

To our fellow Johns Hopkins nurses:

We are nurses on Zayed 9W, the Comprehensive Transplant Unit, and we would like to share our reasons for working to organize a union of bedside nurses at Johns Hopkins. Patient safety is our number one priority for organizing. We chose to be represented by National Nurses United because NNU has a proven track record when it comes to creating safe conditions for patients and staff. NNU nurses have done this through important legislation including the only existing nurse-patient ratio law in the country in California and powerful contracts that lock in safe staffing procedures and break relief RNs. Many nurses working to organize our union have tried, unsuccessfully, to use existing shared governance structures to enact change that would improve patient safety. The majority of our requests fall on deaf ears because ultimately, without a union, administration doesn't have to listen. When nurses' voices are ignored, patients suffer. Patients should be the #1 priority of our hospital, but too often we see that profits are the real priority.

Our patients deserve the best care possible but administration's focus on financial gains has left our unit understaffed and unsafe. To be clear, our unit manager works hard for both the CTU nurses and our patients, but unit managers can only do so much when upper administration sets the budget. When profits are put before patients it results in unsafe staffing and ratios. On the CTU we staff at 1:5 during the day and even sometimes 1:7 at night. This is too high for any unit and is especially dangerous for transplant, where we are administering numerous time-sensitive immunosuppression medications that can cause sepsis in the blink of an eye. Adding to this problem, we consistently lack support staff. There are many shifts that we work with no clinical technicians or CCSR, and proper sitter coverage is always a problem. At night our tech coverage consists of one tech who then has to take sixteen patients. Our clinical technicians are amazing and do their best but they simply cannot be in multiple places at once. Administration has said if we unionize they'll have to cut support staff, but if you look at the contracts of other NNU hospitals, you will see that is not true. Unionizing will do the opposite, allowing us to bargain contracts that better advocate for our patients through safe staffing language as well as other RN-led safe staffing mechanisms.

Another patient safety issue on our unit is our dangerously high turnover rate. While we do have great nurses with years of experience, most of us have only been nurses for less than two years. Experienced nurses are the best resource to a new nurse and there is a shortage of experienced nurses. High turnover rates mean that both nurses' licenses and patients are at risk. Competitive wages and benefits would encourage nurses to stay at Hopkins longer, increasing the number of experienced nurses on the floor and thus improving patient safety. Nurse retention is greater at union hospitals because nurses are given incentive to stay and a real voice to advocate for better conditions for patients and nurses alike.

We are proud to be Hopkins nurses and because of that we want Hopkins to be the best it can be. We want Hopkins to be a place where nurses can spend a career, not stay for a couple years to pad their resume. When we unionize, it will no longer be administrators that haven't touched a patient in years making all the decisions that affect the bedside. Bedside nurses will have a real voice and the real power to advocate for our patients, with the daily experience of caring for patients guiding our decisions. This is why we support the forming of union by and for bedside nurses and we hope you will do the same.

Sincerely,
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