

University of California RNs • NPs • CRNAs • Student Health Centers









## Take a Moment to Help Us Fight Back Against Short Staffing — Complete Our Survey Today!

As part of a nationwide effort to combat short staffing, CNA/NNU is conducting a short staffing survey. Short staffing is a chronic issue across the country, and union nurses everywhere are fighting back. As we head into contract negotiations with UC next year, it is important that we adequately and consistently document the issues we have on a daily basis while striving to provide the highest level of care.

UC management must be held accountable for this staffing crisis. While some effort has been made to fill job vacancies, it is simply not enough. UC management have done nothing to retain the highly skilled nurses who are responsible for providing the level of care our community expects from UC Medical Centers. Experienced nurses are leaving in high numbers due to persistent moral distress, short staffing, and unsafe working conditions.

To fill out the survey, go to:
shorturl.at/wxW15

Or scan the QR code:

#### **WORKPLACE VIOLENCE COMMITTEE UPDATE**



Workplace violence is a serious and growing issue affecting nurses and other healthcare workers and their patients. The California Nurses
Association/National Nurses United fought for Senate Bill 1299, which requires California healthcare employers to ensure a safe environment for patients and nurses by preventing workplace violence before it happens.
Cal/OSHA developed a standard that is the model for the nation. California healthcare employers are required by law to have a comprehensive, unit-specific workplace violence prevention plans in place by April 1, 2018.

UC nurses, NPs and CRNAs have been at the forefront of this fight by continuing to hold UC management accountable and ensuring that the Cal/OSHA standards are enforced. In 2018, the UC Division formed a division wide committee made up of nurses from each UC Medical Center. This committee meets on a bi-monthly basis to share ideas and collaborate on ways to collectively address issues around workplace violence on unit, facility, and nationwide levels. UC nurses have signed petitions, worn stickers, held rallies and press conferences and just this month completed a comprehensive workplace violence survey. The survey results will be used to identify specific areas of concern and help us to formulate nest steps in our escalation plan.

While UC nurses and all nurses in California enjoy the benefits of the Cal/OSHA regulations, nurses outside of California still do not. National Nurses United is fighting for the same standard of protection for all nurses throughout the country by introducing the Workplace Violence Prevention for Health Care and Social Service Workers Act. This is Federal legislation that would mandate OSHA to promulgate a standard that would require all covered employers to develop and implement prevention plans to reduce workplace violence incidents.

For more information on how to get involved at both your facility level and to assist in the national campaign please contact: <a href="mailto:UCDivision@calnurses.org">UCDivision@calnurses.org</a>.



#### **UC SAN DIEGO**

#### **NURSES DEMAND & WIN SAFETY for PATIENTS & STAFF**



Nurses on Thornton 2W, an in-patient unit at UCSD Jacobs Medical Center, had been struggling with a patient who, in addition to using abusive language and threats, was becoming increasingly violent, kicking a hole in a wall, following staff into other patient rooms and making threats, etc. The patient refused medication and was not restrained. As the patient's behavior escalated, nurses asked for security to send someone to be present while the patient was there to help insure the safety of staff and other patients. Nurses were told that that level of security could not be provided. Prior to the start of another day shift, the nurses said they would agree to take the

patient if security were provided to help insure safety, but could not do so until adequate security was provided. A travel nurse was sent to relieve the night shift RN. The patient did not need to be in the unit, but was only there while receiving outpatient treatments due to a lack of transportation. Within hours of the nurses insisting on adequate safety precautions, UCSD made arrangements to provide transportation for the patient's treatments, allowing the patient to be discharged safely. Although that was not the nurses' specific request, it was still an outcome that meant the patient would receive necessary treatment, while protecting staff and other patients.

### UCSD DAY OF ACTION FOR SAFE STAFFING

On October 28th, UCSD nurses joined other UC nurses around the state in highlighting inadequate hospital staffing. Nurses handed out several hundred leaflets on staffing at shift change, nurses wore Halloween-themed stickers on "Scary Staffing" throughout both hospitals, and hundreds of Kit-Kats with "You Deserve a Break" stickers were handed out as staffing-themed Halloween treats. It was a great way for nurses to have fun while doing important work.





## UCSD NURSES Stand in Solidarity with Post Docs

On October 28, a delegation of CNA nurses joined a UC coalition rally to show support for the Post Docs, who are facing takeaways in bargaining, and the Graduate Researchers who are still fighting for recognition from UC. The UAW organizers expressed appreciation for the nurses' participation, and elicited a big cheer from the crowd when the nurses were acknowledged.

You take on one of us, you take on all of us!





# UC NURSE ALERT UC IRVINE



### Protecting Our Hard Fought Contract Language: Article 13



After 23 years in the UC system, 14 of those as a Charge RN in an ICU, I applied for a CNIV position in the new surgical unit that opened on November 15, 2021. After my interview with the Manager and being told I was their top candidate, HR notified me that I did not meet minimum

requirements due to not having the proper certification. The discrepancy was that on the job posting, it listed a requirement of "a specialty certification" in the area and was not clear or specific on the exact certification to qualify for the position. I informed the manager for the unit and HR that I currently hold a specialty certification in wound care (WCC). HR stated that the WCC was not on their list of acceptable certifications, and it was nonnegotiable. Therefore I would be eliminated as a candidate for the job I was seeking and entitled to.

I contacted my nurse and union representatives and with their help, a grievance was filed on my behalf. Nurses throughout the hospital supported me in my fight to get the promotion I was entitled to. HR and management of the new unit were compelled to give me the position of CNIV. I am happy that my union reps and fellow nurses were able to help me navigate this process and to now be in my new position of CNIV in a brand-new Med-Surge/Telemetry Surgical Unit. It is important for nurses to stand together in solidarity and fight to protect our patients and rights.



# UCI Nurse Leaders Demand Safe Staffing Now

In late October, UCI nurse leaders held a virtual press conference to highlight issues of hospital wide chronic short staffing. Nurses told their own personal stories of working short staffed and the impacts this has on their patients and their own emotional and physical well-being. Immediately following this well attended conference, UCI management reached out to CNA requesting a meeting to discuss the issues and ways forward towards resolution. On November 4th, nurse union representatives met with HR representatives, nurse recruiters, and Brooke Baldwin, CNO. Nurse representatives provided input from across the hospital as to what is causing the high turnover rate at UCI. Examples were given, such as: a lack of communication from management, fear of retaliation from management when nurses speak up, unsafe working conditions due to lack of nursing and ancillary staff, and an overall "toxic environment", as well as roadblocks in career advancement within the units and lateral transfers within UCI. Several nurse representatives gave numerous examples of nurses regularly missing meals and breaks. This meeting was an important platform for nurses to voice our concerns and let management know that we are united in our advocacy for ourselves and for our patients. We demand our administrators work more expeditiously in resolving the on-going issues so that we can retain the excellent and experienced nurses that we have here at UCI and to work diligently to recruit and hire more nurses. While this meeting was a good first step we still have a lot of work to do to ensure the ideas put forth come to fruition. We encourage all nurses to fill out the short staffing survey that we recently rolled out, continue to fill out your ADO's and join in the fight for out patients and community.





### **UC LOS ANGELES**

# Multiple Victories for Perinatal Nurses at UCLA Westwood







This past year and a half has been an unprecedented challenge for everyone –especially for Perinatal nurses at UCLA, who have chronically short staffed, missing breaks, and a hiring freeze. Perinatal nurses and the CNA Professional Practice Committee (PPC) made repeated attempts to address these issues with the Chief Nursing Executive, Karen Grimley, and the Director of Mattel Children's Hospital Debbie Suda. Nurses delivered petitions, engaged in sticker up actions, held numerous meetings with Upper Management to discuss these concerns, and most recently filed to form a Nursing Staffing Review Panel (NSRP) in order to formally address the staffing, acuity, and matrix issues.

After months of nurse advocacy, the University announced a plan to staff up the Westwood Perinatal Units in August! Specifically, the University has approved to hire eight career nurses, two new grads, six travelers, the creation of a perinatal float pool to cover both facilities! This major staffing victory was quickly followed by another win for Perinatal nurses. The NSRP held its first meeting in September, and in this meeting CNA nurses presented a comprehensive analysis of the staffing and acuity issues and demanded that the University staff in alignment with the AWHONN standards. In the follow-up meeting in November, the University agreed to staff a nursery nurse 24/7, and reassign LVNs to work in the DR as scrub techs. Perinatal Nurses in Westwood have proven that perseverance and collective action leads to major victories!



### **UC SAN FRANCISCO**

#### Hazardous Medication Safe Handling on C6 Children's Hem/Onc and BMT

Recently, UCSF nurse leaders found themselves needing to escalate a pressing matter with UCSF CNE Pat Patton, as well as filing a grievance concerning the safety of our Mission Bay C6 nurses. Unit management failed to enforce a policy mandating the placing of a "hazardous medication precaution" signage on the bathroom doors for non-chemo hazardous drugs. Nurses can't stress enough how this is dangerous and places many staff at risk. The exposure to these non-chemo hazardous drugs could potentially have devastating effects to not only CNA members, but to all employees who work in this unit.

When answering call lights and helping patients who are not assigned, staff are being exposed to hazardous meds while handling bodily fluids/waste. Nurses find this concerning for all staff, but specifically for staff who are currently pregnant, breastfeeding, or trying to conceive. It is unthinkable that management has been aware of this concern and has yet to act. Nurses have requested that signage be place in every bathroom door for non-chemo hazardous drugs for some time now and the department continued to ignore the request.

We are happy to announce that nurse leaders were able to push the managing department to comply with the current MOU between CNA and UC Article 16. Section E. Furthermore, the CNA NX bargaining unit requested that an immediate email communication be sent to C6 staff notifying them of the risk of disposing of non-chemo hazardous medications (reproductive toxins), the reminder to use proper PPE when disposing of these non-chemo drugs, and to place non-chemo hazardous medication precaution signage on all bathroom doors in the unit. Congratulations to our C6 nurses at UCSF Mission Bay on this important victory!

#### **UCSF Extra Shift Differential (ESD) Extended into 2022**

CNA nurse leadership pleased to announce that an extension of the extra shift differential agreement between CNA and UCSF that was originally signed back on January 10<sup>th</sup>, 2021. The union was able to push the university to include additional units to this side letter. The ESD Agreement will be in effect from November 1, 2021, through January 8, 2022. A nurse working an ESD Shift will receive their regular rate of pay for all extra shifts worked in excess of full time, including premium overtime, consecutive shift payment (if applicable), shift differential, weekend differential, holiday pay (if applicable), premium after 8, 10, or 12-hour shift, charge nurse differential, premium upon call-back status.

We know that safe staffing and safe working conditions for nurses is critical to providing the highest standards of patient care, especially during the surging COVID-19/Delta variant pandemic.

UCSF nurses and our Union, CNA, will continue to push management to address the challenges we face to provide the highest standards of patient care. We will continue to stand united with our fellow nurses, frontline workers, and our patients to provide the care our communities deserve.













# UC NURSE ALERT UC DAVIS



#### **UC Davis NICU Fight Back Against Dangerous Staffing Practices**

On November 16th Nurse Representative Mary Petrella (NICU) spoke to the UC Regents to shed light on turnover in her unit. She reported that in the past three years since the rollout of the fetal surgery program, NICU nurses have been severely understaffed and overworked. This program has caused an influx of higher acuity infants however, UC Davis never provided adequate staffing relative to the difficulty of nurses' assignments. Always short staffed, nurses are having to fight for rest breaks during 12-hours shift during which they take care of some of our most venerable patients.

UC Davis's lack of attention and urgency to staffing and flexible positions for nurses has only been exacerbated during the COVID -19 Pandemic. As Mary explained to the Regents, "many of the NICU nurses are young moms trying to raise their families. Not having part-time positions caused these nurses to call in sick often because of restrictions not having in their daycares and they were taking turns with their husbands to call in. Recently our unit lost 15 nurses in a matter of two weeks to another facility that offered part-time positions, more money, guaranteed breaks, and free parking. The morale in our unit is at its lowest, and the cohesiveness is lacking since we have many travelers and new nurses. Every time we train new nurses UC Davis must spend 125k for each nurse we have to train. This is taking a toll on our unit, and we continue to lose good nurses! We need to change but more positively, so we do not continue to lose any more nurses." UCDMC cannot continue to create revolving door for nurses by refusing to staff appropriately and invest in retaining skilled RNs. As the region's only nationally ranked Level IV Neonatal Intensive Care Unit (NICU), CNA nurses will continue to escalate our fight until they prioritize caring for our community's sickest babies over their bottom line.

#### **Protecting Our License and Patients with ADOs**

CNA nurse leadership at UC Davis is happy to report that we have seen an a significant increase in nurses filling out Assignment Despite Objection (ADO) forms when, in their professional judgement, they feel their assignment is unsafe. In the month of November alone we received over 60 ADOs! While this uptick raises concerns of staffing, it also speaks to the empowerment that nurses are feeling as they will no longer tolerate unsafe staffing conditions for their patients. We can see that the work that our Professional Practice Committee (PPC) has been doing by holding unit meetings and educating nurses on the importance of ADOs. including how and why we use them. We want to encourage every nurse to continue reporting unsafe staffing concerns in their unit. An ADO is a legal document that protects your license and your patients. During our upcoming quarterly meeting with UCD Health CNO Toby Marsh on December 14, PPC members will present our ADOs and demonstrate to management that our staffing concerns are legitimate and UC Davis nurses will no longer tolerate unsafe staffing.

If you are interested in organizing an ADO training for your unit, please contact your nurse representative or CNA labor rep.











### **CNA UC Division Statewide Committees**

- Student Health
- Advanced Practice
- Workplace Violence
  - Racial Justice
- Environmental Justice
  - Medicare for All

Statewide committees meet virtually on a regular basis. Please contact your CNA labor rep or nurse rep for more information on how to get involved.



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