

Dec. 19, 2017

SHMC Executive Committee

- Lynda Pond (Labor and Delivery)
- Nancy Deyhle (ICU)
- Phyllis Hurt (NICU)
- Kevyn Paul (ED, University District)
- Jessica Detering (Labor and Delivery)
- Wendy Nau (OHVI 5)
- Lola Williams (Orthopedics)
- Abby Maurer (MOR)

Grievance Committee

Chair: Laura Lay
(Mother Baby)

SHHCS Executive Committee

- Shirley Hofeld (Home Infusion)
- Maggie Yokum (Home Health)
- Karen Rice (Home Health)
- Jo Turner (Hospice)

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Next Negotiation Session

Tuesday, Jan. 16, 2018
9 a.m.-1:30 p.m. & 4-6 p.m.
Room 200 CD, RiverBend

Please come by and observe negotiations!

RNCM Bargaining Update #5

Our Oregon Nurses Association (ONA) bargaining team and Sacred Heart Medical Center (SHMC) held their last 2017 negotiation session on behalf of the nurse care managers (RNCMs) on Friday, Dec. 15, at the RiverBend Annex. The only significant progress at that session was reaching a tentative agreement (TA) on ONA's proposal that the RNCMs shall be incorporated into the current collective bargaining agreement. While our ONA team was pleased to have formally reached an agreement on this item, we were disappointed there was not more movement on the part of SHMC toward coming to a final agreement before the end of the year. Wages, seniority, and staffing are the three ONA proposals remaining to be settled, as well as SHMC's proposal to be granted an exception to "Appendix B, Scheduled Time Off."

ONA formally rejected SHMC's proposal for an exception to Appendix B. SHMC was seeking to lower the minimum number of nurses who can simultaneously be granted paid time off (PTO) to one, rather than the four that would be called for under core staffing. This was a non-starter for our ONA bargaining team. In responding to the proposal, our ONA team explained this would severely limit the ability of nurses in the unit to take time off, and is a lower level than current practice for the unit.

Our team also shared that this proposal was discussed at the unit meeting held on Dec. 14 and it did not receive a positive response from the nurses who attended.

SHMC did offer a counterproposal on wages, but it did not move the parties closer to agreement on that item. This is typically one of the last items to be finalized in contract negotiations so that was not unexpected.

The issue of staffing and the challenges faced by nurses on the unit was discussed more fully for the first time. In response to SHMC's continued rejection of the ONA proposal on staffing, our team clarified the wording of our proposal. Marie Stehmer, SHMC negotiations spokesperson, stated they couldn't support ONA's proposal because it interfered with "management rights" regarding staffing levels. Our ONA team reiterated that the proposal did not include any provisions that would supersede the manager's authority, but instead provided for a clear process through which the manager and members of the unit-based council (UBC) could develop a staffing plan together. That plan could only be voted on by the whole unit if it had the manager's approval.

SHMC did not offer a counterproposal on staffing, but Marie Stehmer did take the opportunity to ask our

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RNCM Bargaining Update #5 (continued from page 1)

team what the major concern was regarding staffing for the unit. Our team was ready with a response detailing the typical workload of a RNCM both at RiverBend and University District, which can reach upwards of 33 patients a day. Our team emphasized this workload meant they were not able to give the kind of attention needed to provide quality care to their patients, which can contribute to readmissions or delays in discharges, both of which are costly to the hospital's bottom line and do not serve the needs of the patients or their families.

The negotiation session was scheduled to end at 1 p.m.; our ONA team was willing to continue the session past 1 p.m., but the SHMC

team had other obligations that kept them from extending the session. Both teams agreed to negotiation dates for January, with a request from ONA that those sessions be held at RiverBend so nurses in the unit can observe negotiations on their breaks.

These are the dates for the next negotiation sessions: Tuesday, Jan. 16, 9 a.m.-1:30 p.m. and 4-6 p.m. (both sessions in Room 200 CD, RiverBend); and Thursday, Jan. 25, 9 a.m.-5 p.m. (in Room 22Y at RiverBend). Either of these sessions might result in a final agreement. If we are making progress on Jan. 16, both parties have agreed to continue negotiating to maintain momentum, so the session might go later than 6

p.m. The same is true for Jan. 25.

Thank you to everyone who turned out to the unit meetings on Thursday, Dec. 14. The strong turnout and participation was crucial to helping our bargaining team members and ONA labor relations representatives understand how nurses in the unit feel about the proposals. This was very helpful in prioritizing the remaining issues as we went into the last negotiation session of 2017.

Please stay in touch with your ONA bargaining team and your contract action team (CAT) members (Cyndi Solesbee, Kathy Andrews, and Beth Irvin) as we head into the new year. And please plan to come observe negotiations on Jan. 16 or 25!

Vote YES on Measure 101 to Protect Health Care Access

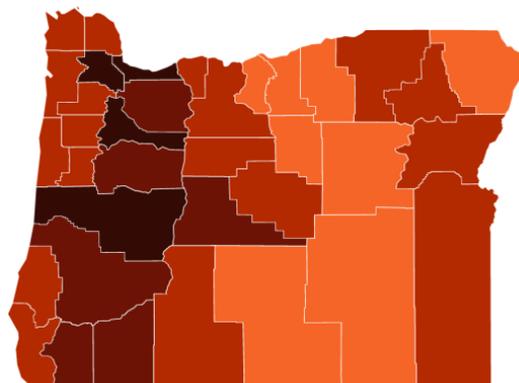
Oregon voters will face a decision on whether or not to protect health care for more than 350,000 children, adults with disabilities, seniors, and low-income families in a special election Jan. 23, 2018.

Measure 101 asks voters to uphold the bipartisan Oregon Healthcare Protections Bill which the legislature passed in the 2017 legislative session. Nurses, hospitals, insurers, Democrats and Republicans all supported the bill in order to fund health care and lower premiums for more than half a million Oregonians.

Voting YES on Measure 101 means protecting health care for Oregonians who otherwise couldn't afford care and are too often forced to go to the emergency room when they are sick. If the measure fails, thousands of our most vulnerable patients will be in jeopardy of losing their health care.

It is critical we stand together to protect Oregon families by supporting Measure 101 in the Jan. 23 special election.

If Measure 101 fails, over 350,000 Oregonians could lose their healthcare coverage.



Coverage loss by county: 0 - 1,000 1,001 - 10,000 10,001 - 30,000 Over 30,001

Learn more, get involved, and add your name to pledge to vote YES on Measure 101 at:

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