How to Protect Your License
In This Time of Emergency Short Staffing

Here is a simple guideline from OSBN

What does the Practice Act identify as required of all nurses?

► Comprehensive assessment.
► Development of a plan of care to identify risks and goals regarding your clients, be that client an individual, a group, a community, nurses who make up a nursing unit, etc.
► A plan to mitigate risks and obtain achievable goals during the encounter. That encounter may be a single visit, a procedure, a day, lengths of employment, ongoing.
► Prior to the nurse taking on the assignment under their license the nurse must verify that they have the knowledge, ability, skills, competencies, and resources to deliver safe patient care.
► Numbers and geography of patient are not a guarantee of patient safety. The nurse must individually determine if the assignment is safe based on their assessment of their clients.

If the assignment is deemed unsafe the nurse must activate the chain of command stating the issues with the assignment in writing to management and supervisors and state that you are not able to accept. For example 5 patients, but not 7. This will protect your license and maintain standards of care.

See more at OSBN: Article 45 Standards of Scope and Practice: https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrsnRsn=216348
Short Staffing

Today every nurse in Oregon has an unsafe staffing story, and most nurses experience the implications of unsafe staffing every single day. Hear from nurses from across the state who are telling their stories – stories that will help educate the public and inform legislators about the real world, day-to-day impacts of Oregon's current nurse staffing crises. Learn more at: https://www.oregonrn.org/SafeStaffing-stories.

You can also share your own story by visiting: https://www.oregonrn.org/nursingstories

Genesis Update and Payroll

ONA is continuing to pursue the class action lawsuit with Providence around the multiple wage issues across the state. If you are struggling with issues with your pay and you have worked with your leads and managers but the issues still aren't resolved please contact your labor rep and we will take action to resolve them or your case may be added to the lawsuit. You have a right to be paid correctly. Review your paycheck with a fine tooth comb because people are still finding errors.

Paid Family Medical Leave

Oregon's Paid Family and Medical Leave Law goes into effect in 2023 and will provide 12 weeks of paid leave for welcoming a new child, your own serious health condition, or to care for a family member. Employers can choose to participate in the state plan or offer an equivalent of their own. Under the law, about 2/3 of wages are replaced. It renews each year, unlike other accrual-based leave benefits, and union members have the right to negotiate higher standards before the law takes effect.

The law is a huge victory by workers and unions to provide paid leave to all Oregon workers. However, the law is a minimum, and employers must negotiate with us over the benefit and any changes it could create to our current benefit structures. Our power remains with the irreplaceable value of our nurses' work, and our union intends to make improvements through the strength of ONA RNs!

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Paid Family Medical Leave

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Nurses Uniting to Raise Standards

Your elected ONA RN leaders from across the Providence Oregon system identified the priorities. Together, they will initiate negotiations with Providence over paid family and sick leave. Our priorities are:

► Fully Paid Leave: Oregon’s most extensive health system making $4 billion in annual revenue can pay 100% of RNs’ wages while on leave!

► Providence Covers Employee Contributions: Providence may begin deducting 0.6% from employees to support the new paid leave program, amounting to about $2 million dollars of diverted wages for ONA RNs across Providence. Other hospitals have already committed to their RNs that they’ll cover the cost. It’s time for Providence to do the same.

► Paid Leave Available Right Away: Providence lags other health systems in the amount of leave we can use on day one. Oregon’s most extensive health system needs to address this disparity.

► PTO Up to Market Standards: Providence remains behind the market for total hours of accrued paid time off in our contracts. Let’s change it during these negotiations. We have proposed increased accruals of between 20-56 hours per year, depending on years of service.

Spotlight on Leadership

Sean is a dedicated father, husband and RN leader who has worked with PMMC since 2019. Sean has been a staunch advocate for nurses dealing with practice and working conditions as well as the pay issues that continue with Genesis. Sean is currently working on an association grievance to make sure the nurses in the OR who are per diem are compensated with certifications and differentials appropriately. Sean is passionate about RN’s working together in solidarity to advocate through the contract and labor law. The best way to make your union stronger is to become active in the leadership.

Please consider joining the Executive Committee!

ONA Executive Committee Openings

There are two positions open.

Membership Chair
Grievance Chair

Link to positions: https://www.oregonrn.org/PMMC
Providence Action Statewide

Providence Medford is the third largest Providence Hospital in Oregon. There are ten Providence facilities in Oregon and they are all unionized with ONA. The ONA has begun coordinating and working together on issues that effect all Providence systems and meet regularly at a statewide table. Your Vice Chair Vicki Knudsen has been working over this past year with leaders at the statewide bargaining table and advocating for Providence Medford RNs at this table. There is an action this Friday to advocate for safe staffing at Providence Headquarters and every Providence RN is welcome.

Join us Friday, January 20 at POP (Providence OR HQ) and rally to protect Providence nurses. Show Providence that nurses from Seaside to PMMC to Providence Home Health & Hospice (and beyond) are united for fair contracts, safe staffing and working conditions, and paid leave to care for ourselves and our families.

RSVP
[www.oregonrn.org/event/2023ProvRally](http://www.oregonrn.org/event/2023ProvRally)
Weingarten Rights

Forty-seven years ago, on Feb. 19, 1975, the Supreme Court ruled that an employee has the right to request union representation in any meeting that they feel could result in discipline or termination.

You Are Being Asked Questions That Might Lead To Disciplinary Action: What Do You Do?

If you believe that discipline will result from a meeting with management/administration (in legalese, “an investigatory interview”), you can insist that a union representative be present during this interview. This is part of your “Weingarten Rights,” which references the 1975 United States Supreme Court case NLRB vs. Weingarten. Weingarten Rights apply only to members of a collective bargaining unit and are among the many benefits of having a union.

When an investigatory interview occurs, the following rules apply:

Rule 1: You must make a clear request for effective union representation before or during the interview. Often an employee may not know at the outset that a meeting with management could lead to discipline. If such a meeting is or becomes an “investigatory interview,” you should assert your right to have a union officer of your choosing present. You cannot be punished for making this request. (Note: If the union representative of your choice is not available in a reasonable time period, it may be necessary for an alternative union officer to represent you.)

A typical Weingarten request would be: “If this discussion could in any way lead to my being disciplined or terminated, or affect my personal working conditions, I respectfully request that my union representative be present at this meeting.

Until my union representative arrives, I choose not to participate in this discussion.” Or you may simply say, “I want my union representative here.”

Rule 2: After you make this request, the interviewer has three options:

A. Grant the request and delay the interview until your union representative arrives and has a chance to consult privately with you. (Note: The right to representation is the right to effective representation, which translates in this rule as the right to consult privately with the representative before the interview. The union representative should also know what the meeting is about ahead of time so that they can effectively advise you.)

B. Deny the request and end the interview immediately; or

C. Give you a choice of: (I) having the interview continue without representation or (II) ending the interview. (Note: It is not wise to choose the first option.)

Rule 3: If the interviewer denies your request and continues to ask questions, this is an unfair labor practice. You have the right not to answer any questions until you have union representation. You cannot be disciplined for refusing to answer the questions, but you are required to sit there until the supervisor terminates the interview. Leaving before this happens may constitute punishable insubordination in some cases.

The ONA represents all RNs of the bargaining unit, both those who pay dues and those who do not, and is obligated to come to your aid without prejudice. If you are summoned to a meeting with a member of administration and discover that it is an “investigatory interview,” assert your right to have a union representative present.
ARTICLE 17 – PAID TIME OFF

17.1 Paid Time Off. The Paid Time Off ("PTO") program encompasses time taken in connection with vacation, illness, personal business, and holidays. Except for unexpected illness or emergencies, PTO should be scheduled in advance.

A. Accrual: Effective May 23, 2021, regular nurses with a FTE status of 0.9, which includes those with work schedules consisting of three (3) days each week, with each workday consisting of a 12-hour shift, or four (4) days each week, with each workday consisting of a 9-hour shift, will accrue PTO as follows:

<table>
<thead>
<tr>
<th>Years of Service</th>
<th>Accrual per Hour Worked*</th>
<th>Accrual per Year**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 3 years</td>
<td>0.1004 hours</td>
<td>188 hours</td>
</tr>
<tr>
<td>3 to less than 5 years</td>
<td>0.1122 hours</td>
<td>210 hours</td>
</tr>
<tr>
<td>5 to less than 10 years</td>
<td>0.1197 hours</td>
<td>224 hours</td>
</tr>
<tr>
<td>10 to less than 15 years</td>
<td>0.1314 hours</td>
<td>246 hours</td>
</tr>
<tr>
<td>15 or more years</td>
<td>0.1389 hours</td>
<td>260 hours</td>
</tr>
</tbody>
</table>

17.2 Above will include only hours directly compensated by the Medical Center, and mandatory days off, and will exclude standby hours, hours compensated through third parties, hours paid in lieu of notice of termination, overtime hours or hours while not classified as a benefit-eligible nurse. A paid hour includes hours taken as PTO and EIT. Notwithstanding the prior provision, a nurse will not accrue PTO on any hours above 2,080 per year.

17.3.1 Effective the pay period following, the Medical Center will permit nurses to accrue PTO on all MDO hours, even if the nurse otherwise works his/her FTE in that workweek.

17.4 Pay. PTO pay will be at the nurse's straight-time hourly rate of pay, including regularly scheduled shift differential at the time of use. PTO pay is paid on regular paydays after the PTO is used.