



PRESIDENTS MESSAGE

So many things are going on at the hospital that in the scheme of things the administration forgets that we are the ones taking care of the patients and making do with what we have. We are the ones who work on these units' day in and day out and make it work. I really do not think they realize that they could not do it without us. Yet they are constantly bringing more things into the picture like new towers, new outpatient offices, and a merger with Cape Regional.

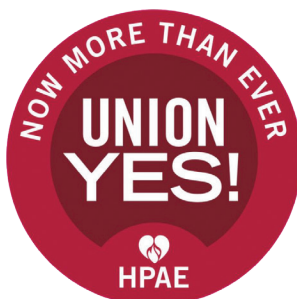
I believe we need to support the bigger issues like safe staffing which will keep nurses at the bedside to care for our patients. Nurses are coming in and either feeling like they do not want to work this hard or want to further their education to get them out of the hospital. I believe a staffing bill can increase nurse satisfaction and help keep nurses there.

In May we had a rally in Trenton to get our message out there. We had a good turnout, along with the other unions that were there. We now have support from NJSNA for our bill. HPAE is working to get the legislators to sign the bill.

We are beginning to gear up for our contract negotiations in 2024. We are starting our internal process sooner than usual to develop a strong united negotiating committee. Our goal is to have nurses from across the house, both inpatient and outpatient, on the committee. Negotiations are going to be difficult. We must stand united against this administration.

Have a great summer and stay safe!

In Solidarity,
Doris Bell, RN
President



2024 CONTRACT NEGOTIATIONS

In approximately eight months we will be sitting across the table from nursing administration and human resource representatives negotiating a new Union Contract.

What does this mean? This is when we make proposals to the hospital about wages, benefits, working conditions and anything else we want to see changed in our Union Contract. They too will make proposals for us to consider. Neither side must agree to the others' proposals. Both sides have the right to drop or amend their initial proposals in an effort to reach a tentative agreement.

Strategically, we will make proposals that we know are not "must haves" for us to use as bargaining chips as we go through the bargaining process.

Open Negotiations. Our negotiations will be "open" which means our members can attend the bargaining sessions. Typically, employers do not allow this to happen. We have set a precedent that goes back to 2001.

Negotiating Committee. We are looking to have a negotiating committee made up of 13 nurses, which includes our Executive Board. The Executive Board will represent their units. The remaining committee members will come from the other in-house and outpatient areas. Nurses will have the opportunity to submit their names for consideration.

To have a committee representative of our membership, we hope to have Senior RNs, Newer RNs, Med Surg RNs and Outpatient RNs on our team.

Union Leaders and Activists. YOU ARE NEEDED. ←

We will have activities throughout our contract campaign. To be successful and send a strong message to Cooper that we are serious about our negotiations, we need YOU to help to achieve what we deserve.

A good contract takes a lot more than negotiating proposals across a table. It takes all of us working together to be successful.

Tina Jones, RN
VP Outpatient Areas

NEED TO KNOW OUR UNION



Article 7.3 K. Schedules

A staff member who cancels themselves two (2) or more times in a schedule (regardless of when cancellation occurs) will not be permitted to sign up for additional or overtime in the next schedule.

Cooper has been extremely strict with following this as of late. Be aware of this article if canceling scheduled shifts.

Please cancel shifts within the appropriate period to avoid discipline. **Refer to Article 13 Call Out** for more information on call outs time needed and disciplines.

Staff working overtime or additional time will be permitted to cancel themselves at least 24 hours in advance for a shift Monday 7A through Friday 7A and 48 hours Friday 7P - Sunday 7P without being charged a PTU day for the purpose of discipline. A late cancellation of OT and additional shifts will result in an unpaid PTU for purposes of discipline.

Vacation Scheduling Time! Vacation PTO request time for November 1 through May 1 is due by August 15th. Units will start the process of selection soon. Please refer to Article 19 Vacation Scheduling for more information. Cooper has been enforcing a blackout period for pto requests around the winter holidays.

Article 21 Tuition Reimbursement and Staff Development Program.

Thinking of advancing your education? You may be entitled to a Tuition Reimbursement.

Worked at least 1,000 hours in the previous calendar year? You may use \$500 per calendar year for reimbursement for job related expenses/education.

EXAU JOINS THE CDU

The EXAU (Express Admission Unit) on K5 will become a permanent part of the CDU, for a total of 26 CDU beds. It has been operating for some time with pool and agency to take care of direct admissions waiting for beds, discharges, and those waiting for rehab. The area will remain a 24/7 unit.

Construction has taken place, and there are 6 beds with curtain dividers. Prior to that it was cubbies with recliner chairs. Now hospital beds can occupy the individual spaces, to allow for better patient care.

Currently it is managed by Logistics. The management will change to CDU when additional staff is hired. The intent is to add more FTE's, and an ACD to the CDU budget. The plan is to continue having two nurses for the six beds. The area will be fully stocked and will have the necessary equipment. At this time there will be no telemetry patients. In the future, this may or may not change.

When hiring is complete, CDU nurses will be assigned to this area, just like any other CDU patient assignment. It is not a float area. The float district would be the same as CDU's areas, since it is part of CDU.

PLEASE WELCOME OUR NEWEST LOCAL EXECUTIVE BOARD MEMBER

Hi y'all! My name is Tess Ianni, BSN-RN. I recently joined our unions' LEB. I graduated and started practicing in 2020 as an emergency room nurse in Trenton, NJ before transferring down to Cooper last year. I want to be more involved with our Union so I can help to build unity and power in our Local Union. Representing our nurses, advocating for my co-workers is important to me as we face the many changes that are occurring.

In my free time I enjoy reading, hiking, crocheting, spending time with my friends and baking. I'm excited to be a part of something bigger. If you see me around, please stop and say hello.



GRIEVANCE CORNER

Grievance update:

- ♥ We are still seeing several RNs incorrectly cancelled. If this happens to you, go to your manager immediately and explain your situation. If they agree, request a payroll correction. If the manager disagrees, contact me. Please include your name, unit, shift, status (Fulltime, Parttime, UBP, Baylor, etc.) and the name & status of the RN that you feel should have been cancelled. I also need to know if the shifts for both RN's were coded as OT or extra in Kronos. Do not wait until the last minute to contact me or we may be out of the timeline to grieve it.
- ♥ Remember that if you want to make yourself available for a shift that agency is scheduled, you must provide at least 12 hours' notice to the Clinical Director or staffing. (Article 8: Work Preference)
- ♥ We also have an outstanding grievance because an RN's schedule was changed after it was posted. This violates Article 7.3 of your contract. "Posted schedules will not be changed without the mutual consent of the Registered Nurse and the Clinical Director." The grievance was denied at Step one and was moved to Step 2.
- ♥ Cooper terminated a nurse for allegedly sleeping.
- ♥ Several RN's have been disciplined for posting pictures to social media that were taken during work hours in patient care areas - DON'T DO IT!

Ann McCausland
Grievance Chair

UNIVERSAL TELE UPDATE. UNION LEADERSHIP PUSHES BACK.

The hospital is moving towards a universal tele approach. This means that the med/surg floors that weren't previously tele, will now have to take the tele course and ACLS. We fought tirelessly to grandfather nurses that have been here for years from having to take the course. Ultimately, the hospital wants to have this in place to decrease the shuffling of patients in the hospital.

Originally, the hospital wanted to terminate nurses if they didn't pass the tele course/ACLS after two attempts. The union prevented the hospital from doing that.

Our Union committee requested remediation for those that required more education and competencies to be added to those units as refreshers. In addition, we requested that the hospital purchase more tele boxes, which will be distributed to the floors, and we requested that on S9 and N7 a central monitor be placed at the nurses station, this will be placed in the 4th quarter of this year.

The hospital is also testing a new program called Airstrip that will show a live feed of patients tele, it can take snapshots of a patient's tele rhythms and put them in the chart, and tele techs have access to place rhythms strips in the charts. The program is currently being tested on a cardiac floor and a crit care unit.

We are still in discussions with the nursing administration about protecting nurses who may not be successful in passing the telemetry course. More to follow.





Address Service Requested

A Newsletter for the members of
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