

## WSNA Local Unit PEACEHEALTH LCR

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### Local Unit Officers

Jeanne Avey	Chair
Robin Larsen	Vice-Chair
Vacant	Secretary/ Treasurer
Connie Ramos	Grievance
Mary Parker	Grievance
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### WSNA Web Site

www.wsna.org

*The Oldest and Largest  
Union Representing  
Registered Nurses in  
Washington State*



**WASHINGTON STATE  
NURSES ASSOCIATION**



## NEW YEAR NEWS

Hello, everyone--Happy 2009! In this New Year of hope, we look forward to some challenging, but exciting, changes, and we aspire to positive change in your working conditions. Have you been keeping up

with the WSNA website? If you have, you

already know that we have some major goals for 2009 which we feel will benefit nurses, and thereby benefit patients as well. Some of WSNA's efforts on your behalf are represented by three bills which are currently pending in the State legislature. These bills have gone to both the House and Senate, and they speak to the elimination of loopholes in the mandatory overtime law, and the promotion of your ability to take full, uninterrupted rest breaks. Research tells us that nurses who work long hours with inadequate rest periods are more likely to suffer decreased alertness, longer response times, and a reduced ability to concentrate. As you may guess, this means some impaired judgment and performance with a statistically higher incidence of accidents and mistakes. Have you been hearing a lot about medication errors lately? Are twelve-hour shifts the norm for you? If so, do you really take your full lunch break and rest periods? If you do not, we both know the probable reason—nurses feel responsible for their patient's safety and care, even when they are trying to take a break, and we both know there is often no one extra to relieve you. Perhaps there is another busy nurse, who already has his/her own patients to manage, trying to take on responsibility for your patients while you are gone. Not too comforting, and not too restful. So these are two major issues we are fighting for:

- **1) A nurse's ability to take full, uninterrupted rest breaks -** Current practice may claim that brief interruptions in work activities provide adequate intermittent breaks, but this practice is detrimental to patient safety and nurse wellbeing.
- **2) Closing loopholes in the mandatory overtime law -** Loopholes need to be closed in the current mandatory overtime law to ensure that the exemptions to the law are not being used inappropriately, as this leads to longer hours for nurses and compromised patient care.

Hope you were able to make it to Legislation Day on 02/2/09. If not, please go to our website, ([www.wsna.org](http://www.wsna.org)), and lend your voice in promoting the above goals—you can contact your representatives about these issues from our website! Click into the feature—“Legislative Action Center”, and lend your voice.



## **From the desk of Jeanne Avey:**

As you all may have heard by now, last year the legislature passed a bill that was created by WSNA, USNU, SEIU 1199 and WSHA. These organizations came together to address patient safety as regards safe staffing. The bill dictated that the committee must be comprised of at least half staff nurses, and half members of management. WSNA picked their own members from each unit. There are 14 units represented at PeaceHealth, LCR. According to law we had to have this group up and running by Sept 2008. Since that time we have met several times to bring this group along and work together for the common goal of patient safety and nurse job satisfaction, as well as nurse practice safety.

We are now at the juncture of working with management on how that staffing should look. So if you have any concerns or suggestions, please contact your rep from your unit and let them know.

Once this committee has decided on staffing numbers for each unit, it will be presented to the CEO and the COO. Then it will be up to them as far as acceptance of the plan or not. If they deny the plan then it will be up to them to explain to the State why they denied it. Once we have an agreeable working

solution, then we will revisit it every 6 months to see how effective it is. I am hoping that this will address quite a few concerns that you all have expressed.

The representatives from each unit have worked very hard so far and need your support. So, please let them know that you are behind them!

Another word...Weingarten rules...these are part of Supreme Court law that gives you the right to ask for, and be allowed, union representation. If you are called into any meeting with management that could result in investigatory or disciplinary action, request union representation. You must initiate this request when called into a supervisor's office if you determine that the meeting might lead to disciplinary action. Management is obligated to allow union representation, and one of your local unit officers can be scheduled to accompany you. Be respectful, but refrain from answering any questions possibly leading to discipline without fair representation.

Your new contracts are now on disc and will be on their way soon—we will need to arrange a meeting so that you can pick one up.

The low census issue has been discussed in Conference Committee, and the data you provided at the Local Unit Meeting was given to Management in order to emphasize how much the issue is impacting you. Management states that they are holding back and not filling any new positions, that nurses will be called off according to the contract language, and that nurses who are cross-trained/willing to float may be less likely to get low-census days. Management has plans for a Critical Care Observation

Unit, and this may help some. Management cites the economy and a drop in patient volume as elements contributing to the problem of HC days, and hopes PeaceHealth, LCR will weather the storm. We are continuing to monitor the situation.

## **NURSE PRACTICE CONCERNS**

Finally, Management has expressed some concerns over the last few months about RNs knowing and adhering to the tenets of the Nursing Practice Act, and you may need to review the regulations which govern your license for your own peace of mind. Many errors occur in the realm of medication administration, and as we know, distraction, fatigue, pharmacy error, and doctor omissions are just a few of the reasons errors occur. Management is concerned about standards of nursing practice and documentation for reasons of patient safety as well as compliance with State regulations. Nurses can help themselves decide what is within their scope of practice, and whether or not a medication should be administered by asking themselves the following questions:

- 1) Has the MD written a complete, legible order that you are familiar with and can confidently give, or should you call him/her to clarify the order?
- 2) Have you documented all the actions you took on the patient's behalf in assessment, nursing diagnosis, planning care, and performing the appropriate nursing interventions?

- 3) Have you appropriately and regularly assessed the patient for pain levels and documented not only the pain but the measures taken to relieve that pain?

If you are unsure about whether or not an action falls within the nursing scope of practice, ask yourself whether it is consistent with one or more of the following:

- The Nursing Commission standards of practice.
- The National Nursing Organization standards of practice.
- Current nursing literature and research.

To protect yourself and your patients, if the answer to any of the above is no, then you should consult the physician and/or your supervisor before carrying out the order.

With all that said, nurses are known to be conscientious, caring, and very dedicated, and 2009 will be your greatest year yet! WSNA will be there with you all the way—contact us with any questions.

### **Up Coming Events**

*Mark your calendars now! Go to the [WSNA.org](http://WSNA.org) website to see more information and register.*

**WSNA Convention '09  
April 29 – May 1, 2009**