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The Official Publication of the Oregon Nurses Association (ONA)
Thirty-four years ago, the phrase "lifelong learning" had an entirely different meaning to me than it does today. As a graduating nursing student, hearing that phrase from my professors was not a welcome idea after four long years of study to become a registered nurse (RN). I was focused solely on getting out of school and putting all I had learned into action. Nevertheless, shortly after graduation and my celebratory Hawaiian vacation, I enrolled in a licensure review course to begin the next phase of my educational journey. As I began my work as a graduate nurse and started attending orientation classes and other offerings at my workplace, I soon came to understand what my learned professors had been trying to tell me. I could embrace the continual pursuit of knowledge in the ever-changing health care environment, or I could become stagnant in my practice and force myself out of the profession in short order. Clearly I made the right choice.

For many years I have read nursing and critical care journals, attended in-service presentations, traveled to attend conferences and symposiums, and participated in online learning activities. I have been CCRN-certified as a critical care nurse since 1994, and I often brag that I was a certified nurse before it was cool to display those credentials.

Still, much of my learning has been unstructured and borne out of necessity, like arriving at work on the night shift to find I was the most senior nurse there and being put in charge of the unit without any mentoring or preparation. Then there was the time I was handed the owner’s manual to a new life support device and told to read it and ask questions of the nurse I was replacing before she left because no one else in the state had expertise to support this patient.

I can honestly say that the most important source of my learning has been achieved during my practice in consultation with my nursing and multidisciplinary colleagues, and in caring for my patients. My patients have been perhaps my greatest teachers.

Today, much has changed in health care and in many of the standards to which we have become accustomed for maintaining competence in our practice. Some of these changes have been mandated by regulation, and I’m proud to say nurses have played a role in that by demanding higher standards through our collective bargaining agreements and shared governance opportunities. As new standards are developed and implemented, new education opportunities will continue to arise and nurses have an array of options to choose from.

ONA has always offered educational programs in nursing practice and research, nurse advocacy and leadership, and now we are proudly launching OCEAN (Oregon Continuing Education Activities for Nurses), a new online learning system to supplement those offerings. This new system will allow ONA to create online courses tailored to the specific needs of Oregon nurses. Indeed, Oregon nurses now have more opportunities to pursue our lifelong learning goals than ever before. OCEAN is a welcome addition which I know I am going to utilize as I continue on my educational journey, and I sincerely hope you will explore it as well.

To learn more about OCEAN click here or contact ONA at ocean@OregonRN.org.
Using Knowledge and Skills to Change Circumstances

ONA Executive Director Susan King, MS, RN, CEN, FAAN

ONA’s new Nurse Leadership Institute (NLI) welcomed its inaugural class this fall. NLI applications from both ONA members and student nurses showed a desire and intent to change the circumstances influencing the nursing profession and improve our ability to deliver high-quality services. Reading these articulately expressed goals reminded me of the following quote from George Bernard Shaw.

“People are always blaming their circumstances for what they are. I don’t believe in circumstances. The people who get on in this world are the people who get up and look for the circumstances they want, and if they can’t find them, make them.”

Whether we support them or not, circumstances are often created for us as nurses either by our employer or by changes in our environment. Less often, we have dictated the agenda to shape our practice and the quality of care we provide.

While nurses working with ONA have made important policy changes from advanced practice authority to hospital staffing, our future will require a greater voice and role for all nurses.

We cannot rest on past successes. We must create the circumstances we want through skilled and ethical leadership.

To learn more about ONA’s Nurse Leadership Institute, please click here or contact Carl Brown at brown@OregonRN.org.

Three years ago the ONA board approved a strategic plan that included prioritizing our members’ leadership development. NLI launched in September of this year as a service to members who will utilize their skills within ONA to benefit the profession and the patients we serve.

It has been said many times that with the public’s trust in us, we have the perfect opportunity to make changes in the health of our communities and health care delivery. At the same time, nurses often express that they feel unprepared for some of the leadership roles that could be open to them, whether in clinical practice or policy.
New Resources Improve Members’ Experience

ONA Assistant Executive Director for Professional Services
Carlton G. Brown, PhD, RN, AOCN, NEA-BC, FAAN

“When evidence is used to define best practices rather than to support existing policies, nursing care keeps pace with the latest technological improvements and takes advantage of new knowledge developments.”

Perhaps now more than ever before, nurses are faced with incredible changes to the health care environment. With the Affordable Care Act, more than 17 million new individuals have health care access, including more than one million Oregonians. At the same time, the fifth leading cause of death in Americans is, ironically, being admitted to a hospital. In a recent study, approximately 50 percent of patients who had surgery experienced a medication error and 80 percent of those errors were preventable (Nanji et al., 2016). In this environment, nurses are challenged to continue to provide high-quality patient care while remaining competent and educated. Nurses can lead the way into a new era of health care where future business won’t be “business as usual” but we will need new skills in leadership, communication and high-quality evidence-based practice.

At ONA, we have been working diligently to improve each member’s experience by providing new products that will prepare nurses to successfully navigate the new era of health care.

We are proud to unveil one of those new products this month, a new online learning system called OCEAN (Oregon Continuing Education Activities for Nurses). OCEAN will provide free and reduced cost continuing education to ONA members. Other nurses and health care providers in Oregon and the Pacific Northwest can access much of OCEAN’s continuing education content for a nominal fee.

In addition to OCEAN, ONA will begin approving continuing education activities with our accreditation through the American Nurses Credentialing Center (ANCC) in early 2016. This means that members who provide nursing continuing education will be able to apply with ONA to award continuing education credits for the activities they lead.

Planning committees with an ONA member on their team will get a significantly discounted rate when applying for continuing education through ONA. ONA is currently the only organization with ANCC Approver status in Oregon and Idaho. We look forward to sharing more information about this new benefit with you in 2016.

Finally, we recently created ONA’s Center for Evidence-Based Practice and Research (CEBPR)* as a way to advance the field of nursing through evidence-based policies. The CEBPR houses important evidence-based practice guidelines and studies to give members access to current evidence you can use in your practice. Practices based on research findings are more likely to result in the desired patient outcomes across multiple settings. When evidence is used to define best practices rather than to support existing policies, nursing care keeps pace with the latest technological improvements and takes advantage of new knowledge developments.

Some of the topics available in CEBPR include guidelines for catheter-associated urinary tract infections (CAUTI), central line-associated blood stream infections (CLABSI), and falls prevention in acute care. We will continue to add content to CEBPR as new information and research becomes available.

At ONA, we have been working hard to meet the needs of all our members. These additions to our services will help prepare you to lead the way in a new era of health care. We are excited to highlight and make these interventions available to you.

If you have questions about these new products or any practice-based question, please write us at practice@oregonRN.org.

*www.oregonrn.org/?page=CEBPR
As part of ONA’s ongoing efforts to best serve our members, we are excited to announce the launch of a new online learning system called OCEAN (Oregon Continuing Education Activities for Nurses). This new learning environment provides continuing education (CE) opportunities to ONA members and nurses across the region, in a convenient and user-friendly format.

OCEAN offers courses with accredited CE contact hours, most of which ONA members and student affiliates can access for free. Other nurses, students and health care providers can access courses at low cost.

OCEAN courses will be self-paced, independent learning modules, which cover a broad range of topics and encompass all levels of nursing practice.

In addition to offering educational nursing content that is conveniently accessible 24 hours a day, OCEAN will house each learner’s CE history for easy access and retrieval. Future OCEAN courses may include live webinars and other learning activities.

Current course offerings, which are free to ONA members, include using research to bolster evidence-based practice, examining evidence on the use of marijuana to treat chronic pain syndromes, as well as courses on Oregon’s new hospital nurse staffing law and how Oregon’s laws are made.

Content will be added regularly to ensure nurses are up-to-date on new evidence-based practice and professional topics.

ONA members can access OCEAN online continuing education through the ONA website www.OregonRN.org and log in using their ONA website login information.

Non-member nurses who are affiliated with ONA through collective bargaining can also access OCEAN online continuing education through the same process, but will have a different pricing structure.

If you haven’t logged in before, your username is your email address on file with ONA. You can reset your password using the “Click here to reset your password” link on the login page. If we don’t have an email address for you or you need to update your email address, please contact us at news@oregonrn.org.

If you have developed nursing content you would like to share with other nurses via the OCEAN platform, please contact PK Martin at martin@oregonRN.org. ONA staff will assist with obtaining CE accreditation for all accepted content.

To start learning today click here.
Defending our Voice: Anti-Worker Measures in Oregon

ONA Assistant Executive Director for Labor Relations
Alan Yoder, JD

ONA Political Organizer Chris Hewitt, BA

ONA’s motto is the “Voice of Oregon Nurses Since 1904.” Nurses’ voices are strong. Together, we passed one of the strongest, most empowering nurse staffing laws in the country this past legislative session. Oregon nurses are the fourth highest paid in the nation, beating out much larger and wealthier states. Oregon’s nurse practitioners enjoy unprecedented standards in their profession, including payment parity with physicians under Oregon’s Nurse Practitioner (NP) Payment Parity Law. Our opinion is sought after by elected officials, journalists and academics alike. We continue to successfully advocate for ourselves, our patients and our communities despite an ever-changing health care environment.

And they want to silence our voice.

Who are they? Let’s start with Jill Gibson. She is an attorney who recently filed two ballot initiatives that would take away our right to negotiate contracts with public sector employers effectively and allow nurses who enjoy the benefits of our agreements to opt out of paying fair share fees for representation. Backers of this initiative include large out-of-state corporations and timber industry tycoons who seek to undermine the collective power, resources and standards established by working people in our state. In 2014, the Oregon Association of Hospitals and Health Systems awarded Gibson its Ellen C. Lowe Community Advocate Award for her work as chief petitioner on these measures for amplifying hospital’s “mission to serve their communities”.

Then there’s the Freedom Foundation, a corporate-backed extremist think tank based in Washington state that is spending millions of dollars on these types of measures as part of their national agenda to increase corporations’ ballooning profits and attain outsize power and influence for themselves in our communities.

Finally, there’s the U.S. Supreme Court, where we anticipate that five conservative justices may vote to overturn 40 years of law that allows ONA and all labor unions to negotiate fair share provisions in our contracts.

Why are these groups trying to silence our shared voice?

Because we’ve been effective in advancing an agenda that protects nurses in the workplace, ensures our patients receive the care they deserve, and holds hospitals accountable to the communities they serve.

Our member education began at ONA’s Sept. 18 leadership forum with excellent presentations by University of Oregon labor educator Gordon Lafer and ONA staff on how similar corporate-backed groups gutted nurses’ ability to successfully advocate for themselves and their patients in Wisconsin and how unions in other states successfully fought to protect their voice.

We plan to continue educating nurses and our communities on how best to combat these underhanded efforts and how we will continue to stand together moving forward. To that end, we will be hosting several workshops at ONA’s Convention in April 2016 to discuss these efforts and share how to talk to our coworkers, family members and the community about how important it is to preserve nurses’ voice in Oregon. Please contact Chris Hewitt at hewitt@OregonRN.org if you are interested in attending these trainings.
**Nurses’ Role in the Regionalized Hospital**

ONA Economic and General Welfare Cabinet member
Carolyn Starnes, RN

Do you remember the days when you could walk down the hall to the payroll office and fix a mistake on your paycheck? Or make an appointment with the human resources office to discuss arrangements for your maternity or paternity leave? From tiny critical access hospitals to facilities with 600 beds, this was the norm for years. Back then, the people we worked with knew us, understood our contracts, valued our working relationship, and had the responsibility and authority to resolve problems.

Now it’s a different picture. A hospital’s decision makers are no longer in the building. Worse still, in many cases they are no longer in Oregon.

Aside from spikes in employer errors and the severity of mistakes nurses have to grapple with, the processes to resolve these problems are painful and lengthy. This is a huge dissatisfier for nurses.

Nurses have shared many stories about the frustration of calling a regional number, being put on hold, then finally talking to someone who not only doesn’t know the requirements of our contract but clearly doesn’t care. To add insult to injury, the same mistake happens again because nothing was done to correct the system which caused the error to begin with.

Nurses’ concerns about these issues are met with excuses and vague explanations about the need for consolidation and regionalization. And if you haven’t noticed, new partnerships, mergers and acquisitions are all around us. OHSU and Salem Hospital. Legacy and Silverton. Providence and PeaceHealth.

Frustrating phone calls are just the tip of the iceberg in terms of symptomatic problems. The far more troubling result is the erosion of nurses’ influence as patient advocates in this new corporatized health care world. Equipment orders are made region-wide, ostensibly to save money. However, without direct-care nurses’ input, valuable resources go to waste as new equipment doesn’t function as needed or doesn’t fit into patients’ rooms. Entire departments get remodeled with room designs where nurses literally have only one place they can stand. Nurse start and stop times are changed in an attempt to standardize start times across systems, without considering how changes create additional patient handoffs, which disrupt care continuity.

We know that the farther removed the hospital’s decision makers are from patients, the more our patients’ care suffers. In this new era of regionalized health care, nurses have a greater challenge than ever to be patient advocates.

The only way we can continue to have a meaningful voice in our hospitals is to make sure we are organized and unified in our approach to our advocacy work. ONA is already doing this.

Nurses at Providence facilities across the state are demonstrating support for and aligning common interests with colleagues at Providence Newberg who are negotiating their first contract. Nurses from Eugene and Springfield have formed a coalition with their counterparts in Washington and Alaska to increase nurse-to-nurse communication, fight takeaways and bargain towards common goals.

It is still a long road ahead with an unclear path. The only thing that is certain is the need for solidarity among ONA nurses across facility and state lines to continue advocating for our patients and for ourselves.
We the members of ONA’s Economic and General Welfare (E&GW) Cabinet are bringing forward a proposal to amend ONA’s bylaws. This proposal would allow other types of employees represented by ONA under collective bargaining agreements to become members of ONA. It would enable licensed practical nurses (LPNs), certified nursing assistants (CNAs), physician assistants (PAs), social workers and others covered by one of our collective bargaining agreements to enjoy the full rights of being an ONA member.

This proposal will be voted on during our April 2016 House of Delegates. It is not without controversy.

That controversy involves the American Nursing Association (ANA). ANA has stated that ONA would be out of compliance with ANA’s bylaws if we make this change. It has also stated it is willing to work with us to ensure that we can remain a part of ANA. To that end, we are working with the ONA board of directors to select a date when our proposed changes would take effect, to allow ANA time to amend its bylaws.

There are a multiple reasons the Cabinet is proposing this change.

Right now, ONA represents LPNs and PAs at Multnomah County and LPNs at American Red Cross, Bay Area Hospital, Coquille Valley Hospital, Good Shepherd Medical Center, and McKenzie-Willamette Hospital.

Yet these individuals, despite some of them being extraordinary leaders within their bargaining units, have no vote within ONA. They can’t hold statewide leadership positions. They can’t attend our House of Delegates. They can’t vote on local dues increases or our leadership. They are denied a voice in the union that claims to speak for them.

But we benefit from their participation in our union. They allow us to speak with one united voice across our bargaining units. Multnomah County has 240 registered nurses and forty LPNs and PAs represented by ONA.

Together, these three groups collaborate on common concerns around patient load, scheduling and working conditions.

With each added voice, it becomes harder for the County to refuse to address common concerns. It also becomes harder for the County to drive a wedge between different provider groups. We are stronger as a union when we are working together, not apart.

The benefit of amending our bylaws also extends to groups of nurses with whom ONA currently has little to no connection – nurses who work in long-term care, rehabilitation centers and clinics.

Nurses who work in these settings regularly contact ONA to see if we would be willing to represent them. Not surprisingly, many of the other employees in these facilities are not nurses, but the conditions they work under are often deplorable.

There are stories of violence against the nurses and other health care professionals. There are stories of unilateral terminations for speaking up about working conditions. And there are stories about professionals feeling unable to practice safely.

But we turn these nurses away. The reality is that ONA can’t affect change in a workplace where it only represents a small group of employees. Five nurses at a long-term care facility can’t affect meaningful change.
W  hile it feels like the 2015 Legislative Session just concluded, the 2016 short session is right around the corner. The Oregon State Legislature will convene Feb. 1 for a 35-day session, giving lawmakers a chance to make budget adjustments, hold informational hearings and pass non-controversial legislation. It also gives ONA an additional opportunity to put nurses’ issues in front of legislators and advocate for policy changes that will help patients, nurses and organized labor.

Because of the short session’s length, our February legislative agenda is strategically limited to a set of issues that either have existing support in the Legislature or that we have been working on in coalition with partner organizations. ONA’s 2016 legislative agenda includes:

**Payment Parity for Nurse Practitioners**

ONA’s top priority in the 2016 session will be to remove the sunset provision from Oregon’s Nurse Practitioner (NP) Payment Parity Law. In 2013, Oregon became the first state in the country to ensure payment parity for NPs and physician assistants (PAs) by requiring private insurers to reimburse NPs and PAs at the same rate as physicians when they provide the same services and bill under the same billing codes. This law treats all providers fairly and improves patients’ access to care.

When the Legislature passed Oregon’s NP Payment Parity Law in 2013, it included a sunset provision on the law. If the Legislature does not act to remove the sunset provision by Jan. 1, 2018, the law will no longer be in effect. ONA will work with the Senate Health Care Committee during the February legislative session to ensure Oregon’s NP Payment Parity Law stays on the books.

**E-cigarette Tax**

ONA has a long history of promoting public health through tobacco prevention and cessation efforts, and has helped win multiple legislative victories. In 2016, ONA will continue working with other public health groups to regulate electronic, or e-cigarettes, the same way traditional cigarettes are regulated in Oregon. The Legislature recently passed age and indoor clean air restrictions on e-cigarettes. The next step is implementing an e-cigarette tax.

Taxation is a vital piece of tobacco and nicotine prevention, especially for young people who are price sensitive. Implementing an e-cigarette tax in Oregon will help reduce nicotine use among minors and save lives. It will also raise revenue that can be used to fund vital health care services and tobacco and nicotine cessation and prevention programs.

**Fair Shot Agenda**

Last session, ONA worked with the Fair Shot Oregon coalition to pass legislation that promotes retirement security and provides workers with paid sick days. These policies help provide every Oregonian with a safe, easy and effective way to save for retirement, and ensure no worker has to choose between going to work sick and potentially losing their job.

During the short session, we will continue working with Fair Shot Oregon to address wage theft and advocate to increase Oregon’s minimum wage. ONA’s Cabinet on Health Policy decided to support these issues because...
Why I’m Running for State Representative

Sheri Malstrom, BSN, RN

I’ve been a member of the Oregon Nurses Association since 1981, and I’ve seen ONA make tremendous progress for the nursing profession and the patients we serve. ONA was critical in passing groundbreaking safe nurse staffing legislation, the nation’s first and only Nurse Practitioner Payment Parity Law, paid sick days legislation, bans on toxins in children’s toys and important tobacco prevention and cessation laws.

As an ONA member, I’ve attended numerous lobby days, testified before many legislative committees, and knocked on countless doors to help elect strong nurse advocates. Along the way, I’ve learned that nobody can advocate for our profession like we can. That’s why we need more nurses in Salem and in elected offices throughout Oregon. I’m running for State Representative for House District 27 to further amplify nurses’ voices on behalf of our profession and patients.

As a public health nurse for Multnomah County, I spent many years making home and hospital visits to young mothers who were just getting by. When I’m in the Legislature, I will bring this public health perspective to the many legislative conversations where the voices of nurses are too often ignored and under-valued. I’m passionate about advocating for working families in the Legislature because I know what it feels like to struggle to make ends meet.

My husband and I started our family in the Beaverton area and when I was widowed with three young children, I learned how difficult it can be to raise a family without enough support. If it wasn’t for my union job and access to critical services, I don’t know how I would have survived. This is why I’ve been an ONA member for more than 30 years, serving as a unit representative and on the bargaining team at the Multnomah County Health Department as well as President of ONA’s Political Action Committee boards. I want to take my health care, labor and political knowledge and put it to good use for working families in the Legislature.

I look forward to championing policies that will help us get ahead, instead of just getting by. We need a healthy education system – that means strong K-12 school funding and a real commitment to making education our top priority from early childhood through college and career training.

We need a healthier economy which ensures pay equity for women, allows all workers to have access to living wages and family leave, and promotes an environment where small businesses can thrive. We need to protect and heal our environment by addressing climate change, protecting our wild spaces and encouraging sustainability.

As nurses, we see the connections between education, living wages and healthy air, to healthier patients and better public health outcomes. Many legislators don’t. I want to put those public health connections front and center in our State Capitol, so that common-sense public health policies are translated into effective laws.

Nurses value compassion, hard work and sacrifice. We’ve learned how to assess complex problems and work collaboratively to solve them. Our Legislature needs lawmakers with that kind of experience and our kind of values. I want to be a voice for nurses in the Oregon House of Representatives. But I need your help. Please visit www.sherimalstrom.com to learn more about my campaign and how you can help me make this a better state for all of us.

ONA is proud to endorse Sheri Malstrom, RN for State Representative in House District 27.
ONA Statewide Elections 2016

ONA is now accepting nominations for open leadership positions. The future of the organization and the future of nursing are guided by nurses who choose to take an active role and make a difference. ONA is looking for those nurses who want to make a difference and advocate for the profession and our patients.

From the board of directors to the cabinets, every leadership role is important in shaping the future of nursing in Oregon and beyond. The position descriptions for each leadership position, including responsibilities and time expectations, can be found under the “About ONA” menu, then the “ONA 2016 Elections” tab at www.OregonRN.org.

If you have any questions about a position or would like more information, please contact us at ONA@OregonRN.org.

2016 Legislative Priorities continued from page 9

We need your help.

We have lots of work to do to make progress on the priorities nurses have outlined for us this session, and we can’t do it without your help.

To get involved and help advocate for nursing priorities during the February legislative session, please contact Catie Theisen in ONA’s Government Relations Department. Catie can be reached at theisen@OregonRN.org.

Proposed Changes to ONA’s Bylaws continued from page 8

We propose changing ONA’s bylaws to patient care standards, wages, benefits and working conditions by themselves.

Those nurses need to be part of a united bargaining unit to collaborate with other employees at their facility on their shared concerns.

That is what our proposed bylaw changes would allow ONA to do. They would allow us to organize nurses and other employees who work in long-term care facilities, rehabilitation centers, clinics and other settings. Once organized, they could gain a voice in our union and we can work to address their staffing concerns through legislation, or help resolve workplace safety, wages and benefits issues with them during negotiations.

ONA’s membership has said they want us to represent other professions beyond nurses. In a 2014 statewide survey conducted by ONA’s Professional Services Department, the majority of registered nurses surveyed supported ONA representing additional classifications of employees. The survey also revealed about a quarter disagreed with the proposed change and many were neutral.

This proposed change may alter ONA, but we think it will be for the better. It will allow us to be a voice for nurses who otherwise don’t have a voice in our union. It will allow us to work collaboratively with our coworkers to positively change our workplaces. And it will allow us to advocate for patients in new settings including long-term care, rehabilitation centers and clinics.

We ask that you support the changes we are bringing forward at ONA’s House of Delegates.

ONA’s Open Positions

President
Secretary
Director (3)
Cabinet on Health Policy (1)
Cabinet on Education (4)
Cabinet on Nursing Practice & Research (3)
Cabinet on Human Rights & Ethics (2)
Cabinet on Economic & General Welfare (2)
Nominating Committee (4)
Elections Committee (1)
ANA Delegate Alternate (2)
Last ANA Delegate Alternate (1)

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Cabinet on Human Rights & Ethics (2)
Cabinet on Economic & General Welfare (2)
Nominating Committee (4)
Elections Committee (1)
ANA Delegate Alternate (2)
Last ANA Delegate Alternate (1)
Earlier this year, with the assistance of a State Innovation Grant from Oregon's Addictions and Mental Health Department, the Oregon Nurses Foundation (ONF) developed, piloted and evaluated a student nurse education program designed to improve nurses’ responses to workplace concerns related to their peers’ behavior or performance in the workplace. The program, called Speak Up For Safety, showed positive results among nursing students at both Chemeketa Community College and Linfield Community College. Based on research conducted by David Cadiz, PhD, there were significant improvements in students’ knowledge, self-rated knowledge and confidence to speak up about their peers’ performance. Faculty also gave positive feedback and felt the training was useful and effective.

The course used a “flipped classroom” design, which means that student nurses completed an online segment with textbook information prior to participating in a live skill practice session in the classroom. Adding the skill practice made an important difference in the outcome measures and stigmas toward substance use and mental disorders decreased. A finding that is in line with statements in the ANA Code of Ethics for Nurses, which calls for the support of and advocacy for impaired nurses.

ONF has continued its work with Chemeketa and Linfield to incorporate Speak Up For Safety into their nursing curriculum. Additionally, ONF presented the pilot’s findings at the Schools of Nursing Deans and Directors meeting sponsored by the Oregon State Board of Nursing and hosted at Clackamas Community College in October, where it received positive responses and interest from many schools throughout the state.

Following these positive results, ONF, in partnership with the Florida Intervention Project for Nurses, began expanding the educational program with the development of two additional versions of the flipped classroom course: staff nurse and workplace monitor.

The staff nurse version of the Speak Up For Safety program is specifically designed for nurses currently in the workforce. The training is designed to improve a nurse’s level of skill and confidence in recognizing and assessing the level of risk when they have concerns that a colleague’s performance doesn’t meet professional or practice standards and may be harmful to patient safety. In addition, it provides nurses with the necessary tools to address common barriers to taking action, clearly communicate their concerns, and determine an appropriate course of action.

The recently completed staff nurse version of Speak Up For Safety is now ready for pilot. ONF is currently in discussions with a major hospital organization in the Portland metro area for a potential partnership and is seeking other organizations interested in piloting the staff version.

A version for worksite monitors is under development in collaboration with the Florida Intervention Project for Nurses. It is designed for nurses who accept the role of formally monitoring a nurse enrolled in either the Oregon State Board of Nursing’s probation program or Oregon’s alternative to discipline program called the Health Professionals’ Services Program. ONF anticipates having this version completed in early 2016 and having it ready for pilot shortly thereafter.

If you are a workplace monitor who would be interested in helping ONF pilot this version of the education program, have questions about Speak Up For Safety, or are interested in accessing the training please contact Perla Estrada at estrada@OregonRN.org.
Teaching the Next Nurse Advocates: Teri Mills, MS, RN, CNE

Teri Mills has been a longtime nurse educator in Oregon. One of her proudest accomplishments has been her role in educating more than 3,000 RNs, including many graduates who are now in ONA leadership positions. Mills joined ONA in 1987 and is currently serving her third term on ONA’s Cabinet on Health Policy. She is also a member of the Oregon Nurse and Nurses United Political Action Committee boards.

Mills served for many years as the faculty advisor to the Portland Community College Chapter of the Oregon Student Nurses’ Association. She understands the importance of providing her students opportunities in the political arena to advocate on behalf of the patients and families they care for and has encouraged their participation in ONA Lobby Days at the State Capitol.

Here’s what Mills had to say about her work as a nurse advocate.

**How did you decide to become a nurse advocate?**

The most challenging part of being a nurse is seeing the huge socio-economic divides in our communities – homelessness, poverty and seeing so many Oregonians still struggling to access quality health care. These factors have a devastating effect on the health, welfare and safety of our citizens, which according to the ANA Code of Ethics, every nurse should be promoting.

Very much like my nursing career, my political experiences began at a young age. I have always encouraged my students to belong to ONA because, as a nursing student in the early 70’s, I saw firsthand the positive impact the ANA had in raising wages, enhancing benefits and improving working conditions for struggling nurses in the San Francisco Bay Area.

**What have you learned from your advocacy?**

It is so important to understand the political process, and one of the advantages of being a member of ONA is that each legislative session, newcomers are invited to join those with more experience during a Lobby Day at the State Capitol. Speakers provide information about the issues and breakout sessions allow each participant a chance to practice advocating in a safe setting.

Throughout my career, I’ve worked to teach my students how credible, trusted and powerful their voices are. You don’t need all of the answers – it’s your honesty, passion and experiences that count. ONA is widely respected throughout our state and our elected officials are very much aware of this fact. I’ve gone to many Lobby Days and am always amazed to see the impact nurses and nursing students have on lawmakers.

**What advice would you offer to other nurses?**

As nurses, it is no longer enough to express caring at the bedside. Our voices must be heard by lawmakers who make decisions that affect our profession and the care we provide to patients and their families. Together we have the ability to affect policies that will advance the health of Oregonians and elevate our profession.

I encourage my students and fellow nurses to get involved with health policy, listen to all the different issues and advocate on their own behalf.
New Education Chair Brings Team-Based Approach: Nancy Ronan, DNP

Nurse Practitioners of Oregon’s (NPO’s) new Education Committee Chair Nancy Ronan, DNP, has been involved in nursing education and professional development for her entire career.

As Staff Development Officer, then Chief of Nursing at Portland’s Air Force Reserves, Ronan became passionate about identifying areas of educational need and using a team-based approach to address them.

This passion is reflected in her approach to her new work on NPO’s education committee.

“In preparing for our next conference, we may focus on having additional panel discussions, which can involve more NPs or a variety of qualified health care professionals in order to achieve a team-oriented approach to our topics,” Ronan said.

“What’s so much fun about working on this committee is that we have a large, active group and everyone has a separate network. Each member brings 10 times the resources to our discussions. We’re very well-attuned to meeting all NPs’ needs.”

Ronan’s current work includes caring for her own panel of approximately 2,000 birth-to-geriatric patients at Adventist Medical Group in Portland. She also works part-time providing care for acute, chronic and urgent patients at Adventist Urgent Care.

In addition, Ronan provides weekly on-site assessments and care for minimum to maximum security prisoners at Columbia County Jail in St. Helens, Oregon.

“It’s a really interesting, different section of society. I have an opportunity to follow people through a continuum of needs,” Ronan said. “Because there is only one RN and a number of LPNs on staff, there is a lot I can offer the patients that they wouldn’t be able to otherwise access.”

When she’s not working, Ronan reads, takes bike rides, pursues her love of gardening, enjoys her cat Penny or meets with her wine group.

“I wish I had more time,” Ronan laughed. “I have grown kids in LA and Chicago. I’d love to see them more.”
Join Us in Seaside for ONA’s 2016 Convention

Lead by Example: Ethical Nursing Practice

April 11-13, 2016

Convention Schedule

Monday, April 11 - Half-day Staffing Workshop (1-5 p.m.)
Tuesday, April 12 - ONA Nurse Continuing Education Day
Wednesday, April 13 - ONA House of Delegates

ONA Online Continuing Education

As part of ONA’s ongoing efforts to best serve our members and every nurse in Oregon, we are excited to present OCEAN (Oregon Continuing Education Activities for Nurses) online continuing education.

This new learning environment provides continuing education (CE) opportunities to ONA members and nurses across the region, in a convenient and user-friendly format. The OCEAN system features:

• Self-paced, independent learning modules, covering a broad range of topics and encompassing all levels of nursing practice
• CE that is conveniently accessible 24 hours a day
• The ability to house each learner's CE history for easy access and retrieval

You can find out more about using OCEAN online CE by visiting the ONA website. We encourage you to enjoy the courses currently available and be sure to check back regularly as more courses are added.

www.OregonRN.org
ONA Leadership Calendar

2015

Dec. 18, Cabinet on Human Rights & Ethics and Cabinet on Nursing Practice and Research
ONA, 9 a.m.-2 p.m.

Jan. 20, Last day to self-announce candidacy for statewide ONA elections
Jan. 22, Book of Reports due
Jan. 22, Action Reports due
Jan. 24, ONA Awards Nominations due
Jan. 28, Finance Committee ONA, 4-6 p.m.
Jan. 29, Board of Directors, ONA, 8:30 a.m.-5 p.m.
Feb. 3, ONA statewide electronic elections open
Feb. 26, Constituent Association Delegate lists due
Feb. 29, Elected Constituent Association Delegates list due
March 4, Cabinet on Human Rights and Ethics and Cabinet on Nursing Practice and Research
ONA, 9 a.m.-noon
March 7, ONA statewide electronic elections close at 12 a.m.
March 9, Constituent Association Delegate packets mailed
April 2, 6th Annual NPO Pharmacology Conference
Holiday Inn Wilsonville
April 11-13, ONA Convention and House of Delegates
Seaside Convention Center
April 11, Board of Directors, Seaside Convention Center 8 a.m.-noon
June 2, Finance Committee ONA, 4-6 p.m.
June 3, Board of Directors ONA, 8:30 a.m.-5 p.m.
June 3, Cabinet on Human Rights and Ethics and Cabinet on Nursing Practice and Research
ONA, 9 a.m.-noon
Sept. 2, Cabinet on Human Rights and Ethics and Cabinet on Nursing Practice and Research
ONA, 9 a.m.-noon
Oct. 13-15, 39th Annual NPO Education Conference
Hood River Oregon

2016

Providence Milwaukie, Milwaukie
3% - Jan. 1, 2016
2.75% - Jan. 1, 2017
Added Steps 13, 16 and 23 (effective upon ratification)
Providence Newberg, Newberg
– First Contract
Providence Medford, Medford
– Expiration 12/31/15
Providence Hood River, Hood River
– Expiration 12/31/15
Tuality Community Hospital, Hillsboro – Expiration 12/31/15

Vital Statistics 11/12/15

On Duty (Completed)

Providence Milwaukie, Milwaukie
3% - Jan. 1, 2016
2.75% - Jan. 1, 2017
Added Steps 13, 16 and 23 (effective upon ratification)

St. Charles-Bend, Bend
3-yr agreement
1% (with retro) July 1, 2015

On Call (Upcoming)

Bay Area, Coos Bay
– Expiration 12/31/15

Providence Hood River, Hood River
– Expiration 12/31/15

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