the entire world, yet our health outcomes lag behind. We have moved beyond the billions, and now spend trillions. Yet, we have people in our community without care, or going bankrupt over medical costs even with insurance; and, those at the frontline of care still are faced with days of forced overtime one week, and sent home without pay the next, all to save money—or, more accurately, to make money. Even at the richest hospitals, workloads run high; and, even with data proving lives are saved when nurses have a safe workload, change still does not happen.

Hospital administrators are now “CEO’s,” many of whom are millionaires. Just look at a local example, where the small critical access hospital in Langlade County has a CEO that received double digit raises, bringing his total compensation two years ago to just under $400,000; and, the system CEO (Langlade Memorial Hospital is now part of the Aspirus system out of Wausau) made just under one million dollars two years ago. At the same time, the employees have received only a 1% annual raise—even with a hospital making multi-millions in “profits” each year.

At a local level, at least in Langlade, we are fighting back for fair wages; but, what we see in Langlade is repeated in cities and states across the country.

Time to Fight Back: 
National problem requires a national campaign

In Wisconsin, we have watched as two hospitals, then four, then 10, and so on, came together to create Aurora Health Care, which is now the largest employer in the state. Burlington Memorial, a community hospital, felt firsthand the experience of corporatization. St. Francis members first became Covenant Healthcare, and are now Wheaton Franciscan Healthcare, and Langlade Hospital is now Aspirus.

In Connecticut, members of our union were locked out of their own hospital during their labor dispute, while their hospital stashes money in the Cayman Islands. In New Jersey, for-profit companies are swooping in to takeover local systems and are wreaking havoc on caregivers and receivers—cashing in on care and making multi-millionaires out of those in control.

Our national union, AFT Nurses and Health Professionals, has decided to take on the big boys and has begun a national campaign to reclaim healthcare based on community need, and not corporate greed. A campaign that will demand a health system that puts Patients Before Profits. Our union, WFNHP, will be part of the campaign. We will fight at a local, state and national level to expose the flaws in our system, to expose practices that are bad for our patients and our communities. We will not sit silent as individuals and corporations make millions and trillions of profits off our families and communities, when they are sick and vulnerable.

This is not a campaign that will be quick or easy. The battle to reclaim our health system from the profiteers will not be won overnight, but we have a moral and ethical responsibility to join with other activists in this campaign, so we will. To do nothing is to accept the status quo, and that we won’t do.

Network
For the last few years, the labor movement and working families in Wisconsin have been struggling to find the way to fight back against the never-ending attacks on workers’ rights, workplace protections, and long-standing laws and organizations that were the foundation of a more just and equal society. Our union has been part of those battles—the fight to save bargaining rights, voting rights, equal pay, family leave, and to stop “right to work” bills and extreme budget cuts to education, family care, senior care and other vital services.

So many years of battle could have left our union with a sense of defeat—but, that is not what has happened. While we are saddened by the loss of some of our public sector units, what is also clear is we have seen a new sense of activism in our state. The emergence of a new generation of activists committed to the values our union was founded upon: that there is a need for an organization that exists every day to fight for a more just healthcare system, and a more just workplace—not just for those providing health services, but for all workers. That organization is our union—the Wisconsin Federation of Nurses and Health Professionals.

Our leaders know it is time to leave the battles over Act 10 and “Right to Work” as part of our history, and turn our face and our work to the future. It is time to recognize we are in a new era, and that we must build for a new future. Part of this journey into the future is reshaping our state-wide organization into a more unified whole, with stronger ties to each bargaining unit. It is also time for our leaders and member activists to come together to once again define the values that bind us—the mission and vision that guides us, and the plans that will move our vision into the future.

Claiming Our Future on September 25th & 26th—All union officers and members are invited to join in the process of guiding our union into the future with strength and purpose. This is not a meeting only for officers—it is a meeting for every member who believes that together we can fight for just workplaces and just societies, and shape our own destiny. As one of the few unions in our state, we have a great opportunity; but, also a responsibility, to do our part in this battle for a future for ourselves, our children, our grandchildren, our family and our community. Come and join your fellow champions as we shape our future together.

The Fight for Racial Justice: It’s a Union Responsibility

During the last year we have seen, sometimes up close and personal, the effects of decades of systems and practices that have created clear racial justice issues. Following the shootings and riots in Ferguson, our national leaders decided, as a union, we have a responsibility to engage in a full and frank discussion of racial justice. Therefore, the Task Force for Racial Justice was formed. As a union representing teachers and support staff working in the public school system, it was clear AFT had a role to play, especially because of the fact that African American boys and girls are disciplined and expelled in numbers far beyond their participation in the school system.

The city that is the headquarters of our union has some of the worst examples of racial injustice in the United States. Milwaukee is the home of the highest rates of black infant mortality, and top for percentage of black males incarcerated (1 in 3 adult males incarcerated), ahead of all other cities in the U.S. If we look at housing segregation, unemployment, and economic disparities, the findings are just as disturbing.

Two WFNHP leaders said they had a passion for this issue and wanted to be involved, and they were appointed by the AFT national Secretary/Treasurer to this critical national task force, along with President Owley. The members representing WFNHP are Ethel Davenport, the President of the VA unit, and Connie Smith, the Chief Steward of the St. Francis Hospital Tech/Service unit.

The first meeting of the task force was held in Baltimore, Maryland, the day after the shooting at the Mother Emmanuel AME Church in South Carolina. The timing brought new urgency and pain to the work that was done. It was a powerful, intense, two full days, with discussions from breakfast through dinner, that centered on issues in the education, economic and criminal justice systems. The task force will meet again this summer, with a first set of recommendations expected this October.
No Grievance Left Behind  
by Jamie Lucas, Lead Organizer

It is finally starting to feel like Summer outside, but it’s very much like Seinfeld’s Festivus at the Milwaukee VA with the multitude of grievances aired by Local 5032.

Throughout the two-year process of negotiating the first new contract in twenty-plus years for the registered nurses at the hospital, management has repeatedly claimed they haven’t seen enough grievances to substantiate some of the proposals the nurses and their bargaining team put on the table. In response, and in the spirit of becoming a more visible force in the hospital that engages every nurse in making the VA a better and more fair place to work, Local 5032’s leaders and stewards have been filing grievance after grievance on everything from the process by which nurses sign up for voluntary overtime, to the granting and denial of paid leave requests.

This isn’t to say that these issues are manufactured for the sake of filing grievances alone; part of fighting to improve the day-to-day at the VA is ensuring that the contract and all rules are enforced fairly.

A few months back, the leaders of the local got together to write a mission statement for their Union. This mission states:

“We are a Union of professional nurses committed to integrity, democracy, and communication. We are united in providing quality healthcare, advocacy, and representation for our nurses, our Veterans both here and abroad, their families, and our communities. We champion these principles through leadership, collective bargaining, organizing, and engaging our communities, wherever we are.”

With a clear mission, Local 5032 measures what they do, against what they believe they should do. It guides them, and keeps the principles they value at the heart of their work. Therein lies the connection to the recent onslaught of grievances—the grievance procedure allows for a resolution of disputes which can reinforce

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When Workers Fight Together—They WIN!

by Wendy Stott, Organizer

Workers on the 4th floor at St. Francis Hospital in Milwaukee recently came together to address issues affecting them on the job. Some of them were common issues which affected many St. Francis employees, and some were unique to the department. A few of their concerns included:

♥ Holes being left in the schedule, leading to workers being required to stop patient care in order to call their co-workers for coverage, work with unsafe short staffing conditions, and/or require mandatory overtime. These were all violations of the mandatory overtime and scheduling guidelines in their Union contract.

♥ Not getting their two 15-minute paid breaks or their scheduled, uninterrupted, 30-minute lunches. These were violations of the sections on meal periods and rest periods in their Union contract.

♥ Managers not participating in any of the mandation rotation or picking up any extra shifts in order to relieve mandation. Again, violations of the mandatory overtime provisions of their Union contract.

♥ And, a general culture of feeling unsupported by management, affecting the workers' abilities to effectively perform their duties and risking patient care.

It all started when a group of members on the 4th floor came together and said, "Enough is enough!" and united in order to fight for better conditions. They unified, formed a plan of action, and implemented it swiftly. They composed a petition listing the issues, as well as demands for changes which would create better, and more productive working conditions. They then talked to their co-workers, explained the need and ability to make change, and brought together the staff to have one voice to fight for just treatment. Workers uniting is the power of being Union.

Due to the workers coming together and taking action, the issues are now being addressed by both departmental management and HR, including departmental meetings to hear the concerns of all staff. Management is now working with staff to find solutions to the problems, and has offered bonuses in order to facilitate staff retention while resolutions are developed.

These are victories for the workers, and this is the power of being Union

It gives all members the ability to come together, fight for what they deserve, and work with management to find solutions in order to make their workplace the best it can be.

If you are having issues in your workplace which you think might violate your Union contract, cause low morale, high turnover, or safety concerns, you have the power to stand up and fight back! Don’t suffer in silence, when you have the control to make change. Contact your Union Rep or the Union Office today.

Congratulations

Connie Smith

Local 5001 ‘Unionist of the Year’

Connie Smith, a Surgical Tech at St. Francis Hospital, was honored as Local 5001’s ‘Unionist of the Year’ at the Annual Dinner meeting on June 12th. The inscription on her award read:

In recognition of your passion & commitment as a champion of workers’ rights.
Your tireless efforts & dedication to legislative & political activism serve as an inspiration to us all.
Your desire for fairness & justice has improved the lives of your fellow Union members & working families in the state of Wisconsin.
Corporate changes in healthcare are now never-ending. The Dynacare bargaining unit has seen more than its share of changes, and this year brought one more change. Dynacare was a company that began in 1991 when Froedtert Hospital and Milwaukee County decided to create a “joint venture” corporation to run the labs that had previously been under the full control of the County. That was the first change. At that time, all lab employees transitioned to the new company with identical wages, hours, and working conditions that had been in place, when working solely for the County. Additionally, they became private sector employees, not public sector employees. As it turns out, that was a blessing because, if they had remained County employees, they would no longer be able to bargain due to the anti-union Act 10 legislation.

Over the years, the lab corporation kept changing. The first change was when the County pulled out and a Canadian company became Froedtert’s partner. That was where the name Dynacare came from. Years later, the Canadian company went out of business and turned its company over to Lab Corp of America, who became Froedtert’s new partner, but kept the Canadian name, Dynacare. This brings us to 2015. Now, Froedtert has decided they no longer want a partner, so has become the sole company owning and operating the lab. With this new change came a new relationship with Froedtert and a new name. As of July 1, 2015, Dynacare has transitioned to Wisconsin Diagnostic Laboratories, LLC; and, for the first time, Froedtert’s Chief Human Resources Officer met directly with the Union officers.

First extension
The lab unit had a three-year contract that expired 12/31/2014. As the teams began to prepare to bargain, Froedtert and lab management requested a six-month extension of the existing contract due to the fact that the details of the corporate change were not complete. Therefore, the members voted to accept the extension, with a good faith payment of $600 per employee, plus no change in insurance payment or plan design. It was also agreed that, when an across-the-board raise was negotiated, it would be retroactive to 1/1/2015; and, if the $600 was less than the negotiated raise, an additional amount would be paid to the workers and, if the $600 was more, the worker would keep the difference.

Second extension
As the new expiration of 6/30/2015 came nearer, again Froedtert and the lab management asked for more time and proposed another extension. This time, the Union bargaining team (Charles De La Pena-President, Louie Borda-Vice President, John Epple-Chief Steward, Christine Klinger-Secretary and Nicolette Tarantino) made it clear the extension would only be considered if across-the-board raises were part of the deal.

After a few meetings and some final meeting of the minds, a tentative agreement was reached for a second six-month extension through 12/31/2015. The agreement again continued the insurance at same rate and same plan design; but, also included a 3% across-the-board increase 7/1/2015, plus movement on longevity steps, plus a step at the top of the range also effective 7/1/2015, bringing the raises to approximately 4.8% for all members. In addition, there is a step of approximately 1.8% anticipated on 1/1/2016, which would mean about a 6.6% increase over a six-month period. The extension also included a clear severance package, in case anyone lost their job during the six-month period; but, there is no expectation of that happening.

Dues deduction
Even though it was a contract extension, the new law that makes union membership voluntary went into effect as of 7/1/2015. The contract extension will include language stating membership is voluntary and also, if a member enrolls in payroll deduction of dues, the deduction will continue, unless written notice is provided during specified window periods.

President Owley also assisted in negotiating the second extension.
Burlington Union Reaches Agreement on New, Two-year Contract

Burlington Hospital is part of the Aurora Health Care system and the RN and Tech employees are the only unionized in the entire Aurora system. What that means is, only at Burlington do workers have a voice in things like work schedules. This year, the hospital had a series of proposals to give management more “flexibility” in scheduling. Flexibility is generally a code word for less protection for employees and more power for management.

United effort of members stops hospital plan to change contract language to allow changes to posted schedule

The biggest fight developed over a proposal to give managers the right to make changes to the schedule after it was posted. The contract said no changes could be made unless the employee agreed. The first plan by management was to change the language so they had the total right to make changes. When the team rejected that plan, they came back with the ability to make changes with seven days’ notice. The Union bargaining team again rejected the proposal, making clear that the hospital had enough tools, including financial incentives, to meet staffing needs with volunteers; and, if someone could not volunteer, it was wrong to then mandate the change. Still, the hospital refused to drop their proposal until 101 members signed a letter of protest demanding the hospital drop the proposal and leave the contract protection in place. Because of the clear demonstration of member unity, the hospital finally decided to withdraw their proposal on the last day.

Other changes included:

- Ability for preceptors to be passed over in low census and floating on the day they are functioning as preceptor. It was also agreed every effort would be made to assign three, but no less than two, preceptors for the shift the new employee is orienting on. Also, Union and management representatives would work together to develop a formal training for those members wanting to serve as preceptors.

- Increase in educational fund to $325 per employee.

- Maintain the “free weekend” arrangement for all employees with five or more years of seniority. The “free weekend” clause allows for employees to have an extra one or two weekends off per year, without finding a replacement or having to make up the weekend.

- Union agreed to scheduling employees up to their full FTE during a week with a holiday, but no more than one time a year; and, if the employee volunteers, that would count for the one holiday a year.

- Increase in weekend differentials for RN’s from $1.75 to $2.00, and Techs from $1.25 to $1.50.

- Increase in third shift differentials for RN’s from $2.75 to $3.00, and Techs from $2.25 to $2.50.

- Merit increase would be 0%-4% with no less than 2% for competent, for 2015 raises; and, for those at the top, any amount over will be paid in a lump sum, at 50% for “competent” and 100% for those rated “exceptional.” (53% of the unit rated exceptional)

- Raises for 2016 will be negotiated next Spring.

- New language implementing the “Right to Work” law that affirms membership in the Union is voluntary and continues to recognize voluntary payroll deduction of dues, unless an employee notifies the employer in writing during an annual window period of their desire to end payroll deduction.

End of patient satisfaction scores tied to raises and evaluations

One final change that both sides overwhelmingly supported, was modification to the current merit evaluation system so that Patient Satisfaction, or HACAPS, will no longer count when evaluating individual performance. The Union had made this proposal as part of the initial set of proposals, and was pleased to be told that, after a year or more of study and consultation with compensation experts, it was convinced that while Patient Satisfaction was extremely important, it should not be part of the merit pay system. Of course, they could have saved years of study and use of consultants, and just listened to the Union and the workers who made it clear that they did not believe it was a fair measure.

Members of the WFNHP Burlington unit ratified a new two-year contract on June 10th. The new contract is effective 6/1/2015 through 5/30/2017, with a wage reopener in the Spring of 2016.
Grievance... from page 4

integrity within the facility. In short, the grievance procedure is a way to uphold their core principles.

The mere filing of a grievance doesn’t guarantee a win, and that fact isn’t lost on the VA leaders. As one officer put it, “We may not win every grievance on paper, but we are standing up and pushing back for fair and equitable treatment.”

What the filing of a grievance accomplishes is very important. It informs management that there is accountability for its actions. It can be a tool to engage new members and entire work units in the fight for justice. It can demonstrate with clarity the power of being Union.

For all its positives, it can still be scary to file a grievance. Asserting your rights makes change when your rights aren’t being honored. Making change can be intimidating. That’s why anyone who files a grievance is legally protected from retaliation by management. If you are a party to a grievance and feel that you’ve been retaliated against, contact a steward, officer, or the WFNHP Union office as soon as possible.

Your rights are protected. Let’s keep working together to keep it that way.