



Message from the President

Staffing is critically short at Memorial. Never have we seen Unsafe Staffing Forms submitted in such enormous numbers. Instead of 30-40 for the hospital, we now have 130+ every month from all areas. Specialty areas, like OR, Endo and PACU, traditionally well-staffed, are now just as understaffed as med-surg and critical care. ED is the worst we've ever seen it. Not only does short staffing impact our working conditions, but it can make for a very unpleasant experience for a patient. Let's follow the experience of "Harry" in his first full day at Virtua Memorial:

Harry walks into our ED with sudden abdominal pain. Harry doesn't know this but our ED is chronically short at least one nurse (most of the time, more) and 1 or 2 techs almost every shift. He doesn't know that the rest of the hospital is short staffed as well. Harry sits and waits for 4 hours to be seen. Harry is annoyed at having to wait so long, but he sits patiently and waits even though he has pain. Finally, Harry is escorted into the ED only to realize he's now sitting in the hallway on a stretcher. He sees people walking by him taking care of other patients. The ED seems chaotic. Staff are rushing by him in a hurry and patients are piled on top of one another in the halls. Finally, his nurse introduces himself and takes his vital signs and his history and does some blood work. Harry needs something for pain but waits another half hour to get it. He waits a few more hours to go to CAT scan and back. Unfortunately, there is no tech to take him to CAT scan and his nurse is busy with a patient that has been brought in in cardiac arrest.

He perceives that people are ignoring him because he is not as sick as others. He also believes that's why he is on the stretcher in the hallway. At one point, a screaming, obviously intoxicated patient consumes the attention of several staff. Finally, a different nurse—helping out her coworker-- wheels him to his test. Then, he waits two more hours to be told his diagnosis of colitis by a physician, who says he will be admitted for IV antibiotics. Unfortunately, there are no beds available on the units. So Harry waits longer. He's irritable, as it has been nearly 8 hours since he walked into the ED. His pain med has worn off and he needs more but he can see his nurse down the hallway in another room working with another patient. He is then told he will be moved into the "Hold" area to wait for a bed in the hospital to become available.

There, he encounters a nice, but obviously very busy nurse trying to admit 3 other patients, who can't attend to him right away. So he waits longer to talk to her. Finally, after an hour, she is free to look at his orders, talk to him and bring him something for pain. He spends the night on a stretcher in this hold area trying to rest. It's difficult and uncomfortable.

The next morning, Harry is rolled up to a bed on the unit. Harry sees no one as he is being wheeled by the nurse's station. He wonders if there are nurses that work on this unit. He gets to his room and waits for the nurse. Again, he is not privy to this information, but she has 5 other patients and is working with them and, since there is only one tech on the floor, she also has to do many of the tasks that a tech would do. She's busy answering call lights, filling water pitchers, putting people on bedpans and setting patients up to eat breakfast, while also doing assessments, treatments and giving meds. Harry thinks "Here we go again! These people are ignoring me too." When his nurse is finally able to come and talk to him, Harry is angry.

In Harry's mind, he has been ignored. He does not understand why he is constantly waiting for someone to attend to his needs.

He does not care, at this point, that Virtua has failed to staff properly. He doesn't care that a nurse is busy. He doesn't want to know why the nurse is always busy or the tech can't answer his call bell in a timely manner; he just wants someone to come when he needs them. He snaps at staff, then asks to speak to "someone in charge." Patient Relations is called and service recovery is initiated.

Are there also numerous patients who leave without being seen in the ED because the wait times are so long? How much revenue is lost in this scenario? And what about the reputation of the facility as a whole? Without proper staffing, patient satisfaction scores will continue to be low.

Virtua insists nurses always say "I have the time for you..." but do we? Of course not! We want to take care of our patients. We want them to be happy with us. We do not want to always be too busy to give them immediate attention but **the same company that insists we say that we "always have the time" does not staff us so that we CAN have the time.** Patients are not stupid. They see that we are busy—and most of them tell us just that. The millions of dollars spent on hiring a company to pitch a Credo to us—(twice!)—could have been put into staffing dollars. THAT is where it was and is needed most. Virtua, stop spending money on useless information and spend money where it counts-- hire more staff!

Deb White, Local 5105 President

To Err is Human?

Have you read the article in the **VIRTUA NURSE**? It should have come in the mail. We found the front page article troubling and frankly, untrue. According to the author, Virtua promotes "a culture of safety"-- something we've written about here more than once. The author says Virtua is a non-punitive culture where one should never be afraid to report an error. She claims:

"In my tenure as a nurse executive, I can count on one hand how many nurses have been fired due to [one] error."

Well, all I can say is that this author must have many fingers on that one hand! Does Virtua realize that nurses are not fooled by this rhetoric? We work here! We know that this work environment is the furthest thing from a culture of safety! Virtua is a culture of blame. Ask any nurse if they feel comfortable reporting their mistakes and they will respond with a resounding "no."

In the last year alone we saw two nurses fired for making one error (each). Both have upcoming arbitrations. If we did not have a union, these poor nurses would not stand a chance. Both had perfect practice records and one had 20+ years at Virtua as a nurse. One spent hours trying to rectify her mistake and Virtua still claims she tried to "cover it up". We are still mulling that statement over. In both cases incident reports were filed. Both nurses were very up front and honest and both were still fired. Is this a culture where we can feel safe reporting our mistakes? I think not.

Ultimately, Virtua feels that they are the best judge of character. They claim to be a "Just Culture" and a "culture of safety" but we find that their words and practice are inconsistent. Virtua administration believes that if they believe you are a bad nurse, then it must be so. Apparently they don't make mistakes.

Negotiations and YOU: Understanding the process

We are embarking on another round of negotiations to win a successful contract for all nurses. Our contract is usually negotiated every 3 years. As of May 31, 2017 our current contract will expire.

A good contract does not just happen-- a lot of hard work, time and coordination occur. Roles are defined and a negotiating committee and a Contract Action team are formed. Each role is vital to negotiate the contract. Here are the key players in our negotiations.

The Negotiating Committee: The formal committee that sits at the table to negotiated with the employer.

The Contract Action Team: The group of members who have agreed to be the liaison between the negotiating committee and members. They help to mobilize members for passing out flyers and other concerted activity when necessary.

Lead Negotiator Fred DeLuca: He is HPAE Director of Member Representation and has led our local in negotiations for the past 18 years.

President Debbie White: Reviews proposal ideas suggested by members and creates proposals working closely with Fred. Deb has to ensure the proposals are carefully thought out and can be justified to the employer. Co-leads negotiations with Fred.

Grievance Chair Sheryl Mount: Sits in the negotiating committee as the resource person with knowledge of current and all previous grievances, helping to formulate and defend proposals based on identified issues.

Secretary/ Treasurer Beth Cohen: As secretary, Beth will be busy typing and taking accurate notes, including any revisions to proposals, counter proposals, tentative agreements throughout the negotiation process

Vice President, Lead CAT Lorraine Thone. Lorraine will need everyone's help. I am in charge of the Contact Action Team and all reps in the hospital. They will then contact all members, passing information down to each member as quickly as possible.

Contract Action Team Responsibilities: Over the years, we have asked for phone trees, but this year we have asked that reps for each unit have the unit staff's cell phone numbers for quick texting or calling. Information from the negotiations table will be delivered to each rep and Contract Action Team member, who then will pass the information down to their assigned areas and units, ensuring that each nurse is notified of this information.

We may decide to leaflet on any given day so direct contact with members is highly important. Reps, CAT and all nurses must be vigilant and prepared to act during negotiations. A lot will be occurring and WE need active and engaged nurses! FLYERS SHOULD BE ON LOCKERS! LET US KNOW IF YOUR MANAGEMENT TEAMS REMOVES FLYERS.

Negotiation Information will be shared via text, leaflets, emails, HPAE website, word of mouth, and Facebook page: Memorial RNs HPAE, and Robo calls from Deb White.

Remember, we have a voice together. We act together with one voice. We show our strength in our collective action.

Any questions? Or willing to help, please contact me: (856)-296-2360

Lorraine Thone, Local 5105 VP/Hospital & Contract Action Team Leader

HPAE 2017 Contract Action Team/ REPs

CNS/ Home Care - Tracey Titus, Molly Kirkpatrick, Kelli Zambetti

Health Promotion- Barb Damush
Cardiac Rehab- Laura Barry

ED - Pete Latini

Med Surg Per Diem/Float: Patti Travaglio; Deborah Jacobs- Barbour; Meg McManus

4NE/4NW- Helen Crawford, Valerie Ferrara- Capobianco, Kathleen Bridgewater

3NE - Megan Kennedy & Annette Cieri

5 Stokes - Nicole Coppola & Susan Anderson

7 Stokes - Rosemary Mishra & La Condia Catlett-Sundiata

OR - Marikay McMullen, Deanna Walls & DeeDee Baggetts

PACU - Joan Johnson & Kathleen Tidwell

Endo - Kathy Ronca & Barb Curley

Cath lab - Bonnie Terwilliger

ICU - Carol Smith, Karen Hardy, Pam Schuren & Robyn Gowdy

2N - Maureen Bensinger, Michelle Wilbert, Jennifer Orengo & Peg Cliver

SCN - Lora Carberry, Donna O'Brien, Deb Henry

L & D - Ellen Pellegrino & Dawn Jones

MBU - Cathy Coulter, Pam Denniston, JoAnn Repici & Tiffany Nelson

MASC - Kathy Stewart & Cindy Stepp

SDS/PAT— Priscilla Searfross, Scott Sedlock & Kris Johnson

Radiology - Carol Hugg & Robin Zurcher

Our Negotiating team members are: Deb White, Sheryl Mount, Lorraine Thone, Beth Cohen, Molly Kirkpatrick, Kelli Zambetti, Pete Latini, Karen Hardy, Dawn Jones, JoAnn Repici & Marikay McMullen.

Negotiations Proposals

***Staffing** is the #1 issue. ED, Med-Surg, Critical Care, OR, PACU, Endo-Cysto, Same Day, L&D—Every area working short-staffed. We have many proposals to both increase staffing and hold Virtua accountable. Virtua leaves positions vacant for months, sometimes years. Virtua would rather invest money into the Ritz Carlton and tell nurses to pretend to always “have the time”.

***Benefits for seniority** including holiday commitment and reassignment. We will propose increased and new benefits for nurses who remain at Memorial.

***Clinical Grouping** language proposed will limit reassignment areas. We feel nurses working in specialty areas should be taking care of specialty patients. Virtua has routinely used, for instance, MBU nurses to care for Special Care nursery babies rather than hire into vacant positions. (a recurring theme)

***Clinical Ladder.** Virtua has instituted a Clinical Ladder program (PDAP) on the other side of Virtua that is so difficult and time consuming that only 3% of their nurses have achieved anything in the past few years. We will have our own proposal that allows our nurses input into the Clinical Ladder.

***Committees.** Since Virtua wants a Clinical Ladder that mandates nurses to sit on committees, they should be releasing nurses to attend the meetings. Virtua is selective about releasing staff to attend committee meetings.

***PTO** Virtua short-staffs all units, leaves positions vacant, then denies PTO based on leaving the unit “critically short”. We want this to stop. We are entitled to use our PTO.

***Wages** We are proposing increases in multiple areas, including wages, education, 401K and retirement.

***Worker Safety** We are negotiating for protections for members with safe lifting and vaccination reactions

CNS UPDATE

Negotiations are starting in March. We still need data on how long recerts, consents, and discharges are taking. No names, just how long in the home and how long documenting afterwards. We will need some of you to come and speak to these issues: how long to do SHP, On Call visits: emergent or visits pushed from the day, RVE1 for 65 miles, and all Per Diem nurses be able to be paid hourly.

We need your input and support to get any changes made. Please let us know if you are willing to come to speak to these issues at negotiations. We will be texting for urgent help: leafleting and speaking at negotiations, and also emailing updates.

Your input is critical for our success at negotiations and a good contract.

Contact any of us for information:

Molly Kirkpatrick VP: 609-790-9197

Kelli Zambetti Grievance Chair: 856-359-6610

HCC: Tracey Titus

Intake: Renee Patel

Health Promotions: Barb Damush

Molly Kirkpatrick VP CNS Local 5105

facebook.com/hpaearf 

Phone: 201-262-5005

Emerson, NJ 07630
110 Kinderkamack Road

 A Newsletter for the
Members of hpaearf

Address Service Requested

Upcoming Events

Membership Meetings

April 27
May 16

Negotiation dates

March 15
APRIL 19, 24
May 1, 5, 11, 15, 17, 22, 23, 24, 30, 31

ALL ARE WELCOME TO
COME TO NEGOTIATIONS!

Please just give us 24 hours
notice!



MORTGAGE

The Union Plus mortgage
program makes buying or
refinancing a home easy for
you and your children.



CAR RENTAL

Up to 25% discount on
car rental deals with
Avis, Budget, Hertz, Dollar,
Thrifty & Payless.

Four Ways to Save



AT&T WIRELESS

The only national unionized
wireless provider. 15% savings for
union members on the monthly
service charge of qualified plans.*



CREDIT CARD

Several credit card choices,** all with
competitive rates and U.S.-based
customer service, designed to meet
the needs of union members.

*Available only to current members of qualified AFL-CIO member unions, other authorized individuals associated with eligible unions and other sponsoring organizations with a qualifying agreement. Must provide acceptable proof of union membership such as a membership card from your local union, a pay stub showing dues deduction or the Union Plus Member Discount Card and subscribe to service under an individual account for which the member is personally liable. Offer contingent upon in-store verification of union member status. Discount subject to agreement between Union Privilege and AT&T and may be interrupted, changed or discontinued without notice. Discount applies only to recurring monthly service charge of qualified voice and data plans, not overages. Not available with unlimited voice plans. For Family Talk, applies only to primary line. For all Mobile Share plans, applies only to monthly plan charge of plans with 1GB or more, not to additional monthly device access charges. Additional restrictions apply. May take up to 2 bill cycles after eligibility confirmed and will not apply to prior charges. Applied after application of any available credit. May not be combined with other service discounts. Visit UnionPlus.org/ATT or contact AT&T at 866-499-8008 for details.

**Certain restrictions, limitations, and qualifications apply to these grants. Additional information and eligibility criteria can be obtained at UnionPlus.org/Assistance. Credit approval required. Terms and conditions apply. The Union Plus Credit Cards are issued by Capital One, N.A., pursuant to a license from MasterCard International Incorporated. Capital One N.A. is not responsible for the contents of this message and/or any other third party products/services mentioned. The MasterCard Brand Mark is a registered trademark of MasterCard International Incorporated.

Visit unionplus.org/aftbenefits

