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NURSES CONTINUE TO SPEAK UP

When nurses unite, the employer responds

We have heard many positive comments in regards to our efforts to engage the employer about high turnover, the roll out of the pain management regime and inappropriate communication from some managers. Sky Lakes Nurses are often reluctant to speak out individually for fear of retaliation but they are grateful to our ONA leadership for listening and expressing their concerns to the employer.



By working together in a united fashion, our voices are magnified. Moreover, we protect each other from retribution. As a result, no single nurse is left hanging by his or herself. If nurses band together and speak with a unified voice, the employer listens. We appreciate our CNO's efforts to engage with nurses over this issue.

Juliann Underwood, our BU President, reports, "We are continuing to monitor this situation. We would love to hear from more nurses. We hope to hear things are improving. We want to hear how things are going, both good and bad."

RNs also found the ONA resource on workplace bullying to be helpful. "Nurses and Bullying in the Workplace," produced by ONA's Professional Services Department, can be found [by clicking here.](#)

Important ONA Nurse Resources

[Membership Services](#)

[Government Relations](#)

[Membership Application](#)

[ONA Calendar](#)

[Professional Services](#)

[OCEAN-CE Online](#)

Got Breaks? Our Guide To Meals And Breaks

Safe patient care includes caring for ourselves, rested nurses take mandated breaks

Nurses ensure patient safety every day in all sorts of ways, including taking care of themselves as declared in Provision 5 of the ANA Code of Ethics. Rested nurses perform their professional responsibilities at higher levels, are less prone to errors and interact with patients and co-workers in a more collegial and productive manner. A nurse who takes care of herself engages in an active plan to safeguard her own rest, including meals and breaks.

“The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence, and to continue personal and professional growth.”
– ANA Code of Ethics, Provision Five

Meals and breaks are governed by Oregon’s Bureau of Labor and Industries and under our collective bargaining agreement with our employer. The accompanying table details the number of paid 15-minute rest periods and unpaid 30-minute meal breaks required by our contract and the law.

Breaks Are Work-Free, No Interruptions

Under state law, meals and breaks must be completely duty-free periods without any work-related interruptions. If a meal or break is interrupted by any work-related intrusion, the break is NOT a legal break. If you are required to perform any duties during your break, then a break did NOT happen.

Length of work period	Number of paid 15-minute breaks required	Number of unpaid 30-minute meal periods required
Less than 2 hours	0	0
2 – 6 hours	1	1
6 – 10 hours	2	1
10 – 14 hours	2	1
14 or more hours	4	2

So, if you sit at a computer charting, monitor a patient’s telemetry or strip, read work-related emails, study materials or are asked a question about a patient, then you did NOT have a break.

If your paid 15-minute rest period is interrupted, your rest period meal should be restarted or reset from the point of the interruption. If additional coverage is not available at that time, you should be offered another 15-minute rest period later in your shift. If your unpaid 30-minute meal break is interrupted, several options exist to ensure you get a break: (1) You should be paid up to the point your meal was interrupted and the 30-minute meal break restarts from there, (2) you can take your 30-minute meal break later in your shift or (3) you can clock your missed meal break and get paid for it.

Nurses Must Take Breaks as Directed by Employer

Of course, we have a responsibility to self-advocate for breaks, but we also must take breaks at the time we are directed to do so by our employer (i.e., the charge nurse or a manager). Under state law, employees can never legally waive their rights to receive required rest and meal periods. The employer is accountable for guaranteeing we get our breaks. They may even discipline an employee who refuses to take all mandated breaks.

“Self-compassion is simply giving the same kindness to ourselves that we would give to others.”

– Christopher Germer

Our contract provides for professional and respectful conversations about meal and rest periods. Nurses and managers should collaborate to find workable solutions. Furthermore, a staffing subcommittee is authorized to support this process through financing by the hospital.

Some ONA contracts require the employer to provide a meal period in the first six hours of a shift. If that does not happen, nurses at those facilities are entitled to premium pay (i.e., time and one-half) until they get their meal break. Our contract does not contain such a missed meals provision.

[Click here for more information on state law around meals and breaks.](#)

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Got Breaks? Our Guide To Meals And Breaks (continued from page 2)

Contractual Provisions Governing Meals And Breaks

ARTICLE 10. LUNCH AND REST PERIODS

Section 1. Meal Periods During each shift, the nurse working six (6) or more consecutive hours shall be entitled to take a duty free thirty (30) minute break for a meal, at a site away from the nursing unit if the nurse so chooses, unless patient care needs dictate otherwise. Such meal periods shall be unpaid and shall be scheduled as close as possible to the middle of each shift.

A. Nurse managers will encourage RNs to report missed breaks or meals, and will support them in all such reports. All communications between managers and nurses about a nurse's individual missed breaks or meals will be conducted privately. The goal is to work collaboratively to find a way to solve the problem of missed breaks or meals, not necessarily to allocate blame for the problem. The RN and charge nurse will communicate proactively and appropriately regarding coverage for breaks and meals. The RN retains personal responsibility to take breaks and meals when offered and reasonable, as long as patient care is not compromised.

B. In the event the nurse is not relieved, the thirty (30) minute meal period shall be counted as time worked for the purpose of computing overtime.

Section 2. Breaks/Rest Period One fifteen (15) minute rest period shall be allowed for each four (4) hour period of consecutive hours of work as follows:

2-6 hours:	One break
6-10 hours:	Another break
Over 10 hours:	Another break

Meal and break periods do not interrupt consecutive hours of work.

A. Scheduling of breaks/rest periods will be coordinated between supervisors and co-workers recognizing patient care needs come first.

B. Nursing mothers who return to work post maternity leave and who are expressing milk for their baby will be entitled to a reasonable rest period of no less than thirty (30) minutes for every four (4) hours of their schedules shift or major portion thereof, pursuant to Oregon Bureau of Labor and Industries regulations. A flexible break schedule will be provided to the breast-feeding mother for the duration of breast-feeding.

Section 3. Missed Meals and Breaks The staffing subcommittee will be supported in processes and financing by the Hospital in its ongoing efforts to find solutions to the problem of missed breaks and lunches, with the results of these efforts to be approved by the full Staffing Committee.

This Month In History

45 years ago, Oregon Tech nursing program accredited

On July 5, 1975, the nursing program at Oregon Institute of Technology was accredited by the National League of Nursing, allowing graduates to transfer credits to an upper-division program. Twenty five new students were admitted into the program in the Fall of 1974. [Click here to read more.](#)

Nurses struck McKenzie Willamette in Springfield for 85 days, the longest nurse strike in OR history

On July 14, 1981, ONA nurses struck McKenzie Willamette Memorial Hospital for 85 days; the longest nurses' strike in Oregon history. Of 125 nurses employed at the facility, all but four walked off the job and set up pickets. The primary issues were adequate pay, sick leave use and accrual and night differentials.

The hospital used scab replacements and nurse managers to backfill, but was forced to reduce patient services throughout the summer. With federal mediation, the nurses won pay increases of 11.4

percent for the first year and 9 percent for the second of their two-year contract. Two years earlier, MCW nurses also struck the facility for a month over wages and settled with help of a federal mediator.

Learn more here:

- ◆ [August 28, 1979 Register Guard article](#)
- ◆ [August 31, 1979 Register Guard article](#)
- ◆ [September 25, 1981 Register Guard article](#)
- ◆ [October 6, 1981 Bend Bulletin article](#)
- ◆ [October 8, 1981 Register Guard article](#)



Thirty-five years ago, ONA nurses struck McKenzie Willamette over wages and benefits. MCW nurses, shown here, picket in support of their colleagues at Sacred Heart in 1980.

Vital Labor Signs

News from nearby hospitals

In Prineville, a class-action lawsuit on behalf of nurses was recently settled. Fifty-one nurses will share in \$500,000 in back pay for unpaid study time associated with mandatory training. Also at St. Charles-Prineville, ONA leaders are working to increase the number of nurses with certifications. This September, two specialty certification review courses will be offered: Trauma Certified Registered Nurse and Certified Nurse Operating Room.

The ONA Executive Committee at St. Charles-Bend is conducting a survey of nurses to determine whether their recently negotiated contract language regarding meal and rest periods has been implemented on every unit.

Nurses continue to bargain with Mercy Medical Center in Roseburg, where both sides have reached tentative agreement on cleanup language. After six bargaining sessions, they remain apart on wages and differentials; resource/float pool agreement; scheduling and call for the operating room, a heart center and home health/hospice; as well as holiday scheduling and casual part time requirements.

At Harney District Hospital in Burns, nurses unanimously ratified their tentative agreement on June 24. Their three-year deal include wage increases of 3% the first year, 2.5% the second, and 2% the third year, new certification and BSN differentials, an L&D recovery premium, and three additional holidays.

Sacred Heart Has Reached Agreements with Nurses, Hospitalists and Operating Engineers

ONA's bargaining team has reached a tentative agreement with Sacred Heart after more than 18 bargaining sessions in the last two months, including one marathon 18-hour session. At press time, details were not available. We will provide more information as soon as it is available.

Hospitalists at Sacred Heart (SH) reached a historic first agreement with their employer. To our knowledge, this is the first group of hospitalists in the country ever to be unionized. Kudos to David Schwartz and the entire



group! Their contract requires a Hospital Medicine Resource Committee with three hospitalists and three administrators to make decisions on patient loads and staffing issues. If they are unable to reach a decision, either party may ask to bring in a mediator. The Pacific Northwest Hospital Medicine Association is organized as an independent affiliated with the American Federation of Teachers as Local 6552. AFT has a service agreement with ONA, where we provide staff to negotiate and—now—implement the contract. Our labor rep, Gary Aguiar, has been assigned to represent these SH employees, whose contract expires in October 2017.

On June 9, the Register Guard reported SH reached an agreement with the 60-plus members of the International Union of Operating Engineers, Local 701 the prior week. No details are available. Since SH reached a first contract agreement with SEIU – Local 49 in April, all four labor unions representing SH employees have new collective bargaining agreements.

Other Facilities in Eugene/Springfield

Nurses at McKenzie Willamette settled an Association grievance over weekend differential on behalf of night nurses. The employer agreed to pay nearly \$20,000 in back pay to 58 nurses for an average payout of \$343. This victory was possible because nurses banded together to make the case that in the past some managers had bypassed the Kronos system to pay some—but not all—nurses their full weekend differential. Union stewards built nurse power by contacting, communicating, and informing nurses about the contract violation and our joint actions.

In an unrelated grievance at MCW, ONA succeeded in removing unwarranted discipline arising from patient falls. This summer, four nurses received stage one (verbal) warnings because a patient under their care fell. As a result of our efforts, these disciplinary actions

Vital Labor Signs

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were removed from all four nurses' personnel files. The employer agreed to convert the discipline to coaching and counseling, which is not disciplinary in nature. Remember, if you are called into a meeting with your manager which you think might lead to discipline, invoke your Weingarten rights to representation.

WEINGARTEN RIGHTS

If this discussion could in any way lead to my discipline or termination, or affect my personal working conditions, I request an association representative, steward or officer be present. Unless I have this representation I respectfully choose not to participate in this discussion.

Also at McKenzie Willamette, SEIU-Local 49's 350 employees reached a tentative agreement with their employer in mid-July. At press time, no details were available.

At Cascade Health Solutions, a home health and hospice provider in Eugene, nurses unanimously ratified their tentative agreement on June 30. The new contract contains all of the ONA's demands around on-call, except a third part-time position. Moving forward, the two on-call positions will earn leave at the same rate as other nurses, can self-schedule, will get paid for attending voluntary meetings, are now part of the holiday rotation schedule and will receive \$4.50 per hour that is not otherwise compensated. The three-year deal contains provisions for a new Step 14, a night differential for hospice house nurses, no mandatory floating for non-hospice house RNs to the new hospice house, no changes to benefits, and 1% wage increase in each year of the contract.

News from other parts of the state

The bargaining team for the thirty nurses employed by the Providence Triage Service Center reached a tentative agreement (TA) with their employer. The TA now goes to a ratification vote of the dues-paying members on August 10. The TA includes 2% annual wage increases, expanded holidays and increased

differentials.

At Samaritan Lebanon Community Hospital, ONA nurses are bargaining with their employer to eliminate a two-tiered benefit system and implement fair share/agency fee (i.e., a closed shop). They tentatively agreed to create a labor management committee.

The Multnomah County Public Health Department is considering whether to open on Saturday for clinic hours. ONA's contract already includes a \$3/hour weekend differential and a requirement of two days off in a row, but nurses are monitoring the discussion. The county approved a FY17 budget that will improve staffing at the Inverness Jail.

At Oregon Health Science University in Portland, ONA released a pre-bargaining survey in July as they prepare for bargaining a new contract. Their existing contract, for 2,400 nurses in the bargaining unit, expires on March 30, 2017. Nurses continue to expand their union steward ranks; many stewards have been trained and have stepped up to participate in numerous activities, including disciplinary hearings and improved communication.

At Providence Willamette Falls Medical Center in Oregon City, OR, the 200 nurses are preparing to bargain with their employer; their contract expires December 31, 2016. At Providence Portland, nurses petitioned their CNO in response to a reduction in the OR staff and place more of them on-call at nights and weekends. Patient volume has remained steady, so nurses asked for the additional staff back. The CNO is investigating. In Salem, Marion County Public Health nurses asked for a 12 percent wage increase the first year and the county responded with 1 percent. Bargaining continues.

Congratulations to the nurses at Columbia Memorial Hospital in Astoria who voted to ratify their contract June 29. Their new 3-year contract calls for 6 percent raises for nurses at steps 1-9 and 3 percent raises for nurses at steps 10-25 effective immediately, with 2 percent raises June 1, in 2017 and 2018. Nurses were also successful in securing limits on on-call requirements and rotating shifts. There were no changes to any of the insurance plans.

Yes On 97

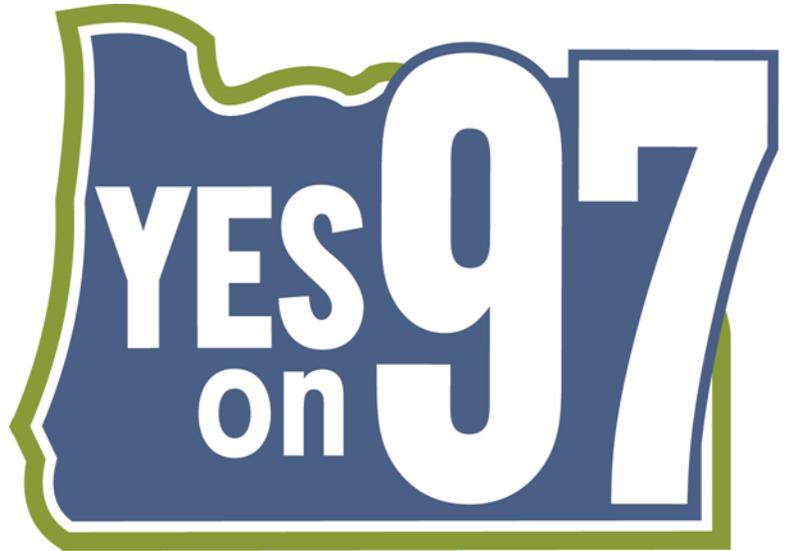
Oregon Nurses Association (ONA) is proud to endorse Measure 97 this November – the ballot measure that would hold some of the largest corporations accountable to working Oregonians. Measure 97 asks some of Oregon’s largest companies – including the likes of Comcast, Walmart and Monsanto -- to invest in Oregon’s communities by changing the tax code to ensure that C-corporations with over \$25 million in in-state sales pay their fair share in corporate taxes.

By law, the estimated \$6 billion in revenue Measure 97 would generate would be allocated to public education, senior services and health care. Part of this funding will help fill the anticipated gap in Medicaid funding to keep thousands of Oregonians on the Oregon Health Plan, extend care to uninsured children across the state, and help provide Oregonians with health services like school nurses and basic public health programs.

In advocating for our patients, nurses understand that Oregon schools should be fully funded, all seniors should have services to stay safe and independent,

and everyone should have access to quality, affordable health care. But none of that can happen when Oregon has the lowest corporate tax rate in the country.

To learn more and get involved in the Yes on 97 campaign, contact ONA’s political organizer Chris at Hewitt@oregonrn.org or by calling 503-293-0011.



Protect Your License, Protect Yourself!

Should nurses and nursing students carry their own personal liability insurance policy? The answer is an unequivocal yes. Unfortunately, a contrary opinion is apparently being voiced by employers, faculty and nurses themselves. You carry insurance to protect your home, your car and your health. Why not your career?

For more information please go to www.nso.com. If you would like to discuss professional practice issues you may also call Susan King or Jordan Ferris at the ONA office 503-293-0011.



CORRECTION

In our last newsletter, our article that voiced nurses concerns misidentified our facility's accrediting body. Det Norske Veritas (DNV) certified Sky Lakes in May 2013. [Learn more by clicking here.](#)