



Speaking Out for Safe Patient Care During the Pandemic

As healthcare workers who are part of a comprehensive team providing care to our patients, every one of us plays a critical role in the safe delivery of care. When our management makes decisions or neglects to provide proper staffing, support and protection, we speak up on behalf of our patients and each other. This is what those who work in healthcare do. This is what members of our union do.

We all remember struggling to access PPE early in the course of the pandemic, and while we have been good stewards of our supplies, some of us in certain departments have been given lower priority in accessing necessary protective gear. When COVID was spiking in our community, we were concerned for our amazing ICU staff caring critically ill COVID patients, some of the sickest patients many of us have encountered in our careers. We have been concerned about lack of testing admits and the repercussions of placing patients before they receive a negative COVID test. We have been discussing these concerns with management since the early days of the COVID pandemic.

Did they respect our concerns and listen? Not even. So we took our concerns to the regulators. After documenting concerns raised by multiple staff members across several departments, here are just some of the key issues we raised:

- 1) **1) Serious understaffing issues in Critical Care.** Administration attempted to work around the matrix by podding nurses without CCU experience together with CCU nurses. What would have happened if a CCU nurse had a coding patient and the podded nurse was left alone with two critically ill patients who may have needed a level of care that nurse was not trained to provide? Whose license is on the line?
- 2) **2) Unsanitary conditions leading to bacterial outbreak.** Our EVS is our infection control team. When they were instructed not to clean COVID rooms due to PPE shortage leading to an Acinetobacter Baumanni outbreak on the floor, whose care is risked?
- 3) **3) Failure to inform employees of known exposure.** When frontline workers are not properly informed that they cared for a patient who later tested positive for COVID we risk additional unnecessary exposure. Who risks bringing a virus home to our families because our employer can't effectively contract trace?

The answer to all the questions posed above is: NOT MANAGEMENT.

Their licenses aren't risked, they don't witness the risks to patients and they aren't exposed to the degree frontline workers are. So why don't they listen to us?

We have commended our employer along the way when things have gone well. But to fail to listen to frontline workers at the most critical challenge our hospital has faced is a failure of leadership. We must all speak up for patient care. Our complaint is only one in over a dozen filed by family members and patients in the last six months.

Talk to you delegate if you have concerns about patient safety. Together we have the strength and courage to speak the truth of our patients' care conditions.



"I became an executive board member with SEIU 1199NW after we fought for and won our first contract for service members. I decided to take this position with the union so I could better serve my coworkers. I took a swear of oath that I will stand up and fight for each

and every one of my coworkers. I take an oath to stand up for our safe working conditions and safe patient care. That's exactly what we did by filing the DOH report when we saw Virginia Mason Memorial not upholding the best standards in an unprecedented time. We must continue holding our hospital accountable and speaking with DOH when VMMH fails to commit to worker and patient safety."

Alice Westphal, 3EW NAC, Executive Board Member



"I became an executive board member back in 2012 so I could understand why we, the union, vote and do what we do. From being an executive board member I understand the whole picture — from legislation we vote on to our individual chapters' goals and issues. I am

able to see the unions' budget and where we spend the money. I feel good being a part of a union that values their members' input and runs all decisions through the executive board. And also role standing up for quality patient care in the workplace."

Sandy Gaytan, L&D Nurse, Executive Board Member



Staying united for a fair contract

Service workers and nurses continue to stand united to win a contract that respects our commitment, will recruit and retain good staff and also honor the work we do during the pandemic. While we must continue to stand together for respect and to retain amazing staff, we have moved Memorial to make the following commitments to us during the COVID crisis:

- 1) Commitment to ensure proper and timely notification to employees of any exposure.
- 2) Transparency around employee exposure and testing as well as a commitment to prioritize rapid testing of staff.
- 3) Empowering shift coordinators to call for runners to support staffing for COVID positive patients.

But our fight isn't over! Join us as we continue to show our community we stand with them for the safest care possible. Talk to your union delegate about how you can show your support.



"We won greater transparency, access to rapid testing and our Shift Coordinators can request COVID runners whenever needed to address staffing. This is an important precedent as ultimately our shift coordinators should always have the authority to call for staffing that is safe."
Trish Bowman, RN 3EW



"Administration is dividing us by insinuating that your union isn't accepting their 'generous' proposal when in fact we are fighting for your second and third-year contract of a mere 1% they have offered! We want more for the loyal employees of Virginia Mason Memorial! We will be using a mediator to ensure you guys get what you have earned throughout the years! We will not settle for a mere 1% yearly increase! Remember: United we can stand up and fight for each other!"
Brenda Ponce, 2EW NAC



"The bargaining team is getting fed up with management not fully understanding where we are coming from with our proposals. We've explained month after month that NACs who are cross-trained need more money, an incentive to be cross-trained, but they don't have any sympathy for all the NACs nor the service workers that are on the front line. It's been an entire year since we've started negotiations and they still do not understand. We are on the schedule to be there for our patients and our co-workers, regardless of a raise or no raise — we feel committed to our jobs to serve our community. We deserve more than what management is putting on the table for the service staff so we've decided to hire a mediator to help us get the job done. I've been a part of negotiations before where we've hired mediators and it just means they will push both parties to settle and get the job done."
Erica Corral, 1N NAC



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