

## LOCAL UNIT NEWSLETTER

February 2006

**From the Desk of . . . .**  
*Vicki Wornath*



As you read this newsletter you'll see articles encouraging you to join WSNA. What can I say different that would influence a potential member to join? Absolutely nothing!! Have you ever tried to change something by yourself, such as a law, policy, or the way you practice your job? That one voice is often not heard, but when it joins with many other nurses in your hospital, district or state, it is a much louder voice. As a result change takes place.

I have been a nurse for 40+ years. My first involvement with my professional organization was in the mid-sixties when the nurses in the state of Montana stood together before the Montana State legislation to pass a bill granting the right to collectively bargain. "The Blue Eyed Nursing Bill". How empowered I felt. How proud to be a nurse! Over the years, I have continued to be proud to be a nurse as I listen to the testimony of nurses for the safe lifting/patient handling, read about the nurses volunteering for disaster relief, or see nurses in your own hospital standing up for what they believe.

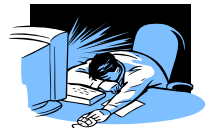
To be a nurse is to be a professional. According to Webster dictionary a profession is an occupation requiring advanced training in some liberal arts or science. A professional is an individual who is engaged a specific occupation for pay. Usually a professional is proud of what he or she does be it a fireman, policeman, or a

nurse. A person who is proud of what he does belongs to his/her professional organization that promotes and protects his profession. That is what WSNA is! Your professional organization, not just a union. Being a member gives you a voice in your profession, gives you identity.

Forty plus years, I am still proud to be a nurse. Proud to say I am a member of my professional organizations. Join me and other WSNA members, so that at the end of 40+ years you too can say: I AM PROUD TO BE A NURSE!

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### **THE NURSING PROFESSION IS A SLEEPING GIANT**



Nursing is the "Sleeping Giant" of the nation! If that Giant ever wakes up, it will be a force to be reckoned with. Senator Mark Hatfield recognized this over 40 years ago.

- Do you realize that 1 out of every 100 people in the United States is a Nurse?
- Do you know that 1 out of every 44 registered voters in the State of Washington is a Nurse?
- What a Force we would be if we all joined our voices and awakened that Giant.
- Where is your voice in this endeavor?

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- We could change laws affecting our patient's health and welfare coverage, if we all came together as one voice.
- We could change laws affecting our work environment, if we all came together as one voice.
- Washington State Nurses Association was the first union to file a suit to ensure nurses get rest breaks.
- Washington State Nurses Association won arbitration to prevent nurses from being forced to be vaccinated.
- Washington State Nurses Association won an arbitration that saved the job of a 26 year nurse from being fired due to faulty Pyxis reports.
- Washington State Nurses Association introduced legislation that prevents Nurses from being required to work mandatory overtime.
- Washington State Nurses Association forced hospitals to stop background checks including credit reports on nurses.
- Washington State Nurses Association changed the composition of the Nursing Commission to guarantee staff nurse representation and participation.
- WSNA focuses exclusively on representing Registered Nurses.
- WSNA negotiated a contract that has guaranteed wage increases, for the first time ever for nurses at SWMC.
- WSNA negotiated Rest - less than eight hours between shifts into the SWMC contract.
- WSNA has fought and won many grievances for the nurses at SWMC; including getting a nurse of 25 years her job back.

When WSNA was asked to organize your facility, you all signed cards stating that you would join and support the Association. Joining your State Professional Organization was a way to protect you from disparate

treatment and give you a voice in your work place. In another other word, a way of leveling the playing field. WSNA has upheld their end of the bargain. Have you?

In order for us to awaken that "Sleeping Giant," we all need to become the voice. Where is your voice and commitment? I would hope that it is behind your fellow nurses and union members. You all received the same benefits and rewards. Now it is your turn to step up to the plate and become a Dues paying member.

**LET US ALL BECOME THE VOICE!**

*Deby Neiman, RN  
WSNA Nurse Rep*

## **WHAT DO NURSES REALLY DO?**

Dear Nursing Colleagues: I want to encourage you to go to Medscape to read the latest article by Suzanne Gordon. **WHAT DO NURSES REALLY DO?** It reminds you of all that we actually do in our day to day work lives and how much we contribute to our patients and their recovery.



The site is:  
[http://www.medscape.com/viewpublication/527\\_index](http://www.medscape.com/viewpublication/527_index)

You can register for Medscape at [www.medscape.com](http://www.medscape.com) (it's free)

Suzanne Gordon is the author of  
***NURSING AGAINST THE ODDS.***

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# SAFE STAFFING

By *Connie Ramos, RN*

After attending Legislation Day in Olympia on January 30, 2006, Connie serves as a grievance officer at Peace Health LCR in Longview, WA

Studies have shown that providing safe staffing reduces length of stay, (LOS), improves patient outcomes and increases nurse satisfaction which leads to increased patient satisfaction, while increasing staffing and RN skills. The costs to the hospital are minimal and at times actually brings in a profit due to a decreased LOS. This article will highlight the benefits of three studies directed at nursing ratio and staffing.

Blegan, 1998, showed that if the RN ratio of client care was less than 50%, there was an increase in medication errors and adverse effects. To have a ratio above 85%, leads to an increased number of medication errors. From this study, the recommended RN ratio should be no less than 50% of scheduled staff.

Lichtig, 1999, showed that the higher the percentage of RNs, the better the outcome and the lower the LOS for patients.

Aiken, 2002, shows that with each additional patient there is a 7% increase in deaths occurring in the 30 day period after hospitalization and also failure to rescue of clients. By giving a nurse an extra patient, the risk for burnout increases by 23%, while job satisfaction decreases by 15%.

Needleman, 2002, states that with an increased RN staffing that adverse outcomes are decreased from 3-12% and that by increasing all staffing levels the adverse outcomes decrease from 2-25%. If RN hours on medical units are increased, there is

a decrease in LOS, UTIs and GI Bleeds, while surgical patients benefit from a decrease in pneumonia, shock, failure to rescue and cardiac arrest.

By increasing overall hours, the aforementioned benefits are achieved while the net cost is as little as 1.5%, if skill mix was increased while maintaining the nurse staffing hours, a reduction of \$242 million were seen. (Needleman, 2006)

With all of these studies, the outcome is that by having a minimum of 50% RN hours on the floor with a maximum of 85%, everyone benefits, from a lower incidence of errors to decreased length of stay to a higher nurse retention and satisfaction rating. To do anything less than this leads to potential sentinel events, burnouts, and nursing shortage.

Reference: Cheryl Peterson, presentation at WSNA Nursing Legislation Day, 1/30/06, [cheryl.peterson.org](http://cheryl.peterson.org)

## **Remember to Vote!**

It's once again time for the election of officers for your Local Bargaining Unit. The following is the ballot as it stands.

Co-Chair:	Shayne Yocum Madeleine Dowsett
Vice Chair	Pat Moeller
Secretary:	Teri Kirkpatrick
Treasurer:	Mary Oster
Member at Large:	Christie Riley
Grievance Chair:	Terry Joyce
Grievance Committee:	Marcia Bryant Eileen Higbie
Safety Committee:	Christie Riley

Only members in good standing will be allowed to vote per By-Laws and no write in candidates. Elections will be by secret

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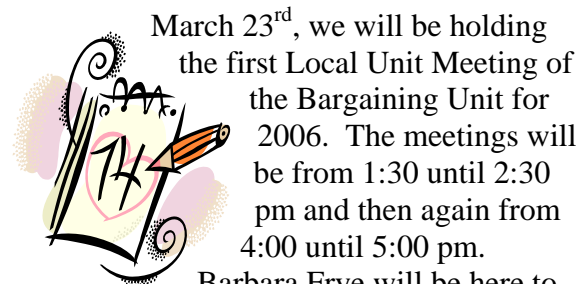
mailed ballot, 15 days after the notification of the members.

If you have questions, call the voice tel line:  
1-800-384-7144

We need to have a Unit Representative on every Nursing Unit. Think about getting involved.

Remember the "SLEEPING GIANT".

## Mark your calendars now!



March 23<sup>rd</sup>, we will be holding the first Local Unit Meeting of the Bargaining Unit for 2006. The meetings will be from 1:30 until 2:30 pm and then again from 4:00 until 5:00 pm.

Barbara Frye will be here to teach a class on what is the purpose of an "ASSIGNMENT DESPITE OBJECTION FORM". WHY you fill them out. WHO do you give them to? WHAT kind of a

response can you expect? Refreshments will be served. Please join us as there seems to be a little confusion as to the purpose of the form.

We will be looking for a few interested nurses to run for Local Unit Officers. Think about it. There is on the job training offered by WSNA. There is more training when you go to Lake Chelan for Leadership Training. Being a Local Unit Officer gives you insight into what goes on at the State and National Levels of WSNA and ANA; not to mention how we are aligned with the UAN. It is an exciting time to be a nurse because there are so many ways to be involved.

It is our intent to have every nursing unit represented by a Local Unit Representative. A Local Unit Representative is the eyes and ears of the Local Unit. The time commitment is about three hours a month. Think about representing your Unit.

### Membership Reminder

It is the responsibility of each nurse to notify the Washington State Nurses Association of any change in work status which may include but are not limited to: **name, address, phone number, FTE increase or decrease, leave of absence, medical leave, maternity leave, leaving or joining a bargaining unit.** This change must be done in writing either by using a *Change of Information Card* or sending an email to [wsna@wsna.org](mailto:wsna@wsna.org).

The Cabinet on Economic and General Welfare (E&GW) policy states, when a nurse is on an unpaid leave of absence, the dues are adjusted to the Reduced Membership Category during the unpaid Leave of Absence period. The accumulated dues payment is to begin within 90 day of return to work. The nurse will have up to twelve months to complete payment of these dues. *It is the responsibility of the nurse to notify WSNA of this change in work status.*