

WSNA Local Unit  
SKAGIT VALLEY HOSPITAL

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*Local Unit Officers*

<i>Julia Weinberg</i>	<i>Co-Chair</i>
<i>Shelly VanPelt</i>	<i>Co-Chair</i>
<i>Jammie Jenkins</i>	<i>Secretary</i>
<i>Thomas Nyland</i>	<i>Treasurer</i>
<i>John Tweedy</i>	<i>Grievance</i>
<i>Lizbeth Rainaud</i>	<i>Grievance</i>
<i>Marsha Leigh</i>	<i>Membership</i>
<i>Allyson Watts</i>	<i>Membership</i>

*WSNA Nurse Representative*

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*WSNA Web Site*

*www.wsna.org*

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Union Representing  
Registered Nurses in  
Washington State*



**WASHINGTON STATE  
NURSES ASSOCIATION**

## **New Local Unit Officers Elected for 2006 to 2007:**

Michelle "Shelly" VanPelt, RN works in both the ER and CCU is now officially Co-Chair. Lizbeth Rainaud, RN in the FBC is elected as Co-Grievance and Allyson Watts, RN of 2NW is elected as Co-Membership. These staff nurses will join the WSNA/SVH Local Unit Executive team. Julia Weinberg, RN, Co-Chair, Jammie Jenkins, RN Secretary and elected again for another two year terms are Tom Nyland, RN, 1NW, John Tweedy, RN, OR, Marsha Leigh, RN, FBC.

We would like to extend to Kathy Brown a **BIG THANK-YOU** and much appreciation for the 12 (+) years for which she has served as a member of our WSNA/SVH Local Unit Executive Team. Kathy has served as one of our Co-Membership Officers, negotiating team member, Nurse Practice Patient Care Committee member and Conference Committee member doing what she does best, advocating for our patients and our nursing profession. Kathy's commitment, participation and support of WSNA, which she shares with all of us, in our bargaining unit and our nursing students for whom she mentors each year. Kathy educates, promotes and encourages the students support, participation and commitment for WSNA as they graduate and begin their nursing careers.

## **What's ALL the Fuss About "Customer Service?"**

By now many of you have heard that the recent patient satisfaction surveys which management does periodically during the year showed patient satisfaction going in a downward trend.

There can be different reasons to describe this kind of downward trending. We have been told it only takes "one" dissatisfied client to change a positive to a negative trend. Now the hospital is determined to change our customer service focus and in doing so, improve patient satisfaction.

The new initiatives being focused on are based on a concept and theme from the Disney Institute, after a small group from Skagit attended workshops there. The conference was based on a book "If Disney Ran Your Hospital 9 and 1/2 things to do differently" by Fred Hall. Skagit employees will be learning and applying these same concepts in our day to day interactions with each other and those we serve.

**Safety** is at the top of the list for the four initiatives. **Courtesy** is second, **Presentation** third and **Efficiency** is last.

In recent 1NW, CCU and 2NW unit meeting, Lori Harlow, COO and Jan Iverson, CNE, talked about the downward patient satisfaction trend line and shared that this does not happen because nurses say to themselves everyday “let me see just how bad a job I can do today.” It is a concern which Lori and Jan has taken seriously and asks the question of staff, “What is going on in your work life that is making you so frustrated and so unhappy? Because when you are not happy, you have a more difficult time portraying and being happy to others, especially our patients.”

The nursing staff at these meetings took this opportunity when asked and gave lots of input of things needing improvements, such as: the computer and how slow it is, how documentation is overwhelming, the CNAs are overwhelmed with patients load and issues concerning pharmacy and more.

“**Efficiency** has been the first priority for so many years” Jan shared with staff. “I have been pushing everyone hard to decrease the OVT, do not divert, and other ways to be efficient in other departments that we have forgotten who it is that are our customers.”

Lori shared as an example: “Pharmacy was told that their customers are the nurses and that it is nursing whom they need to satisfy and improve processes for.” Rather than what works best for pharmacy. “We need to also understand that there are regulations pharmacy has for why and how things need to be done.”

Safety is the number one goal for patients as well as staff! After all, is that not what we are all about? Advocating safety and quality care for each patient we serve? We all want to be **HAPPY** and **SATISFIED** with what we do as nurses and have good interactions with our support staff too.

**HAPPY STAFF = HAPPY  
PATIENTS!**

## **EMPLOYEE SURVEY** is again on line at Skagit.

We all have an opportunity to once again participate in this second yearly survey. Last year, Nursing response was at 80%... let’s make it **100%** participation this year and focus on what are the issues and solutions. Administration and the Board do pay attention to the results. They are asking for our participation and input. Changes can happen for the better. It’s up to all of us to voice the concerns and get Administration to focus on what these changes need to be. We also need to tell them what is already working well.

**Plan today to take time and complete the employee survey on line during these next two weeks starting September 18<sup>th</sup>.**

## **So You Just Got Called To Come To The BOSSES Office?**

As WSNA members at Skagit Valley Hospital, we have the right to have a union representative go with us to the Bosses office together, if you ask or the employer suggests that the discussion could lead to discipline. You must respectfully request at that time that you want a union representative to be present at this meeting. Without representation present, you can state: **I choose not to participate in this discussion** to your Boss before the meeting begins. However, refusal to meet could lead to insubordination.

These Rights are referred to as “**The WEINGARTEN RIGHTS/RULES**: Under the Supreme Court’s Weingarten decision, when an investigatory interview occurs, the following rules apply:

- 1. The employee must make a clear request for union representation before or during the interview. The employee cannot be punished for making this request.**

2. **After the employee makes the request the employer must choose among three options. The employer must either:**
  - *Grant the request and delay questioning until the union representative arrives and has had a chance to consult privately with the employee, or*
  - *Deny the request and end the interview immediately, or*
  - *Give the employee a choice of 1) having the interview without representation, or 2) ending the interview*
3. **If the employer denies the request for union representation and continues to ask questions, it commits an UNFAIR LABOR PRACTICE and the employee has the right to refuse to answer. The employer may not discipline the employee for such a refusal.**

## **ADOs (Assignment Despite Objection forms) What/When/How and Why?**

These forms are the WSNA (QMM forms) which have been designed and approved for use by our WSNA Cabinet on Economic and General Welfare here in Washington State. We should use these forms to document unsafe staffing, missed breaks, not oriented to area assigned, broken equipment or other issues which could affect patients or staff nurses.

### **Chain of Command:**

There is a process you must follow before you fill out an ADO form, before documenting the issue you find yourself dealing with in the work environment:

1. **YOU MUST** notify your charge nurse of what the concern is first.
2. If they are not able to readjust your assignment, give you additional help,

provide for orientation, and provide relief to give you your break and/or get additional equipment which is working, ect. You should then notify the nursing manager or house supervisor of the issue.

3. The manager or house supervisor would then have to address the issue and find a resolution to the problem. If still no solution found at these levels, you can continue up the chain of command until you reach the administrator on call or CEO.
4. If you find you have exhausted this process and still no resolve, then fill out the ADO form documenting the facts, filling in all of what is going on, which the form requires, add additional pages if needed, making copies for all the ADO sheets and what steps you took to resolve the issue. Send the white sheet and additional sheets attached to the local unit officer Jammie Jenkins on 2NW, the pink copy to the unit manager with same attachments and keep copies for your self.

Jammie as well as your unit manager will contact the nurses documenting the ADO form to get further information and it is WSNA local unit rep. Jammie or designee will give a report of these ADO concerns at Conference Committee each month. We keep these ADO forms which are received and are documented for trending purposes. WSNA keeps copies of these as well. In cases where there is ever need to utilize for purposes for discipline actions taken against nurses, these forms could help if documentation had occurred of concerns raised and trending of issues are documented as well. These forms unlike hospital QMM forms are discoverable in cases where an issue about patient or staff safety is of concern.

Our biggest emphasis for all of our nurses is to get the issue of concern fixed immediately when it first is a concern, so that there is NO reason to document or work in an unsafe environment, or put patient or staff safety at risk in the first place.

Each Unit is equipped with a blue WSNA folder which has an information book about the ADO forms, and the actual ADO forms. These forms are also kept on the official WSNA/SVH bulletin board on 1NW hallway in the yellow envelope.

Barbara Frye, Director of Labor Relations at WSNA, is available to do an education/training class on these ADO forms at any time. Let us know if this is an interest and we will invite Barbara to a local unit meeting.

Notify Julia Weinberg at the WSNA/SVH e-mail communication tree address:  
[julia\\_we@hotmail.com](mailto:julia_we@hotmail.com)

## **MOU for Hospice Telepage: FYI**

By now everyone should have gotten a copy of the MOU for the telepage Hospice Article 9 to include in our current WSNA contract.

Since negotiations in 2005, there has been staff hours added to telepage due to increase volume of Hospice patients. The need to have more than one nurse in this position has been made. This MOU memorializes and documents the need for changes to what the previous language and practice had been concerning holiday paid and holiday hours worked by these nurses.

The change in holiday compensation was the result of a grievance filed on behalf of telepage nurse who had split the hours of the New Years holiday of 2005/06 between two telepage nurses and only one received the previous \$100.00 dollar bonus for having worked the holiday telepage hours.

During the grievance process, however, this was not found to be a consistent practice and thus we needed to get to what will now be current practice and reflect more than one telepage nurse who may indeed work the holiday telepage hours.

**We hope this helps to answer any questions concerning this MOU. If there is anyone needing further explanation, please contact Julia Weinberg at [julia\\_we@hotmail.com](mailto:julia_we@hotmail.com) or 766-6576. Thanks!**

## **Tell Us!**

**“What’s new or of concern on your nursing unit.” Questions/Concerns: send them to your WSNA Local Unit Officers at e-mail address: [julia\\_we@hotmail.com](mailto:julia_we@hotmail.com) or call Julia Weinberg Co-Chair at 766-6576 or e-mail Shelly Van Pelt Co-Chair at: [RMVP@aol.com](mailto:RMVP@aol.com)**

We need and want to hear from our nurse membership of what you are hearing, seeing or experiencing on your nursing unit. Issues which may affect you personally, professionally or even affect your patients are important. Our WSNA contract covers most of the issues concerning Benefits, Wages and Working conditions, but not everything or every scenario. We have local unit officers from quite a few of our nursing units represented, but not all of them. It is important that we be made aware of those things going on that you have concerns or questions about in all the units of the hospital.

Those units that currently do not have an elected local unit rep. as an officer are: **Care Unit, Oncology Clinic, Kidney Dialysis, Hospice, SOU, ENDO and Wound Care.** If there is someone in any of these departments who would like to volunteer to be a unit rep. to share communication back and forth with your local unit officers, please let Marsha Leigh in FBC, Shelly Van Pelt in CCU/ER or Julia Weinberg, PACU know of your interest.

If you are not on our WSNA/SVH Local Unit e-mail communication tree and would like to be, please send us your name and what unit you work and your home e-mail address to [julia\\_we@hotmail.com](mailto:julia_we@hotmail.com) Thanks everyone.