



## **Hello from the SNA board,**

Just a reminder that you can find the 2017-2020 contract on our website [www.snanews.com](http://www.snanews.com), along with other information. Remember you can reach us by e-mail [snanews@sonic.net](mailto: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.

### **First a few important announcements:**

- 1. The next SNA negotiated across the board wage increase of 3% will take place Oct. 6, 2019.**
- 2. The PTO extra deposit of 2 working days negotiated by SNA will occur the first full pay period following the anniversary of the ratification of the 2017-2020 contract which took place on November 8, 2017. That means you should see that PTO on November 22, of this year.**
- 3. Please plan to attend the next membership meetings held at the SNA Office Thursday Oct. 10<sup>th</sup> at 1:30 PM for unit Representatives and 3:30 PM for general membership. The SNA office is located at 200 Montgomery Dr. Suite B, Santa Rosa CA. 95404**

### **NCC Monthly Meeting Report**

We wanted to report to our membership about our most recent NCC meeting between SNA and hospital management. This is a contractual monthly meeting requiring the hospital management to meet with the Union to discuss our concerns. Our meeting was Thursday, September 19, 2019 from 1PM to 3PM.

#### **Behavioral Health Plan related to AMA vs. Patients that elope**

Dexter Arbotante, Director of Risk Management addressed the committee. He stated that nurses should not put themselves in harm's way with patients that are insisting on leaving the hospital. You should never retain or attempt to restrain someone from leaving the hospital AMA. Especially if the patient is competent and has capacity. Only a legal court of law can rule and decide if a person is competent. A doctor can decide if the patient has capacity to make decisions during their stay at the hospital. If a patient has been deemed by the doctor to lack capacity and that patient is trying to leave the hospital, you certainly can attempt to redirect the patient. It was made clear that it is still not your responsibility to restrain or use physical force to detain the patient. If the patient leaves the hospital, the policy is to call a code green, notify security and possibly call the local police.

#### **Quality/Safety, Throughput**

Much of the meeting centered on our concerns about the Throughput program and the labor-intensive requirements on the lead nurses. We related a real event where beds that were meant for surgical patients were all taken during the night leaving the lead nurse to move 7

patients to accommodate pre-scheduled morning surgeries. Our concern for the safe placement of patients also covered the placement of Behavioral Health Patients. We strongly expressed our concerns about the hospital not following our agreed upon procedure for sending patients to the unit for admission. We will continue to address this issue with Hospital administration. Please keep us informed of unsafe admissions, transfers and especially unsafe admissions of behavioral health patients.

### **Care Partner Staff**

We asked for a report from the hospital on the status of hiring Care Partner staff. We especially asked about the position of the contractual float Care Partner position. We were assured that the positions are being filled.

### **CCD/SDU Staffing**

Kevin Craven reported that they continue to onboard staff and that they have travelers coming to cover open positions for staff that are on LOAs. He also reported to the Union that they are discussing with staff a plan to start an "On Call" program. It will not be a 24/7 program for now and will initially be on a volunteer basis. We reminded them that SNA should be made aware of any changes to any programs or work conditions of nurses.

### **ED Security**

SNA ask that the Hospital be more proactive in securing the hospital and especially the Emergency Department. Nurses have reported to SNA that they do not feel like they are safe and secure compared to other ED's in the area or across the nation that have barriers, metal detectors and bulletproof glass. We encouraged and feel like a risk management evaluation at Memorial would be prudent.

### **ED Staffing**

SNA acknowledged that we have received few AUP's related to ED staffing. We were told that all open positions in the ED have been filled.

### **Central Scheduling Update**

The schedule continues to be a struggle due to the lack of staff and open positions that have not been filled. We continue to assert the obvious; **you must take care of your staff**. Make them feel safe and appreciated. That would go a long way to slow down the exodus of nurses from Memorial.

### **Acuity**

The SNA Board considers a valid and reliable Acuity System at SRMH to be critically important to staffing that assures safe patient care. We feel that we are carrying the load as the major advocates for this goal.

To that end -

- We meet quarterly with Vicki White, CNO to work on implementing the Acuity system. Laura Hansen our SNA co-chair of the Committee has a huge role in; a.

educating and strengthening the Acuity Committee. b. Supporting the efforts to educate staff nurses and managers about the Acuity system.

- We have confronted Vicki with some of the misinformation given to nurses by Managers and Directors - e.g. "The acuity scores must match the Daily Management Tool", which is a violation of Title 22. (By the way, she denies saying that).
- We have disputed the use of med-surg scoring tools in tele, SDU and CCD depts. since the indirect care component of the calculation is specific to each department.
- We have supported complaints filed by Nurses to DPH concerning the lack of a valid acuity system.
- We support nurse representatives to the Acuity Committee with information and problem solving.

More to come on our support for Lead Nurses.

As always, we need your reports to keep SNA up to date on the issues that are affecting your work life. We use your emails, phone messages and AUP's to confidentially bring your needs to light with the management of Memorial Hospital. We are so proud to be working alongside of you.

**Thank you, The SNA Board**