Call to Action Friday, March 15

Come speak at negotiations Friday, March 15. Share your thoughts on:

- The Medical Center’s proposal to require charge nurses and patient care coordinators to have a BSN degree and its proposal to eliminate all tuition reimbursement and education funds from the contract.

- Your support for your bargaining team’s proposals to:
  - Increase the PNAP differential
  - Increase tuition reimbursement funds

To coordinate this presentation we are asking those who wish to speak to come to the meeting room (200EB at RiverBend) at 9:30 a.m. with the presentation to administration scheduled to start at 10 a.m. If you are unable to attend the prep session but would like to speak, please contact Claire Syrett at Syrett@OregonRN.org. You can offer your thoughts in writing as well.

Per Diem Nurses Advocacy Moves Medical Center to Modify Proposal

The Oregon Nurses Association Sacred Heart Medical Center and Home Care Service (ONA-SHMC & SHHCS) bargaining teams met with administration on Friday, March 8, and Monday, March 11, to continue contract negotiations.

The teams spent much of the morning March 8, discussing the security situation at Riverbend with nurses offering their perspective on what was needed to better ensure a safe workplace. Administration shared the details of what had occurred in the past 24 hours and what security measures were being implemented immediately as well as their plans to seek further changes in security protocols at both hospitals. ONA-SHMC & SHHCS leadership will continue to work to ensure that nurses are included in all discussions regarding new safety measures for Riverbend, University District and Home Care nurses.

On March 11, your negotiations team offered a counterproposal on workplace violence prevention that incorporated proposals to that end. At their first session, both teams agreed that in spite of the heightened security and tensions in the hospital, it was important to proceed with negotiations as planned for that day.

In an organized effort to push back on the administration’s proposal on per diem positions, per diem nurses showed up in force to share their reasons for opposing the medical center’s proposal. Nurses who are in various stages of their careers with a variety of life circumstances spoke to the way current per diem requirements and compensation work in their lives and for the units in which they work.
Mel Carey, a Cath Lab FTE nurse moving to per diem more than over 25 years of nursing experience, shared that the administration’s proposal sent a message that her skills and experience were not valued or needed. Lorissa Miller, a nurse with Mom/Baby, spoke about the importance of having flexibility in her schedule to meet the needs of her family while also providing needed staffing coverage for her unit. Tina DiCastillo of Short Stay simply pointed to her two children who accompanied her to the session to say, “These are the reason I need to keep the flexibility of my per diem position.” A number of the nurses who spoke said that their per diem positions were vital to other people on their units being able to take time off or to provide coverage when nurses were out on family medical leave. Lynda Pond, a no differential per diem nurse in Labor and Delivery and ONA president, emphasized the skills and experience that more senior per diem nurses can bring to their units who might otherwise have to retire if they lacked this option. It was a powerful presentation that appeared to have the desired effect on the administration team. Later in the session, the PeaceHealth team offered a counterproposal on per diems that moved closer to the nurses’ proposal, although not enough to result in a tentative agreement being reached. The administration’s counterproposal added back the per diem no differential option, changed from a $6 an hour differential to a 15 percent differential for per diem differential nurses, and removed the automatic trigger for a nurse to be removed from their position if they don’t meet the requirements for one cycle. They did not agree to the ONA team’s proposal to proportionally reduce requirements for 12-hour shift per diems. Both parties will continue to discuss this proposal. Your negotiation team is committed to holding firm on maintaining the current flexibility and a better differential for per diems. The strong showing by per diem nurses at negotiations made a huge difference in how the administration viewed this proposal and showed, once again, the power of nurses’ voices in moving these negotiations in a positive direction.

Negotiations continued on Monday March 11, with more counterproposals being shared by both teams. Your negotiation team put forward a counter on paid time off (PTO) that moved closer to administration’s desire to have consistency with other PeaceHealth facilities while still maintaining the current 600-hour cap Sacred Heart nurses have. Unfortunately, the PeaceHealth team did not move towards the nurses on the most significant proposal related to health insurance. They continue to reject the proposal to reduce the hours worked to qualify for the lower

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**Attend the Bargaining Updates this Week & Pick Up Your ONA Scrubs**

Come to a bargaining update and get informed on what is happening at the negotiation table. Give your bargaining team the feedback they need to advocate on your behalf. Your voice is critical to the outcome of these negotiations. Drop in sessions are being held at Riverbend, University District and Home Care this week.

**SHMC/SHHCS Upcoming Bargaining Update Meetings**

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<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Location</th>
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<tbody>
<tr>
<td>March 13</td>
<td>7:30 – 9 a.m., Noon -1:30 p.m.</td>
<td>UD Support Service Building Cascade Room</td>
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<td>March 14</td>
<td>7:30 – 9 a.m. Room 61A Noon – 1:30 p.m. Room 22Y (Dining Room) 2:30 – 4 p.m. Room 22Y</td>
<td>RiverBend</td>
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<td>Sacred Heart Home Care Service</td>
<td>March 13 – Home Care Services 4:30 – 6 p.m. Juanita Fix Room</td>
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**More Scrubs are Available!**

We will have scrubs available for pick up at the above update meetings. We now have all sizes available in both scrub tops and jackets. Stop by for your bargaining update and pick up your ONA scrubs if you didn’t get them yet. Wear your scrubs or black every Friday starting now until we get a fair contract.
Per Diem Nurses Advocacy

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premium. This was one of the most important priorities our nurses stated for health insurance following the 12-hour shift reorganization over the summer. It appears that PeaceHealth administration still doesn’t appreciate the real financial impact this change has had on many nurses. Your negotiation team shared data showing the financial loss a typical nurse with child care needs and/or seeking their BSN and what the move to 12-hour shifts with a lower FTE has meant in terms of increased expenses combined with reduced income. Just the cost of increased health insurance premium costs a nurse over $2,000 a year for full family coverage. Your team will continue to press the PeaceHealth team on this vital issue and may issue a call to action for nurses to come and share your story about how this hardship has affected you and your family.

Towards the end of a long day the PeaceHealth team provided counterproposals on two priority areas for nurses – Article 8 Hours of Work and Article 9 Compensation. You can review details on both proposals in the update proposal summary on the Sacred Heart webpage, click here. Following are some highlights of their counterproposals. The administration seeks to remove the language that establishes 8-hour shifts as the standard shift for all nurses and replace it with language that allows them to create 4, 6, 8, 9, 10 and 12-hour shifts length positions as they determine the need for them. This is a big change from the current contract which limits the creation of what are referred to as “alternate length” shifts. The PeaceHealth team offered very little in contract language to assist with nurses receiving their required meals and breaks. However, they did agree to the nurses’ proposal to provide meals/breaks data on a monthly rather than quarterly basis to both the Staffing Committee and Labor Management Committee as well as to the unit-based practice council chairs.

On compensation the PeaceHealth team rejected your team’s proposals to convert differentials from straight dollar amounts to percentages and the proposal that sought to change the “sixth and consecutive days” language to simply “consecutive days” in order to provide some equity for those in 12-hour shift positions so they would receive a differential for five or more consecutive days. They did offer some modest increases in the weekend differential, certification pay and advanced degree differentials; click here for proposal summaries.

Your negotiation team did not offer any response to these counterproposals on Monday. They intend to discuss these in caucus on Friday, March 15 and prepare a response that is informed by member’s priorities. The focus of Friday morning’s session will be a presentation to the PeaceHealth team by nurses responding to the charge nurse proposal that would required them to obtain their BSN within two years of contract ratification, the elimination of continuing education dollars and tuition reimbursement from the contract as well as the elimination of the 15-year call exemption for surgical services. See the Call to Action on Friday, March 15 for more on how you can get involved in this important effort to show PeaceHealth why their proposals are harmful to nurses and their ability to provide the highest quality care possible to their patients.

Solidarity Action a Success!

Dozens of nurses were joined by hospitalists techs and other supporters for a Solidarity Action on the morning of Friday, March 8. Originally planned to take place in the main lobby at Riverbend, the gathering was moved to 200EB in deference to the heightened security measures that were in place that day. ONA-SHMC bargaining team co-chairs Phyllis Hurt and Kevyn Paul spoke as did team member Lisa Diriwachter and ONA President Lynda Pond. Emotions were high due to both the credible threat against the hospital and the terrible incident in which a patient took his own life. But nurses were not deterred from addressing the issues on the table for negotiations that day and were determined to continue to seek a fair contract for all members. In addition to the nurses who spoke, the newly elected president of the hospitalists’ union, Josh Plank, shared his members’
Sacred Heart Medical Center (SHMC) and Sacred Heart Home Care Services (SHHCS)

Solidarity Action a Success  continued from page 3

commitment to supporting the nurses in reaching a good contract. Later in the morning, Mel Duart, the newly elected treasurer for the hospitalists’ union, spoke to administration during the workplace violence prevention discussion to emphasize the need for frontline caregivers to be directly involved in the development of safety protocols for the hospital. Many nurses stayed in the room as the negotiation session began and listened while per diem nurses spoke to the PeaceHealth team about the per diem proposal and also participated in the discussion on the security measures and future needs for workplace violence prevention. Contract Action Team (CAT) member, Kendra Northam, brought signs of support that were posted around the room along with other signs created by some of the per diem nurses. The solidarity action helped bring nurses together and strengthen the voice of your negotiation team as they advocated on your behalf in their sessions on Friday and Monday.

Observe Your Contract Negotiations

The bargaining sessions are open to observers. Please come by on a break or day off to show your support for these negotiations:

Sacred Heart Medical Center

- March 15
  10 a.m. – 5 p.m. (location 200EB)

- NEW DATE! March 20
  10 a.m. – 5 p.m. RiverBend 200EB

- March 22
  10 a.m. – 5 p.m. RiverBend 200EB

- NEW DATE! April 5
  10 a.m. – 5 p.m. (location TBD)

March 4 and March 7

Home Care-Specific Sessions

Your Oregon Nurses Association-Sacred Heart Home Care Service (ONA-SHHCS) bargaining team held Home Care-specific sessions on March 4 and March 7. Below is an update from those sessions. We’ve made some progress but still have a lot of areas that we’re not able to reach an agreement.

On Monday, March 4, we began negotiations discussing concerns about the technological issues that nurses have identified as barriers for them in doing their work. Home Care Services Director Alicia Beymer invited a PeaceHealth information technology specialist to speak to our team. She also discussed the EPIC rollout planned for January 2020.

Your ONA bargaining team presented a counterproposal on article 3 - maintaining our proposal to include additional positions (under article 3.3 Coordinators) to include patient care coordinators (PCC), client community coordinator (CCC), community liaison, and CQI coordinators. Under per diem language, your ONA team proposed a single tier of per diem differential of 20 percent and maintained our proposal for a new retiree per diem nurse position. The PeaceHealth team presented a counterproposal to article 3 and rejected your team’s counter including the expansion of the coordinator language; instead proposed a single tier of per diem differential at a flat $7 per hour (an increase from their initial proposal of $6 per hour) with a decreased period of time to maintain compliance prior to the agency being able to terminate the per diem nurse for non-compliance of work requirements.

PeaceHealth provided a counterproposal on Article 8, proposing the ability to create more alternative

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shift lengths, stating that they may have an increased need in the future for shorter length shifts of four or six hours. They also proposed under article 8.13 that regular and part time home health and hospice nurses may be required to work weekends up to one weekend every eight weeks. PeaceHealth also rejected ONA’s proposal to not require Eugene-based SHHCS nurses to float to provide coverage for Peace Harbor home care patients in Florence and other coastal communities. They stated that this conversation would occur with representatives of both bargaining units later this year.

PeaceHealth also provided a counterproposal on Article 13 - filling of vacancies. They proposed a new article that would limit a nurse’s ability to apply for any other position within the agency until six months post orientation, unless the agency agrees. They also proposed language under article 13.2.1 increasing their ability to hire a more junior nurse over a more senior nurse. In addition, they proposed under article 13.4 that they could hire Patient Care Coordinators, CQI Coordinators, and Community Liaisons based on the sole discretion of the agency, eliminating seniority-based hiring for these positions. Your ONA bargaining team made a counterproposal rejecting most of SHHCS above proposal on article 13. ONA did agree to the addition of the expanded coordinator titles under 13.3 but proposed maintaining current language around the hiring process. In response to PeaceHealth proposal around limiting a nurse’s ability to apply to a new position, your negotiation team countered that a nurse could not apply for a position in another program for six months following the completion of orientation unless the nurse is oriented to the program in which the nurse is applying, or the agency and the Association mutually agree to an earlier transfer application date.

Your ONA team made another counterproposal around the expansion of the Professional Nurses Care Committee (PNCC) members and hours under article 17. We again proposed expanding the team to up to six members and increasing the number of hours per month to 17 (this was in counter to PeaceHealth’s last proposal of 12 hours per month). The administration’s team then provided another counter on this article, agreeing to six members and 17 hours/month for the PNCC’s work so we have a Tentative Agreement on this proposal.

Your ONA team made a counterproposal on Article 20, proposing enhancements to the labor management health benefits committee in Article 20.5.1, and proposed new language around establishing a Workplace Violence and Prevention Committee at Home Care and adding a seat for a nurse from this committee on the regional PeaceHealth Oregon Workplace Violence Prevention Committee.

For a full bargaining update please attend the Home Care bargaining update Wednesday March 13, from 4:30 - 6 p.m. in the Juanita Fix Room! On Thursday March 7, ONA asked PCC’s to speak about the impacts of the management proposal to require PCC’s to obtain their BSN within two years of the ratification of this contract and requiring it for the position in the future. Nurses attended negotiations and spoke passionately about this proposal.

Thank you to Monica Armstrong, Kristi Till and Jennifer Strandjord for speaking on behalf of the PCCs!
Thank You for the Food and PTO Donations!

Thank you to those who helped keep your negotiation team well fed during Friday and Monday’s sessions. Audrey Winner from ICU brought yummy breakfast burritos on Friday and the PACU provided a great homemade lunch. Mel Carey brought delicious cupcakes as a treat for the team. On Monday the University District Nurse Staffing committee provided the team with a much-appreciated meal from Chipotle’s. We currently have units scheduled to provide lunch for the remaining scheduled sessions. The team so appreciates this show of support and caring for the team.

Another way nurses have been showing their support is through PTO donations. Thank you to those individuals who have donated their unneeded PTO to the team. Please consider making your own donation to support your team who volunteer for this work. You can use the form below to make your contribution.

Debbie Hansen, Carl Hansen, John David Bulliard, and Lisa Diriwachter of PACU brought lunch for the team; Thank you!

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PeaceHealth Oregon Network – ONA PTO Donation

A represented caregiver may donate a minimum of one (1) hour and a maximum of 250 hours per year of his or her accrued PTO for the benefit of another caregiver who is a member of the same association negotiating committee.

To Be Completed By Donating Caregiver

| Caregiver Name: ______________________________ | Caregiver #: ______________________________ |
| # of PTO hours I wish to donate: _____________ | Date Submitted: _______ / _______ / _______ |

I understand that by signing this election form and donating my future accrued PTO hours to the bargaining team, my PTO bank will be deducted and my pay reduced for taxes related to the gross value of those hours. I further understand the value of my donated PTO will not be included in my retirement eligible compensation, and that this PTO donation is non-revocable. I authorize the PTO deduction and attest to the understanding my personal tax implication for the donation and its impact on my retirement benefits.

Caregiver Signature: ____________________________________________ Date: __________________