



HPAE

LOCAL 5185 Newsletter

A NEWSLETTER FOR THE MEMBERS OF HPAE LOCAL 5185 AT BAYONNE HOSPITAL

THE CONDUCTOR

March 2017

MESSAGE FROM THE PRESIDENT

Calling All Reps & Members Wanting to Become Reps

One of our goals as a local for 2017 is to improve our Rep structure to make sure that every member has a Rep with whom they can discuss issues and concerns. So, we would like to encourage members to step forward and tell us you are interested in becoming a local rep. Our current rep structure definitely needs to be strengthened as we have just a few Reps and the Local Officers to handle problems.

So far we have recruited three new reps this past quarter; our goal is to have 40 strong reps by this time next year. We are a large local, 850 plus members, and need assistance conveying information to the membership as well as bringing concerns back to us. All interested members will receive the appropriate training, which consists of a training class as well as mentoring by one of the Local Officers.

Please contact one of us for more information. Joan Zitzman and Michele Viette, our Co-Grievance chairs, run bimonthly Rep meetings at the union office on Broadway. Several members have said "Yes" when we approached then and asked if they were interested in becoming a rep. So think about it, we need Reps in ALL Bargaining Units, ALL Departments, and ALL Shifts. We need to stand united. One of the best ways to accomplish this is to be well informed and well-versed in the language of our contract. I hope to hear from many of you soon.

I Remain in Solidarity,

John J Bauer, RN
President Local 5185

Interim Agreement to Hold Off Staffing Ratios Arbitration

Our union and management have agreed to hold off moving to arbitration on the class action grievance regarding staffing ratios. There is a trial period of three months, which began Jan 23rd of this year until April 23. At that time, we will look at all the short staffing forms that have been filed and if there is still no change in staffing levels, we will notify management that we are going to arbitration.

The interim agreement includes provisions which are intended to improve staffing, including some changes with regard to down staffing. RNs can volunteer to be on call if they are down staffed. That nurse would receive \$8/hr for the rest of the shift, and if they are called to come in, they would be paid time and a half for the first 3 hours. ICU and 2R nurses may be required to float to either area. The same with 3R and 5R RNs; they can float to either unit. If the nurse volunteered to be on call and was not called in, that nurse would have the option of either a) receiving only on call pay or b) receiving on call pay in addition to PTO day. If two or more down staffed nurses volunteer to be on call, seniority shall prevail on a rotating basis.

The problem we have now is that we have too many open RN positions. In my opinion, the reason for this is that our wages rates are way too low compared to OTHER area hospitals. As quickly as we fill positions, more senior nurses are leaving. Recently our sister HPAE local at Christ Hospital agreed on an arbitration settlement with management where they settled on giving the RN's \$20/hr more for shifts where nurses are shortstaffed. Meanwhile Bayonne Medical Center, which is also owned by Care Point, offered \$10/hr more for shifts that are shortstaffed. For the past two weeks, we have been asking management to address this critical situation and we are hoping that they will work with us to resolve this issue

Carol Manno
VP Professionals and Nursing

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The Union Plus mortgage program makes buying or refinancing a home easy for you and your children.

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Arbitrator Rules Against Us in the Co-Pay Grievance

We filed a grievance in reference to co-pays for office visits to CarePoint physicians. We claimed that these physicians are employed by CarePoint and we should not have to pay co-pay.

We took the grievance to arbitration and the arbitrator denied the grievance.

The arbitrator ruled that these physicians are not employees of CarePoint, but private office physicians and that you need to pay the co-pay. The only physician co-pays that you are not required to pay is the one for doctors that do outpatient services at the hospital. An example is when you get an x-ray and the physicians reads the x-ray because he is employed by the hospital. On the other hand, if you have a EKG done and a doctor reads the EKG, you may be liable for that bill if the doctor is not someone who is hired by the hospital.

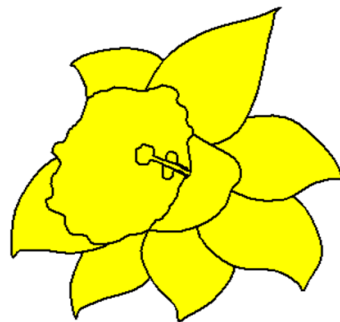
We will certainly keep this in mind when we negotiate a new contract in 2018.

Nanette Rivera

Spring Word Search

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G	N	I	T	L	E	M	I	P	V	T	R	C	L	P
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GREEN
GROWTH
JACKET
MELTING
PUDDLE
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