July 12, 2016
ONA Executive Committee:
Chair
Laurie Nilsson
Med/Surg
Vice-Chair
Renee White, PACU
Secretary-Treasurer
Jeanine Ramirez
Med/Surg
Membership Chair
Kris Martinez
Med/Surg
Grievance Chair
Catherine Nelson
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Oregon Federation of Nurses and Health Professionals Local 5017

Watch Those Paychecks!

Our ONA/PMH contract contains quite a variety of opportunities to receive differentials and premium pay for working long hours, on-call, precepting, working charge, clinical ladder and the list goes on. It can be hard to keep track of and difficult to read the pay explanation we receive with our checks. Nonetheless, you typically have just 15 days to raise issues about your pay that were readily visible on the pay explanation. You should make it a habit to sit down after each pay date and reconcile your pay check with your pay expectations. If you have any concern that you are not being paid properly, let your manager know in writing as soon as possible. If your concern is not addressed in a reasonable amount of time, please contact your unit steward or a member of the negotiations committee.

Rest Between Shifts

Under the Oregon Nurse Staffing Law (441.151 to 441.192), a nurse is entitled to the 10-hour rest break after any shift or combination of a shift and/or call-in that exceeds 12 hours in a 24-hour period. Whether or not the nurse volunteered for the hours worked, he or she must be provided the 10-hour break if requested prior to the next shift. So whenever you clock out, no matter what the reason you were working—be it regular hours, a call-back, a meeting or education session—you count up your hours worked over the previous 24 and if you worked 12 or more, you then have a right to a 10-hour rest period.

Volunteerism — This is not a prohibition on nurses volunteering to work more than 12 hours in 24-hour period. Nurses may volunteer to work or be on-call without the 10-hours of rest.

Negotiations are Just Around the Corner

Our current contract with PMH expires May 31, 2017. That’s less than a year away. Starting late this summer, your ONA/PMH bargaining team will assemble to begin developing proposals for our next contract. What improvements would you like to see?

Some of you have worked at other unionized hospitals and may be aware of benefits nurses had there that are missing from our contract. Please let us know. You can reply to ljkaler@gmail.com.
New ONA Unit Steward Training Graduates

Laurie Nilsson, RN
Med./Surg.
ljkaler@gmail.com

Katie Nelson, RN
PACU
westcoastNELSONS@yahoo.com

Jennifer Ramirez, RN
Med./Surg.
jeaninehouck@gmail.com

Penny Collyer, RN
ICU
pennyc2000@gmail.com

Four ONA/PMH nurses recently completed an ONA unit steward training program held at Providence Milwaukie. ONA/PMH unit stewards are your resource for information about employment practices on your unit and your rights under the contract. Nurses can reach out to their unit steward confidentially. If you are called to meet with management and you have any concern that the meeting may lead to discipline, you also have a right to bring along your unit steward or an Oregon Nurses Association (ONA) labor representative to the meeting. ONA unit stewards also organize unit nurses to address issues of concern. Please don’t forget to discuss any concerns you have about nursing practice, your ONA contract, or employment at PMH with your unit steward or any of the executive committee members.

Why We are a Union

- We are a union because we agreed that we wanted the legal right to work together and be able speak with one voice regarding working conditions, wages and benefits at Providence Milwaukie.
- We are a union so that we are able to work together to build a workplace which upholds high standards of care, fairness and transparency.
- We are a union so that we have an organized and democratic way to express common concerns and move forward in a unified fashion to address those concerns.
- We are a union so that we can work together to maintain what works well and change what doesn’t.
- We are a union because we want to support each other as professionals and as individuals.
- We are a union because we want to be able to hold our employer accountable to the public they serve.
- We are a union because we want to stay connected as RNs at Providence with other RNs in the Providence system and with other RNs throughout the state and country.
- We are a union so that our professional views have real influence on building a healthy workplace as well as delivering the highest quality of care for our community.
- We are a union so that policies cannot be imposed or changed without consultation.
- We are a union so that favoritism does not determine rights and obligations in our workplace.
- We are a union because we want the power to make positive change.
New Nurses at PMH

We’re starting this new column welcoming new nurses that are hired at PMH. Having a union means we know and care about each other. It’s all for one and one for all! If you haven't already welcomed these new nurses to your unit, please try to touch base and introduce yourself.

Collyer, Penelope  
Smack, Steve K.  
Buck, Dallas C.  
Corbin, Elizabeth L.  
David, Darrell J.  
Loader, Keane G.  
Belanger, Jesse  
Kohl, Alan K.  
Lindquist, Heather L.  
Lee, Rachel M.  
Maher, Alison S.  
Cabuso, Lotis C.  
Hylton, Tracey  
Wick, Grace A.

Medical Surgical  
Medical Surgical  
Medical Surgical  
Medical Surgical  
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Medical Surgical  
Medical Surgical  
Medical Surgical  
Mental Health Geriatric  
Mental Health Geriatric

President’s Message on a Multistate Compact

by ONA President Katy Cooper, BSN, RN, CCRN

Since 1998, states have discussed the advantages and disadvantages of joining a multistate Nurse Licensure Compact (NLC). The NLC would allow nurses in states who joined the compact to practice in any other compact state using their current license. For example, if Oregon and Washington both signed the compact, a nurse could practice in either or both states using a license from their state of residence.

Over the last 18 years, only about 50 percent of states have enacted legislation in favor of the compact. Oregon has not.

A multistate license does sound appealing. For nurses who practice in more than one state, only a license in their state of residence would be needed. The nurse or employer would pay only one license fee as well. However, these incremental benefits for a small number of nurses are overshadowed by the risks to states, the public and the nurses within those states.

Why? Simply put, the NLC forces states to give up their ability to set nursing standards.

If Oregon entered the compact, nurses in our state would no longer be required to meet the practice standards we’ve worked to establish. For example, the NLC would allow a nurse to be licensed in Oregon without having practiced in the last five years. Any other practice requirement specific to Oregon would also be invalid.

Despite troubling complications, a private Chicago-based trade group called the National Council of State Boards of Nursing (NCSBN) has continued pushing states to adopt NLCs for both RNs and NPs. It is devoting significant resources to “sell” the compact.

In the NCSBN’s plan, the compact is overseen by an interstate commission which can make binding decisions on member states, without being held accountable to any state or government.

Handing over our state’s practice authority is not in the best interest of nurses or the public.

That’s why ONA and the American Nurses Association (ANA) have been working towards new solutions that simplify multistate practice for nurses, protect the public and retain individual states’ authority to establish and enforce practice standards.

As we consider important health care decisions like multistate licenses, it is critical that all nurses have access to the information we need to weigh both the risks and benefits of policy decisions and take an active role in the decision-making process.
Union Training Opportunities

ONA trains our members to do the work of our union, which is primarily nurse advocacy, organizing, bargaining and employment relations. ONA offers regular training programs conducted by ONA staff and also connects nurses with training opportunities offered by our affiliates like the American Federation of Teachers (AFT), the Oregon AFL-CIO and other labor related organizations such as the Labor and Economic Relations Association and the Labor and Economics Research Center (LERC). Financial assistance may in some cases be provided by ONA. A number of excellent training opportunities are coming up later this summer.

2016 AFL-CIO/LERC Summer School

Fri, Jul 29, 2016 6 p.m. - Sun, Jul 31, 2016 12 p.m.
University of Oregon in Eugene, Oregon

The 2016 AFL-CIO Summer School will focus on how we build strong unions and a strong movement for social change.

Click here to register and learn more about the workshops.

2016 Oregon Strong Voice Summit

Friday, July 29, 2016, 9 a.m. – 5 p.m.
University of Oregon in Eugene, Oregon

This summit is a unique opportunity to convene labor and community partners from throughout the state to share skills and experiences, learn from experts and re-energize for a vigorous election season and beyond. There is no cost to attend the summit.

Click here to register and learn more about the workshops.

If you would like to attend one of these educational programs or another that you believe qualifies, please contact Kris Martinez, martinezkd471@gmail.com.

For more information about these and other labor related training opportunities and events, please go to http://oraflcio.org/take-action/.

Important ONA Nurse Resources

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