

MANDATORY SURGICAL MASKS POLICY DELAYED AGAIN!

On Friday, Nov.13, SEIU 121RN and UHW argued our case in federal court regarding HCA's failure to bargain over its new policy requiring employees to get a flu shot or wear a surgical mask. **The Judge stated he would issue a decision as early as Friday, Nov. 20 and ordered that implementation of the mandatory flu vaccination/masking policy be delayed until he issues an opinion.**

HCA has maintained that it has a responsibility to engage in influenza control and issued a new policy to do so. SEIU 121RN believes that the Union has a right to bargain over this policy just as we do over any new policy which affects "terms of employment". In fact, the Union strongly supports negotiating an inoculation policy as part of an influenza control policy that complies with the Center for Disease Control's guidelines for a comprehensive infection control policy.

SEIU 121RN believes, however, there are more effective strategies to improve infection control than a mandatory vaccination order which diverts limited time, attention and resources to policing staff and undermines patient care.



CHARLOTTE KINNEY PICKARD, LOS ROBLES HOSPITAL, SHA LA NAE, RIVERSIDE COMMUNITY HOSPITAL (RCH), AND NORA PARKINS, RCH MADE DECLARATIONS AND WERE PREPARED TO TESTIFY IF CALLED. (LEFT TO RIGHT)



WHAT WOULD A REAL INFECTION CONTROL POLICY MEAN?

N95 Masks – For Confirmed or Suspected H1N1 Patients:

- All RNs would be fit tested by an employee who was properly trained to do so;
- Fit testing of each RN by a trained test administrator would a minimum of 10-15 minutes to insure a proper fit and then to review the necessary steps necessitated by testing;
- N95 respirators would be available 24/7;
- RNs who couldn't wear N95 respirators would be issued workable alternatives;
- Surgical masks would be available PRN for both patient and RN protection;
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Exposure –

- Patients would be tested for MRSA and flu upon admission to the hospital.
- Policies would be developed to isolate H1N1 patients.
- Procedures would be developed in the event RNs are exposed to H1N1.
- Policies would be developed to foster improved communication among staff.

Absenteeism Policy – For RNs sick with the seasonal flu or H1N1

- Policy would be developed to include medical care, paid sick leave without discipline and eligibility for workers compensation

Cleanliness

The Hospital would hire additional EVS workers to meet infection control needs.

