

## **SNA Monthly News Letter**

### **January 2021**

Hello all,

I would like to start out by welcoming Rosalyn Exley to the SNA Board. We are excited to have her join us around the table. You can read her Bio on our Website [snanews.com](http://snanews.com). You may also see her covering all the units and departments as a Rapid Response Nurse. All I can tell you is that she has hit the ground running. She has accepted the responsibility of monitoring, evaluating and reporting on AUP's. She has also agreed to be on the Board subcommittee to work on the Break Relief pilot program that will begin in June and she has also joined the subcommittee that will organize, mobilize and support the SNA unit reps from each department and unit.

SNA held its Board Meeting this past Thursday, January 21, 2021 from 9 am to 5 pm. All 8 board members were present. The following is a snapshot of a much larger conversation that SNA had with the Hospital that day.

- At 11:30 am we met with Hospital Administration via zoom. We first asked administration, where is our support staff? It had been reported to us that CP's and other members of NUHW have been receiving MROH while Nurses are being flexed? We wanted to know why? We also wanted to know why are Nurses working on CV19 units and not receiving support staff, especially now with the COVID 19 vaccine? Director Francesca Losito (Chi Chi) responded that they had initiated a more robust hiring of CP's. She stated that IP/ID still insisted that CP's not be assigned to CV19 patients. We then addressed that CP's are being used as sitters throughout the Hospital, severely limiting their availability to patient care on the units. We suggested that they consider hiring sitters again instead of pulling CP's from the floor. We took this time to share how exhausted and burned out Nurses are feeling with the lack of support and the lack of recognition from this Hospital on a personal level.
- We called them out on the Discharge Lounge. They had two areas of potentially violating our contract. First, they bypassed SNA. Secondly, by approaching nurses directly and bypassing the contractual language to provide opportunities of available work and distribution of that work equally. We pointed out that a position like this should be posted, even if temporary. We received a timely email exactly during the moment we were speaking about this, that 4W was flexed at 0700 that morning in order to staff the Discharge Lobby. It was a perfect example of them abusing the flexing order to meet their own needs. Due to that email we were able to call them out on the spot.
- Tammie Keithley from the SNA Board lead a conversation about the new contractual language around Workplace Violence and the role of the PRNC. This turned out to be a positive conversation with the Hospital saying they would pursue making sure that the reports needed by the PRNC to evaluate, log trends, and make recommendations for change would be provided.
- Security cutbacks etc. The Hospital asked to table this topic until next month when the head of security could be present.
- We then covered Safe Nurse Staffing. We pointed out that we continue to hear from our members that Nurses are offering to stay over to help and are being denied. We had been informed that the Hospital would not approve a nurse to stay on OT for the first 4 hours

of a shift. It was pointed out by SNA that those first 4 hours are the busiest of both days and night shifts for Nurses. We pointed out that 1C is being decimated by nurses leaving. For several years now they continue to lose their most experienced Nurses on 1C and most recently all their day shift leads. I gave them my personal experience of working on 1C a week ago as lead. I warned them of a mass exodus unless they start taking Nurse's needs into account. Chi Chi told us they recently hired 9 new Nurses, all experienced for 1C.

- We once again pointed out that leading the top of our list of complaints from our membership is the lack of direct communication on their individual units. Especially when things seem to be changing daily. We expressed the high level of anxiety this brings to the workplace.

We wanted to report to the membership an update on AUP's. For the entire month of December, we received a total of 60 AUP's. Med Surg =46, Tele = 8, ED = 2, and ICU 4. For January, just from the 1<sup>st</sup> through the 17<sup>th</sup> we have received a total of 81 AUP's. Med Surg = 55, Tele = 20, ED =2, ICU = 3, and EASE = 1. AUP's can address multiple categories that we log and track to support our issues we bring forward to the Hospital, so the following numbers will not add up to 81. Not Staffed to Matrix = 77, Not staffed to Acuity = 79, Ratios Flexed = 40, No resource nurse = 46, No break nurse = 52 and no meal break = 13.

We will meet again with Hospital Administration for a CV19 Huddle on Wednesday January 27<sup>th</sup> and February 3<sup>rd</sup>. We have a proposed meeting with Vicki White Thursday Feb. 4<sup>th</sup>.

Please make sure that you claim your no rest periods or missed meal breaks in Kronos. This involves more than just the statement when you clock out. You must go back in and enter no rest or no meal break and add 1 hour to your time clock. If you don't know how, ask someone to help you. This is vital in our build up to the Break Relief Nurse pilot program that will begin in June. The pilot will involve an evaluation of the number of missed breaks leading up to June.

We appreciate each of you and we are dedicated to upholding our contract and bringing your issues forward and to resolution. The labor movement is a continuous uphill march, one that the SRMH Nurses have never backed down from. We will continue to press forward.

In Solidarity,

The SNA Board

Peter Brackner SNA President