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.

Extension of COVID-19 MOU Negotiations

ONA and PeaceHealth to Negotiate Extension of COVID-19 Memorandum of Understanding (MOU)

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 for you. A copy of the current MOU can be found here, or go to: www.OregonRN.org/86 and follow the link.

Please share any feedback you have with Tyler Whitmire (whitmire@oregonrn.org) who will be leading the negotiations on the renewal of this agreement.
Did Someone Else Get Your Job?

ONA Challenges Sacred Heart Administration’s Position on Filling of Vacancies

Did you apply for a nursing position on another shift or unit after the 7-day internal posting period but someone else got it instead? If it went to another ONA member with seniority over you, it was probably legitimate per Article 13 but if not, you might have a grievance. ONA has concerns that the hospital has been ignoring the contract, which was negotiated in good faith and collectively agreed to by you and your fellow ONA Association members. We recently learned that after the 7-day internal posting period required by Article 13.1, the medical center is awarding positions to any candidate they choose regardless of whether they are internal, external or have seniority. In some cases, they are holding positions open for lengthy periods of time, in spite of having qualified internal applicants.

Under your contract there are two parts to filling positions: posting and selecting.

Part 1: Posting. According to the Contract, “No vacancy shall be permanently filled unless it has been posted for a minimum of seven (7) calendar days. Moreover, if the posting of a position is discontinued, then that vacancy may not be filled until it is posted again for the minimum seven days (13.1).” This language was negotiated to make sure that every qualified bargaining unit member has the same chance to apply for a position before it is awarded. If the hospital decides to post it for longer than 7 days that is their prerogative, but they cannot fill it before it has been posted internally for at least 7 days. If they cannot find someone in the first posting they can repost it, but it still needs to be for a minimum of 7 days. There is no maximum posting period.

Part 2: Selection. “If the candidates under consideration for the posted position in a unit are from that same unit, the position will be awarded based on seniority. In all other cases, the most senior qualified nurse employed in the Medical Center and applying during the posting period will be given the first opportunity to fill the vacancy….(13.2)” So if anyone in the unit applies for a position in their unit then the person with the most seniority gets the job. If no one in the unit applies then the most senior person in the hospital gets the job, even if qualified external nurses apply during the posting period. It’s pretty clear. This language has been drafted and agreed to so that folks who have worked for the hospital get preference over outside candidates. When current internal staff apply, then seniority determines who gets the job.

There are two exceptions. One exception allows the hospital to select a current nurse with less seniority if they are within 6000 hours of the other nurse and they are more qualified. The other exception is for folks who have been disciplined in the last year, but if that is going to be a reason to deny a person, the Hospital must notify the Association and you two (2) days before you are denied a transfer.

We can find nothing else in the contract that allows for a different way to select winning candidates. In spite of this, the hospital is maintaining they can award position to whoever they like after the 7-day posting period. They have been denying positions to qualified internal candidates who applied after the 7-day period which we believe is a violation of the contract. As part of our due diligence in this matter we are seeking input from nurses who may have been passed over for a position because they applied after the 7-day time frame. If you are one of these nurses and believe you have been unfairly skipped over for a position for which you area qualified unfairly, let us know ASAP. You can contact any one of your ONA labor reps to share your story. Your input will help us determine if there has been a breach of contract around filling of positions.

Workers Comp. & COVID

While we appear to have been very fortunate that no ONA member at SHMC 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.
Demand to Bargain Over New “Safety Absolute” Policy

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 3 corrective action for the first failure to follow either the Patient Identification policy or the Patient Lookup policy.

A level 3 corrective action is classified as a final written warning prior to termination. The new “Safety Absolute” policy also stated 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 & 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!

Thank you!
Your SHMC & SHHCS ONA nurse executive teams!

Chris Rompala, Kevyn Paul, Nancy Deyhle, Jessica Detering, Wendy Nau, Lisa Dirlewichter, Tonya O’Dell, Jenn Fain, Stacey Wetherell, Jo Turner, Desi Êtwater, Diane O’Connor and Danielle Kelly.

https://fundraise.foodforlanecounty.org/ONA
Short Staffed? SRDFs

SRDF’s 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.

**Staffing Request & Documentation Form (SRDF)**

- Is your unit compliant with your staffing plan this shift?
- If no, notify your charge nurse & advocate for increased staff.
- Charge nurse is expected to notify manager & house supervisor.

**When to Fill Out An SRDF**

- If your staffing plan isn't being followed or staffing is insufficient to meet patient care needs such as:
  - assessments, documentation, medications including PRNs, ADLs, etc.
  - and/or staff are not getting lunch or breaks.

**Why Fill Out An SRDF?**

- To increase patient safety, staff safety & improve patient care.

**Where Does the SRDF Go?**

- Nursing administration & ONA, Staffing Committee & PNCC for review & analysis with contractual response from Nurse Managers within 30 days.

**Per ONA Contract 17.8**

- "Retaliation or intimidation of an individual nurse who submits documentation of staffing deficiencies is inappropriate and shall not be tolerated."

**Questions & Concerns?**

- Direct Patient Care Nurses of RiverBend Staffing Committee: RBStaffingCommittee@gmail.com
- Professional Nursing Care Committee for Practice & Safety Issues: RiverBendPNCC@gmail.com
- ONA Assistance: practice@oregonrn.org