

# NEWS FROM THE

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**APRIL 2014** 

#### RN COUNCIL UPDATE

By Debbie Wilkes

ne year ago, over 50 RNs from all our facilities came together for an intense weekend for Leadership Development. Since then, we have grown in every area – unit reps, bargaining committees, chapter committees and the RN Council. Those nurses and others since have stepped up to strengthen and deepen the chapters.

**Chapter Building** is a focus that we are working on at all levels in the union – it is part of the education at the regional delegate assembly meetings, and at monthly chapter and RN Council meetings. Why? Because the strength of who we are and what we do is based on our ability to communicate well and work together.

So where do we start? Chapter building begins by identifying the nurses in each of our units who are the leaders and the influential people who can bring the unit together and move others to action. Can one person do all the work that is needed to make your contract a living document – and not just words on paper that are not followed? Absolutely not! It takes everyone in the group to use their special talents to make it succeed. If you think about it, the core of chapter building is unit building, and that requires the teamwork that we all need to do in order to have highly functioning work places. If we can get our units moving, we can build stronger chapters. And that is up to each of us.

The RN Council is in the midst of working on one of our yearly activities that can be a fun start to that unit and chapter building. The success of our annual **Nurse's Week event on May 7** depends on attendance. Come for an evening to celebrate us as nurses and raise monies for a worthy cause. Look inside for more details about this great event!

This year has taken a special turn; we looked for a joyous topic and found that celebrating the first baby of our RN Area Vice President, Jennifer Foster, achieved that goal. The silent auction will raise monies to support the Infant at Risk Program in Prince George's County and a similar infant program in Charles County. So let's get that unit building moving – let's see who can mobilize the most nurses from her or his unit to RSVP to come for the evening event. What better way to bring people together – dinner, music, conversation and helping babies who may turn out to be future





Scenes from last year's RN Leadership Development training.

nurses!

Remember: the evening is free, but we are asking for each person to bring a baby item or package of diapers that will be donated. And don't forget that checkbook for the silent auction. We are also accepting items for the silent auction because raising money depends on having items to bid on. Consider having a unit basket for the auction; this could be a great unit building project!

#### Chapter **Updates**

#### Dimensions Healthcare System Update

By Debbie Wilkes, RN

#### **Contract Bargaining**



Members of the Dimensions bargaining committee have been hard at work for months trying to win a fair contract.

In the last issue of this newsletter I wrote of all the changes that had taken place during negotiations with the Employer's team and how 2014, after many months of bargaining, started with a litany of proposals to change the contract – most in the area of take-backs. Since then we have spent the last two months attempting to find compromise where possible and to prevent chipping away at language that the nurses have fought so hard for in the past in order to deliver the best care for their patients.

We concluded March with a bargaining session. Maybe I should rephrase that: we concluded March with a non-bargaining session. After a year of looking at the needs of the nurses and the Employer, and balancing that with the goal of delivering high-quality patient care, we are at no point of closure. The Employer came in as we waited for what we thought would be their responses to our last counters. What we received was a short statement on their best final offer. Not "best" in our view and not "final," we hope. We do agree on one thing: the process must come to an end, and we need to move forward to work together on the big issues of how to improve quality care and increase revenue. This way is not the way to do it. Instead, we become polarized and further apart.

So what is next? We await a comprehensive document to review and make plans for the next step. Hopefully, we can get back on track to do what is best for the employees, DHS and most importantly, the patients and families we serve. Please contact a bargaining team member (listed in last newsletter) for current updates.

#### And then there is the rest of the work...

Contract bargaining is only one piece of what we do. Representing nurses in day to day workplace problems, making sure that the contract language we do have is followed, and advocating for better patient care continues. And so a few reminders:

- All OCFP summer holiday preference forms were due by April 1
- Review and holiday selection responses are due back to the nurses by April 10
- All vacation requests for regular staff for prime time (May 15 Sept 15) were due by April 1
- Grant responses are due back by April 10.

If you have any concerns please let your Delegate or advocate ASAP, or contact Debbie Wilkes, Lorita Waltz or Regina Barnes (RN organizer).

#### Update: University of Maryland Charles Regional Medical Center

By Gail Kingman, RN

Hello, UMCRMC Union brothers and sisters. A lot has happened since our last newsletter! Administrative Organizers kicked off 2014 with chapter building workshops that focused on building stronger chapters and making members more independent. And early in January, the final revision of the Assignment Despite Objection forms were completed, and each unit in the hospital received the new forms along with education on when and how to file them. Contact your delegate if you have questions or comments about these new forms, or contact me, Gail Kingman, at gail.kingman@1199.org or 301-525-5541.

#### Political Action

In January, attendees at the monthly Committee on Political Education (COPE) meeting sat down with hopeful candidates running for elected office. COPE is a tri-county group of several unions that meets to discuss political issues. Meetings are held on the fourth Tuesday of each month at the American Legion in La Plata at 7pm. COPE has been interviewing political candidates running for various levels of office, and attendees have the opportunity to ask questions of the candidates and listen to their platforms. Everyone is welcome and encouraged to attend these meetings to stay informed of county issues.

Our Legislative Action Day was held in Annapolis on February 27. This annual event gives Union members a chance to speak with the political leaders from their voting districts. Our elected representives should be aware of the issues that affect their constituents. We visited political leaders such as Senator Mac Middleton and Delegate Peter Murphy to ask them to support bills that would help our communities, such as raising the minimum wage. As you may be aware, 1199SEIU supported legislation to raise Maryland's minimum wage. I am happy to say that on April 7, our lawmakers passed the bill to raise Maryland's minimum wage to \$10.10/hour by 2018!

In March, some of our UMCRMC nurses spoke to the Maryland lawmakers about their personal experiences regarding workplace violence. 1199SEIU members have been working with political supporters for almost two years now to ensure healthcare workers are protected while at work, and I'm also happy to report that in March, our lawmakers passed a bill to create standards that will help stem the growing problem of violence against healthcare workers in the workplace! "Thank you" to all the nurses for continuing to tell your stories that will help put protective measures in place for everyone while at work.

#### Nursing Issues Meetings

Nursing issues meetings are held in Human Resources on the second Wednesday of each month at 2pm, and all nurses are encouraged to attend. This is a chance to meet face-to-face with the director of HR, DON, and any manager that may need to attend based on the issue at hand.

During our February meeting, the hospital presented an updated Clinical Ladder Policy. If our Collective Bargaining Agreement (CBA) covers a certain policy, nurses have a right to review any changes to the policy before the hospital puts them into effect. Upon review of this new Clinical Ladder Policy, several nurses discovered that one change in the policy would adversely affect several nurses currently on the clinical ladder. This section of the new policy was brought to the attention of hospital management during the nursing issues meeting. The hospital DON was directed to correct the section that violated the rights of the nurses per the CBA. The corrections were made, and the new Clinical Ladder Policy is now available on the hospital website. Shout out to delegates Teresa Wood, RN and Kathleen Windsor, RN, L&D for catching this policy change and violation of nurse's rights!

Changes in health care and the workforce can be scary. But the best way to overcome fear is to face it and know that we are not alone. Let's remember to stand together as union brothers and sisters, and attend important meetings and events to stay informed and educated!

Remember to visit **www.1199SEIU.org** and check out the Maryland/DC and RN Council pages for information about union activities and events.

# DON'T MISS ANOTHER NEWSLETTER! You can find archives of all RN Council Newsletters

1199seiu.org/rn\_council\_newsletter\_archives

online at



#### RN Regional Council Update

By Debbie Ali

The RN Regional Council of 1199SEIU UHWE meeting on March 19 in New York was as enlightening as ever. This twice-yearly meeting joins the RN councils from all the regions in 1199SEIU.

All regions had the chance to compare experiences and exchange ideas on how to meet them:

- Massachusetts is promoting diversity, and pushing nurses to get their BSN and keep involved with the union.
- Western New York is educating nurses of the need to be politically active, as being politically active can only advance the nursing profession.
- Upstate New York is working for safe staffing, which protects both patients and nurses.
- Downstate New York is focusing on chapter building as they prepare for major contract negotiations. Nurse involvement is critical to the success of our union.
- The nurse in Florida, which is a "right-to-work" state, is working hard trying to organize nurses. In a hostile environment they are pushing for a quality work environment.
- Our area, MD/DC, is focusing on leadership training and staying involved in the political process. Our own Lorita Waltz, RN from LRH
  attended the state of the union address as a guest of Congresswoman Donna Edwards. We also reported that at lobby day in Annapolis we
  addressed raising the minimum wage and work place violence in healthcare.

The topic of workplace violence was front and center at this meeting. Brookdale Hospital in New York had one of its RNs, 69 year-old Evelyn Lynch, viciously attacked by a patient that she was discharging on February 7, 2014. As of our meeting she was still on a ventilator and had undergone brain surgery. We heard from Steve Schrag, OSHA Director for 1199SEIU, about how they used the incident to organize the nurses into gaining better understanding of workplace violence and how to move forward to prevent it. We then heard from Wanda Johnson RN, MSN, who addressed strategies for advocacy in confronting workplace violence in the nursing profession.

Nurses have a duty to report violence to management. Management has a duty to report it to OSHA. There are many safeguards that can be put in place to decrease the possibility of workplace violence but the key is that the employees are involved in any viable workplace violence prevention program. As EVP for the RN division Norma Amsterdam would say, "Stay engaged, stay active."

#### ADO's and YOU at DHS

By Regina Barnes, DHS Administrative Organizer

As your new organizer, I am committed to fulfilling my regular responsibilities, and I have two long-range visions to empower our union: 1) helping nurses become more politically informed and involved, and 2) encouraging nurses to see the value and power of the Union contract.

For this issue, I'd like to tackle the "Assignment Despite Objection" (ADO) form. Since starting my work in December, I've learned the history of the ADO form, and many have asked, "Does the ADO form matter?"

I would like to answer that question with a resounding "YES!" **The purpose** of the ADO is to protect your license in the event of an unfortunate outcome that occurs during your shift. Our contract includes a list of staffing ratios that you, as members, felt would provide the highest safety and care for your patients for average acuity. Anytime you feel that the ratio is too high, OR that the acuity of the patients is too high to substantiate the assigned ratio, OR you do not have the appropriate ancillary staff, you are encouraged to fill out the ADO form. But this is NOT the first step.

The first step is to communicate to your manager, supervisor, or charge nurse (if that is not you!) that you feel the assignment could put you and/or your patients at risk. If this communication does not result in a staffing level adjustment, it is then that you should fill the sheet out as soon as possible. If you're not able to fill it out during your shift, I strongly recommend filling it out within 24 hours of the shift's end.

When you've filled out the form, send the original to Debbie Wilkes (NICU PGHC) or Lorita Waltz (at the Infusion Center LRH). Keep a copy for yourself, and fax a copy to your Administrative Organizer (AO) at (301) 341-0657. The chapter retains originals for 21 years—this is the longest period in Maryland that a nurse can be sued (MCH which has the longest timeframe for suits). The copy faxed to the AO is filed in the Union office and is forwarded to Debbie Wilkes (in case the original has not been received yet so it can be processed).

What happens from here? Debbie will forward a copy to the appropriate CNO (or in the case of Bowie, to the VP over Bowie). The forms have historically then been routed by the CNO's to the director/ manager for response and sent back to the CNO. REGARDLESS of the director response, the form is your account of the shift and does NOT diminish its' importance. If your director calls you to discuss it, stick to your account—but if the conversation becomes negative or accusatory, stop the discussion and contact your Delegate, Lorita or Debbie, or me.

These forms have been instrumental in contract negotiations to maintain and improve our contract's staffing ratios. I have been told of times past when, after trying to dialogue with management on staffing and getting nowhere, a stack of ADO's was presented to visually drive home the Union's point. Ultimately the form can serve a point of protection should there be an incident that may lead to discipline or worse.

So as you can see, ADO's do make a difference. You can find the ADO by asking your unit Nurse Advocate or Delegate, or you can find it on the 1199SEIU.org website: go to the MD/DC region and click the RN Council link. If you have any additional questions about ADO's, feel free to call or text me at (301) 520-8433, or email me at regina.barnes@1199.org. If you have any suggestions for future topics, please let me know.

## Nurse Alliance Leadership Committee Report

By Linda Bock



The Nurse Alliance Leadership Committee (NALC) met on January 24-25, 2014 in Las Vegas, NV. Nurses from around the country came together to share their experiences working to strengthen the RN voice within SEIU and in partnerships.

We heard from SEIU President, Mary Kay Henry. She spoke of the nurses' help to deliver on the promise of the Affordable Care Act (ACA) and was impressed by the incredible work continuing to be done in each state expanding Medicaid, and educating healthcare workers and the public on the benefits of the ACA.

Ms. Henry discussed the deepening crisis for all working class citizens, and the widening gap between the wealthy and the middle class. She strongly supports measures to ensure that the well to do pay their fair share and to expand the power of working people. She noted that nurses are at the forefront for positive changes. Ms. Henry wanted to give nurses with the "Perseverance" award. She reported on the success of the Nurse Alliance conference held October 2013 in Pittsburgh, PA., with close to 400 in attendance. The overall responses from your evaluations were strongly positive and with objectives met as outlined by the Nurse Alliance.

During the conference, we were updated on the ACA: to date 6.3 million have signed up for Medicaid; insurance for 3 million young people under the age of 26; and a current total of 12.3 million insured through ACA. SEIU members have contacted over 1 million people to sign up for the program. Opponents have spent \$500 million to try to defeat the ACA, including 40 attempts to have it repealed in Congress. It is expected that these attacks will continue, and although the law isn't perfect, the majority of citizens do not want the ACA repealed.

Much of our time together centered on discussing a previous agreement between California Nurse Association (CNA) and SEIU that expired December, 2012. Although there has been a somewhat acrimonious relationship between NALC and SEIU IEB, and NALC members and CNA, the end result was a vision of a potential partnership with the

CNA to strengthen the voice of all nurses within the healthcare industry and in politics; to organize more nurses; and use our union dues more efficiently and effectively. Together we can work to advocate our common issues and build a stronger nurse coalition.

A partnership will include NALC representation with co-leadership and SEIU RN's remaining under SEIU no matter what. NALC will have input on any agreement between SEIU and CNA including review of agreement before finalization and seeking opportunities to involve other nurse organizations in partnership. The members left feeling heard and hopeful in working with SEIU leaders and other nurse organizations to promote nursing on every level.

It was a wonderful meeting, and I am thankful for the opportunity to work with nurses from across the country. I am grateful for the support of 1199SEIU UHWE so that I can be a voice for the Maryland/DC nurses!

Nurses have the most trusted voice of almost any industry, and we continue our efforts in promoting good jobs with competitive pay; advancing safety and quality; being heard at all levels; building strength and creating opportunities for growth; and engaging all workers to have a voice in the direction of healthcare. We are working to create coalitions that carry out our goals by working with strategic partners, academic institutions and allies to address disparities; developing long-term investments in workforce-centered models that improve quality of care; and creating new models that are innovative and expand current projects of "best practices" that focus on prevention and wellness.

### Taking Advantage of the TUF for Higher Education



Mr. Irudaya Premraj is an RN working in the Recovery Room (PACU) at Prince George's Hospital Center. Having joined as an RN at Med-Surg floor in 2002, he has worked in a variety of roles: preceptor, charge nurse, and assistant department manager.

In order to get more experience in critical care, he moved to PACU in May 2012. Premraj has always had a passion for nursing, with emphasis on patient satisfaction and safety. He likes to help patients and his colleagues at all times. He functions as the unit representative for the performance improvement (PI) committee as well.

With help from funds from the 1199SEIU Training and Upgrading Fund (TUF), Premraj completed the Master of Science in Nursing (MSN) in the Executive track, with honors, from Chamberlain College of Nursing in 2013 and graduated in 2014 in Columbus, OH. Premraj currently holds specialty certification as a Certified Medical Surgical Registered Nurse (CMSRN) from the Academy of Medical-Surgical Nurses (AMSN), and he is working on getting certification in nurse executive specialty from the American Nurses Credentialing Center (ANCC).

Premraj strongly believes that higher education can help nurses develop critical thinking and better communication skills, as well as openness to new ideas and new models of care—resulting in the highest possible standard of patient care. Premraj takes this opportunity to wholeheartedly thank the TUF for motivating and promoting the educational needs of all 1199SEIU nurses.

#### It's Not Easy to Pass a New Law!

By Kim Perkins RN



RNs Jo Samrow (left) and Kim Perkins (right) testified last year to help pass the Safe Care Act and protect healthcare workers.

Over the last two years, we've been trying to pass a law to protect workers in the health care industry. Through two legislative sessions, many have testified about workplace issues involving violence. Over those two years the bill has been renamed and, to some extent, diluted. It's important to remember that what you want and what is best for the community is not always the vision of our legislators and those who oppose what you'd like to achieve.

Our original vision was to have a bill similar to a one that was passed in New York, where assault on a registered nurse is a felony. What we finally achieved was legislation termed the "Safe Care Act."

#### The Safe Care Act

Our bill presents preventative, employer-based solutions to workplace violence. The bill gives facilities the versatility to set their own workplace violence policies. There are four core pillars to the bill (all of which have been promoted by OSHA as solutions to workplace violence):

An annual comprehensive violence risk assessment and constant recordkeeping

- Workplace violence prevention committees
- Annual violence prevention training and education
- A post-incident response system

I'm proud to say that our hard work and consistent efforts led to the passage of the Safe Care Act. Last year's session saw the bill die. This year's session passed it and now is awaiting signing by Governor O'Malley.

It was time-consuming to see this bill moved forward, but having it pass makes it all worthwhile. Nothing important or worth achieving comes easy. We—the Union—must stand strong for those ideals that make our communities better and safe.

A special thank you to Emily Yelverton, Desmond Serrette, Anna Oman, Pat Lippold, Gail Kingman, and all the others who saw this bill through.

#### State of the Union

By Lorita K. Waltz



Lorita K. Waltz (right) smiles with Rep. Donna Edwards (D-MD) at the State of the Union address.

January 28, 2014, was a night to remember. I attended the President's State of the Union address. The evening started off being greeted by Congresswoman Donna Edwards' press secretary and being escorted to her office in the Rayburn Office Building. I briefly met with the Congresswoman and talked about my experience of applying for my health insurance through the Affordable Healthcare Act. I actually had just successfully navigated through the website with my husband earlier that day. A worker in The Governor's Healthcare Reform office called me while we were on the site and offered her assistance. While in Congresswoman's Edward's office, I gave a phone interview to The Washington Post regarding my experience in obtaining my health insurance that day.

Once the interview was done, I attended a reception hosted by Former Speaker of the House Nancy Pelosi. I met many other Congressional Representatives including a former SEIU leader. I took pictures with Congresswoman Edwards, Pelosi, and Governor O'Malley. Once the reception was over, we made our way to the Gallery. Congresswoman Edwards made her way to the floor, while I checked my cell phone for security purposes and went to my seat. The room was filled from every corner with everyday people like me, a wounded Military serviceman (whom was recognized by President Obama), and Willie Robertson and his wife from "Duck Dynasty."

I felt honored and privileged to be in the room that night to hear my President speak. As the President spoke about the Affordable Care Act, I applauded and reflected on the fact that I had done my part in what the President had asked that night. He asked that we all help get Americans covered. Not only did I get health care coverage for my children and me, I shared my story and experience with others in hope that they too would not give up on the system/website glitches and get coverage by the deadline.

I've kept my ticket from that night and have my pictures and clippings from the newspaper article to remind me of that night. It's not one that I'm soon to forget.

#### SEIU Legislative Action Day 2014

By Cassandra Warren, RN

As a new Delegate at 1199SEIU, my experiences have been educational and inspirational, and have definitely have raised my level of awareness to the wide range of political influence on our daily lives. This legislative day was not just with our 1199 Local but included all the locals in the SEIU Maryland State Council – putting the power of all of SEIU in Maryland together and giving all of us a better perspective of the issues facing our union sisters and brothers in various work settings.

Each local advocated for specific issues, and 1199 specifically advocated for the Maryland Minimum Wage Act of 2014, which will increase the state minimum wage to \$10.10 an hour by 2018 and ensure the minimum wage keeps up with cost of living.

I was part of a group of PGHC/LRH nurses (and our Administrative Organizer Regina Barnes) that was warmly received by legislators as we discussed our concerns for the bills to be voted on by the 434th Session of Maryland General Assembly. We were assured of their involvement and commitment to vote to pass these issues into law.

I later received an email from the office of State Delegate Tawanna Gaines informing me that an amended minimum wage bill passed through House Economic Matters Committee on March 3. Ultimately the Maryland General Assembly passed the bill on April 7 by a vote of 87 to 47.

As we have also been in the midst of difficult contract negotiations at DHS, we took the opportunity to express our efforts in negotiations with DHS Management to renew our contract.

As one PG County State Delegate said, "Our main focus is the new hospital, and failure is not an option." To my mind as an experienced and patient focused nurse, entering a new facility with satisfied staff is a positive foundation in the blue print of success.









RNs joined 1199 brothers and sisters, and others from SEIU 32BJ, SEIU Local 500, and SEIU Local 400 in Annapolis for the SEIU Maryland and DC State Council Legislative Action Day on February 27. Caregivers from across the state met with their State Delegates and Senators to discuss issues of concern to workers, patients, and families.

We closed out the day with a reception, and an address from SEIU-endorsed gubernatorial candidate, Lt. Governor Anthony Brown.



you are cordially invited

Wednesday, may 7, 2014

Join us at our annual Nurse's Week celebration Honoring Professional Nurses in Maryland!

#### 2014 Nurse's Day

Lorita K. Waltz

Wednesday, May 7, 2014 is not too far away! Make sure you're off, and RSVP to Lenny at the Union office to attend.

This year's event will be as exciting as ever. The Infants at Risk Program for Prince George's and Charles County will be the benefactor from this year's auction. So bring your checkbook (or cash), your appetite, and your dancing shoes for a fun-filled evening as we celebrate nurses at The La Fountaine Blue in New Carrollton, MD. Invitations have been mailed, but if you didn't receive one, you're still invited!

Call the office at 301-341-0000 or let any RN Council Member know you're coming, and tell us if you or someone you know would like to donate an item for the auction. The time of the event is 6-10pm.

Hope to see you there!

#### Get In Touch

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