



# THE INFORMER

April 2018  
PRESIDENT'S MESSAGE  
by Pat Mills, RN

## Diversion

I know I'm beginning to sound like a broken record; however, this problem is becoming more and more concerning to Administration, the HHNA and the Department of Health.

It's against the law to take narcotics from the hospital; diversion is considered theft and civil charges can be filed. It's unlawful to distribute or sell diverted narcotics to someone else. You are just as accountable for wasted narcotics you claim to have witnessed even if you don't actually witness the waste by another RN. This is considered Professional Misconduct.

Regarding patient controlled analgesia, pink sheets are legal documents and must be handled as such; if a patient transfers with PCA be sure the pink sheet goes with them. An incident report will be created for all missing pink sheets. Use the designated folders to keep track of them. When discontinuing a PCA it must be documented in the Pyxis as well as the EMR. It is of the utmost importance that you assess pain and chart before and after medication is given. If for some reason a narcotic is removed and not given, the waste must be timely.

In this day and age of technology be aware of the old saying, "Big Brother Is Watching." There are cameras all over the campus, primarily for the purpose of keeping everyone safe. However, the cameras also view areas where narcotics are removed and wasted. You should make it your practice to follow the hospital policy when removing narcotics or when witnessing anyone wasting a narcotic.

Members have lost their jobs and have jeopardized their professional licenses by just once doing the wrong thing. We've all worked very hard going to school and doing what we need to do to attain and retain our RN licenses. One foolish mistake in judgment can ruin all that you have achieved.

Think before you cover for anyone and, if asked to witness a waste, make it clear to your co-worker you'll only witness what you can see!

## Dates to Remember:

<b>4/5</b>	<b>Council on Nursing Practice - noon</b>	<b>5/3</b>	<b>Council on Nursing Practice - noon</b>
<b>4/10</b>	<b>Quarterly meetings - nominations</b>	<b>6/7</b>	<b>Council on Nursing Practice - noon</b>
<b>5/1</b>	<b>Unit rep dinner (rescheduled) – Joanina's</b>	<b>7/10</b>	<b>Quarterly meetings</b>

**Breakfast, lunch or dinner will be available at all meetings.  
The location of the Nursing Practice meetings will be announced.**

# Unsafe Patient Assignments

by Joan Aliperti, RN – Secretary

An unsafe assignment that is a one-time occurrence and can't be avoided is becoming increasingly rare as the phenomenon of recurring unsafe assignments is becoming all too common.

Surviving that first encounter with an unsafe assignment relatively unharmed tends to create a false sense of security. As nurses struggle through fears of inadequacy and the possibility of termination, their egos, loved ones or other nurses may convince them to go back for more. Eventually, some nurses begin to believe, "It is just not possible to get everything done in nursing," and they lower their personal standards and expectations to justify staying on the job and to relieve their anxiety.

There is a difference between being stressed or uncomfortable and being unsafe. Only you will know where to draw that line. You should be fully aware of the type of assignments you will receive before you start a position. Discuss your expectations and limitations with your nurse manager or supervisor up front or as soon as you recognize there may be a problem. While efforts are made to determine what number of patients makes an assignment safe, nurses are not created equally. We all have our strengths and weaknesses. One nurse's nightmare shift may be another nurse's dream shift.

If you consider your assignment to be unfair, unsafe, a substantial deviation from the norm or a total disaster waiting to happen, you need to follow the steps negotiated on your behalf outlined on page 10 of your contract.

1. The first thing to do is notify the NM, ANM or charge nurse who will assess the situation.
2. If, after consultation, you still feel the same way about your assignment, your NM, ANM, charge nurse or you must notify the ADN or the supervisor on duty. The ADN or supervisor will then assess the situation by telephone within 30 minutes of notification, barring any emergencies.
3. If still unresolved, the supervisor or ADN has a reasonable amount of time, but no longer than 1 hour, barring any emergencies, to come to the unit in person.
4. If you continue to perceive your assignment is unsafe you need to present a written account of the situation to the VP for Nursing and send a copy to the union so the issue can be addressed.

Many members don't take the time to write up the event and weeks go by before Board members hear of these issues. We need to act on these unsafe practices quickly for your safety and the patient's safety. While these steps are cumbersome they're what we have. If members who encounter unsafe assignments used them, there's a chance things could improve and assignments would be safer. We already know assignments don't improve when we don't follow these steps.

Remember, your LICENSE is more important than any job. NO JOB is worth risking EVERYTHING!

## **You know you're a nurse if . . . . .**

**your diet consists of food that has gone through more processing than most computers.**

**your alcholically challenged patients know you by your first name and can point to "their room."**

**you believe air goes in and out, blood goes round and round and any variation on this is a bad thing.**

**you worry about a patient who hasn't urinated for eight hours and then remember you haven't had a BR break in ten hours.**

**you see stress as a normal way of life.**

## **POSTING OF THE SENIORITY LIST**

by Jo Ann Pirro, RN – Treasurer

As stated in our contract the Hospital is to provide an updated seniority list every year. Since moving to Kronos it has been difficult getting dates into Kronos and, therefore, it has been two years since we posted a list. As of April 13<sup>th</sup> the updated Seniority List will be posted on the Union bulletin board near the entrance to the cafeteria for **one month**\*. It's your responsibility to check your date on the list and if, for some reason, you don't agree with it please notify us via the HHNA phone (631-757-5206) or website, Human Resources to the attention of Carmen Macaluso at 631-351-542 or via Northwell email.

*\*You only have 30 days to view the list and notify us of your concerns. We will review your information and get back to you. The list will be posted through May 12<sup>th</sup>.*

## **FYI**

by Jo Ann Pirro, RN – Treasurer

### **CHANGING JOB STATUS**

It has recently come to the attention of the Union that when going from per diem to full-time or part-time you have to wait 60 days and then on the first day of the following month your health insurance will start.

When returning from any leave of absence you must make an appointment with Staff Development and Employee Health before you can return and work a shift on your unit.

### **TIME LIMITS ON POSTED POSITIONS**

Page 15 of CBA states that, "The employee will be selected for the new position within twenty-one (21) days from the date on which the posting is taken down, and thereafter will be transferred to the vacant position within three (3) months of selection. Applicants shall be notified of acceptance or rejection of all vacancies within fifteen (15) days of the job being rewarded."

Members tell us they've applied for positions and didn't receive a rejection letter, but heard months later that the position went to someone else.

If for some reason you do not get a letter or e-mail from the Nursing Office, notify the Union. We'll help facilitate finding out what happened to the position.

### **PENSION BENEFIT CALCULATOR**

Check on the Pension Calculator recently made available online by Northwell Health. It allows you to designate beneficiaries and estimate your pension using an unlimited number of variables as frequently as you want. Calculations are made using a formula that is particular to the pension plan in which you are enrolled that is dictated by your date of hire.

For details of the individual pension plans go to the Resource Library on the new portal. To start estimating your pension go to the [Northwell.edu/mybenefitscenter](http://Northwell.edu/mybenefitscenter) website.

If hard work was such a wonderful thing, surely the rich would have kept it all to themselves.

~ Lane Kirkland (1922-1999), AFL-CIO President, 1979-1995

# THE GRIEVANCE PROCESS

by Lisa Quintero, RN – First VP

April 10, 2018 is our next general membership quarterly meeting. As you may remember, Pat Mills always reviews the status of any grievance and/or arbitration that is under investigation without violating the privacy of members. We feel it's necessary to keep the membership informed on these issues to be mindful about the same or similar problems occurring to members on other units.

The Association Board doesn't take the matter of grievance and arbitration lightly. We carefully review each issue to determine if it's an actual violation of the contract. If it is found to be a violation, there are steps outlined in the contract that must be followed:

- Initially we try to resolve the problem at the source, whether it be with a nurse manager, supervisor or administrator.
- If the problem is unable to be resolved by informal discussion, it is advanced to Step One which calls for a formal written notice to be submitted to the Vice President for Nursing within thirty (30) days following the occurrence of the facts on which the complaint is based. The Vice President for Nursing then has ten (10) workdays to discuss the matter formally with representatives of the HHNA and another ten (10) workdays to render a decision.
- If the grievance isn't adjusted in Step One, the Association can appeal it to Step Two. This is initiated with a written notice served on the employer within twenty (20) days of receipt of the employer's decision to the Association at the end of Step One. The employer has ten (10) workdays to respond.
- Lastly is Step Three. If a resolution can't be reached by both parties, the grievance may be submitted to arbitration within twenty (20) days of receiving the Step Two decision. The arbitration will then be conducted under the rules of the American Arbitration Association. The fees and expenses of any arbitrator are shared equally by both parties.

This can be a long and arduous process, but unfortunately necessary at times.

## MEDICAL DICTIONARY FOR HEALTH CARE

AEROBE .....	something worn around the House
BUCCAL .....	keeps a belt in place
CORONARY .....	a domesticated yellow bird
HIPPOCAMPUS .....	a school for hippopotamuses
PHARMACIST .....	a person who makes a living dealing in agriculture
SURGERY .....	a reason to get an uninterrupted power supply
ULTRASOUND .....	a loud noise

## **Editorial** by Marion Catanzaro, RN

Every Tuesday in the Business section of *Newsday* there is a column dedicated to answering readers' questions related to their employment. Frequently the answer is something like this, "Yes, your employer can do that if you don't have a union contract or a written document from your employer stating otherwise." Many of the issues questioned are supported by state law, however, if you have a legal document (contract) that states otherwise, the contract takes precedence. One example of this is someone employed in New York State can be terminated without cause by state law, however, your contract states that except during the probationary period, "... an employee will not be demoted, suspended, otherwise disciplined or discharged except for just cause." If a member is terminated for just cause and the HHNA and the member believe management is wrong, a grievance can be filed to counter the termination. Grievances can be filed any time the union believes management is in violation of the collective bargaining agreement.

Having a contract is like having Job Insurance. We insure our home, car, and belongings. It makes sense to insure what enables us to have everything else.

**Update:** On December 18, 2017 the Massachusetts Nurses Association, representing twelve-hundred nurses at Tufts Medical Center, had their last negotiation session in the office of Boston mayor, Martin Walsh, who had joined picketing nurses outside the medical center during their five day strike in July. The contract was ratified January 3, 2018. Although the nurses didn't want changes made to their defined benefit pension plan they agreed to a defined contribution plan similar to a 401K and the hospital agreed to significantly increase its matching money contribution from what was originally offered, agreed to language that protects staffing levels and agreed to a higher pay raise over the life of the contract. Tufts nurses interviewed after the ratification were glad the ordeal was over and felt their July strike had a positive effect.





## HHNA Quarterly Meetings Tuesday - April 10<sup>th</sup>, 2018

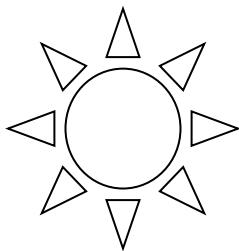
Meetings will be held at the following times and locations:

7:30am - Gillies 1  
12noon - Sammis  
1pm - Sammis  
7:30pm - Gillies 1 and 2

Breakfast, lunch and dinner will be available.

Please remember: in order to be a member in good standing, FT/PT employees must attend 2 quarterly meetings a year. Per Diems must attend 1 quarterly meeting a year.

**Visit the HHNA website at [HHNANurses.org](http://HHNANurses.org)**



### Summer Vacation Requests

by Jane Hubert, RN - Second VP

This is a reminder that the summer vacation request period is approaching. Vacation requests for the time between June 15<sup>th</sup> and September 15<sup>th</sup> should be submitted, in writing, to your Nurse Manager by April 15<sup>th</sup>. Employees will be notified by May 1<sup>st</sup> if a request for vacation has been approved or denied and, if denied, arrangements will be made as soon as possible to reschedule the employee's vacation.

Vacations are granted on the basis of bargaining unit seniority and the operating requirements of the individual nursing unit. Please refer to p.32 of your contract for additional information

