

Bargaining Update #2

SHMC Executive Committee

Chair: Chris Rompala (OR)
Vice-Chair: Kevyn Paul (UD-ED)
Nancy Deyhle (ICU)
Jess Detering (Labor and Delivery)
Tonya O'Dell (OR)
Lisa Diriwachter (PACU)
Stacey Wetherell (Oncology)
Jennifer Fain (7 Surgical)
Traci Benson (Out Patient Endo)

SHHCS Executive Committee

Diane O'Connor (HI)
Jo Turner (HO)
Desi Atwater (HH)
Faith Dunn (interim)

2023 Bargaining Team

Chris Rompala, Chair (Main OR)
Kevyn Paul, Vice Chair (UD ED)
Tonya O'Dell (Main OR)
Stacey Wetherell (Oncology)
Nancy Deyhle (ICU)
Lisa Diriwachter (PACU)
Jessica Detering (RIC)
Jennifer Fain (Surgical)
Traci Benson (OP Endo)
Jane Snar (Neuro)
Rob Sabin (UD Float Pool)
Diane O'Connor (HI)
Jo Turner (HO)
Desi Atwater (HH)
Faith Dunn (interim)
Kevin Tardiff (Hospice)
Alternate: Allison Hyder (Hospice)



MEMBERSHIP QR CODE

ONA Labor Representatives

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Bargaining Has Begun!



YOUR SHMC AND SHHCS BARGAINING TEAMS CELEBRATE THE END OF DAY TWO WITH THE HEARTS NURSES DELIVERED ON VALENTINE'S DAY

On day one, we heard compelling reasons from all of your nurse leaders for a contract that increases retention, recruitment, and respect.

All of them spoke of the moral injuries experienced over the past few years in a climate of constantly changing levels of danger, and the policies, procedures, and leaders that made it even more difficult.

Nurses spoke of lost patient lives, lost loved ones, and lost coworkers. There were many tears. And after administration left, there were many hugs and condolences.

This time of bargaining, we are focused on the issues of **RETENTION**, **RECRUITMENT**, and **RESPECT**. Administration's entire focus seems to

be summed up in the words of their lead negotiator, Mike Harrington: "No Margin, No Mission."

We have challenges ahead, and it will be hard, but we have a great team of nurse leaders representing you at the table.

Pre-bargaining did not go as well as we hoped. We started out a few weeks ago learning that administration wants to split the Home Care Services contract negotiations apart from the Medical Center negotiations.

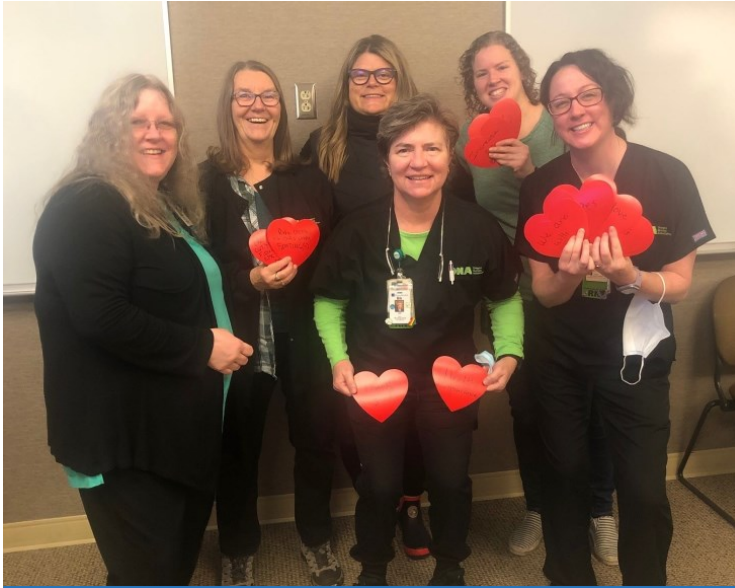
Historically, we have negotiated them together because the nurses in both bargaining units need similar contract language in many areas. It's also more efficient because administrators and nurses have to coordinate work

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schedules. They refuse to provide any legitimate reason to spit up the group other than “it’s our right.” To add insult to injury, they told us that “Sometimes change is hard.” Your leaders erupted in protest. Who says something like that to nurses in the year 2023? Needless to say, their lead negotiator did not get things off to a good start and we let them know it.

continued below



Lola Williams (center), former bargaining team member, came to visit on day one.

Kevyn Paul, Nancy Deyhle, Jess Dettering, Stacey Witherell and Heather Dalton pictured

In spite of this rough start, we are moving forward with optimism because of our united strength. On day one we presented a proposal to have the bargaining teams paid for their time bargaining. This proposal did not include the four-five hours before and after each bargaining session that we use to prepare.

Bargaining Dates

- ▶ **March 1**
- ▶ **March 2**
- ▶ **Location: TBD**

The administrators are on salary and suffer no loss in pay during negotiations. We just asked to be paid for the time sitting in the room negotiating with administration.

Your volunteer nurses have not been paid before, but in previous sessions they had more PTO in their bank. These past few years most nurses have used it all up just trying to survive COVID. Banks are low. Bargaining can take 200 hours!

THEY SAID NO.

[So, we will need some PTO donated](#) (see page 4 for a way to support your bargaining team).

Thanks to everyone that has already donated.

We proposed quite a bit of new language around discipline. Hopefully, you have not gotten in trouble over the past few years, but if you have, you have been exposed to the PeaceHealth version of Just Culture.

This is a model used all across America to help institutions and individuals work through errors on the job. Used correctly, it can be very effective for fixing system problems and helping employees that make mistakes at work.

But, PeaceHealth made a conscious choice to invent their own version that usually results in punitive discipline, regardless of system problems or other extenuating circumstances. When confronted on this bizarre mutation of a working model, the former head of HR admitted they changed it to fit their needs! The only real response was to tell us that they were talking to folks at SYSTEM about it.

IT GETS WORSE

They have decided to call every corrective action (CA), other than attendance, a performance CA. There used to be five categories, which is much more useful if the goal is to have a culture focused on employee retention, respect, and improvement.

With only one category, all sorts of issues emerge. For one, each of you could be quickly fired if you have a few rocky months. If you get written up for being late to work, wasting a medication incorrectly, and you miss a

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required education deadline they would all be considered “performance.”

Since they are all performance, each CA would stack on top of the previous one instead of being considered separate types of problems that need different types of responses. Sound odd? It is, and we have been fighting it for the past few years with the help of your amazing volunteer stewards.

A “performance” CA will also prevent you from getting PNAP. Is it fair to lose PNAP because you missed an education requirement for a few days? No. It is not. Finally, they have been choosing to deny transfers to new units for anyone that has any CA. This is a debilitating action to take against someone that is trying to move to a more satisfying position. Nurses have left for all of these overly punitive practices, and we proposed contract changes to prevent them moving forward. So far they have said they like it the way it is.

We are proposing that the Cultural Transformation Council (CTC) become a permanent part of the contract, because we have more work to do and our current volunteers will not be here forever. For any of you that have been here more than a year, you have probably heard of the Riverside chats and the No Bullying policies. These programs were introduced through the CTC. The CTC was born out of documented culture of bullying and incivility in PeaceHealth facilities three years ago. The CTC is composed of administrators and nurses that are dedicated to figuring out ways to make the facilities a satisfying place to work again.

And to put some teeth into the bullying policies, we have also proposed specific language around bullying and harassment by PeaceHealth folks in positions of authority against nurses. This has been a significant concern for years and we need to fix it. No one should experience this at work, and no one should feel compelled

to go against their own professional judgment. This can create moral injury, put patients at risk, and jeopardize your license! We are specifically asking to have some strong language that allows us to hold administrators accountable instead of promoting them. We saw some eyes rolling as we told our stories about feeling compelled to take on too many patients and having to ration our care.

We have proposed reducing the threshold for getting health benefits at PeaceHealth to 30 hours. We need to know if there are any significant changes to the providers, the formulas for determining prescription eligibility and any other changes to the plans. Many of you have been told you need to wait months for basic services. One story shared by a home infusion nurse was that a PeaceHealth employee with PeaceHealth insurance could not afford a needed infusion from a PeaceHealth provider and had to find a different provider.

What is the point of having health care if you can't find a provider or afford to use it. We also proposed that ALL medical benefits should be covered by PeaceHealth 100% for every employee, like McKenzie-Willamette. And finally, any communicable disease should be assumed to have been caught at work, not

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Solidarity Black Scrub Fridays!

**Wear Black Scrubs
Fridays to Support
ONA/SHMC-SHHCS
Bargaining Team.**



Starting Friday, Feb. 17, please wear black scrubs *every Friday* as we continue to bargain with PeaceHealth.

JOIN THE CAT!



We are looking for representatives to join our Contract Action Team (CAT).



The CAT nurses make sure that their department is informed about what is happening at the bargaining table and are engaged in the bargaining process.

It's important we have CAT members in each department to keep our members informed!

Email Tizoc Arenas (Arenas@OregonRN.org) to learn more!

HOW TO HELP

- [Donate PTO to the volunteer bargaining members for either unit.](#)
- Donate money directly to the team through **Venmo @Tonya-Odell-2** (Scan the QR code with your phone)
- Donate food to the team for a day text: **Tonya 3072502840**
- Wear **black** on Fridays to show solidarity
- Participate in other actions to let PH know we are serious
- Talk to a CAT



PTO LINK

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at Albertsons or walking to your car with your mask off.

PeaceHealth has proposed allowing them to low census someone in a six-day stretch without 12-hour notice. They also proposed including perioperative services in the short list of folks that are protected from floating.

That's it for the first two days. Your team made proposals that will help with retention, recruitment and respect. The other side came back with "no" to pay for your bargaining team or improving the just culture for corrective actions.

Their own proposals were underwhelming to say the least. Your team has more proposals to bring forward that we believe will help make nurses feel more valued and less taken for granted. Stay tuned for updates and see below for ways you can help or get involved. Our next negotiations dates are March 1 and 2. We will update you on times and locations soon.

If you have read this far, shown up for bargaining, donated PTO for the team, or filled out a Valentines Day heart we really appreciate it. We plastered the

room with the hearts so everyone could see your comments.

It really helped the team knowing we are supported by so many fellow nurses. We will continue to need every single one of you to get what we need to bring satisfaction back into our work.

Going forward keep an eye on your email, text messages and these newsletters so you can stay up to date and be involved. Also, look for your units Contract Action Team (CAT) members.

They will be reminding folks about other actions, like black Fridays.

