ARTICLE 4 – NURSING COMMITTEES

4.1. Professional Nursing Care Committee (PNCC)

4.1.1. Recognition. The Association may establish and the Hospital will recognize a Professional Nursing Care Committee (PNCC) composed of bargaining unit members who are members of the Association. The PNCC may be composed of up to one nurse per nursing unit/department. Nurses shall elect PNCC members annually as outlined in the ONA Bay Area Hospital Bylaws, with members serving two (2) year terms. The Hospital shall provide sufficient paid release hours per fiscal year for PNCC members to attend to PNCC responsibilities described herein. The release hours shall be paid at each nurse’s straight time.

4.1.2. Function. It shall be the function and duty of the Professional Nursing Care Committee (PNCC) to:

4.1.2.1. Review, study and make recommendations through the Chief Nursing Office (CNO) and/or the Hospital Administration or Medical Staff concerning rules, practices and policies relating to the practice of nursing and nursing administration for the purpose of improving nursing care and Hospital efficiency. PNCC members may request and shall receive any information they deem relevant in order to improve nursing care and Hospital efficiency including, but not limited to, Staffing Request and Documentation Form (SRDF) submissions and Quantros data.

4.1.2.2. Serve an advisory function for all appointments of bargaining unit staff nurses to all nursing councils and committees, standing or ad hoc that relate to nursing service or direct patient care. There shall be one designated PNCC bargaining unit member selected by the bargaining unit members of the
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1. committee that shall serve as liaison to the Staffing Committee and the Coordinator Council.

4.1.2.3. Monitor the distribution of staff development funds as described in Article 5 in collaboration with the Hospital. The PNCC is also responsible for maintaining and updating the national certification list, to inform staff of eligible certifications and to make recommendations to amend this list to the Hospital.

4.1.3. Disposition of Recommendations. All written recommendations submitted by the Committee to the nursing administration shall be referred to appropriate committees or Chief Human Resources Officer or designee. An explanatory written response or report shall be made to the Committee by the nursing administration concerning the action taken on each recommendation or suggestion or describing the procedure being used to consider and implement such recommendation or suggestion, or the rational for not adopting the recommendation. Such report shall be made to the Committee within thirty (30) calendar days from the delivery of the written recommendation. The Hospital and PNCC shall cooperate to assure that written recommendations, responses and PNCC minutes are made available to all bargaining unit nurses within thirty (30) days of their approval or delivery.

4.1.4. Joint Meetings. The Committee and the CNO or designee may schedule regular meetings each month or special meetings to be attended by both Committee members and members of the Hospital Administration and/or appropriate members of medical staff for the purpose of discussing mutual problems relating to patient care or nursing administration.
4.1.5. Disciplines Related to Clinical Performance. Disciplines related to clinical judgement issues may be subject to clinical performance peer review by the PNCC at the nurse’s request and at the Committee’s discretion. A summary of the Committee’s investigation shall be shared with the Employer, the nurse and the Association. The nurse’s anonymity during such investigations shall be strictly maintained by Committee members and limited to a need-to-know basis.

4.2. Hospital Nurse Staffing Committee (HNSC)

4.2.1. The Hospital and nurses shall act in compliance with current law related to nurse staffing.

4.2.2. The Hospital shall post Oregon’s staffing law and related OARS, as well as interpretive documents supplied by the State of Oregon, on the Hospital’s intranet in a manner that affords easy access by managers and bargaining unit members.

4.2.3. The Hospital and nurses shall act in compliance with the current law related to nurse staffing. Staffing concerns and/or requests should follow the appropriate chain of command and a Staffing Request and Documentation Form (“SRDF”) will be completed by the requesting nurse. SRDF’s will be reviewed by the Nurse Staffing Committee.

4.2.4. On an annual basis the HNSC shall participate in training to ensure all members are educated on current staffing law. The Oregon Nurses Association Professional Practice department will provide and document the training at no cost to the Hospital. Ideally, training will be scheduled within thirty (30) days of newly elected representatives being seated.

4.3. Unit Based Practice Councils (UBPC)
4.3.1. Each unit is responsible for maintaining a UBPC which shall consist of staff nurses, other unit staff and management representatives in appropriate proportion to the number of nurses and other staff on the unit. Staff nurse representatives shall be selected by nurses on the unit in accordance with the UBPC’s charter. A staff nurse and the unit manager shall serve as co-chairs of each UBPC. All nursing staff members will have access and input to agendas and decisions, meetings will be open to all nurses and the time and location of meetings shall be posted and meeting minutes made available to them.

4.3.2. Each UBPC member shall be paid for meeting time. Additional hours for project work related to UBPC activities will be mutually agreed upon with the manager prior to the project work.

4.3.3. UBPC’s shall be responsible for making recommendations and performing functions including but not limited to:

4.3.3.1. Unit goals related to practice

4.3.3.2. The development of an appropriate orientation for new nurses on the unit and nurses floating into the unit

4.3.3.3. The development of a draft unit staffing plan which shall be submitted to the Hospital Nurse Staffing Committee (HNSC)

4.3.3.4. Establishment of a charter that includes a process for selecting members who will represent all nursing staff and that contains parameters for length of members, rotation or members, and a decision making process

4.3.3.5. Other tasks agreed to or assigned by the Hospital

Deleted: Bay Area Hospital encourages each nursing care unit to establish a unit based practice council or form another process that better allows staff nurses to have input into the professional practice on their unit. Bargaining unit staff will be responsible to recruit staff nurses and other department staff as indicated. Shared decision-making recognizes the cooperation of management for input and guidance.

Deleted: UBPC’s will be encouraged to develop a documented standard/charter for membership, decision-making and communication practices.

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