



## Standing for Safety and Quality at Highline

We are united in bargaining a contract for quality care, respect and retention, and advancement for all of us at Highline. Our voices and strength on our bargaining priorities come from all nurse and service job classes and our experience across Highline. We have seen our hospital change with CHI and bargaining is the time when our voices, our actions, and our experience will bring the changes we know matter most to our patients and our co-workers to Highline.

We've filled out bargaining surveys, shared our experiences at meetings and proposal votes and taken actions to show support for our bargaining team and priorities. We know that CHI-Highline's careless payroll and billing errors, short staffing crisis, and corporate bottom lines all need to be addressed by us, the frontline staff, coming together and standing up for the bargaining priorities and proposals we know will fix these problems permanently. We delivered this message to management at our first bargaining session this last week.

**Next bargaining date: June 26**

## Our First Message to Management: It's Time to Fix Our Broken Staffing System

Our staffing is in crisis. We see patients lacking a triage nurse in ED, working short, being asked to work beyond our scope of practice, waiting on a lab draw, lacking a charge RN, and not having an open bed or a bed to open because we do not have the staff present, including EVS staff who can turn over rooms. When it comes to calling in the extra help we need to be filling vacancies, but we have a hiring process that takes far too long. Patients cannot afford to wait any longer.

Our proposals to fix staffing are:

- Break relief RNs and CNAs
- Dedicated charge nurse on every unit
- 1:1 patient sitters in addition to the matrix
- Commitment to staff to the matrix in the contract, enforceable with an arbitration process
- Floating assignments that are safe and do not take staff away from patients in need



**Mona Denton, RN, Surgery**

"We talked about staffing and filling positions in a more timely manner and addressing the way the system is set up, so that when you know prior that someone is leaving, you have the interviews open. We have a lot of vacancies. The more people we have, the less call. The more people stay, the easier the work is. It's hard to work all night. We need more people and that starts with filling positions."



**Jenny Carter, Sterile Processing Tech, Sterile Processing**

"There are positions that exist in other ORs that should exist here. We are spread between sterile processing and central supply and spend the bulk of our shifts alone. We only have 1.5 hours overlap per day, so you either have to be washing or sterilizing. This is not safe, and recently I injured myself on the job when we began a new process. We need to fill vacancies so we can get the job done."



## Additional proposals we presented:

Highline needs to honor its commitment to keeping our hospital clean and filling vacant positions.

- Set stable EVS assignments to keep our hospital infection free
- Create full time positions for EVS staff instead of agency

We need a system of addressing payroll and billing errors quickly that does not cause hardship to any of us.

- Fix all payroll errors within first full pay period after presentation
- Fix payroll errors without time limits

We need to address high staff turnover and fix our slow recruiting process to make sure we have the staff it takes to keep our patients safe.

- Post vacant positions quickly after the hospital gets notice of someone leaving

Our priorities going forward, to be addressed at our upcoming bargaining sessions:

- Competitive wages that support all staff and families when costs are increasing
- Racial justice and equity across Highline, including in investigations
- Secure healthcare and retirement plans
- Training fund — we are ready to keep advancing our careers

We will continue standing in support of bargaining for a safer, better Highline that provides patients and staff access to the care and support we need.



"I had the bills from two insurances, and they did not bill my other insurance, so I got a large bill for \$1000+ dollars, and they went ahead and garnished on my paycheck. They've garnished my paycheck

five times. We are proposing that this be fixed."  
**Belen Routhier, CNA, Float Pool**



### Our bargaining team members:

Di Brown, RN, ED  
Marghee Baldridge, RN, ED  
Jenny Carter, SPD Tech, Sterile Processing  
MaLina Church, RN, ED  
Valerie Corley, Unit Secretary, Telemetry  
Mona Denton, RN, OR  
Tarabia Franklin, RN, ICU  
Adiam Gidey, RN, PCU  
Sara Moallin, RN, FCBC  
Jenifer Radcliffe, Lab Assistant, Lab  
Leo Rollins, CNA, Medical  
Belen Routhier, CNA, Float  
Kara Shafer, RN, Float  
Melissa Stevens, Unit Secretary, ICU  
Sue Wheeler, RN, Medical  
Andrea Wilson, RN, FCBC



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