

Update on SEIU 925 Physical Therapist Negotiations | April 8, 2016

BACKGROUND – The 11th UW-SEIU 925 bargaining session was on April 5. The parties have reached tentative agreements on many issues as part of an overall package, including float pay, certification premium, and parental leave. UW delivered a comprehensive counter-proposal at the parties' last session (March 15), which included movement on several topics.

WAGE INCREASES & COMPENSATION

- **Upon Ratification:** UW is proposing that PTs receive an automatic wage increase of roughly 1-3%, which would put PT wages at about **95% of the market median**.
- **July 1, 2016:** PTs would then receive an additional 3% increase on July 1, 2016, as part of the SEIU 925 contract.
- **Total Compensation:** UW healthcare and retirement benefits are very robust compared to many competitors:
 - UW's **cost to employees for health benefits is on the whole notably less expensive** than the market median, particularly for families.
 - UW's **plan value is aligned with the market median for medical/vision, and exceeds the market for dental.**
 - UW's retirement plan value as a percentage of pay is roughly **3 times greater than the market median.**

INCREASED EDUCATION FUNDS – UW increased its education funds proposal:

- Up to **\$300/year for UWMC PTs**, up to **\$500/year for clinic PTs**, and **3 days/year of paid educational leave**.
- Some clinic PTs received up to \$1,500 last year, while several at UWMC received little or no funds. **Education funds for PTs have varied greatly** over recent years, and have not been guaranteed. UW is proposing **more predictability and uniformity** for PTs.

INCREASED WEEKEND DIFFERENTIAL – UW increased its weekend differential proposal:

- \$1.75/hour for PTs on rotating weekend schedules, \$2.25/hour for fixed weekend schedules. PTs currently receive a weekend differential of \$1.50/hour.

PARENTAL LEAVE – The parties have reached a tentative agreement:

- UW will grandfather the 6 months of parental leave previously available to PTs (as classified non-union staff) for **18 months from the contract's effective date**, after which, PTs will be eligible for 4 months of parental leave per the SEIU925-UW contract (with the possibility of extending further when operationally feasible).

WEEKEND SCHEDULING

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- **UW has proposed codifying the existing ratio** of rotating to fixed weekend schedules, which would prevent management from increasing the ratio of fixed weekend schedules while ensuring adequate staffing for patient care needs.
- UW's proposal addresses the fundamental issue of working several weekend shifts in a single month. Through a **rotation structure cooperatively developed between the union and UW**, every PT would either work approximately 1 weekend in 4, or would have a fixed schedule that includes 1 weekend day.
- UW's proposal rewards seniority, such that many of **the most senior PTs would likely not need to ever work fixed weekend schedules**, while ensuring that new-hires do not get stuck on consecutive fixed weekend schedules.
- **SEIU 925's proposed ratios would leave necessary weekend shifts unfilled.** The union's proposal also **would require PTs hired after March 1 to work some form of fixed weekend schedule for an indefinite stretch**, which jeopardizes UW's ability to recruit new-hires (both new PTs and highly-experienced PTs).
- **UW has incorporated the union's input** into its proposals where possible, most recently proposing a pilot weekend scheduling program allowing some PTs to work longer shifts.
- **Management does not schedule PTs to work 7-10 days in a row.** Such a schedule could occur if a PT opts to build it themselves by trading shifts.

SEIU 925 delivered a counter-proposal on April 5 that included some revisions, but the parties have not yet reached agreement. The parties continue to discuss the best way to share coverage for weekend shifts between existing employees and new-hires. UW remains committed to reaching a resolution that honors the hard work and expertise of its physical therapists, while prioritizing patient care and remaining fiscally responsible.