



## Presidents Message

By the time you read this, we will have had our July General Membership Meeting. The meeting was dedicated to rallying our members and to get more support as we gear up for our next Union contract negotiations. Our membership involvement is critical so the hospital administration sees that we are united and will do what it takes to win what we deserve.

It has been a terribly busy six months and we really did not have much of a recovery time after the initial COVID surge. The patients are just getting sicker and require more care. Nurses are difficult to find, as they are in all hospitals. The hospital is now using a recruiting company to draw nurses and streamline the hiring process. Through it all we need to stand strong and support each other in solidarity.

We hope the new weekly communication on our Facebook page is helping you stay informed of issues and new things going on with the Union and the hospital. If there are new managers, flow managers, ACD's and you know they are on Facebook please email someone on the Executive Board so they can be removed.

As always, we are looking for new Union Executive Board Members, Local Union Reps, and committee members. You are paid for some of the things but can definitely use all of them for Professional Ladder Points.

As always, we hope you are having a great summer. Stay Safe.

In Solidarity  
**Doris Bell**  
President Local 5118



## My Day as a RN at Willingboro GI Clinic

At 5 am my phone alarm goes off as a soft melody of music echoes through my bedroom reminding me it is time to start my day. Many times, I force myself to get up as I am often exhausted from the prior day.

Our department has been terribly busy over the last couple of days, and my body is starting to feel the effects.

6 am, I am out the door preparing for my 45 min drive-in. This is when I am relaxing and mentally preparing myself as I listen to the radio singing and enjoy the sights.

From the minute I enter the building I am in "Go Mode" Today is another busy day. We have sixteen procedures to complete in 8 hours.

My role today is "charge nurse" and I am working, as the pre-op nurse. Being the first to arrive, means preparing the rooms and getting the unit patient ready (making staff assignments, IV bag prepping, code cart check, validating temp logs, and retrieving phone messages just to name a few.

Our doors open at 7 am sharp and the first patient is ready to be seen. A courteous introduction and pleasant tone set the stage for a wonderful experience. "Good morning, "my name is Tina, and I am going to be your pre-op nurse today. We are going to take good care of you." A statement I believe to be necessary, many of our patients are undergoing either an EGD, colonoscopy, or combination for the first time. Fear of the unknown, anxiety, pain, hunger, or nausea from the prep is all complaints; and are many times evident. An explanation of what to expect mixed with kind words and a smile does wonders for my patients.

Each patient receives a warm blanket-giving them a spa-like sensation has been a comforting treat and a great way to help them relax we have been told repeatedly.

A quick patient assessment, a few pre-op questions, a set of pre-procedural vital signs, NPO validation, IV insertion, and lastly, my favorite question - "how did your prep go last night" creates the communication dialog. Patients respond by saying, it was good, not bad, I could not finish it, or I threw most of it up." I have heard it all. "No worries; I am sure you did well, the hard part is over. We will take it from here." Try and relax. We will take good care of you. As I pause with a smile.

Then I hear them, take a deep breath, and exhale a sigh of relief. Before I leave, I ask, "Do you need anything?"

"No, I am fine. Thank you. Lights off, curtains drawn, privacy provided as I slowly walk away. First case is ready - twelve more to go!

From door to procedure ready status is a thirty-minute process.

I love my job and what I do. I have been working in GI for over ten years. My unit is small, our patients are great, and my job is rewarding.

Just ask our patients !! Press Gainey scores 99%.

Go Willingboro !!!

Thanks, **Tina**

## Union and Hospital Joint Committees

In our Union contract we have negotiated language that mandates that the Union and the hospital create specific joint committees. Both parties have input into what the committee is going to focus on. Our Voices are heard!

Below is a description of each committee, the number of committee members permitted and how often each committee meets.

We are paid to be on a committee and Professional Ladder points are given.

### Joint Health and Safety Committee

- ♥ HPAA 4 RNs Hospital 4 Representatives
- ♥ Meets quarterly
- ♥ Compensation. If you are not scheduled to work the day of the meeting, you will be paid your hourly rate to attend the meeting.
- ♥ Professional Ladder points are available.

**Objective.** Maintain a safe and healthy workplace free of hazards and conform to OSHA and Health and Safety Laws.

Walk through inspections: To be done with designated hospital person to improve the safety in the workplace. The committee will meet to discuss any findings and develop an action plan.

### Staffing Committee

- ♥ HPAA 5 RNs Hospital 5 Representatives
- ♥ Meets every other month
- ♥ Compensation. You are paid to attend the meetings if you are scheduled to work the day of the meeting or if you are off.

**Objective.** Safe staffing.

#### Committee Members

- ✓ Make recommendations on nursing and ancillary staff and skill mixes on units.
- ✓ Discuss the implementation of an acuity system.
- ✓ Review patient satisfaction and hospital functioning.
- ✓ Review floating and assignment guidelines.
- ✓ Review unit issues that interfere with quality patient care.
- ✓ Review staff orientation programs and recommend changes. Also review the preceptor program. Review and discuss recruitment and retention programs, exit interview aggregate data, agency use and RN overtime use.

### Safe Patient Handling Committee

- ♥ HPAA 6 RNs Hospital 6 Representatives
- ♥ Meets quarterly. Third Wednesday of the month.
- ♥ Compensation. You will be paid to attend the meetings.
- ♥ Professional Ladder points are available.

**Objective.** This committee ensures the safety of the nurse by making sure that we have the proper lifting equipment needed to care for the patient. It ensures that CUH adheres to the law and state requirements.

### Violence Prevention Committee

- ♥ HPAA 6 RNs Hospital 6 Representatives
- ♥ Meets quarterly. 2022 August 4th & October 27th
- ♥ Compensation. You will be paid to attend the meetings.
- ♥ Professional Ladder points are available.

**Objective.** This committee tracks the violent events in the hospital by unit, day of the week and time. It documents visitor violence. The group also makes sure that there is training to better handle the violent patient and looks at the safety of the hospital and the campus.

### Blood Borne Pathogen Committee

- ♥ HPAA 6 RNs Hospital 6 Representatives
- ♥ Meets quarterly. 2022 September 21st & December 21st
- ♥ Compensation. You will be paid to attend the meetings.
- ♥ Professional Ladder points are available.

**Objective.** The committee meets to track employee injuries - needle sticks, fluid splashes, etc. They also review new products for clinical use such as safety needles. They review any reports of injury reported by staff and develop an action plan.

If you are interested in being on one of the committees, please contact Doris Bell, President at [dbell-hpae@comcast.net](mailto:dbell-hpae@comcast.net)



## Know Our Union Contract

Recently a lot of unit managers are mandating unit meetings and/or mandatory education. Management does have the right to do this. If you know you will have an issue with attending, please contact your CD or ACD as soon as possible to arrange something with them. When we are mandated to participate in anything scheduled by management, we are **PAID** for attending.

Cooper is now using an outside third-party company to recruit for open positions. They tell us this will help to expedite the turnaround time. Internal transfers are to still follow our contract. Information pertaining to transfers can be found in Article 15 - Seniority, Layoff, Recall, and Job Posting.

With agency in house and the incentive still in place, please remain familiar with floating and the low census language in our Union contract. Incentive shifts picked up through staffing are reassigned per needs by staffing as per the incentive language. Articles 11.3 Reassignment & Article 11.6 Low Census in our Contract is used in conjunction with our Incentive Agreement.

Seniority has been brought up recently by new members. You have 3 Seniorities - Cooper Hire Date, Bargaining Unit date and Bargaining Unit date. Bargaining Unit Seniority which is when you became a member of the Bargaining Union as a nurse (not necessarily when you started at CUH, example being a tech before becoming a nurse). Union Bargaining Seniority is used for vacation selections. Bargaining Unit Seniority is your seniority on your current unit. Bargaining Unit Seniority is used for Holiday low census call offs. Please review Article 15.2 - Applications of Seniority for more information.

**Union Contract Article 15.12.** A bargaining unit (Union) employee who has internally transferred to another bargaining Unit may within 60 days of such transfer, return to their previous position if it is available.

**Union Contract Article 15.1 #3.** A Bargaining Unit employee who transfers to a position outside of the Bargaining Union may within 90 days of such transfer, return to their previous Bargaining Union position if it available.

## Union Contract

- **Article 15.8 Job Posting.** The hospital is required to post a new open position internally for a minimum of 5 days. The language does not say that the nurse must be interviewed or apply within that 5-day period. This was done so nurses on vacation, etc., would have time and the opportunity to apply and/or be interviewed. As long as the job is posted, it is considered open and can be bid on.
- **ADO FORMS.** Knowing the difference between filling out an ADO vs filing a grievance is important. ADO (Assignment Despite Objection form) is found in the Union binders on your floors. If you feel your assignment is not safe, or in dispute, please notify a manager, fill out the form and place in a union mailbox. These forms are collected by Officers and stamped in with the staffing office. From there, a copy is sent to the manager of the area, issue investigated, and a response sent to the union by 10 business days. If you feel the issue may be a grievance (violation of contractual language) please notify a union rep or officer. There is a 10-day timeline to file grievances, and precious time will be loss if it is sitting in a mailbox. Contact a union rep if there is ever a question.
- **Article 27.1 Resignations.** All Union nurses has to give 4 full work weeks' notice to receive PTO payout. No PTO/PTU can be taken during the 4 weeks. If you are mandated off, you will still receive your payout. Working at Cooper for 1 full year is required. This language also applies for ESL payout if nurse qualifies.
- **Article 23.3 Wages & Salaries.** This language discusses what step on the wage step scale you will be placed, based on your years of experience. The contract language defines experience as "full time acute care hospital for inpatient nurses, or relevant experience for ambulatory nurses." If you question your experience level, please contact Human Resources, and let a Union Rep know.
- When **Employee Health** tells you to stay home, we have to use our PTO for that time. It is not counted as a PTU for means of discipline. If you are Pool or Baylor, it will be coded as PTU, but not counted as a call out for discipline purposes. When cleared by Employee Health to return, if nurse does not return, it than becomes PTU. Be sure and check Lawson for correct coding. Contact your manager first if a question, then let a union rep know if you need assistance.

## Grievance Corner

For those of you that don't know me, my name is Ann McCausland and I am the Grievance Chair for our local. I have worked in the NICU at Cooper for 36 ½ years became active in our union shortly after we organized at Cooper; as a Rep, as a member of the negotiating committee, as the Vice President/ Grievance Chair (in the past and again now) and a work area leader. I am very passionate about our rights as members of a union because I have experienced life as an RN before the union and after the union was voted in at Cooper. I encourage all members to become involved and understand the inner workings of our Local and the hard work that goes into building and sustaining a strong union.

My responsibility as the Grievance Chair is to ensure that our contract is not being violated, that you have fair representation when facing an investigation and/ or discipline, to give you a voice if you feel you have been unfairly disciplined and to guide and educate our Local union representatives. Our Local has a strong group of union reps, but we are always looking for more members that are interested in becoming reps. We have a great need for Med Surg Reps- you know your areas and can represent the RN's the best.

Moving forward, the purpose of the Grievance Corner in our newsletter will be to keep you informed of recent grievances, make you aware of some common disciplines that are being given and to review one or two Articles of our Union contract. Everyone should know their contract and know your rights in the contract.

Please feel free to contact me with any questions and/or concerns.

In Solidarity,  
**Ann McCausland**, Grievance Chair