Our member-led negotiation team met with the hospital and their attorney spokesperson for a two-day session on March 11 and 12. Due to scheduling conflicts, our next sessions will be at the end of April and are currently scheduled for 8 a.m. to 5 p.m. on April 23, 24, and 25. Nurses are encouraged to come and quietly observe the process.

While we met for only two sessions, we were able to provide the hospital with a fairly complete package proposal based on the surveys that were filled out by our membership. The hospital has responded on all of our proposals, with the exception of those dealing with finances, and has made a few proposals of their own.

Here is an update on the proposals that have been made and if any response was provided by the hospital. Articles where a tentative agreement (TA) has been reached will be indicated by a (TA) after the article name.

**Article 2 - Recognition and Membership (TA)**
The hospital has requested that we provide them up to 10 copies of the agreement at no cost and that copies be placed in each nursing department. ONA already provides agreements for each department and we agreed to provide five copies to the hospital. The agreement is also posted online and anyone may print their own copy.

**Article 3 - Professional Nurse Care Committee (TA)**
The hospital proposed deleting section 3.10, which requires them to maintain and post a list of qualified nurses who are available to provide replacement staffing. Their rationale was that, “this hasn’t been done for a while and it’s no longer relevant.” We declined and reminded the hospital that this language is currently part of Oregon’s staffing law. It is the hospital’s responsibility to provide adequate staffing and adequate relief so that regular staff may take vacation and have coverage if they are ill. The hospital will now be posting this list electronically. We have reached a TA on this article.

**Article 4 - Professional Development**
ONA has proposed changes in the way education expenses are reimbursed. With most nursing education requiring overnight and and/or air travel, $1,000 every contract term doesn’t cover all of the expenses. We have asked the hospital to either increase the amount of money set aside, or to create a process that allows for any unused funds to be pooled at the end of the contract period.

Other changes that we have proposed include having hours spent in preparation for online courses to be paid time (i.e. when the ACLS prep needs to be done online prior to check off). Also, not assigning nurses charge responsibility without additional training or within a new nurse’s first 12 months of work.

The hospital has proposed changes to the requirement for peer reviews in the evaluation process. They have also requested the addition of tuition for translator certification.
Article 6 - Earned Leave

We have heard from many members that the practice of capping the amount of earned leave (EL) that we can accrue in one year is frustrating for those who have been working extra shifts. We proposed increasing the hours that EL can be accrued on and also adding a tier of EL for nurses who have been with the hospital more than 21 years.

Our last main proposal in this article was centered around making it more clear and less arbitrary regarding EL requests. The hospital was not interested in any of our proposals at this time. The hospital continues to insist that they need the right to limit vacations as they see fit. Our concern is that there are times when multiple nurses are off at the same time, and then other times when nurses are denied vacation because one other nurse is already off. Also, the hospital has essentially done away with part-time staff. This group of nurses is essential for vacation and sick leave coverage, as they can pick up extra shifts without the same level of exhaustion as full-time workers. We will continue to work on this issue.

Article 8 - Hours of Work

We have proposed overtime after 36 hours per week for nurses who are working 12-hour shifts. The hospital has declined this proposal. We also proposed changes to meal and breaks so that a meal and rest break could be combined, and that meal breaks could occur later in a shift for a 10 or 12-hour shift nurse. While the hospital didn’t agree to the combining of breaks, they did see the benefit to having meal periods later in the day for longer shifts.

Lastly, we have proposed changes to the contract where “mentors” are referenced, updating to recognize the new preceptor program that is being developed.

Article 9 - Holidays

We have proposed changing the way holidays are recognized so that it is more beneficial to night shift employees who are sleeping through the holiday to work that night. Currently, nurses working a night shift on a holiday are being paid straight time, while the employee who came off shift at 0700 on the holiday received holiday pay. The hospital is “reviewing [this issue] based on the impact to all hospital employees.”

Article 10 - Employment Status

We have asked for numerous changes to this section and still have a ways to go. The main changes center around scheduling challenges for the float pool nurses. In addition to not having set schedules, this group of nurses is being used primarily for vacation and FMLA coverage, and not to assist in times of increased census or other staffing challenges. This is an outdated way of using the float pool and one we have seen many hospitals abandon in the interest of better patient outcomes and maintaining a float pool that is truly qualified to work in multiple nursing units throughout a shift.

Article 11 - Leaves of Absence

The hospital is asking for updates to this section to bring it more in line with recent changes in the law. We have not seen their full proposals at this time.

Article 13 - Health and Welfare

We have asked for increased contribution toward the premium costs for dependents, reinstatement of the contribution to health savings for those in the high deductible plans, and a discount for services incurred at the hospital or clinic for all GR nurses - not only those in the health plan. The hospital has declined to respond while they “evaluate the impact.” We anticipate a response at our next sessions.

Article 16 - Seniority

Trial positions need to be posted and the hospital has agreed to this. We have also proposed adjusting the patient care unit definitions to include the float pool and to reflect the current nomenclature.

Appendix A - Wages and Differentials

ONA has proposed a wage scale that would allow for step increases every year (which means no more waiting every other year) and that would extend to 30 years. Other hospitals in Eastern Oregon already do this or get close to this (Good Shepherd has step increases up to 30 years and St. Anthony to 27 years).

Additionally, we have sought increases to the weekend, call, night shift, and preceptor differentials. The hospital has not responded to our proposals yet. They have indicated that a wage response will occur at our next session.
Bargaining Update  (Continued from page 2)

Letter of Agreement - Maximum Low Census
We have proposed expanding this to cover additional departments and to make the cap effective per pay period instead of per schedule. The hospital has not yet responded.

THANK YOU TO OUR NEGOTIATION TEAM!
Total hours donated so far: 178

SURVEY
A New survey will be released to help us gauge where our members are on some specific bargaining unit issues.

Look for an email/text notification soon!

BU MEETING
Come to our next general bargaining unit update meeting:

Monday, April 22, 2019
Time and location to be announced.

ONA BU LEADERSHIP CONFERENCE

April 10-11, 2019
Portland, OR

Who Should Attend
Emerging and existing bargaining-unit member leaders. Student Affiliates may also attend if space is available. If you want to attend but are unsure about your membership status, please contact us.

Registration
Registration is free for members and student affiliates. Save your seat at the conference by registering today!

www.OregonRN.org/event/2019BUCon
2019 Statewide Elections

As of March 1, ONA members can vote in the 2019 ONA Statewide Elections.

Active elections are a sign of a healthy organization and we are excited to see so many nurses engaged in helping shape the future of ONA.

Make sure you review the candidates and cast your vote to help elect the next group of ONA leaders.

Voting Process and Details

ONA uses Election-America as the service provider for our 2019 ONA Statewide Election.

- You will receive an email or postcard from Elections-America with your voting verification information: an election code and voting pin number
- Visit https://vote.election-america.com/ONA to enter your verification information and cast your vote

For technical assistance, please contact Election-America at Help+ONA@election-america.com

For questions regarding your membership or election guidelines, please contact ONA at ona@oregonrn.org

Visit www.OregonRN.org/2019Election to see the full list of candidates.

The election closes at noon on April 15, 2019.