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STATE OF MICHIGAN
DEPARTMENT OF LABOR
LABOR MEDIATION BOARD

MICHIGAN DEPARTMENT OF
LABOR AND INDUSTRIAL
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In the Matter of
DISTRICT HEALTH DEPARTMENT NO. 1
Lake City, Michigan
and
MICHIGAN NURSES ASSOCIATION

On November 12, 1968 the undersigned, Leon Herman, was appointed by the Labor Mediation Board of the Department of Labor, pursuant to Section 25 of the Labor Mediation Act, as amended, and the Board's Rules and Regulations, to conduct a fact-finding hearing and issue recommendations with respect to the matters in dispute between the parties. Upon due notice, a hearing was held on November 23, 1968, at the Wexford County Court House in Cadillac, Michigan.

James C. Herrinton, Attorney for the Board; John D. English, Chairman of the Board; Jack Cinco, Administrator of District No. 1; Mearl Burkett, Lake City Member; Frank Dewitt, Board Member, and Earl Dexter, Kalkaska County Member, appeared on behalf of the Board.

Orlando Vargas, representative of the Association; Robert Jaress, representative of the Association; Ann Liddle, P.H.N. and Reba Reynolds, P.H.N., appeared on behalf of the Association.

Health Department District 1

This petition was filed on behalf of the Public Health Nurses of District No. 1, consisting of four counties in the upper portion of the Lower Peninsula. They have been paid a salary ranging from \$6000.00 to \$6200.00. They are presently negotiating a labor contract with the Board, and have asked for a salary schedule beginning at \$7136.00, increasing to \$11,074.00 over 21 years.

The Board has already included a schedule of \$6000.00 to \$6386.00 in its budget for the coming year and has insisted that the nurses accept this salary schedule. However, it did propose tentatively an increase of \$500.00 per year per nurse, which would make the salary schedule \$6500.00 to \$6700.00, on a one-year contract; or it would agree to a two-year contract with an increase of \$300.00 per year; or in the alternative, a one-year contract with an increase of \$186.00 plus a retirement plan, effective promptly.

In the course of the hearing, the Association proposed a starting salary of \$6100.00 increasing to \$6600.00 after one year, \$6800.00 after two years, and \$7100.00 after three years, plus a retirement program to be set up beginning with the first year; or alternatively, a beginning salary of \$6000.00, increasing to \$6550.00 after one year, \$6750.00 after two years and \$6900.00 after three years, plus hospitalization insurance to be paid one-half by the Board and one-half by those members of the Association who wish to take

it, with a retirement program to be negotiated during 1969 for institution at the beginning of 1970, plus mileage reimbursement when using their own cars at 11¢ per mile.

The Board's Budget for 1969, as approved by the Boards of Supervisors of the various counties in which it operates, totals \$86,235.62, against prospective receipts of \$79,336.77, resulting in an anticipated deficit of \$6898.85. Included in this budget are the increases for the nurses as originally proposed. The Board explained that with four different supervising boards to approach, it would be extremely difficult, if not almost impossible, to obtain a variation from the present budget and that it was, therefore, committed to the budget as it stood.

I am certain that budgets can be revised, and that County Boards of Supervisors are well aware of the increases in living costs which have faced the nurses as well as everyone else. Furthermore, the Board must in any event ask for an additional allowance from the supervisors to cover the deficit it already expects. It would be no more difficult to ask for an increase to permit fair salaries for the nurses.

I have examined the rates of pay and fringe benefits paid to public health nurses in surrounding counties, and while it is almost impossible to correlate them exactly because of the variations in fringe benefits involved, I believe, and I so recommend, that the Board could pay a salary to these nurses of \$6000.00 to start, increasing to

\$6550.00 after one year, \$6650.00 after two years and \$6750.00 after three years.

I further recommend that a joint committee of the nurses and the Board, together with representatives of such other employees as the Board wishes to include, explore and propose a retirement plan program during the year 1969 to the end that such a program be effectuated beginning with January 1, 1970. I further recommend that the appointment of such committee be delayed until February, 1969, because all of the present members of the Board, with one exception, will be replaced by others in January, and it would be best that a Board with authority to act take the necessary steps to set up the retirement plan.

It would also be advisable to let the appointment of the retirement plan committee rest until February, as one of the nurses presently on the staff is retiring in January because of advanced age, and a second nurse is leaving in January because of pregnancy. This will leave only four nurses, plus two more to be hired to replace those who are leaving. If the matter is deferred until February, it will be possible to negotiate insurance rates for a retirement plan at a lower schedule, because at that time the nurse with the longest seniority will have only eleven years of service to be considered.

The Board now pays no hospitalization insurance for any employees. This is a fringe benefit which employees should, in my opinion, receive, and which more and more public employers are presently granting. The Board objects to

the payment primarily upon the ground that it would also have to provide such insurance for its other employees, but this should not be permitted to affect the rights of these particular claimants.

I recommend that hospitalization insurance be paid in full by the Board, but only for such of its employees whose spouses do not already carry hospitalization insurance in other employment which gives them adequate protection.

The Public Health Nurses presently use their own cars in their work. They have been receiving ten cents per mile and are now asking that it be increased to eleven or twelve cents.

I find as a fact that ten cents does not adequately compensate the nurses for the cost of the use of their cars. Insurance, repairs and maintenance costs have all increased substantially in cost. Ten cents is not sufficient to cover these costs. I recommend that the mileage allowance be increased to eleven cents per mile.

The Association asks that the Board pay for term life insurance of \$5000.00 on behalf of the nurses. I find, as a fact, that the Board at this time does not, and almost certainly could not, get sufficient funds to pay for such insurance, although I also find that the request is reasonable and should be given serious thought. I therefore

recommend that the matter be held in abeyance for a year, but that in 1970 provision for life insurance be given consideration.

The Board now allows 12 days for sick leave annually, accumulating to a total of 100 days. The Association does not question the number of days allowed them, but asks that they may be permitted to use such sick leave time in cases of illness in their immediate families. Apparently this dispute arose out of a misunderstanding of some language heretofore used, because the Board now specifically states that sick leave of the employees may be used for illness of a child, spouse or parent, thus covering the immediate family. This is satisfactory to the Association.

Agreement has been reached between the parties as to a satisfactory grievance procedure except that the Association asked for binding arbitration in the final step and the Board has been adamant in refusing it.

Rather than letting the proposed contract founder upon such an issue, I suggest that the parties agree to accept fact-finding as a final step in the grievance procedure.

The Association asks that the role of the nurse be defined. The language proposed by the Association has met with objection from the Board, but the objections appear to be in minor aspects of wording rather than in any serious dispute as to the intent of the paragraph.

To resolve the issue, I have suggested, and the parties have agreed, that Mr. Herrinton rewrite the proposed paragraph to satisfy the objections of the Board, and that he and Mr. Vargas then revise it to suit both parties, with the further understanding that should they be unable to agree, both parties are to submit their own versions to me and I will then write a paragraph covering the role of the nurse which I hope would be acceptable to both.

The Association asks that the nurses be permitted to attend such Michigan Nursing Association seminars as relate to their profession, and such public health meetings as they feel are important, at the expense of the Board.

The Board presently pays the time and expenses of the nurses for attendance at regional and state public health meetings. There are also a large number of meetings throughout the year relating to public health. The Board feels that its Director should decide which of these is important to the nurses, while the Association asks that it have a voice in selecting such of these meetings as it feels they should attend.

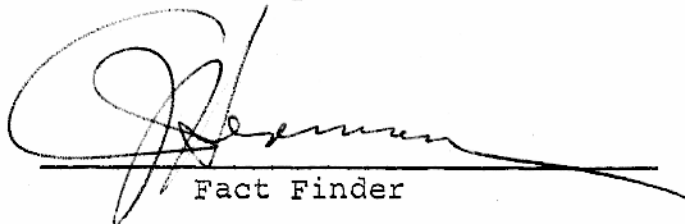
As the public health meetings, apart from the regional and state meetings, and as to Michigan Nursing Association seminars, I believe as a matter of sensible business practice that the administrator be the sole determinant of which of these meetings should be attended and

which of the nurses should attend and I so recommend.

The only remaining issue in disagreement is the matter of retroactivity of the proposed salary schedule. The Association asks that it be made retroactive to July 1, 1968, the date upon which the Association was certified as the representative of the nurses. The Board wishes any salary schedule to be effective as of January 1, 1969, the date when the new budget goes into effect.

The parties have been negotiating since September 1, 1969. I recommend that any salary schedule that is agreed upon be made retroactive to that date.

I am satisfied that my recommendations as above are fair and equitable, and that they provide the nurses with reasonably good working conditions and an adequate scale of living without unduly burdening the Board's limited financial capacities. I sincerely urge both parties to agree upon terms substantially as I have outlined them above.


Fact Finder

Detroit, Michigan
December 2, 1968