



Message from the President

Keeping Nurses Safe Can Only Be A Win – Win (*reprinted from AFT Healthwire*)

I've been a nurse for 25 years and a union activist for almost a decade. As president of my local and as a critical care nurse at bedside, I have had more feedback and experience with workplace violence than I'd like to.

I read something in a nursing journal last year that has stuck with me. It said that although nurses remain on top with the public as the most trusted profession, they are also near the top of public servants who experience violence in the workplace. This includes physical violence, assault, verbal abuse, threats, bullying and aggressive interactions. You don't need to be a healthcare professional or be in our field to imagine where workplace violence occurs most often. While it is highly prevalent in psychiatric nursing areas, it is also very often occurring in emergency rooms, critical care areas and of course a potential in less-stressed acute care medical/surgical areas as well.

The most unpleasant phenomena of this is that because nurses and healthcare workers understand the degree of stress that illness, injury, trauma and death all bring, now it is largely believed to be "part of the job" or something that "goes along with the territory." As healthcare changes so frequently, and becomes more advanced, patients often are much sicker; and more and more staff are needed to meet patients' demands. Many times, needed resources are not there consistently, and patients want more. Hospitals have become pressure cookers in many cases due to multiple external factors, which breed tension in an already stressful environment.

Nurses are the frontline caregivers, and we are the ones who spend the most time directly caring for patients and their families. This also makes us the first in line to be confronted by a frustrated or angry patient.

Unfortunately, what I hear very frequently is that when nurses are caring for patients with mental illness; others who are geriatric, confused or have dementia; and drug- or alcohol-addicted patients, that because the patients are not in their right minds when the events occur they are not considered preventable—almost like it doesn't really count.

What is seen often and is also sad is that because the events are felt to be part of our job, they are not treated and/or reported. So as a local union president and as a nurse who has many times been on the receiving end, this is what I find most important on this topic:

- ◆ Know your rights, the laws that protect you and the resources at work and in your union that are available to you. So many healthcare workers are still unaware of the laws protecting us against violence. More disturbing is that the nurses who are aware are often too busy, stressed, frustrated or indifferent to the subject to invoke their rights under the law.
- ◆ Report incidences of violence when they occur. Healthcare workers deserve valid, prompt physical and psychological care when they themselves become patients. They need to know it is not an acceptable part of their work, and repeated events only add to burnout and lessen their ability to provide good care.
- ◆ Your union has the right to request and review the OSHA 300 logs. These are logs kept by the employer that document every injury and the source of that injury. If you don't know where the problems are you cannot work on fixing them. Remember nurses must report the incidents in order for them to be addressed!
- ◆ Keep this problem in the forefront. Speak out about it in your newsletters, and keep it on the agenda at membership meetings. Let your employer know that union committees on health and safety and violence in the workplace must be taken seriously. We are being nurse advocates when we insist that the problem be tackled regularly; keeping nurses safe can only be a win-win for hospitals and healthcare workers alike.

A Message from our State Officers on the HPAE Convention

On October 6-7, 200 HPAE delegates, members, and staff came together to launch an ambitious plan to take on corporate healthcare, deepen membership involvement, win strong contracts, grow our union and strengthen community alliances.

Make no mistake, we are in difficult times and we need to take on increasingly more powerful health systems if we are to protect our workplace rights, our voice in patient care and the standards of care and working conditions we have worked so hard to earn.

That's why we also supported changes to HPAE's constitution, to adapt to these changing conditions, allowing us to be more effective and at the same time, more careful with the resources we have. It's why we supported specific resolutions to expand our organizing and membership programs, to build our strength and capacity.

That's also why our State Executive Council proposed, and our convention delegates passed a resolution to increase our dues, so that we have the resources to protect and advance our programs.

The increase, from 1.1% to 1.25% will have minimal impact on members, and we wanted to make sure of that. It will mean only a few more dollars per pay period in dues. For example, a member making \$70,000 per year will only pay \$4 more in dues per pay period. The increase will be scheduled to take effect with the first paychecks of 2017. Still, we know that HPAE members are working hard to stay ahead financially, and no one will welcome paying more. But without this increase, HPAE's budget will continue to operate at a deficit, and we would not be able to keep pace with our members' needs and aspirations.

We urge you to review the campaigns and programs launched at our 2016 Convention at <http://www.hpae.org/campaigns/convention2016/> – and see how engaged we will be this year in fighting to protect the advances we've made for all healthcare workers over the years. We are fighting to protect members' insurance coverage – and we are out there fighting surprise medical bills and 'narrow networks' that limit our members' options and increase their costs.

We are challenging hospital mergers when they threaten our rights, or jobs. We are still fighting for safe staffing, in contracts and in the NJ legislature. If you have questions on our programs, on the constitutional changes or on the dues increase, feel free to reach out to any of us. We hope you will get engaged with these programs and fight alongside your colleagues for a healthcare system that works for all of us.

Sincerely
President Ann Twomey
First Vice President Bernie Gerard
Secretary-Treasurer Barbara Rosen

COMMITTEE UPDATES

GRIEVANCE COMMITTEE:

The arbitration hearing regarding the subcontracting of nursing personnel and layoff of our department of case managers will be heard next month. This grievance was submitted and then elevated to arbitration subsequent to the layoff of all case managers and contracting with an outside provider of services.

Legal representatives for HPAE Local 5186 and CarePoint Health will present positions, data, contract language and arguments to support the positions of each side. There has been much work and time dedicated to pursuing this case on behalf of nurse members remaining in employment as valued providers of quality care under the agreed and bargained contract. In solidarity we ask for your continued encouragement, action and support.

Just a reminder to RNs we still have an outstanding class action grievance on 5t which addresses many concerns of RNs including safety, floating, workflow, charge, ancillary and more.

STAFFING & LABOR MANAGEMENT:

These committees met on September 22, 2016. The unsafe staffing forms you are so diligently providing are shared and discussed. Notably, there have been significant hours of extra shifts and outside agency to try to meet our agreed upon ratios. Often, the topic of nurse sick calls will be identified as an issue of management. We remain firm that other than an unpredictable weather or emergent event, sick and benefit time is a factor to always be accounted for by the employer to be sure the staffing is appropriate.

There will be more consistency in on site practices in regards to covering units, communicating issues and managing the workforce as agreed upon here.

Five Tower is to remain functioning as an "over flow" unit only at this time.

Many issues surrounding work conditions, meditech, violence, ACLS, safe patient handling, and communication were discussed. All these are impacting your everyday environment and health. Consider joining on one of these groups to help make the changes you and our patients need today.

COPE CORNER



The election season of 2016 so far has been one of many twist and turns. The Republican party started out with 17 candidates and the Democrats with 3 bidding for their party's nomination. As you are aware the RNC and the DNC conventions are both over and nominated their party's choice.

HPAE has endorsed Hillary Clinton for the presidential election based on her progressive positions on healthcare, labor, and other key issues that affect all of us.

As with most elections, you always hear this is the most important election, but this season the Supreme Court nominations are also in play, please consider this when making your decision on who you are voting for.

But it's not just the Supreme Court that makes elections important. Who is elected to federal and state offices will directly affect our health insurance and other key issues.

According to a recent article listing the top lobbied bills in New Jersey for 2016 and going forward, and many are related to health care.

1. State budget 2015-2016 (A 4000)
2. Out of Network health insurance (A 1952)
3. Minimum wage (A15- S15)
4. Paid sick leave (S799)
5. Transportation trust fund (A10, A11)
6. Tiered network health insurance (S634, S296, S635)

Significant work inside the state house is dominated by health care and the business surrounding regulations, funding and insurance. Voting this year is going to not only determine issues of national importance, but many of those issues that affect our professional concerns and our personal life in our local community. Along with AFT /HPAE recommending Hillary Clinton for president, support local candidates that have continually and in the future support **our concerns**. Many people may say, "I don't like either one of the candidates, so I am not voting." This is not a solution; it is part of the problem.

HPAE encourages all to vote, and in an effort to GET OUT THE VOTE we are doing labor walks every Saturday to the election on November 8 to talk with union members about the key issues and the candidates' positions. Any person wishing to get involved, contact a member of your local executive board or you can sign up on the HPAE website, at <http://www.hpae.org/2016/08/register-labor-walks/> There is a \$50 stipend once a voucher is submitted.

C. Crowe
C.O.P.E. Chairperson

GRATITUDE, GRATI, THANKS, APPRECIATION, BUIOCHAS, GRATITUDINE, GRATITUD, DIOLCH....so many ways to say it.

So many studies have come to recognize and promote a quality, emotion and practice that its importance is now scientifically validated.

Whether discussed in cultural anthropology, theology or philosophy, it has a long history as being a 'Gift'. Something of benefit to those who both receive it and give it.

Nursing has recognized gratitude for the strength we gain in honoring nurses. The profession as a whole will be better. Many programs in our professional organizations, workplaces and in media put forth these acknowledgments.

Nothing could be simpler, require no big time commitment, and allow every person to make it a reflection of themselves.

We can choose to join all the formal recognition programs, sign on every media site, or just make it our habit and daily life in making a difference every day.

We will continue a section of our newsletter to share all YOUR THANK YOUS (submit to union mailbox or to Mary Kelly in Endoscopy)

Please allow me to give to you all my wish.

"If the only prayer you ever say is THANK YOU that will be enough"
Eckhart Tolle

HAPPIEST THANKSGIVING DAY TO YOU AND YOURS FROM LOCAL 5186 LEB!

CELEBRATE THE HOLIDAYS WITH FRIENDS AND FELLOW WORKERS SO DEAR



A PARTY AND BRUNCH
FULL OF GOOD CHEER.

MONDAY DECEMBER 12TH
LIBERTY PRIME STEAKHOUSE
111 MONTGOMERY ST, JERSEY CITY

LOOK FOR A FLYER FOR MORE DETAILS

LOCAL 5186 OFFICERS

President: Nicole Mankowski – ICU 1900-0730 shift nurseniki@optonline.net

Vice President: Mary Kelly -Endoscopy 201-349 5602 rmkells@verizon.net

Treasurer: Nancy Weinstein – Endoscopy 0700-1500 shift 201-424-2125 Nancyw1210@vzw.blackberry.net

Secretary: Rebecca Lowe -ICU 1900-0730 shift

Grievance Chair: Shelley Crowe – 6 Tower 0700-1500 shift.

INFORMATION RESOURCES AND LOCAL 5186 OFFICER LIST

WEBSITE: WWW.HPAE.ORG

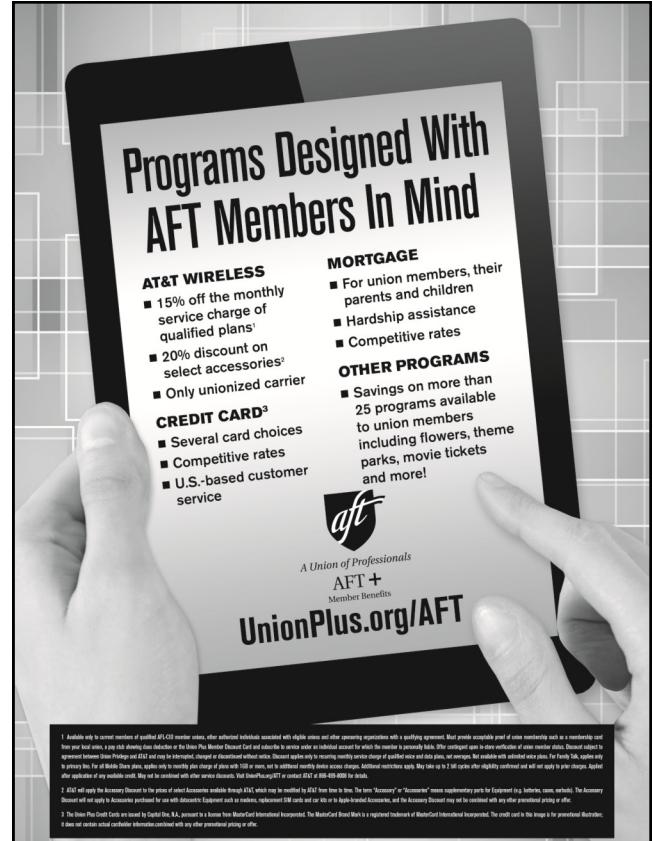
LOCAL 5186 NEWSLETTER: The “Turning Point” is mailed to members and is on the HPAE website, on our local page - <http://www.hpaе.org/local/local-5186/>

HPAE office:

110 Kinderkamack Rd., Emerson, N.J. 07630
(201) 262-5005

Our collective Bargaining Agreement (CBA) has been mailed to each member and there are extra copies in each unit's break room. May also be viewed on HPAE website - - <http://www.hpaе.org/local/local-5186/>

The Union Bulletin Board located outside cafeteria. Unit REPS listed on bulletin board. Communication box is adjacent to the bulletin board.



Please note: You must provide documentation of a previous vaccination or sign a declination by November 30th.

Avoid an administrative suspension.

The date of required mask utilization for those nurses who haven't been vaccinated TBA.