

The Bargaining Survey indicated that Wages and Differentials, Staffing Levels, CTO Accrual, Health Insurance and Retirement were the top priorities.

In the face of significant financial headwinds and Network pressures, we were able to negotiate significant improvements and protections on all of them. See the summary of our gains below. This summary and the full TA will be available for review on pfnhp.org by Wednesday 10/21.

The Bargaining Team recommends a Yes vote on the Tentative Agreement.

Reach out if you have any questions at : pfnhp@aftvermont.org

Issue	Before our New Contract/ What PMC proposed	Because of our Union
Retirement	All members eligible to receive between 3% and 6% non-elective PMC contribution based on years of service	<u>By January 1, 2029</u> All 0.5 to 1.0 FTE members eligible to receive between 3% and 10% non-elective PMC contribution based on age and years of service All 0.5 to 1.0 FTE members eligible to receive 2% matching PMC contribution if member contributes 3% (lower contribution levels will prorate the 2%) depending on age and years of service (see chart below) FY 27 and 28 will have positive change to retirement but actual percentages not set
Wages	PMC initially proposed <u>FY 27</u> 2.5% (0.5% COLA, 2% Step) <u>FY 28</u> 2.5% (0.5% COLA, 2% Step) <u>FY 29</u> 2.5% (0.5% COLA, 2% Step)	Effective first full pay period 30 days after ratification Bonus \$1000 for FT, Prorated for under 1.0 FTE, \$300 for PD (approximately 1% bonus for most, post tax) <u>FY 27</u> Effective first full pay period January 2027 3.25% (1.25% COLA, 2% Step) Elimination of Step 0 and addition of Step 23 with lump sum bonus of 2% to the 8 RNs currently on Step 0

		Going forward, possible 50% credit for LPN experience up to 3 steps <u>FY 28</u> Effective first full pay period FY 28 (10/2027) 3.25% (1.25%, 2% Step) UVMHC Per Diem differentials (see below) <u>FY 29</u> Effective first full pay period FY 29 (10/2028) 3.5% (1.5%, 2% Step) Full implementation of UVMHC retirement (see below)
Differentials	Stagnant differentials PMC proposed eliminating 2x urgent pay	Differentials updated to match UVMHC differentials (\$6.50 Nights, \$3.50 weekends) Doubled Transport differential from \$45 to \$100 New Scheduling Incentive Pay - potential for 1.5x base for filling open shifts after schedule posts Within 24hr 2x base rate urgent pay maintained Practice Float Pay Commitment to revisit hospital charge pay as the role evolves FY 28 PD Differentials from UVMHC (see below)
NEW PD Differentials	PD differential stagnant	Per diem bargaining unit employees will receive the following hourly differentials in addition to the differentials set forth in Section 303, for all hours worked: Holiday hours \$5.00 per hour Night hours \$6.00 per hour Weekend hours \$6.00 per hour Evening hours \$4.50 per hour Day hours \$2.00 per hour The differentials shall be combined when applicable for any single hour worked
CAP	Cumbersome process tied to one time stipends	Commitment to create a two-tiered RN career ladder with a 5% base rate raise tied to each tier, to be open for application by August of 2027

Time Off	EIR difficult to access and utilize	Ending EIR accrual in exchange for increased rates of CTO Accrual rates starting 1.1.2027 Accrued EIR retained and available for use under current guidelines Employees get earlier access to more CTO hours under the new plan (plan copied from UVMMC see below)
Labor - Management Committee and Nursing Practice Council were inefficient	Issues were constantly passed back and forth with little to no progress	Labor-Management Committee and Nursing Practice Council are now merged without losing any of the power of either group The combined group is tasked with establishing specific, enforceable staffing guidelines
Work Schedules	Status Quo	Priority given to committed hours staff over Per Diems AND travelers
Weekends	Night shift workers often had to work Sunday night shifts that did not follow their weekend obligations cutting their off-weekends short	Night shift workers will not be required to work a Sunday shift that does not consecutively follow their weekend obligation
Vacation Scheduling	PMC had different timelines for responding to different time off requests Members must have the CTO needed at the time of a request	All time off requests will be responded to in writing within 14 calendar days Members must be projected to have the CTO needed at the time of a request
On Call	Employees had to find all call coverage	PMC will find call coverage in instances of approved Summer Vacations
Floating	Committed hours volunteers sought first Process for determining who gets floated was opaque and inconsistent Blanket 4 consecutive hour minimum to qualify for Float Pay	Travellers/Agency nurses required to be floated prior to voluntary reductions Running floating list to be maintained and publicly accessible New 1 hour minimum for 1:1 to qualify for float pay
Staffing Adjustments	Downstaffing cascade began with immediate reductions	Downstaffing cascade now includes voluntary cross training and opportunity for picking up an available open shift to make up for reduction

	Proposed to pay only base rate if reduced employee called in	Preserved reduced nurses' on-call call in rate at 1.5x base pay
Holidays	PMC proposed status quo (Christmas holiday ended at 11pm 12/25)	Christmas holiday extends from 3pm 12/24 to 7:15am 12/26
Leaves of Absence	Status Quo	Adding instances of miscarriage and loss of one who acted as a parent to bereavement Codifying the 4 week partially paid Parental Leave Policy
New Technologies	Status Quo	Protections for clinical judgement
Job Security (formerly Non-Nursing Functions)	Status Quo	Increased protections against Job Erosion and limits on Contracted Staff and Subcontracting
Orientation/Training/Education	Status Quo	Virtual/online education to be paid time Primary preceptor to attend all check ins

CTO Effective January 1, 2027

Years of Continuous Service (Completed)	CTO Accrual per Hour Worked	Approximate Annual CTO Accrual for 1.0 FTE (Hours)	Maximum Accrual
0-5 years	0.099726	208	312
5-10 years	0.118904	248	372
10+ years	0.138084	288	432

RETIREMENT

RETIREMENT PMC CURRENT

PMC Years of Service (YOS)	PMC total contribution NON-ELECTIVE
1 - 9 YOS	3%
10 - 19 YOS	4%
20 - 29 YOS	5%
30+ YOS	6%

PMC RETIREMENT EFFECTIVE BY January 1, 2029

PMC age +Years of service	PMC BASE contributions NON-ELECTIVE	PMC MATCHING contribution (unlocked if you contribute 3%. Prorates if you contribute less) ELECTIVE	PMC Potential Total Contribution
< 40 points	3%	2%	5%
40-59 points	5%	2%	7%
60-79 points	7%	2%	9%
80+ points	10%	2%	12%