



Standing Up to Improve Staffing for Our Patients and Community

As frontline workers, our voices matter when it comes to staffing and patient safety throughout this COVID-19 pandemic. We are holding CHI accountable to the safety standards in our contract and demand improvements in frontline staffing that do not compromise patient care and safety.

The heavy reliance on travelers and incentive pay is what keeps our staffing going but we know that this is not sustainable. CHI must make commitments to hire and retain experienced staff and consistently follow the existing efforts to use incentive pay in departments that are short staffed until we have a safe level of permanent staff.

"We need a consistent incentive program to help address short staffing. If you are picking up a shift, if you are staying late, you should qualify for an incentive. It's not that complicated: if there is a hole in the schedule mark it as spot or DTI, just pay the appropriate incentive so we are not guessing and can focus on filling the holes in our schedule." - **Mona Denton, RN, Surgery**



We are working with our staffing and labor management committees to address the staffing crisis for nursing units, which includes:

1. Scheduling enough CNA and RN staff to keep our departments operating safely.
2. Addressing immediate staffing shortages through incentive pay and hiring additional travelers.

Our union Staffing Committee members are calling on all CNAs and RNs to take action!

We have a voice in frontline staffing changes and will hold CHI accountable to safe patient care by filling out our new Staffing Variance Forms. Our need for safe staffing did not go away with the COVID-19 winter surge, and now it is time tell CHI they need to make a full commitment to staff safety. Filling out short staffing forms is how we can hold CHI accountable to the law and our contract.

CNAs, HUCs and RNs are important patient advocates!

We are showing where more staffing and support is needed for our patients by filling out Staffing Variance Forms.

WHEN TO FILL OUT A STAFFING VARIANCE FORM

MISSED BREAK RELIEF FOR RN AND CNA STAFF
• All staff grids need to be followed, even when taking a break.

CHARGE RNS TAKING PATIENTS
• We won guarantees that the Charge RN should not take a patient.

STAFFING LEVELS ARE UNSAFE FOR QUALITY PATIENT CARE
• As a healthcare worker you are the expert.

Do you have to double up or miss a break because of short staffing?

Is a Charge RN taking a patient?

Do you notice any of these?
• High acuity
• Lots of admits/discharges
• Scheduling too few staff
• Patient load that is over the matrix
• No Charge RN on the floor

YES

Fill out the Staffing Variance Form to describe the short staffing situation you are experiencing. We need to show and describe where short staffing occurs.

Staffing Variance Form – St. Anne Hospital
Use this form to submit a complaint to the Nurse Staffing Committee – use 1 form to indicate multiple complaints per shift

Employee (name) _____ Unit _____ Date _____ Time _____

As a patient advocate, in accordance with the Washington Nurse Practice Act, this is to confirm that I notified you that, in my professional judgment, today's assignment is unsafe and places our patients at risk. I will, under protest, attempt to carry out the assignment to the best of my ability.

This assignment has compromised my ability to provide quality patient care because of the following (check all that apply):

Our unit is not staffed according to its staffing plan – Check all that apply

a. <input type="checkbox"/> Census is higher than planned	b. <input type="checkbox"/> No Charge RN (or Charge RN is assigned patients)
c. <input type="checkbox"/> High patient acuity	d. <input type="checkbox"/> No Triage RN (ED only)
e. <input type="checkbox"/> Unit Acutes (admit, discharge, transfers) different than planned	f. <input type="checkbox"/> No HUC
Need for specialized equipment	<input type="checkbox"/> Missed Break 15 min (1 st) 15 min (2 nd) 15 min (3 rd)
g. <input type="checkbox"/> Staffing support different than planned Please list staff #s and details (w) i.e. Inappropriate assignment of RN or coworkers Leave or unexpected absences Covered	<input type="checkbox"/> Missed Lunch _____ 30 min
h. <input type="checkbox"/> Boarding patients	

Charge Nurse Y/N _____

Date: _____

Signature(s) of staff experiencing unsafe/inadequate staffing objection: _____

Ei Kaminaka with staffing variance binder

"We need to gather data to move management – these forms are designed to accrue that data – and we all need to be filling these out. There are Staffing Variance Form binders on most units. If someone needs a form they should contact their staffing committee members."

- **Marghee Baldridge, RN, ED**



Staffing Committee

Marghee Baldridge, ED
Michael Sumner, ED
Naomi Garcia, FCBC
Kara Shafer, Float
Adiam Giddey, PCU/ICU
Mona Denton, Surgery
Ei Kaminaka, Telemetry



THREE UNINTERRUPTED 15-MINUTE BREAKS AND A MEAL BREAK - IT'S THE LAW

We are filling out short staffing forms to hold CHI accountable to our contract and the law. The current short staffing makes it impossible at times to take a break without putting our patients at risk. We worked to increase staffing standards starting in 2020 that all staff get uninterrupted breaks and meals. That means we need the right staffing levels to allow us to take a 15-minute break for every four hours worked. CHI needs to invest in enough staff to provide breaks so we can be safe.

"Some days we are staffed good and short staffed others. I think the incentive pay should continue to address staffing. I make sure I get my lunch break – but almost never get all three of my 15-minute breaks. For CNAs when they sit there

is nobody to release them for break, especially in the ED. Some days the ED is really short staffed the way they schedule people. We need to get our meal and rest breaks. Having a break relief nurse or CNA lead to give breaks like other hospitals would help."

- Rania Adam, CNA float

We are holding CHI to a fair process for fixing payroll errors

We should expect to be paid correctly and on time, but payroll errors are a problem at CHI — they occur more often than with other employers. Our labor management committee presented the need to fix errors more quickly and prevent them from happening and we are ready to take action if they are not fixed.

"Payroll errors means that we cannot trust or know if we are going to be paid for our work. That causes staff to not want to pick up incentive shifts or work on a day off even if we are short unless we know we are going to be paid fairly and accurately. We brought up the need for CHI to be more direct fixing this if they want to stay staffed going forward."

- Ei Kaminaka, RN Telemetry



CHI discussed with our Labor Management Committee the following commitments to make payroll more transparent and accurate:

- Prior to pay day:** Worker documents any error or in Kronos log book and alerts the manager. Pay will be fixed and accurate on our check for that pay period.
- Post pay day:** We should never face financial hardship. Errors of 10% or greater will be fixed within a week. Fill out a PAR and bring a copy to your manager and HR asking for expedited assistance. All other errors should be filled out on a PAR and given to HR with the expectation of being fixed within three weeks.

Build your Zoom Skills Free trainings April 6th and 8th



Everything from contract bargaining to family celebrations has moved to Zoom during the pandemic, and online meetings are probably here to stay even after COVID-19 is over. The SEIU Healthcare 1199NW Training Fund is co-hosting two virtual workshops that will help you learn to make video calls, or build on your Zoom skills to become a great meeting leader.

You Can Zoom Call: Intro to Zoom
Tuesday, April 6th 7-9 pm PDT

Call to register: (206)321-1874 or register online at: <https://1199nw.org/3d9Bgkn>

Become a Virtual Leader: Next-Level Zoom Skills
Thursday, April 8th 7-8 pm PDT
Register online: bit.ly/TF-Zoom-Workshop3