McKenzie Shines as Compared to Sacred Heart

Average ED wait-time is much shorter, overall patient satisfaction scores higher

Overall patient satisfaction and Emergency Department (ED) wait time at MCW compares favorably with the two Sacred Heart hospitals in the metro area, according to recent state data. Our emergency services department handles roughly the same patient workload as RiverBend, but is able to see most patients in a quarter-hour as compared to more than an hour wait at RiverBend.

Continued on page 4
Record Profits Once Again! (continued from page 1)

Meanwhile, we have monitored increased turmoil at QHC headquarters in Tennessee, where CEO Tom Miller, abruptly resigned from his position in May and cut his ties to the board of directors. A journeyman health care executive, Bob Fish, was appointed interim CEO and remains in place, presumably while the board searches for a replacement to lead the under-performing enterprise.

Last week, QHC reported a 2018 second quarter loss of $25.9 million with admissions decrease of 3 percent. QHC currently owns 28 hospitals, down from 38 hospitals two years ago when they split from Community Hospitals Systems, Inc. And the selling frenzy continues, as QHC reports they have recently sold one hospital, closed another, and have letters of intent to sell six more hospitals in the coming months. McKenzie Willamette appears to be one of the few shining stars in QHC.

QHC’s primary source of profits seems to be Quorum Health Resources (QHR), a wholly-owned subsidiary, that provides management and other services for nearly 200 hospitals, usually those in financial distress. We note QHR recently proposed to manage Sitka Community Hospital in Alaska for $454,000 annually for five years, which does not include the salaries of the two top executives and travel reimbursements! From our perspective, managing these hospitals is virtually pure profit for QHR.

Footnotes:

Know Your Rights!

Got questions about how you are treated by your employer?

This curriculum is our exciting steward training material. However, nurses are NOT obligated to sign up as a steward to attend. We want as many nurses as possible to understand their rights and how we function. Decide later if you want to serve as a steward.

Opportunities for nurses to understand our rights under our contract.

Our workshops teach you how to organize and focus nurse power!

Topics:
- Workers’ Rights
- Member Benefits
- Build Nurse Power
- Discipline and Investigatory Meetings
- ONA Structure & Activities
- Grievance Process
- Rights and Responsibilities of Union Stewards

Sessions to be held these Saturdays, 9:00 a.m. – 1:30 p.m.:
- Sept. 22 and 29 in Roseburg
- Oct. 6, 13, and 20 in Eugene/Springfield

Lunch provided by your ONA dues.

PLEASE RSVP ONE WEEK IN ADVANCE!
TEXT, CALL, OR EMAIL GARY AGUIAR: 503-444-0690 or AGUIAR@OREGONRN.ORG
Wrap Up on Recent Activities

Mandatory Call In WHBCC

We recently closed our grievance and unfair labor practice complaint against the employer for unilaterally imposing mandatory call. Nurses across the hospital showed solidarity with the Women’s Health, Birth and Child Center (WHBCC) registered nurses in a unity break and 75 percent signed a petition in support.

We reduced the total call hours and made other improvements in its implementation. For more details, see our e-mail from Aug. 24: https://cdn.ymaws.com/www.oregonrn.org/resource/resmgr/mcw/MCW_WH-Update_2018-08-24.pdf

Critical Care Merger

We continue to advocate for nurses in both our intensive care unit and cardiovascular intensive care units. The employer announced a merger to create a single critical care unit and probably use the existing Intensive Care Unit (ICU) space for a progressive care unit. We are leading a meeting between nurse leaders and the employer on Sept. 5. We have been fielding many questions. We posted FAQ and relevant portions of our contract on our website.

OHA Red Report

Our employer offered a plan of correction to address the twenty violations of the Oregon Hospital Nurse Staffing Law as identified by the Oregon Health Authority (OHA). This process is opaque, but we understand OHA rejected the initial plan of correction and our employer recently submitted a revised plan of correction. Nursing administrators were supposed to provide an update to the Hospital Nurse Staffing Committee (HNSC) at its meeting on Aug. 8, but did not. We hope to hear from nursing administrators more details about their plan to comply with the law.

HNSC Selection Process

On a related note, our employer backed away from their challenge to ONA holding the election for direct care representatives to the HNSC. We held nominations and elections in a completely transparent and open process. Nurses who were elected completed training provided by ONA. For details, see our website.

Side Letter for SSU

Short Stay Unit (SSU) nurses are still celebrating our success in their side letter now that four nurses are available to take PTO at the same time. It took us 18 months to bargain that side letter. Beginning Aug. 1, 2018, SSU Nurses are enjoying the ability to spend well-deserved time with their families and loved ones.

SSU and Endoscopy Separation

We recently reached out to the employer to bargain a side letter for Endoscopy (Endo), which will separate from SSU. The employer has agreed to two bargaining sessions on Oct. 23 and 30. After consulting with the affected nurses, our executive committee crafted a proposal that (a) ensure Endo and SSU are fully separate, (b) Endo is treated as a separate unit for call, cancellation, and standby are a separate pool and a single shift, and (c) a minimum of four nurses will granted PTO from SSU and one from Endo.

What Are Your Weingarten Rights?

In the case National Labor Relations Board vs. J. Weingarten, Inc., the Supreme Court ruled an employee who reasonably believes an investigatory interview will result in discipline has the right to have a union representative present. This is legally protected activity under the National Labor Relations Act (NLRA) and is your fundamental right as part of an ONA bargaining unit.

All nurses in ONA bargaining units have the right to ONA representation during any investigatory interview that could lead to discipline. By invoking your Weingarten Rights, you ensure you have an advocate by your side during difficult conversations. Having an ONA steward or labor representative supporting you gives you a contract expert to advise you during any conversations with management that may lead to discipline.

While we hope you never need to exercise these rights, it’s important that we all know our rights in order to protect ourselves and our coworkers.

How to Use Your Weingarten Rights

Take immediate action when you are called into a meeting or discussion you believe may lead to discipline.

• Ask the supervisor or manager who is present, “Could this meeting lead to discipline or affect my personal working conditions?”

• If the answer is “Yes,” stop the meeting immediately.

• Invoke your Weingarten Rights by saying: “If this discussion could in any way lead to my discipline or termination, or affect my personal working conditions, I request an association representative, steward or officer be present. Unless I have this representation I respectfully choose not to participate in this discussion.”

• Contact your ONA steward or ONA labor representative immediately, or call the ONA office at 503-293-0011.

• Wait for the ONA steward or labor representative to arrive or reschedule the meeting. Do not continue the meeting until your ONA steward or representative is present!

Every ONA nurse has the right to fair representation. If you have additional questions about your Weingarten Rights, contact your union steward or your labor representative.
McKenzie Shines as Compared to Sacred Heart (continued from page 1)

The Oregon Hospital Guide, which collects data directly from the hospitals, reports that Riverbend averages 49,000 ED visits annually as compared to 45,000 here at McKenzie. Yet, MCW ED patients average a 16 minute wait, while Riverbend patients average 68 minutes (see table below).

Among the many concerns we heard in our recent ED listening sessions, lack of breaks and a reluctance to take meals, are caused by a heavy emphasis on throughput. We continue to hear from ED nurses and are developing a plan to address it with nursing administrators.

For the hospital as a whole, we also note that our overall patient satisfaction score of 71 is higher than both Sacred Heart facilities and matches the state average of 71 and the national average of 71. Finally, MCW spends a pittance on annual charity costs, less than $50,000 on average in the last 3 years as compared to RiverBend (nearly $11 million) and University District (more than $2.2 million). Since nearly all of our patients have private insurance, the bulk of our charity cases enter through the ED. Surely, this contributes to the record profits noted in our article on page 1.

### McKenzie-Willamette Patient Services Compare Favorably to Sacred Heart

<table>
<thead>
<tr>
<th></th>
<th>McKenzie-Willamette</th>
<th>Sacred Heart-Riverbend</th>
<th>Sacred Heart-University District</th>
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<tbody>
<tr>
<td>Staffed beds</td>
<td>113</td>
<td>347</td>
<td>89</td>
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<tr>
<td>Average ER visits</td>
<td>45,371</td>
<td>49,019</td>
<td>30,132</td>
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<td>(in minutes)</td>
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<tr>
<td>Time in ED</td>
<td>16</td>
<td>68</td>
<td>50</td>
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<td>before being seen</td>
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<td>by a healthcare</td>
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<tr>
<td>professional</td>
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<tr>
<td>Patient experience</td>
<td>71</td>
<td>69</td>
<td>63</td>
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<td>overall satisfaction</td>
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<tr>
<td>hospital patients)</td>
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<tr>
<td>Average charity care</td>
<td>$46,103</td>
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<td>in the last three</td>
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<td>years (2015-2017)</td>
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Executive Committee News

Our ONA/McKenzie-Willamette executive committee continues to grow with the addition of Carla Colling from CVICU. Carla has been active in ONA for less than a year, but she is an experienced and well-respected nurse. She steps into an unfilled seat by applying for the position and winning the approval of a majority of our executive committee.

We continue to have one more vacancy on the board. If you know of anyone who is interested, please have them contact any executive committee member or our labor rep.

Our executive committee continues to meet monthly, usually on the first Monday of each month, 9:00 – 11:00 a.m. and usually in the Willamette Room of the Medical Office Building. All dues-paying members are warmly invited to attend.

Our upcoming 2018 meetings are scheduled for:

- Sept. 10 (second Monday)
- Oct.1
- Nov. 5
- Dec. 3