Management Responds to Proposals

For the first time, management responded to our proposals today with proposals of their own. While the contract they are currently proposing does not lower the current standards at Unity Center for Behavioral Health (UCBH), it’s still far below what ONA nurses have at every other Portland-area hospital. For many topics that nurses have said are very important, Legacy is proposing zero improvements from what we have currently. Rather than making an agreement they can be held accountable to on topics like workplace violence and staffing, Legacy management wants to retain their ability to change policies related to our working conditions however and whenever they see fit.

While there was some incremental progress in a few areas (management proposed a grievance process with binding arbitration and agreed to allow ONA bulletin boards in our departments), we still have a long way to go. Management’s proposals did not include just cause for discipline, nor have they agreed with our proposal to form a workplace violence committee. Legacy has not yet offered us a proposal on wages.

For more information or if you have any questions, contact a member of your bargaining team: Sarah Mittelman, Christine Allen, Rebecca Brunk, Kristen Sharp, Tracie Henry, Sherrie Neff, Haley Choi, and Amer Filipovic.

SAVE THE DATE:
BARGAINING TEAM MEET-N-GREET
March 26, 11 a.m. - 1 p.m.
and 10:30 p.m. - 12:30 a.m.
Come for coffee, snacks, bargaining info and more!

UPCOMING BARGAINING DATES:
- Wednesday, March 4: 10 a.m. - 4 p.m.
  Randall's Children's Hospital 2813
- Thursday, March 12: 11 a.m. - 4 p.m.
  Aquinas Hall 340 NE Clackamas St (three blocks from Unity)
- Thursday, April 2: 11 a.m. - 4 p.m.
- Thursday, April 9: 10:30 a.m. - 4 p.m.
- Tuesday, April 14: 10 a.m. - 4 p.m.
- Tuesday, April 21: 10 a.m. - 4 p.m.
- Wednesday, April 29: 10 a.m. - 4 p.m.

ONA/UCBH NEGOTIATIONS TEAM
- Sarah Mittelman, RN (PES)
- Christine Allen, RN (Unit 5)
- Rebecca Brunk, RN (Unit 1W)
- Kristen Sharp, RN (Unit 2)
- Tracie Henry, RN (Unit 6/Adolescents)
- Sherrie Neff, RN (Unit 5)
- Haley Choi, RN (Unit 1W)
- Amer Filipovic, RN (Unit 1W)
Meet with Multnomah County Commissioners

On Wednesday, March 5 at 6:30 p.m., ONA nurses at UCBH and Multnomah County will have an opportunity to meet with at least two Multnomah County commissioners, Lori Stegmann and Sharon Meieran (and hopefully more), to talk about the state of nursing and patient care in our facility and the importance of the work we do in our community. All UCBH nurses are invited to attend.

As you may know, Multnomah County has some oversight responsibilities related to the UCBH, and county representatives have been meeting with representatives from Legacy and the State of Oregon to discuss Unity’s future. The Multnomah County commissioners are the highest decision-makers in the county government, so it’s important that they hear from frontline nurses as well as Legacy executives when making decisions about Unity.

The meeting will be Wednesday, March 5 at 6:30 p.m. at The Encorepreneur Café, 1548 NE 15th Ave, Portland. Please RSVP to Giesa@OregonRN.org.

Update: Delegation vs. Assignment

Last month, nurses and managers at UCBH crowded a room to hear Oregon State Board of Nursing’s (OSBN) Executive Director, Ruby R. Jason, expand on the Oregon Nurse Practice Act and answer our questions regarding safety checks. Following UCBH’s sentinel event in July 2019, there have been conflicting messages over our responsibility for safety checks and several nurses have found themselves in meetings with human resources and managers about this responsibility. This is why 80 percent of us signed a petition to raise the issue with UCBH’s president, Melissa Eckstein. Management did hear us and this is why Ruby R. Jason was invited to speak with all of us. We are glad that Ruby R. Jason was able to come, as she is a strong nurse advocate! Our ONA nurse practice consultant, Therese O’Donnell, attended the Q&A session with Ruby Jason. She emailed her takeaways (in italics) and recommendations from our meeting to Kari Howard, Unity CNO. Earlier this month, Kari Howard responded to Therese’s email stating that she agrees with our understanding.

We are delighted to hear that Kari is in agreement with us. ONA bargaining nurses took it upon ourselves to update the “Delegation vs. Assignment” PowerPoint we used for a 2018 training. You can find this PowerPoint on the ONA/UBCH webpage at www.OregonRN.org/unity.

Our ONA/UCBH bargaining team agrees with Therese’s list of recommendations and hopes we can meet with BHTs and BHAs in shared governance to collectively discuss this new information. Therese has sent this letter to UCBH CNO, Kari Howard, and UCBH President, Melissa Eckstein.

Hi Kari and Ruth, I wanted to follow up with you both about the meeting with the OSBN. As you know, there was a lot of information covered. Some key takeaways that I noted were:

1. If assignments change or acuity changes throughout the day, it’s the RNs responsibility to communicate up the chain of command if they feel unsafe or need additional resources. It might be necessary to better define how nurses can utilize the chain of command to request more resources to safely care for their patients and what the chain of command process looks like. continued on page 3
2. Preferably in a shared governance committee, it should be determined what the BHT can and cannot do. The competencies need to clearly be communicated with RNs, so that the RN is fully aware of which tasks they can assign to the BHT. The employer then bears the responsibility for training and validating competencies of the UAP. This also means the employers bears the responsibility if the UAP does not perform the assigned task.

3. Rather than working in parallel, BHTs and RNs need to be working in tandem and communicating with one another. BHTs should be assigned to an RN, then the RN assigns them a task to the appropriately matched patient. The RN needs to clearly communicate to the BHT how often safety checks should be performed based on physician orders.

5. If a BHT does not perform their assigned task, the RN is NOT held responsible. The RN should reassign or complete the task if/when they become aware an assignment is not being performed by the BHT.

6. RNs utilize several aspects of data, which can be collected by various types of healthcare professionals. RNs utilize this data to help them develop a comprehensive assessment of the patient. Additionally, the RN looks at orders from members of the healthcare team (physician, psych, social work, dietary, etc.) and utilizes this to help develop a plan of care. The RN can then assign tasks to the appropriate colleagues, provided they have the competencies to perform those tasks. The organization should determine what BHTs can do, so that nursing can perform nursing care.

- Using the role of the BHT as an example: A BHT is assigned to a nurse. The nurse makes the appropriate match between a BHT and a patient. The nurse assigns the BHT a task (safety checks) and the BHT is to fulfill that task and document. The RN is not responsible for the task not being completed if the BHT, for some reason, does not complete the task.

7. RN’s role is to keep patients safe, while nursing leadership’s role is to provide for a safe environment with the appropriate resources so that nurses can safely care for their patients.

In conclusion, based upon Ruby’s explanation of the Nurse Practice Act and several of the questions asked during the meeting, it sounds like there is a real need for more transparency in job descriptions of BHTs, competencies, and policies. I would recommend the following to each shared governance committee or unit practice council:

1. The shared governance committee and nursing leadership collaborate to determine and/or revise policies, job descriptions, and competencies of the unlicensed assistive personnel Unity utilizes (i.e. BHT 1, BHT 2, BHA, Security, etc.).

2. The shared governance committee discuss how BHTs and BHAs are validated in their competencies and determine at what point in their orientation is this accomplished and who will sign off on their competencies.

3. The shared governance committee discusses when it would be appropriate to have a BHT or BHA staffed to perform milieu management (my understanding is that sometimes there are several patients in the milieu and many q15 safety checks to be performed, including monitoring of environments and objects, yet only one BHT or BHA is performing this task for the entire unit. How can this truly be performed and documented accurately?)

4. The shared governance committee discuss the differences between being “busy” and being “unsafe” and create a policy on how to escalate up the chain of command.

5. Email the Oregon Health Authority to determine whether BHTs and/or BHAs should be included in the staffing plan. I would encourage one of the direct care staffing reps and Kari to email Anna Davis at mailbox.nursestaffing@dhsoha.state.or.us to obtain clarification.
The 2020 ONA Convention and House of Delegates will be held on Monday, May 18 (CE Day) and Tuesday, May 19 (House of Delegates) in Portland, OR. The convention's theme is "Rising Up Together" and will feature sessions on professional development, nursing practice and workplace issues, as well as topics critical to ONA’s strategic plan including equity and inclusion.

Participants of the CE day on Monday, May 18 will be able to earn up to 5.25 continuing nursing education contact hours. Oregon Nurses Association is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.

Registration is open and will close May 1, 2020.

Nurses at Unity can register for free, sponsored by Constituent Association 1, as a welcome to ONA! A special discount code has been generated for Unity nurses to use when completing registration. Use the code 2020RegUnity to register for free! (Please note: the registration code is case-sensitive.)

www.OregonRN.org/event/2020Convention

Legacy, Bargain AT Unity!

Both nurses and our colleagues across the hospital wore stickers to show support for bargaining AT Unity. Legacy management continues to try to schedule bargaining at Emanuel or Randall’s Children’s Hospital to make it difficult for us to observe our own negotiations. We know there are open rooms here! Let us participate!

Unity Bargaining Team

PES

1W - Days

1W - Nights