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OR

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#### Grievance Chair

Thomas Boarman, RN, ED

### ONA Labor Relations Representative

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## ONA Unit Representative Training

If you are interested in becoming a unit representative, have been a unit representative and would like more education to assist you in your role or just want more information about how your union at St. Charles works, join us for one of the upcoming ONA unit representative trainings.

We will have two training dates, Feb. 11 and Feb. 18.

To attend, please RSVP to Labor Relations Representative Courtney Niebel at [Niebel@OregonRN.org](mailto:Niebel@OregonRN.org)

**Saturday Feb. 11  
12 - 4 p.m.  
at Redmond Library**

or

**Saturday Feb. 18  
12 - 4 p.m.  
at East Bend Library**

## Still Seeking ONA/STC-B Secretary and Membership Co-Chair

The ONA St. Charles Medical Center—Bend (STC-B) bargaining unit is still seeking candidates to fill the secretary and membership co-chair positions.

If you are interested in filling one of these midterm vacancies, please contact Courtney Niebel at [Niebel@OregonRN.org](mailto:Niebel@OregonRN.org) with any questions that you may have regarding the roles. These positions will be filled via appointment by the remaining

members of the ONA/STC-B executive committee.

Interested candidates would be committed to fulfilling the current term which runs through 2017. No experience necessary, education will be provided. If you've always thought about getting involved, this is the perfect opportunity to join ONA leadership at St. Charles—Bend!

## ONA Files Unfair Labor Practice Regarding New Flu Masking Policy

St. Charles administration first informed ONA/STC-B leaders that they were planning to implement a Flu Masking policy at the August Labor Management Committee meeting. At that time, our leadership team made it very clear that we had concerns regarding the privacy rights of caregivers and the planned discipline if they did not publicly reveal whether they had received a flu vaccination. We were reassured that our concerns were valid and would be taken into account.

When the policy was provided to caregivers on Oct. 5, we were shocked that our concerns had actually not been taken into account, and in fact, a more aggressive policy was put forth. On Oct. 19, ONA leadership submitted a letter demanding to bargain over the change in working conditions per our rights under the National Labor Relations Act (NLRA). On Nov. 1, St. Charles informed ONA they did not believe they had an obligation to bargain over the policy, believing that it was not a mandatory subject of bargaining under the NLRA. In actuality, the NLRA has ruled that flu vaccination and masking policies that include disciplinary consequences for non-compliance are mandatory subjects of bargaining.

Despite our subsequent attempts to inform St. Charles of their obligation to bargain and suspend implementation of the policy until negotiations could occur as the law requires, they were unwilling to bargain over the impact of this unilateral policy change. Once the policy was officially implemented on Dec. 1, our ONA leadership team decided to file an Unfair Labor Practice (ULP) charge with the National Labor Relations Board (NLRB) and seek an injunction to



cease implementation of the policy until negotiations could occur. The ULP was filed on December 7 and we are still awaiting a response from the NLRB.

### Core Concerns with the Flu Masking Policy

Our core concerns regarding the flu masking policy center around our right to maintain privacy of our medical choices and treatment.

ONA's Position Statement on flu vaccination is in line with the CDC recommendations, and we also agree with St. Charles that health care workers should be vaccinated against influenza because it may limit the spread of the disease among patients and the public.

However, we also understand that vaccination is a personal health care choice and/or may not be an option for everyone due to health reasons. Nurses, like patients and the rest of society, are legally protected from having their health care information revealed by their provider and/or their employer. Our primary goals in seeking to negotiate changes to the policy are:

- To develop and implement an evidence-based, common sense solution that protects healthcare workers, patients, and the public from the spread of communicable disease.
- To ensure nurses are not required to divulge their vaccination status to anyone other than those who have a need-to-know in order to enforce the policy.
  - \* Declination forms should not inquire as to the reasons for the declination or contain a statement that declining vaccination places their patients and the community at risk.
  - \* The vaccination status of each nurse should be maintained confidentially and accessed only by those with a need to know.
  - \* Nurses should not be required to wear and/or carry any indication of their vaccination status in a manner that may be visible to their coworkers, patients or the general public.
- To ensure nurses have appropriate time off for flu-like symptoms and that documented absences due to flu-like symptoms should not be considered an unscheduled absence or considered an "occurrence" under the attendance policy.

We are seeking feedback regarding the goals outlined above and want to hear from you regarding your experience with the Flu Masking Policy at St. Charles. Please email a member of the ONA bargaining team or Courtney Niebel at [Niebel@OregonRN.org](mailto:Niebel@OregonRN.org) to share your thoughts, concerns and stories.

## CERC vs. PNCC Funds

The hospital fund for caregiver education, known as CERC funds, was created with the intention of being used by caregivers that were seeking education related to their position with the hospital.

These funds are generally provided to non-represented caregivers because the nurses have access to education funds through the Professional Nursing Care Committee (PNCC). PNCC education funds are intended to be for nurses to use when they desire ongoing education, whether that education is related to their current hospital position or not.

If nurses are being asked to attend ongoing education courses or conferences by hospital leadership, they should first seek CERC funds in order to attend. This issue arose when some nurses were asked by hospital leadership to attend a Magnet Conference and they were encouraged to seek PNCC education funds in order to attend. Since PNCC education funds are limited for each nurse, using these funds for the Magnet Conference would have restricted them from participating in other educational offerings they were interested in attending.

We discussed the issue at Labor Management Committee and concluded that CERC funds could be utilized by nurses for education that was being requested by the hospital. All use of CERC and/or PNCC education funds are subject to the appropriate application and approval process.

## RNs Working as CNA's

Throughout the hospital, we are short on Certified Nursing Assistants (CNA's) which means many of our nurses are being assigned work as a CNA. Please be aware that regardless of the role that you are assigned, you are still a licensed registered nurse (RN) and subject to the expectations of the Nurse Practice Act (NPA).

We sought some advice from the Oregon State Board of Nursing (OSBN) regarding how RNs can protect their license while working in the role of a CNA. The OSBN does not provide legal advice regarding professional liability but offered the following points for consideration:

- ⇒ The RN is always held to a standard of ensuring client safety.
- ⇒ The RN scope of practice does encompass any duties that the CNA1 or CNA2 could be assigned to complete.
- ⇒ The RN cannot represent her/himself as a CNA1 or 2 unless the individual also holds that level of certificate.
- ⇒ The RN would always be expected to be clear on the assignment for a particular shift.
- ⇒ In responding to a client or patient's needs, the RN will be held to the expectations of the NPA and held to a standard of ensuring client safety.



- ⇒ The bottom line is that you are a registered nurse and will be held to the standard of a registered nurse as defined by the NPA.

When the unit is not staffed appropriately and an RN is assigned to work as a CNA, a Staffing Request & Documentation Form (SRDF) should be completed in order to document the occurrence and clarify the RNs role for that shift.

If you feel that you are pressured to violate the Nurse Practice Act or any of the above advice provided by the OSBN, please contact Labor Relations Representative Courtney Niebel at [Niebel@OregonRN.org](mailto:Niebel@OregonRN.org)

# Mandatory Overtime Guidelines

With the latest snow storm causing many caregivers to be unable to make it to the hospital for their shift, many questions regarding mandatory overtime have arisen.

New provisions in the Oregon Hospital Nurse Staffing Law limit the hospital's ability to mandate nurses stay longer than one hour over their scheduled shift. The law requires hospital administration to begin seeking additional staff, including agency/travel nurses, as soon as they become aware of the need. If the hospital cannot secure the additional staff needed by the end of a scheduled shift they can require nurses to stay for one hour of mandatory overtime. There is a provision in the law which allows the hospital to deviate from the

approved staffing plan in the event of "sudden and unforeseen adverse weather conditions" but this does not provide a waiver of the mandatory overtime provisions of the law.

If you are asked to stay beyond your schedule shift and are not willing to volunteer to stay, you should make that very clear to your supervisor and/or manager.

We recommend stating "I'm not volunteering to stay beyond my scheduled shift. You are mandating overtime and if I'm required to stay beyond one-hour past the end of my shift that would be a violation of the staffing law." If you are then required to stay longer than one hour after the end of your

scheduled shift, do not leave but be sure to complete a Staffing Request & Documentation Form (SRDF) to record that there was not enough staff to avoid mandatory overtime. Use the SRDF to document that you did not volunteer for the overtime. The form may help to protect you if you are forced to work fatigued and an error occurs. If you do feel that you are too tired to continue working, make sure to tell your supervisor and/or manager that you are concerned you may no longer be able to safely perform the assignment. Make sure that you document this on an SRDF, especially if you are compelled to continue working because there is no replacement available.

**SAVE THE DATE: 2017 ONA NURSE LOBBY DAY**

**February 14, 2017 ♦ Salem, OR**

ONA invites you to join nurses and nursing students from around Oregon to lobby on important nursing and health policy issues and meet with your legislators.

Hundreds of nurses will rally at the Oregon State Capitol in Salem on Tuesday, Feb. 14, 2017 to advocate for our patients and advance Oregon nurses' practice.

It's vital that we have nurses represented in the key decisions that are made about our priorities and key bills that will come up in the 2017 session.

Early registration for ONA members is now open.



**ONA** Oregon Nurses Association  
Voice of Oregon Nurses Since 1904

Visit [www.OregonRN.org](http://www.OregonRN.org) for more information and registration.