

# ONA/PWFMC 2016-17 Proposal Tracking Form

Date last update 4/18/17

Shaded area indicates that the issue is settle for this negotiations term.

Unshaded result indicates it is part of an unaccepted package proposal.

## ONA Proposals

Contract Section	Proposal Date	Area	Substance	Employer response	Final Result
4.8	11/8/16	Information to the Association	Annually, in a separate list, the Medical Center will provide the name and job classification of each currently employed RN, who is not included in the bargaining unit.	Counterproposal: Will discuss at Task Force upon request, any new non-bargaining unit positions.	Will discuss at Task Force upon request, any new non-bargaining unit positions.
4.11	11/8/16	New Hire Orientation	When new nurses are oriented offsite, the Medical Center will provide an alternative time for ONA orientation.	Counterproposal: Employer to notify Association of the schedule for onsite orientation.	Employer to notify Association of the schedule for onsite orientation.
4.11	11/8/16	New Hire Orientation	Make ONA orientation a mandatory part of PWF orientation and paid time for attending nurses.	Don't Agree	Withdrawn
6.1	11/8/16	Grievance Procedure	Increase deadline for filing a grievance from 14 to 21 days after violation	Don't Agree.	Withdrawn
11.1	11/8/16	BSN Differential	Create 3% BSN Differential	Don't Agree	Withdrawn
11.3	11/8/16	Standby/Call Rates	Increase rate from \$4.20 to \$4.50.	Don't Agree. See Management proposal on this article below.	Withdrawn
11.4	11/8/16	Call-in from Standby	Nurses who are called-in to work and who are subsequently relieved of duty for lack of work shall not be called in a second time during the same standby shift	Don't Agree	Nurses who are called-in to work twice and who are subsequently relieved of duty for lack of work shall not be called in a third time during the same standby shift.
11.8	11/30/16	Pyramiding of Premiums	Count call-in hours actually worked while on low-census standby toward possible overtime later in the week.	Don't Agree	Tentatively Withdrawn
11.9	2/24/17	Charge Nurse Differential	Increase Charge Nurse differential from \$3.00 to \$3.25/hour. Increase relief charge pay from \$2.10 to \$2.25/hour	Counterproposal: Increase Charge Nurse differential from \$3.00 to \$3.10/hour. Increase relief charge pay from \$2.10 to \$2.25/hour	Increase Charge Nurse differential from \$3.00 to \$3.10/hour. Increase relief charge pay from \$2.10 to \$2.25/hour
11.10	11/8/16	Preceptor Differential	Increase preceptor differential from \$2.00 to \$2.25/hour	Counterproposal: Increase preceptor differential from \$2.00 to \$2.10/hour	Increase preceptor differential from \$2.00 to \$2.10/hour

11.10	11/8/16	Preceptor Patient Assignments	When assigning patients, the charge nurse will consider the fact that a nurse is serving as a preceptor, and the experience of the preceptee, in addition to the other factors normally considered.	Don't agree to put in contract, although they claim to do this most of the time.	Withdrawn
11.11	11/8/16	Pay checks	The Medical Center will provide each Employee with a legend explaining all abbreviations and acronyms used on Employee paychecks	Don't Agree	The Medical Center will post a legend explaining all abbreviations and acronyms used on Medical Center intranet.
11.11	11/8/16	Pay checks	Paycheck information will include at minimum: 1. For each type of pay: the number of hours in the pay period, the rate of pay, the dollar amount earned in the pay period, and the dollar amount earned in the year to date. 2. For Paid Time Off (PTO) and Extended Illness Bank (EIB): the number of hours in the pay period on which the nurse earned the accrual, the rate of accrual, the accrual earned in the pay period, the accrual used in the pay period, and the current accrual balance. 3. All deductions from pay by type.	Don't Agree. Unwilling to include current pay period EIB and PTO earnings with paycheck information. Unwilling to post abbreviations and acronyms online.	Tentatively Withdrawn
13	11/8/16	Retirement	Effective 1/1/17, reduce minimum work hours required to obtain contributions under the Service Plan from 1,000 to 800 hours (including hours not worked due to low census) in the calendar year.	Don't Agree	Tentatively Withdrawn
13	11/8/16	Retirement	Effective 1/1/17, reduce minimum work hours required to obtain a year of credited service for purposes of vesting under the Service Plan from 1,000 to 800 hours (including hours not worked due to low census) in the calendar year.	Don't Agree	Tentatively Withdrawn
13	11/8/16	Retirement	Shorten the length of time it takes to get to the higher contribution rate levels in the Service Plan from 5% after 10 years and to 6% after 15 years to 5% after 5 years and 6% after 10 years	Don't Agree	Tentatively Withdrawn
14.3	2/24/17	Hours of Work Limitations	Clarify that nurses shall not be required to work above their normal full-time equivalency, except when called in from scheduled standby or immediately subsequent to a regularly scheduled shift when the nurse is required to work overtime as allowed under state law.	Don't Agree. Prefer to do education within regular FTE, but want to continue to mandate additional hours for education and staff meetings when necessary.	Withdrawn
New to Article 14	11/8/16	Mandatory Overtime	Acknowledge that mandatory overtime is not to be used to resolve routine inadequate staffing, and that continuing or persistent overtime indicates a need for additional staff	Don't Agree	Withdrawn
New to Article 14	11/8/16	Mandatory Overtime	Disallow MOT when: a) in excess of statutory limit, b) absent discussion with Charge Nurse and managerial approval.	Don't agree to put in contract.	Withdrawn

New to Article 14	11/8/16	Mandatory Overtime	Staffing Effectiveness Committee (SEC) will focus on all mandatory overtime situations. RNs mandated to work overtime will have the option to be involved in such SEC discussions. PWF to provide the SEC with monthly RN overtime figures, including mandatory overtime.	Don't agree to put in contract.	Withdrawn
14.5	11/8/16	Pay For Holidays Worked	Add Easter Sunday and increase length of Christmas Day premium pay range from 24 to 29 hours	Don't agree.	Withdrawn
14.5	11/8/16	Pay For Holidays Worked	Adjust holiday premium pay ranges as follows: New Year's Day – 7:00 p.m. December 31 to 7:00 p.m. January 1. Easter - 7:00 p.m. the preceding Saturday to 7:00 p.m. Sunday. Memorial Day - 7:00 p.m. the preceding Sunday to 7:00 p.m. Monday. Fourth of July - . 7:00 a.m. July 4 to 7:00 a.m. July 5. Labor Day - 7:00 p.m. the preceding Sunday to 7:00 p.m. Monday. Thanksgiving – 7:00 a.m. Thursday to 7:00 a.m. Friday. Christmas Day - 7:00 p.m. December 24 to 12:00 a.m. December 26.	Agree. In addition PWF to make reasonable effort to rotate holidays.	Adjust holiday premium pay ranges as follows: New Year's Day – 7:00 p.m. December 31 to 7:00 p.m. January 1. Easter - 7:00 p.m. the preceding Saturday to 7:00 p.m. Sunday. Memorial Day - 7:00 p.m. the preceding Sunday to 7:00 p.m. Monday. Fourth of July - . 7:00 a.m. July 4 to 7:00 a.m. July 5. Labor Day - 7:00 p.m. the preceding Sunday to 7:00 p.m. Monday. Thanksgiving – 7:00 a.m. Thursday to 7:00 a.m. Friday. Christmas Day - 7:00 p.m. December 24 to 12:00 a.m. December 26. In addition PWF to make reasonable effort to rotate holidays.
14.7	11/8/16	Rest Periods	Allow alternative time for rest periods when they are missed, including, when consistent with patient care needs, combining rest periods with meal periods. This is currently available to 12-hour shift nurses only	Counterproposal: Allow alternative time for rest periods when they are missed including, with managerial approval, combining rest periods with meal periods	Allow alternative time for rest periods when they are missed including, with managerial or charge nurse approval, combining rest periods with meal periods
14.7	11/8/16	Rest Periods	The Employer will make every effort to provide appropriate relief so that rest periods may be taken. "Appropriate relief" means a nurse trained to care for the patients of the nurse they are relieving.	Don't Agree. They want nurses to take responsibility for their own breaks. See Management proposal on this Section below.	Withdrawn
14.7	11/8/16	Rest Periods	Relief nurses will have no other patients assigned to them while providing break relief. No nurse shall be assigned more patients than allowed under the unit's approved staffing plan.	Don't Agree. They want nurses to take responsibility for their own breaks. See Management proposal on this Section below.	Withdrawn
14.7	11/8/16	Rest Periods	When the Employer fails to provide appropriate relief for rest periods, the employee will be paid an additional fifteen (15) minutes	Don't Agree. They don't want to encourage nurses to miss their breaks. Counterproposal: Raise issues about lack of breaks with unit-based committees, Nursing Task Force or file a grievance.	Withdrawn
14.8	11/8/16	12-hour shifts	Allow flexibility to adopt different shift lengths when nurses approve by majority.	Don't Agree. See Management proposal on this article below.	Withdrawn
14.9	11/8/16	Schedules	Allow Unit-Based Committees to explore alternative scheduling methods, such a self-scheduling, so long as such arrangements do not violate other provisions of this Agreement	Don't Agree.	Withdrawn
14.9	11/8/16	Holidays	Nurses who work on a designated holiday will not be required to work the same holiday in the subsequent year without prior agreement of the nurse.	Counterproposal: Employer to make good faith effort to rotate holidays.	Employer to make good faith effort to rotate holidays.
14.10	11/8/16	Call Schedules	Clarify the right of nurses to minimum 8 hours rest after working on a call shift.	Counterproposal: Medical Center to comply with statutory overtime limits (ORS 441.166) with regard to rest between shifts.	Counterproposal: Medical Center to comply with ORS 441.166 with regard to rest between shifts.

14.11	11/8/16	Extra Work Procedures	Post extra shifts both on unit and electronically. Currently only on-unit posting is required.	Don't agree. Post electronically only.	Withdrawn
15.3	11/8/16	Inservice Education	Nurses will not be required to work in excess of their FTE to obtain inservice education.	Don't Agree.	Withdrawn
15.3	11/8/16	Inservice Education	When a nurse works in excess of their FTE to complete mandatory education, all time worked and traveling to and from the education site from home or from the Medical Center (if such travel is in addition to travel for the nurses regular FTE shift) shall be paid time.	Don't agree to include in contract. Will abide by federal Portal to Portal Act, which provides the similar guarantees.	All travel time in conjunction with mandatory education to be paid according to state and federal law.
15.3	11/8/16	Inservice Education	When mandatory education is required at an offsite location, the nurse will be paid for all travel time in excess of normal daily commute.	Don't agree to include in contract. Will abide by federal and state law, which provide the same guarantees. Also see Section 17.2.	All travel time in conjunction with mandatory education to be paid according to state and federal law.
15.4	11/8/16	Required Certifications	Increase maximum mileage reimbursement when a required certification course is not offered at the Medical Center within 3 months of the expiration of the nurse's certification, from 200 to 300 miles round trip.	Don't Agree	Withdrawn
15.4	11/8/16	Required Certifications	For required online classes, the Medical Center will pay those expenses incurred, consistent with the Medical Center policy.	Don't Agree. Nurses don't pay any expenses for required online classes.	Withdrawn
15.4	11/8/16	Required Certifications	A nurse shall not lose pay when the nurse's failure to obtain the certification or education is due to the cancellation of a course at a Providence facility or through a Providence preferred educational provider for which the nurse was registered. Nurse must make reasonable effort to obtain certification elsewhere.	Don't Agree. We haven't had any nurse lose pay in this situation.	Withdrawn
New to Article 19	11/8/16	Low Census Option	For every 3 hours worked for which extra shift premium is paid, a nurse will be credited with 1 'banked' hour for use when it becomes the nurse's turn for shift cancellation. The nurse will be assigned duties within her/his scope of practice and abilities. The nurse will not displace another nurse.	Don't Agree	Withdrawn
New to Article 19	11/8/16	Low Census Option	Any hours accrued by a nurse in excess of a 250-hour maximum will be placed in a general bank that any nurse may use in when experiencing excessive cancellation, defined as: 12 or more hours in the current pay period, or 24 hours in the current month, or 200 hours in the current calendar year.	Don't Agree	Withdrawn
19.5	12/13/16	Shift Cancellations	Limit mandatory cancellations to one full shift per pay period	Don't Agree	Tentatively Withdrawn
19.6	11/8/16	Floating	Limit mandatory floating to nurses with at least 500 hours of service but no more than 6 years of service. No required floating after 6 years.	Counterproposal: Limit mandatory floating to nurses with at least 500 hours of service.	Limit mandatory floating to nurses with at least 500 hours of service. Nurse with 6-years service may request floating waiver.

19.6	11/8/16	Floating	A non-mandatory floating nurse will remain non-mandatory after returning from a break in service of less than one year.	Considering	A non-mandatory floating nurse will remain non-mandatory after returning from a break in service of less than one year.
19.6	11/8/16	Floating	Nurses from CAPU, Surgical Services and Birthplace shall not float.	Don't Agree	Withdrawn
19.6	11/8/16	Floating	Medical Center to provide adequate supervision (as defined by state Nurse Practice Act) for nurses floating as helping hands.	Don't Agree	Withdrawn
19.6	11/8/16	Floating	Floated nurse will be paid a differential of \$2.00 per hour for all hours floated	Don't Agree	Withdrawn
19.6	12/13/16	Floating	Floated nurse will not be subject to low census.	Counterproposal: All hours worked in a helping hands capacity will be counted as low census hours for the purpose of low census rotation	All hours worked in a helping hands capacity will be counted as low census hours for the purpose of low census rotation
21A.2 & 21B.2	11/8/16	PTO Accrual	Increase accrual rate for nurses working 0.9 FTE (9- or 12-hour shift) so that they earn the same annual PTO hours as a 1.0 FTE.	Don't Agree	Withdrawn
21A.5 & 21B.5	11/8/16	PTO Priority Requests	Eliminate minimum 7-day length requirement for priority requests	Don't agree.	Withdrawn
21A.5 & 21B.5	11/8/16	PTO Priority Requests	Allow as much as 8 months advance notice, rather than current 6 months.	Don't agree.	Withdrawn
21A.5(c) & 21B.5(c)	11/8/16	PTO Priority Requests	Disallow denials of priority requests when requested by six or fewer nurses on a unit.	Don't Agree	Withdrawn
21A.13 & 21B.13	11/8/16	EIB Use	Reduce waiting period for use of EIB from 3 days to 2 (and from 2 days to 1 for nurses regularly scheduled to work 12-hour shifts)	Don't Agree	Reduce waiting period for 10-hour shift employees from 3 shifts to 24 hours. All categories of nurses now subject to 24-hour requirement.
21A.13 & 21B.13	11/8/16	Transfer of EIB	Nurses who have 240 or more hours of EIB may transfer such additional hours to their PTO bank.	Don't Agree	Withdrawn
24.6	11/8/16	Mandatory Education	Require the Medical Center to provide nurses with adequate time within their normal work hours to complete mandatory education	Counterproposal: Employer to make good faith effort to provide nurses with adequate time within their normal work hours to complete mandatory education.	Employer to make good faith effort to provide nurses with adequate time within their normal work hours to complete mandatory education.
Appendix A, Section A	11/8/16	Wages	Increase wages by 3.5% eff. 1/1/17 and by 3.0% eff. 1/1/18.	Increase wages by 2.5% eff. 1/1/17 and by 1.75% eff. 1/1/18.	
Appendix A, Section A	11/8/16	Wages	Add a new step 23 at the rate of \$51.15 per hour, and a new step 30 at the rate of \$53.60 per hour. Those new steps will then be adjusted by the across the board increases.	Don't Agree	Withdrawn.
Appendix A, Section A	4/5/17	Wages	Create 30-year bonus at \$1,800 full-time and \$1,200 part-time. Count any Providence employment.	Create 30-year bonus at \$1,200 full-time and \$750 part-time. Count only Willamette Falls Medical Center employment.	Create 30-year bonus at \$1,200 full-time and \$750 part-time. Count only Willamette Falls Medical Center employment.

Appendix A, Section C	11/8/16	Certification Premiums	Increase certification differential from \$2.25 to \$2.50/hour.	Counterproposal: Increase certification differential from \$2.25 to \$2.35/hour.	Increase certification differential from \$2.25 to \$2.40/hour.
Appendix A, Section C	11/8/16	Certification Premiums	Recognize Trauma Nurse Certification	Disagree: Concern about whether nurse will be able to maintain certification.	Withdrawn.
Appendix C, Section D	11/8/16	Medical Savings Account	Increase Medical Center annual contribution to employees' HRA and HSA accounts from \$700 Individual/\$1,400 Family to \$1,150 Individual/\$2,300 Family	Don't Agree	Tentatively Withdrawn
MOU	11/8/16	Cross Training	Make pilot cross training program permanent.	Agree.	Make pilot cross training program permanent.
New MOU	11/8/16	NOC 6-2 Schedule	Allow nurses working 0.8 or greater on an individual basis, to agree to work 6 pay periods and have 2 paid pay periods off work. Click <a href="#">here</a> for program details.	Don't Agree. Willing to discuss further at Nursing Task Force.	Withdrawn.
New MOU	11/30/16	Clinical Ladder	Establish Clinical Ladder Program to promote professionalism.	Don't Agree. They don't have the management capacity to implement a program.	Tentatively Withdrawn
New MOU	11/8/16	Float Pool	Establish and staff a specialty float pool to provide clinical support and break relief staffed by at least two (2) nurses per shift.	Over the term of the contract establish float pool to take patients in all departments but OR.	

## Providence Proposals

Contract Section	Proposed Date	Area	Substance	Union Response	Final Result
4.6	11/30/16	Information to New Nurses	Eliminate management obligation to provide contract and form explaining membership obligations	Counterproposal: Employer to provide a copy of contract only.	Employer to provide a copy of contract only.
11.3		Standby Call Rates	Discontinue paying Standby pay during portion of standby shift when nurses is actually working	Don't agree.	Tentatively Withdrawn.
11.10	11/8/16	Preceptor Patient Assignments	Give nurses who have completed preceptor training course w/in last 5 years preference for precepting assignments.	Considering.	Give nurses who have completed preceptor training course w/in last 5 years preference for precepting assignments.

A12	11/30/16	Health/Dental Insurance	Delete Appendix C. , detailing Health and Dental Eligibility and Benefits. The Hospital would make no guarantees regarding the benefits provided.	Disagree. Management should not be able to change this major part of our compensation package during the term of the contract.	Tentatively Withdrawn.
14.8. A	11/30/16	Shift Length	Eliminate right of nurses to vote to approve a shift length change on their unit.	Agree. The right was only available for the 1st 90 days of the current contract.	No shift length changes during the 1st 90 days of the contract
14.9	11/30/16	Schedules	All schedules to be posted electronically.	Counterproposal: Schedules of work shall be electronically posted, archived on the Medical Center intranet, and accessible to all nurses	Schedules of work shall be electronically posted. PWFMC will post a printed copy of schedule in each unit
14.10	11/30/16	Call Schedules	All call schedules to be posted electronically.	Counterproposal: Schedules of work shall be electronically posted, archived on the Medical Center intranet, and accessible to all nurses	Call schedules will continue to be prepared and electronically posted. The Medical Center will comply with ORS 441.166 and OAR 333-510-0130 (2015) with regard to rest between shifts
14.11A & B	11/30/16	Extra Work Procedures	Grant all vacant shifts to on-call nurses ahead of part-time nurses. Currently part-time nurses have first right to extra work, so long as there is no overtime.	Counterproposal: Continue current practice of awarding vacant shifts to part-time staff ahead of on-call nurses, but no extra-shift premium applies to extra shifts awarded prior to posting the schedule. Increase extra shift premium to \$15/hr.	Tentatively Withdrawn.
19.1	11/30/16	Seniority	Seniority date to be date nurse starts in bargaining unit position rather the date starts working for PWF as a nurse in any position.	Might agree as long as no current nurses are affected.	For nurses who became nurses before January 1, 1987: commencing with the most recent date of hire, and shall include service in non-nursing jobs. For nurses who became nurses from and after January 1, 1987, but prior to ratification of this Agreement: commencing with the date he/she became a nurse. For nurses hired after ratification of the Agreement: commencing with the date he/she became a nurse in the bargaining unit.
19.1	12/20/16	Seniority	Going forward, accumulate seniority based on number of hours worked.	Don't Agree.	
19.2	11/30/16	Seniority Lists	Employer to provide list biannually rather than quarterly.	Agree.	
19.4C	11/30/16	Reclassification of Part-time nurse	Allow Medical Center to reclassify to full-time any 0.8 FTE nurse who works 3 extra shifts in same unit, job and shift in 3 schedule periods in a row or 0.6 FTE nurse who works 6 extra shifts in same unit, job and shift in 3 schedule periods in a row.	Don't agree. Nurse should not be penalized for pitching in at the request of the Medical Center.	
21A.2 & 21b.2	11/30/16	PTO Accrual	Cap annual hours which accrue PTO Accrual at 2,080, for all nurses. 2,080 cap currently applies only to nurses hired after 4/19/11.	Don't agree. This was a compromise agreement reached in 2011 that should not be revisited.	Cap annual hours which accrue PTO Accrual at 2,080, for all nurses.
21A.4 and 21B.4	11'30/16	Shift Trades	Nurse working traded shift to cover denied PTO is not eligible for extra-shift pay.	Agree.	Shift trades will be granted when they do not cause overtime or premium pay and skill mix is maintained.

App. A, Section E	2/24/17	Extra-Shift Premium	Alternative to PWF proposal on 19.4(c). Pay extra shift premium only after nurse has worked 36- scheduled work hours in the pay period	Don't Agree.	Withdrawn
MOU on Cross Training	11/30/17	Floating of Cross Trained Nurse	Eliminate requirement to fill need through offering shift to in-unit, ShareCare, or agency prior to floating cross-trained nurse to unit.	Counterproposal: Pre-shift, must first offer shift to all unit nurses, During shift, must offer first to any unit nurse on MDO.	