



# HPAE

## LOCAL 5105 Newsletter

THE PATIENT ADVOCATE  
A NEWSLETTER FOR THE MEMBERS  
OF HPAE LOCAL 5105 AT VIRTUA  
MEMORIAL/CNS

THE PATIENT ADVOCATE

March 2018

### Message from the President

#### A BONUS? GIVE US BETTER STAFFING!

So we're getting (or we actually got by the time of this reading) a bonus? How is it possible that an employer that came to us only a few months ago crying poor suddenly has the money for this bonus?

Virtua has always been a very wealthy corporation. In fact, they probably produce some of the higher profits of all South Jersey Healthcare systems. But, according to them, they've been in "dire straits" lately and had to cut corners. Of course, it's always on our backs that money is saved.

We saw layoffs and closures. Center for Women, a longstanding facility in our community that meets the needs of the indigent population closed suddenly. Several of our members lost their jobs and are still unemployed. We bargained over these layoffs as we always do.

We also saw the 25 year free lunch discontinued. The Employer claims the program costed them \$500,000/year but we know that this is simply the money they could have made if it they had charged us for the food. Wonder what it really costed them in supplies. We doubt it was that significant an amount. We think this action is merely a blatant reflection of how this administration regards employees, and especially our most senior and dedicated members.

We also saw an enormous increase in cafeteria prices and a decrease in hours. ( For those on night shift, Virtua offers very little in the way of food.) For those on day shift, prices have sky rocketed. Some items have increased by up to 90%. Not only does it affect us, but it affects visitors. They now go out to Wawa to eat. We filed a demand to bargain and a grievance.

And lets not forget prescription benefits. We are still in the process of gathering data for this in order to grieve the increases. But by far, the worst action taken has been to cut staffing. Less ancillary help = more work for nurses and burned out staff all around. Hiring freezes produced some of the worst staffing we've seen in a long time. Positions were vacated and employees never replaced. Short staffing forms hit an all time high. We see it as a race to the bottom. How short staffed can we run? In other words, Virtua wants to see just how much "bang they can get for their buck."

We already know that managers receive incentive pay to keep budgets lower by cutting staff. To make matters worse, some staff are told never to tell patients that we are short staffed. As an aside, patients are not fooled. They see how busy staff is and tell us so. They also see that they can't get their needs met in a timely manner. Virtua wants us to lie to patients? We wonder, how can this be ethical? It certainly is not good patient care! We're not sure why they suddenly have money at this point. Is it because Virtua believes we'll get Magnet status if they give a little pat on the back? Maybe they are worried because our petition was "so mean." We are not sure. We know a bonus will not fix anything.

So Virtua: We're not going to turn down your bonus. But why not give us what we really need—BETTER STAFFING. We don't need a bandaid, we need the problem fixed. As one of our members said: *"Thankful for the bonus but honestly, I'd rather have better staffing.."*

I think we all feel this way.

Debbie White, President

## Online Unsafe Staffing Forms

In our last contract negotiations, side letter language for Electronic Unsafe Staffing Form was gained. It States-*"The Employer and the Union agree to develop an electronic Unsafe Staffing Form which will be accessible to bargaining unit members. The parties shall work together to develop this form and anticipate that it will be implemented no later than October 31, 2017."*

A new unsafe staffing form has been developed. The form will go live Tuesday April 10, 2018. The electronic form is very similar to the original paper form.

### Here are the steps to access the electronic unsafe staffing form:

1. Go to the VINE
2. Click on Software Links
3. Scroll down to HPAE-Unsafe Staffing Situation Form
4. Complete Form
5. Submit Form

### How to complete electronic Unsafe Staffing Situation Form:

- Fill in all the blanks
- Hard stops- Must be completed prior to submission: UNIT, DATE, SHIFT, SUPERVISOR/MGMT NOTIFIED.
- DESCRIPTION block- unlimited free text
- No timeframe to complete or submit form, but prefer that it be completed as soon as possible.
- Only nurses can open the electronic form on the VINE and submit names on the form.
- Also, only nurses that have given permission are to have their names typed in the NAMES block
- Form can't be left open indefinitely because browser will log you out.
- Can complete a 2<sup>nd</sup> form if necessary. (logged out, changes occurred in shift, etc.)
- Submitted forms go to union first, then forwarded to managers and administration.

\*\*\*Remember- If your unit is short staffed or feel unsafe- **FILL OUT THE ELECTRONIC UNSAFE STAFFING SITUATION FORM!**\*\*\*

Lorraine Thone, VP Local 5105

## New Nurse Council

**Chair Person for New Nurses Council: KIM SEASHOLTZ (5STOKES)**

**Email-kseasholtz1764@gmail.com or cell/text 609-864-0528**

We are excited to announce the introduction of a New Nurses Council within our local nurses 'union! The council is intended for new nurses, generally millennials' that have been nurses for less than 5 years. We encourage all new nurses to join.

- The New Nurse Council provides new nurses an opportunity to:
- Understand what being a new union nurse is
- Understand the roles within our Local Executive Board and committees
- Receive support from one another and especially from seasoned nurses
- Advocate for nursing
- Join our Facebook page- Memorial RNs (HPAE)
- Updates about what is occurring within the hospital that directly impact nurses
- Dinners, gatherings as New Nurses
- Education about our contract and how it affects all nurses
- Opportunity to get involved in our union, events, etc.
- Learn how to protect your nursing license
- New nurses should contact Kim to join the New Nurses Council group

We will be scheduling a meeting in the near future.

## Supporting the Newbie

There are a lot of new faces at Memorial lately. We have held many orientations for many brand-new nurses and nurses who have experience but are transitioning to new roles. How can we support them when faced with ongoing issues such as inadequate staffing, higher patient acuity and increased responsibilities? How do we teach them to be proactive, protect their license and put their safety first when under the pressure of a new job and wanting to make a good impression?

By being supportive, of course! By having their backs! We have to treat one another with kindness and respect! Think about how you wish people would have treated you and that's exactly how we should treat one another. Don't report one another. If you have an issue with another nurse, go to that nurse and work it out. New nurses and new-to -practice nurses don't know the ropes and they don't know what they don't know. Don't

tear down. All that does it make an orientee even more fearful and likely to make a mistake. They will learn quickly who not to trust, that is certain. If you want to have people trust you, be honest and tactful. Be trustworthy. You'll be respected. Don't reprimand out at the nurse's station or where everyone can listen in. Try to be encouraging. When a patient is going bad and that newbie is the only person available, well, you may need that person one day too.

Try to remember that once, not too long ago, you were new too.

Beth Cohen (ER)  
Secretary – Treasurer  
[tokidsbeth@aol.com](mailto:tokidsbeth@aol.com)  
cell 856 296 6439  
Join our Facebook page @ Memorial RNs (HPAE) to check out the latest announcements, find coverage, or voice your concerns and questions  
Website [www.HPAE.org](http://www.HPAE.org) Local 5105

## Grievance UPDATE 2018: Summer and Critical PTO

Summer PTO and Critical PTO should have been returned on February 7<sup>th</sup>. I have heard from several members that their critical and/or summer PTO has been denied unreasonably and a Class Action PTO grievance has been submitted. Some may not fully understand the contract language surrounding **critical PTO** and **summer PTO**. In Article 9 it states that all summer and critical PTO request must be submitted by January 7 of each year. Summer PTO request are for the peak vacation period from June 15<sup>th</sup> through the Sunday after Labor Day. One can submit their 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choices of vacation periods but choices cannot exceed the cumulative total of schedule hours per pay period or a max of 2 calendar weeks. Remember—a week is whatever 7 days you want them to be. They do not have to fit into the employer's ideal of Sunday to Saturday. Critical PTO request are for any time during that year that one absolutely needs time off for the wedding or special family cruise!! BUT—remember if you submit a critical PTO request the total of critical PTO and summer PTO together or separately cannot exceed the total of scheduled hours in a pay period. Example—if you request 2 weeks off in November you cannot submit a summer PTO request at this time. If time is still available, you can still submit PTO for the summer vacation period as per the process flow chart.

Summer and Critical PTO are granted by seniority and every nurse that requested summer PTO should be granted at least one week. Contract language states that every unit should have a calendar posted the first week in January so employees can plot out and view each other purposed peak vacation requests. This really helps less senior employee view what weeks are open and prevents employees submitting duplicate requests.

Denied PTO requests submitted during the process flow have been an ongoing issue especially on certain units. Numerous grievances have been filed relate to the fact that managers are ignoring important contract language. **Managers are required be contract to write the reason for denial on the PTO request.** A reasonable denial would be that a more senior employee has been granted the same day and shift off. Frequently managers are unreasonably denying PTO because if they allowed one nurse off it would put them below core staffing. **The contract also states that the employer shall make ever reasonable effort to grant PTO requests and these reasonable efforts shall include, but are not limited to, pre-scheduling per diems and posting requested shifts early on bidshift.** This is what managers are not making the effort to do prior to taking the easy road and just denying the PTO. It is important for every member to uphold this language and challenge managers who are unreasonably denying PTO and not making the effort to allow employees their earned PTO benefit. Any questions regarding this language or any grievance inquires please feel free to contact me!

Solidarity,  
Sheryl Mount Grievance Chair

## HOMECARE CORNER: SPEAK UP!

1: **Meeting with Management:** If asked to meet with your manager and your gut feeling thinks it could be trouble, ALWAYS ASK IF THE MEETING IS DISCIPLINARY OR COULD LEAD TO DISCIPLINE. If the answer is "yes" or "maybe" or "I'm not sure" ALWAYS ask to have a union rep accompany you to the meeting. Call Molly or Kelli.

2: **Safety:** if you have an uncomfortable visit for any reason, always talk to your manager to protect the next nurse visiting and to evaluate the safety of visiting that patient in the future.

3: **Scheduling:** EPIC may cause some confusion with having patients in 2 different programs, if it takes longer than 1 1/2 - 2 hours to get your schedule ready in the morning, ask your manager to cut back to 4 to 5 patients. Remember AVAILABLE VISIT TIME does NOT include computer issues, resyncing, meetings, case management time, scheduling issues or EPIC help. Our patient assignments always decrease with the increase in these things.

Please refer to the contract page 13: article 5.6: "For 8 hour visiting staff, the recommended patient assignment shall be 5-6 patients in 8 hours of AVAILABLE VISIT TIME".

Always tell the manager if it will take longer to chart on an EPIC patient in the first few weeks your assignment must be reduced accordingly.

As a recommendation, try to see the EPIC patient first, so you can call the office after you leave the visit. Let the manager know how long the visit took. If the visit takes too long, you may need 1 or 2 patients pushed to the following day. Always talk to a MANAGER and not the SCHEDULER!

And of course call Kelli or Molly, if it is not changed.

Molly [609-790-9197](tel:609-790-9197)

Kelli [856-359-6610](tel:856-359-6610)


## Save the Date

- April 25 & 26 Nurses Take DC for Nurse: Patient Ratios Now Save the date more details to follow
- HPAE Convention—October



A Newsletter for the members of HPAE  
Local 5105 at Virtua Memorial/CNS

110 Kinderkamack Road  
Emerson, NJ 07630  
Phone: 201-262-5005

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**ANNUAL EDUCATION DINNER**  
**COMING SOON**



**FREE CEU'S**

**FREE DINNER**

**TOPIC: "JUST CULTURE"**  
**SPEAKER; JOHN CAMPBELL-ORDE**

**SIGN UP TODAY LORRAINE THONE 856-296-2360 or via your rep**  
**RSVP BY APRIL 13, 2018**