



HPAE

LOCAL 5118 Newsletter

A NEWSLETTER FOR THE
MEMBERS OF
HPAE LOCAL 5118 AT COOPER
UNIVERSITY HOSPITAL

THE COMMUNICATOR NEWSLETTER

May 2018

Message from the President

Our Local Executive Board has been working on many issues throughout the hospital. Our energies have been focused on the policies the hospital has revised, concerns in the OR, the constant mandation of nurses at the Mt. Laurel Digestive Center/PEDS/PICU and in the NICU, staffing, call out patterns and the increased number of disciplines rendered by the hospital.

It is true that the hospital will continue to interpret the articles in the contract to benefit them and that is the reason that we all need to understand our contract. As we are moving forward we are making every effort to educate our new nurses and encouraging them to be more involved in our activities. It will require all of us to work together to make this a productive Local.

We recently attended an event in Washington DC, I'm sure some of you heard about it. It was the "Show Me Your Stethoscope" rally. Many of you have heard us talking about it and asking members to attend. As in California, and now in Massachusetts, it takes many nurses to change laws and make people understand the importance of issues. In these states there were **many** nurses engaged in getting the laws passed for safe staffing and safe working conditions. If you are a new nurse who plans to get an advanced degree or a higher level of education think about those that will be left at the bedside to care for your loved ones. Think about the rights of those nurses to safe working conditions and step up to help make that happen.

We have started a New Nurse Alliance. They will meet every other month at the Philly Diner. The next meeting is **June 12th at 5pm**. Please come out and join us for food and our commitment in helping you understand what a union is.

In Solidarity,
Doris Bell, RN, Union President



Remember about your raise

On June 1st if you qualify you, will be receiving your 2.25% raise. This is a great time to increase your pension percentage via the Lawson portal or start a savings account

Start now so one day you can retire !!!!

How Not To Get Disciplined in a Broken System

Many nurses have commented that they like to read about what nurses are being disciplined for so they can be even more careful than they already are. The stress on all of us at the hospital has increased dramatically over the last year. There seems to be constant State inspections, hand hygiene inspectors watching us and our rooms, our assignments getting tighter even when the patient acuity is higher. It has felt like we are being asked to continually do more with so much less (staffing, equipment, floating etc.). I think we can work smarter versus harder. The system is broken but we do not have to get into trouble because of it.

So here are some scenarios that have happened and how best for us to handle them.

1. The medication bar code is not scanning. **Do Not** document bar code unreadable until you have called pharmacy, written a note, or discussed with your manager. The hospital gets a report on all unreadable bar codes and will question you as to the circumstances. It takes longer to call pharmacy but it's our job at the end of the day.
2. The Doctor does not follow proper procedure; not doing a time out, sponge count or filling out a consent properly. We have to STOP what you are doing and try to fix the problem. If we cannot change the situation then we need to notify a manager or COD ASAP. As nurses we cannot fix everything, but we are held to the hospitals' policies and procedures so do not get frustrated and give up. Notify someone who can fix the situation.
3. The doctor orders a medication/procedure then discontinues it without telling us. This has happened in many areas. We have the doctor order the medication, we get the medication and when they scan it, it does not come up. NEVER give a medication until you have scanned it. NEVER do a procedure: insert a foley, IV, discontinue oxygen without an order. We use to have more autonomy in the past. Today everyone is so scared and writing up EARS reports that we need to slow down and make sure we are covered before doing something.
4. Forgot your badge? Do not write on the exception sheet that you were on time if you were not. The hospital will look at the time we clocked into the parkade and ask coworkers if we were late. This is considered theft of time and we can be terminated.

5. We are late to work - be late. Parking below the 4th level in the parkade is not worth getting disciplined. The first offense is a written warning. The second offense is removal from the parkade.

6. Do not let your certification or nursing license expire; we cannot miss any mandatory CLN classes or skills fair. Schedule all of these in enough time to get them done.

7. Calling out. Do not call out for 2 shifts three consecutive times. We have grievances pending but currently the hospital is disciplining for a pattern of three or more....break the pattern. And remember if you have to call out do it 3 hours before your shift. A late call out is a written warning. Also it is recommended that you do not call out for later in the week. Nurses believe that they are helping the hospital get staff for a day they may be unable to work. The hospital may look at this as intentional and question your call out.

8. Documentation. If you rotate your hourly checks and see blank spaces make sure you discuss this with your tech and get the documentation complete.

9. Check and re check any lab labels and transmittal slips. Many times we help our coworkers, assuming the labels in the printer are for our patient, etc. mistakes may happen. Both nurses may be disciplined. We have to slow down and double check our work. The first discipline is a written warning the second is a suspension.

Submitted by
Jackie Franchetti RN, BSN



More Bulletin Boards

The new and improved HPAE bulletin boards are here! A big thank you to Janine Cisco N7

Staffing Updates

In our Union contract under Article 11.1 you will find language that addresses Cross Training. A nurse may cross train to another unit within or outside of their float district. The process involves training in the unit and acquiring the necessary competencies to work in that unit. This is a volunteer training. Once we are cross trained we may be floated only to that area.

We have had discussion with the hospital to clarify exactly where a cross trained nurse can be floated. It is the Unions' position that we can only be floated to the cross trained unit - not the units' float districts. Cooper has agreed with our position. Example: If a nurse cross trains to CDU, that nurse cannot be floated to all of the CDU areas within that float district.

Union and Hospital representatives are forming a Cross Training Task Force. As a Union, we want to discuss coordinating competency days, how would cross training affect the current staff and should there be "core competencies".

If you are a cross trained nurse and would like to join the Task Force, or provide us with feedback on your cross training experiences, please contact a member of your Local Executive Board.

Reminder:

When completing an ADO form, please include the name of the person filling out the form and a non - Cooper email address. We cannot conduct Union business using our Cooper email address. Everyone who completes the form receives an email from me when Cooper responds to the submitted ADO.

Transfer Vs Unit Shift Change: Written Warnings

Two nurses recently brought to our attention that they were told by their manager and human resources that they cannot apply for a "shift change" within their unit because they both had a written warning in their file. This is NOT correct. A change in shift is NOT a transfer. We addressed this with human resources. **OUTCOME:** The Union and the Employer agree changing your shift within your unit is not a transfer and having a written warning does not prohibit us from applying for a shift change position.

Patti Scharff, RN
Local Executive Board



HPAE Nurses in Washington DC with Bernie Sanders



HPAE President Ann Twomey addresses the crowd at the Nurses Take DC Rally - show us your stethoscopes!! Support Safe Staffing for our patients



A Newsletter for the members of
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Address Service Requested

EDUCATION CORNER

1. Mislabeled/ Unlabeled Lab Specimens:

- Any mislabeled or unlabeled specimen or incorrect transmittal slip that is sent to the lab will result in disciplinary action.
- The first occurrence will result in a written warning. The second occurrence in a floating year is an automatic suspension.
- If one RN is “helping out” another RN by labeling the specimen for him/ her and it is labeled incorrectly, both RN’s will be disciplined.

PLEASE BE CAREFUL AND DILIGENT WHEN SENDING LABS!!!

2. Patterns of Call Outs:

RN’s are being disciplined for patterns in their call outs.

- ♦ **Example 1:** Every time they call out it is for 2 days. They are not being disciplined for calling out 2 days in a row, which is permitted in our contract, they are disciplined for the pattern of doing it every time they call out.
- ♦ We have a few grievances and a pending arbitration regarding this issue, but we want the nurse’s to be aware that it is happening.
- ♦ The hospital is attacking our ability to call out two consecutive days in a row without consequences.
- ♦ **Example 2:** Every time they call out it is on a Friday or a Monday to extend their weekend.
- ♦ **Example 3:** A nurse had 5 call outs and received a verbal warning; as soon as 1 dropped off, she called out again. Since this occurred several times throughout the year, the hospital felt this was a pattern and advanced to progressive discipline.

BE AWARE THE HOSPITAL IS LOOKING AT EVERYTHING THEY CONSIDER A PATTERN.