ONA Convention & House of Delegates
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McKenzie-Willamette Medical Center (MCW)
Newsletter for Nurses

Dec. 11, 2017

ONA/MCW Executive Committee

Chair:
Angie Kimani, RN, WHBCC

Secretary/Treasurer:
Jeffrey “Crow” Bolt, RN, Emergency Services

Members:
Katie Mattox, RN, CVICU
Leah Emmett, RN, CVICU
Rauchel Lyons, RN, Emergency Services
Trish Jensen-Walch, RN, CVICU

NURSES UNITE IN SOLIDARITY!

More than 100 nurses and our supporters join together to protest employer’s refusal to bargain over mandatory call and noncompliant process for selecting nurse representatives to staffing committee. Read the story on page 2.

PLEASE NOTE!
ONA labor relations representative Gary Aguiar is on leave until the end of December.

If you need assistance, please contact an executive committee member, or reach out to our backup ONA labor relations representative, Christine Hauck, at Hauck@OregonRN.org.

Above and below: On Nov. 28, 2017, more than 100 nurses and their supporters gathered in the main lobby of McKenzie-Willamette Medical Center for a unity break in support of our fellow nurses. Our employer has taken actions contrary to both our Oregon Nurses Association (ONA)/McKenzie-Willamette contract and the law by imposing mandatory call without bargaining with us and ignoring ONA’s obligation to select representatives to the staffing committee.
NURSES UNITE IN SOLIDARITY!

On Nov. 28, 2017, ONA nurses at McKenzie-Willamette united to demonstrate solidarity. More than 100 nurses and their supporters joined together for a unity break in the hospital main lobby. Nurse leaders spoke positively about our joint efforts to protect our patients. Nurses from all ten departments in our hospital were well-represented, and attendees included several families and young children. Nearly one-third of our bargaining unit joined to display solidarity with our nurse colleagues.

Our employer has ignored our efforts to advocate for our patients with regard to adequate staffing on two issues. We expect the hospital to obey the law and good practice. They should listen to us, their most valued and trusted employees, who are advocating for adequate patient care.

REFUSAL TO BARGAIN OVER MANDATORY CALL

For many months, we have been trying to get the employer to bargain over a change in working conditions in Women’s Health, Birth, and Children’s Center (WHBCC). When we negotiated a new contract with the employer, they did not propose to institute mandatory call in any of the units. This summer, as part of a WHBCC unit reorganization, the employer required WHBCC nurses to take four six-hour shifts of “stork” call in their six-week schedule rotation.

At an Oct. 5 grievance meeting attended by 22 nurses from four departments, the employer refused to bargain with ONA on this issue, even though they are required to do so under federal law. We proposed a compromise: we would withdraw our demand to bargain if the employer rescinded mandatory call and agreed to a reset of the WHBCC’s unit practice committee (UPC) with fair and open elections to decide the issue. The employer refused to respond.

After many months, our ONA leaders decided nurses have been patient long enough. We are filing an unfair labor practice (ULP) with the National Labor Relations Board. This federal agency will adjudicate the issue, and we believe they will require our employer to bargain with us over this matter.

SELECTION OF NURSE REPRESENTATIVES TO STAFFING COMMITTEE

In addition, the employer continues to flaunt the Oregon Hospital Nurse Staffing Law by ignoring ONA’s obligations to oversee the election of staff nurses to our hospital’s nurse staffing committee.

Last year, ONA followed the law and elected direct care nurses as representatives to the staffing committee in a fair and open process. When a vacancy occurred this summer in

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WHBCC, we held an election in which our bargaining unit co-chair, Angie Kimani, was duly elected as the primary staff nurse representative from her unit. Inexplicably, the employer refused to recognize her as the legitimate representative of WHBCC nurses.

Then the employer proposed a revision to the staffing committee charter that strips ONA’s power to oversee the election. Without adequate notice to floor nurses, the staffing committee voted to change its charter contrary to the law.

The employer is complicit in obstructing our legal responsibilities under both state and federal law to ensure nurses’ voices are central to staffing decisions at our hospital.

We have repeatedly brought this noncompliance issue to the employer’s attention. Remarkably, they stand by their decision. The law clearly requires the union, that is, nurses organized to support each other, to oversee the selection process.

YOUR ASSISTANCE

On both these matters, we are prepared to meet with our employer to discuss the issues. We have proposed reasonable solutions that comport with our obligations under the law.

The tremendous support of nurses at the unity break and on Facebook have demonstrated nurses speak with one voice on these issues. We ask you to continue to learn and educate others about the issues.

Need more information or want to get more involved? Please contact your steward or executive officer.

Below: At lunch after the unity break, ONA executive committee member Leah Emmett (standing) explained how the Oregon Hospital Nurse Staffing Law empowers nurses to advocate for safe patient care.

Education Committee Update

The education committee has tried a few new things this year. Beginning Dec. 1, members who have reached maximum dollars and/or hours for 2017 may request up to an additional $250 dollars and/or 10 hours on a first come, first served basis, until funds/hours are exhausted. Starting in 2018, members will be expected to turn in reimbursement requests 30 days after the education event is held. In return, McKenzie-Willamette will work to ensure the paid continuing education unit (CEU) hours are available to be entered in Kronos within seven days of submitting the reimbursement request. Finally, the education committee is always looking for additional representatives to promote professional development of our members. For more information, please contact Deanne Miller (SSU/PAT).

ONA Education Representatives

Phil Johnson, ED
Connie May, PAT
Michelle French, CVU
Leah Emmett, CVU
Deanne Miller, SSU/PAT
Angee Nelson-Kelly, ACM
Jennifer Isaacs, SCU
Lori Kugler, WHBCC
Adri Chaet, Float
(ICU: open position)
Our Union Stewards

Our leadership cadre continues to grow! Today, we have 27 trained stewards prepared to assist other nurses. ONA stewards are the first line of support for bedside nurses in our relations with our employer.

We now have at least one steward on each of our ten units. Our goal is to have a steward on every shift, every day, every unit.

If you are interested in learning more about your rights under our contract and how we operate as an association, please consider getting trained as a steward. You can also attend steward training with no obligation to sign up as steward. What we really want is for our members to understand the many functions and roles of ONA at our hospital and in the state. If you decide to become a steward, that’s great! Come, learn your rights and our functions, and decide later if you want to serve.

If you’d like to know more, please reach out to any member of our executive committee.

List of Current Union Stewards

**Operating Room**
- Rene Riley, Rick Drayse

**Post-Anesthesia Care Unit**
- Amy Mack, Chris Manuel

**SCU**
- Curt Stupasky

**Short Stay, Endoscopy, Pre-Admission Testing**
- Syndee Lytle

**Women’s Health, Birth, and Children’s Center**
- Angie Kimani, Christine Frederick, Fie McWilliams, Candy Bigbee, Kathleen Jackson, Raelyn Radich

PNCC INVITES YOUR PARTICIPATION

Our contract encourages bedside nurses to recommend improvements in nursing practice through our professional nursing care committee (PNCC). Our PNCC meets monthly under the leadership of PNCC chair Leah Emmett (cardiovascular ICU) with terrific support by three other nurses: Shannon Carpani (float), Kate Morris (ICU), and Angie Nelson-Kelly (adult care medicine).

Our contract allows up to six committee members to be paid for participating in this committee. Thus, we are seeking two more nurses to join this important group. In particular, we would love to see representation from surgical services, emergency, or women’s health.

If you are interested, please contact Leah Emmett.
Nurses in short stay unit, pre-admission testing, and endoscopy (SSU/PAT/Endo) have been patiently waiting to resolve a remnant of last year’s contract negotiations. We are bargaining a side letter to increase the number of nurses who may be granted paid time off (PTO) on the same day.

Due to several hiccups on both sides, our bargaining was delayed over the summer. Syndee Lytle has agreed to serve as our lead steward on this issue. We appreciate the patience of SSU/PAT/Endo nurses, many of whom are having a difficult time using their PTO. We are hopeful we can find a deal that works for both our nurses and our employer.

We proposed and the unit’s nurses have agreed that every nurse must be fully oriented to all tasks in their assignment. Thus, they can cover nurses who are on vacation.

We recently presented a counterproposal to our employer that addresses our two remaining sticking points. First, we proposed that a minimum of four nurses should be granted vacations at one time. The employer will only agree to three. With 18 nurses on the master schedule, we think the unit can function with four nurses off. Our counterproposal agrees to a minimum of three for now. However, when the master schedule reaches 26 nurses, requests for PTO by four nurses would be approved.

Further, the employer would like to limit the number of nurses off at one time to two per shift. This would mean that morning shift senior nurse’s request could be denied while a less senior afternoon nurse’s request would be granted. We cannot agree to this provision.
Vote YES on Measure 101 to Protect Health Care Access

Oregon voters will face a decision on whether or not to protect health care for more than 350,000 children, adults with disabilities, seniors, and low-income families in a special election Jan. 23, 2018.

Measure 101 asks voters to uphold the bipartisan Oregon Healthcare Protections Bill which the legislature passed in the 2017 legislative session. Nurses, hospitals, insurers, Democrats and Republicans all supported the bill in order to fund health care and lower premiums for more than half a million Oregonians.

Voting YES on Measure 101 means protecting health care for Oregonians who otherwise couldn’t afford care and are too often forced to go to the emergency room when they are sick. If the measure fails, thousands of our most vulnerable patients will be in jeopardy of losing their health care.

It is critical we stand together to protect Oregon families by supporting Measure 101 in the Jan. 23 special election.

Learn more, get involved, and add your name to pledge to vote YES on Measure 101 at:

www.OregonRN.org/YesOnMeasure101