

Union Survey

OPEIU Local

for Local 8 Members at COMPASS HOUSING ALLIANCE

September 2017

2018 Wage and Benefits Bargaining Survey

Our contract will be opened on October 1, 2017 to begin negotiations with Compass management to bargain our wages for 2018. This survey will give our Bargaining Team information needed to develop our wage proposals. We need to hear from you. Your identity will be kept confidential.

Please update your contact information for Union purposes only. We also want to know if you are interested in being on the bargaining team – if you would like to take part in the negotiations, please check the box below and fill out the employee info below. Bargaining Team members will be paid by the Union for time away from their jobs. A typical bargaining session lasts about four hours.

- I'd like to be on the bargaining team to help negotiate our wages for 2018.
(Please fill in the employee information below)
- Yes, I'll attend Union meetings, wear a button or do similar actions to show our unity to win fair wages.

Please include as much detail as possible and **return this survey by Friday, September 29, 2017** in the enclosed postage-paid envelope. A fillable PDF version is posted on our website www.opeiu8.org. You can save it, print and mail in the enclosed envelope, or email it to libby@opeiu8.org. Thanks for your participation!

Employee Info

Name _____ Job Title _____

Personal Phone _____ Personal E-Mail _____

Worksite _____ Work Schedule _____

OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION LOCAL 8
1-800-600-2433 or 206-441-8880 ★ Fax: 206-441-0207 ★ www.opeiu8.org

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Wages

1. What percentage across-the-board general wage increase would you like to see for January 1, 2018? _____%
and for January 1, 2019? _____%
2. Would you like to have a wage scale with a longevity increase at your anniversary date of hire each year in addition to an annual across-the-board wage increase? Yes No
If yes, what percentage increase should you receive at your anniversary step? _____%
3. Have your job duties and responsibilities changed since you were hired at CHA? Yes No
If yes, please explain and include your job title, hire year and the changes in responsibilities:

4. Has your rent increased in the past 12 months? Yes No
If so, how much more money per month are you now paying for rent? \$_____
5. What percentage of your monthly pay goes to pay rent? _____%
6. Do you work another job(s) to supplement your CHA income? Yes No
7. Do you depend on another household member(s) to help pay the bills? Yes No
8. Do you earn less than \$15.00 per hour? Yes No
If so, do you live on-site? Yes No
9. In the last year have you received your annual performance review? Yes No
If not, have you requested one from your supervisor? Yes No

Healthcare Benefits

1. Are you satisfied with your current medical/dental/vision benefits? Yes No
If not, what improvements would you like?

2. Did you use your healthcare benefits in 2017? Yes No
If not, why not?

3. At the end of the year do you fully use your Flexible Spending Account (FSA)? Yes No
4. Do you personally contribute to your Flexible Spending Account (FSA)? Yes No

Working Conditions

1. Do you experience excessive workloads? Often Sometimes Rarely Never
2. Do you work overtime on a regular basis? Often Sometimes Rarely Never
If you work overtime, do you get paid for your overtime at time and one half? Yes No
3. How often are you required to work beyond your scheduled shift:
because a co-worker does not report for their shift to relieve you? _____ times/month
because a co-worker is late for their shift to relieve you? _____ times/month
because no one is scheduled to relieve you? _____ times/month
4. Do you regularly get your 15-minute **paid** rest periods (paid breaks) for each 4 hours worked?
 Yes No If No, how many paid rest periods do you miss per month? _____
5. Do you regularly get at least a 30-minute unpaid meal period if you work more than 5 hours a day?
 Yes No If No, please explain:
6. Are you required to eat your meal period at your work station? Yes No
If yes, are you paid for your meal period? Yes No
7. Which of the following health and safety problems apply to your job?
- Repetitive strains (hand, wrist, arm shoulder or back)
- Exposure to toxic chemicals and/or materials. If checked, which ones?
- Exposure to bodily fluids
- Exposure to excessive noise
- Unsafe equipment
- Lack of protective equipment (safety goggles, ear protection, etc)
- Unsafe work environment (ie, workplace violence, threats by intruders, etc)
If checked, please describe your experiences.
- Lack of proper training If checked, what training(s) do you need?
- Other

Other Comments:

Make Your Voice Count!

To ensure that your voice is heard and the wages reflect the majority of the bargaining unit's interests, we need your participation.

Please mail this survey to the OPEIU Local 8 office in the postage-paid envelope or email the PDF version to Libby@opeiu8.org by Friday, September 29, 2017.

Thank you!

If you have any questions, please contact your Union Representative **Diane Arnold at 206-441-8880 ext. 115 or Diane@opeiu8.org.**