

## Union Contract Bargaining Team

Our Bargaining Team can't secure a strong Union Contract without all of us working together and staying united. Our Union is only as strong as **we** make it. Check all that apply:

- Yes, I'd like to nominate myself to be on the Bargaining Team** (see more details below)
- Yes, I'd like to be on the Contract Action Team (CAT) for my work area.**  
This means supporting my Bargaining Team by distributing flyers and other Union information, staying informed during contract negotiations to educate co-workers and occasionally bringing information back to the bargaining table.
- Yes, I support my Bargaining Team and will stay informed during negotiations by reading my Bargaining Updates, attending meetings, and checking our Union's website at [www.opeiu8.org](http://www.opeiu8.org), and I'd be willing to wear a button or do similar actions to help win a fair Contract.**

### Why be on the Union Bargaining Team?

Being a member of the Bargaining Team is a rewarding experience that will give you the chance to have a direct say in your future and the future of your co-workers. You'll have an inside view of the process that determines your pay, benefits, rights and working conditions. It is also an opportunity to learn new skills and to have the satisfaction of improving the lives of other people in your community, your co-workers.

### Being a Member of the Bargaining Team

- This means representing your co-workers at the bargaining table over several months or possibly longer until the Union Bargaining Team and Management have reached a tentative agreement that all YouthCare union members will need to vote on to ratify.
- Bargaining session dates and times are generally scheduled as a group in order to accommodate Bargaining Team member schedules. Some weekend or night meetings may be required. Contract negotiations are usually during the weekday and you will be paid for your time away from work. You will not be paid for time at the bargaining table beyond your work shift (except swing/night shift staff who may need to miss a previous/upcoming shift due to the bargaining schedule).
- While we understand that life happens, you will be expected to consistently attend the bargaining sessions because it is critical that voices from every program be heard at every session.
- We especially encourage people of color and members of the LGBTQ community to nominate yourself if you are interested. Many staff have expressed a desire to have a Bargaining Team which reflects the youth we serve. We also want to encourage Youth Counselors and/or swing and night shift staff to nominate yourself if interested. You will be released from shift with on-call coverage if needed to participate in the bargaining sessions.

### Bargaining Team Composition

In order to fully represent all the programs at YouthCare, we are hoping for one (1) representative on the Bargaining Team and one (1) Alternate from the following categories:

Under 18 shelters (Adolescent Shelter, Hope Center)	Employment & Education
Under 18 transitional (Pathways)	Jackson Street
Casa	Orion
Over 18 Transitional Housing (Catalyst, ISIS, Passages)	Prevention
Over 18 Independent Living Transitional Housing (Home of Hope, U Commons)	UDYC
Operations/Development/L&I	On-call pool

If there are multiple volunteers for any of these positions on the Bargaining Team, a vote of all union staff will decide the outcome of Bargaining Team members and Alternate Bargaining Team members.

**If you have any questions, please contact Corinne Cosentino at [corinne@opeiu8.org](mailto:corinne@opeiu8.org) or 425-318-2650; or Diane Arnold [diane@opeiu8.org](mailto:diane@opeiu8.org) or 206-441-8880 ext. 115.**

# Union Survey

# OPEIU

Local 

for Local 8 Members at YouthCare

December, 2019

## First Union Contract Bargaining Survey and Bargaining Team Nominations

Our **OPEIU Union Contract** negotiations begin in January 2020! To ensure our voices are heard and our Union Contract reflects our priorities, we need your participation. Survey information collected will be used to identify workplace solutions and develop contract bargaining proposals.

You can return this survey by either giving it to your Workplace Contact who is collecting them at your site, scan and email to [corinne@opeiu8.org](mailto:corinne@opeiu8.org), or contact Corinne and we can come pick it up. This survey is also available as an online survey. See the home page on our website ([www.opeiu8.org](http://www.opeiu8.org)) for a link to that survey. Please return the survey by **Tuesday, December 31**. Then stay tuned; we'll schedule meetings to discuss the results, vote on your Bargaining Team and talk about the next steps.

### Please fill out this important contact information!

(individual survey results will be kept confidential) **Please Print.**

Name \_\_\_\_\_ Preferred Pronouns \_\_\_\_\_

Race/Ethnicity (optional)\* \_\_\_\_\_ Home/Cell Phone \_\_\_\_\_

Job Title \_\_\_\_\_ Personal Email \_\_\_\_\_

Program & Work Location \_\_\_\_\_ Work Email \_\_\_\_\_

Work Hours \_\_\_\_\_ On Call?  Yes  No How long have you worked at YouthCare? \_\_\_\_\_

How many hours per month do you work? \_\_\_\_\_

What is the best time of day for you to attend a meeting? \_\_\_\_\_ Location? \_\_\_\_\_

\*We are collecting this information so the Bargaining Team has the option to review disproportional impact of issues on certain racial or ethnic groups

### Priorities—which workplace issues do you care about most?

Give each of the items on the next page a rating using the following guidelines:

**Highest Priority:** I feel strongly enough about this issue to take more public action to obtain it. For example, if necessary, I'd be willing to attend a rally, sign a petition or attend a board meeting to win on this issue.

**Medium Priority:** I feel strongly enough about this issue to participate in workplace activities to obtain it, such as attending a meeting, wearing a button or talking to fellow co-workers.

**Low Priority:** I feel this issue is not as important as other issues.

Place a check in the boxes below to rate your priorities based on the instructions on the previous page. Add any comments, examples, ideas, and/or other priorities in the space provided on page 3.

Highest Medium Lowest

- |                          |                          |                          |  |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | a. Negotiate clear and consistent policies, i.e., on call scheduling, vacation approval, inclement weather                 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Implementing meaningful changes to move towards racial equity   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | c. Consistent training for all staff soon after hire, i.e., de-escalation, universal precautions, crisis intervention      |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | d. More program/job specific training  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | e. Guarantee current health benefits going forward in our Contract   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | f. Improve healthcare benefits for dependent children  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | g. Differential pay for swing, night, and weekend shifts   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | h. Increase opportunities for promotion and advancement  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | i. Secure a fair and transparent wage scale that recognizes years of service and cost of living                            |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | j. Eliminate/reduce the matching requirement to receive our 401k contributions   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | k. Address hours of work/scheduling issues   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | l. Create a fair, consistent discipline process  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | m. Improve access to use vacation  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | n. Ability to use sick time without causing coworkers to work alone  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | o. Seniority rights for assignment of open shifts, transfers, job postings and more  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | p. ORCA pass provided by employer  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | q. Protect flexibility in work schedules   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | r. Traumatic event leave that doesn't come out of our sick/vacation  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | s. Safe staffing levels  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | t. Protocol/timeline for filling vacant positions  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | u. Increase bilingual pay premium  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | v. Improved access to mental health support  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | w. Improved access to equipment to do our jobs   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | x. Clear and consistent job expectations   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | y. Create a committee to address issues of secondary trauma  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | z. More support for night-shift staff  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | aa. Consistent application of rules in program   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | bb. More consistent internal communication   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | cc. Differential when sent to work in a different program and create a "universal handbook" for guidelines across programs |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | dd. Ability to take breaks   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ee. Coverage for staff to participate in all staff meetings, committees, trainings, community events, etc.                 |

Please Answer the Following Questions:

Please be sure to fill out the contact section on the front page so we can follow up on any of your responses below. You can attach additional paper, if necessary.

- What is your current wage? \_\_\_\_\_/hour
- Do you think your pay rate adequately matches your job duties and responsibilities?
  - Yes     No     Not sure
  - If **No**, please explain: \_\_\_\_\_
- Are your wages fair compared to others in your field?
  - Yes     No     Not sure
  - If **No**, please explain: \_\_\_\_\_
- Do you believe your wages should be market adjusted?
  - Yes     No     Not sure
  - If **Yes**, by how much? \_\_\_\_\_ Please explain. \_\_\_\_\_
- Do you work another job(s) to supplement your YouthCare income?  Yes     No
- Do you depend on another household member(s) to help pay the bills?  Yes     No
- What rate of general wage increases do you think would be fair for each year of the Contract? (check one)
  - 0-2%     2-3%     3-4%     More than 4% increase each year
- Are there any changes or improvements you would like to see with your healthcare, retirement, Employee Assistance Program or other benefits?
  - Yes     No
  - If **Yes**, please explain: \_\_\_\_\_
- How much longer do you see yourself working at YouthCare?
  - 0-6 mos.     6-12 mos.     1-3 years     5-10 years     10+ years
  - Why? \_\_\_\_\_
- Do you have health/safety issues that have not been addressed?
  - Yes     No     Not sure
  - If **Yes**, please explain: \_\_\_\_\_

Please use the space below to elaborate on any of your responses or to add any other priority issue:

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