We Reached a Tentative Agreement and Your Bargaining Team is Recommending a YES Vote!

Agreement Highlights Include:

- 3.0 percent increase with retro to 12/1/2014
- 2.0 percent in the second year
- Increases in evening, night, standby, preceptor and certification differentials
- No change to health insurance premium percentage deductibles out of pocket maximums or in network costs for the duration of our contract
- New language to deal with reorganizations
- A side letter stating that the Hospital will not mandate shift length changes from 12 to eight hour shifts for the duration of the contract
- An Memorandum of Understanding (MOU) to address scheduling issues for Home Health

Come get your questions answered and vote. A summary of the agreement is on page two of this newsletter. An actual copy of the agreement will be available for you to review at the vote and will be available on our Web page.

You MUST be an ONA member in good standing to be eligible to vote. If you are not yet a full member, you can join ONA the day of the vote by filling out a membership application.

ABSENTEE BALLOTS ARE AVAILABLE!

If you cannot vote on-site but want to vote, you must request an absentee ballot as soon as possible (ASAP) by contacting Melissa Tangedal at tangedal@oregonrn.org or by calling the ONA office at 503-293-0011.

Deadline for submitting absentee ballots is 4:30 p.m., Thursday, May 7.
Votes will be counted Wednesday, May 13, at 8 p.m.
Summary of the Tentative Agreement:

Article 1 Definitions

- Under the Staff RN definition, removed the phrase “able to become oriented and…” and removed the two department competency requirement replacing it with only one department competency requirement, removed the word “function” from the staff RN definition and added the sentence: “All Staff RNs assist with basic nursing skills when needed in other departments.” This means all staff RNs would be required to float as “helping hands” where needed, but would not be required to be competent in a second department.

- RNs who are regularly scheduled to work less than .6 full time equivalent (FTE) will receive the differential that intermittently employed nurses receive.

- Definition of clinic RN changed to “A nurse that works primarily in the clinic setting”

- New language added to define a cross trained nurse – the cross training program is voluntary.

Article 2 Recognition – No Change

Article 3 Equality of Employment Opportunity – No Change

Article 4 Rights of Management – No Change

Article 5 Association Business

- Providence will discuss with ONA at task force any new RN positons that they believe would not be included in the bargaining unit

Article 6 Association Membership – No Change

Article 7 Employment Status

- New language covering work plans– to make it clear that work plans are not formal discipline actions

Article 8 Hours of Work

- New language covering rest periods for breast-feeding mothers

- The Hospital will make reasonable efforts to not to schedule nurses more than three consecutive 12 hour shifts in a row however nurses may voluntarily work more

- Full time and part time nurses will be scheduled prior to per diem nurses

- Nurses can print out electronic schedules and can post paper schedules on the unit.

- Holiday work is to be rotated fairly among nurses

Article 9 Job Vacancies – No Change

Article 10 Other Conditions

- Added language to designate break rooms for rest and meal breaks and for breast-feeding mothers that are away from patients and visitors.

Article 11 Professional Nursing Care Committee (PNCC)

- Title changes from Assistant Administrator to Chief Nurse Executive.

Article 12 Compensation (this is a place holder – see Appendix A)

Article 13 Health and Welfare

- No change to premium percentage deductibles, out of pocket maximums or in network costs for the duration of our contract

Article 14 Retirement No Change

Article 15 Paid Time Off/ Extended Illness Time (PTO/EIT)

- Nurses who transfer to Seaside from other Providence facilities in Oregon will maintain their PTO/EIT

- PTO requests will not be unreasonably denied and denials will receive a written explanation.

Article 16 Leaves of Absence – No Change

Article 17 Education

- Clarified that required education is paid and if a nurse chooses to take a class elsewhere (other than at a Providence facility or a Providence
Summary of Tentative Agreement  
Continued from page 2

preferred educational provider) the nurse is responsible for paying the difference in cost. If a required certification course is not offered at the Hospital within three months of the expiration of the nurse’s certification, the Hospital will cover the nurse’s mileage, up to 200 miles round trip.

Article 18 Seniority – No Change

Article 19 Low Census

- No change to low census call off language
- Clarified that nurses who care called in to work while on standby receive the callback provisions in Appendix A letter C

Article 20 Reduction in Force

- New language to cover reorganizations/restructures within the Hospital

Article 21 Grievance Procedure

- Title changes from Assistant Administrator to Chief Nurse Executive

Article 22 No Strike/No Lockout – No Change

Article 23 Separability – No Change

Article 24 Duration

- Two year contract

Appendix A:

- 2014: 3 percent retro to 12/1/2014
- 2015: 2 percent beginning 12/1/2015
- Added steps 15 and 30 to the pay scale
- Evening shift $2.00
- Night shift $5.35
- Standby $4.15
- Preceptor $1.50
- Certification $1.90

Wound Care and Infusion certifications added to the list and Extended Care Unit (ECU) removed

Appendix B:

- Surgical services nurses who work excessive call time can request their next shift off and Providence will make serious and reasonable attempts to grant the request and they nurse has the option to take PTO or take it unpaid
- New MOU to address Home Health Scheduling
- MOU to address scheduling issues for Home Health nurses to work to eliminate mandatory overtime

In person ratification vote will be scheduled for Wednesday, May 13, from 5-8 p.m.
Room location to be announced.

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Please Remember!
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Have you considered building your advocacy skills for the nursing profession?

ONA has developed a new program to help you do just that!

Cornerstones of ONA’s Nurse Leadership Institute (NLI) include:

- Motivating leaders to be catalysts for positive change
- Strengthening collaborative leadership skills
- Enriching and renewing personal values by deepening understanding of oneself and others
- Providing challenges and supportive encouragement during the leadership journey

The first “class” of the NLI will be limited to no more than 25 participants, allowing for an intimate setting and hands-on instruction. An intensive, unique leadership program, built on an evidence-based leadership model, NLI will help you develop and strengthen vital skills needed to advance the nursing profession.

In seven seminar segments, taking place over a seven month period, you will learn to:

- Expand your self-confidence about your leadership ability
- Manage politics ethically through collaboration
- Enhance critical and reflective thinking
- Develop the ability to take thoughtful and meaningful risks
- Integrate the Code of Ethics for Nurses into your leadership practices
- Address real-time issues with colleagues
- Become a leader in ONA and an advocate for the nursing profession in your workplace, your community and throughout the state

In order to best apply and integrate the information from the NLI, each participant will work on a real-life action learning project. Cohorts in groups of three to five Institute members will meet between the seminars for ongoing development and growth.

NLI participants will also be paired with a mentor who will help them apply their knowledge and learning, provide additional exposure to the nuts and bolts of leadership, and increase their understanding of the complexities and opportunities that ONA leaders experience.

For more information including dates, times and the application process, please go to ONA’s home page www.OregonRN.org and click on NLI Institute on the bottom half of the page.

Deadline for applications is Wednesday, June 3, 2015. Participants will be selected on July 1, 2015.