MEMORANDUM OF UNDERSTANDING
Between Oregon Nurses Association and
Providence Home Health & Hospice

Whereas, the parties to this Agreement believe that Providence Home Health & Hospice should implement effective measures to prevent and control the spread of seasonal influenza to patients, visitors, caregivers and others within the Providence care setting.

Whereas, the parties to this Agreement agree that those who seek care at Providence must trust it is a safe environment in which to receive their care, and Providence caregivers have a professional duty to take steps to ensure that patients and others are kept safe from influenza. Fulfilling this duty includes proper respiratory hygiene, hand washing, and vaccination (unless there is a medical contraindication).

Whereas, Providence is requiring that nurses and caregivers who are not vaccinated wear a surgical mask in certain situations, relying on evidence based studies that indicate that wearing a mask may limit the spread of influenza.

Therefore, the parties to this Agreement, ONA and Providence Home Health & Hospice, do hereby agree that:

DEFINITIONS:

Patient Care Areas: for the purpose of determining where masks are required to be worn by unvaccinated caregivers, patient care areas include:

1. areas where inpatients or outpatients are currently present for treatment (for example, patient rooms, procedure rooms, treatment rooms, or patient’s homes)

2. areas where patients are being transported (for example, hallways, patient transport elevators, and vehicles), when the unvaccinated caregiver is involved in transporting the patient.

Patient care areas do not include nurse stations, hospital entrances, break areas or cafeterias. This definition is not meant to be all-inclusive.

AGREEMENT:

1. All bargaining unit nurses are required to participate in the annual Influenza Vaccination program by:
   a. receiving the influenza vaccine through Providence or elsewhere and completing an attestation form (an attestation can be completed on the Employee Health web page), or
   b. signing a declination.

2. Unvaccinated nurses will wear a surgical mask in patient care areas when:
   a. the County Health Department or Oregon State Health Department announces geographically widespread flu in Oregon and Providence Home Health & Hospice declares flu season, or
   b. required by state or federal law.

Providence Home Health & Hospice will declare flu season when its regional infection prevention and employee health leadership determine that influenza activity in most of our ministries has reached a level consistent with onset of the influenza season. At that point, and through the remainder of flu season, the use of a face mask will be mandatory for nurses who work in or enter patient care areas, and are
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not vaccinated against seasonal influenza. Mask use should continue until the end of flu season is declared. Flu season will continue until regional infection prevention and employee health leadership determines that flu activity has declined back to baseline.

3. Only Providence masks will be allowed and Providence Home Health & Hospice will be responsible for maintaining the supply of surgical masks. The requirement to wear surgical masks is only necessary if Providence Home Health & Hospice provides the masks.

4. All nurses will be offered the seasonal influenza vaccine or masks free of charge. Providence Home Health & Hospice will make the influenza vaccine available at multiple locations at the hospital and other Providence Home Health & Hospice worksites on multiple days and on all shifts. Providence Home Health & Hospice will also offer a variety of the form of the influenza vaccination to accommodate personal preferences (such as egg free or nasal). Each flu season, Providence Home Health & Hospice will assess which vaccine(s) are appropriate based on the recommendations of the Centers for Disease Control and Prevention. The decision whether to use the quadrivalent vaccine and/or the trivalent is subject to annual review by the Infectious Disease practitioners and Employee Health, based on vaccine effectiveness, CDC recommendations, and manufacturer availability.

5. Information as to the vaccination status of a nurse or the reason the nurse declined vaccination will be collected and maintained on separate forms and in their Employee Health file, which is treated as a confidential medical record and which is kept separate from their personnel file. The information therein will only be accessed by those with a need to know. Providence Home Health & Hospice will take steps to ensure that lists of vaccinated and unvaccinated nurses will be maintained only by the unit manager and not distributed to staff. Nor will the content of the lists be shared with staff.

6. Providence Home Health & Hospice is responsible for announcing when masking needs to start and stop. Such announcement must be explicit and made through customary means for communicating policies to caregivers.

7. As Providence Home Health & Hospice diagnosed flu cases begin to increase in the hospitals and clinics Providence will announce the beginning of flu season. Nurses that come down with flu like symptoms are required to report to Employee Health or, after hours, to Prov RN. During flu season, if Employee Health (or Prov RN) determines that the nurse cannot work, the nurse’s absence will not be counted as an occurrence that would move the nurse into corrective action or further in the corrective action process. Nurses may return to work when cleared by Employee Health. Each nurse may use this exception once during flu season.

8. In the event of a vaccination shortage and influenza is prevalent in the community, nurses will be required to wear a mask until there is a supply of vaccine. The parties will work together to educate the workforce about ways to stop the spread of influenza, including, but not limited to, receiving a vaccine.

9. Except as provided herein, no nurse will be required to wear and/or carry any indication of his/her vaccination status in a manner that may be visible to the nurse’s coworkers, patients or the general public.
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10. Either party may request a meeting over this policy between May 1 and June 30 of each year. The meeting will be to review evidence and research based standards around the masking of healthcare workers and the spread of influenza. The meeting will be to discuss if this Agreement should be modified to reflect the new evidence or standards. This Agreement may be modified at any time by mutual agreement. Such modification must be written and specifically reference this Agreement. Any modification will only become effective upon execution by both parties. Nothing herein prohibits either party of negotiating over this matter during negotiations over a successor collective bargaining agreement.

11. Any part, provision, representation or warranty of this Agreement that is legally prohibited or is held void or enforceable will be ineffective to the extent such prohibition or unenforceability does not invalidate the remaining provisions hereof.

12. Those who do not comply with any aspect of this policy may be subject to progressive discipline. Enforcement of this Agreement will be subject to the grievance and arbitration provisions in the parties' collective bargaining agreement.

13. This Agreement will become effective upon execution.

OREGON NURSES ASSOCIATION

Date: January 6, 2015

PROVIDENCE

Date: 1/5/15