Memorandum of Understanding

COVID 19

Extension

The Oregon Nurses Association (hereafter "Association") and the Oregon Health & Science University (hereafter "Employer") hereby enter into the following Extension Memorandum of Understanding in response to ongoing health concerns presented by the COVID-19 virus. This Extension Agreement shall supersede and replace the existing COVID 19 Memorandum of Understanding and original Extension Agreement between the parties.

Background:

The Employer and the Association recognize our shared interest in maintaining safe, high quality care to patients while mitigating potential exposure and illnesses to nursing staff from the COVID-19 Virus. As a result, both parties are entering into an agreement that will maximize patient/community safety, address increased patient demands, and reduce the prospect of unnecessary transfer of the virus.

Section 1 Patient/Nurse Safety & Exposure Precautions

I. Screening and Testing: The Employer has created screening and testing for COVID 19, wherein Association Represented Employees are screened based on evidence-based criteria and, if meet criteria for testing, tested for COVID-19. The screening and testing program will be reasonably available. The Employer shall absorb the cost of screening and, if selected for testing, tests for Association Represented Employees.

II. Notice and Communication: The Employer will provide all Association Represented Employees who have cared for a patient who was not confirmed but is later confirmed to have COVID-19 with written notice as soon as reasonably possible. The written notice will include: the date of exposure.

III. COVID 19/Pandemic Monitoring Task Force: The Employer will establish a task force that includes 4 Association representatives, the Employer's Chief Nursing Executive or designee and 3 other Employer representatives. The task force will meet regularly to assess the most current COVID-19 information, policies and procedures, and to raise substantiated issues regarding transparency, protection of patients and staff, individual liberty, and stewardship of resources. Thereafter, the task force may make agreed recommendations to the EOC to take appropriate actions to safeguard patients and staff.

IV. Monitoring Task Force’s Functions: The Monitoring Task Force shall include the following functions:

a. Meetings: Meetings will be scheduled as mutually agreed by the AURN President or designee and the Chief Nursing Executive or designee and shall be of a duration to share bi-directional information, input, and feedback.
b. **Scope:** The task force shall monitor safety related to COVID 19, review and assess policies/protocols and safety equipment/resources, address staffing concerns, and to issue dual communications to Association represented RNs and Nurse Practitioners.

V. **Personal Protective Equipment (PPE).** OHSU make every effort to ensure that appropriate PPE under the circumstances will be readily accessible, available, and provided to all nurses to maintain maximum safety for nurses and patients.

VI. **Quarantine, & Leave Time.** Due to the increased risk of infection and transmission that Association members take on by working in healthcare, the parties commit to encouraging sick employees to stay home from work. If nurses have fever or respiratory symptoms, they should follow the Illness Among OHSU Healthcare Workforce Members Policy.

a. **Quarantine.** Association represented employees who Occupational Health quarantines due to high-risk COVID-19 exposures at work as determined by Occupational Health, and who are not receiving time loss benefits on a workers' compensation claim, shall receive paid administrative leave for the lesser of ten days after a negative test on day 7 or 8, or until they are cleared to return to work by Occupational Health.

b. **Illness.** If a nurse becomes ill due to a workplace exposure of a potential case of COVID- 19, then they may apply for workers' compensation benefits.

c. **High Risk Employees.** An Association Represented Employee who has a health condition that the member believes would endanger the member if the member were to work their normal rotation should follow OHSU's process and Guidance for High Risk Employees.

d. **Moratorium on Discipline for Unscheduled Absences.** The Employer will not use any unscheduled absences from work due to illness for coronavirus or flu-like symptoms that present like coronavirus symptoms, for the period from March 1, 2020 through the duration of this agreement, to support any occurrences or disciplinary action. Further, during this period, the Employer reserves the right to require medical verification for use of sick leave, as outlined in the collective bargaining agreement. The employer will be judicious in these requirements in an effort to decrease exposure and use of clinics.

e. **Maximum Annual Vacation Accrued.** The ceiling for the hold bank referenced in CBA Article 11.4 will increase from 70 hours to 124 hours until September 30, 2021. Vacation accruals starting from March 25, 2020 that are currently in the over limit bank or holding bank shall remain in those banks and will be moved to the regular bank on December 24, 2021. The number of voluntary vacation cash-out hours that employees can cash-out in 2022 under Article 12.4.3 of the CBA will be increased by 100 hours or the number of hours in the employee’s excess vacation bank (holding bank plus the over limit bank) as of December 23, 2021, whichever is greater. All other voluntary cash-out criteria, timeline and procedures will be applied as outlined in Article 12.4.3 of the CBA. Hours available in the holding bank and the over limit bank in excess of 100 as well as hours available in the holding bank and the over limit bank that the employee does not request to cash-out in 2022 will be moved into the regular vacation bank. Hours over the vacation bank cap will be maintained in the holding bank.


Section 2 Staffing and Shift Pick Up/Incentives
The Employer and Association recognize the need for adequate personnel to maintain patient care and to mitigate risks associated with the spread of COVID 19. The following commitments will enhance our ability to ensure patient safety related to staffing and filling of vacant shifts during COVID 19 outbreak.

I. Staffing Levels: The Employer will consider patients diagnosed with COVID 19 virus in a nurse's department when making patient care assignments for that department.

II. ED Staffing/Prescreening. The Employer commits to taking prescreening precautions and to the extent possible, maintaining nurse staffing levels to support emergency departments which are the entry point for patients into OHSU.

III. Schedule Vacancies. Through the duration of this agreement, the Employer will attempt to fill schedule vacancy through first utilizing the incentives in the parties' Collective Bargaining Agreement (e.g., voluntary on-call, CNI, voluntary mandatory overtime). In the event of an emergency where these incentives do not fulfill staffing needs, the Association will commit to meet and bargain as soon as possible any new incentives the Employer wishes to propose.

IV. Staff Redeployment. Association acknowledges the Employer’s right to redeploy staff as needed as operational need indicates. For the purpose of this response to COVID-19 the Employer may modify work schedules and assignments as needed with only reasonable notice. Nurses may be redeployed to units, departments, and/or functions other than their current unit, department, or function that they are deemed qualified to perform. The Employer will take into consideration any personal hardships and try to modify schedules to the extent that is operationally possible.

V. Non-bargaining unit nurses. Nurses not represented by Association may perform work traditionally performed by Association-represented nurses for the duration of this Agreement, as long as such non-bargaining unit nurses do not replace or cause the curtailment/cancellation of bargaining unit nurses. Posted shift vacancies that have not been filled by bargaining unit nurses within 24 hours of the shift start time may then be offered to non-bargaining unit nurses. Immediate shift needs shall be offered first to bargaining unit nurses before soliciting others.

Section 3: Education. During the term of this MOU, the Employer's travel restriction on all business related travel shall be honored; and therefore any travel-related funding from the Staff Development Fund shall be on hold for the duration of that travel restriction. Requests for virtual courses/conferences, and/or other educational purchases shall continue to be processed. Nurses will be reimbursed for any out-of-pocket funds incurred for education which the nurse cannot attend pursuant to the Employer's policy. Nurses’ education funds from fiscal year 2020-21 will be extended for use until September 26, 2021 due to restrictions on travel that have limited use of the funds. Reimbursement requests should be submitted following the usual timeline and procedures.

Section 4: Union Meetings. The parties agree that to ensure social distancing, for any meeting in which an Association representative may attend, including disciplinary investigations, the Association representative may do so via teleconference. In such circumstances, the employee subject to investigation shall also have the right to be in attendance via teleconference.
Section 5: Duration of Agreement. The Employer and Association are committed to the following agreement through September 26, 2021 and will communicate by September 17, 2021 to discuss whether this MOU shall remain in effect beyond September 26, 2021. For the duration of this agreement, the Association wishes to maintain open communication as previously agreed to problem solve as issues arise.

OREGON HEALTH & SCIENCE UNIVERSITY
By: _________________________________
Magda Leo, Interim HR Director, Labor Relations
Date: _________________________________
08.17.21

OREGON NURSES ASSOCIATION
By: _________________________________
Amber Cooper, ONA Representative
Date: _________________________________
Aug. 17, 2021