Tentative Agreement Reached!

After a very long, final mediation session on October 16, our ONA bargaining team is relieved to report that we have reached a tentative agreement!

All preparations for a strike have been called off pending ratification. You can find important details and a summary of the tentative agreement on page 4. These huge wins reflect the amazing work by not just our bargaining and contract action teams, but by every single nurse that signed petitions, walked the picket line, filled our town hall event to standing room only, and marched through the streets of Astoria with the Oregon AFL-CIO and Senator Merkley. These actions sent a resounding message that our nurses will stand up for our patients and our entire hospital community.

We are proud of this hard work and how this contract will help recruit and retain the nursing staff to keep this hospital running to serve the North Coast community. We hope every nurse will take the time to learn about this agreement in preparation for a ratification vote. This contract is not final unless a majority of our members vote yes to ratify. Our team strongly recommends voting in favor and hopes that you will stand side by side with us as we continue to work on all these important issues going forward.

Notice: Ratification Voting

All ONA members in good standing are eligible to vote on ratification of a tentative agreement. To ratify the tentative agreement a majority of nurses must vote yes. If you are not a current ONA member, you can join and then become eligible to vote. This serves as your five-day notice for a ratification vote, please watch your email for a link to online voting. There will also be Q & A drop in hours to answer questions about the tentative agreement. If you come by during the Q & A, we’ll also have a ballot box to cast your vote in person: Oct. 23 10:30 a.m. – 12:30 p.m. and 2:30 – 4 p.m.

Online voting opens Oct. 23 at 10:30 a.m. and closes Oct. 30 at 1 p.m.

Cast your ballot in person on Oct. 23, 10:30 a.m. – 12:30 p.m. and 2:30 – 4 p.m. in Conference Room A.

Not a member or unsure of your membership status? Please call ONA’s Membership Department at 503-293-0011 or email memberservices@OregonRN.org to verify your membership. The membership application can also be accessed online here.

Questions about the new tentative agreement? Talk to your bargaining team representatives, call or email your labor representative Amber Cooper at 773-706-0311. Cooper@OregonRN.org, or attend our Q & A hours (details listed above).
How Did We Win?
Nurses Standing Together

After many small actions of wearing buttons, signing a large banner, and packing the bargaining room wearing black, nurses decided it was time to launch our first major action. A petition for a fair contract was circulated and signed by 85 percent of nurses. On June 27, a large crowd of nurses personally delivered the petitions to CEO Eric Thorsen, although he declined to leave his office and personally accept them. We knew at this stage that it would be an uphill struggle to convince our CEO to do the right thing. But we also knew that with the vast majority of nurses standing together, eventually we could win one of the strongest contracts we have had in many years.

After we did not see enough movement at the bargaining table from our petition, we decided to take our struggle to the community. We held a rally and picnic on Aug. 9 with State Representative Witt, ONA President Lynda Pond and ONA Labor Cabinet Chair Kevyn Paul, along with many other community members. We prepared picket signs and gathered pledge cards to take part in an informational picket. This event inspired many nurses to take our message to the larger community as we prepared for our informational picket. In the weeks following pledge cards poured in, and then an official informational picket vote was held with over 85% of nurses voting in favor.

With only 135 nurses employed at CMH and a large number of those working, we were shocked to have nearly 200 people take part in our informational picket on Aug. 20. Nurses and their SEIU co-workers were joined by allies from other unions, patients, providers and community members. Tom Chamberlain and Graham Trainor — the outgoing and incoming Oregon AFL-CIO presidents — attended along with State Representative Rob Nosse. Our nurses chanted, shared stories and marched along Hwy 30 to let the entire community know that we were standing up for patients and a fair contract. A very memorable event from our campaign was when two of our bargaining team members and some ONA family members left the picket line to run inside and help deliver their fellow ONA member Brooke Duncan’s baby! While Brooke, who is an ONA steward and picket captain, was upset at her baby’s timing keeping her off the picket line, she was relieved to see that her adorable newborn Luca Kai Duncan was still a big ONA supporter.

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After management refused to budge following our informational picket, we took our concerns directly to the community. On Sept. 8 we held a large town hall event at Fort George Brewery to share stories and educate everyone on the issues at the hospital. We were joined by State Representatives Prusak and Mitchell, along with Oregon Commissioner of Labor & Industries Val Hoyle who gave some very strong speeches calling for CMH to do the right thing. Our nurses spoke about our concerns with unsafe staffing and the economic instability faced month to month with hours cut due to mismanagement.

After our town hall event, federal mediation with management failed and management refused to meet with us any further. But we were not giving up! On Sept. 21 we marched through downtown Astoria joined by hundreds of union leaders who were attending the annual Oregon AFL-CIO convention in Seaside. Members of the CMH executive team were seen sitting in cafés as we marched past chanting that this was a union town and we needed a fair contract now. We passed business after business with “Support CMH Nurses” signs in their windows. U.S. Senator Jeff Merkley joined Oregon AFL-CIO president Tom Chamberlain to speak at our rally and march side by side with us. We knew the entire labor community across the state of Oregon was not giving up and neither were we. We stood strong, and afterwards as we prepared for a strike, we were invited back to the bargaining table to make a deal that addressed each of our top priorities. Our bargaining team went to the table knowing that they had the support of the entire hospital community and larger labor movement and found management finally willing to reach a fair agreement. These contract gains belong to each and every nurse who took part in making this happen!
WAGES: 5% raise upon ratification in early November, 3% raise in 2020, and 3% in 2021. The wage increases from normal steps in our wage scale continue to be around 2.5% per year for most nurses. So, over the three years of this contract, most nurses will get 7.5% in step increases, plus 11% in across the board increases, totaling nearly 18.5% in wage increases over the life of the union contract.

MEALS AND BREAKS: Management has guaranteed that they will consider input from nurses to develop creative and flexible approaches to scheduling meal periods and that those processes will not violate staffing plans. This allows us to file grievances if a department’s meal and break coverage requires nurses to take patient assignments that violate their staffing plans and management refuses to fix it.

DOCK CAP: If a nurse is involuntarily docked more than 20% of their shifts per quarter (six pay periods), they would hit the cap and not be able to be docked further. Management would have to find appropriate work to keep them on shift. Nurses will get floated instead of docked if there is a need.

PROTECTIONS ON SCHEDULED HOURS: There will be an official process to review cases where a part time nurse has seen their scheduled hours cut more than 30% due to internal decisions of the hospital (normal census fluctuations will not count). Where people see their paychecks cut, they will now have a process to fix it.

EDUCATION: The agreement still includes a new $2,000 BSN tuition reimbursement for full- and part-time nurses, and vast expansion of the certifications that qualify for a differential. Full-time, part-time, and relief nurses will receive a new $1 differential for certifications, rather than the $1,000 bonus that comes with large taxes taken out for most nurses. The $500 certification reimbursement for testing and materials will no longer be available to intermittent or relief nurses. The paid tuition for a conference will no longer be available to intermittent nurses, but it will still be available to full-time, part-time, and relief nurses. Paid time for conferences, education, or to obtain certificates will still be available to all nurses including intermittent nurses. Management tried to make many other cuts to education, but we were able to keep the paid conference and certification differential for relief nurses even though they wanted to cut that as well. We hope more intermittent nurses may consider switching to being relief nurses to keep these benefits, though we know not everyone will be able to.

HEALTH INSURANCE: There are currently no planned increases to costs for nurses in the health benefits, while the average elsewhere is around 8% per year in increases to costs. Additionally, we have new protections that if other management employees, or SEIU receive an improvement in premiums, they must offer it to us as well.

New employees previously had to wait 90 days to qualify for health insurance coverage, but it will now be 30 days. We have lost newly recruited nurses who could not have a gap in health benefits due to the 90 day wait and are hopeful 30 days will allow a better opportunity to recruit nurses to fill our vacancies.

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SHIFT LENGTH CHANGES: We protected our previous contract language that stated there must be a vote before shift length changes can happen. It was moved from Addendum A to the very end of Article 6.

HOSPICE: Nurses in this unit will now receive a $50 stipend per month for cell phones, instead of $15. They will no longer need to submit their cell phone bill to receive this, it will be an automatic stipend to all hospice nurses.

CLINIC NURSES GET EQUAL PAY: All clinic nurses will now be on the same pay scale as hospital nurses. This will mean up to 10% wage increases for these nurses at clinics that had been kept below everyone else. For a clinic nurse that will receive the 2.5% step increases each year, plus the 11% in across the board increases, plus this 10% pay equity increase, they will experience a 28% increase over the 3 years of this union contract. We are now much more confident that CMH can recruit and retain quality nursing care at all its expanding clinics across the North Coast. We believe this is a major improvement to protecting the healthcare provided to the larger community as outpatient care continues to expand and grow.

RELIEF & INTERMITTENT NURSES: Relief nurses will need to provide availability for 15 shifts per month including one weekend and one open call shift (in departments with call). Intermittent nurses will now need to submit availability for three open shifts in a rolling three-month period, rather than six-month period, one of which needs to be on a weekend. For intermittent nurses in a department with call, they’ll also need to submit one call shift in a rolling three-month period and one holiday including Thanksgiving, Christmas Eve, Christmas Day, New Year’s Eve, or New Year’s Day. Management can waive some or all these requirements for relief or intermittent nurses for periods of time depending on the circumstances.

CHARGE NURSES: Our charge nurse differential will be increasing from $1.25 to $1.75 per hour. Management will have more discretion to assign charge nurse duties. However, nurses may still advocate for specifics relating to safe staffing of charge nurses in unit staffing plans where needed.

TEMPORARY NURSES: A temporary nurse can now work 150 days rather than 90 days to make sure departments can fully cover FMLA leaves and other situations that last longer than expected.

FLOATING: We will have a new $2 differential for floating when taking a full patient assignment after a nurse is properly trained and oriented. In addition, we will have a new $1 differential for working in partnership with another nurse on their assignment to create a greater incentive to fully cross train nurses. Helping hands/sitter duties while floating will continue to not have a differential. Our new floating language does promote increasing floating of nurses, but we made sure it protects nurses having decision making power through the PNCC to review that proper competencies are being met with cross training, and that nurses maintain the right to refuse assignments where they have not been properly trained. We also made sure this section includes that orientation can only be provided where there is adequate staff available to train.

REQUESTS OFF: We improved the process for requests off, so that all requests off will receive a response within 14 calendar days. Use of seniority bumps for vacation requests will happen within the 14 days regardless of the length of the request off which will avoid some of the issues we’ve had this past year. Additionally, we’ve empowered our UBNPC’s to create their own scheduling process with manager approval. Also, nurses denied an earned leave request can seek a shift trade with another nurse.

SURGICAL SERVICES: Nurses in this unit who are on call immediately following their regularly scheduled shift have the option to rotate dock last on their regularly scheduled shift.

HIRING: A nurse with any written discipline used to not be eligible to apply for other jobs. Now a documented verbal warning will not count, which will assist nurses who find themselves not a good fit in their home department being allowed to be hired elsewhere. Additionally, we’ll now give more hiring priority to nurses who have floated to a unit with a patient assignment and work 144 hours in the past 12 months as having priority over other nurses from outside the unit who might have more overall CMH seniority.

JOB POSTINGS: Management will now provide job postings to ONA of any new non-management RN positions that are not being initially included in the ONA bargaining unit. As CMH continues to grow and expand, this will allow us to assess if any positions are incorrectly being created outside our bargaining unit that we would like to have added.

SENIORITY: You may now take a twelve-month voluntary break in service to CMH and return with your seniority, rather than just six months.

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Summary of the 2019-2022 Tentative Agreement cont’d

GRIEVANCE PROCEDURE: We will now be allowed to take grievances involving improper termination directly to Step 2 of the grievance process. This will reduce the amount of time until we can reach a final resolution. For people who have potentially been unfairly fired, it means we can potentially get them back to work up to 42 days sooner than the old grievance procedure.

PNCC: Our PNCC will now have 10 positions instead of 8 for nurses, and will be made up of UBNPC chairpersons or whoever is selected among nurses where there is no UBNPC.

MANAGEMENT’S RIGHTS: One of the big concessions management tried to make us accept was a major expansion of the Management’s Rights article. It could have given management the right to unilaterally change working conditions with policies that they would not have to bargain with ONA. These changes could potentially have undermined many of the contract gains in other articles. They were also seeking the right to discipline and terminate nurses without just cause or a grievance procedure. We did not allow them to make any changes to this part of the contract, the previous contract language will remain as is. This was a major win in the final mediation session.

INFORMATIONAL PICKETING: During the three years of the agreement management made us agree to not take part in information picketing at CMH. After our next contract expires, we would have the right to hold informational picketing at CMH again, but not until then. This was not something we wanted to agree to, but we are also confident that we can use our newly gained skills to hold town hall meetings, rallies away from the hospital, and loudly march through all of downtown Astoria if needed. Informational picketing is not our only or most powerful tool to hold CMH accountable during the three years of our contract. And we know CMH will have ample incentive to reach a fair agreement with us in three years or potentially face more informational picketing after our contract expires.

MUTUAL RESPECT: We have a new article in the contract about mutual respect. We hope that this empowers our members to improve how we treat each other with mutual respect. But more importantly, this new article helps us hold managers and supervisors accountable as well. We will now be able to file grievances when managers do not treat our members with mutual respect. This article also includes protections from retaliation for reporting this type of behavior.

LABOR MANAGEMENT MEETINGS: We have a new section in our contract that guarantees quarterly meetings with union leaders and management to discuss issues around the hospital with paid time for nurses to attend these meetings.

Be sure to visit the Columbia Memorial bargaining unit page for more updates and information, and read the full tentative agreement here.

Staffing Education & Advocacy Training

Have you recently been elected to your hospital’s staffing committee or do you desire to be a more prepared and effective staffing advocate? If so, we encourage you to take a SEAT with ONA for our online Staffing Education & Advocacy Training (SEAT). This is the only comprehensive staffing law training in Oregon and is available online through our OCEAN platform. It is available 24/7 and can be taken at your own pace. It is free for ONA members and available to non-members at a discounted price.

Nurses can earn 2.25 continuing nursing education contact hours for completion of the entire SEAT series.

Visit www.OregonRN.org/OnlineCE to get started.

Part 1: Oregon’s Nurse Staffing Law
Part 2: How to Write a Better Nurse Staffing Committee Charter
Part 3: How to Write a Better Staffing Plan
Part 4: Staffing Committee Orientation

Oregon Nurses Association is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.