The Hospital Wants to Suspend Negotiations for Four Months!

The hospital’s Portland Attorney, Ken Jernstedt contacted your Labor Representative Becky McCay and ONA’s Assistant Executive Director of Labor Relations, Paul Goldberg, insisting on a meeting to discuss the hospital’s new “unusual” proposal. Your Bargaining Unit Chair, Hallie Scott was flown to Portland to attend the meeting.

Here’s the proposal:

Management wants to halt negotiations and restart in January so that they may focus on the Joint Commission on Accreditation of Healthcare Organizations’ resurveys and recommendations.

After extensive discussions by your negotiating team and Oregon Nurses Association (ONA) staff, we met with Mr. Jernstedt and explained very clearly that the nurses are concerned and also sympathetic to the situation the hospital has put itself in with the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and Centers for Medicare & Medicaid Services (CMS). The issues that the hospital is facing are just as important to the nurses. In fact, many of our proposals are aimed at resolving these problems. However, Mr. Jernstedt belittled our concerns and efforts by responding that: “The hospital has a jugular injury, and the nurses are focusing only on the headache.”

We offered ONA collaboration and expedited negotiations that would have our proposals pared down to the following concepts:

1. ONA would agree to partner with the hospital to work as a committee with an equal number of nurses on paid time to work toward correcting the deficiencies recently cited in the JCAHO survey. Additionally, ONA would provide resources from our professional services department who work closely with hospitals in correcting similar deficiencies.

2. We would cut down our last proposal by more than half of the open issues, agreeing to acknowledge all the tentative agreements that we have agreed to up until now.

3. In order to significantly scale back our financial proposal, the hospital would need to agree to a wage scale that brings you closer to the average, but still would be less than the amounts our comparators are paying.

4. The hospital would need to acknowledge agency membership with a fairshare provision for all newly hired nurses.

5. ONA would agree to add only a handful of additional proposals in an effort to complete negotiations and work in partnership with the hospital to get to the heart of the hospital’s deficiencies.

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Despite our insistence that ONA is interested in partnering with the hospital to meet compliance standards without suspending negotiations altogether, and helping to focus on the fundamental flaws of our hospital system, Mr. Jernstedt declined to entertain our partnership offer. He again characterized the nurses as being out of touch with the “current realities of the situation” and left the meeting stating, “I’ve heard all I need to know.”

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The hospital has sent a message to ONA that they feel the hospital is at risk for losing its Medicare/Medicaid reimbursement if it does not pass the inspections scheduled between now and late November.

The hospital’s attorney has clearly stated that if we don’t completely suspend negotiations for a minimum of four months, the hospital will risk losing their Medicare/Medicaid reimbursement funding. CMS arrived last Tuesday and spent the week performing audits of our nursing units and facility. Nurses also noted the presence of the fire marshal at the facility last week.

ONA’s Executive Director, Susan King connected with Dana Selover, MD of the Oregon Health Authority (formerly part of the Oregon Department of Human Services), in order to fairly and accurately get a sense for what is actually occurring in our Ontario hospital.

According to Susan, the CMS (Medicare) audit being conducted by Oregon Health Authority surveyors at St. Alphonse Ontario the week of August 22 is a validation audit which is a routine procedure used by CMS to verify that hospitals meet essential standards and that JCAHO is also insuring compliance with essential standards. CMS made the decision to audit the hospital several months ago and it is not directly related to the outcomes recent JCAHO survey.

Any loss of Medicare reimbursement as a result of the CMS audit would occur only after a lengthy administrative due process, and actual loss of Medicare reimbursement is rare.

Additionally, the report from the CMS audit will be publicly available approximately four to six weeks after the hospital has submitted its plan of correction, if necessary, for any deficiencies to the Oregon Health Authority.

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Nurses have reported concern to ONA that during their mandatory chart audits, a few managers have instructed them to correct the errors noted on the charts. It’s imperative that each nurse has a full understanding of the late entry policy in your hospital. If you’re uncertain what it says, you need to review it.

Additionally, the Oregon State Board of Nursing, Nurse Practice Act has several standards for dating, timing and marking “late entries” on charts. You may not change other nurse’s charts, but you may go back and make an addendum to your own notes, marking the date and time of the new entry and the corrected statement. Nurses must protect our licenses!
Hospital Sends a Warning Message to ONA: Concerned With Bargaining Tactics

In a letter sent to Becky McCay by the hospital’s attorney, the hospital management team voiced concerned that “some RN behaviors in the work place, related to their perceptions/misperceptions of the bargaining, are creating conditions which are at risk of affecting patient care.” The letter, written in generalities, gave absolutely no specific examples of concerning behaviors by any nurse, and appears to be a warning to nurses to stop talking about negotiations while at work. The hospital attorney fully acknowledged ONA’s lawful rights to bargain collectively, but then warned that the "bargaining tactics" are not to be extended into the work place where patient care is jeopardized.

Despite management’s failure to meet on several planned negotiation dates, they insisted they would like to maintain an environment that recognizes the importance of long term mutual respect and cordial communications in the working relationships that are conducted between bargaining meetings. The message went on to warn that management intends to convey this message directly to the nurses at St Alphonsus-Ontario.

ONA Legal Counsel, Alan Yoder Responds to the Hospital’s Message:

“The employer's rule prohibiting employees from discussing the current contract negotiations likely violates the law. This is because you have a legal right to discuss your terms and conditions of employment, even in the workplace. And the employer can only restrict this right under very narrow circumstances.

Specifically, to determine whether the employer’s new rule prohibiting us from discussing the contract negotiations in the workplace, the National Labor Relations Board (which is the federal agency that oversees labor relations in the private sector) considers whether the rule would reasonably tend to chill employees in the exercise of their statutory rights.

While it is important for everyone to speak truthfully about the negotiation proposals and the conditions at work, it is also important for people to be able to share those perceptions.

Otherwise how is the bargaining unit going to be able to reach a consensus with the employer about what is and is not acceptable in a contract?

Similarly, discussions about the contract campaign should be avoided in areas of patient care. However, such discussions in areas outside immediate patient-care areas are appropriate unless and until such discussions cause a disruption of health-care operations or disturbance of patients."

We believe that is the case here because the employer promulgated the rule in direct reaction to our contract campaign and is only prohibiting us from discussing issues about the negotiations, not other non-work related issues. The employer's intent is to obviously stifle any conversations about the contract negotiations, to keep you ignorant about what is occurring at the table.

-Alan Yoder, ONA Legal Counsel
What’s Happening Now?

Wednesday, September 7, 2011

ONA Executive Director, Susan King, RN and ONA Communications Director, Scott Palmer flew into Boise to meet with members of your bargaining unit leadership team and labor representative Becky McCay, RN to discuss the current situation and assist in collaboration for the future of our bargaining unit.

Wednesday, September 14, 2011

ONA’s lead organizer, Minh Nguyen will be travelling out to Ontario to meet with your bargaining unit chair, Becky McCay and members of your team. We will be making “rounds” through the hospital to introduce Minh and her services to our members. If you have a moment to take your 15-minute break, please take a moment to stop and talk with Minh and Becky. We’ll be answering questions and touring the hospital.

Thursday, September 22, 2011

Bargaining team members Tina Buetow, Bobbie Turnipseed, and Hallie Scott will be attending the ONA Bargaining Unit Leadership Day and CE Workshops in Cottage Grove, Oregon. Sessions will focus on bargaining challenges across the state and establishing strong support for campaigns across Oregon. Your team members will be meeting once again with ONA leadership for continued evaluation and planning for our negotiating campaign.

Stay Tuned to Find Out How You Can Help Participate in Our Fight For Safe Patient Care and Increased Staffing in Our Facility. We Can Only Make a Difference if We All Stand Together!

Contact a negotiating team member or Becky McCay, mccay@oregonrn.org to find out how you can help.