Nurses Reach Tentative Agreement at PPMC!

ONA Nurses in Providence Bargaining Units,

To strengthen our solidarity throughout the Providence system, we are sharing information about contract negotiations at Providence Portland Medical Center (PPMC) and Providence Willamette Falls Medical Center (PWFMC) with all nurses at Providence units throughout the state.

Here’s what you need to know about what’s going on within the Providence system.

Congratulations to the ONA nurse bargaining team and nurses at Providence Portland Medical Center (PPMC) who successfully reached a tentative agreement (TA) Thursday, April 18. Following a marathon 17-hour bargaining session, productive discussions with management ultimately led to a TA which the ONA bargaining team at PPMC is bringing forward for a ratification and recommending a “Yes” vote.

The specifics changes in PPMC’s TA are included in the table below. Highlights include a 10.25 percent wage increase over the 4-year life of the contract. PPMC management clarifying that paid time off (PTO) used during the 7-day waiting period for short-term disability (STD) insurance will not exceed the nurse’s full-time employee (FTE) equivalent. The nurse team also negotiated mandatory day off (MDO) caps, a new differential for float pool nurses, increases to per diem differentials, increase to the standby differential, and improvements to extended illness time (EIT) use before EIT is replaced with short-term disability (STD).

A special thank you to all the PPMC nurses who attended bargaining sessions—you helped us get this TA! Nurses packed the room to show their support and solidarity. Nurses’ support, enthusiasm and unity helped make this an overall success for our bargaining unit as well as for the nurses and staff throughout the Providence system.

ONA nurses at PPMC will hold a ratification vote on the tentative agreement from May 3 – May 10.

Learn more about the tentative agreement at PPMC – Click Here to view online or go to www.OregonRN/81 and follow the link.
# Tentative Agreement: Changes to the PPMC Contract

<table>
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<tr>
<th>Topic</th>
<th>Agreed-Upon Changes</th>
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| **Article 2 Definitions** | • Definitions for Fellow & Resident – brought into the contract  
  • Per Diem scheduling language moved to Article 9 Scheduling |
| **Article 3 Dues** | • Transfers either join ONA or pay a fair-share fee - brought into the contract  
  • Nurses who accept a position outside of the Bargaining Unit (BU) but then return to a BU position, will either join ONA or pay a fair-share fee - brought into the contract |
| **Article 5 PTO Scheduling** | New PTO accrual rate and scale - increases on most steps.  
  To make whole, at the beginning of years 2020 and 2021, additional PTO hours to be deposited into the banks of nurses at years of service 4, and 9-14 – these are the steps that have a reduced PTO accrual from our current scale  
  3 vacation scheduling periods instead of current 2  
  Clarify - PTO utilization calendar to facilitate vacation scheduling  
  Clarify - Notice of resignation is 2 weeks |
| **Article 6 Holidays** | Surgical Services not required to use PTO when closed on holidays |
| **Article 7 EIT** | • Freeze EIT accruals at end of 2019  
  Allow EIT usage in 2020 and 2021 as follows:  
  - Top up short-term disability pay to 100%  
  - Top up paid parental leave pay to 100%  
  - Top up workers compensation pay to 100%  
  - Use to care for a family member when on approved FMLA/OFLA leave after using only 24 hours of PTO – no longer need to exhaust PTO bank to access EIT  
  - Use for illness absences of less than 7 calendar days, after PTO for 3 missed shifts or 24 work hours – current practice.  
  - For illness absences longer than 7 days, can use for missed scheduled shifts, regardless of STD approval or denial  
  - In 2022, can use EIT for qualified FMLA/OFLA leaves only - after 3 missed shifts or 24 missed hours |
| **Article 9 Scheduling** | Nurses will not be scheduled by the Medical Center to work more than 3 consecutive 12-hour shifts, but nurses may voluntarily self-schedule to work more than 3 consecutive 12-hour shifts.  
  Unit based scheduling clarification - a shift on a unit can do unit-based scheduling, does not need to be entire unit – Task Force to take up this matter  
  Task Force receives notification rather than gives approval for unit-based scheduling |

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## Changes to the PPMC Contract  *(continued from page 2)*

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<th>Article 10 Floating</th>
<th>Nurses will not be required to float to more than 2 distinct patient assignments per shift</th>
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| Article 11 Staffing Committee | SRDF’s continue to go to Staffing Committee co-chairs  
Increase member nurses time paid on the committee to 12 hours quarterly  
Increase co-chair paid hours to 16 hours quarterly.  
Change name to Hospital Nurse Staffing Committee  
  - Remove advance request to attend HNSC  
  - Removing requirements to be on committee |
| Article 12 Employment Status | Discipline may be removed after 4 years if no further discipline occurs, with approval of HR and CNO |
| Article 13 Restrooms and Lockers | Each unit will have a mechanism for mail delivery (mailboxes or file cabinets) |
| Article 14 LOAs | Removed requirement to exhaust PTO before using EIT for FMLA/OFLA leave |
| Article 15 Health Insurance | Add prophylactic treatments, when indicated for exposure  
New EPO health plan, detailed in Appendix D  
Short-Term Disability insurance plan provided by employer – 65% benefit before taxes.  
Available to 0.5 FTE and above.  
Waiting period e.g. for a nurse with a 0.9 FTE: 36 hours or 7 days, whichever comes first (hours or days) after the first missed shift  
Ability to use multiple occurrences of STD in a year, (each one starts over with the 25 weeks), if the 25 weeks is extended into LTD, COBRA will be offered/available for health insurance.  
6 weeks Paid Parental leave for fathers, non-birth mothers, adoption and foster placement. Birth mothers currently receive 8 weeks, now have a total of 14 weeks |
| Article 17 Association Business | Nurses on ONA business will give notice for schedule changes before schedule cut-off, when possible  
Seniority list will be provided 3x a year |
| Article 20 Professional Development | Removed 2 schedule request period requirement for requesting education time  
New language in Article 24 regarding relief for completing mandatory education |

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### Changes to the PPMC Contract  *(continued from page 4)*

| Article 22 Seniority | Consistency in leaving/returning to bargaining unit for all nurses (including moving to management) – leave and return within 12 months to preserve seniority – brought into the contract  
Seniority lists 3 x a year  
Clarify Fellow and Resident job postings are addressed in overall seniority definition |
| Article 24 Low Census | Cap on Mandatory Low Census of 24 hours per 4-week scheduling period, annual cap of 168 hours (14 12-hour shifts or 21 8-hour shifts), with agreement to revisit annual cap limit in Task Force  
Prior to Mandatory force off, nurses will be offered alternate assignments within nursing services, if they so choose |
| Article 27 Duration | 4-year contract- December 31, 2022 |
| Appendix A | Wages: 2.75% increase upon ratification with retroactive pay to beginning of 2019, 2.5% increases in each of the three remaining years  
Per Diem differential in lieu of benefits increased to $4.00 if <30 years at PPMC / $6.00 if >30 years  
Extra Shift differential – clarify that this is still paid in the event the extra shift converts to a standby shift  
Float Pool differential of $1.25/hour - brought into contract |
| Appendix B Standby On Call | Increase stand by on call pay to $4.75 |
| Appendix D Medical | Modest changes to premiums  
Addition of EPO plan |
| Letter of Agreement – RN Care Managers | • Care Managers to be brought fully into contract, with wage and seniority parity |
| MOUs for Operating Room, Emergency Department, and Maternity | • Changed language regarding PTO scheduling to reflect the move to three scheduling periods per year.  
• Added language to ensure that utilization calendars are made available and visible throughout the scheduling process. |
The day after PPMC’s tentative agreement, the ONA bargaining team at Providence Willamette Falls Medical Center (PWFMC) met with management for their own marathon negotiating session, which ran until 11 p.m.

The nurse team reviewed the PPMC TA and felt there were agreement around paid time off (PTO) and extended illness time (EIT) which PWFMC can agree to. While both sides are close to an agreement, wages, differentials and mandatory days off (MDO) cap are among the issues still being negotiated. The team is circulating a mid-bargaining survey for PWFMC for additional guidance on how to approach these issues. Visit the ONA-PWFMC bargaining unit page to learn more about ongoing negotiations. www.OregonRN.org/99