

Danbury Nurses' Union Local 5047

UPDATE 47

AFT Nurses' and Healthcare Professionals, AFTCT AFL-CIO

SEPTEMBER/OCTOBER/NOVEMBER/DECEMBER

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What were the results of the Unsafe Staffing Petition?

Staffing of each unit has been very challenging this year. Rather, I should say "Lack of staffing ". There has been a marked increase in the number of unsafe staffing forms, from all Departments. Some forms even signed for the first time by physicians. High census and lack of staff resulted constant Mutare texts. Staff has been working multiple doubles. High RN/Patient ratios have resulted in much OT. Nurses have become emotionally fatigued and exhausted. Action was needed, as this affected all departments.

A petition regarding unsafe staffing levels which effects safe patient care was developed. Multiple departments and various staff from all departments signed this petition. Many have questioned the effects and results of this petition. This petition and a letter from Unit 47 were submitted to Management during the June Labor Management Meeting.

The petition was taken very seriously, as it effected every department. I am only able to speak for nursing related staff, as this is the information I am privy too. The Hospital has held a few Hiring Day's (interview and hire on the same day). During July and August 15 RN's, 8 GN's, 38 PCT's, 2 E/PC Tech and 1 monitor tech have been hired. We have been informed that there will be more Hiring Day's in the near future. PCT orientation is being held weekly. RN orientation is held twice per month. We will still continue to feel the effects of being short staffed until the new staff completes their orientation.

Unit 47 would like to thank all staff who signed this petition. Strength shows in numbers. We will continue to fight for proper staffing levels and keep patient safety our priority.

In Solidarity,
Tiina Hawley VP

Below is a copy of the letter that accompanied the Petition sent to Management.

Dear Dawn and Ann Marie,

This petition became necessary when Danbury Nurses' Union reviewed the message of NuVance Health. The "promise to our community- our shared purpose and values that will distinguish us as a destination of choice for patients, providers and employees". NuVance needs to provide reasons for staff to remain here. We have top talent and need to retain the employees that know the patients in our community. Employees are leaving this organization at a rate I have not seen in the 19 years I have worked here. Taking care of employees is a very important aspect of the total package. Satisfied employees provide a happy environment of respect and want to do more to help their employer. Understaffed, over worked and stretched-to-the-limit of breaking employees feel moral injury. The rubber band of our employees has been stretched too far. Nurses need to have proper rest and meal breaks. This is not happening. It is the employers' responsibility to provide coverage for nurses meal breaks. In order to care for our patients, we need to be cared for as well.

The nurse/patient ratios and patients acuity is too high with the provided head to bed staffing. The Summer is here and nurses vacations as well as nurses resignations and retirements have an added challenge to staffing. This petition for adequate staffing includes many employee signatures that are the front line workers caring for our patients. In order for our patients to receive exceptional care and education, we need more staff. We have been submitting unsafe staffing forms and over the past 6 months, things have been worse than ever. Nurses do not have time to properly do patients teaching with regards to diagnosis, medications, ambulating patients and also documentation.

The high acuity and inadequate numbers of ancillary staff and nurses does not allow for a therapeutic and optimal work environment. The past 2 months have been even more challenging for the front line staff. I am requesting that a bonus be provided to all of the staff that has direct contact with providing care to our patients. Allow the hospital to retain the current staff with a monetary gift to show gratitude for a job well done. The staff has done an amazing job with little resources although the adrenaline is depleted. NuVance is a business of caring for patients and bonuses are acceptable. Remember that Cerner bonus that was presented to people who did "above and beyond"? That is the front line staff presently.

Danbury Nurses' Union wants NuVance to be successful. The block assignments are working if the staffing is adequate. The lack of nurses causes a nurse to be involved with patients in 2 blocks which further takes this nurse away from care during the rounding in 2 blocks. The case managers would benefit the patients if they were present during this time. The nursing assistants that are caring for 10 to 14 patients is horrible. These individuals are working so hard that even patients families are making comments about the lack of time nursing assistants are in the room with their loved ones.

The daily Mutares are causing nurses to feel guilty having time off to enjoy their own families. The care taking quality does not leave a nurse. The role of the caretaker is always present. The names are written to improve staffing levels and "elevate the care we provide and keep our care personal".

Respectfully Submitted,

Janice Stauffer RN,BSN

Collaboration in the Family Birth Center

The Labor and Delivery unit at Danbury Hospital has been undergoing many changes and difficulties over the last few years. We struggle with the same issues that our fellow nurses system-wide also struggle with- a clunky Cerner system, equipment issues and staffing crises. A huge restructuring in our management team meant the loss of dear colleagues, trusted mentors and supportive leaders. We felt rudderless through a period led by two very different “travel” managers, until we welcomed a completely new management team last year. This has made for some interesting and challenging times for us. In a unit that, formerly, rarely had openings, we now find ourselves in a position where several valued and experienced nurses have left us to pursue other avenues. This exodus leaves us in a quandary of staffing on our night shift. So, in a crisis, great minds have to come up with great solutions. In a collaboration between senior manager and CNO Dawn Martin, Union president Janice Stauffer and input from all Labor and Delivery nurses, we are looking at novel ways to address this concern. We are encouraging questions and feedback from all staff and striving to come up with a fair and equitable short term solution in the form of a MOA (Memorandum of Agreement). We are encouraging all nurses to think outside the box and to consider every avenue. Dawn has been actively listening to and trying to understand our concerns and this feels very hopeful to us. It may just be a “Band Aid” of sorts, but it will be a collaborative, considerate and creative Band Aid. And isn’t that what a shared governance model should produce!

By Chris Schilling RN, Union Liaison FBC

Your Contract/Negotiation,

Did you ever read your contract, the “Red Book”? Do you know what’s in it?

A long time ago, 35 years to be exact, I was a new RN. A very educated and strong nurse, Dolores Oestricher (rest her soul), told me to go to nursing negotiations. I didn’t know why, but I went anyway. I understood very little, but I learned so much. I read the contract and I was amazed by its value and how it was the result of the negotiations. I went to future negotiations and continued to learn. I became the Union representative and now I am the liaison for inpatient behavioral health. Most importantly, I learned that a negotiating team puts in long, hard hours to get us the language in the contract and benefits that are fair and well-deserved! The moral of the story is that we have a negotiating team that needs our support and input prior to and during the negotiations. This I learned from Dolores. Please attend the pre-negotiation meeting on Tuesday, September 17, 8 AM – 1 PM at the Union Office. Plus, starting February 2020, you can attend the formal negotiations (place and date to be announced).

-Marie Athans, RN BC

Liaison Inpatient Behavioral Health

New Concepts in the ED

One thing that is constant is change. As nurses we have seen many changes in our practice over the years. From Team Nursing to Primary Nursing and back again. For example, nursing is a fluid environment adapting to better practices and new regulations.

Ever changing, the latest concept in the ED is the creation of the Pit Crew - Practitioner in Triage. Having the provider up front is the latest tool in the box to facilitate through pit, moving the patient through the ED in the shortest period of time.

That provider on the front end is able to provide a brief assessment and place orders for diagnostic testing and initial treatment. So it is that the pit crew includes the support staff of an RN and Tech to accomplish lab draws, IV access, and med administration should patients be waiting for an available bed in the ED. Those who can be treated on the spot in Pit are able to be discharged without entering the main arena.

Providing this resource on the front requires the shifting of resources on the back end. This has resulted in the increased staffing ratio of nurses to patient from 1 to 4 or 5 to 1 to 5 or 6. Theoretically that nurse has had the assistance of work already done by the pit crew. In addition, the altered staffing ratio has provided for the addition of a "Resource Nurse" whose function it is to decompress that tasks of the bedside RN as needed.

The Tech ratio is to change to match to 1 with an RN. As of this writing we await the full commitment of staff. In the meantime, we all rise to those expectation placed upon us. In general, we are lucky to get our meal break and we go home tired and sometimes hurting.

Staffing will get better is the elusive promise on the horizon.

Elizabeth Ryder, RN, ED

TIME FOR ELECTIONS FOR UNIT 47 POSITIONS:

November 19th, 2019 elections will be held in our Union office 8am till 5 pm for the roles of Vice President 1, Vice President of Grievances and Vice President for Communications and Technology. As per our Constitution, these positions are held for 2 years and then reelections occur on the odd years.

Please view our Constitution online on our web page at <http://unit47.ct.aft.org/unit-47-constitution-and-bylaws-proposed-changes> or come into our office to see a hard copy. The Duties are listed and with our negotiations in 2020, we want to have a full complement of union executive board members.

If you are interested in running for any of these positions, please email the union office and in the subject line put Attn: Nominating Committee.

More information will follow, this is just getting the important information out in our newsletter.

In Solidarity,

Janice Stauffer RN, BSN



Why is Mary Consoli Running for Office?

I am running for the Danbury City Council Representative in the 3RD Ward, because I feel I can make a difference. What can one person do? Start to move mountains!

Look at Rosa Parks. Look at Martin Luther King, Jr. Look at Thomas Edison. Look at Clara Barton, Florence Nightingale. My point is, one woman, one man, one RN, one worker can make a difference. Can YOU be the one? I have been recognized as a community and union leader, but I did not accomplish anything alone. I only started the ball rolling and others helped to keep it going. I am running to help make a difference in Danbury, and I need your help. Join with me to make change happen.

You CAN be the one.

I want to improve our public schools, roads, traffic flow and environment. There is global warming.

I want to stop increases in:

Drug costs

Medical Insurance

Opioid overdoses

Gun violence

All these issues do have an impact at the local level, they are not just national or state issues. They are OUR issues. I believe in workers' rights which are human rights for all.

JOIN WITH ME TO MAKE CHANGE HAPPEN.

There are two Labor to Labor walks in Danbury for the Third Ward.

September 14 and October 5, 2019—9:00 am to 1:00 pm.

Meet at the Local 901 CHCA Office on Shelter Rock Rd.

We need to unite to make change happen. Here's to Unity and a victory on November 5, 2019!

For more information and to help with my campaign contact me at mconsolii3ward@gmail.com.

Thank you,

Mary

Committee Participation

Members are needed to participate in the different committees that help make up our Union. Members are needed for the following committees: Finance, Elections, Community and Political Engagement. Below you will find a description of what each committee membership entails. If you are interested in participating in a committee, please email aft5047unit47@gmail.com with the subject: Interested in (what committee you would like to participate in) committee. Remember, participation counts towards your clinical ladder. Thank you.

Danielle Paravati RN, BSN

VP Communications & Technology

ARTICLE VII: COMMITTEES AND DUTIES

All committee members must be members in good standing

Section 1: Negotiating Committee

- a) Shall consist of no less than six (6) members of the Executive Board and Delegates, shall be representative of services and shifts in the hospital
- c) Shall be appointed per formal written request by the 1st Vice President with the consent of a majority of the Executive Committee
- d) Shall negotiate the contract and develop contract campaign strategy.

Section 2: Grievance Committee

- a) Shall consist the Vice President of Grievance and 2 members.
- b) Shall be appointed by the Vice President for Grievances with the approval of a majority of the Executive Committee and shall be representative of services and shifts at the hospital
- c) The Vice President of Grievance Committee shall report to the Executive Committee and the membership at all regular meetings and at special meetings, if appropriate.

Section 3: Finance Committee

- a) Shall consist of Treasurer and not less than two (2) members who are appointed by the President with the approval of a majority of the Executive Committee and shall be representative of services and shifts at the hospital
- b) Shall assist the Treasurer in financial operation of Unit #47
- c) Shall prepare an annual budget for presentation to the Executive Committee.

Section 4: Elections Committee

- a) Shall be appointed by the President with approval of a majority of the Executive Committee
- b) Shall conduct elections in accordance with election policy
- c) No candidate for office can serve on the Elections Committee.

Section 5: Community and Political Engagement Committee

- a) Shall be appointed by the 2nd President with approval of a majority of the Executive Committee
- b) Shall be representative of services and shifts of the hospital
- c) Chairperson shall report to the membership at all regular meetings and at special meetings, if appropriate
- d) Shall be responsible for outreach to the broader community and for overseeing the union's work in coalitions with allies
- e) Shall be responsible for the political education of the membership
- f) Shall be responsible for the implementation of the endorsement procedure and shall report all recommendations to the Executive Committee
- g) Shall be responsible for the election campaign activities
- h) Shall be responsible for working with elected officials at a local, state, and national level in order to communicate the union's goals and objectives through legislation.

Section 6: Other Committees

Other committees shall be appointed as needed by the President with the approval of a majority of the Executive Committee.

At the end of their terms of office, all outgoing committee chairpersons shall turn over to the incoming president all files, records and materials for distribution to incoming chairpersons.

Ben's Bells

On August 6th, I attended the "Ben's Bells Kind Colleagues Program session at 4 pm that was offered by Danbury Hospital. There were 3 sessions and I do hope all of you were able to enjoy one of these free hour seminars. The speaker was Jeannette Mare' and is the Founder and Chief Kindness Officer of the Ben's Bell Project.

This workshop revolves around practicing "intentional kindness". There is a difference of being "Nice" and "Kind". This speaker was able to eloquently describe these variations and I hope to continue to use her unique approach. This culture of treating people with kindness is what we can do at Danbury Hospital. Everyone is under so much stress and this workshop could not have come at a better time. The takeaway for me is that people know the Golden Rule: "Treat people the way you want to be treated". However, the Platinum Rule is: "Treat people the way THEY want to be treated". This means what may make someone happy may not be what makes you happy. Listen and find out what these individuals want. I think of this now when I am working with my patients and coworkers. I ask: "What would you like to happen?" Sometimes it is not easy to guest. Asking makes this clear by both parties. I loved that this "KIND WORKSHOP " reduces stress and leads to improved physical and mental health. The practice of intentional kindness has a positive impact on all of us"!

Jeannette Mare' suffered a tragedy of her son dying at a very young age. Jeannette developed this program of making Ben's Bells to honor her Son, Ben. Jeannette travels from Arizona to speak at schools and other organizations that want kindness to flourish. These parts of the Ben's Bells are made by many people all coming together and these bells are then strung together. These bells cannot be purchased, they are gifted to people. Danbury Hospital made many parts of the bells to be put together and given away. Jeannette planned to do this project for one year for healing, and it has been going on now for 15 years. Kindness is a wonderful way to show caring for each other. Please look up the history of Bens Bells and enjoy this amazing woman and her project.

Kindness can be contagious,
Janice Stauffer RN, BSN

Committees at Rocky Hill

AFT Danbury Nurses Union Unit 47 5047 has many wonderful assets to discover. I spend time in the Rocky Hill office and would like nurses to know about the wonderful committees that are available to learn from and bring back to make our union stronger.

Please look at this list and let me know if you are interested in attending any of these meeting. I go to many of these and I value the information and we are so fortunate to be able to have such knowledge at our AFT CT Office. Most of these Committees meet at 5 pm till 7 pm at the Rocky Hill office 35 Marshal Road Rocky Hill CT 06067.

LPAC Political Committee
Health Care Committee
Social Justice Committee
Community Engagement Committee
Communications Committee

There are other events that are also offered at this Rocky Hill Office. I am on the Executive Board of AFT CT and I am one of the 24 members with John Brady and Jan Hochadel. I cannot tell you enough wonderful things about the people that work in Rocky Hill at the AFT CT Office. This is a place you are welcome to attend for any session as a dues paying member. I do forward many things to our members and AFT CT does as well. Please be sure to take part in the membership discounts offered as well.

Our contract is up for renewal and I want everyone to know we all need to work together to make a strong contract. Please plan to attend the Organizing Training session on **September 17th** from 8 am till 1 pm. This is at our union office 30 Main Street Danbury CT in the Executive Tower Office building. Lunch and Breakfast provided. A flyer will follow so please save this date. With all of us working together, we will earn a strong and fair contract.

Thank you,
Janice Stauffer RN, BSN

Dr.Nicastro Speaks

Tuesday July 16th, 2019 I had the pleasure of listening to Dr. Jeff Nicastro speak to union members on the vision of Nuvance Health has for Danbury Hospital.

Dr. Nicastro was a wonderful speaker who gave me a sense of hope for improvement for surgical patients care. Dr. Nicastro came to Danbury Hospital 6 months ago from Northwell Health. As the head of surgery he said that the vision Nuvance Health has is to use Vassar Brothers Hospital in Poughkeepsie and Danbury Hospital as the “Anchors” for its system of 7 hospitals that will serve 1.5 million people. Dr. Nicastro said that Danbury Hospital is currently a “High Functioning Community Hospital” but hopes to have it evolve into a Tertiary Care Center.

His acute care model for surgical patients includes hiring expertise staff managed not by Intensivists but rather by a surgical care team which includes –Trauma Surgeons, Surgical PA;s along with our teaching residents/interns currently there are 3 trauma surgeons but plans are being made to increase that number to 4 in the next year. Currently the census of surgical ICU patients average 4-5 but is expected to increase because of newer procedures being introduced as well as the expansion of neurosurgical cases done by Drs. Shahid, Batson and neurologist Dr. Marcus.

He states that “complex surgery is the financial engine of our hospital”. He touched upon the collaborative approach between surgeons with other specialty attendings (GU, medicine, pulmonary) as well as our nursing staff. Dr. Nicastro is a nursing advocate who considers us to be his partner in providing care. He advocates for concrete, concise communication between nurse and the medical team. He quotes his #1 rule of “Nicastro Rules” Go see the patients especially if the nurse asks that you come.

His background includes 4 years in the Navy which he stated provided him with valuable life lessons. He states military personnel respect the chain of command but it is leadership that should respect down the chain of command. What does this mean to the bedside nurse at Danbury Hospital? Have concise communication with the surgical team. Are your concerns up the chain of command? Ask the doctor to see your patient - if you do not get an adequate response call the chief or attending. He assures us he is available by phone and will listen to our concerns. Dr. Nicastro supports safe staffing and reasonable nurse/patient ratios. In this age of electronic medical records which are task driven, we need decreased patient ratios to care for these complex, surgical patients that have higher acuity. We must maintain our goal of providing positive outcomes.

In closing, I would like to thank Dr. Nicastro for sharing his vision with us. I was enthusiastic by his words, by his support for nursing staff and by his passion he has towards his patients. After all, it's what Danbury RN's want also.

Sincerely,

Jeannette Schriber, RN 12T

Looking Forward to the Next Contract

As we approach the coming year, please be reminded that our current Nurses' Contract expires on March 31, 2020. The New Year also means that a few more of our maturing colleagues are preparing for retirement. To the young RNs, this is the time to step up and be involved. Your predecessors have spent many years working on a contract that benefits each and every member of our bargaining Unit.

All of us should be well-versed on the provisions of our contract, as well as the current HR policies; otherwise, people will miss out on some very important information which can directly affect both pay and benefits. Examples:

Article VI Section 5 on Page 11 Extra Night Shift Bonus: You will only get the \$200 bonus if you work an extra night shift over and above your control hours. So, if a day or evening RN switches her schedule or volunteers to work the night shift as part of her weekly control hours, she will not receive that extra \$200 but will be thanked for having the good heart and intention to help out.

Article XIII Section 5 on Page 25: Reimbursement of \$30 per year for wearing slip-resistant footwear. Please submit a copy of your receipt with your name and clock# to: Nursing Administration c/o Felecia Sullivan

Article IX Section 1c on Page 13: The Grievance Process: Everyone should be aware that the Grievance Process is a lengthy procedure and follows specific timelines. A grievance that had to be advanced for Arbitration in front of a State Appointed Arbitrator could take as much as two (2) years before it could reach a resolution. Anyone who is summoned by the manager or supervisor for an investigation that could potentially result to discipline should always have a union steward or the unit's union liaison present at the meeting. It is everyone's right to have representation.

We are again approaching the October-November open enrollment period, the time to sign up for our insurance and benefits. Keep in mind that we all have to accept or decline the coverage by signing in on the computer. Failing to do so, some employees are paying as much as \$100 deducted per paycheck for insurance benefits that they do not need.

Each of us faces extraordinary challenges every day we come to work. We have to be diligent in completing our documentation and fulfilling our obligations to our patients. At times, even as we do our best, some of us are subjected to disrespect and abuse from physicians, colleagues, other personnel and patients. Incivility and bullying are examples of workplace violence; I encourage you to report such incidents that contribute to a hostile and unsafe work environment.

Best regards, Leodie A. Salazar, BSN RNC

Danbury Nurses' Union Unit #47

Update 47 is the official publication of Unit #47

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TOGETHER WE BUILD AND GROW