

**Rep Council Minutes
September 13, 2007**

Officers present: President Marc Houle, 1st Vice President Bob Ruark, 2nd Vice President Terri Jo McNaul, Communications Secretary Naomi Lukaszewski, 6-12 Director Candy Smiley, K-5 Director Karen Wusthoff

Treasurer K. Logan was absent due to illness.

Membership: *Current membership enrollment numbers are still being calculated and will not be finalized until September 30. Enrollment is confirmed through payroll and the first paychecks of the year do not go out until the end of September.*

School & Members Represented:

High Schools New Direction	Middle Schools	Elementary Schools and PPAP			
ABR	BHMS	AB	HR	POM	TB
MCHS	BMMS	CHAP	LP	RH	TBCK
PHS	MBMS	CRKS	MID	SCRK	VAL
RBHS	MVMS	CV	MCRK	SD	WW
	OVMS	DC	MR	SH	
		GR	PR		

Handouts: Agenda with attachments
CFT “6 facts about Health Insurance”
CFT memo: Labor vs. Corporate perspective on Health care
Yahoo! News: “Health Care premiums rise 6.1%”
MOU re: Compelling Personal Reasons Leave
Memo re: Changes to Compelling Personal Reasons Leave
Memo re: Changes in Substitute Teacher rates
Join memo from PUSD & PFT re: CLAD updates

Call to order: 3:55 p.m.

I. Open Items

- A. Pick up materials for absent colleagues.
- B. Check member list for accuracy.
 - 1. Send corrections to Becky Kealy, PFT Administrative Assistant
 - a. bkealy@powayteachers.org
 - 2. Also let Becky know if list is correct.
 - 3. Need to have Building Reps check lists because payroll does not monitor site transfers.
- C. Check with new staff members, teachers at site hired after “New Teacher Days”.
 - 1. Many teachers think they are members due to Agency fee being deducted from their paychecks.
 - a. Please contact those teachers and have them fill out membership form.
 - b. Becky Kealy can send them a form through the DO mail.
- D. New Reps
 - 1. Jan Tom-MBMS
 - 2. Monica Sturhan & Gretchen Murphy-RHES
 - 3. Stephanie Martin-Adobe Bluffs
 - 4. Welcome to all new reps.
- E. PFT Community
 - 1. Carol Adams, LPES has recovered from spinal surgery and has returned to the classroom.
 - 2. Carl Bogucki, retired rep from CVES is recovering from surgery for prostate cancer.

II. Fred Glass, CFT Communications Director

CFT Power Point Presentation: “Health Care Reform & You”

Secretary's Note: The complete presentation can be viewed on the CFT website:
http://www.cft.org/home_news/healthechcrstuff/cfthealthshowweb.ppt.htm

A. Fred Glass helps local units with collective bargaining.

1. CFT representative on Health Care Coalition
2. CFT advocate for single payer health care in California and United States.
3. Powerpoint presents CFT perceived solutions to current Health care crisis.
 - a. Intended to start conversations on Health care.

B. History

1. 1915: American Association for Labor Legislation
 - a. Submits model plan to state legislatures
 - b. Plan defeated by American Medical Association (AMA) and Insurance Companies.
 - c. AMA initially supported plan but was convinced by Insurance companies to withdraw support.
2. 1935: Beginning of labor movement
 - a. General strikes lead to creation of Labor Relations Act and collective bargaining guideline.
 - b. Government passes Social Security Act
 - c. Early version of Social Security included health care
 - i) Health care provision eliminated from act due to influence of AMA and insurance companies.
3. 1943-1948: Murray-Wagner-Dingell bill
 - a. Repeated attempts to establish National Health care
 - b. Defeated each time
4. 1950's
 - a. Collective Bargaining based health care for union members and political advocacy for non-union members established.
5. 1960's
 - a. Health care established as employment based.
 - b. Medicare and Medicaid passed in 1965
 - c. America is now only industrialized nation that has employment based health care system.
 - i) England has National Health Service
 - ii) Canada has Single Payer system
 - iii) Other European countries have similar systems.
 - iv) Insurance middleman has been eliminated.
6. 1980's: Problem with employment based systems begins to arise.
 - a. Increasing co-payments, higher deductions
 - b. Employee share of premium grows
 - c. Maintenance of affordable health coverage results in reduced pay increases
 - d. Less dependent coverage
 - e. Paying for growing number of uninsured
7. 1990's
 - a. 1994: Prop 186
 - b. attempt to establish single payer system in California.
 - c. Defeated by Insurance company campaign
 - i) spent \$30 million on advertisement
 - ii) supporters spent \$2.5 million

C. Present situation

1. From 2000-2005, firm offering health benefits declined by 9%.
2. 90% of union members have coverage.

3. 60% of non-union have coverage
4. Growing number of uninsured resulting in rising costs
 - a. Hospitals and doctors are passing on expense of treating uninsured to insurance companies e.g. charging \$50 for a piece of gauze.
5. Health Insurance companies have no transparency of procedures and outcomes.
6. Health care is fragmented in delivery.

D. Profile of population without Health Insurance

1. USA: 47 million uninsured
 - a. CA: 7 million
 - b. 46 million are non-elderly
 - c. 64% are low income
 - d. 81% are working families
 - e. 80% are adults
 - f. 52% ethnic minorities
 - g. 70% American citizens
 - i) 4/5 are native born American citizens
2. 54% of bankruptcies are result of a health crisis
3. US citizens spend more on health care than citizens of other industrialized countries.
 - a. \$2000 more per capita.
 - b. 20% of every health care dollar goes to administrative costs.

E. Summary

1. Health care in the US is too expensive and the quality of care is uneven.
2. One third of workers are uninsured.

F. Proposals for Health Care reform in 2007

1. Market based reforms
2. Employer mandated coverage
3. Incremental reforms
4. Unique state plans (i.e. Massachusetts)
5. Universal plans

G. Proposals for California

1. Governor's plan: "Pay or Play"
 - a. Every individual required to purchase coverage, employer-provided or private with minimum \$5,000 deductible.
 - b. Employers with 20 or more workers provide coverage or pay 4% of payroll (state average = 8%; school districts average = 14%)
 - c. Family of 4 with annual income between \$20K and \$50K required to contribute \$600 - \$3,000 per year for coverage
 - d. Plan must cover physician, hospital, emergency services and prescriptions; other services at individual expense.
 - e. Plan is underfunded and not detailed.
2. Perata & Nunez
 - a. Offering similar "pay or play" plans
3. Kuehl's Plan: SB 840, Single Payer
 - a. Covers all Californians with comprehensive services
 - b. One payer, one plan ("Single payer")
 - c. Employers and individuals contribute percentage of payroll or income to pay for coverage
 - d. State uses purchasing power to pay for services, prescriptions and equipment
 - e. Maintains choice of providers
 - f. Portable

H. What is Single Payer health care?

1. Public financing: one public “payer”
2. Universal: covers everybody
3. Comprehensive: covers all medical needs
4. Private and public providers with individual choice of doctors
5. Controls costs through global budgets and bulk purchasing, not clinical micromanaging
6. Portable and Accountable
7. CFT supports Single Payer as a pragmatic solution.
8. US currently has Single Payer system in place: Medicare
9. Single Payer health care does not cover long term care.
 - a. Currently special insurance is needed to cover long term health care costs.

I. Advantages to schools under Single Payer system

1. Decreased health care costs
2. More \$ available for salaries
3. More \$ available for educational programs
4. Everybody covered—full-time, part-time, certificated, classified, students and their families.

J. How is it financed?

1. Through payroll taxes
 - a. 8.17% employer
 - b. 3.78% employee
 - c. 11.95% total
2. School districts spend an average of 14% of general fund on health care.
 - a. A single payer system would reduce that amount by 2.05% and allow savings to be used to increase salaries or restore programs.

Question: How do you answer those who have horror stories about Canadians having to come to the US for surgery because the wait is so long?

Response: There is often a wait for elective surgery. Life threatening needs are met in a timely manner. When polled 80-90% of Canadians said they want to keep their current health care system. [A 2003 Washington Post/ABC News poll showed 62% of Americans wanted to *change* the current health care system. Only 32% said they were in favor of maintaining the current system.]

The problem in Canada is that they have underfunded the system for the last 20 years. Any public system, like education, is going to falter when it doesn't have sufficient funding.

- PFT has been juggling numbers for years.

III. PFT Budget: M. Houle—see *Agenda Attachment 1-2*

A. 2006-2007 Budget

1. As requested by Reps, budget is posted monthly on PFT website and presented to the council quarterly.
2. Current posting reflects 4th quarter of fiscal year 2006-2007 which ended August 31, 2007. (*Agenda attachment 2*)
 - a. Numbers are unaudited.
3. Staff salary reimbursement to PUSD
 - a. Half paid in June 2007. Second half will be paid at end of September.
 - b. Month earlier than previous year.

B. 2007-2008 Adopted Budget

1. 400 more students than projected.
 - a. Therefore, income will be over projection made in June.
 - b. Final payroll numbers will be in after September 30.
 - c. Will still have positive cash flow.

2. Budget attachment shows revised numbers to include dues increase passed in June 2007.

Question from PFT President: Do you want to approve the reconfigured budget right now and then approve again in October when we have final payroll numbers? Or do you want to wait until October to approve the budget?

Silence from the council.

- I'm a newbie. What exactly are you asking?
- We already passed the budget back in June. But we also had an election in which a dues increase was passed. This budget that I am showing you today is revised to include the dues increase but I don't have a final number on income because the first payroll doesn't come out until September 30.
- Let's pass approval on to the next meeting when all the numbers are known.
- Everyone just got this budget. They may want to wait until the next meeting so they have time to look it over.

No objection was made to waiting for the October Rep Council meeting to approve the revised budget.

IV. PUSD Budget: M. Houle

- A. Presentation at June Board meeting
 1. Administration is concerned about structural deficit.
 2. Special Ed encroachment on General fund is increasing.
 - a. Encroachment is due to federal under funding of federally mandated programs.

V. State Budget: M. Houle—see Agenda attachments 3

- A. Final budget had \$1.2 billion less than projected.
 1. Backfilling deficits with one time funds.
- B. STRS is under funded and planning to pursue increasing employee and employer contributions.

VI. Compelling Reasons Leave: K. Wusthoff—see handouts

- A. New guidelines
 1. 2 days of leave plus third day less cost of sub.
 - a. 3rd day is less cost of sub whether a sub is needed or not, i.e Professional Growth Days.
 - b. No longer need to give a reason or receive prior approval.
 - c. P-15 is not necessary.
 2. New guidelines may not have been communicated to site administration or secretaries.
- B. There is not an additional two days of sick leave.
 1. Compelling Reasons days are separate from sick leave, do not accrue and do not affect STRS calculation.
 2. This was negotiated to protect employee privacy and provide for absence needs that are compelling but not covered by personal necessity.
 3. Compelling reasons absences are subject to review by district personnel department.

Question: How do we put this in on subfinder? Which number is it?

Response: They haven't updated the phone system so you can punch in personal illness or necessity but that doesn't matter. It's what's on the P-9 that you sign when you return that counts. Make sure it's marked "Compelling Reasons".

Question: What about STRS? How does this affect my STRS?

Response: It doesn't come off STRS because you are in paid service on those days. As long as you are in paid service you will get STRS credit.

- It doesn't cost the District any additional money to do this. The District pays 8.25% for STRS. That .25% is for sick days. They pay that whether you are out for personal illness or for a compelling reason.

- So if you have 200 sick leave days and you use 2 compelling reasons days, then you still have 200 sick leave days.
- Yes. Compelling reasons is not accrued.

VII. Sub Rate Change—*see handout*

- A. Sub rate of pay is determined by the district.
 1. Sub pay is not a negotiable item.
- B. Sub pay is deducted from employee's pay only when employee is in extended sick leave.
 2. Extended sick leave applies when all sick leave is exhausted and employee is still certified by a physician as being physically unable to return to work.

VIII. Restructuring—*Agenda attachment 7*

- A. Attachment has summary of proposed changes.
 1. Reps will receive all proposed changes via e-mail by Monday (September 17).
 - a. Original language will be included but lined out.
- B. Reps are asked to review proposed changes and compare prepared to discuss them at the October Rep meeting.
 1. Discussion will continue at November Rep meeting.
 2. Issue will presented to the membership for approval in December.
 - a. Members will vote whether or not to approve amendments.
- C. Thank you to the members of the Restructuring Committee for their time and input.

Discussion:

- We'd also like the reps to consider whether or not the Vice Presidents should be elected by a constituency or "At large".
- The Committee recommended that they should elected by a constituency.
- Yes, but it was discussed at the last Executive Council meeting and there were pros and cons for each. Do teachers who teach Special Ed at middle school vote twice? How do itinerant teachers who teach at several levels vote?
- We also need to decide whether to hold the elections in May or December.
- I would hate to destroy the motivation of those who are bargaining for us by having them voted out of office midway through negotiations.
- We need to figure out what transition works best for us.
- All these ideas are good and will be explored next month.

IX. CLAD—*see handout*

- A. Joint memo from PFT and PUSD
 1. Will be sent only to those teachers who still do not have CLAD
 - a. Currently 313 teachers are not CLAD certified or are in progress toward earning their CLAD.
 - b. Actual number of teachers who do not have CLAD is probably much smaller than 313.
 - c. There are some teachers who are simply holding out or about to retire and therefore have not pursued a CLAD.
 - d. Most of the non-CLAD teachers are secondary.
 2. As of June 2008, all teachers in PUSD must have CLAD or an emergency CLAD credential.
 - a. Emergency CLAD credential cost about \$55. Applicants must show evidence of progress toward achieving CLAD.

Discussion:

- What are the consequences of not getting the CLAD? I have some teachers are my site who have said they have no intentions of getting the CLAD. Not being able to have an ELL student in your class in not really a consequence.

- There could be repercussions in scheduling. Especially if you have fewer teachers at your site. If you are the only non-CLAD teacher, your colleagues will end up with a high population of ELL students. They may pressure you to get your CLAD. We don't have all the answers. This is a new situation for us.
- Your team could be split up to create a more even distribution of CLAD and non-CLAD teachers. You could also be transferred to another site.

Question: I have a colleague who was told they had to have their CLAD by the end of the month, not June.

Response: That person probably has an ELL student in their room that cannot be moved.

Question: Do PE and Foreign Language teachers need to have CLAD?

Response: First we were told they didn't and then we were told they do. The County Office of Education interprets the law. They are now telling us that PE teachers do have to have CLAD and that Foreign Language teachers have to have CLAD if they are teaching any other subjects besides Foreign Language. If they are teaching only Foreign Language, then they don't have to have CLAD.

X. Calendar Options

- A. [C. Smiley] will e-mail the Calendar options to the Reps for them to look over.
 1. C. Smiley and K. Wusthoff will begin attending Calendar committee meetings.
- B. Please look over options and send feedback to C. Smiley and K. Wusthoff.
 1. Main goal of committee is to meet common interests of stakeholders: parents, teachers, administration and students.
- C. Items to consider
 1. Changing to full week holiday breaks in November and February increased ADA income when switch was made. Eliminating those days would likely cause a reduction in ADA.
 2. Possibly have Professional Growth days on Saturday or after school.
 - a. We are already compensated for those days so eliminating them completely would be a reduction in salary.

Meeting adjourned: 5:35 p.m.

Next meeting: October 11, 2007

Secretary's note: This date was later changed to October 18, 2007.

Submitted by Naomi Lukaszewski, PFT Secretary