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**Subject:** SNA Updates  
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**To:** undisclosed-recipients;



## Dear SNA Member

Here are some updates on several issues:

### **Potential Discipline**

Remember, if your manager asks you to discuss an issue about your performance, communication, etc. in their office, on the floor or by phone at home, always ask if the conversation could result in discipline.

You are entitled to SNA representation in a Fact Finding meeting about an issue where discipline could result. The manager must give you 72 hrs. notice to arrange representation for such a meeting. (Call the SNA message line 575-8853 or email us right away).

On the one hand, your manager is entitled to talk with you about how things are going. Our concern is that you can get into a conversation before you know all of the implications.

### **Step Increase Date Correction**

HR reported to the SNA Board at Nursing Coordinating Council on 2/15 that they are making progress on their investigation of nurses' Step Entry Dates for nurses who may have had their date incorrectly adjusted for a paid leave.

Once again, this is a labor intensive process. They will have more data for us at our next mtg. on 3/15. When the investigation is complete, incorrect dates will be corrected and back pay issued if nurses did not progress to the next step at the correct time.

### **Scheduling**

Nurses and managers who prepare schedules will attend a scheduling class on 3/15. The class will review scheduling provisions in the SNA Contract, Hospital Policies, and KRONOS.

Schedulers were surveyed concerning their knowledge, current practices and orientation to scheduling. This info. was helpful in determining the class outline.

### **2C Resource Nurse**

We had an extensive discussion at NCC concerning the 2CE staffing matrix and loss of the Resource Nurse. We emphasized the implications for patient care and for nurses who experience a huge patient turnover on most shifts.

This discussion dovetailed with our discussion on Acuity.

### **Acuity**

During NCC on 2/15 we also had an extensive discussion about Acuity, the lack of acuity staffing and failure to meet the requirements of an acuity system. We will be on this issue in our quarterly meetings with Vicki White, CNO, (starting March).

1) Title 22 regs indicating that ratios are to be improved to reflect pt. acuity are not subject to budgetary considerations.

- 2) Admin. indicates that the matrix for C.Partner staffing includes staffing for acuity. Therefore, not staffing to matrix is a violation of Title 22.
- 3) Nurses, including Leads are not adequately educated about acuity, scoring of pts., etc.
- 4) SRMH does not have a reliable and valid acuity system.
- 5) The Acuity Committee has not been allowed to function per Title 22 regs. Hopefully we can resolve these issues and more with Admin. If not, we will be looking at next steps.

### **Violence in the Hospital**

The SNA Board has ongoing discussions with Admin. about this issue. We understand that some education has been provided but we continue to be concerned about whether there are adequate resources to protect pt. care staff. The most important thing to learn may be to recognize signs of escalation in patients/visitors, then back away and call for help.

Thank you, The SNA Board