We made some progress today—here’s the update:

We came to a tentative agreement on Article 15 – Educational Leave, which included incorporating section 24.6 on mandatory education. This was an easy TA.

We made good progress on Article 3 – Definitions of Terms by agreeing on definitions for Per Diem, Resource, and Cross-Trained nurses. We also made proposals on the MOU on Cross-Training in order to increase the incentives and clarify how they are utilized outside of the call-off order, as they are voluntary. We are stuck on where the SANE nurse program should live—the hospital doesn’t think it is necessary to include in the contract, even though it is agreed-upon language that includes all the Providence hospitals in the Portland Service Area (PSA). We are insistent that it does belong in the contract, even if it only covers one SANE nurse at PWFMC.

The hospital gave us a counter proposal on Article 10 that aims to severely restrict access for the ONA Labor Representative to the hospital. Arguments started with covid visitor restrictions as the rationale, but ultimately led to the hospital stating they want to control “when and where” the Labor Rep is allowed to go in the hospital. No one on the negotiation team supports the Labor Rep presence disrupting patient care (which has not occurred), but the proposals from the hospital go far beyond reasonable expectations for access. We also called the hospital out when they continued to refer to the Labor Rep as “the ONA” by reminding them that WE THE NURSES ARE THE ONA, and any aims to restrict our ability to discuss our working conditions as ONA members is against the NRLA.

We also got a counter proposal on Article 24 – Employment Status, which was a rejection of our proposals to ensure that disciplinary action is proportional to the offense, that it is paid leave for a nurse who is pulled of the schedule while an investigation is conducted, and that disciplinary notices will automatically be removed after 4 years. We had a good discussion with the hospital, explaining to them that our aim is to ensure consistency with discipline and clarity with escalating disciplinary steps. We are pushing back on this.

These are the other articles that in our court at this time:

**Article 19 – Seniority:** almost at an agreement, we are waiting for the hospital to propose language on helping hands that they are still working on, so we are waiting for that.

**Article 20 – Reduction in Force:** the hospital wants to only include “acute care units” in the event of a restructuring, but we currently cover the Outpatient Infusion Clinic (not acute care). We want to ensure we have restructuring language that will not exclude future nurses with any expansion of the hospital.

**NOTICE**

We are back at the table on December 6
Meanwhile, the hospital has numerous and substantive articles in their court:

Article 4 – Association Membership & Assistance: minor changes. No response from the hospital yet.

Article 6 – Grievance Procedure: we are very close on this article, but we're still asking that grievance meeting time be paid and the hospital is pushing back on this.

Article 12 – Basic Medical/Dental Coverage: we're asking for a major overhaul of our health benefits—this will be a long fight to win. No response from the hospital yet.

Article 14 – Hours of Work and Scheduling: all the per diem language, holiday scheduling, weekend scheduling, and extra work procedures are here (which includes proposals for our current double-time for last minute vacancies and other incentives). This article also has the 6/2 scheduling proposal. No response from the hospital yet.

Article 16 – Professional Nursing Care Committee: major overhaul of this article to include language on UBCs, Staffing Effectiveness Committee, and Hospital Staffing Plan practices. Our proposals include a commitment from the hospital to staff to our minimum staffing as defined by our nurse staffing plans and providing rest and meal break coverage. No response from the hospital yet.

Article TBA – Workplace Safety and Technology: significant new article that covers a lot of ground for the hospital to be held accountable for safety, whether from violence, exposure, equipment, or lack of staffing. No response from the hospital yet.

Appendix B – in addition to improvements to our call off order, the most significant proposal here is the low census cap. No response from the hospital yet.

Our next bargaining session is soon—December 6— we are expecting the hospital to come back with some substantive counter-proposals. We will be proposing all of our wages/economics (Article 11 and Appendix A) and PTO (Article 21) changes at that time. The hospital has said they are waiting to hear our “entire set of proposals” that includes economics before making decisions about these significant proposals we have already made.

Please reach out to any negotiation team or CAT member to let us know what you think of bargaining so far or if you have any questions!

If you want to join the December 6th or December 21st bargaining session as an observer, please let Virginia Smith, RN know ASAP! Contact via text 503-312-7809 or email virginiadsmithrn@gmail.com