Oregon Nurses Association Contract Language:

This is from OHSU:

6.2 Respectful behavior. The Employer and the Association agree that mutual respect between and among workforce members is integral to a healthy work environment, a culture of safety and the provision of excellent patient care. An employee experiencing behavior in her/his work environment that violates the OHSU Code of Conduct and expectations for respectful behavior may file a complaint with a member of management, with Human Resources, or with the Integrity Office in accordance with the Employer's policies and protocols.

6.2.1 When the complaint is not anonymous, the Employer will report to the complainant about the progress of reviewing the complaint, including any investigation that is undertaken. Follow-up to the complaint will be conducted in a timely manner. A closing letter will be supplied to the complainant after the matter is reviewed, including the completion of any investigation that occurs

ONA-SKY, Article 11, Safety and Health, Section 7. Bullying

The Hospital and the Association agree that mutual respect between and among all employees is integral to a healthy work environment, a culture of safety, and to the excellent provision of patient care. Behaviors that undermine such mutual respect, including abusive or "bullying" language or behavior, are unacceptable and will not be tolerated. Further, the Hospital shall protect nurses from bullying by patients or their families.

- A. Any nurse who believes they are subject to such behavior should raise their concerns with their supervisor as soon as possible. If the supervisor is unavailable, or if the nurse believes it would be inappropriate to contact that person, the nurse should raise their concerns with their supervisor's manager or with Human Resources.
- B. Any nurse who in good faith reports such behavior, or who cooperates in an investigation of such behavior, shall not be subject to retaliation by the Hospital, the Association, or by co-workers. Any nurse who believes they are being retaliated against for reporting such behaviors should raise their concerns with an appropriate manager, supervisor, or Human Resources representative as soon as possible.
- C. The Hospital will promptly investigate any reports of such behavior and, based on such investigation and applying appropriate discretion, take appropriate action, including corrective action when appropriate, to prevent the reoccurrence of such behavior. The goal of the investigation will be to determine if bullying has occurred.
- D. The Hospital will follow up to communicate to the nurse who has reported such behavior the findings of the investigation when it is completed. The Hospital may choose to keep confidential, consistent with Hospital policy, the level of discipline given to an employee who has been found to have engaged in such bullying behavior.
- E. This procedure is exclusive for resolving claims of bullying under this Section and the grievance procedure does not apply; except that: 1) any RN receiving corrective action for bullying may use that procedure to contest the action, and 2) a nurse raising a claim of bullying may utilize that procedure if the bullying claim processing procedures are not followed.

Montana Nurses Association Contract Language:

<u>Clark Fork Valley Hospital</u> - Everything highlighted is new language that was just ratified last month. That facility is a critical access hospital with no security guards and even no police force on nights and weekends. They are implementing a training program now, and we will be working to create policy around prevention, continued training, documentation, reporting, tracking and developing safety plans for the staff in case of safety emergencies.

Section 23.2:

The following are examples of unacceptable forms of conduct:

- Physically, verbally, emotionally or sexually abusing, bullying, or harassing another person (including patients, residents, and/or family, visitors, fellow employees) while on duty or on CFVH and affiliated premises. *
- 2. Engaging in physical fighting or inappropriate conduct on CFVH or affiliated premises.
- Behavior that has the purpose of effect of unreasonably interfering with an individual's work performance, such as withholding information that impacts another person's ability to perform their work.
- 4. Dishonesty, theft, fraud, or embezzlement from CFVH or affiliated premises or from CFVH employees, patients, residents, visitors or families.
- 5. Possession of weapons on CFVH or related facilities property. *
- 6. Coming to work under the influence of, or possession of, or conducting the sale of, or illegal transfer of alcohol or illicit drugs on CFVH and affiliated premises.
- 7. Refusal to obey reasonable orders of supervisory personnel, refusing to work and/or other insubordinate behavior. *
- Soliciting or accepting gratuities from suppliers, patients, residents, visitors or soliciting for contributions, or selling tickets for raffles, entertainment, etc., without the approval of the Human Resource Manager or the Hospital.
- 9. Neglect of duties, including receiving personal visitors or personal phone calls at the work station.
- 10. Unacceptable job performance.
- 11. Gambling on hospital property.
- 12. Writing in hours or clocking in hours for another employee, or any way tampering with or falsifying a time record.*
- 13. Endangering the welfare of patient, resident, visitor or another employee.*
- 14. Threatening, intimidating or coercing fellow employees.*
- 15. Falsifying hospital records.*
- 16. Disclosing confidential information.*
- 17. Using hospital equipment for personal use without authorization.
- 18. Abandonment of duties, leaving a resident or patient, or job within the hospital, and leaving the premises of CFVH or affiliated facilities without permission while on duty.*
- 19. Spreading false rumors.
- 20. Using abusive or obscene language to fellow employees, or threatening and interfering in any way with a fellow employee's rights.
- 21. Negligent and deliberate neglect, waste, damage or theft of property belonging to the hospital, employees, patients or residents.

- 22. Violating the smoking policy.
- 23. Exceeding allotted times for meal or breaks.
- 24. Refusing to assist in fire and disaster prevention or drills, or to familiarize oneself with the department's medical alert plan or fire and disaster procedures, location of alarms, extinguishers, etc. failure to respond when necessary for disasters and other medical alerts.
- 25. Loitering, loafing, improper dress (with respect to the Hospital dress code) or disregard for appearance, excessive noise and horseplay.
- 26. Ignoring or failing to report an injury.
- 27. Violating safety rules, being careless, or playing practical jokes which result in hazardous working conditions or that which infringes on the rights of a co-worker, patient or resident.*
- 28. Absenteeism, tardiness, or dishonesty about reasons for absenteeism or tardiness.
- 29. Posting or passing out of unauthorized notices, posters, handouts, defacing walls, or tampering with bulletin boards.
- 30. Professional or ethical misconduct as defined by Montana Board of Nursing.*
- 31. Disregard of departmental, CFVH rules and policies.*
- 32. Violation of Federal, State, Local or other laws or rules.*
- 33. Sleeping on the job without authorization.*
- 34. Conduct, on or off the premises, that brings unfavorable attention to CFVH or affiliated facilities.
- 35. Failure to attend Mandatory In-services and/or Meetings without proper excuse by Nurse Manager.*

(*) Denotes those areas that are considered "Misconduct" and may require immediate disciplinary action.

<mark>Addendum C</mark>

Workplace Violence and Prevention

The hospital shall place signs in public and patient areas throughout the Hospital stating "We value the safety of our employees and patients. Violence and threats of violence will not be tolerated. Acts of violence will be reported to authorities."

The hospital shall develop a Workplace Violence Safety and Prevention Program, including employee training, which shall be implemented by June 1, 2018. The program will be presented at PCC prior to implementation by May 1, 2018.