UPDATE ON WHBCC MANDATORY CALL SIDE LETTER

On Tuesday, September 29, we met with the employer’s team via Zoom bargaining a side letter on mandatory call for Women’s Health, Birth, and Children’s Center (WHBCC) nurses.

The WHBCC management team joined the Human Resources representatives on the employer’s side. This led to a very productive discussion about the issues and various options.

Unfortunately, the chief nursing officer has been unable to attend the WHBCC bargaining. Similar to when she participated in our earlier side letters, it helps tremendously to have nursing administrator(s) on the employers’ side of the table.

The WHBCC management team shared data they collected on usage of mandatory call nurses so far in 2020. (We created the chart below from their raw data). On average, the employer has used the mandatory call nurse one-fifth of the time (20.1%) from January through July 2020. The usage has ranged from 3% to 43% of the monthly shifts over that period. Only twice have they used mandatory call nurses more than one-third of the time (January and July day shift).

Usage of Mandatory Call Nurses (in Percent)

WHBCC – 2020

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<th>Days NoCs</th>
<th>Jan</th>
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Source: WHBCC, McKenzie-Willamette Medical Center

One of our central arguments to eliminate mandatory call is that usage is rather low. Their data support our contention, mandatory call is not necessary. WHBCC nurses will come in when needed.

The employer countered with a new proposal that eliminates mandatory call for all benefitted nurses. They propose a new “resource obligation” to cover call. Resource nurses would be
required to sign up for call shifts, 48 hours per month. These shifts would fulfill their credits under §3.7. We agreed to explore their proposal with resource nurses in WHBCC and in other procedural units. See their proposal here.

We offered two supposals for them to consider. In bargaining, supposals provide more flexibility than proposals. With a formal proposal, we are obligated to agree if the employer accepts our proposal. With a supposal, if the employer accepts our supposal, we are not obligated to agree to the specific language we offered. Supposals allow both sides to speak more frankly and explore options.

**Supposal Option A:**

We asked the employer to think about trialing our initial proposal which puts mandatory call in abeyance, except when the master schedule falls below a certain threshold. We proposed mandatory call may be implemented when less than 60% of benefitted positions are filled. Our supposal is that we sign a side letter to trial our proposal for one year. We are open to changes to that percentage and other provisions. If we are unable to reach a successor side letter before the one-year trial ends, we would revert to current state, where benefitted nurses are obliged to sign up for mandatory call. Our initial proposal can be found here.

**Supposal Option B:**

We also asked the employer to consider a new offer we developed as a supposal. This supposal would create a new category of resource nurse position, only for WHBCC. These “on-call resource nurse positions” would only be responsible for call shifts for the department. The current “regular” resource nurse positions would remain in existence. The draft of our supposal can be found here.

WE NEED TO HEAR FROM YOU, especially nurses in other procedural units. If WHBCC creates a resource obligation, where resource nurses are required to cover call shifts, the employer may want to do the same in other specialty units, especially in surgical services units. On the other hand, our supposal for creating on-call resource positions is a possible solution to limit excessive call shifts for procedural units. Sacred Heart Medical Center has “on call only” per diem positions in Endo and PACU.

We are scheduled to bargain again with the employer on October 16. At that time, we will hear their response to our two supposals. Also, we will respond to their “resource obligation” counter proposal.

WHAT DO YOU THINK? Contact any of our executive committee members or Gary Aguiar, our labor rep, call/text 503-444-0690 or email Aguiar@OregonRN.org

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