

June 5, 2017

Providence Milwaukie Hospital (PMH)

BARGAINING UPDATE #4



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Bargaining Team Seeks Your Input!

Our bargaining team met with the Providence Milwaukie Hospital (PMH) team on May 30 and continued to prioritize patient safety and staff retention proposals. PMH rejected many of our proposals, most notably those that pushed for the installation of patient restraint beds in each seclusion room, those that made more nurses qualified for an extra shift differential, and the incorporation of an objective acuity measurement into all nurse staffing decisions. PMH also rejected our proposals to prohibit charge nurses from taking a patient assignment, a cap on mandatory MDO, and more paid time for the PNCC volunteers (who dedicate a lot of energy to bettering the Hospital). PMH has also been unwilling to either compensate the bargaining team for some of their time at the table or to provide an opportunity for other nurses to donate PTO to assist the bargaining team in supporting their work. Thus far, the bargaining team has collectively put in approximately 288 hours.



PMH also appears to be pushing for language that would limit our ability to take extra shifts with the differential on weeks that we use PTO, even though it is helpful to PMH for us to work on weeks that we are supposed to have much-needed rest or otherwise attend to our personal lives. We strongly believe that we should continue to

receive the extra shift differential if it is a shift above and beyond our scheduled hours, regardless of whether we take PTO.

In response, our ONA team continued to advocate for adequate staffing for optimal patient care. We made many proposals that seek to address our issues around missed meals and breaks. We want to do more to penalize the hospital's repeated failure to provide breaks, which is illegal, by requiring that it pay the nurses double time for the amount of the break or meal that was worked through. Moreover, we proposed that the replacement nurses for

breaks be assigned a safe patient load as deemed under the staffing plan. Additionally, it is essential to retain our highly-skilled nurses in order to lessen the high turnover we have seen. Therefore, we also proposed to receive four weeks advance notice of our work schedule, to establish the right to a regular schedule after five years of continuous employment, and to establish a new weekend differential.

The chart on pages 2-3 is a summary of more major proposals and PMH's responses.

For a detailed look at all of the proposals made by our team, see the [Proposal Tracking Form on our ONA website](#).

Do Your Part to Win a Fair Contract!

Fill out [this survey](#) to help our bargaining team prioritize our issues. It can be completed in less than 10 minutes. **The deadline to submit your response is Monday, June 12 at 3 p.m.**

Wear your ONA button on Tuesday, June 13 to show support and solidarity with our bargaining team's efforts during our next scheduled bargaining session!



Issue	ONA Proposal	Management's Response
Scheduling	Increase advance notice of schedule from 2 to 4 weeks.	5/9: Rejected 5/9: ONA re-proposed 5/30: Rejected 5/30: ONA re-proposed
Regular Schedules	Establish right to a regular schedule for all nurses with 2-years continuous employment.	5/9: Rejected 5/9: ONA re-proposed 5/30: Change language to put proposal responsibility on nurses 5/30: Re-proposed changing to 5 years' employment and language changes
Holiday Pay	Increase holiday premium pay from 1.5 to 2 times the nurses regular rate.	4/25: Rejected 5/9: ONA re-proposed 5/30: Rejected
PTO Donations	Eliminate requirement for nurse to maintain a minimum PTO balance	4/25: Rejected 5/9: ONA re-proposed 5/30: Rejected
PTO Donations	Allow PTO donations to Negotiations Committee for negotiations purposes. Donations to be returned if unused. Will re-propose.	4/25: Rejected 5/9: ONA proposed management pay for bargaining team time 5/30: Rejected
MDO Limit	Limit MDO to 8 hours per week and 144 hours in the calendar year.	5/9: Reject, ONA re-proposed 5/30: Rejected
PNCC	Allowing 3 hours per month instead of 2	5/30: Rejected

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Issue	ONA Proposal	Management's Response
Hospital Equipment	Prior to June 1, 2018, the Hospital shall replace all fabric upholstery in patient care units with nonporous surfaces, surfaces that can be cleaned/ disinfected easily. Prior to June 1, 2018, the Hospital shall repair all cracked and broken counters and table tops in patient care units. Prior to June 1, 2018, the Hospital shall install patient restraint beds in each seclusion room.	5/30: Rejected
Hospital Staffing Plan	Require Hospital to incorporate an objective patient acuity measurement into all nurse staffing decisions	5/30: Rejected
Charge Nurses	Charge nurses working on units with more than six (6) licensed beds will not be required to take a patient assignment. Charge nurses shall have independent authority to limit admissions and/or call in additional staff when necessary, in their discretion, to maintain safe patient care.	5/30: Rejected
Orderlies	There will be a minimum of two (2) orderlies staffed at the hospital at all times	5/30: Rejected
House Supervisors	There will be a House Supervisor on duty at all times when any unit is open	5/30: Rejected
Clinical Ladder Pay	Increase Clinical Ladder pay from \$1.50/hour to \$2.00/hour at Level 1, from \$2.50/hour to \$3.50/ hour at Level 2, and from \$4.00/hour to \$5.00/hour at Level 3.	5/30: Rejected
Appendix E	PACU standby and Call Back	5/30: ONA proposed additional revisions

Don't Miss Important ONA Emails

ONA wants to make sure all members receive timely communications, ensuring you have the most up-to-date information on your contract, bargaining issues, upcoming votes, nursing research, practice issues and workplace policies. If you are not receiving ONA emails ONA, we can help.

First, check to make sure ONA emails are not being filtered into a junk, spam or clutter folder. Many email providers, like Comcast, Yahoo and Gmail, have built in Spam/Junk filters or blockers. The filters are intended to prevent you from getting junk mail or spam, but it can also unintentionally block emails you want to receive. If ONA emails are in one of these folders, flag them as "not junk" and add News@OregonRN.org to your safe sender list.

If there are no ONA emails in those folders and you still aren't receiving ONA emails, there are various causes listed to the right.

You can fix most problems by simply emailing ONA at news@oregonrn.org with your name, personal email address and the name of the facility you work at in the body of the email.

We will update our records to ensure you don't miss future ONA emails.

Common Reasons for Not Receiving ONA Emails

1. **Mislabeled:** Emails from ONA are being flagged as junk or spam by your email service provider
2. **No Email:** ONA does not have an email on file for you
3. **Bad Email:** ONA has an incorrect or outdated email on file
4. **Blocked:** Due to several failed delivery attempts, our system has stopped attempting to send emails to your email address.
5. **Opted Out:** You have opted out of receiving emails
6. **Work Email Filters:** Some health care systems filter out ONA emails so nurses don't receive ONA-related emails. This is why we encourage nurses to use their personal email addresses instead of work emails.



Fixing Problems to Receive ONA Emails

1. **Check your junk/spam/clutter folder for ONA emails:** Flag ONA emails as "not junk/spam" and add news@oregonrn.org to your safe sender list.
2. **Email ONA:** to fix reasons 2-6, simply email ONA at News@OregonRN.org, and include your name, personal email and facility you work at in the body of the email.

Important ONA Nurse Resources

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