

BFHD PTE Local 17 Meeting Summary

Meeting Type:

Labor-Management Meeting

Meeting Date:

3/22/11 2:00-4:00

Meeting Reported By:

Jim Coleman

Meeting Attendees:

Don Briscoe, PTE Union Representative
Jim Coleman, BFHD PTE Union President
Dr. Jecha, BFHD Director
Sandy Owen, Preventative Health Director
Bruce Perkins, Environmental Health Director
Lisa Wight, Human Resources Manager

Major Agenda Topics Discussed

- State and BFHD budget
- Status of administrator position
- Compensation for duties performed at a higher pay scale
- Change in job posting/job opening for Accounting Assistant/Clerical Supervisor
- WIC job duties being performed by nursing staff
- Customer Service Complaints

Budget

There was a very brief discussion about the changes in the state budget and how it will affect the Benton-Franklin Health Department (BFHD). The 2011 BFHD budget was prepared with anticipation of some cuts being made at the state level so BFHD is "on-track" for now. However, more money could be cut from the state budget which could affect BFHD. Stay tuned and keep your fingers crossed!

Side Note: BFHD is required by the Board of Health (BOH) to maintain \$500,000 in reserves. Money from this account is to be used when there are unanticipated costs at BFHD. Reasons for using reserves could be to either help even out years of low finances/revenues, cover unexpected costs & emergencies, or some entities have specific "reserve" funds for say a future building project. The money spent from this account must be first approved by BOH.

Status of Administrator Position

The position has been offered to a candidate. The candidate was not identified at the meeting. BOH will have an emergency meeting on 3/23/11 to negotiate the salary and make the final offer.

Compensation for duties performed at a higher pay scale

Background: A question was posed by the union leadership: "If a union member is required to perform duties outside of the normal duties AND the duties are within a position compensated at a higher pay rate, then shouldn't the union member be paid at the higher rate?" A recent BFHD example was presented by the union whereby a union worker was asked to fill-in temporarily for a supervisor. When the worker questioned whether she would be compensated at a higher rate, management shifted the duties to a non-union worker. (I am not inferring a cause and effect here.)

I am only trying to establish the fact that management has not clearly stated to employees what is "standard practice" in this situation.)

The article (XIX) that applies to this situation can be found on pages 22 and 23 of the BFHD Union Agreement (July 2008-December 2011).

Section 2: Employees shall not normally be assigned duties foreign to their job classification and specifications; however, employees may be assigned to perform **duties which are incidental** to their classification. Incidental duties shall mean only those duties which are related to the employee's job classification and specification.

Section 4 states: "When an employee is temporarily assigned by the Division Director to perform duties at a higher classification, he/she shall be compensated at the rate in effect for higher classification..."

Management's stance on the issue was that when union members have been asked to perform tasks of a supervisor that the employee was only required to perform a small subset of duties and thus did not warrant compensation beyond normal pay.

The Union's stance was that it is difficult to anticipate what might be the "small subset of tasks" and that unexpected extra duties usually occur especially if the union employee is covering for an absent supervisor.

The heart of the debate really centered on what is meant by "duties which are incidental" and the length of time for which the position is occupied. Who determines what is "incidental" and how long does the union worker need to perform the tasks in order to get compensated...1 hour, 1 day, or 1 week?

After much debate on the issue, Don Briscoe asked Management to provide an example of when someone was compensated for performing duties at a higher pay rate. Management was unable to recall an example.

Bottom Line: I think both parties realized that the wording in the contract regarding this issue is a little "loose" and may need some changes in the future to clarify this issue. The upcoming negotiation talks in June will be a good time to resolve this issue.

Change in Job Posting

Background: In early March a job posting for an accounting assistant was sent to BFHD employees. The posting was later changed to a clerical supervisor position. Duties listed on the final job opening appeared to be a combination of both positions. Union members were upset because they saw this (accounting assistant) as an opportunity for career advancement. However, when the opening was changed to a clerical supervisor some applicants did not feel they were qualified to apply for this position while others were not interested in the added supervisory duties. One of the union's main concerns was that Human Resources changed the descriptions of the duties that the clerical supervisor without the union's input. The union made it clear that it would like to be informed if duties for a job classification are changed significantly.

Bottom Line: Management can decide how best to fill a vacancy. At this time management feels the need to hire a clerical supervisor is critical. Management said that the hiring of the clerical supervisor should not be viewed as a replacement for the accounting assistant. They hope to eventually fill that vacancy if the budget allows.

WIC work being performed by nursing staff

Background: It was brought to the attention of the PFT union officers that non WIC certifiers (MSS/MCM staff) were performing WIC services which has historically been performed by WIC clerk union workers. This was confirmed by union officers and the practice has been occurring for some time (~1 yr).

Management said that WIC funding at the present time is stable with more work than current WIC clerks can perform. Management also indicated that the move to use nursing staff was discussed in meetings with WIC clerks that seemed supportive of the practice. In addition, management said that MSS/MCM nurses were providing WIC services only to pregnant mothers coming into their program. The work is seen as precursor to their case work. Management also emphasized that the WIC program was/is critical to the BFHD and is trying its best to keep all BFHD staff employed in a time when budgets are stretched to the limits. Dr. Jecha indicated other health care agencies would eagerly take this work (WIC) away from us. Management stressed that this is a critical time for all WIC staff to work in a cooperative manner. **Management said that union WIC clerks would not be laid off due to cuts in the MSS/MCM.**

Finally, management expressed sincere concerns regarding staff member cooperation and teamwork functions. They feel that relations are strained not only between management and workers but also amongst fellow co-workers. They are interested in finding ways to strengthen relations and to facilitate teambuilding activities. If you have any ideas please let management and union officials know.

Bottom Line: The union was attempting to gather information on this topic and did not voice any major concerns. The union will continue to monitor this situation.

More Information on the Women, Infants, and Children (WIC) Program

The **Special Supplemental Nutrition Program for Women, Infants and Children** (known as **WIC**) is a [Federal assistance](#) program of the [Food and Nutrition Service](#) (FNS) of the [United States Department of Agriculture](#) (USDA) for healthcare and nutrition of low-income pregnant women, breastfeeding women, and infants and children under the age of five. (See [Child nutrition programs](#)) The eligibility requirement is a family income below 185% of the [U.S. Poverty Income Guidelines](#). If a person participates in other benefit programs, or has family members who participate in the Food Stamp Program, Medicaid, or Temporary Assistance for Needy Families, they automatically meet the eligibility requirements. This program is unrelated to the USDA's [Food Stamp Program](#).

The Special Supplemental Nutrition Program for Women, Infants, and Children was created by a 1972 bill [Senator Hubert Humphrey \(D\)](#) of [Minnesota](#) introduced. It is a federally funded program established by Congress in September 1972 under Public Law 92-433, section 17 to the Child Nutrition Act of 1966.^[1] It was made permanent in 1975. Currently, WIC serves 45% of all infants born in the US.^[2]

WIC participants often receive a monthly check or voucher - or more recently an EBT card. The USDA implemented new rules in 2006 that required foods to be more price-competitive. This has resulted in the closure of many "W I C Only Stores". Formerly, these stores charged the maximum permitted under the program, charging up to 16% more than regular stores for the same food.^[3] However, the WIC program is one of the most cost-effective government programs. A national study done by Mathematica in 1994 showed benefit-to-cost ratios ranging from \$1.77 to \$3.13 saved for each \$1 spent on WIC.^[4]

Customer Service Complaints

Management voiced its concern regarding customer service complaints. Complaints have been received by BFHD clients as well as from other BFHD staff members. According to Dr. Jecha, BFHD has received more complaints in the last year than in all of the years that we have been doing business. Management said that customer service would be the focus of the upcoming staff meetings on March 23rd and 25th.