News from the RN Council

2013 DHS RN Chapter
General Membership/
Nurse Delegate/Advocate
Meetings

Meetings start at 4:30pm. Chapter meetings are open to all RN members and all members are encouraged to attend. Additional meetings will be called as needed.

February 13, 2013: LRH/ Small Board Room
(Theme: TUF Orientation)
March 13, 2013: PGHC/Auditorium
April 10, 2013: LRH/ Small Board Room
May 8, 2013: PGHC/Auditorium
June 12, 2013: LRH/ Small Board Room
July 10, 2013: PGHC/Auditorium
August 14, 2013: LRH/ Small Board Room
September 11, 2013: PGHC/Auditorium
October 9, 2013: LRH/ Small Board Room
November 13, 2013: PGHC/Auditorium
December 11, 2013: LRH/ Small Board Room

RN Council Update

By Debbie Wilkes

The New Year has just arrived, and it’s a great time to reflect back on the last year and plan ahead for the future. The RN Council had a very successful 2012. Some of the accomplishments and highlights of 2012 included:

• Lobby Day 101 workshop in February, educating nurses for Lobby Day in Annapolis

• A fantastic Nurses week event – dinner, dancing (who can forget the Duval ROTC joining us on the dance floor!) and the great monetary support from the Silent Auction for The Family Crisis Center in Prince George’s County and The Angels Watch Shelter in Charles County

• The welcoming of our new RN area organizer, Patricia Marthone, who hit the ground running and has not stopped since

• The creation of a Communications Plan with our Communications Coordinator and Web and Graphics Designer that has included the production of our newly redesigned newsletter

• An increased involvement of our nurses in political action and election campaigning

• Work on creating a First Aid program for union events

• Assisting in the development of a Workplace Violence Legislation plan for the 2013 General Assembly

And what does 2013 have in store? While we are currently developing the 2013 Strategic Plan, we know we will be working on the next phases of the communication plan including our website, moving forward with the Workplace Violence legislation, and looking for more opportunities to get each of you involved in the RN area!
1199SEIU RNs Lobby Congress Against Cuts to Healthcare Funding

By Maryam Muller
Laurel Regional Hospital (4C Nights)

Being part of 1199SEIU gave me an opportunity to attend a Congressional Lobbying Day on December 11. The purpose of lobbying was to prevent cuts in Medicare and Medicaid. Among the union members who participated, there were representatives from three states (Maryland, New York and California) and from a number of job classifications, including Housekeeping, Transport, Dietary, and Nursing Departments.

We arrived on Capitol Hill and met with our members of the House of Representatives, including Reps. Chris Van Hollen, Steny Hoyer, and Elijah Cummings. We lobbied against cuts that would take place in Medicare and Medicaid if an agreement was not reached on December 31, 2012.

As Registered Nurses, our job is to coordinate patient care, follow doctor’s orders, and treat patients. Cutting ancillary services, such as transport, housekeeping, dietary, and laboratory technicians, puts more pressure on RNs and takes us further away from patient care. If Congress had not reached a budget deal, $118 billion would be cut from Medicare over the next eight years. This would cost us 13,000 healthcare jobs in Maryland and 700,000 healthcare jobs nationwide by 2021, which would harm patient care and lead to an economic downturn.

Three out of ten children in the U.S.A. depend on Medicaid. Not to mention our elderly citizens would be affected by these cuts the most. I have worked for 16 years as an RN in med/surg and oncology. During this time I saw many patients who delayed their care until the end-stages of their diseases because of lack of health insurance, and we could only provide Palliative Care at that juncture. That’s why RNs must urge our elected leaders to provide the funding that allows us to treat patients better as a country.

Lobbying gave me a chance to be involved in advocating for patients and healthcare workers. I’m pleased to report that thanks in part to the efforts of thousands of concerned citizens and healthcare workers, Congress reached a short-term deal that stops temporarily major cuts to Medicare and Medicaid.

Unfortunately, there will be another fight in Congress very soon over raising the debt ceiling. We will need to be ready to stand up for Medicare and Medicaid, and quality patient care again. Please join us. Contact Patricia Marthone to learn more about getting involved.

The 1199SEIU RN Labor-Management Initiative’s 2012 Nursing Symposium

Cassandra Warren, RN

I’m pleased to share with all of you some of the highlights of The 2012 Nursing Symposium held in New York City on December 5. It was an informative and engaging event that gave participants an overview of programs that will help transform healthcare and allow RNs to lead the way.

Walk to Paris: What an innovative idea to inspire the staff at North Shore Long Island Hospital to improve their health! This effort focused on Body Mass Index (BMI), Blood Pressure, Cholesterol, and Diabetes. Staff gained an understanding of these metrics and how they affected their own health and wellbeing, while setting and tracking goals for walking, a simple physical activity that can greatly improve overall health for more sedentary people. All participants experienced improvement in these areas, and the participants who achieved the goal mileage (3,600 miles, the approximate distance between New York City and Paris, France) were awarded a trip to Paris.

To Save a Life, Save a Career: Most professionals know someone who has a problem with alcohol or other addictive substances. Statistics show that 10 percent of adults are in this category, and the rate may be higher among those with access to drugs. The good news is you are not alone and there is help.

Transforming Care at the Bedside (TCAB): Historically, the main focus of nursing was total patient care – physiological, as well as psychological. Since the advent of modern technology and accreditation requirements of our healthcare facilities, the emphasis has shifted to academic achievements and administrative nursing. TCAB is a positive re-re-evaluation of our role as RNs. It is a joint initiative by 1199SEIU Registered Nurses and Management with the goal of evaluating and implementing changes at the bedside to improve patient care and nurse job satisfaction. To learn more about TCAB visit bit.ly/RNTCAB.

Our Union 1199SEIU and the Affordable Health Care Act: Both provide financial aid and counseling for those who wish to pursue higher education. Ultimately, the goals of both are to integrate academics and practical application to elevate our profession thru optimal patient care.

We were reminded that several New York Area Hospitals are still struggling with the aftereffects of Hurricane Sandy, and staff issues persist due to the closure of neighboring facilities under repair from the storm.

On a lighter note, Beth Israel Medical Center presented Zen Methods to...
reduce stress for healthcare professionals. The hospital employs three Holistic Nurses that provide sessions in Aroma Therapy, Biofeedback, and Energy Balancing. The results are increased ability to focus, a sense of grounded-ness, decrease in errors, and improved patient care.

Dimensions Healthcare System

By Debbie Wilkes

Contract Reopener

The contract reopener for this year resulted in no wage increase. We look forward to the full contract negotiations in the spring (our contract expires April 30, 2013) to improve wages and therefore improve recruitment and retention. The negotiations survey is being put together now - watch for information about doing the online survey. Your input is critical!

Flu Vaccine

We made it through the vaccination period but are still waiting for answers to questions on how our members will be handled who had medical or religious exemptions and exactly how the surgical mask process will be enforced. This will be part of the January Labor-Management Committee agenda.

Staffing

We are seeing a spike in staffing concerns. It is very important that if you are not staffed adequately that you document it on an ADO form and get it to either Lorita Waltz at LRH or Debbie Wilkes at PGHC. We met with HR in early December to do a review of the two-tier level per diem and OCFP programs that we spent over a year putting together. A second meeting with nursing admin was to be set up by HR to finalize the timeline of implementation. No meeting date has been set yet. This will also be on the January Labor-Management Committee agenda.

EMR

Our system continues to move ahead on the electronic medical record development and implementation. We are still awaiting training plans from the computer assessment done by all staff in late summer/early fall. Every nurse needs to make sure that she/he takes an active role in the implementation/learning of the system, so the transition is as smooth as possible. Because the training and implementation phase will require increase in staffing there is some concern about leave requests. We will follow up on any rumors/concerns brought to our attention, but please get it to us as soon as you are aware of a potential problem.

2012 Civista Year in Review

By Gail Kingman

It was a very busy year for everyone at Civista Medical Center. We started 2012 with an expired contract and uncertainty about the future of our union. Together, we built our union back up to be even stronger and ended the year with a new contract and an innovative Labor-Management Project beginning.

After almost eight months of negotiations, on July 1 we were able to ratify our new three-year contract and start a Union/Hospital Labor Management Project to address the issues of our 3rd floor regarding staffing levels/call-outs; it’s the first of its kind in the state of Maryland.

The project involves nurses who work on the 3rd floor, which consist of 3 units (ICU, telemetry, and 3 East, which is an ICU over flow/telemetry), along with Management-selected personnel. It was set up using an outside neutral facilitator, in order to create a plan that will achieve “full or adequate” staffing levels on the 3rd floor units. The participants are collectively working through the data and work processes, and will jointly develop and implement change strategies on these units. The project will result in a pilot program to be started on the involved units with the possibility of moving throughout the hospital.

The Nurses and the Hospital have a shared interest in this project, minimizing unscheduled absences and ensuring appropriate staffing levels on all units. The progress of this project and any solutions developed will be made available to all as they happen, so please contact a Delegate for more information or to get involved.

UMGENT MESSAGE

The Maryland Board of Nursing is moving to Biennial (two-year) renewals, based on year of birth. For all nurses renewing in January 2013 and after, those with an odd year of birth will be renewed for a two year period and pay double the fee. All nurses renewing in January 2013 and after with an Even year of birth will renew for one year at this time and pay the fee for one year. Beginning from 2014, however, those with an even year of birth will renew for the two year period.”

For more information visit The Maryland Board of Nursing Online at https://license.mdbon.org/License/Renewal/RN_Home.asp
Member Spotlight:
Yolanda Muhammed

By Arnetta Perry

Meet Yolanda Muhammed, one of the med/surg nurses at Prince George’s Hospital for three-and-a-half years. She was born in Panama and lived there until she was twelve. She and her family moved here to the States during the country’s upheaval in 1991. She worked as an army medic, obtained her RN at Howard University, and hopes to become a nurse practitioner. She is married with two daughters, aged ten and twelve.

Hospital Committee work is important to her, and Yolanda is on the Products, Professional Practice, EMR, and Unit Practice Council. She is an excellent staff nurse and charge when needed. For Yo, as she’s affectionately known, it was a natural progression for her to become a nurse, because in her home, “community is the focus and helping people is key.”

She is also active in her union and hopes to help promote more autonomy for nurses. Yolanda is thankfully a new face to nursing at Prince George’s Hospital, and someone who will be here to help lead in the future.

Attention DHS Nurses:

Negotiations for our contract are right around the corner and the first step is having your input on the issues important to you. Our contract bargaining survey is available online at this link:

www.surveymonkey.com/s/58NFMQW

We need all DHS RNs to complete the 5 minute survey by February 5, 2013.

Our communications team has been traveling to facilities to meet and greet 1199SEIU RNs.

Take a moment to meet fellow RNs throughout the union who love their work!
Medhanit Kifle, E800, Prince George’s Hospital Center

Alexander Caruso, ICU, Prince George’s Hospital Center

Courtney Hannum, Danielle Jones, and Michelle Shaw, ICU, Prince George’s Hospital Center

Euleta Noone, Cardiac Cath, Prince George’s Hospital Center

Lauren Koepper, Med/Surg, Laurel Regional Hospital

McLean Edejer, Hemodialysis, Prince George’s Hospital Center
Nepal is beautiful – its people, the forests, the hills and the mountains – simply beautiful. It is also where my daughter Debbie, her husband Chandra and their two-year-old daughter Luna live. I visited them recently and would love to share my story.

Nineteen of us led by Debbie, Chandra, and others went trekking throughout Nepal’s hills and mountains for one month. Our itinerary included a hike up and into a deep cave with bats; day-long treks to villages going up and down “hills” (in the USA, they would be mountains but, with Mt. Everest close by, these were only hills). We walked through streams and over rivers on swaying bridges; and climbed along notched logs. Along the way we encountered herds of buffalo, goats, and cows sharing the path. We walked anywhere from 6-10 hours; going up and down 2,000 – 5,000 ft in one day. The age range of our group was 2 to 72!

We split into two groups with our group climbed to an elevation of 10,300 ft. The paths were, at times, extremely narrow with a mountain on one side and a cliff on the other; or drop-offs on both sides. In the forests, we were surrounded by rhododendron and bamboo. We faced thousands of stone steps – wobbly, unevenly spaced, slippery, and endless; trekking poles were a big help. Backpacks carried water, video, camera, food, jacket, hat, medications, sunscreen and most importantly toilet paper. For the most part we used the “great outdoors” as our bathroom or an outhouse. Water had to be filtered. The air quality was very poor in cities and along the roads. The food was simple - usually potatoes, rice, lentils, greens, eggs, chicken and dried buffalo. The views of the mountain ranges and the terraced fields were spectacular!

Usually we stayed in remote villages but we visited two cities – Kathmandu and Pokhara. The streets were filled with buses, cars, taxis, motorcycles, cows, dogs, pedestrians, rickshaws, chickens, bicycles, goats, carts – basically if it had wheels or legs it was in the streets! What seemed like alleys were main streets - without traffic lights or lane dividers, narrow, dark, lined with small shops and vendors wanting us to buy their wares. We all survived everything; even the one man in our group who fell off the cliff backing up to take a picture.

When not staying in Guest Houses/hotels, we visited locals’ homes that lacked a stove/oven or bathroom and consisted of one large room, where everyone slept, ate, etc. You sat cross-legged on the floor, and food was cooked in an open fire inside the house.

The people were so gracious, offering us tea and potatoes and sharing their meager resources. We washed our clothes outside and line dried them. Showers were not always available or warm. The weather was overall very nice but cold in the higher elevations. All of us had a great time and we now have wonderful memories, deep friendships and a great appreciation for what we have in America.
My name is Cynthia. I have been an RN since 1991. I currently work at Prince George's Hospital in the Labor and Delivery Department. I consider myself a baby boomer and a late bloomer.

I always wanted to be a nurse; however, because of life circumstances, I did not complete nursing school until I was forty-one. As a matter of fact, my daughter and I were in nursing school together. When I graduated with my associate degree in nursing; I thought that I was finished as far as required education. I had a career and a good earning capacity. I knew I would continue to learn after retiring from my nursing career; nevertheless, I always thought it would be something recreational, like “cultural anthropology.”

Once I retired, I wanted to continue taking college courses to prevent dementia, and to keep my mind intact. When I became aware that I had benefits through the Training and Upgrading Fund that were established through collective bargaining between Dimensions and the Union, it was a “no brainer.” I had to take advantage of this great opportunity. I’m currently pursuing my bachelor’s degree in nursing, and continuing on to a master’s degree.

To my surprise, I’m LOVING school! I’m learning so much about nursing and how it impacts healthcare. I thought I would be ending my nursing career within three to four years. I realize that furthering my education has opened many more possibilities other than bedside nursing. I have considered management, education, and informatics as future endeavors. I feel empowered by furthering my education. I do not have the same pressure now that I experienced when I was in nursing school for my associate degree. I can take classes at my own pace. I have chosen to take one class per semester for my comfort. I have the ability to attend classes online, or at a college of my choice. For my convenience, I chose to do online courses.

Last, but not least, the Training and Upgrading Fund has been helping to cover the cost, and the reimbursement process has been easy and expedient. Nina and Tiffany have been my guardian angels. What more could I ask for?
The Day We Won the Election

Sherri A. Howard RN
Labor and Delivery, Prince George’s Hospital

It was a joy and honor to be a part of 1199SEIU’s “get out the vote” effort in Virginia on Election Day with my favorite person in the entire world, my mom Demetrius Smith. She was the one that invited me to participate with Weekend Warriors. She even convinced my younger sister to participate. She is one amazing woman.

We had many wonderful experiences during our adventure. One memory that stands out was knocking on a supporter’s door. Her son answered and said, “She’s not home. She’s gone to vote.” We continued knocking on other supporters’ doors; before we left the community, though, we had the privilege of meeting that woman. She was pulling into her driveway, when we thought we’d go over and make sure she’d voted. She said she had voted for the President, but that she was nervous he wouldn’t win. We urged her to make telephone calls to other supporters to get out the vote. She seemed so elated with that idea – that there was something she could do to help.

That experience encouraged us to continue knocking on other supporters’ doors in Loudoun County, a county that was once a Republican stronghold but is now a key swing county in a very important swing state.

It is a great joy to help keep President Obama in the White House so he can continue to work for all of America’s families.

November 6, 2012: A Desire to Serve

Erusa Onukwubiri, RN
Debbie Self, RN

A few weeks before the November Presidential Election, we received a call from our RN organizer Patricia Marthone asking for assistance with the 1199SEIU’s Weekend Warriors program to help re-elect President Obama. We volunteered to campaign on Election Day. We were both uncertain about going because we had not participated in this before. The plan was to visit Virginia and knock on doors.

We left the Landover office with five vans full of excited union members, and headed to campaign headquarters in Arlington, Virginia for a briefing. Our goal was to encourage our fellow citizens who are eligible to vote to go out and perform their civic duty.

The weather was perfect – mild and bright – for accomplishing our goal. Our group consisted of six women. We headed for our assigned area and started knocking on doors. We knocked on more than 150 doors. As the day progressed to evening the weather became cold, but unshaken we went back to revisit the homes of folks we hadn’t been able to contact earlier. The voters we spoke with appreciated our time and commitment. We had good conversations about the need to re-elect President Obama so he can continue to build on his work to create jobs, improve education and healthcare, and more.

We enjoyed the opportunity to serve and work with such an enthusiastic and energetic group of women. We got home late, very proud of what we had accomplished that day. The greatest joy was watching our President win Virginia and the nation. We would gladly do it again because of the great feeling of achievement it gave us.

Get In Touch
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