By the time most people will get to this newsletter, the New York Times article about the amount of money given to hospital systems, including Providence, during the pandemic will have been shared around the region (https://nyti.ms/2zsLuN2).

Providence has responded to the article, claiming it did not reflect the facts and is not housed in a context of reality. The bottom line is that the Providence system has come to two of our negotiation sessions and stated clearly that there will be no raises. They want a shortened contract and Providence is looking for take backs. This threat to these smaller non-metro nurses is a threat to all.

**ONA’S RESPONSE**

The Providence Health System is one of the wealthiest hospital systems in the world. Providence is a multibillion dollar organization that has received hundreds of millions of dollars of public bailout funds just this spring.

Despite being one of the richest hospital systems in the world, frontline healthcare workers across Providence are being asked to bear the brunt of lost profits from temporary closures of elective surgeries and procedures during the COVID-19 pandemic.

Providence is so wealthy that its venture capital fund alone generates more than $1 billion in profits every year. **With more than $12 billion cash on hand, Providence must put essential workers in a pandemic before profit margins.**
Track Your Paychecks

Now more than ever, members need to understand the collective bargaining agreement to identify contract violations or other concerns.

Check your paychecks to be sure they are correct. Review your rates of pay, leaves, leave balances, and any of your benefit totals. If you have any questions about taking leave, your pay, working conditions or any benefits, contact your steward or a bargaining unit officer and ask if the new practice or omission is right. If not, you need to take the concern to human resources for discussion and correction.

We are getting many reports of administration making payroll mistakes. When we bring the issues forward the message is, “the situations can only be corrected on an individual basis,” so if you have a question or need to make a correction to your paycheck, the issue needs to be taken to human Resources for correction or explanation.

SENORITY LIST

Our seniority is based on hours worked and our contract requires that list be posted on the nursing website every January and July. These lists have been inaccurate and posted months late for over a year.

Management has agreed to send out the list to nurses by email in addition to posting it, along with instructions on how to check your hours worked in Kronos and who to contact if you find a discrepancy. We should see this happen in July when the next list is posted. Please let us know if you find a problem and how it is handled.

Med Surg Break Nurse

In our last contract negotiation we made an agreement for a work group to discuss rest and meal breaks on med surg. It is frequently difficult for med surg nurses to consistently and safely take their breaks using the current buddy system.

Several med surg nurses met with management and came up with a 90-day pilot program for a break nurse. This program was delayed due to COVID-19, but is getting back on track and expected to start some time in June.

Thank you to everyone for your hard work, consistent missed breaks reporting and continued support for each other. You should be hearing details on your unit soon.

TASK FORCE? WHAT IS THAT?

Every month we meet with administration, including the CNO and human resources, to address issues that are important to our members.

If you are having a problem on your unit that has not been resolved despite talking with your manager, seek out your unit rep and we may be able to work on it in the next task force meeting.