



HPAE

LOCAL 5118

A Newsletter for the members of
HPAE Local 5118 at Cooper Hospital

THE COMMUNICATOR

January 2019

Message from the President



Welcome 2019 and all that it brings for us both in our personal lives and our careers. This is an especially important year as we will be beginning to prepare for negotiations in 2020.

We as nurses want the best for our patients, our families, and our working conditions. We have lived through things in our contract that have worked and things that we need to change. These will be issues that need to be addressed at the table. It will be important for all of you to return your surveys when you receive them. There will be a need for nurses to sit at the table at negotiations to help make those proposals for the things we think are important. I hope that there are nurses to represent all the areas to

ensure that everyone's issues are addressed. Remember if we don't know about issues they can't be looked at. We are currently holding divisional meetings throughout the house. Those dates and units are listed in this newsletter.

In closing I encourage all of you to play a part in our Union this year. This can be done by being members of a joint committee, writing an article for the newsletter, or attending State and Local events. If interested please reach out to me and let me know. I will assist you in getting to the right person.

In closing I am wishing you all a Happy New Year and hoping that working together we can improve the working conditions for the nurses in Local 5118.

Doris Bell
President
Local 5118

UNION COMMUNICATION

Communication is vital to ensure that our Collective Bargaining Agreement (Union Contract) is adhered to by management, as union members we need to know what's happening in our Union and we need to have the ability to reach out to our Union leaders.

There are several ways in which to stay connected with our Local Union.

1. Check us out at www.hpae.org. This is our web site for all of HPAE in New Jersey and Pennsylvania. To get information for our Local go to locals and hit 5118.

2. We receive our Local Union Newsletter every other month. If you are interested in writing an article for the newsletter please contact Jackie at jackiefranchetti@gmail.com. If your address changes, please go to www.hpae.org and update your contact information.

3. Blast emails & Text messages. We send blast emails and text messages on a regular basis. If you have changed your email address or know someone who is not receiving our union updates please contact one of our union reps or officers so they can update your information or go to the web site.

4. Union Leadership Walk thru's. Our Union Officers go to each unit on a monthly basis to introduce themselves and ask if we have any issues needing to be addressed. They let us know when they are on the floor and meet with us in our break room to talk.

We are allowed to go and talk with them. We can take this time as our break. We cannot get into trouble as long as we are on our break. Face to face conversations are the most effective means of communication.

GRIEVANCE CORNER

Currently there are two grievances going through the grievance process. One is for an alleged HIPPA violation.

Please familiarize yourself with the hospital's HIPPA policy and the consent forms that have to be processed before accessing certain information.

The second grievance is for changing your schedule without management's approval. If you are coming in late or leaving early from work make sure you have gotten approval from your manager.

DISCIPLINES

We are seeing that the hospital is really focusing on documentation and shift report communication. Please familiarize yourself with what the policy states you need to document and how often for certain situations (falls, pain relief, etc.). Many policies require a lot of follow up documentation so make sure you know what is required.

Management has been watching staff give bedside report. Make sure to pull up your patient's epic screen to review orders and go to the patient's bedside, introduce yourself and ask any appropriate questions. Management will ask patients if this was done.

Parking. Only park where you are assigned. WE CAN NOT park in a different location and pull a ticket and pay for it. We can still be disciplined.

It is better to be late once than get a written warning for parking in the wrong spot.

Submitted by
Jackie Franchetti, RN

UNION UNIT MEETINGS

Our Union LEB (Local Executive Board) are scheduling Unit Meetings across the hospital to discuss what obstacles we face daily when trying to provide quality care. On November 6, we had the Medical Surgical meetings, which included K8, K9, K10/INCUB, P5, P6, P7, N7, P8, P9, TSDU and Psych. The feedback from the nurses is invaluable.

At the meetings the nurses were given a short staffing survey to complete. The survey is also being distributed on the units. The purpose of the survey is for us, along with you to decide what approach to use when proposing change to the hospital.

You have expressed frustration over being pulled, not having supplies/equipment and not being respected. Come out to one of the meetings and be part of resolving your concerns.

The unit meeting schedule is as follows.
December 6, 2018 Maternal Child Health Areas
January 9, 2019 PACU and TICU

Saturday, February 23, 2019 **10 am** SCU/SPU/
PAT, CCL, Special Tests, PICC Team, IR/
Radiology and OR

March 6, 2019 ED, ICU, CCU

Saturday April 13, 2019 **10am** MD Anderson
areas (Camden & Voorhee's), Voorhees Surgical
Center, Out Patient PEDS, Mt. Laurel GI,
Willingboro GI, Pre Admission Testing

Location: All meetings will be held at the ML
Hotel on Route 73 in Mt laurel.

VACATION

It's that time of year to pick your summer vacations.

For vacations during the period of May 1 through November 1 of each calendar year, employees shall submit requests in writing by February 15 of the same year.

Employees will be notified by their Clinical Director by February 28 of the approval or denial of such vacation request.

Remember you need to get your vacation paperwork back by this date otherwise it is not approved. Please let your union reps/ officers know if you have not gotten it back by February 28th.

We can assist you in this process.

The HPAE Retiree Medical Trust - Frequently Asked Questions

What is the HPAE Retiree Medical Trust?

The HPAE Retiree Medical Trust is a fund established by HPAE and participating employers to provide supplemental retiree health benefits through reimbursement of medical costs.

Which HPAE employers are currently participating? - The following HPAE-represented hospitals are participating in the Trust: Christ Hospital, Cooper University Hospital, Englewood Hospital and Medical Center, Inspira Health, Inspira Woodbury, Jersey Shore Medical Center, Meadowlands Hospital, Palisades Medical Center, Runnells Hospital, and Virtua/Memorial Hospital. HPAE staff are also participants in the Trust.

How is the Trust funded and by whom?

Each HPAE local union negotiates with the employer the level of contributions and how the money is contributed. Money can be contributed from employee (pre-tax) payroll deductions and/or employer contributions.

What types of medical expenses are reimbursed by the Program?

- Premium or contribution payments for coverage under health, dental, or vision insurance plans.
- Medical expenses excludable from gross income under Internal Revenue Code Section 213(d), including hospital, health care provider, diagnostic, dental, vision, and prescription drug costs.
- Premium payment for qualified long-term care (LTC) insurance.
- Premium payment for Medicare supplement plans

Are reimbursement benefits from the HPAE Retiree Medical Trust taxable?

No. Unlike a 401k plan, the money in the Retiree Medical Trust is completely “tax advantaged”. Money contributed to the fund is not taxed; interest earned by the fund is not taxed; and reimbursement money is not taxable income.

Can an individual employee “opt out” of the program if it is negotiated in the contract and approved by a majority of employees in a bargaining unit?

No. To receive the tax advantages of the program, as determined by the Internal Revenue Code law, all eligible members of a bargaining unit must participate. Either all eligible employees participate or no one participates.

What type of benefit payments does the Trust provide? -

The Trust provides two types of benefit payments: regular “monthly benefits” and “Employee Account benefits.”

- 1) **Monthly Benefits:** An eligible retiree qualifies as a “Regular Beneficiary” and is entitled to **monthly reimbursement** of covered expenses in the amount of his/her monthly benefit level, as determined by the medical expense reimbursement program. An

employee is eligible if she/he has **five or more years** of active service credits in the program, is 55 years old, and is no longer working in a participating hospital or institution.

- 2) **Employee Account Benefits:** If an employee has less than five years of active service credits and is no longer working in a participating hospital or institution, the employee qualifies as a “Limited Beneficiary” and is entitled to reimbursement of covered expenses in an amount equal to the balance in his/her Employee Account. The employee will be eligible for the benefits if he or she:

- Is between 40-55 and 24 months have passed since the Plan received contributions on his or her behalf.
- Has attained age 55
- Is disabled, as determined by the Social Security Administration

What if I leave my employer before I earn five years of active service credits? Will I lose the money I have contributed?

No. All the money that you contributed will be in your Employee Account and available to you when you are eligible based on the above conditions.

What if I leave my employer after I earn five years of active service credits, but am no longer an HPAE member or employed in healthcare?

You will still be eligible for a monthly reimbursement benefit when you turn 55 years old.

What will be the benefit for my spouse/domestic partner and children in the event of my death?

A spouse, domestic partner, and dependent children are eligible for survivor benefits.

If you are receiving a monthly benefit as a “regular beneficiary”, a surviving spouse, with or without children, is eligible for monthly benefits equal to **50%** of the benefit level of the deceased eligible retiree. If there is no surviving spouse or domestic partner, the monthly benefit level for surviving children will be 50% of the benefit level of the deceased (to be divided equally among children). The surviving child(ren)’s monthly benefits will terminate upon the loss of child(ren) status.

If you have an Employee Account as a “limited beneficiary,” then your surviving spouse or domestic partner will be entitled to reimbursement benefits in an amount **equal to the balance** of your Employee Account. If there is no surviving spouse or domestic partner, then your child(ren) will be entitled to such benefits.



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Staffing Committee Update

The Joint Staffing Committee is made up of HPAE nurses and representatives from the hospital. We meet at least six times yearly to address the Unions' ongoing concerns around staffing and to propose solutions to the identified problems. The meeting is one hour and credits toward the Professional Ladder are given for this committee.

Interested in becoming a member of our Staffing Committee please contact Patti Scharff at jimandpatti@msn.com.

At our last meeting we discussed;

- ◆ Several concerns brought forth by the nurses who work on the Psych Unit.
- ◆ **Union:** It is dangerous when the Techs have to cover the 1:1 patients on S5 because it leaves the unit short a Tech. The Tech's on the unit have to staff the Meeting Room at all times and help conduct hourly rounds.
Cooper agreed S5 Techs will not cover 1:1 patients on their unit.
- ◆ **Union:** The admission of isolation patients to the unit.
Cooper discussed this with ID, and according to ID guidelines, these patients are medically cleared (not medically admitted patients) so they do not require isolation. There is always isolation garb available for emergencies.
- ◆ **Union:** When staff have to use the panic button it goes directly to security. Security then calls the nurses station. We voiced how unsafe this is because a nurse or a tech may not be near the phone.
Cooper agreed: Security is now responding by going directly to the floor.
- ◆ **Union:** There is a need for telemetry nurses on N9. The lack of telemetry nurses is increasing the floating of other nurses to that floor.
Cooper stated the goal is to have all N9 nurses telemetry trained within six months of hire. Several are trained now, many are taking the class in February.
- ◆ **Union:** The need to have more frequent telemetry classes offered in order to speed up the process.
Cooper hopes to do this now that more Educators are in place.
- ◆ Agency nurses will continue to be utilized on K9, PICU and the Critical Care areas until the areas are staffed.

Newsletter Correction

In your last union newsletter there was an error regarding longevity.

Article 7.5 Weekend Rotation
Full time and Part time nurses with between 25-29 years of service will work one weekend per month and those with 30 years or greater will not be required to work weekends.

The previous newsletter stated 20-29 years which is incorrect