On Monday, Nov. 13 and Friday, Nov. 17, we met for our third and fourth bargaining sessions. We tentatively agreed to two proposals on:

- **The Grievance/Arbitration article:** Nurses are now encouraged to discuss issues with their supervisor before filing a grievance. *There is still a 14 day window to file from when the nurse became aware of the issue.* We added language to clarify when step 1 of the grievance procedure can be bypassed.

- **Certifications:** Adds 4 new certifications that qualify for the $2.25 per hour differential:
  - Sexual Assault Nurse Examiner (SANE)
  - Oncology Certified Nurse (OCN)
  - Cardiac Rehabilitation (CCRP)
  - Progressive Care (PCCN)

We made a third proposal on Article 4, Work Schedule and Overtime. This article encompasses several items, including, but not limited to, when the schedule is posted, the order that nurses are input into the schedule, overtime provisions, trades, and low census. Management countered this proposal again on Friday. We have made some progress on a few items. *Since this article is so important to a nurse’s work/life balance, we will be carefully reviewing this article and will likely be countering it for a fourth time when we meet in December.*

On Monday, we proposed language amendments to the Seniority and Layoff article, as well as the Job Bidding article. *This language is reflective of the majority results from the seniority survey that we sent out in late October.*

- For nurses hired Jan. 1, 2018 or thereafter: Seniority means length of continuous service calculated from hire date into a nursing position (RN, LPN, CNA) with the Hospital at any Providence location in the Columbia Gorge Service Area.
- For all nurses hired prior to Jan. 1, 2018, the current contract language applies:
  - Seniority means length of continuous service in the Providence Columbia Gorge Service Area in any capacity.
- Added language for Intra- and Interdepartmental transfers:
  - *Intradepartmental transfer:* “The qualified senior nurse who applies for the vacancy will be offered..."
the position provided that such nurse has the required skill and ability to perform the position at the time such position is assumed…”

◊ **Interdepartmental transfer:** “The hospital shall consider factors on both required and preferred qualifications, history of job performance and the interview. In the event that two or more candidate’s qualifications are substantially equal, the position will be awarded on the basis of seniority…”

Management countered the job bidding article. We are carefully reviewing it to make sure that it is in alignment with the survey results.

On Friday, we proposed new wage scale that included:

- A 6% increase to the starting step up through step 10 that would go into effect 1/1/2018 for full time, part time, and casual call (soon to be called “per diem”) nurses.
- A 5% increase to step 11 up to the 30th step that would go into effect 1/1/2018 for full time, part time nurses and per diem nurses.
- 10 additional steps to fill in the gaps on the scales: 6 year, 9 year, 12 year, 15 year, 17 year, 18 year, 21 year, 23 year, 24 year and 26 year.
- A 3% increase across the board that would go into effect 1/1/2019

We did a wage comparison with all the Providence hospitals and other bargaining units in the greater Portland metropolitan area. This proposal would put the nurses more in line with what the Portland area nurses receive.

In addition, we proposed updated language to the Home Health and Hospice article on three items:

- Starting the evening shift differential time at 3 p.m. (it’s currently 6:30 p.m.). This puts the Home Health and Hospice nurses in alignment with the Hospital nurses.
- **Standby/Call Out:** Adding language that clarifies the two-hour minimum for the time and ½ premium. *This pay would now apply to every callout.*
- Reimbursement for continuing education and licensure fees to maintain your Washington license.

We have not received any counterproposals on our economic proposals yet. Our next two bargaining sessions are scheduled for Dec. 11 and Dec. 15. If you are interested in being an observer at either of these sessions, please contact your labor representative, Jocelyn Pitman at pitman@oregonrn.org.

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**Vote YES on Measure 101 to Protect Health Care Access**

Oregon voters will face a decision on whether or not to protect health care for more than 350,000 children, adults with disabilities, seniors, and low-income families in a special election Jan. 23, 2018.

Measure 101 asks voters to uphold the bipartisan Oregon Healthcare Protections Bill which the legislature passed in the 2017 legislative session. Nurses, hospitals, insurers, Democrats and Republicans all supported the bill in order to fund health care and lower premiums for more than half a million Oregonians.

Voting YES on Measure 101 means protecting health care for Oregonians who otherwise couldn’t afford care and are too often forced to go to the emergency room when they are sick. If the measure fails, thousands of our most vulnerable patients will be in jeopardy of losing their health care.

It is critical we stand together to protect Oregon families by supporting Measure 101 in the Jan. 23 special election.

Learn more, get involved, and add your name to pledge to vote YES on Measure 101 at: