More Investment in Nurses & Providers!

Our Oregon Nurses Association (ONA) bargaining team proposed a number of ways to better recruit and retain nurses and providers. Some of those proposals had financial incentives.

Historically, Multnomah County Health Department (MCHD) has based wages and premiums on the mid-point average of select employers in the area they call “apples to apples” — Clackamas County, Washington County, Oregon Health & Science University Hospital (OHSU), and the Portland Veterans Administration (VA).

However, our ONA bargaining team’s message since the start of negotiations is that such a comparison does not address the issue of recruitment and retention. Too many nurses and providers are leaving; a better analysis should reflect where folks go when they leave and base comparisons on those employers.

But when MCHD came back to the table on August 1 with a financial counterproposa, they justified their rejection of most of our financial proposals because, based on their analysis of “apples to apples” employers (Clackamas County, Washington County, OHSU, and the Portland VA), they determined the following:

- Licensed Community Practical Nurses at MCHD are 12.07 percent ABOVE market
- Nurse Practitioners (NP) and Physicians Assistants (PA) are commensurate with the market (0.01 percent below, technically)
- Community Health Nurses (CHN) are 3.68 percent BELOW market
- (You can find all the data MCHD presented on the ONA/MCHD page: [https://www.oregonrn.org/page/74](https://www.oregonrn.org/page/74))

MCHD’s proposed solution for the CHNs is to do another market adjustment at ratification — to add a step and drop a step on the scale and move all the CHNs down one step number.

MCHD rejected our proposal for a 4
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percent cost of living adjustment (COLA), retroactive to July 1, 2018. Instead they proposed 3.6 percent upon ratification.

MCHD rejected our proposal for a minimum 3 percent COLA in 2019 and 2020.

MCHD rejected our proposal to change the market adjustment comparables.

MCHD rejected our proposal to include all job classes in market adjustments, regardless of which ones are found to be below market.

MCHD rejected our proposal to make sure current employees are never placed on a step below where they would be if they were a new hire, in the event of a market adjustment. They believe they have already fixed this issue.

MCHD rejected our proposal to increase shift differentials for evenings ($4) and nights ($7), which mostly affects corrections where it is already hard to staff.

MCHD rejected our proposal to amend overtime language to include 8 hours “in a twenty-four-hour period.” This mostly affects corrections health.

MCHD rejected our proposal for mandates to have at least three hours’ notice.

MCHD rejected our proposal for retention bonuses after two and four years. They say they may be working on a memorandum of understanding (MOU) for bonuses for corrections only, for a trial period.

MCHD rejected our proposal to increase automobile reimbursements for field staff.

MCHD rejected our proposal to change the Corrections Nursing Premium to 17 percent.

MCHD rejected our proposal for essential employees to make double while working during inclement weather — they countered with 20 percent.

MCHD say they care about recruitment and retention, and we would like to see their solutions. Our ONA bargaining team generated a lot of ideas and have proposed substantive ways of addressing the revolving door. We think that a greater investment in us now will help balance the scales going forward, so that MCHD no longer feels like a taxpayer subsidized training ground, where nurses and providers get the necessary experience they need to go to another employer. We want MCHD to be a place they want to stay. Not a stepping stone, but the destination!

Compared to how much they think they are saving by maintaining the status quo with wages, how much does it cost for so many nurses and providers quit after only two or three years? If nurses and providers were given better incentives to stay, how much would MCHD save in the long run? How else would MCHD benefit from being considered an employer of choice by quality nurses and providers?

We cannot win with only good arguments and data. The way to win is show administration that we are united and willing to do what it takes for a better contract. We started by signing a public petition, and our next step in an escalation of activity is writing and collecting our stories to show Multnomah County administration, elected officials, and the community that this campaign is about addressing recruitment and retention with real solutions.

Fill out your story form today! follow this link: https://www.oregonrn.org/resource/resmgr/muc/MCHD_ShareStory_2018-07-19.docx

LPNs: There is still time to take the survey about scope of practice issues

follow this link and take it today: https://www.surveymonkey.com/r/9G2FYLS