

## West Hills Steward Update

During our Bargaining Team and Chapter Officer election in January, we spoke with RNs throughout the hospital. We talked about bargaining and listened to concerns about everything from staffing to training.

Although the hospital's staffing is overall better this year than it was last year, too many times it still falls short. We should be recognized or commended when we work short, overtime, or without CNAs. Instead, we get spoken to about low patient satisfaction scores.

Some units have been staffed better than others but the hospital still needs to take sick calls into consideration when planning — yes, RNs do get sick — and account for the time it takes RNs to implement new policies (transporting patients and skin assessments). Just as important, the hospital should listen to requests for CNAs because that extra set of arms makes a critical difference in patient satisfaction.

Equally important is the issue of training. RNs have been asking for training so that we can better take care of our patients. This is a concern from 6 West to COU, from the ICU to the ER. We also need a training program that would give RNs the skills to go from DOU or COU to ER or ICU. In response, a hospital representative recently told us that our hospital is “not a teaching hospital” and if an RN wants to transfer to ER, for example, he/she must meet the West Hills requirement of one year ICU or ER experience by getting **hired and trained at another hospital**. Really?

We are all trying to improve patient satisfaction scores. It is not ok to point fingers of blame for scores that are not as high as the hospital's goals. We need to work together to address our strengths and weaknesses as RNs and as a hospital, recognizing staffing and training as critical components.

In the coming years of healthcare reform, hospitals will be paid according to the care provided to patients. The hospital can not provide quality care and attain good outcomes by treating staff as disposable. Now is our best opportunity to create a strong, sustainable workforce before we are hit with penalties. Our Union Leadership urges hospital leadership to listen. We remain committed to working on these critical issues.

## Grievance Wins



### Payment for Missed Meal Period

Amanda Hickey, 6 West, (*pictured at left*) was paid for a missed lunch after she filed a grievance! Congratulations, Amanda!

**Remember:** *You have the right to a 30-minute uninterrupted lunch and three 15-minute breaks. If you do not receive an uninterrupted lunch or any one of your three 15-minute breaks, notify your manager or the house supervisor or designee, and fill out the appropriate paperwork.*

### Incorrect Call Off

Christine Uy in 5E Med-Surg was called off incorrectly, she grieved it, and was paid for the day. Congratulations!

Call off order is:

1. Agency and Travelers
2. Per Diem Employees
3. Solicited full- and part-time volunteers
4. All other employee



**Our contract language states:** *In the event that the hospital makes an error in the selection of an employee for call off, and that error results in the employee's hours for that pay period being reduced below his/her documented FTE status, the employee will be paid his/her base rate plus any applicable shift differential for those hours that were inappropriately reduced. In the event, the error does not reduce the employee's hours for that pay period below his/her documented FTE status, the error will be remedied solely by the "bypassing" of that employee the next time his/her name comes up for call off.*



**Please note corrected information in the  
Skin Assessment paragraph below.  
We apologize for the unintended error.**



### **Family Medical Leave and Kin Care**

If you have a chronic medical condition, sign up for FMLA immediately so that when you call off sick, it will not count as an occurrence. Also, when you call in sick, if you are taking care of a sick family member ("kin"), notify the manager/house supervisor as appropriate. Kin care also should not count as occurrences.

### **Report from the Staffing Issues Committee**

**ER** – Kathleen Burke addressed staffing concerns in the ER. The hospital has said they plan to hire travelers to meet the staffing needs.

**3<sup>rd</sup> Floor (Women's)** – Cate Canava addressed staffing to core and the role of the Admit and Charge RNs. The hospital agreed to get back to us.

**Transporting Patients** – The hospital has acknowledged that this creates a problem. Secretaries are being asked to keep track of how many procedures are performed in a day to determine if a Resource RN is required. Keep in touch with Linda Perrin, Karen Ballantyne or another steward if you run into problems.

### **Skin Assessment – Note corrected information:**

The CNO said that the assessment only needs to be done once per shift and as needed. Hospital management said they will clarify instructions and communicate this with unit managers. We hope that this will be clarified as soon as possible.

### **ICU RN Floating to Care for Vented Patients**

Jouse Kuy addressed this concern. The hospital responded that the ICU patients were downgraded and transferred to 4W with an ICU nurse assigned to care for the patients because of COU RN qualifications. The hospital has stopped transferring trach and vent patients from ICU to COU

until COU RNs have been trained on how to handle these patients. The ratio for vent and trach patients is 1:3. COU RNs: If you do not feel comfortable with a trach or a vent patient and/or feel that you need more training, talk with your manager and let Steward Tim Baker know, as well.

### **COU Floating to ICU**

Steward Tim Baker addressed concerns of COU RNs who have been floating to ICU and are taking care of patients with unfamiliar drips, etc. The hospital has said they will provide better training and will continue to address this concern. If this continues to be an issue, let Tim know.

### **Lift Equipment**

The vendor fair has been delayed due to staffing changes. We will keep you updated on plans.

### **Med Boxes**

Thanks to Stewards Susan Farrell and Linda Perrin, the 5E and 5W medication boxes are now off the floor, literally.

### **Our Union Stewards**

**ER:** Kathleen Burke; **ICU:** Jouse Kuy, Jackie Sanders, Tjwana Holt;  
**Cath Lab:** Stella Chavez, Monique Johnson; **NICU:** Donna Anderson, Cate Canava; **L&D:** Elley Langsam;  
**COU (4W):** Tim Baker; **5W (DOU):** Linda Perrin, Karen Ballantyne;  
**Outpatient Surgery:** Susan Farrell

### **Upcoming Dates**

**Feb. 6** — Meeting with Doug Long

**Feb. 6** — Steward Meeting

**Late February** — Labor Management Meeting. Still scheduling. If you have a concern, let a steward know.

*If you have questions or concerns, please speak with a Union Steward or:*

**Union Representative Judith Serlin**  
(213) 247-4584 or [serlinj@seiu121rn.org](mailto:serlinj@seiu121rn.org)