

Article 16 STAFFING

A. Staffing Concerns. Nurses are encouraged to raise staffing concerns. The Medical Center will make the staffing committee minutes available on the PSVMC nursing [Sharepoint website](#).

B. Hospital-Wide Nurse Staffing Plan. The **Hospital-Wide Nurse Staffing Plan as referenced in the Oregon Hospital Staffing Law is the accumulated unit-level nurse staffing plans of all nursing units at the Medical Center.**

1. The parties acknowledge that Oregon's Hospital Staffing Law (ORS Chapter 441) applies to the Medical Center. The Medical Center intends to comply with the requirements of the Hospital Staffing Law including, where applicable, nurse-to-patient ratio requirements of ORS Chapter 441 and establishment of a Nurse Staffing Committee.
2. Unit-level nurse staffing plans will be developed at the unit level, [through nurse and unit level management partnership](#), such as through a Unit-Based Council/Committee. Each unit-level nurse staffing plan in the Medical Center shall consider the factors required by the Oregon Hospital Staffing Law.
 - a. The parties recognize that the Medical Center has an obligation to comply with the Oregon Hospital Staffing Law which includes specific requirements about nurse-to-patient ratios in certain units. However, the Medical Center recognizes that patient acuity and patient care intensity can impact balanced unit patient assignments. Accordingly, the Medical Center will support Unit-Based Councils/Committees developing, in partnership with Nursing Leadership, a patient acuity and intensity tool to be used to create balanced patient assignments. If a unit uses such a tool, it will be included in the unit Operating Guidelines and Patient Care Considerations developed by the Unit-Based Council.

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3. Nurse Staffing Plans developed and approved at the unit level will be submitted to the Nurse Staffing Committee for review and appropriate action in accordance with the Oregon Hospital Staffing Law.

C. Rest and Meal Periods. The Medical Center is responsible for providing rest and meal periods to Registered Nurses (including lactation accommodations) consistent with applicable state law; it is the Registered Nurse's responsibility to take them when offered.

1. Rest and Meal Coverage. The Medical Center will determine appropriate rest and meal period coverage, which may include, but is not limited to, specific break relief assignments for Registered Nurses and scheduling of rest and meal periods for Registered Nurses. Fifteen (15) minute paid rest periods and thirty (30) minute unpaid meal periods shall be taken during the shift timeframes in accordance with BOLI requirements.
2. Meal and rest periods may be combined, provided that Nursing Leadership determines it is consistent with patient care and operational needs, and the Registered Nurse agrees to combining their meal and rest period(s).
3. Rest and meal periods will be documented appropriately, which currently includes unit-level break sheet forms and attesting to taking and/or missing rest and meal periods when clocking out. The Medical Center reserves the right to change the process for rest and meal period documentation.
4. Unit-Based Councils will, in partnership with Nursing Leadership, define the role and responsibilities of nurses who are assigned to cover **meals and/or** breaks. Those roles and responsibilities will be included in the unit's Operating Guidelines and Patient Care Considerations.
5. Registered Nurses are encouraged to take rest and meal periods in non-working areas.

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6. Starting July 1, 2025, in the event a Registered Nurse accurately reports a missed rest or meal period using the Medical Center's designated process for reporting, they will be eligible to receive, upon request, a single payment equivalent to an additional hour (1.0) ~~half hour (.50)~~ of pay at their base rate for a missed meal period and a half hour (0.50) ~~quarter (0.25) of an hour of~~ pay for each missed rest break in the next payroll period. In the case of an interrupted combined rest and meal period, the Registered Nurse will receive one hour (1.0) ~~one half hour (.50)~~ of pay at their base rate for the interrupted combined rest and meal period. This payment will not be counted as an hour worked for any reason. Nurses who decline to take a break when offered are not eligible for this payment. This is the sole remedy for missed rest and meal breaks.

D. Facilitating Appropriate Staffing - The Medical Center and the Association are committed to appropriate nurse staffing on each unit to meet patient care requirements and promote a healthy work environment. Upon request, open Registered Nurse positions will be discussed at Task Force meetings.

E. Nurse Staffing Committee - The Medical Center intends to maintain the structure, duties, and role of the Nurse Staffing Committee consistent with the Oregon Hospital Staffing Law.

- 1.** The Nurse Staffing Committee will commit to develop a plan on how unit staffing plans are escalated to the Nurse Staffing Committee for approval, which may include processes and procedures on how unit staffing plans are approved by unit nurses.

F. Nurse Staffing Plan and Dispute Resolution

1. Each unit-level nurse staffing plan will be provided to the Nursing Staffing Committee for appropriate consideration, consistent with the Oregon Hospital Staffing law.

2. If the dispute about a staffing plan at Nurse Staffing Committee is at impasse, statutory nurse-to-patient ratios will apply. For units with no statutory nurse-to-patient ratio, the parties recognize that resolution of nurse staffing plan disputes will follow the arbitration process as defined in ORS Chapter 441.

3. Nurse Staffing Plan Deviation

A. If a Registered Nurse recognizes a staffing gap, they should immediately escalate to their charge nurse, house supervisor, or designee to start the recruitment and resolution process. If unresolved, the Registered Nurse completes the staffing concern form and submits to the core leader or designee. The nurse manager (or designee) will complete an investigation to confirm a staffing deviation.

B. No nurse shall be disciplined or face reprisal for good faith reporting of a nurse staffing plan deviation.

4. Nurses with concerns regarding staffing are encouraged to raise those concerns using their chain of command without fear of retaliation, and to work with the Nurse Staffing Committee members to identify solutions when necessary.