



MESSAGE FROM THE PRESIDENT



We are about a year and a half away from the next round of negotiations. So, what are we hoping to accomplish at the table? During the last negotiations, we were not able to make any strides in staffing and had minimal gains in education. Hospital

management claimed there was no need to solidify better staffing language in the contract because they do a great job at ensuring that staffing levels are appropriate. This was also their rationale for not wanting to address professional development and continuing education. They saw no need to have language in the contract that would ensure that nurses were properly educated to the care of new patient populations and procedures. Nor did they want language that would guarantee each member was approved for continuing education.

Hospital management said that we would be moving forward with a better working relationship and our concerns regarding the aforementioned would be resolved as a result. If you find this to be true, I say let's carry on with business as usual, but if you disagree I ask, what are you willing to do differently? The last round of negotiations were quite difficult to say the least and if we don't do things differently we can expect more of the same. I know that everyone is curious about who will buy Englewood Health or who we will merge with, but we need to be equally concerned about what we will accomplish at negotiations. With that being said it is imperative to know that negotiations are constant (not just at the table) and the results of them are not dependent on the team at the table. Rather, it depends on the membership as a whole. Our power is in our UNIFIED numbers. United we are totally greater than the sum of our parts. The strength of the membership is measured in the times between negotiations. What message are you willing to send?

In Solidarity,
Alice Barden, President Local 5004

Upcoming Events

Thursday, July 18th; **Cafeteria Day** –
6:30A to 6:30P (employee side of the cafeteria)

HPAE Leaders are here all day to answer your questions and/or discuss any issues of concern you have

Wednesday, August 7th; **Membership Meeting** –
Clinton Inn, Dean Drive, Tenafly
7:30A – 1:30P – 4P – 7:30P
Agenda to be announced.

HPAE. Putting care first.



SAVE THE DATE

HPAE 2019 PROFESSIONAL ISSUES CONFERENCE
"Bringing Our Professional Values
into the Transformation of Health Care"

INVITED SPEAKER: First Lady Tammy Murphy

THURSDAY, OCTOBER 10, 2019

8:00 a.m. to 4:30 p.m.

Hilton East Brunswick

3 Tower Center Blvd., East Brunswick, NJ 08816

JOINT NURSING PRACTICE COUNCIL/LOCAL EXECUTIVE BOARD

Two committees that are vital to our local union achieving our goals are the Joint Nursing Practice Council (JNPC) and the Local Executive Board (LEB). The JNPC meets the fourth Monday of every month and is a forum for union and management representatives to address staffing, labor-management, health & safety, and professional development issues. The Local Executive Board (LEB) meets the first Tuesday of every month. The Board is made up of the elected officers and chairs of standing committees: grievance and membership mobilization. Members are encouraged to bring issues and suggestions for resolution to any member of the LEB in order to promote the Local's goals and agenda.

Below are highlights of the May 13, 2019 JNPC Meeting

Health & Safety

Isolation Issues

- Carts – Union requested an evaluation of the contents of the isolation carts
- Patients on contact isolation are being transported without personal protective equipment as well as transporters and staff not wearing protective personal equipment while transporting
- There are no hampers outside of patient rooms – staff carrying dirty linen in hallways to find a hamper

Workplace Violence Training

- Hospital will offer four (4) times a year. Hospital is coordinating additional dates with vendor

Active Shooter Education

- Managers are to arrange education for staff with Dan Dooley, Head of Security.

Labor/Management

Unit Competencies

- Discussion centered on nurses new to units who have not been oriented to certain procedures/processes performed on their units. These nurses have been on units for over a year. The lack of unit competencies makes it difficult to make staff assignments. Union will continue to follow up on this issue.

Schedule for Maintaining Wows – hospital will have to get back to union.

Transport – hospital is aware that vacancies exist, which impacts on the nursing staff

Sign-off Sheets – there will be one sign-off sheet for 1-2 weeks to ensure that the majority of the staff have been educated on the specific task. This should help in determining who has not had the competency.

Professional Development

New Products – there should be a policy and procedure before they are being introduced to staff. Center for Clinical Practice will follow up.

Epic Downtime – staff should be involved in revision of the policy. The hospital is looking into this.

Worklists – staff confused as to documentation. Center for Clinical Practice to follow up.

L&D ACLS Requirements – staff need to have BAC/Critical

Care Course according to Department of Health guidelines. Staff need to be competent in reading cardiac monitors. *Pediatric Unit - PALS/ACLS* is required competency when patients have received moderate sedation. Hospital is not following its own policy. Union will follow-up.

Staffing

Infusion Unit – census has increased to 80-90 patients per day. The union stated staffing is inadequate and asked what the hospital's plan is. Hospital will get back to us.

Mother-Baby Unit – request to change to twelve (12) hour shifts. Mock schedule to be reviewed by hospital.

Local Executive Board (LEB)

June 4th is the next meeting. Topics to be discussed are those outlined above as well as discussing a plan to mobilize membership activism in their union.

Generic Protocols

Are you one of the many nurses who received a threatening letter of facing discipline for not completing your yearly review of Generic Protocols. On some units there are over 40-60 Generic Protocols to be read, which you are responsible for and incorporate into your practice and signed off on. Some of these Generic Protocols don't even pertain to certain areas of practice. Also, how was it communicated to staff that there was a folder on the unit? Where on the unit was it placed? Did staff receive ample time to read, digest, ask questions about the Generic Protocols?

Each nurse is responsible for their own practice – if you have signed off on these Generic Protocols without reading them and don't incorporate into your practice you could face discipline inclusive of serious repercussions of malpractice.

The union has filed a Class Action Grievance. See below under Grievances/Arbitration.

Timelines & Documentation

The collective bargaining agreement contains timelines for submitting requests and/or getting responses back from management. You should be aware of them as well as keep all submission documentation as well as responses from your manager/supervisor. The purpose is, if for some reason you need to file a grievance the documentation you provide will be extremely important in supporting your position at the grievance hearings.

3.03 E. Staff Development Programs; requests to attend educational workshops, conferences, seminars, conventions and/or conferences will be responded to within **10 work days of submission**.

4.09 Personnel Files; access to file upon a **48 hour** written notice to HR.

5.09 *Transfer and Promotion*; manager will interview and respond to applicants within 20 business days following the end of the **14 calendar** day posting period. If applicant is not accepted they will be notified within **10 business** days of decision.

6.04 *Work Schedules*; each schedule shall be posted **at least 2 weeks before** the start of the scheduling period.

8.07 *Vacation Scheduling*; each employee who has submitted a vacation request shall, within **10 days** of said submission, be advised if the request has been granted.
15 *Grievance Adjustment*; the employee or union shall present the grievance **within 10 working days** of the occurrence or the date the employee reasonably should have been aware of the alleged violation.

Grievances/Arbitrations

On May 14th, a hearing was held on the **Class Action Grievance filed on the reorganization of D8/3C** which took place in December 2017.

The hospital moved D8 surgical patients to 3C and on D8 placed overflow surgical patients and medical patients that were previously housed on 2 So. The Union took the position that this was a reorganization based on contract section 5.06 and definition of reorganization which states - ***In the event the Employer intends to reorganize existing patient care services and/or delivery systems on a particular unit....*** The hospital's position was this was one unit, D8/3C, with one staff and there was no change in the patient care services.

After an opening statement by HPAE's attorney, the hospital indicated they wanted to reach a settlement on the issue.

The hospital resolves to:

- uphold 5.06 Reorganization contract language which is inclusive of the process
- recognizes that the changes which occurred in December 2017 were a reorganization under the terms of 5.06 Reorganization
- adhere to contract language 5.06 Reorganization and 5.07 & 5.10 Floating

The Union believes that there will be future reorganizations at the hospital. Resolution of this grievance provides that the collective bargaining agreement is clear on what constitutes a reorganization under similar circumstances.

Special thanks to Sauhad Lahdo-Greff and Linda Campagna for their time in preparing for the hearing as witnesses to support D8 nursing staff. You should thank them, especially Sauhad who volunteered her time that she spent in prepping and attending the hearing. She represented her colleagues admirably.

HPAE Class Action Grievance 6.09 Work Preference

Issue: The hospital employed agency nurses without offering available work time to bargaining unit employees. The contract is clear – Preference for available work time shall be given to bargaining unit employees over nurses supplied from outside agencies.

The union is seeking back pay for all employees effected and declaration of rights. The arbitration hearing is scheduled for July 24th.

HPAE Class Action Grievance, all similarly situated employees

Contract Section 4.08 Discipline

Issue: Management's letters containing threats of discipline which are inappropriately placed in employee's file.

Contract Section 14 Managements Rights

Issue: Failure of administration to abide by hospital's Communications Standards.

Award: Declaration of rights. Removal of notices threatening discipline from employees' file. Re-educate appropriate nursing administrators and nurse managers' on the hospital's Communication Standards and provide the Union with sign off sheets. Establish a policy/procedure/practice for notification to nursing staff of revised protocols and nursing standards with appropriate on-duty time for nurses' to fulfill the requirements.

Cafeteria Day Report from April 25th, 2019.

Seventy (70) members stopped to talk with HPAE Union Leadership. Here were their concerns and the responses given:

Infusion Unit – No breaks. Were told to put in for missed meals and breaks and if not paid correctly to let a union leader know.

Dean 4 – PCA's pulled to watch fall monitors; leaving 2 PCA's for 40 patients. Staff must file unsafe staffing forms and document asking for either more nurses and/or PCA's

Endoscopy – Hospital is hiring staff into eight (8) hour shifts with flex start. These staff members are being asked to stay past the end of their shifts to cover late starting cases and incur overtime. This situation has been discussed with the Endo staff before – if nurses can't stay past their shift and are forced into mandatory overtime, as mandatory overtime is not only a violation of our contract but State Law. You must notify a union officer who will file a grievance and also make a complaint to the Department of Health. Also anytime spent on the unit into the on-call starting time (7P) Endo nurses need to put in for on-call pay.

Cardiac Cath – Assistant Nurse Manager is doing bargaining unit work. Staff in procedure rooms for 3 to 4 hours at a time and are concerned about radiation exposure. Badges are reading normal. There is a Class Action Grievance already in process on Assistant Nurse Managers doing bargaining unit work. Staff should be documenting when Assistant Nurse Manager is performing bargaining unit work. Staff should continue to monitor their badges for safety

Hemodialysis – A nurse spoke with payroll as she believes her retirement match by hospital is not what it was. This nurse was following up with payroll again and was to inform Alice Barden of outcome

Address Service Requested

Aflac is here

Aflac is happy to announce that Health Professionals Allied Employees has decided to start offering benefits directly to Union members.

This is your opportunity to participate in four new offerings through your Local during open enrollment.

We are now offering:

Group Hospital Indemnity Insurance helps pay the out-of-pocket costs associated with a hospital stay.

Group Accident Insurance helps pay costs that arise from covered accidents such as fractures, dislocations and lacerations. This plan includes a wellness benefit.

Group Critical Illness Insurance helps pay the expected and unexpected expenses that arise from diagnosis of a covered critical illness such as cancer (internal or invasive), heart attack, stroke, end-stage renal failure or a limited benefit major organ transplant. This plan includes a health screening benefit.

Group Whole Life Insurance helps provide financial security for your family members. Whole life insurance offers fixed premiums and guaranteed death benefits. The policy builds cash value on a tax-deferred basis.



The Aflac coverage described here is subject to plan limitations, exclusions, definitions, and provisions. For detailed information, please see the plan brochures, as this material is intended to provide general summaries of the coverage. These overviews are subject to the terms, conditions, and limitations of the plans. Continental American Insurance Company (CAIC), a proud member of the Aflac family of insurers, is a wholly-owned subsidiary of Aflac Incorporated and underwrites group coverage. CAIC is not licensed to solicit business in New York, Guam, Puerto Rico, or the Virgin Islands.