



Message from the President



Now that we have finally “flattened the curve” and our numbers of COVID positive patients has decreased, we can take a hard look at what worked and what did not work. Our Local Executive Board requested to have a debrief around the hospital’s surge plan with the hospital administration. We did that several weeks ago.

During the debrief the hospital presented the results of the survey they sent to the nurses and a draft of their proposed changes. We shared with them what you told us needed to change and what did work. We are preparing our suggestions to submit to them in writing.

Our concerns dealt with the role and responsibilities of the RN1, RN2 and RN3.

The process for distributing work to nurses that see a decrease in volume when elective surgeries are postponed during a pandemic.

The areas chosen to expand for Critical Care beds. We heard you, it was difficult to monitor patients and even more difficult to get equipment you needed quickly.

Monetary Recognition for all bargaining unit nurses.

In the near future we will be reconvening our negotiating committee to review our original proposals and decide what additional ones we should consider around future Pandemic’s. At this time, we have no idea what negotiation’s in 2021 is going to look like. It depends largely on what the state of the Pandemic mandates are in New Jersey.

Again, I Thank You for your dedication and hard work.

Doris Bell, RN
President, Local 5118

Meet Marcus Threadgill

Hello everyone, my name is Marcus Threadgill, your new member of the union Local Executive Board. I am excited to join this union because I believe collective bargaining is a nurse’s most important tool for improving working conditions. Strong nurses create strong healthcare systems. Currently, I am working in the cardiac catheterization laboratory at Cooper University Hospital. Prior to coming to Cooper, I worked at Temple University Hospital in Philadelphia. While at Temple, I became involved in the union and worked on contract language for the recently approved contract there. My experience with the union helped me understand how important unions are and I am happy to bring some insight to our union here. Here is a little about myself. I have been in nursing for 20 years. Prior to becoming a nurse, I served 5 years in the Marine Corps. Most of my nursing experience is Cath lab but I also have worked in the ICU, interventional radiology, and outpatient oncology. My certifications include CCRN and Cardiac Vascular Nursing Certification (RN-BC). I returned to school in 2018 to complete a BSN, yes, it can be done!. I am looking forward to serving the nurses at Cooper and believe that we can accomplish great things if we are willing to support each other. Together we are strong and can do anything.

Grievance Corner

Disciplines and Grievances

Below are investigations that the hospital is in the process of completing. At this time no disciplines has been issued by the hospital.

1. **Social Media.** Nurses posted pictures of themselves with IV's at a party. An educator posted a rant on social media about nurses calling out. Her words were threatening; said, they should not mess with her. The Union asked for her immediate dismissal. We're waiting to see what the hospital is going to do.

***** Please Do not** post anything on social media that your employer may see as unprofessional or detrimental to the hospital. Even if you are in a private group remember nothing is private.

2. **Outside of Work Behavior.** A RN was allegedly arrested outside of work and allegedly disparaged the hospital. The hospital is investigating this alleged incident.

Disciplines

1. **Call outs and lateness** are still an issue for some. If you are late, be late and do not write a different time on the exception sheet. This is considered theft of time and you will be terminated. Also remember to call out 3 hours before your shift. A late callout is an immediate written warning.

2. **EARS reports.** Just because we write up an EARS report does not mean we will not be disciplined for the event. The hospital determines if they feel it is an offense. We decide if it is a grievance.

3. **Lab Errors.** The hospital continues to give written warnings for lab errors. The hospital is trialing a lab scanner that some areas like, others feel it takes more time to use. Please triple check your labs and transmittal slip. And yes, even during a code if you have someone else send your labs and they do it wrong, we will get disciplined. We are working so hard but we have to slow down when sending our labs.

4. **Schedules.** They are being posted late in many units. This is a grievance! We can be written up if we forget to put in your schedule. Please contact a union rep so we can file a grievance. This is not personal against a manager. We have the right to file a grievance, as stated in our Union Contract.

5. **Expired certifications.** Never work with an expired certification. Notify your manager immediately. If our certification expires, the hospital will not allow us to work. We will be suspended until we pass the test for our certification.

Grievances

1. **Lab Error.** We were able to get a one day suspension for a lab error over turned. The discipline was removed and the nurse was made whole. We provided witness statements proving that the lab slip was checked twice before sent to the lab.

2. **Mandation.** We grieved what we believe was an incorrect mandation. The hospital disagreed.

3. **Cancellation.** We grieved what we believe was an incorrect cancellation. The hospital disagreed. We're discussing taking this to arbitration. There are 3 steps to go through when a grievance is filed. After the third step of the grievance process and no agreement was reached, arbitration becomes a consideration. This is when an independent arbitrator decides the outcome of the case.



Election 2020

The General Election takes place on
Tuesday, November 3rd, 2020

Visit the HPAE Election Center 2020 at
<https://www.hpae.org/campaigns/election-center-2020/>

Welcome to our new VP

Staffing Committee Update August/September 2020

- **Vacancy Report.** K8 and OR remain highest in RN vacancies. Recruiting remains strong, and nurses are being hired and oriented. K8 is often a “stepping stone” to other units, and has a high turnover rate.
- **New Clinical Nurse Manager Positions.** K8 has 2 non-bargaining unit nurse positions, and K9 is looking into one position. These are management positions, not charge nurse positions. They are very similar to Flow Nurses. Similar to an ACD, but on the unit, helping in more a clinical way. They are there to help with orientees and education. There is also a Nurse Educator on nightshift for the house that can assist nurses.
- **Ultrasound Education.** Due to COVID, the vendor had to stop certifying nurses on the IV ultrasound machine. This is resuming. If you are interested in this, please contact your educator. It requires an 8 hour day of training, and 1:1 with the vendor. There are currently 23 RN’s trained
- **P10 TSCU Staffing.** When this new unit opens it will be 28 beds. The staffing pattern will be just as it is for the current TSCU and TAA. New nurses are currently being oriented, and hiring continues.

Our Joint Staffing Committee meets every other month. As a member of this committee, you can earn Professional Ladder credits. If you are interested in being a member of the committee, please contact Patti Scharff, RN at Jimandpattischarff@msn.com/856-383-1553.

The Workers’ Comp Presumptive Eligibility Bill becomes Law in NJ

HPAE worked tirelessly on getting this Bill passed. Finally, the Governor signed it into law. You can read the actual bill by going to NJ.gov and search for Senate Bill No. 2380/Assembly Bill No. 3999.

The law shifts the “burden of proof” from the employee to the employer in workers compensation claims for essential workers who interact with the general public and contact COVID-19 during the declared state of emergency. The “presumption” of infection at the workplace is rebuttable by the employer or the insurance company if evidence exists that the worker contracted the virus outside the course of their employment.

We are awaiting clarification on the bill that may directly affect some of you. As we receive the information, we will pass it on to you. The Bill is retroactive to March 9, 2020, the date of Governor Murphy’s declaration of a public health emergency with respect to the coronavirus pandemic.

HPAE Council of Retirees

A great way to stay connected with our Union when we retire, is to become an active member on our newly established Council of Retirees (COR).

The COR will continue the fight for patient safety guidelines, improve staffing levels and win legislation that protects our patients and our rights as Union members.

In addition to the above, members on this committee may assist with elections such as phone banking, provide support to locals who may be doing an action around an issue they have in their Local or provide support to other retirees that need help getting to a medical appointment, need groceries or medications.

As a HPAE Retiree we encourage you to attend HPAE events and conventions.

Please contact me, Doris Bell, RN at (dbell-HPAE@comcast.net) for more information. Hope to hear from you.

Voluntary Float Forms

The hospital has been asking many nurses to voluntarily float outside their float districts.

If you volunteer to do this, we highly recommend that you fill out a Voluntary Float form. Any nurse may volunteer to float outside their float areas, but if the form is not completed, management may add that area to your permanent float districts. This increases your float areas.

During this Pandemic and as a piece of the hospitals' Surg Plan, they created RN1, RN2 and RN3 titles. The hospitals' Surg Plan remains in effect. That being said, the use RN 2 and RN3 nurses continues to occur. In order to protect your float district, be sure you know what it is and complete the voluntary float form when you volunteer to go outside of your float district.

If you are ever floated outside your areas involuntarily, please let a Union Rep or Officer know immediately. This may be a grievance.

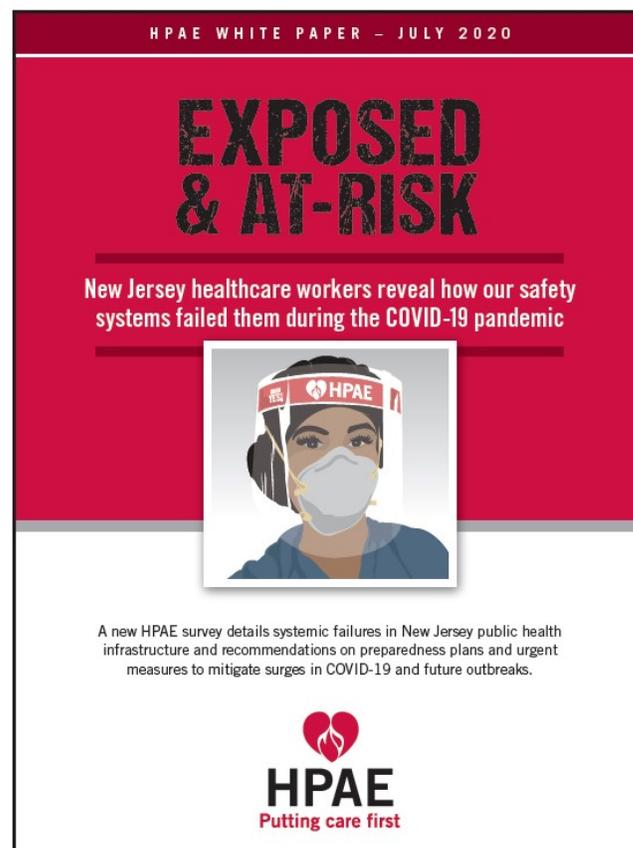
Please ask your manager, a COD or the staffing office for the Voluntary Form. When completed, please put it in any UNION mailbox. They are located outside the Cafeteria, and across from the Chapel in Dorrence. The completed form is very helpful if you are floated outside of your float district and you did not volunteer to go!

If you work in an Outpatient area, please take a picture or scan the form and send it to an Officer. All completed forms are kept on file by the Union.

In Solidarity- Patti Scharff, RN

HPAE White Paper

In a new HPAE report, "Exposed & At-Risk," union members offer real-time first-hand accounts of caring for patients on the COVID-19 pandemic frontlines while battling employers for personal protective equipment (PPE) and other resources to do their life-saving work.



HPAE WHITE PAPER - JULY 2020

EXPOSED & AT-RISK

New Jersey healthcare workers reveal how our safety systems failed them during the COVID-19 pandemic



A new HPAE survey details systemic failures in New Jersey public health infrastructure and recommendations on preparedness plans and urgent measures to mitigate surges in COVID-19 and future outbreaks.


HPAE
Putting care first

Read the report on the HPAE website at:

<https://www.hpae.org>