

Dear SNA member,

Just a reminder that you can find the 2017-2020 contract on our website www.snanews.com, along with other information. Remember you can reach us by e-mail snanews@sonic.net. We also have a private Facebook page and if you would like to join just e-mail us with your request. Our office phone number is 575-8853 we pick up calls around 8am daily but we answer e-mails more frequently.

The SNA Representative/Membership Meeting are at the office, 200 Montgomery Dr. Suite B, Representative 1:30 and Members 3:30.

October 10th

Here are some updates on issues we're working on:

Integrity Hot Line

The Integrity Hot Line (1-888-294-8455) is available to employees to report the behavior or performance of a manager/director/member of administration who does not meet Hospital standards, including the Standard of Conduct.

An employee might consider using this line to report feeling bullied, not supported, unfair decisions or negligence.

The Hot Line is administered by an outside company, not directly by Providence.

Mandatory vs. Voluntary ROH

You **may** use PTO to cover either mandatory or voluntary reductions in hours. You are not required to use PTO for either. However, if you are requesting the shift off, PTO is granted before a VROH (Voluntary Reduction of Hours). Therefore, if it is important to have the shift off you are more likely to have the request granted if you use PTO. The Staffing Office may try to encourage you to use PTO by telling you, you will only get the shift off if you agree to use PTO. That's probably because they know of other nurses who have requested PTO or are willing to use PTO.

SRMH "Profit" Margin

OSHPD (a federal agency) reports of the Hospital revenue and expenses reveal a "margin" (revenue exceeding expenses) of over 14% for the 1st quarter of 2019 that ended Mar. 30.

Meanwhile, Administration insists they are "over budget" - a common refrain since 1979 regardless of how much \$ they have. For perspective, a 5-7% margin is considered needed just to sustain. More than 7% is required for growth. We recall Todd Salnas, former CEO telling us he needed 9%.

Kincare

Benefited nurses can use Kincare for their own illness, or to care for ill child, spouse, parent, in-law, grandparent or sibling.

Half of the PTO accrued in a year can be used for Kincare. Pay check stubs indicate a Kincare hour accrual balance - just as an FYI of how many hours you have available. If you don't use those PTO hours for Kincare, they are still part of your PTO accrual balance.

You must have PTO hours available to cover the use of Kincare in order to use it.

Kincare is protected leave by law therefore, using Kincare does not count as absenteeism (for which you can be disciplined if you have 6 or more occurrences in a year).

ED Staffing

The shortage of ED nurses for mid and night shift has reached drastic levels over the last few months. Short sheets have sometimes listed 8-10 short shifts in a single day.

Each month at Nursing Coordinating Council, the SNA Board discusses the shortage with Administration. ED nurses have documented the failure to staff to nurse/patient ratios in addition to other safety concerns. We are aware that DPH has been informed.

Travel nurses have been contracted and a few nurses have been hired but we remain very concerned about SRMH's ability to attract and retain nurses.

We encourage ED nurses to continue to document unsafe situations as it meets their duty to their license to inform the Hospital.

Med-Surg Scheduling

The Schedulers from most med-surg depts. met recently in what they call the "war room" to work out their dept. schedules collaboratively and as balanced as possible. There are many shifts that are short across the med-surg depts. and individual short sheets for each dept. were posted.

We understand that 19 positions are posted for the Float Dept. which when filled may help to fill these staffing shortages.

We appreciate these schedulers and their efforts to accommodate both nurses and dept. needs.

Care Partner Staffing

Frustrating and the same old refrain - despite hiring 15 Care Partners 2 months or so ago, the Hospital still cannot staff to matrix or acuity. We're told they have posted more positions.....

CCD/SDU

The SNA Board is working closely with CCD/SDU nurses on acuity system issues. Meanwhile both noc and day shifts have been short staffed and Break Relief as well as Rapid Response nurses have been pulled to be assigned to patients.

OR

Several OR nurses have met with the SNA Board to discuss issues and questions about the application of the SNA Contract and decisions of OR management.

Thank you, The SNA Board