

From: Staff Nurses Association snanews@sonic.net
Subject: NCC February 2020
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To: undisclosed-recipients;



February 2020

Of note: SNA and NUHW are partnering together to address Workplace Violence. We need nurses that would be interested in joining a coalition to address our concerns about Workplace Violence at Memorial. This would involve working here in Sonoma County and speaking with legislators about enacting new laws that would make attacking healthcare workers in the hospital a Felony. Please contact SNA with your interest of being part of this important work.

Membership Meetings: These meeting are at the SNA office-200 Montgomery Drive Suite B and take place at 1:30 and 3:30pm. This is a negotiation year so everyone needs to stay in touch with what is happening.

March 26, 2020

June 11,2020

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.

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 February 20, 2020 from 1PM to 3PM.

Violence in the Workplace/Safety

First off, we applaud the 1 Center Nurses that demanded their voices be heard by upper management at Memorial Hospital. They organized for their staff meeting and expressed their anger at the lack of concern being demonstrated by the administration regarding a continual onslaught of assaults to themselves and their co-workers. They showed up with solutions and recommendations that they would like to be implemented. They felt unheard at this meeting, but I can assure you that they rattled some cages. With them setting the tone this week, SNA's voice was bolstered by their act of solidarity as we once again visited nurse safety and the behavior health plan as it applies to Violence in our Hospital. 1 Center was one of our subjects of discussion. This included the 2 people that we have been made aware of that have been injured in the past couple of weeks. Damian did speak of the 1 Center Staff meeting and the "overwhelming" feedback she received of the Nurses feeling physically threatened. That the nurses did not feel like their rights were seen to be as important as the patients they care for. Damian stated that the 1 Center nurse's action plan

was being escalated up to risk management. She also spoke of the nurses having the right to press charges against a perpetrator for any assault on a caregiver. She added that the hospital also has the right to press charges on behalf of an employee in the case of an assault. We spoke to the upcoming Behavioral education days that are set for April 1st and 2nd. We expressed our concern that this was not a mandatory class for 1 center, now tagged as the Behavioral Unit of the Hospital. No satisfactory answer was provided. The safety officer was slated to speak with SNA today about many of our written questions and request for written answers from the hospital. He was not present due to the Joint Commission surveys taking place in Petaluma. SNA had presented a list of questions back in November 2019 generated by our study of the Laws in California related to workplace safety. The hospital presented us with the policy. As we appreciate having a copy of the policies, we still want answers to specific demands of the law. For instance, we have asked for proof of the committee that includes “nurses” in regulating and enforcing the plan for workplace violence. We want to know who is keeping the record and reporting each time an employee is being assaulted to Cal Osha. This is just a couple of examples of our questions.

Quality/Safety, Throughput

We followed up on the assertion that break relief nurses are needed due to the Throughput program. We once again were told that proposals have been submitted to the 2020-unit budgets for providing break relief nurses, but they have not heard back on that yet. Sue politely asked, so when does the 2020 budget begin? They stated “January 1st. Awkward silence.

We asked them about Dr. Hill proposing that the Day of Discharge responsibilities being shifted to the Lead nurse. Kevin Craven stated that they have been trying it on 4N and 4W and the leads have not indicated that it has been any problem. SNA expressed big concerns about such a plan falling on the lead or the primary nurse.

We also took the topic of workplace violence back to the throughput process. We cited the recent case of a mental health patient murdering his 70+ year old roommate at a hospital in Long Beach about two weeks ago. We pointed out how the process of pushing patients into any room, any bed, just for the sake of filling beds is an appalling process of the Throughput process. The process often puts staff and other patients at risk of injury.

Care Partner Staffing

We addressed that Care Partners are not consistently being staffed to acuity and sometimes to matrix. We also asked about Staff Nurses being assigned as Care Partners for shifts. Admin. replied that doing so was financially a last resort when Care Partners are not available.

We pressed them on their progress on hiring Care Partners. They replied that their hiring priority right now is new RN's and beginning the Clinical Academy. Then we inquired about why a Staff Nurse assigned to help a dept. in the role of Care Partner could not function to the full extent of their license, eg. if an IV start was needed. Damian, Dir. of Med-surg seemed to consider that idea. However, when we asked why the Hospital did not assign extra Staff Nurses as Resource nurses instead of Care Partners, her answer was no, without explanation. We will follow up on that. Since the SNA Board has been fighting and

demanding for over 2 years (including many complaints filed with DPH) that the Hospital staff to acuity per Title 22 with additional Care Partners, if Care Partners are not available and a dept. needs extra help to care for patients, we do not feel that we can object to the assignment of an extra Staff Nurse who would otherwise be MROH'd or canceled to perform the work that a Care Partner would do.

The Staff Nurse job description does include all the tasks performed by Care Partners when it lists ADL's. We have informed the leadership of NUHW that Staff Nurses are sometimes assigned as Care Partners for shifts when Care Partners are not available.

In the event of an NUHW strike we will be discussing the implications with them in that situation.

CCD/SDU Staffing

SNA ask about the Voluntary On-Call proposal that had been presented to us. We pointed out to administration that SNA has not been the hold up on this process. We had proposed language to the policy that would ensure that relief nurses were treated fairly in the process. We did that over two months ago. Kevin Craven acknowledged this and accepted our explanation of how the current language of their proposal could be unfair to relief.

Shared Governance

Questions tabled to next meeting. Shawna Sewell not available to discuss or address SNA concerns.

Break Relief

Kevin Craven is working on tracking break relief. They are tracking trends. Looking at Standardized Break Relief, and how they are offering to everyone. Hello... see above... Hiring Break Relief Nurses!!

Policy Changes/Location of Policies

This issue still concerns SNA. We once again addressed the difficulty of finding policies. They seem to just disappear, change without notice or hidden in other policies.

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

