ONA pushes for members to be made whole in wake of new 14-day requirement to quarantine after travel to “hot spots”

ONA has issued a demand to bargain over the new travel/quarantine policy PeaceHealth issued that has unexpectedly forced nurses to involuntarily miss work. This policy requires anyone who has visited a designated “hot spot” or had contact with people from a “hot spot” to be off the schedule for 14 days. This policy was issued without notice to ONA and rolled out without any information being provided to staff, managers or employee health on how to implement it. It has caused chaos in terms of staffing and financial harm to members who are being forced to use paid time off (PTO) or go without pay.

We are demanding that all members who were traveling or in contact with out of town visitors at the time this policy was issued be made whole for any work time lost due to the faulty implementation of this policy. If PeaceHealth had taken the time to implement this policy with notice, nurses could have adjusted their plans to avoid contact with these “hot spots” instead of being forced to involuntarily quarantine. The implementation of this policy has been especially burdensome to nurses who used PTO for vacations who now have to use more PTO to cover the quarantine or go without pay if they used all their PTO for their planned vacation. We will work hard to ensure that all impacted nurses are made whole.

ONA and PeaceHealth to negotiate extension of COVID Memorandum of Understanding

ONA will be engaging in negotiations to extend and update the COVID Memorandum of Understanding (MOU) we reached with PeaceHealth earlier this year. We want to hear from you if there were parts of this MOU that could be improved. A copy of the current MOU can be found on the ONA/Sacred Heart Home Care Services (SHHCS) webpage: www.OregonRN.org/85.

Please share any feedback you have with ONA labor representative Tyler Whitmire (Whitmire@OregonRN.org) who will be leading the negotiations on the renewal of this agreement.

Workers compensation and COVID

While we appear to have been very fortunate that no ONA member at Sacred Heart Medical Center (SHMC) or SHHCS has contracted COVID from exposure at work, we want to remind members of the importance of filing a worker’s compensation claim if that should occur. Filing a claim will ensure that you get the protections that you are entitled to if you are injured at work. The claim form for worker’s compensation can be found on Crossroads.

ONA issues demand to bargain over new Safety Absolute Policy

PeaceHealth has issued a new directive entitled “Safety Absolute” that says they will automatically give a nurse a level three corrective action for the first failure to follow either the Patient Identification Policy or the Patient Lookup Policy.

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A level three corrective action is classified as a final written warning prior to termination. The new Safety Absolute Policy also states that a second violation of one of these policies will result in termination.

ONA has issued a demand to bargain over this new disciplinary policy on the grounds it violates Article 6.1.1 of your collective bargaining agreement:

**Article 6.1.1. Progressive Discipline.** The form of corrective action taken may vary depending upon the nature and severity of the infraction and any mitigating circumstances. Where appropriate, corrective action follows a systematic and progressive method by using increasingly stronger action and may include a performance improvement action plan. Corrective action may include one or more of the following: level one written warning, level two written warning, final written warning, suspension pending investigation, or discharge. Corrective action on successive offenses may be less severe, parallel or progressive, depending on the nature of and relationship between the offenses.

We do not believe that a first-time violation of either of the policies regarding patient identification warrant such a high level of discipline and violations of these policies have never before been equated with serious violations that justify termination. PeaceHealth administration has often said that the purpose of a corrective action is not to be punitive but to provide a nurse with the opportunity to improve their performance. Issuing a policy that skips the steps of progressive discipline flies in the face of this idea. This ill-advised policy will only serve to make staff fearful of termination for a single mistake while they continue to work short staffed and under pressure to do more with less.

Food for Lane County Fundraising Effort

Join the SHMC and SHHCS Executive Committees in Food for Lane County Fundraising Effort

COVID-19 has been and continues to be a challenging and uncertain time for us and our community. The outpouring of love and support we as healthcare workers have seen from our community has been amazing!

Your local SHMC and SHHCS ONA Executive teams want to help give back to the community! The fight against COVID-19 is straining the resources on many people in our community who depend on Food for Lane County to access food.

Your support will help provide emergency food boxes, meals and groceries for seniors, snack packs for school aged children and so much more!

Your gift gives hope when it’s needed the most. If every one of our nurses was able to donate just $25, we could raise over $35,000 for our local food bank! Please consider giving if you are able!

https://fundraise.foodforlanecounty.org/ONA
Staffing Request and Document Forms

Staffing Request and Documentation Forms (SRDF) are a vital way to document and elevate your concerns around safe staffing. There has been some confusion lately over how to find and submit an SRDF; see below.

SRDF

- Is your staffing compliant with your staffing model for your shift?
- If no, notify your supervisor.
- PCC is expected to notify your manager or supervisor.

When to fill out an SRDF

If you are unable to meet your assigned patient care needs without a risk of patient harm and/or are not getting lunch or breaks, please fill out an SRDF and utilize the chain of command to advocate for help in the moment.

Chain of command includes the following order:

1. Patient care coordinator or weekend facilitator
2. Nurse manager or nurse supervisor
3. If they are unavailable, please call the manager on-call
4. Director Mary Allred
5. Administrator on call

How to fill out an SRDF

1. Sign onto a work computer
2. Click on “Crossroads”
3. Click on “Clinical”
4. Click on “Nursing Online”
5. Click on “Resources for ONA”
6. Choose “Home Care SRDF”
7. Fill it out the best you can

Where does the SRDF go?

Nursing administration, ONA and the Professional Nursing Care Committee (PNCC) for review and analysis with a contractual response from nurse managers within 30 days.

Per ONA/SHHCS contract Article 17.7: The Agency will assure that documentation of staffing deficiencies and requests are not discouraged.

Why fill out an SRDF?

To increase patient safety, staff safety and improve patient care. Just like charting: If it isn’t documented, it didn’t happen.

Do you have questions and/or concerns? Reach out to one of your PNCC members listed on the ONA/SHHCS website: www.OregonRN.org/85. You may also email ONA’s Nurse Practice Consultants for assistance: Practice@OregonRN.org

PNAP COMMITTEE UPDATE

During the last round of negotiations, we achieved some great language around the opportunity to participate in the Professional Nurse Advancement Program (PNAP). This program is designed to provide nurses more opportunity to grow and advance professionally.

The PNAP program has three advancement stages and hourly differentials: PNAP-C $2/hour, PNAP-P $3/hour and PNAP-E $5/hour.

Congratulations to the below SHHCS nurses that are participating in the PNAP program!

Sacred Heart Home Care Services (SHHCS)

Staffing Concerns

As you know, the patient volumes for SHHCS have been very high. This has created a need for increased weekend staffing temporarily while new positions are created and vacant position are filled. The contract language around this issue changed in 2019; see below.

The language allows for the rotation of full-time nurses to assist with staffing due to critical staffing needs, limited to one weekend out of any eight-week period consisting of two months. The intent of this language is that it for a limited period of time while there is a critical need. It cannot be part of an ongoing plan to staff the weekends going forward.

Article 8.13 Scheduling. Regular part-time and full-time nurses shall participate in weekend coverage based on the Agency’s patient care and operational needs. They shall also be included in holiday scheduling on a rotating basis within their program. They shall also participate in the Agency’s on-call program in accordance with on-call scheduling guidelines. Due to critical staffing needs the Agency will limit full-time Home Health and Hospice Program nurses to no more than one (1) weekend out of any eight (8) week period consisting of two (2) full months.

The SHHCS Staffing Task Force is working hard to work with management to update the nurse staffing model. This committee is tasked with creating a plan for adequate staffing so that you can provide the quality care your patients deserve.

The task force is reviewing and advising management regarding the components that make up an appropriate model. These components include case management functions, caseloads, geographic efficiencies, care coordination, admission visits, complex visits, routine visits and the complexity of the patients. Technical impacts are also evaluated and considered. Other data that can be helpful in reviewing the adequacy of a plan is how much overtime nurses are working, meal and break data, SRDFs and nurse/patient satisfaction. Last month we talked about the importance of recording your time accurately. If you missed that article you can find it in the SHHCS July 20 newsletter: www.OregonRN.org/85.

Please keep the feedback coming! Do you have questions or concerns about staffing? Reach out to one of your Staffing Task Force representatives: Alison Tharp and Cindi Thielman (HH); Lee Ann Gallinger and Nikki Pagniano (HO); Stephanie Price (HI); Or your ONA labor representative Laura Lay at Lay@OregonRN.org.

PNCC Corner: Equity and Inclusion Work

The PNCC is looking for ways to reach out to the Black, Indigenous, and People of Color (BIPOC) community educators to explain discrimination and racial inequity in healthcare and in the workplace. The PNCC would like to put together an educational opportunity like a public/online speaker from SHHCS leadership or anyone interested in our bargaining body. Our goal would be to hopefully enhance the equity training options at PeaceHealth

The PNCC is trying to figure out ways to create a welcoming atmosphere for People of Color in our nursing population here at SHHCS so that we can recruit more RNs of color and promote those members for opportunities to participate and lead that continued work.

If anyone has ideas in the bargaining unit, all are welcome to speak on this and add to suggestions.

Questions or concerns? Please reach out to one of your PNCC members! Alicia Harrison (HI), Allison Hyder (HO), Lise Tilley (HO), Paul van Waardenberg (HO), Joy Straub (HH), and Danielle Kelly (HH).