



ST CHARLES MEDICAL CENTER BEND

NURSE NEWS

CURRENT ONA TEAM

Executive Team:

Chair:

Bruce Humphreys (CL)

Vice Chair:

Joe Sack (IMCU)

Treasurer:

Judy Gage Scott (PACU)

Secretary:

Andrea Rombach (ED)

Membership:

Kyle Swantek (CC float)

Member at Large:

Unit Rep Liason

Jody Holland (NICU)

Member at Large:

Lynda Coats (O/N)

Member at Large:

PNCC Coordinator

John Nangle (ED)

Grievance Co-Chairs:

Shelley Lewis Leander

Tom Boarman

ONA Labor Relations

Representative

Alison Hamway

541-312-9822

Hamway@oregonrn.org

www.OregonRN.org



CONTRACTS SIGNED - AVAILABLE ONLINE

The new contracts have been signed, after multiple issues with proof-reading and standardization have been solved. The contracts will be made into printers proof and printed. The contract IS available online at bend.onaweb.org.

Charge RN

Charge RN positions have been posted in most units. We are still working to get the remaining units posted. The hospital has also posted a huge number of clinical supervisor positions, increasing the ratio of managers to nurses dramatically. Charge RN job description remains unchanged from negotiations.

VACATION GRIEVANCE

Oregon Nurse Association (ONA) filed an Association grievance over the Hospital's unilateral policy of denying or limiting earned time off (ETO) during electronic medical records (EMR) implementation. RNs have also filed individual grievances. The grievance was denied at Step 2 (Tim Eixenberger) and has been filed at Step 3 (Jay Henry). The bargaining team will also plan some actions influence management to change this restrictive policy that is interrupting family vacation time that is so important to many of our members.

Night Charge RN Shift Differential Grievance

This grievance was also denied at Step 2 by Tim Eixenberger; the Step 3 grievance was heard by Jay Henry on February 28, 2013. A response is expected next week. One manager (who dislikes ONA) refused to allow the charge RNs in her unit to change to standard shifts.

Shared Governance

By John Nangle RN, CEN, negotiating team member

Shared Governance at St. Charles-Bend is alive, but is it well? As many of you know, a Shared Governance model was conceived at St. Charles Bend in the fall of 2010 and implemented in July 2011. Our ONA Professional Nursing Care Committee (PNCC) provided the

initial spark back in 2010, nudging the St. Charles Health System (SCHS) culture onto a new path and the new ONA/SCHS contract now contains Shared Governance language (Article 14.12).

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The success of Shared Governance rests in the hands of SCHS administration and ONA staff nurses. Without a genuine commitment by SCHS administration to provide the necessary budget dollars for nurse participation, leadership training to assure nurses have the right skills, and a positive relationship environment, shared governance will be alive, but not well. Equally, without ONA staff nurse participation and a willingness to commit to taking more ownership of their practice, shared governance will be alive, but not well.

Shared Governance is paramount to the success of our organization. It will impact how we deliver care to our family, friends and community. Many top hospitals nationwide have American Nurses Credentialing Center magnet status and shared governance is a large part of their commitment.

At this time, SCHS Shared Governance is going through some changes in structure and process because it is a fluid entity and will continually change as needed. Although new ONA staff nurses are joining the committees, in order for shared governance to be alive and well more nurses need to join their Unit Based Practice Committee (UPC) and/or a shared governance committee and get involved.

Recently SCHS purchased Institute for Healthcare Improvement (IHI) Open School modules and is requiring administration (manager level and higher) to complete the training. The online Open School trainings are focused on quality improvement, safety, and leadership. Unfortunately no dollars have been allocated by SCHS for ONA nurses to participate in this great opportunity despite being very relevant to quality care improvement, shared governance work, and a positive investment for the hospitals future.

To help facilitate nurse success with quality care improvement and their UPC and shared governance committee work, PNCC will be providing leadership trainings. These opportunities are open to all ONA nurses:

- May 17 leadership conference at SCHS (stay tuned for details as they become available).
- IHI Open School provides healthcare professionals with online leadership and quality improvement learning modules. PNCC has purchased a subscription with IHI to provide nurses access to the modules. To learn more visit IHI.org, and to get started on completing the IHI Open School modules please contact John Nangle.

Vote!

A message from Bruce Humphreys, BSN, RN

Bend Bargaining Unit Chair Colleagues,

Just a reminder to vote for ONA leadership online soon. We are electing our statewide officers for many positions, and there are some great candidates. If you cannot find your voting email from ONA, you can get the login codes by going to ONAhelp@election-america.com. This website will get you the proper login and ID codes so you can cast your ballots.

Please vote by noon on March 8! If you have any questions, feel free to contact me!

ONA MEMBERS: UPDATE YOUR CONTACT INFORMATION

To ensure that you get the most of your membership and receive information in the timeliest manner, be sure to update your contact information online!

Visit www.OregonRN.org and click on "Update Your Contact Information" under the Member Services menu.

NFN AFFILIATION

By Steve Rooney, RN, ONA President

Our national union, the National Federation of Nurses has voted to affiliate with AFT, the American Federation of Teachers. Oregon Nurses Association will be considering the question of affiliation at a special House of Delegates on March 16.

Below is the press release from ONA. There is a wealth of information on our website, oregonrn.org, that is available after you log in.

If you have any questions, you can contact me at rooney.ona@bendbroadband.com, or contact the ONA office at 800-634-3552. Scott Palmer, our Communications Director, is the point person for questions.

OREGON NURSES ASSOCIATION PURSUES AFFILIATION WITH THE AMERICAN FEDERATION OF TEACHERS

Following a vote last week by the national leaders of the National Federation of Nurses (NFN) to affiliate with the American Federation of Teachers (AFT), elected leaders of the Oregon Nurses Association (ONA) are preparing to take their own vote in mid-March to ratify the agreement. The NFN is a national labor organization representing more than 34,000 registered nurses in Oregon, Washington, Montana and Ohio. AFT is the largest union of professionals in the AFL-CIO with 1.5 million members nationwide, including 48,000 nurses. ONA represents more than 12,500 nurses throughout Oregon.

The affiliation agreement approved

by the NFN includes iron-clad protections for the organization's autonomy and structure, and provides substantial resources for growth and development of the NFN's membership. NFN's constituents will continue membership in their state and national organizations, as well as in the American Nurses Association.

"The NFN decision is a vote of confidence in the AFT as a voice for professionals," said Randi Weingarten, President of the AFT. "The NFN is the largest independent union of nurses, and we are delighted they have chosen to become part of our family of shared interests and professional values. Over the last few years, our union has been through the crucible of recession-squeezed budgets and political attacks. But we have emerged stronger, and this partnership only adds to our capacity to work with the communities we serve."

The agreement—which was approved by the board of the NFN, still requires a state-by-state ratification by the NFN's state organizations—also means affiliation within the AFL-CIO and represents a major development for labor relations in the healthcare professions at a time when the healthcare industry is rapidly changing and when nurses need a voice in implementing the Affordable Care Act effectively. Susan King, ONA's Executive Director, said, "This affiliation has the potential to expand opportunities for ONA to bring new members into the organization and to give us new resources to expand our advocacy for nurses and patients in

Oregon and nationally.

Steve Rooney, President of ONA's Board of Directors and a member of the NFN's national board, said, "Oregon, and the entire country, faces enormous challenges in health care. Reform is complex, and it is crucial that nurses play a key role in maintaining quality patient care in that changing health system. We believe affiliating with AFT, joining our voices and our strengths, will help ensure that nurses remain at the heart of health care reform efforts."

The affiliation agreement between NFN and AFT was approved on February 7 2013 in separate and unanimous votes by the NFN national executive board and by the AFT executive council. Over the next four to five weeks, each of the NFN state labor organizations will conduct its own formal ratification process. ONA will hold a special House of Delegates event in mid-March where hundreds of democratically elected nurse delegates will gather to consider, and ultimately vote, on the affiliation.

"We are 100% committed to transparency and engagement with our members," said King. "ONA's affiliation with AFT is not a foregone conclusion and requires a thorough vetting process by ONA leadership, board, staff and all of our members. When all is said and done, though, we believe affiliation with AFT is not only a good idea, it is the right idea for our members, for nurses and for our patients."



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? Here are the reasons:

1. First, a common assumption is that your employer will cover any incident. Technically, an employer is responsible for the acts of its staff. However, the employer's interest is not necessarily consistent with protecting you individually. Should there be a lawsuit or threatened suit, your best protection is to have your own personal legal representation. Your own attorney can prepare you for a deposition, represent you in a deposition and, most importantly, represent you in any settlement and determination of fault.



2. Second, your employer's policy does not represent you in an Oregon State Board of Nursing (OSBN) investigation. In fact, it could be your employer who makes the complaint to the OSBN about an alleged violation of law. The OSBN must investigate each complaint it receives and, even if the complaint is dismissed, there are costs to you. The Oregon Nurses Association (ONA) recommends that all nurses obtain legal representation before responding to a letter from the OSBN related to a complaint. You are much more likely to receive a complaint from the OSBN than to be named in a lawsuit.

3. Third, you are always a nurse. You may render first aid or advise a family member or friend about a health problem. Should any incident arise about these acts, the only protection you have is your own personal insurance.

ONA urges you to obtain coverage from the Nurses Service Organization (NSO). For about \$100 you can protect yourself. For example, should you be the subject of an OSBN investigation, you have up to \$25,000 in coverage for attorney fees, travel etc.

For more information please go to www.nso.com. If you would like to discuss professional practice issues you may also call Susan King, Sue Davidson, Tara Gregory or Connie Miyao at the ONA office 503-293-0011.

