Our Patients Deserve Better From Providence

Our bargaining proposals move Swedish forward by creating conditions for safe patient care and by recruiting and retaining great staff. Providence continues to disrespect our patients and our proposals. Thousands of us took public action in an informational picket and brought a message to our community that we need better staffing to put patient safety ahead of profits at Providence.

After our public action, Providence had the opportunity to do the right thing by opening the door for meaningful discussion about our bargaining proposals that would acknowledge critical issues we and our patients face. Providence didn’t take that opportunity. Instead, Providence’s bargaining team brought proposals about a change in the CDC policy on TB vaccination, agreed to one small language change and had no response whatsoever to our numerous urgent proposals. Providence said they couldn’t give us an estimate for when information we requested in March would be available.

That is not acceptable.

It is more important than ever that we remain united behind our priorities for our future and the future of patient care at Swedish:

- Safe staffing standards, including ratios, break relief staff, and hiring to core
- Wages that will allow us to live in the communities in which we work
- Making Swedish a place where we can all belong by fighting for racial justice.
- Quality, accessible, affordable medical benefits
- Infection control to keep our patients safe
- Appropriate use of and compensation for Standby and Call
- Respect and recognition for our Social Worker and Counselor co-workers
- Retirement benefits that will allow us to retire with security and dignity
- Increased resources in our Multi-Employer Training and Upgrading Fund
Social Workers and Counselors Are Voices for Our Patients

“We are very concerned about what is happening in our department. We are the experts. Despite our proposals to address unsafe staffing and disrespectful wages, management is paying outside consultants to analyze the department. The analysts found the same problems that we raised years ago: bad staffing, not enough time for adequate charting. We are calling on Providence to commit to the following: stop unilateral changes, stop direct dealing with our members and bargain with us over these changes. We need a commitment to ensure that committees being created and future changes follow the change team process, that any worker participation be appointed by our union to ensure proper representation and process, and that committee discussions with the consulting group occurs at the bargaining table.” Leyna Ho, Ana Eusse and Laura Wood, Social Workers from First Hill, Cherry Hill, and Issaquah

Jaye Lever, RN Case Management Edmonds

We Are Staffing Experts

We want to talk about safe staff to patient ratios, we want to talk about safety, we want to talk about how staff get a break—not about process and where it’s most convenient for management to say ‘no’ when we propose safe staffing. We have elected our bargaining team to represent us and deliver our staffing committee proposals at the bargaining table and to work directly with the decision makers after years of unilateral cuts to critical resources that our patients need.

Despite our recent statements about the urgency of the needs of our patients, management has still not made a single counterproposal to our staffing proposal that we made in March.

“I have been an ICU charge nurse for over 20 years and I have worked at Swedish-Providence for 31 years. Staffing on my unit is not alien to me. I am extremely concerned about the idea of bringing back unit-based staffing committees while we are months into the bargaining process. Any work on the staffing plans should come to the bargaining table. We have been elected as representatives, we have worked hard and delivered our staffing proposals and staffing plans that will improve patient safety. We work at the bedside and know what we need to deliver care safely. Any staffing decisions that affect patient safety should be a hard stop! I’ve said it before, I’ll say it again, don’t make any staffing decisions on the outside looking in.” Lizette Yanunu, Charge RN, ICU, First Hill

“We have asked for staffing increases in our committee. Patient care is getting really heavy there and our conditions are not being taken seriously by management. Bargaining over staffing should not happen at Shared Leadership or the Unit Based Staffing committee, it should happen here, where the decision makers are, in bargaining.” Saba Tilahun, Charge RN, Medical Respiratory BSW, First Hill

“As caregivers serving our communities, we are here to continue our fight for safe patient care. Staffing plans, ratios, and matrices need to happen with our bargaining team. We have spent countless hours on fixing our staffing plans through the committee process with no result, and we hear that the sentinel events are still happening. Providence is not committed to our safe staffing plans. They are putting lives at risk and nurses’ licenses on the line. And every time we’ve escalated it, they’ve said ‘no.’ We need to be cohesive and fight for each other’s staffing as a bargaining team, so at the end of the day we can come home and feel good that we gave good care.” Carol Lightle, Charge RN, Medical Oncology, Issaquah

EVS Week

EVS Week is next week, and we want to recognize and honor the important infection control work that the member of our EVS team does. To mark this special week, we are asking everyone to join together in reclaiming our breakrooms for ALL workers. Please post this sign in your breakroom and ask all members of our team to join together in a break next week!