

Next Bargaining Date
Dec. 1, ONA Office

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Negotiation Update #2

ONA/AURN's bargaining team met with OHSU's management team for our second full-day bargaining session at Marquam Plaza on Thursday Nov. 17, 2016. ONA and the management team continued the process of presenting initial non-economic proposals.

ONA and OHSU will be back at the table at the ONA Tualatin Office on Dec. 1, 2016.

Happy Thanksgiving, from your bargaining team!



ONA Proposal Highlights

For the first half of the day ONA continued from our last session to present initial proposals related to key concerns. Below are *some* of our proposals.

Differentials Paid on Sick Leave

ONA proposed that nurses receive replacement pay for sick leave, including shift and other differentials (regular rate of pay). This is the industry standard for represented Oregon hospitals. Nurses should not be docked pay they otherwise would have received for being sick.

Resource Nurse Sick Leave and Educational Fund

ONA is proposing reference to Oregon sick leave accrual for all resource nurses be included in the contract. The proposal clarifies that resource nurses receive and may utilize sick leave at a rate of one hour per 30 hours worked. ONA is also proposing to establish a

separate educational development fund for resource nurses based upon the full-time equivalent hours worked by these nurses. (They already have separate educational leave hours).

Transportation and Parking

ONA proposed a freeze on parking rates and free Tri-met passes for all bargaining unit nurses.

Committee Work

In order to ensure bargaining unit nurse participation on committees and task forces, ONA is proposing that all nurses who serve on shared governance committees and task forces be released from their scheduled shifts (with pay). This includes accommodation for night shift nurses. OHSU expends resources and many staff nurses spend hours on committee work to enhance the operations of the hospital and their unit and to improve patient care. Many of

ONA Proposal Highlights continued from Page 1

these committee efforts are not as effective or collaborative as they could be because nurses cannot regularly attend.

Staffing

Many nurses don't know how their staffing plans are approved or developed and feel powerless to affect their assignments. ONA has proposed well-defined roles and a transparent process to empower both the Unit Based Committees (UBNPCs) and the House-Wide Staffing Committee in the development of unit staffing. We have proposed that all staff nurses on each unit have a vote on plans developed by these committees prior to implementation.

Psychiatric Co-Morbidity Patient Care

This memorandum outlines the clinical support expectations and the establishment of a task force (ONA/Management) to support a harm-free reduction work environment due to closure of 1 NW. It assures that for the first 6 months following unit closure affected nurses will have an opportunity to learn new related policies and procedures without being disciplined.

Nurse and Patient Safety Mobilization Task Force

This memorandum sets up a task force to evaluate the availability and utilization of resources for nurses to assist in ambulation, transfer, and turning of patients.

OHSU Proposals

OHSU presented ONA with their first "non-economic" proposals. They prefaced the session with a presentation of their "6 Guiding Principles": safe, high quality patient care; response to dynamic environment; relationship with ONA; professional responsibility; wages and benefits; and efficiency of operations.

OHSU expressed that we have many common interests and concerns (some of which were reflected in their proposals). However, it became clear they have very different approaches to many of the nurses' proposed solutions to these common concerns. It is also clear that OHSU is seeking to solidify and strengthen many management rights in many significant ways. These include staffing "flexibility".

They also expressed a desire to remain competitive with other hospitals, to which ONA noted they are profitable compared to their historic net revenues.

For example, OHSU is proposing:

Changes in work posted work schedule after posting

Allow for changing shift length, to rotate shifts and to temporarily reassign *following the posting of the work schedule*.

Rotation of shifts

Allow for temporary rotation of shifts due to "operational needs", including fulfilling skill mix needs on a shift. Currently, this is restricted only for "emergencies". This is being proposed in a manner that would permit reassignment of shifts as needed *after the work schedule has been posted*.

Reassignment

Allow for temporary *involuntary* reassignments for the purposes of skill development.

Reduction of access to premium and double back pay

To implement provisions that may significantly reduce premium and double back pay (new curtailment option based upon waiver of

premium or double back pay that would promote individual bargaining).

Vacation limitation

OHSU proposed (1) a limit of 3 weeks of vacation during summer prime time (June 15 - Sept. 15) and (2) granting Thanksgiving and Christmas off, separately, in a rotational manner as contrasted to the current seniority based system. A nurse granted a vacation block that included one of these holidays would have to find their own replacement or cancel the vacation if it was the nurse's turn for holiday assignment. Currently, less senior nurses can exercise superseding seniority once every other calendar year for requests made during "prime time".

Limitation on resource hours

Limit the number of hours that resource nurses are able to work (a rationale was not given).

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OHSU Proposals continued from Page 2

Ability to NOT retain 8 and 10 hour shifts

The ability to change 8-hour shifts to 12-hour shifts in a unit restructure or with 30-day notice from the employer, without retaining any shorter length shifts

In preparation for their economic proposals, OHSU also presented a summary that asserted that the OHSU/ONA contract exceeds many “industry standard” provisions in other ONA regional contracts and a comparative economic analysis to Portland hospitals. Their data estimates that OHSU nurses receive 8 percent greater compensation (pay, differential, leave time and retirement) than other comparable represented Portland area hospitals.

ONA questioned some of the data and underlying assumptions in these documents, noting that OHSU is unique among Oregon Hospitals both in net patient revenue (highest in Oregon) and types of services and operations. OHSU is also a public sector employer while the other hospitals were private. It was also noted that two out of the six comparable facilities will negotiate new rates of pay, not included in the data. Parking fees were not part of this analysis. ONA will be presenting its own data analysis.

ONA and OHSU will be back at the table at the ONA Tualatin Office on Dec. 1, 2016.

THANK YOU FOR YOUR CONTINUED SUPPORT!

Calling All Stewards: Meeting Dec. 1

This is our first opportunity to meet as a group and share what's been going on across the facility. We'll be discussing open grievances, the fatigue policy, contract negotiations, and opportunities for additional training.

Stop in anytime during the meeting to pick up information, meet other stewards, and get up to speed on the latest actions regarding bargaining.

Thursday, Dec. 1
5:30 - 8 p.m.
at OHSU, 9th Floor DCH
Conference Room 09301

Our negotiating team will have been in bargaining earlier that day and we expect administration to have proposals on the table by then.

In addition to contract negotiations, we'll be discussing open grievances, our latest work around the fatigue policy, and opportunities for additional training.

Dinner will be provided.

Please RSVP to Lydia at hallay@oregonrn.org or text (503) 807-0156.



Nurse Staffing Advisory

Know Your Rights around Scheduling and Overtime

Oregon's Hospital Nurse Staffing Law and its rules are now clear, yet some hospital administrators are misinterpreting the law. In fact, some hospitals may be trying to use the law to change nurses' schedules. It is important to remember that **a hospital cannot unilaterally change nurses' work schedules except through bargaining.**

Attempts to change nurses' schedules based on a misinterpretation of Oregon's Nurse Staffing Law are not productive and contribute to frustration, decreased morale and a lack of trust between nursing staff and hospital administrators. Knowing your rights under the law allows you to challenge incorrect assumptions and improve your workplace.

The Nurse Staffing Law and Call Schedules

In hospital units where mandatory call is typical, some nurses choose to work schedules that include a regular shift plus a call shift within the same 24-hour period. This allows nurses to manage their work-life balance and prevents them from working one day on, one day off rotations. These schedules can also ensure nurses aren't required to take call on their day off.

Unfortunately, some hospitals are interpreting the law and its rules—particularly nurses' right to a 10-hour rest period after working 12 hours—as a threat to consistent scheduling on these units. For this reason

some hospitals are considering—and in some cases threatening—to unilaterally eliminate these elective work schedules. These hospitals' interpretations of this issue are flawed in that they fail to consider the history of nurses choosing to work these schedules.

The law prohibits hospitals from forcing nurses to work hours that may be unsafe for patients and nurses. However, historic schedules that work well for nurses and their facilities can continue under the new law, provided nurses voluntarily choose those schedules.

Oregon's Hospital Nurse Staffing Law and its rules allow a nurse to work more than 12 hours in a 24-hour period—including call time—if the nurse volunteers to do so. And hospitals must bargain with nurses before changing nurses' schedules.

The Nurse Staffing Law and Overtime

Another issue that has been misinterpreted at some hospitals affects overtime. When a nurse works more than 12 hours in a 24-hour period, the staffing law states the nurse is entitled to a 10-hour rest period. **While ONA encourages nurses to take this rest period, nurses can choose to voluntarily waive their rest period and continue working.**

When a nurse chooses to take their rest period, it is the hospital's responsibility to provide appropriate staff to cover the rest period.

In each facility, unit-based and hospital-wide staffing committees should work to develop scheduling practices that comply with the law, support nurses' rights to adequate rest breaks and ensure the hospital can staff the unit appropriately.

If you have questions about Oregon's Hospital Nurse Staffing Law and how it works in your facility, please contact the direct-care nurses on your staffing committee or contact ONA by phone at 503-293-0011 or email practice@oregonrn.org.

You can also visit www.OregonNurseStaffingLaw.org for more information.

