

# PARTNERSHIP AGREEMENT

BETWEEN

VA PUGET SOUND HEALTH CARE SYSTEM  
AMERICAN LAKE

AND

AMERICAN FEDERATION OF  
GOVERNMENT EMPLOYEES LOCAL 498

PROGRESS THROUGH PARTNERSHIP

Revised April 16, 2002

## **PREAMBLE**

The Partnership Council enters into this Agreement in the spirit of Labor Management Partnerships and the Master Agreement between the Department of Veterans Affairs and the American Federation of Government Employees.

## **MISSION**

The Partners are committed to improving patient care and service delivery through Labor-Management collaboration, which reflects partnership principles.

## **PURPOSE**

The purpose of the Department of Veterans Affairs Puget Sound Health Care System and American Federation of Government Employees Local 498 Partnership Council is to design, implement and maintain a cooperative, working relationship between labor and management to achieve common goals. To that end, the partners will make the investment necessary to establish an atmosphere of mutual respect and trust in accomplishing the Department's mission. This includes open and honest communication with a view toward recognizing and addressing the interests of the partners.

## **OBJECTIVES**

In order to achieve this purpose, the partners agree to the following objectives:

1. Establish an atmosphere of mutual respect and trust creating a positive environment for patients and staff.
2. To identify and address appropriate issues in a timely manner, striving for mutually beneficial resolutions.
3. To provide pre-decisional involvement regarding:
  - a. Matters involving personnel policies, practices, and working conditions of bargaining unit employees.
  - b. Numbers, types and grades of bargaining unit employees as well as the methods, means and the technologies of their work.
4. Monitoring the partnership process to foster such pre-decisional involvement by the partners.

5. The partners agree to share responsibility and accountability for partnership decisions.
6. To develop and forward consensus based recommendations to the deciding official.
7. To identify and address joint training needs to accomplish partnership's objectives.
8. To develop and use alternative methods of resolving disputes.

## **MEMBERSHIP/ADMINISTRATION**

1. The Council will consist of seven (7) members appointed by the VA Puget Sound Health Care System Director and seven (7) members appointed by the President, AFGE Local 498.
2. Rotation of Council members will be at the discretion of appointing officials.
3. The number of Council members may be changed by mutual agreement as long as partners have an equal number.
4. Council meetings will be held monthly at a time and place to be determined. Meetings may also be held at the call of the Co-Chairpersons.
5. Eight members will constitute a quorum
6. Council members will not have substitutes at meetings.
7. The Council will be co-chaired by the Deputy Director and Union President. At least one of the Co-Chairs shall be present to lead Council meetings.
8. Agenda items will be presented in writing to the Co-Chairs as far in advance as reasonably possible. (Non-agenda items may be considered by mutual agreement.) The Co-Chair responsible for chairing the meeting will ensure that an agenda is distributed sufficiently in advance for member preparation.
9. Issues submitted to the Council should be in the following format:
  - a. Issue statement
  - b. Background information
  - c. Interest(s) of party submitting the issue
  - d. Implication-regarding medical center operations and/or patient care
10. A recorder agreed upon by the Partners will take minutes. A draft of the minutes will be presented to the Co-Chairs within two weeks for their review prior to approval and dissemination.

11. The Council may select a group facilitator to be utilized as needed.

## **GUIDELINES/IMPLEMENTATION**

1. Partnership requires the partners to make good faith efforts to reach mutually agreeable solutions. The partners agree to place no blame for failed initiatives, but instead will seek new or alternative resolutions.
2. Interest-based problem solving and alternative dispute resolution techniques will be utilized for a more cooperative relationship in the paramount interest of patients, and to substantially reduce the number of formal disputes and need for third party interventions.
3. Partnership Council recommendations will be made using consensus approach that integrates the interests of the partners.
4. An issue that cannot be resolved by consensus will revert to its proper place in the labor-management relationship. The parties are, however, committed to the proposition that the need to resolve some matters through more traditional processes will not be allowed to interfere with their progress in developing partnership.
5. Council meetings are a forum for open and constructive communication. To encourage such communication, all council members will maintain the confidentiality of information discussed or presented unless the Council agrees by consensus to release the information. The confidentiality requirement is also applicable to facilitators, technical advisors, and observers.
6. The Council will not discuss issues which are specific to an individual or active grievance.
7. Statements during Council meetings or in minutes will not be used by either Partner in a grievance hearing or a legal procedure.
8. The Council will establish and maintain an open line of communication with all employees to foster a harmonious atmosphere of information sharing and trust. (e.g. distribution of meeting minutes, bulletins and newsletters etc.)
9. Employees are encouraged to participate in partnership activities. Participation in partnership activities will have no adverse impact on an employee.
10. Council members will be in a duty status while participating in partnership activities. Participation beyond or outside normal duty hours of those involved will be considered as official duty and compensated in accordance with the law.

11. Joint partnership training will be provided. Such training may include:

- Examples of successful partnership experiences elsewhere
- Interest-based bargaining (IBB) techniques
- Alternative dispute resolution (ADR) methods
- Communication and cooperation skills
- Consensus decision making
- Other topics identified by the partners

To the maximum extent possible, the Partners will draw upon the resources of the Federal Labor Relations Authority (FLRA), the Federal Mediation and Conciliation Service (FMCS), the Department of Labor (DOL), the Office of Personnel Management (OPM) and VA resources such as the Employee Education System (EES), unions and teleconference/video capabilities.

12. The parties recognize that this partnership must evolve to meet present and future needs. The partners recognize the inevitability of change in the work place, and are committed to dealing with change constructively to enhance the lives of our veteran customers and staff.

13. The Council will assess its internal effectiveness on a biannual basis and strive to continually improve.

## **COMMUNICATIONS**

The Council will establish and maintain an open line of communication with all employees to foster a harmonious atmosphere of information sharing and trust. (e.g. distribution of meeting minutes, bulletins and newsletters etc.)

## **ALTERNATIVE DISPUTE RESOLUTION**

Interest-based problem solving and alternative dispute resolution techniques will be utilized for a more cooperative relationship in the paramount interest of patients, and to substantially reduce the number of formal disputes and need for third party interventions.

## **DURATION OF AGREEMENT**

This agreement will be effective on the date the VA Puget Sound Health Care System Director and the Union President have both endorsed it. This Agreement will remain in effect for two years and will be automatically renewed at biannual intervals unless either Partner requests revision of the Agreement within 30 days before the anniversary date.

Proposed changes to this Agreement may be initiated by mutual agreement of the Partners at any other time.

Revision of the Agreement will be accomplished by consensus through interest-based bargaining.

## GLOSSARY OF TERMS

Alternate Dispute Resolution (ADR): A variety of techniques used to resolve issues that may otherwise have been pursued through grievances, appeals, legal proceedings and so forth. A common distinguishing feature of ADR techniques is emphasis on creation of mutually satisfactory resolutions by the parties directly involved.

Common Objectives: The Partners recognize that their overall relationship is grounded in common objectives and interests and that they will have different interests in some cases. Guided by public interest principles, the parties are committed to joint development of a common strategy, which is based on helping each other succeed by cooperation whenever that is possible.

Consensus: A group reaches consensus when all members agree upon a single alternative and each group member can honestly say:

I believe that you understand my point of view and that I understand yours.

Whether or not I prefer this decision, I support it because

it was reached fairly and openly, and

it is the best solution for us at this time

Interest-Based Bargaining (IBB): A non-adversarial approach to negotiations and problem-solving based on a set of principles, assumptions, steps, and techniques used to achieve more productive results. The basic principles are:

Focus on issues not personalities

Focus on interests not positions

Satisfy mutual interests

Use standards to judge options

Labor-Management Partnership: Labor and Management working together with a common goal of discussing and resolving mutual problems and improving their relationship in the best interests of patients and staff.

Staff: All employees including supervisors and managers.

Trust: While the Partners may disagree on given issues, both will act in good faith. Disagreements will be resolved on the merits of the matter without resort to personal attacks, coercion, or other non-merit tactics.

AMENDED PARTNERSHIP AGREEMENT  
AMERICAN LAKE DIVISION  
Dated 16 April 2002

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Betty Withrow  
Co-Chair

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Sandy J. Nielsen  
Co-Chair

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Goody Calugas  
Member

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Vernie Dunham  
Member

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Don Fiedler  
Member

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Dianne Fowler  
Member

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Susan Goss  
Member

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Jerry Knudson  
Member

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Timothy Kruschek  
Member

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Deidra McLauchlan  
Member

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Candace Reed  
Member

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Vicki Ward  
Member

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Taylene Watson  
Member

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Michael Weatherly  
Member

Approval:

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Timothy B. Williams  
Director