Bargaining Begins This Summer

GREATER UNITY = MORE STRENGTH = HIGHER STANDARDS

We are preparing to re-open our contract for another bargaining round this summer. Thanks to the nurse leaders who responded to our inquiry last year for your initial ideas. We had a tremendous outpouring of ideas from many nurses. We will include your suggestions in our pre-bargaining survey, which will be released soon.

Our union is only as strong as nurses are active in our organization. We have grown since our last bargaining round. Our membership has increased to 92 percent from 74 percent in January 2016 and our leadership has expanded as we grew from four stewards to 38 currently. (See the article on 2019 steward successes on page 4).

Successful Campaigns

Since then, we orchestrated two successful unit campaigns. The entire house supported the nurses in the Women’s Health, Birth, and Child Center (WHBCC) to limit mandatory call in 2017. Seventy-five percent of our bargaining unit signed a petition to address the issue. More than 100 nurses and our supporters participated in a Unity Break when we presented the petition to our employer. The employer greatly reduced call and made it more palatable for our nurses. Now, WHBCC nurses are ready to support other units.

During and after bargaining, Short Stay Unit (SSU) nurses advocated to increase the number of nurses allowed to be on vacation at one time. They attended bargaining sessions, wrote statements, and attended numerous meetings with the employer. It took more than a year, but eventually we signed a side letter that four SSU nurses will be able to take vacation at one time, instead of the prior limit on only two at a time.

How Will You Help?

As a result of these successes, we are now better able to advocate for change at the bargaining table and in our workplace. This puts us in a good position because it’s up to us. Our bargaining team can't win a good contract with only good arguments.

Our power as a union comes from our unity. Union members everywhere — including our SEIU co-workers — have shown that when we publicly stand together, we win.

What are willing to do in order to support our team and our proposals?

◆ Complete our survey — Our bargaining team needs your support by submitting a survey. Show your unity with others. It will arrive in the next couple of weeks.

◆ Attend bargaining — The single most important action a nurse can do to show their support is to visit the bargaining table. When we fill the room with nurses watching the employer, their bargaining team responds to that pressure.

◆ Serve as a CAT — We need nurses to serve as Contract Action Team (CAT) members. They act as communication liaisons between the team and our members. For more information, see the article on page 3.

Our Priorities

As much as we would like to improve everything in the contract, we want to be realistic and prioritize what is most important. Typically, we take two to four major proposals that affect the entire house to the table.

We need your help in ranking our proposals.

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We heard your concerns:

- Break nurses who take patient care tasks
- Wage increases reflecting local labor market
- Paid time for staffing plan work
- Limits on mandatory call
- Improve PTO procedures
- Respectful work environment
- Protect seniority
- Patient and staff safety are valued over profit
- Education

Which are important to you and your coworkers?

Break Nurses

Nurses have been talking about true meals and breaks at McKenzie-Willamette. Nurses have been educating each other on the law and practice. Under state and federal law, all workers are required to take meal periods and rest breaks, which is time completely away from work. The Board of Nursing has ruled that when a nurse is on a meal and break, the employer has responsibility for the patients, not the nurse on break.

Research shows that nurses who do not get breaks pay less attention to their tasks, provide lower-quality patient care, and are more likely to commit errors which could cause patient harm and endanger their licenses. Rested nurses have a positive attitude towards their work, their coworkers and their patients, which usually produce higher patient satisfaction scores.

To be clear, meals and breaks are uninterrupted time completely away from all job-related duties. It is the employer’s responsibility to ensure that a qualified nurse continues caring for the patient when another nurse is on break. Buddy breaks do not meet this standard.

Other facilities have successfully employed break nurses to guarantee nurses get all of their meals and breaks. A break nurse works six to eight-hour shifts, typically arriving at 9:00 a.m. and 9:00 pm. They perform tasks to continue care, including medication, rounding, etc.
Our Priorities

How often have you taken all of your 30-minute meal period and 15-minute rest periods where another nurse takes your patient load with no other assignment (i.e., not a buddy break)?

Our patients deserve continuous high-quality care throughout their stay. This requires a rested nurse and a representative placement to continue care with their primary nurse is on break.

Is there a plan in your unit for meals and breaks? How is information collected about breaks in your unit?

Recruit and Retain Qualified Nurses

We are experiencing widespread nurses’ shortage throughout Oregon. If we hope to recruit and retain qualified nurses at McKenzie-Willamette, our wages must be competitive in Lane County.

As the table on the above shows, a one-year nurse at McKenzie-Willamette earns about $2,400 less than a nurse with similar experience at Sacred Heart. A nurse with 25 years of experience earns nearly $10,000 less than a Sacred Heart nurse!

As the table below shows, the average McKenzie-Willamette nurse earns 5.6 percent less than a comparable nurse at Sacred Heart. This means that the average 36-hour McKenzie-Willamette nurse annually earns $5,060 less than they would at Sacred Heart. At every year of experience, McKenzie-Willamette nurses earn less than Sacred Heart nurses.

If this trend continues, McKenzie-Willamette will have fewer nurse applicants and more vacancies, which means our nurses will carry a heavier patient team. It will also mean higher nurse turnover, which means our nurses will spend more time precepting and educating new hires.

How important is to remain competitive in wages with Sacred Heart? What across-the-board annual wage increase do you think would be appropriate?

Contract Action Team

Join Our Contract Action Team

Contract Action Team members (CATs) are nurse leaders who serve as a communication liaison between our members and our negotiators. Each CAT member selects five to eight of their colleagues, typically from their unit and shift.

We provide a brief training so that CAT members can regularly dialogue with their assignees on about bargaining issues. These conversations, which typically occur during breaks or over the phone, are charted and representative orted to chief CAT, who summarizes them for our negotiators.

We would like every unit to have several CAT members, so we can hear from the entire house.

Know a potential CAT? Please contact our officers or our labor representative.

McKenzie-Willamette nurse earns 5.6% less than nurse at Sacred Heart

<table>
<thead>
<tr>
<th>Hospital</th>
<th>After 1 Yr</th>
<th>After 5 Yrs</th>
<th>After 10 Yrs</th>
<th>After 15 Yrs</th>
<th>After 20 Yrs</th>
<th>After 25 Yrs</th>
<th>Average</th>
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<tbody>
<tr>
<td>Sacred Heart (SH)</td>
<td>$38.83</td>
<td>$44.10</td>
<td>$49.32</td>
<td>$54.82</td>
<td>$57.28</td>
<td>$60.04</td>
<td>$51.17</td>
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<tr>
<td>McKenzie-Willamette (MW)</td>
<td>$37.53</td>
<td>$43.06</td>
<td>$47.74</td>
<td>$51.14</td>
<td>$54.79</td>
<td>$54.79</td>
<td>$48.47</td>
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<tr>
<td>SH - MW (in actual dollars)</td>
<td>-$1.30</td>
<td>-$1.04</td>
<td>-$1.58</td>
<td>-$3.68</td>
<td>-$2.49</td>
<td>-$5.25</td>
<td>-$2.70</td>
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<tr>
<td>MW Below SH (%)</td>
<td>-3.5%</td>
<td>-2.4%</td>
<td>-3.3%</td>
<td>-7.2%</td>
<td>-4.5%</td>
<td>-9.6%</td>
<td>-5.6%</td>
</tr>
<tr>
<td>Annual pay loss for MW RN</td>
<td>-$2,434</td>
<td>-$1,947</td>
<td>-$2,958</td>
<td>-$6,889</td>
<td>-$4,661</td>
<td>-$9,828</td>
<td>-$5,060</td>
</tr>
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</table>
Our Annual Action Representative or

In 2019, stewards have continued to successfully advocate for other nurses in disciplinary, grievance and other cases. Our expanded capacity of at least two stewards in every unit has ensured that nurses have ready access to a trained colleague to support them.

Last year, we representative orted on our three-year campaign to build our leadership structure at McKenzie -Willamette. This article overviews our 2019 successes. See last year’s newsletter Click Here, or go to: www.oregonrn.org/70 and look for the Feb. 04, 2019 newsletter.

In 2019, our stewards—supported by our labor representative —handled 27 major cases, defined as a sustained effort by a steward and/or labor representative to support a nurse on a workplace issue. While stewards assisted countless members last year in disciplinary, grievances, and other contractual matters, we only tracked these major cases.

Our expanded leadership cadre means we can take on more cases than previously. The 27 major cases we handled is a 59 percent increase from the average annual rate of 17 cases previously.

More nurses were satisfied with the outcome of our 2019 casework than previously. Last year, only six cases ended with an unsatisfactory outcome or the nurse left the employer or the department. Our 2019 success rate was 78 percent (21 of the 27 cases) as compared to a 61 percent in the period 2016 – 2018.

In 2019, stewards took care of all grievance intake and attended all Step 1 grievance meetings. More experienced stewards have taken grievances to Step 2 meetings on their own. Moreover, our stewards have taken primary responsibility for all investigatory meetings since November 2017.

Of course, our labor representative supports, coaches, and mentor stewards in both grievances and disciplinary proceedings, but our stewards use these opportunities to build power. They constantly sift for issues that are deeply and widely felt, by asking themselves two questions: (1) who else cares about the issue and (2) what are they willing to do about it?

We used our power to move the employer on both grievances and formal discipline. One sign of our increased

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power is that we file fewer grievances and win them more frequently now. In 2017, we filed 15 grievances. In 2018 and 2019, we only filed 7 grievances in each year. Our grievance success rate has jumped from 53 percent in the period 2016 – 2018 to 86 percent in 2019, when we won six of our seven grievances.

We have also resolved more cases using informal resolution. We informally resolved ten cases in 2019 as compared to the previous annual average of three. Here, too, we have been more successful than in the past, winning 80 percent of the informal cases in 2019 as compared to 63 percent previously.

See the accompanying table for the categorization of these cases. The scope of bargaining unit cases are the healthcare insurance premium increase, Endo separation side letter, PCU layoff of LPNs, and clarification that charge nurses should not engage in formal coaching.

### Limited Rounding Due to Covid-19

To reduce the risk of contagion of COVID-19, ONA field staff are limiting their entries to our facilities, especially patient care areas.

As a potential asymptomatic carrier, our labor representative could unwittingly infect patients and employees in many facilities.

As many of you know, Gary Aguiar enjoys rounding and meeting nurses. Until further notice, he will curtail those visits.

However, he is happy to connect to nurses via text/call 503-444-0690 or email Aguiar@OregonRN.org.

### Important Dates

(Locations TBD)

- Tuesday, March 31, 2020 9:30 a.m. – 12:30 p.m. Executive Committee
- Wednesday, April 1, 2020 3:00 – 5:00 p.m. Staffing Committee
- Friday, May 1, 2020 9:00 a.m. – 3:00 p.m. Executive Committee
- September 1, 2020, Our Collective Bargaining Agreement with McKenzie-Willamette expires

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**McKenzie-Willamette ONA Executive Committee invites you to attend**

**Nurse’s Week Celebration!**

Public House

418 A St, Springfield, OR

Thursday, May 7, 5 – 9 p.m.

Monday, May 11, 5 – 9 p.m.

*Drawing for a Surprise Gift to one lucky member each night!*
As more cases of the Coronavirus (COVID-19) are representative orted and confirmed, ONA will continue working relentlessly to do the work needed to keep nurses and our communities safe. We have received representative orts from frontline ONA members of suspected Coronavirus cases in at least three additional facilities, which have not yet been confirmed. We have also heard disturbing instances of appropriate practice protocol not being followed by hospital administers in multiple facilities across the state, and in Washington.

Incidents ONA members have observed firsthand include failure to mask patients with Coronavirus-like symptoms during triage, failure to supply adequate fitted N95 masks to nurses caring for patients with potential cases, and failure to maintain proper quarantine of the family and healthcare provider team of suspected Coronavirus patients.

These breaches of practice standard put us as nurses directly at risk.

ONA has worked diligently through the weekend to implement a Coronavirus response that will keep our members, patients, and communities safe. This has included:

- ONA staff traveling the state to observe protocol to facilities with suspected cases
- ONA conducting an information request to all 50+ ONA facilities to gather information on management’s plans for protecting members and enforcing practice protocols
- ONA engaging with the governor’s office around the need for any furloughed or quarantined nurses to receive paid admin leave instead of being forced to drain earned paid sick leave banks
- ONA leadership sounding the alarm about the risk to our members this outbreak presents in published interviews with NBC Portland, the Oregonian, Willamette Weekly, and Pamplin Media

To representative ort a violation of Coronavirus protocol in your facility, please email practice@oregonrn.org with as many details as possible while being mindful of HIPAA guidelines.

ONA is also asking all members to take an ONA COVID-19 Workplace Survey to help better understand the work being done by facilities across the state.

To stay up to date on the work being done and to take the COVID-19 Workplace survey, visit: www.OregonRN.org/coronavirus