



# Caring for Our Community During COVID-19

As we work together to navigate the COVID-19 crisis our community faces, the health and safety of our patients and co-workers is at the top of our minds. When we protect our frontline caregivers, we protect our healthcare system — and this will give us the resiliency we need to get through this crisis. In coalition with our UFCW21 colleagues, we are calling on Olympic Medical Center administration to respond to the COVID-19 pandemic in a way that ensures the safety of us and our patients, while at the same time providing for those impacted financially.



“At such a time when so many uncertainties and unknowns occur on a daily basis, ensuring the welfare and safety of OMC employees and our patients must be a priority. The COVID-19 proposal presented to OMC Administration on behalf of our members will address elements vital to all of us to maintain the integrity of health and safety standards that would help curb the spread of this dreadful virus.” **Laurie Elmer, RN/OB**



“We met with management to discuss our co-workers’ concerns: making sure we have enough PPE to care for COVID-19 patients and improved daily communication from Administration to keep every member of the health care team informed of changes. We also discussed our proposal for healthcare workers at risk (over 60 and/or with compromised immune systems). We voiced concerns for these members in the “at-risk group” — that they be given options other than being assigned to direct care of patients. Can they be utilized elsewhere, work from home, receive administrative leave, unemployment, L&I or take a LOA? We’re looking forward to hearing administration’s response.”

**Julie Millsap RN/Med-Surg**



“Now is the time to start increasing staffing in the EVS department. In addition to providing infection control to the hospital — as it is today — more units are going to be opened very soon. Infection control is so important — EVS needs more resources to ensure that we can clean the new units and areas that will contain COVID-19 patients.”

**Michael Manley, EVS Worker**



“On Thursday we met with management and presented our proposals to ensure we have what we need to fight COVID-19 at OMC. We asked for administrative pay for those exposed, clear protocols for PPE usage, OMC’s plan for PPE shortages, alternative work assignments for those at risk, better communication, an RN in the command team... just to name a few. Workers in the ER and other units are at the frontlines of this crisis and we need management to respond to our demands ASAP as we don’t have weeks to prepare — we may only have days.”

**Samantha Counts, RN/Emergency**

## Covid-19 Bargaining Team

Jonas Brown, Security/  
Delegate

Julie Butterfield, RN/  
Short Stay

Sam Counts, RN/ER

Laurie Elmer, RN/OB

Dan Grimes, Plant Ops

Steve Higgs, RN/ER

Julie Millsap, RN/Med-Surg

Lee Norton, RN/Short Stay

Mike Manley, EVS

Lotta Pearl, RN/OR

Cyndi Springer, RN/  
PACU

Sue Yanik, RN/ICU

**Protection for Healthcare Workers** As a union, we are advocating at all levels and in every form for adequate protective equipment (PPE) for all healthcare workers. We believe that N-95 respirators are the gold standard for PPE. Due to the grave PPE shortage we are facing, the CDC has made the interim recommendation that surgical masks be used by healthcare providers in some circumstances.

We believe that the supply shortage must be addressed in the most aggressive way possible. Together with our healthcare union partners WSNA and UFCW 21, we have released a statement calling on the federal government to do all in its power to increase the supply of the N-95 masks and other PPE, including releasing supplies from the national PPE stockpile, specifically targeting states like Washington that are in the midst of the COVID-19 outbreaks, and incentivizing US companies to manufacture more PPE. It is critical that PPE that is available is provided in an equitable manner to all caregivers and that we have access to proper fit-testing and instruction in PPE use in every language we speak.



“We need to have clear protocols and communication in regards to when we should be wearing PPE and what PPE we should wear for each patient. We need enough PPE to keep each and every one of us safe and adequate supplies on each department. Any PPE protocol needs

to be made with staff safety in mind.”

**Jasmine Iliff, RN/ICU**

## Take the survey!

It is important to have accurate and reliable information about our experience with COVID-19 as healthcare workers. As a union, we are taking a survey about our experience with the availability of personal protection equipment, as well as staffing, safety, training and sanitation practices.

Our goal is to identify employers and units where there are particular problems or concerns, as well as to identify places where best practices are in use. Aggregated, anonymized information may be made public, but your individual responses will be kept private.

If you haven’t already, we invite you to [take the COVID-19 Experiences in the Workplace survey](#)

If you want to report an incident at your facility related to COVID-19, or have concerns about your safety in the workplace or questions about the impact of COVID-19 on your work, please call our COVID-19 member hotline: **(866) 977-0247**

Join thousands of healthcare workers in SEIU in taking action for immediate action for PPE for healthcare workers. [Sign the petition to call on the federal government to release life-saving equipment to Washington state.](#)

We’re joining together with Washington State Nurses Association and UFCW 21 to demand safe working conditions and fair pay for every frontline worker. [Add your name to the petition urging healthcare employers and elected leaders to act.](#)

# Our Proposals

1. A healthcare worker who the Employer does not permit to work due to exposure to COVID-19 disease while at work shall be placed in paid leave status during any required quarantine period. It's important that protect our sick leave and vacation leave for future use.
2. Healthcare workers unable to work due to being part of the CDC's at-risk group (older than 60 or with an underlying medical condition) may request an accommodation in their assignment, a leave of absence, or access to unemployment benefits. Maintaining our health care benefits will be a priority.
3. In the event of a closure or reduction in services, employees will be offered alternative assignments at their regular rate of pay and FTE status.
4. The Medical Center will provide training to ensure employees have orientation and competence in any newly assigned roles.
5. All caregivers will have access, at a minimum, to fitted N-95 masks, gloves and goggles. Upon request gowns will be made available to caregivers. Caregivers will be permitted to wear self-supplied PPE until national shortages are resolved.
6. The Medical Center will ensure there are enough PAPRs on each unit to respond to two or more codes simultaneously with a full staff in the room.
7. Communication and direction on the use of Personal Protective Equipment (PPE) will be universal across the system and delivered during huddles or beginning of shift in addition to all electronic and posted communication. The use of Personal Protective Equipment (PPE) will be in multiple languages and in clear, uncomplicated phrasing, and in-person training will be provided to all employees that interact with patients regarding the donning and doffing of Personal Protective Equipment (PPE).
8. In order to ensure safety of our EVS caregivers, all rooms that do not have negative airflow, Environmental Services will wait a full two hours before entering the room to clean and disinfect. For those rooms with negative airflow, Environmental Services will wait one hour before entering the room. For rooms with confirmed COVID-19 patients or rule-out patients, EVS will wait a full three hours.
9. Communication to caregivers regarding PPE and/or changing protocols will be in multiple languages and in clear, uncomplicated phrasing in order to increase access to essential information.
10. The Employer will provide all employees who have been exposed a written notice within hours of a known exposure. The written notice will include: the date of exposure, assessment of exposure risk and Employer decision on whether to permit the nurse or healthcare worker to work or placed on paid leave.
11. The Medical Center shall prioritize the testing of health care workers working with COVID-19 and COVID-19 rule-out patients.



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