2025 OFNHP RN Bargaining Team

- Overview of everything that has been discussed at the table.

Not Opening :

Article 1: Recognition
Article 7: Bulletin Boards
Article 11: Public Health Nurses and Continuing Care Services: Hours, Overtime, Schedules and Territories.
Article 20: Health and Welfare Benefits
Article 22: Pension Benefits
Article 23: Retiree Health and Dental Benefits
Article 24: Tax Sheltered Annuity
Article 26: Health and Safety
Article 27: Employee Transfers
Article 30: Personnel Files
Article 31: Evaluations
Article 34: Management Rights
Article 35: Employee Assistance Program
Article 36: Savings Clause
Article 37: Term of Agreement
Appendix M: Sign-on Bonus/Hard to Recruit Nursing Positions
Appendix N: Relocation Reimbursement
Appendix K: Extra Shifts for Regional Advice Nurses
Appendix R : 7/70 Scheduling System Guarantee

The next slides will go over each Article that is currently being bargained and a high-level overview of why we are fighting for it.

Top Issues:

Staffing
Wages
Paid time off (PTO)
Improved Sick Time
Education

Article 2: Scope of Agreement- To be addressed at OFNHP Common Interest Table (CIT) (New Locations)

OFNHP Interest: Where KPNW does business, so does our union.

Would sunset article 3 (bargaining unit) with the current proposal

Any new or acquired KP location in NW region would be covered by OFNHP RN CBA automatically (in alignment with National Agreement)

Article 4: Union Security

*This issue has a large financial impact on our members (both patients and ourselves). We want KP nurses caring for KP patients.

OFNHP Interest: Utilize union staff instead of travelers

Traveler Agreement* – **Management's main interest**

Complex issue/process. From 2014, Issue Resolution regarding Travelers, upheld in arbitration (2021).

Impacts inpatient/ASCs and scheduling- we have a grievance arbitration going forward in October

Article 8: Employee Category Definitions

Our survey demanded that members wanted more job flexibility. We have proposed new roles and expansion of roles to meet that need. This could widen the talent pool and people who could work at KP, and improve work-life balance for others.

OFNHP Interest: Job flexibility

Clarify On-Call position (update language to reflect six-week schedule, expanding inpatient language to include outpatient).

Expansion of casual on-calls to inpatient (this is to help staff who are also professors/educators meet contractual guidelines while improving the workforce of educating new nurses).

Introduction of a new role “weekend-only”

Article 10/12: Hours, Overtime, and Schedules

*Large financial impact to our members. Also impacts home and work life.

- OFNHP Interest: Consistent practices
- Consistency of scheduling, utilize KP staff over travelers
- Incorporate Appendix B – Inpatient Scheduling Dates
- Incorporate Appendix I – RN Double Time Incentive (expand to outpatient)
- Incorporate Appendix J – Hospital Nurse Staffing Process
- Incorporate LOUs: Primary Care LOU 2021, Regularly Scheduled day off 2015, Consecutive Day pay 2017, CVOR LOU

Article 13: Team Lead/ Charge Nurse

Request for more autonomy in our professional role. Labor having a larger voice in choosing labor (we know who makes the best charge nurses). Increase job protection for those doing the role.

Ensure	OFNHP Interest: Ensure professional recognition
Ensure	Ensure scope of role is defined in contract
Provide	Provide job protection (cannot be removed from role at manager's discretion without reason)
Standardize	Standardize process for selection for relief charges
Expand	Expand admin time to Surgical Services
TL -> Charge Nurse	TITLE CHANGE DOES NOT CHANGE JOB DESCRIPTION

Article 14: Posting of Positions “Staffing”
Incorporating HB2697 and expanding workload protections for outpatient RNs including penalties when staff miss meal and rest breaks.

Appendix Q – Joint Staffing Process Implementation

Penalties for missed meal and rest breaks (pay RN directly) and penalty for working out of ratio (1.5x base pay for entire shift)

Looking at roles that are hard to define for case loads, such as case management and nurse navigators.

Reinforce the Alliance RN staffing committee to assist the outpatient with staffing issues and concerns

HOURLY DIFFERENTIALS

DIFFERENTIAL	RATE PER HOUR
In-Lieu-of-Benefits (For short-hour, temporary & on-call RN's ineligible to receive benefits)	~~$1.10 Inpatient RN~~ 30% of base wages
	~~$1.063 Outpatient RN~~ 30% of base wages
Standby – Regular	~~$4.75~~ $20.00 or minimum wage (whichever is higher)
Standby – Recognized Holiday	~~$11.88~~ Two and half times (2.5x) the standar standby rate
Evening Shift~~, Outpatient~~	~~$3.00~~ $5.00
~~Evening Shift, Inpatient~~	~~$3.00~~
Night Shift~~, Outpatient~~	~~$5.90~~ $12.00
~~Night Shift, Inpatient~~	~~$5.90~~
Float Pool/ RRT~~, Inpatient~~	~~$3.00~~ $9.00 (Differential built into salary RN89)
Preceptor	~~$2.00~~ $5.00
~~RN, Team Lead /~~ Charge Nurse	$~~3.00~~ 5.00 (Differential built into salary s RN72)
Weekend Differential	$10.00
Bilingual Differential	$3.00
BSN	4.75% of base wages
MSN	9.5% of base wages

Article 15: Compensation – Joint proposal with ONA

Improving work-life balance. RNs should not have to work 110 hours a pay period to make ends meet. Inflation from 2021-present 19-21%

- Appendix A – Wage Scales and Hourly Differentials, pg 87

OFNHP Interest: **Community Competitiveness**

- On average 22% behind the community standard on average for all years of experience (Range 16%-28%)
- Eliminating ghost steps (years where step increase does not result in a raise) and expanding step scale to 30 years

Compensation:

Management's Proposal

- 2.25% market adjustment
- 6.5% across the board

Total: 8.75%

Facts known:

- Turnover rate in employees <1 year ~40% (National Average 34%, 6% above average)
- Cost of training a new RN is up 8% (61k per RN from 56k)

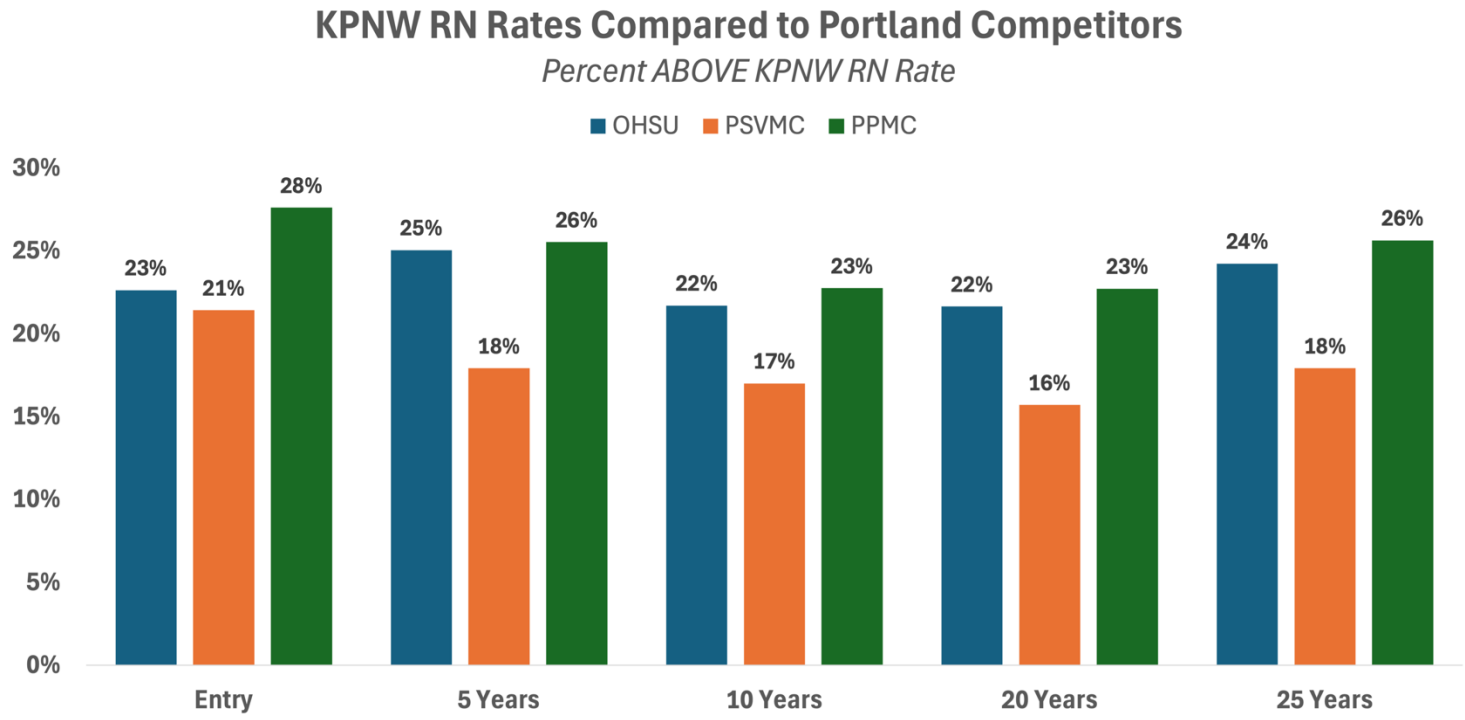
Direct quote from Management Table:

"We know we are not the best place to work anymore." – SMC CNE Matthew Freeman

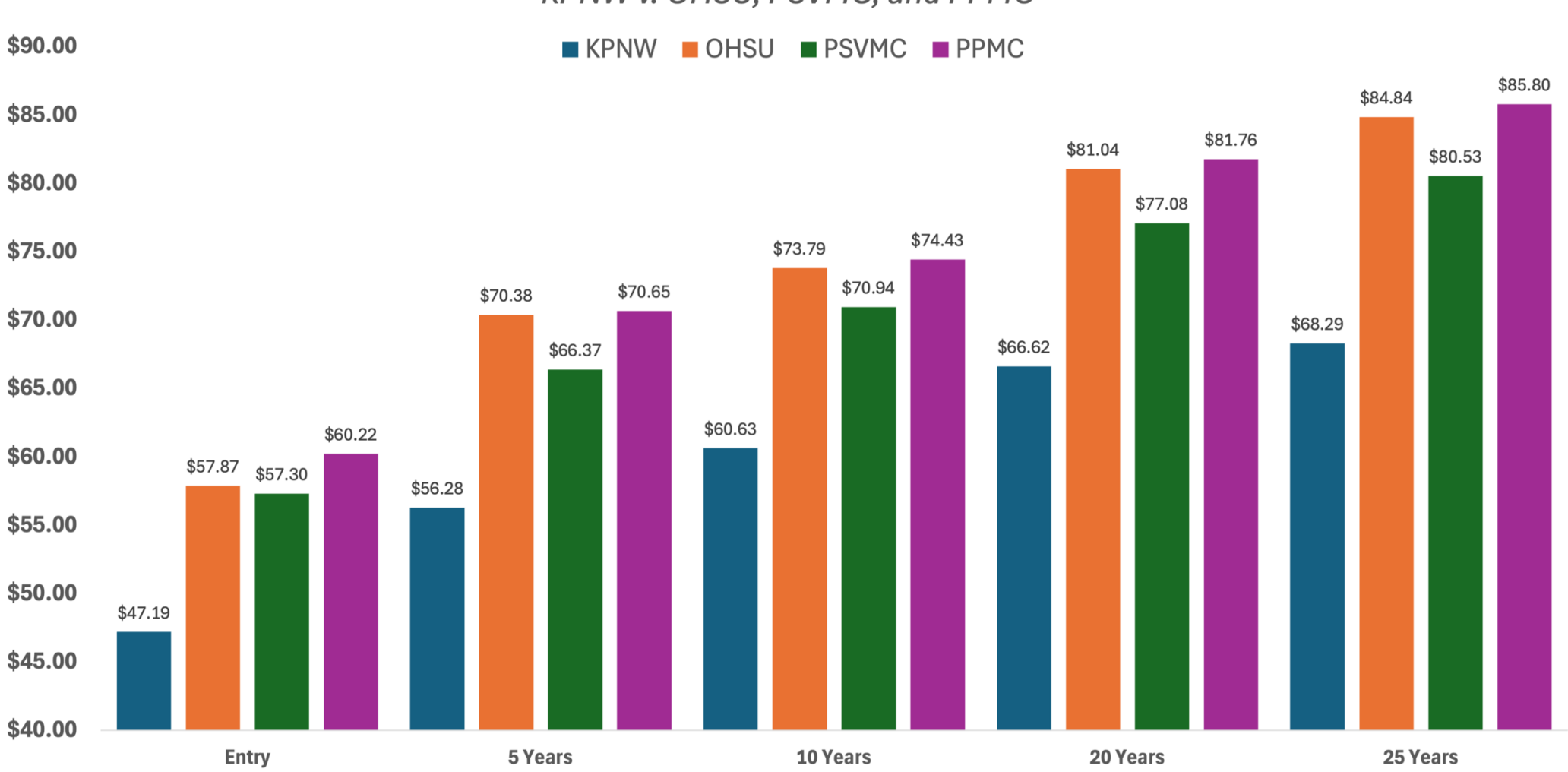
KPNW hospitals have been directed to achieve MAGNET status within 5 years

(Magnet is the "gold standard" for nursing excellence. Our focus should not be to achieve the award but to create a culture that has the best patient outcomes and the best work environment (ANCC).)

Reality



Notes: OFNHP RN rate uses RN73 Grade, which comprises 80% of the unit; OHSU BSN rate, effective 7/1/25; PSVMC rate effective 1/1/26; PPMC rate effective 1/1/26



Notes: KPNW rate uses RN73 Grade, which comprises 80% of the unit; OHSU BSN rate, effective 7/1/25; PSVMC rate effective 1/1/26; PPMC rate effective 1/1/26

What does this mean for wages for an RN?

New Grad- Just graduated from nursing school with a BSN, who has passed the NCLEX, and is in the market to choose an employer.

- 60.22 (PPMC RN Wage)-47.19 (KPNW RN Wage)= $13.03
- 36 (0.9 FTE) x 13.03 (difference in wages)= $469.08 (a week)
- 469.08 (week) x 52 (# weeks in a year)=$ 24,392.16 more a year

Which employer do you choose?

ONA-Represented Employee Benefits Summary

This document reflects benefits offered to new employees as of Nov. 30, 2022. Benefits for employees hired prior may differ. Refer to O2 for complete details.

BENEFIT TYPE	WHO IS ELIGIBLE	WHEN ELIGIBLE	BENEFIT	PAID BY
Vacation	Employees working at least .10 FTE or greater.	Accrual begins at time of employment. Benefit is available for use immediately after accrual.	Accruals range from 192 hours per year to 288 hours per year, depending on length of service; prorated for part-time. Maximum accumulation of 364 hours.	OHSU
Holidays	Employees working at least .10 FTE or greater.	Accrual begins at time of employment. Benefit is available for use immediately after accrual.	Eight paid holidays per year. Employees accrue .0308 holiday hours for each hour paid, up to 64 holiday hours per calendar year. Accruals accumulate in employee's Compensatory Time bank.	OHSU
Sick Leave	All full- and part-time employees.	Accrual begins at time of employment. Benefit is available for use immediately after accrual.	For regular employees working at least .5 FTE, 96 hours per year; prorated for part-time. Employees working less than .5 FTE earn 1 hour for every 30 hours worked, up to a maximum of 56 hours per year. No maximum balance.	OHSU
Other Leave	Varies.	Varies.	Includes leave provisions for jury duty, military service, FMLA, OFLA, Washington Paid Family & Medical Leave, Paid Leave Oregon, other federal and state leaves as applicable, bereavement, and other reasons. Refer to collective bargaining agreement for details.	OHSU/ Employee
Medical, Dental and Vision Insurance	Regular employees working at least .5 FTE in an eligible position.	1st of the month following date of hire.	Each medical plan includes prescription benefits; choice between three dental plans and two vision plans. Medical plan options include a high-deductible plan with a Health Savings Account.	OHSU/ Employee
Other Insurance	Regular employees working at least .5 FTE in an eligible position.	1st of the month following date of hire.	$25K of term life insurance provided at no cost to the employee. Other options include spouse life insurance (including dependent life), short and long term disability, accidental death and dismemberment insurance, hospital indemnity, critical illness, ID theft protection, home and auto, trauma coverage, legal coverage.	OHSU/ Employee
Flexible Spending Accounts	Regular employees working at least .5 FTE in an eligible position.	1st of the month following date of hire.	The use of pre-tax dollars for eligible health care expenses (up to $2,850 per year) and eligible childcare expenses (up to $5,000 per year, per family).	Employee
Health Savings Account	Employees enrolled in the High-Deductible with HSA medical plan.	1st of the month following date of hire.	The use of pre-tax dollars to pay for qualified medical expenses. OHSU contributes $500 per year for employee-only coverage or $1,000 per year for family coverage, funded each bi-weekly pay	OHSU/ Employee

ONA-Represented Employee Benefits Summary, continued

BENEFIT TYPE	WHO IS ELIGIBLE	WHEN ELIGIBLE	BENEFIT	PAID BY
			period. Employee has option to contribute directly through payroll deductions.	
Employee Assistance Program	Regular employees working at least .5 FTE in an eligible position.	Immediately.	Confidential counseling and referral services for employee and immediate family members.	OHSU
Alternative Transportation	All employees.	Immediately.	Tri-Met and C-TRAN passes available at significantly reduced cost.	OHSU/ Employee
Education Assistance	Regular employees working at least .5 FTE in an eligible position.	Immediately.	A $50 reimbursement for each undergraduate credit hour and a $150 reimbursement for each graduate credit hour for up to 4 credit hours (0.5-0.74 FTE) or 8 credit hours (0.75 – 1.0 FTE) per term at Oregon University System schools, participating community colleges and select programs at OHSU. Additional benefit provides up-front discounted tuition for RN to BSN and Graduate School of Nursing programs. (available to nurses after 2 years at 0.5 FTE in an ONA represented position)	OHSU/ Employee
Retirement				
Choice between the Oregon Public Service Retirement Plan (OPSRP) or 401(a) University Pension Plan (UPP)	All employees.	OPSRP: The month following six full calendar months of employment in a qualifying position (600 hours per year). 401(a) UPP: The month following three full calendar months of employment in a qualifying position (600 hours per year).	**OPSRP**: A 6% employee-paid pre-tax contribution with immediate vesting (IAP/EPSA), plus a pension benefit paid by OHSU that is 100% vested after five years working 600 hours, or age 65 while employed. Employee may make additional 0.75% IAP after-tax contribution. **401(a) UPP**: A 5% OHSU-paid pre-tax contribution, increases to 6% after three years of service; 100% vested after three years of service, or age 50 while employed. Invested through Fidelity Investments.	OHSU/ Employee OHSU
403(b) and Roth 403(b) or 457(b) and Roth 457(b)	All employees.	Immediately or automatically enrolled in 403(b) at 401(a) UPP enrollment.	Voluntary contribution to supplement retirement income on a pre-tax and/or post-tax basis. Invested through Fidelity Investments. If enrolled in the 401(a) UPP, employee is defaulted to contributing 4% pre-tax to a 403(b) plan. Default contribution automatically increases to 5% after 7 years of service and to 6% after 10 years of service. These are the minimum contribution rates required to receive the maximum 403(b) Employer Match outlined below. Employee may change 403(b) plan contribution or opt out at any time.	Employee

This document reflects benefits offered to new employees as of Nov. 30, 2022. Benefits for employees hired prior may differ. Refer to O2 for complete details

OHSU Benefits Continued:

- Comprehensive health care plans. Covered 100% for full-time employees and 88% for dependents.
- $50K of term life insurance provided at no cost to the employee
- Two separate above market pension plans to choose from
- Vacation - 192 to 288 hours per year depending on length of service, prorated for part-time
    - Holidays - up to 64 holiday hours per calendar year (employees accrue .0308 holiday hours for each hour paid – included in vacation accruals)
- Sick Leave - 96 hours per year, prorated for part-time
- Substantial public transportation discounts (Tri-met and C-Tran)
- Tuition Reimbursement
- Innovative Employee Assistance Program (EAP) including extensive wellness resources

In lieu of benefits is “valued” by Kaiser at the rate of $1/hr

Community standard for “in lieu of benefits” 15-20% of base wages (actual cost to the employer of benefits is 30% of total compensation) – Bureau of Labor Statistics).

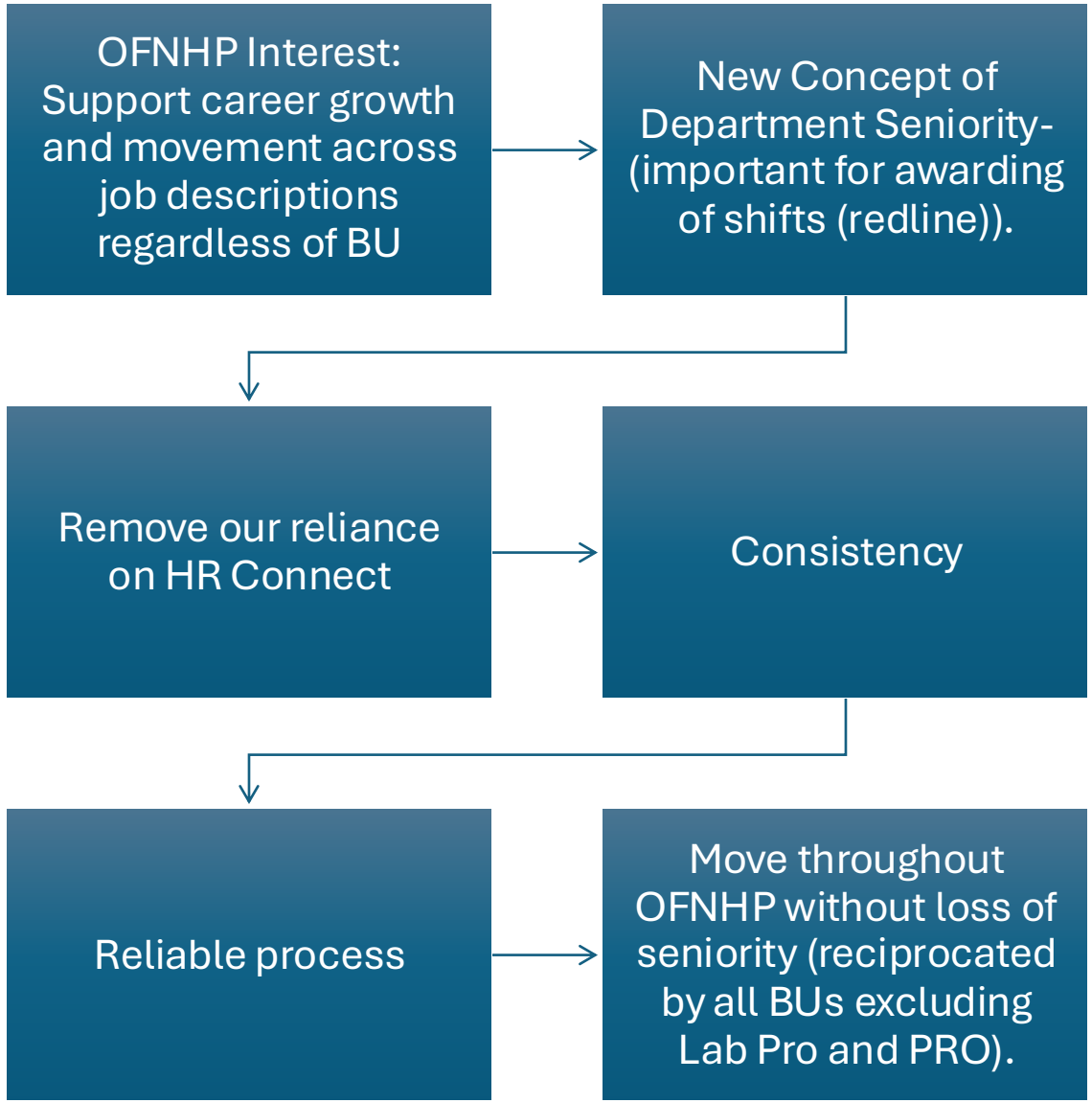
APPENDIX A

HOURLY DIFFERENTIALS

DIFFERENTIAL	RATE PER HOUR
In-Lieu-of-Benefits (For short-hour, temporary & on-call RN’s ineligible to receive benefits)	$1.10 Inpatient RN
	$1.063 Outpatient RN

Article 16: Seniority – Joint Proposal with ONA.

Seniority to be date of hire into the RN BU. Tie breaker: date of RN licensure.



Article 17: Sick Leave- Joint Proposal with ONA. Also discussed at Common Issues Table

- OFNHP Interest: Sick leave that is non-punitive and reflects a practice of wellness and healing
- **Tentative Agreement with KP: No attendance occurrences or corrective action if directed to stay home by Employee Health**
- Increase sick time to be comparable to the community standard (OHSU 96 hours a year *prorated for FTE)
- Proposed: Two hours for every 40 hours worked (equivalent to 0.05 hours per one hour worked) = 93.6 hours for .9 FTE

Article 18: Vacations

~~Years of Service~~	~~Annual Full-time Vacation Accrual*~~	~~Maximum Vacation Accrual~~
~~1 – 4~~	~~80 Hours~~	~~160 Hours~~
~~5 – 9~~	~~120 Hours~~	~~240 Hours~~
~~10+~~	~~160 Hours~~	~~320 Hours~~

The top table is how many hours an RN at KP gets now:
1-4 YOS: 2 weeks
5-9 YOS: 3 weeks
10+:~ 4 weeks

Table 18-1

Years of Service	Accrual Rate Per Compensated Hour	Maximum Vacation Accrual
0 – 5	0.0923	384
5 – 10	0.1039	432
10 – 15	0.1154	480
15 - 20	0.1270	528
20+	0.1385	576

Our current proposal to Kaiser, influenced by OHSU ONA CBA, (which is 192 hours- 288 hours 4-8 weeks)

0-5 YOS: 3.5 weeks
5-10 YOS: 4 weeks
10-15 YOS: 6 weeks
15-20 YOS: 6.5 weeks
20+ YOS: 7 weeks

Article 19: Holidays- Joint with ONA

OFNHP Interest: Improved work-life balance, fair holiday scheduling process for both inpatient and outpatient

Incorporates Appendix F – 12-Hour Holiday Pay for OFNHP RNs and Appendix G – Addendum to 12-Hour Holiday Pay for OFNHP RNs

Proposal of two additional holidays: December 24 and the day after Thanksgiving

Correct Flex time awarding. (8-hour RNs stay at 16 hours 9-hour RNs to get 18 hours, 10-hour RNs to get 20 hours, 12-hour RNs to get 24 hours)

Article 21 : Leaves
Common Issues Table
Partial TA

OFNHP Interest: Recognition of chosen family, expansion for leave for 4 shifts

Improvement to Bereavement

- Expansion of “family”
- Decrease mileage for additional days
- Increase time off

Article 25: Education

OFNHP Interest: Job-required education is paid for by the employer not out of your benefits. Education benefits should enhance your role, not maintain status quo for job requirements.

Ensure parity with all RNs regardless of position.

Add required courses: ONS, NIHSS, BLS

Certifications required by job description to be paid by the employer

Can use $400 certification fund to pay for additional state licensure required by the Employer

Article 28 – Grievance Procedure Common Issues Table

Address lack of federal mediators through new step 3 grievance language

OFNHP-wide issue

Article 33: “Onboarding”

OFNHP Interest: Successful onboarding process that improves retention of staff.

Incorporate Appendix D – RN Preceptor Differential expanded to all locations (inpatient/outpatient) and include onboarding of travelers,

Incorporate Appendix O – Registered Nurse Fellowship Program Global Template

Incorporate Appendix P – New Graduate RN Residency for Specialty Units

Appendix E: RN Career Ladder

OFNHP Interest: To increase engagement and improve the professional practice of RNs.

Introduced as additional pathway to increase wages to remain competitive in the market

EXPANSION OF PROFESSIONAL RECOGNITION

INCREASE PARTICIPATION

INCREASE PERCENTAGE PER LEVEL

SECURE AN ADDITIONAL LEVEL

The next slides will go over what we have secured at the bargaining table.

Article 5: (Tentative agreement reached “TA”)

Non-Discrimination and Workplace Harassment

OFNHP Interest: Psychological safety for all members

Ensure protections for all members with the federal rollbacks of diversity, equity, and inclusion (DEI).

Our contract needs to protect members psychologically, regardless of the political climate.

Article 6 (TA): Union Representatives and Union Activity

- OFNHP Interest: Steward protections
- Update language to reflect real practices
- Incorporate Appendix L – Common Bargaining Issues (this is where you find the language that pays you for steward-related activities, such as all stewards and training).
- Increase the number of RN stewards allowed on release at a time from 1 inpatient/outpatient to 2 inpatient/outpatient

ARTICLE 9 - CHILDBIRTH EDUCATORS

Childbirth educators are typically coded for 4.5 hours per week and scheduled for a fixed weekday evening childbirth education class. One (1) month in advance, educators are notified of the location and course content of each class. The classes are typically four (4) hours in duration, and regardless of the duration of the class, educators will be paid a minimum of three (3) hours for every class they instruct. In addition, the educators will be paid for all time spent in staff meetings and for class preparation time. Educators will be offered additional scheduled shifts of work to administer childbirth education films and tours of the regional childbirth facilities. On-call educators will be offered vacant shifts as far in advance as possible on an equitable basis. Educators who are ill and unable to report for work will call the department manager or Team Leader who will arrange for the instruction or cancellation of the class. Shift differential will be paid for all hours worked after 6:00 p.m. Educators will advance one (1) step on the wage scale no less than every two (2) years from date of hire.

Article 9:
TA
To be removed as this language is no longer applicable.

Article 29 – TA Corrective Action

OFNHP Interest: you get to choose your steward- right steward-right time.

The ability to have a steward of your choosing

Timeliness (to hold the joint discovery)

Length of corrective action

Article 32 – Probationary Period - TA

Probationary period reduced from 180 days to 120 days

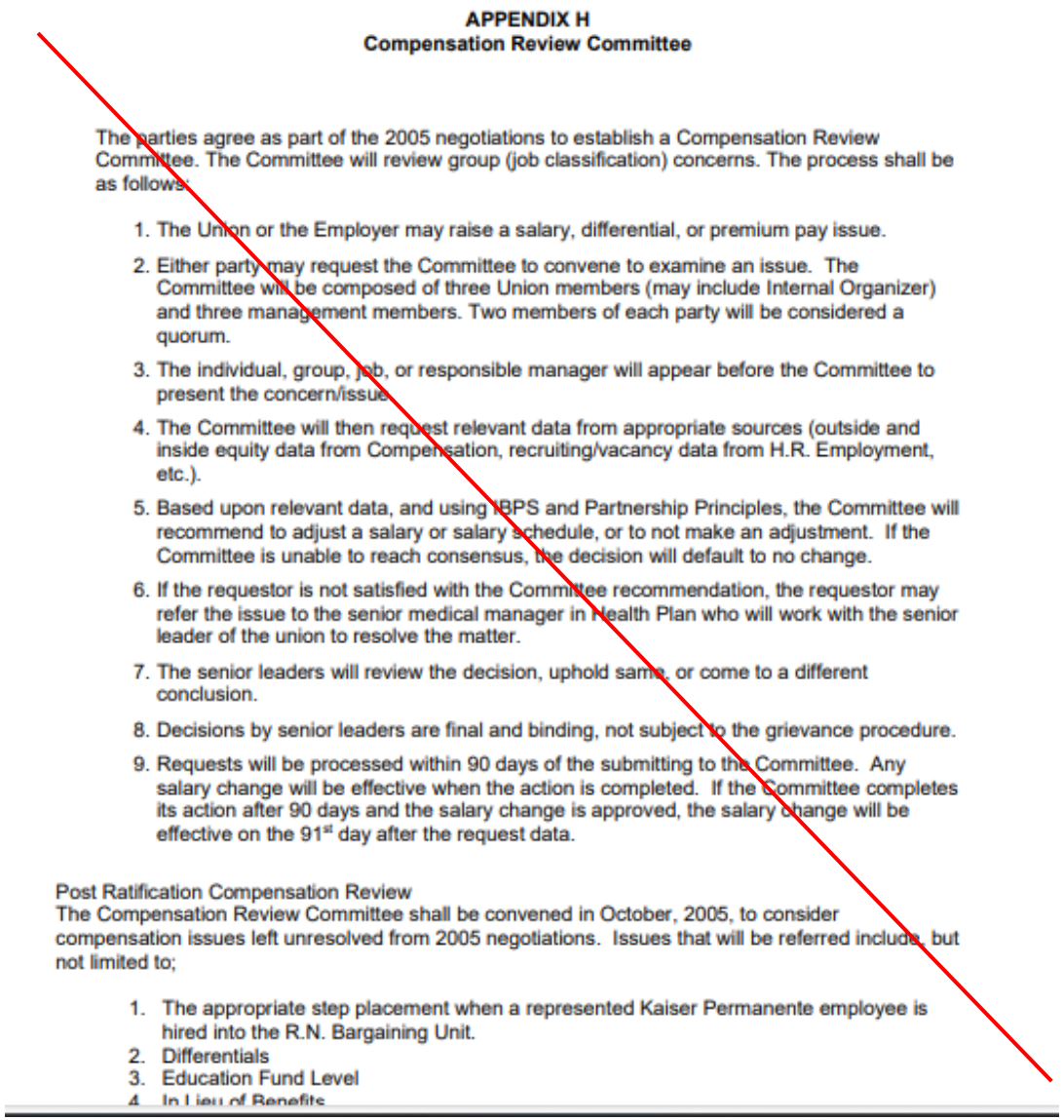
Appendix C TA (removed)

APPENDIX C

Inconsistent Pay Practices

Parties agree that the practice of paying time and a half for those employees working less than 40 hours while attending meetings/training before they work 40 hours should be discontinued. The timing of the change in practice will be phased in over the next 6 months.

Appendix H TA (removed)



APPENDIX H
Compensation Review Committee

The parties agree as part of the 2005 negotiations to establish a Compensation Review Committee. The Committee will review group (job classification) concerns. The process shall be as follows:

1. The Union or the Employer may raise a salary, differential, or premium pay issue.
2. Either party may request the Committee to convene to examine an issue. The Committee will be composed of three Union members (may include Internal Organizer) and three management members. Two members of each party will be considered a quorum.
3. The individual, group, job, or responsible manager will appear before the Committee to present the concern/issue.
4. The Committee will then request relevant data from appropriate sources (outside and inside equity data from Compensation, recruiting/vacancy data from H.R. Employment, etc.).
5. Based upon relevant data, and using IBPS and Partnership Principles, the Committee will recommend to adjust a salary or salary schedule, or to not make an adjustment. If the Committee is unable to reach consensus, the decision will default to no change.
6. If the requestor is not satisfied with the Committee recommendation, the requestor may refer the issue to the senior medical manager in Health Plan who will work with the senior leader of the union to resolve the matter.
7. The senior leaders will review the decision, uphold same, or come to a different conclusion.
8. Decisions by senior leaders are final and binding, not subject to the grievance procedure.
9. Requests will be processed within 90 days of the submitting to the Committee. Any salary change will be effective when the action is completed. If the Committee completes its action after 90 days and the salary change is approved, the salary change will be effective on the 91st day after the request data.

Post Ratification Compensation Review
The Compensation Review Committee shall be convened in October, 2005, to consider compensation issues left unresolved from 2005 negotiations. Issues that will be referred include, but not limited to;

1. The appropriate step placement when a represented Kaiser Permanente employee is hired into the R.N. Bargaining Unit.
2. Differentials
3. Education Fund Level
4. In Lieu of Benefits

Exhibit 1
TA
(removed)

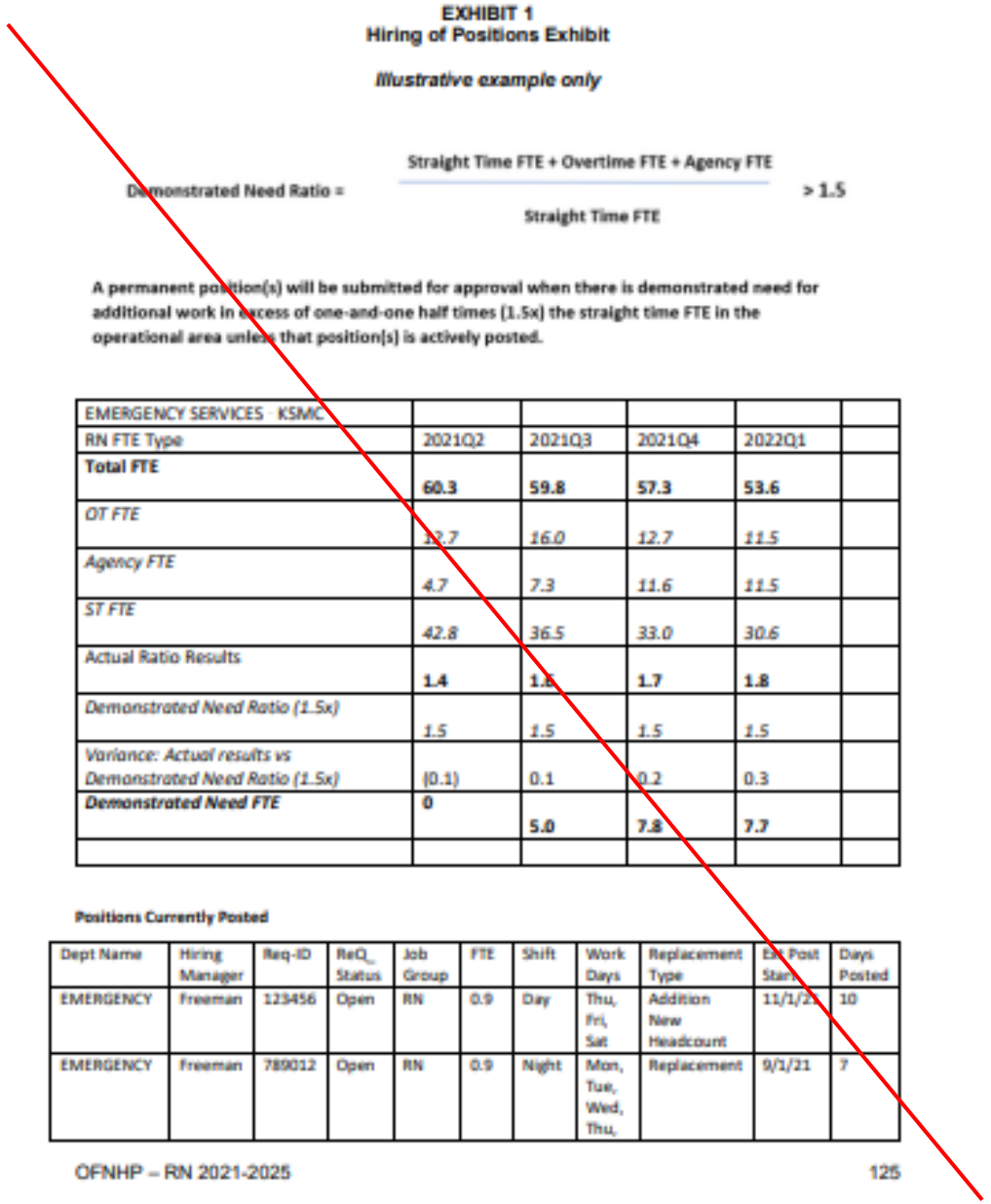


EXHIBIT 1
Hiring of Positions Exhibit

Illustrative example only

$$\text{Demonstrated Need Ratio} = \frac{\text{Straight Time FTE + Overtime FTE + Agency FTE}}{\text{Straight Time FTE}} > 1.5$$

A permanent position(s) will be submitted for approval when there is demonstrated need for additional work in excess of one-and-one half times (1.5x) the straight time FTE in the operational area unless that position(s) is actively posted.

EMERGENCY SERVICES KSMC					
RN FTE Type	2021Q2	2021Q3	2021Q4	2022Q1	
Total FTE	**60.3**	**59.8**	**57.3**	**53.6**	
OT FTE	*12.7*	*16.0*	*12.7*	*11.5*	
Agency FTE	*4.7*	*7.3*	*11.6*	*11.5*	
ST FTE	*42.8*	*36.5*	*33.0*	*30.6*	
Actual Ratio Results	**1.4**	**1.6**	**1.7**	**1.8**	
Demonstrated Need Ratio (1.5x)	*1.5*	*1.5*	*1.5*	*1.5*	
Variance: Actual results vs Demonstrated Need Ratio (1.5x)	(0.1)	0.1	0.2	0.3	
Demonstrated Need FTE	**0**	**5.0**	**7.8**	**7.7**	

Positions Currently Posted

Dept Name	Hiring Manager	Req-ID	ReQ_ Status	Job Group	FTE	Shift	Work Days	Replacement Type	Est Post Start	Days Posted
EMERGENCY	Freeman	123456	Open	RN	0.9	Day	Thu, Fri, Sat	Addition New Headcount	11/1/21	10
EMERGENCY	Freeman	789012	Open	RN	0.9	Night	Mon, Tue, Wed, Thu,	Replacement	9/1/21	7

Back Page TA

HUMAN RESOURCES DEPARTMENT

Kaiser Permanente Building
500 N.E. Multnomah Street
Portland, Oregon 97232

NATIONAL HUMAN RESOURCES SERVICE CENTER

Direct Dial Line – (877) 457-4772

Correction for OFNHP address

OREGON FEDERATION OF NURSES AND HEALTH PROFESSIONALS

11560 SW 67th Avenue
Portland, Oregon 97232
(503) 657-9974
itsmyunion@ofnhp.org

Despite our best efforts, Management has failed to bargain in good faith and propose anything meaningful that will improve working conditions and the safety of our patients.

The 2025 RN Bargaining Team is recommending that on 9/15 you vote **“YES”** to strike against Kaiser’s Unfair Labor Practices if necessary.