Clarity on New Step Placement

We’re excited to report that one of the top priorities from our survey has been resolved! Members were very concerned about what step placement nurses might be placed on under management’s newly proposed step system. Under management’s initial proposal they could have “rounded down” by placing people on the lowest step corresponding with their current step. For example, the risk was a nurse with 12 years experience, who is currently sitting at step 10 for 2 years, be moved onto the new step system at Step 10 instead of the newly created Step 12. We are very excited to confirm that management will be moving nurses to the step most closely connected to their current step in addition to the number of years they’ve been at that step. Fair wages both with competitive pay levels, and proper step placement polled the absolute highest on our survey and we’re very happy to report major success in this area. When nurses stand together we can assure that all nurses get fair and competitive compensation for the serious contributions we make to this hospital.

Bargaining Continues with Helpful Discussions: Wages, LSI, Education, APL

On Wednesday, May 30 we made more progress at our negotiation session towards a strong new contract. We discussed our very top priorities brought forward by members in our survey and nurses conversations across the hospital. The Oregon Nurses Association (ONA) bargaining team stood up for competitive wages, improvements to Legacy Shift Incentive (LSI), increasing paid time for education, and increasing Annual Paid Leave (APL) rates and annual caps. Discussion was very insightful on each issue and we’re hopeful to make more progress at our upcoming negotiation sessions in June.

We learned more about the implementation plans for the new wage scale detailed below. We learned about the ways in which LSI is utilized across the Legacy system as compared to Silverton. Our team maintained that we have unique needs for LSI at Silverton that need to be addressed. An LSI policy that works for a giant hospital like Legacy Emanuel does not necessarily create the incentives needed to fill all shifts in very small units in Silverton. We learned about how the hospital has invested more resources in adding more mandatory trainings on paid work time, such as STABLE and Advanced Cardiac Life Support in the Family Birth Center (that were not previously considered mandatory trainings). However, we asserted that there is still a need to increase paid time for trainings in other departments. Lastly, we asserted a strong need for increasing Annual Paid Leave rates and the annual cap as 84 percent of nurses surveyed reported it as important to reaching a new agreement. Management suggested that if nurses are using their APL to cover their low census, perhaps more of them should cross train for floating. The bargaining team would love nurse feedback on this issue, so be sure to let your bargaining team representatives know how you feel!

We’re hopeful after the useful discussion today to reach further agreement on these issues at our upcoming negotiating sessions in June. Most important of all, is to have nurses’ voices in this process, and to stand together to show the top administrators how important a strong new agreement is to all of us.

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