Your ONA Bargaining Team met yesterday with PHHH management for our 17th bargaining session and the first since our historic 5-day strike. It was powerful to be joined in the room by several members showing their support and holding management accountable for their positions and behavior in bargaining.

We noticed some immediate improvements in terms of the bargaining process, including management coming to the table prepared with several proposals and a willingness to engage in meaningful conversation around additional proposals. We were able to quickly translate this into new tentative agreements on:

- Article 1: Recognition and Membership
- Article 7: Leaves of Absence
- Article 15: Seniority
- Letter of Agreement of Task Force for Health Insurance

In addition to these new tentative agreements, we were able to officially sign off on additional articles we had previously reached verbal agreements on:

- Article 16: Reduction in Force
- Appendix C (Just Updated to Reflect 2023 Plan Terms)
- New Article: Safe and Healthy Workplace

While these tentative agreements are important and helped us clear the table to focus on our top priorities, we were disappointed by the substance of several proposals offered by management yesterday:

- **Article 3: PTO** - no increase to accruals and no new movement on improving approval process.
- **Article 8: Health and Welfare** - No improvements to health plan benefits or costs. No agreement to reopener for health care negotiations. PHHH did offer some language that would facilitate more work from home opportunities during quarantine periods (so less PTO eaten up).
- **Letter of Agreement on Productivity** - Management reasserted their proposal from June 7 (and offered a closely related Article 14 Professional Care Committee proposal). They stated that they feel they have exhausted their movement and creative ideas
around this top priority. We know PHHH can still move on this topic, in part because they committed to bringing “creative” solutions when they were trying to keep us in the room in the early morning hours of June 8. We know they must still move on this topic because we cannot ratify an agreement without it. Our team is working to envision other solutions that might address our needs around productivity as a good faith effort to engage creatively.

- **Letter of Understanding Electronic Visit Verification** – Management made small movement toward us by agreeing they would not implement in January 2024 if both Oregon and Washington delay implementation beyond this date. They also provided improved language around not using extraneous collected data. However, they continue to insist EVV is used for ALL Home Health visits when the law requires it for a vanishingly small fraction of them. We continue to resist this overreach. We’ve requested that an IT professional attend our next session to directly answer many questions we have about the proposed EVV tool.

While management did not bring proposals on Appendix A & B (the core wage articles), Article 13 (Professional Development), and the MOU on Clinical Ladder and RCAP, they did say they anticipate having these proposals for the next session. Promisingly, management indicated they would move toward our structure of a single wage scale for RNs, PTs, OT, and SLPs. They also finally acknowledged that the wage ranges in Genesis are specific to Portland and values they will have to reckon with in their proposals. They strongly indicated they will do real work on the top end of the wage scale to address this. If both of these moves are made—and retro, bonuses, and RCAP changes are appropriately handled—we could be much closer to agreement on wages than we were pre-strike. We won't know until we see it in writing, though.

Our team was able to turn around a counterproposal on **Article 5: Hours of Work** that would:

- provide greater protection for non-standard workweeks (e.g. 4 10s);
- lock in the current frequency of weekend work as a maximum and require negotiation around proposed increases; and
- maintain current practice around scheduling of weekend work for PTs.

These changes are in addition to already agreed upon improvements to language around caseload guidelines, overtime approval, and more. There are many topics addressed in Article 5 that we would have liked to make more substantial improvements around, but in the interest of moving toward resolution on our top priorities, we were willing to fall back to current contract language around topics such as the definition of an alternate assignment.

Overall, we were heartened by some process improvements and to see that management did not take the aggressive and punitive stance they suggested they would in the lead up to our strike. That said, we are still far apart on our key issues: wages, productivity, PTO, EVV, and health insurance benefits.

We meet with the PPMC and PSH bargaining teams tomorrow night to compare notes and strategize together. We feel stronger than ever coming off our strike, and we know we will win a strong contract agreement. We hope PHHHH makes that possible without the need for further escalation.