Our ONA negotiation committee met with management’s team last Wednesday, May 16, and opened negotiations. Management’s team is being represented by Janeen Reding, our director of human resources, Gloria Larson, our vice president of nursing, and by Teresa Howell, also from human resources. Our team carefully reviewed surveys, past grievances, and hospital data to develop our opening proposals. We are looking forward to a positive interaction with the new management team that will lead us to a collaborative collective bargaining agreement that will see our 2014 move into the new hospital.

No, we are not talking about the medically approved abbreviation STD, this time we are talking about something entirely different: Short-Term Disability Plan (STDP).

We know that some of the changes negotiated over prior years was due to a standardization of contracts and benefits known as “CHI Connect.” When owned by CHI, Baker City and Ontario hospitals saw changes in their insurance amounts, retirement structure, and also the change to STDP from an Extended Illness Time (EIT) structure. Our hospital has pushed back on some of these changes, so they could be rolled out in stages. We saw the changes to our medical insurance during our last negotiations. Now, according to Janeen, CHI says we must go to the STDP model.

So what does this look like? According to the proposal we received Thursday, all EIT banks that have been accrued up to this point, would remain unchanged for the term of employment, unless the nurse utilizes these hours. Instead of accruing EIT at a rate of approximately 55 hours per year, nurses would be covered by a STDP plan. The standard plan will cover 60 percent of our lost wages if we are off sick more than seven days. Accrued PTO and/or EIT can be used for the seven day waiting period and also to augment the other 40 percent of our wages, according to Janeen. Additionally, a nurse can buy up to Option 2, which will cover 80 percent of our missed wages for 20 weeks. At that point, Long-Term Disability (LTD) would potentially kick in.

The STDP option will be available each year in open enrollment. It would not be a requirement to buy up to 80 percent STDP, but can be elected. Nurses with very large EIT banks may prefer to keep the 60 percent coverage and rely on the EIT bank as their insurance plan. According to management, newly hired nurses will not receive any EIT accrual, but will have time available in their STDP plan much sooner than they could have accrued the EIT.

Our team is eager to have more of our questions about STDP answered as negotiations unfold.
**Flu Shot and Masking Requirements**

Many of you have asked about the recent changes to the hospital policy regarding the requirement of flu shots and wearing of masks. ONA has requested the policy change information and has advised the hospital that we believe this change may be a mandatory subject of bargaining and must be negotiated with us at the table. We are currently evaluating the specific changes from the prior policy that we believe need to be removed until we can bargain for changes.

This is a policy that we have seen arise in a few other hospitals across the state, and we are handling the issue consistently and in compliance with recent rulings regarding these policies. Please watch for more information as we work to resolve this issue.

**View Your Newsletter Online**

To view this and other important bargaining unit information anytime you want, go to www.OregonRN.org, select St. Anthony Hospital under ‘Find Your Bargaining Unit.’

**Support Your Negotiation Committee & Update Your Contact Information**

Having good communication, keeping all the nurses engaged and involved in bargaining will be critical to obtaining a good contract. This means giving bargaining updates to the other nurses you work with, and encouraging your co-workers to show their support for the negotiation committee when necessary, through coordinated activities. Many times we are not able to use employer internal email systems for bargaining communications. If this is something you can help with, please contact Becky at mccay@oregonrn.org from your personal email account or call 541-534-2249. Also, go to www.OregonRN.org and under Membership Services, select, ‘Update Your Contact Information.’

**Seasonal Influenza Vaccination for Health Care Workers**

A Portion of the ONA Position Statement from our ONA website.

Recent flu seasons and the previous threat of an H1N1 pandemic have caused policy makers to focus on programs to protect Oregonians. Individual health care facilities have implemented a variety of procedures and policies related to influenza vaccinations for health care workers that have achieved varying degrees of success; these policies have had a range of implications for employees. As Oregon’s largest group of health care professionals, nurses have seen and experienced the best and worst of this piecemeal approach to vaccinations, and are striving to propose an evidence-based, common sense solution that protects health care workers and the patients they serve.

The Oregon Nurses Association (ONA) believes that all nurses and other health care workers should be vaccinated against seasonal influenza. Vaccination is a key method of protecting health care workers from influenza and helping to prevent the spread of influenza among patients and the public. ONA is actively promoting vaccination to become immunized within the nursing profession by using social media, and electronic and print media to provide education to Oregon’s nursing professionals and student nurses and assist them in making informed choices about receiving annual influenza vaccines.

**ONA opposes requiring influenza vaccinations of nurses and other health care workers as a condition of employment.** Rather, education and access to vaccinations, when combined with other methods to prevent influenza transmission, are sufficient and effective in protecting patients and workers.

More information and the entire Position statement may be found online by visiting the ONA website at www.oregonrn.org.