HPAE
LOCAL 5105 Newsletter
THE PATIENT ADVOCATE
A NEWSLETTER FOR THE MEMBERS OF HPAE LOCAL 5105 AT VIRTUA MEMORIAL/CNS
THE PATIENT ADVOCATE
November 2017

Message from the President

ATTACK ON UNIONS!

There is a deliberate and systematic attack on unions happening in this country. Big business has a vested interest in diminishing the power of unions and are paying millions to do so. Why? Because unionizing gives the worker a say in their working conditions and allows for shared power in the work place. Employers do not want to share power--they want the unilateral ability to govern the workplace without interference. The harsh reality is that many of our current government leaders, including the President, are supportive of big business and have made changes to the Supreme Court, the highest court in the land, in order to ensure that the Court will vote against unions.

One such case, Janus vs AFSCME, which has been funded by ultra-wealthy big business and filed in the Supreme Court, seeks to undo a 40 year old court ruling that public employee unions can require non-members of the union to pay their "fair share" of dues in exchange for enjoying the benefits of the contract and union representation. Because a union must represent all workers in a bargaining unit, then all the workers in the bargaining unit must share in the payment of dues.

In this Supreme Court case, the anti-union group is seeking – and probably will succeed – in getting the Supreme Court to overturn the 40 year old legal precedent in order to weaken all public employee unions. But an attack on public employee unions is just the start. Thirty percent of HPAE members are in public employee unions. The next attack will be on private unions as well and the other 70% of HPAE is private. A union must have sufficient dues to be able to represent members well. Cutting dues is not a fight for the worker; it is a fight against the ability of unions to bargain collectively and unionism.

Terms like "worker freedom" and "right to work" are terms Big Business leaders use to mislead the public into somehow believing that the worker will be "freed" if they are not paying dues. However, the loss of this "fair share" legislation would cause unions (ours included) to have a more difficult time representing members. In fact, ultimately, this is designed to be one step toward stripping unions of their voice in the workplace. Therein lies the real fight. We know that with less union activity comes a lower workplace standard. When union power is diminished, working conditions suffer. Please stay informed and don't be misled by these people. Union power is the real power to make changes for us and for our patients.

Debbie White, President

Contract Education: PTO article 9.7

We are hearing of multiple PTO denials lately. The employer is quoting reasons such as "drops staffing below core levels". First, we are not really sure what this means and second, in many cases, staffing will never be better on some of the denied days as there are no posted positions that will ever improve staffing. Thus, our first question for Virtua is this: can a nurse ever be allowed to be released on these days? We know there are many days when there are chronic vacancies and with this hiring freeze, some may be long term. Our second question is this: what contractual efforts have the managers made in order to grant the day off? We see managers simply denying most requests without any attempts to find coverage.

SO WE ARE FORCED TO GRIEVE ALL PTO DENIALS. IT SEEMS THAT IT'S BECOME EASIER TO JUST DENY PTO THAN TO WORK TO FIND THE EMPLOYEE COVERAGE.

Prior to denying a PTO request, the contract states:
"Virtua shall make every reasonable effort to grant PTO requests made during the time period specified by the process flow period. Such reasonable efforts shall include, but will not be limited to, pre-scheduled Per Diem staff and posting early on bid shift the requested hours."

Virtua has 14 days to respond to a PTO request. Immediately upon receipt of the PTO request, managers should be posting the shift on bidshift and asking per diems to fill the vacancies. This is not just a management responsibility; it is a contractual mandate.

Thus, we are asking for the names of all per diems contacted for all grievances. We are finding some managers are now actually finding the coverage but most are not.

In addition, some managers seem to believe that our members are only entitled to one weekend off per year. The contract states, however:

"...is understood that contract Section 9.7.7 does not set absolute limits on the amount of weekend PTO that may be requested. Nurses may request additional weekend PTO, and if staffing allows, it will be granted."
Thus, we are accumulating a large number of PTO grievances and will eventually be filing a class action grievance. Let us know if this affects you.

Demand To Bargain

We've submitted a demand to bargain over the effects of several new work rules. What does this mean? If any work rule involves hours, wages or working conditions, the labor law give us the right to bargain over how that work rule affects our members. This means that even if the employer has a contractual or legal right to create a new work rule, the union still has rights to bargain over the impact of new work rule.

<u>For instance, the employer has instituted a work rule regarding clinical competencies--making them mandatory. Thus we have bargained over the effects, such as having them clearly posted on each unit and affording time off, if requested, during the normal workday to complete them.</u>

Things are rapidly changing in healthcare and we expect much more to come. We'll keep you updated.

Debbie White, President

Grievance Update: A Personal Experience of a Layoff

Never in a million years did I think I would be reading ***Article #10 Layoff*** and applying the language to myself!! Words like probationary employee, targeted layoff and bumping rights were all terms I have rarely heard in my years with the union. For those who do not know me I have worked in the Cardiac Cath Lab (CCL) since 2010 and almost 4 years ago I took a full time 48/40 oncall position in the CCL. This full time on-call position was proposed by Virtua in the 2014 Negotiations to address the ongoing problem with call coverage in procedural areas like the CCL. The CCL provides 24/7 staff coverage to patients with the diagnosis of acute ST elevation myocardial infarction (STEMI). If there are not enough RNs to fill all the 24/7 call shifts, patients with a STEMI are sent to other facilities (heart rescue) , thus delaying care. Too bad that the Virtua Administrators that once supported Virtua Mount Holly CCL and the service it provides to the community are no longer quite as interested in providing the 24 hour, 7 day a week care.

I found out that Virtua was "thinking" about doing away with the FT on-call position in the CCL in early October and it was then confirmed at the October Labor Management meeting. I was devastated. I love my job. The fact that the FT on-call CCL RN was called in less than 22% of the time was the reason given for this targeted layoff. I can imagine that Virtua was nervous about laying off an executive board member of the union and I am sure they wanted to make sure they got the process right! Well—they did not!

At the layoff meeting, Virtua administration handed me two lists of "open" positions. They also said there was an open full time on-call position in the PACU that was hours for hours exactly what I do now. They told me it was not on either list but that it was available. (Turns out it actually was on the "open position" list) Virtua told me that though this position had been tentatively discussed with another RN, it had not formally offered to that employee. Virtua said I would be a "good fit" for this position and that I was qualified to work in this unit. Within days, I accepted the full time on-call position. I emailed my decision and felt a brief sense of relief.

I later came to understand that Virtua had completely misinterpreted the layoff language, offering a position to two people within days of one another. The other nurse was hurt in the process as she was not awarded the position. She is grieving this and we are working on a solution. I also came to understand the application and transfer process is very unclear as no one could really tell us who has the authority to make a formal offer (of a position), or how an applicant is actually notified.

The other issue in this layoff comes from the discovery that Virtua never applied the 2014 language negotiated to one employee. Virtua proposed reducing the full time on-call hours from 60 to 48. There still exists one employee who was never offered the ability to transition to this position of lesser hours back in 2014 despite assurances that this would happen. We have grieved this as well.

With the recent news of the layoff of additional non-bargaining unit members system-wide my heart goes out to all of you!! This is not easy! I am VERY thankful I am UNION and have contractual protections! I will truly miss my Cath Lab family!

Your Union Sister,
Sheryl

Health Benefits – Dictated by Business, Not Your Well-being

You may have heard that our health benefits for 2018 are going up in price yet covering less – this is true. So far, the biggest concern we have is the lack of coverage for name-brand meds which either do not have a generic equivalent or which, when trialed, do not work. With these new terms also comes NO APPEAL PROCESS for necessary medications and coverage.

What kind of employer, especially a health system, does this to their employees? So apparently there is plenty of money for new buildings, new programs, new partnerships, yet they do not have money for the most important aspect of the business - us? Do they really want us to become an admission statistic in the future due to poor health management when we are forced to choose between rent, food, and medications? We know that medical debt in the community is reaching crisis proportions. Seems Virtua wants to share in that crisis.

This struck a very personal note with me. My oldest daughter is a type 1 diabetic and uses Humalog and Lantus to manage her condition. Novolog (the generic) has been trialed but does not work. And Lantus has no generic. Her endocrinologist appealed the insurance in the past and we have had no problems since. Thanks to the changes in Virtua's prescription benefit, I will incur a much greater cost.

We have filed a grievance. If you or anyone in your household may be affected by these changes, please email any of the executive board and we will add you to the list for this grievance!

We are working on obtaining a list of all affected medications, which we will then share with everyone.

In solidarity,
Beth Cohen (ER), Secretary-Treasurer
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CNS Update

It comes as no surprise that home healthcare workers top the list for highest risk for work place illness, injury, and violence. Several issues have come up recently that our members have encountered in their field visits. We must work together to ensure everyone's safety. Any and ALL occurrences must be brought to a manager's attention immediately, so it can be managed accordingly. If at any point a patient or care giver is inappropriate in their actions or speech, it must be reported. Remember, you may not be the only person seeing the patient, so use the basic screen for communication with other RNs/disciplines. Do not hesitate to end a visit if you feel you are in a compromised position where you are at risk for harm. You should always ask for a joint visit with your manager to better assess the situation. We have recently discovered that a security escort takes 24 hours to set up, so plan accordingly. The union is currently grieving some safety issues, and we hope to establish a specific safety committee to address these issues. We all have the right to work in a safe space, so make sure you are speaking up about issues you encounter in the field to ensure everyone's safety.

Kelli Zambetti
Grievance Chair CNS

Update- Online Unsafe Staffing Form

Per our new contract, the union and Virtua are to collaboratively create a new online unsafe staffing form accessible to all members and implemented by October 31. We have extended the deadline. Virtua has agreed to partner with us on the education process once we have completed the form.

Reminder- If you have any staffing issues on your unit, please let me or your unit's rep know so we can address it in the staffing committee.

Thanks,
Lorraine Thone
Staffing Co-chair & VP Hospital- 5105