MWMC Counterproposal 5/10/2021, 5:45 pm
“Comprehensive SUPPOSAL Package K”

- 9.1 – Single Year Steps between 6 – 7, 7 – 8 (Association withdraws 8 – 9 single year gap)
- 9.2 – Employer’s proposal to consolidate 8s/10s into 12s wage scale, over the course of the three-year contract (1.4% increase at ratification, 1.4% in first full pay period after June 1, 2022, and arrive at parity- complete consolidation in first full pay period after June 1, 2023)
- 9.16 – Standby base at $5.25 and $7.875 on holidays for first tier (Association withdraws other parts of standby proposal)
- 9.23 – $2/hour Shift Differential for Float Pool Nurses
- 22 – Contract duration: April 1, 2021 to June 1, 2024
- Appendix A – 3.25% across the board wage increases (ATB) in first full pay period after ratification, 3.0% in first full pay period after June 1, 2022, and 3.0%, in first full payroll period after June 1, 2023.

ONA accepts Employer 10.4.6

“If an employee misses time from work due to an unscheduled absence the nurse will be required to use earned leave or sick leave as applicable providing the nurse has earned leave or sick leave available.”

Association withdraws:

- 8.5 – Counter supposal from today
- 8.15 – Part-time positions in medium and large depts
- 8.16 – Break relief nurses in four departments
- 9.1 – Step 14, 2% gap, 24 months (Association withdraws Step 15 proposal)
- 9.8.2 – Increase to “plain” night shift differential (longevity differential untouched)
- 9.13 – Increase weekend differential
- 9.18 – Remove disincentive to sign up early to fill holes
- 9.22 (New) - Community crisis differential
- 10.4.2 – Originally was remove FMLA from number off at one time, we countered additional nurses off in medium and large depts. Keep language changes in both sides’ proposals on paragraph 1 (SSU follow side letter) and paragraph 2 (PACU may have two nurses off at one time).
- 10.8 – No discipline for illness with doctor’s note
- 12.3 – Low Census Cap (initial proposal from January)
MWMC accepts:
8.5 **BACK TO BOOK**, Employer withdraws their proposal that the Nurse who calls in sick cannot earn premium pay that work week.

12.2.5 Wage Replacement for Low Census Cap (new counter-supposal)

“When a nurse’s earned leave bank is below forty (40) hours at the end of the previous pay period and the nurse is unable to work seventy-five percent (75%) of their FTE in a pay period due to low census involuntary cancellation, the nurse shall be paid seventy percent (70%) of their regular wages for hours involuntarily cancelled beyond twenty-five percent (25%) of their FTE. Any OIP, OSIP, SIP hours in the pay period do not count towards wage replacement qualification (see 12.2.2 #3 for definitions). The low census percentage calculation is independent from wage replacement qualification (see 12.2.4).”

Hospital Example:

Nurse is scheduled 80 hours in a PP
Nurse Cancelled 30 hours in a PP
Hospital pays 70% of 10 hours cancelled
ONA agrees.

ONA Example:

Nurse is schedule 80 hours in a PP
Nurse Cancelled 30 hours in a PP
Ten of the cancelled hours are OIP, OSIP, or SIP
Hospital pays no wage replacement