RATIFICATION VOTE ON WAGE PARITY COMING SOON!

Thanks to the support of nurses throughout the hospital, we negotiated a contract that brings us to wage parity with Good Samaritan Regional Medical Center (GSRMC), for the first time ever. Over the years, our bargaining teams narrowed the gap so that we could complete that progress now!

Our team’s hard work coupled with our large attendance by members at bargaining, the many selfies where you shared your personal stories, and the display of ONA swag and green showed the employer we are unified!

Our bargaining team unanimously recommends a YES vote to ratify. The complete redline contract and a handy summary of changes are available on our webpage.

The online ratification vote will open Friday, June 25, at 8:00 a.m. We will send the link via email message and post it on our webpage. It will close one week later, Friday, July 2 at 8:00 a.m.

Only dues-paying ONA members may cast a ballot in a ratification vote. If you are not a member yet, please join us by completing this form www.oregonrn.org/apply. Submitting it will automatically generate an email to your personal address. To complete the application process, one must click through on that email.

CONTRACTUAL HIGHLIGHTS

Wage parity with Corvallis nurses beginning in January. Upon ratification, 2.75% across the board wage increase followed by 1% in January 2022. In July 2022 and July 2023, 2.75% wage increase.
We increased these seven differentials:

- Weekend differential increased to $2.00/hour (currently $1.75).
- Increase differentials for BSN to $1.50 and MSN to $1.75 (current $1/hour for either degree).
- Evening shift differential increase to $2.50 (currently $1.75/hour).
- Night shift differential will be tiered based on years working night shift: $5/hour for first four years, $5.75/hour for 4-8 years, $6.25/hours for 9+ years (currently $5.00/hour for all).
- Preceptor differential increase to $1.50/hours from 75 cents currently
- Increase on call pay to $5.00/hour regular, $6.00/hour holiday. (Currently $4.50/$5. GSRMC is $4.75/$5.50.)
- In Surgical Services, call back increase to $12.00/hour from $10/hour; increased after shift and second crew differential to $12/hour from current $10.

We transformed the MA rotation list so that it continues in a cycle and no longer resets every pay period. Everyone will take cuts equitably. One-quarter of a shift counts as a turn and no nurse can lose more than 18 hours in pay period. We brought the low census cancellation (i.e., cut order) into its own section of the contract, so we no longer use layoff order.

Other major changes include:

- For the first time, we have clear rights on department reorganizations (same language as GSRMC).
- We recaptured some ability to rescind our PTO.
- Nurses who work a shift less than seven hours may waive right to meal period. OR and PACU nurses may waive meals and breaks on call back.
- Shared governance, Staffing Committee direct care reps meet one hour immediately prior to Staffing Committee on paid time and must be released from work. Bold language to create strong Unit Based Councils in all departments: ED reformed within 90 days; Med Surg, Hospice Outpatient and Hospice Inpatient UBCs formed within 12 months; remainder of house formed within 24 months.
- Corrective action older than five years cannot be considered (same language as GSRMC, but they have seven years).
- Rename PNCC to Nursing Education Committee focused on administering education funds with three members. Paid time for pre-course work now in contract.
- SAGH ONA nurse to serve on SHS Health Insurance Advisory Committee (same language as GSRMC)
- Hospice Valley Outpatient. When ADM absent, vacant shifts are treated and paid as orphan call.
- Hospice Coastal will create and post an on-call position (0.6 FTE) to partially relieve them of taking all call shifts, before September 1, 2021.
To get those gains, we agreed to three takeaways (or weaker provisions than our current language):

- The PTO cap will be 700 hours effective July 1, 2023, down from current 760.
- In Surgical Services, we will phase out age 62 call exemption at end of Hospice outpatient this contract, but those who reach 62 by then are grandfathered out. The employer insisted this age discrimination exposed them to legal liability.
- In Hospice Outpatient, when insufficient volunteers leave absent ADM shifts vacant, employer may assign call, in rotation, not to exceed one shift per month.

For more information, contact any bargaining team member:

- Chair: Melissa Pfleiger (ED)
- Vice-Chair: Christine Holden (Hospice)
- Secretary: Amina Topp (ED)
- Grievance Chair: Karen Jantzi (Ambulatory Surgery)
- Membership Chair: Johanna Bilbo (Ambulatory Surgery)
- PNCC Chair: Kathie Davis (ED)
- At-large Bargaining Team Member: Shannon McGarrin (Med Surg)

Or our labor rep, Gary Aguiar, text/call 503-444-0690 or Aguiar@OregonRN.org