The SEIU 121RN and Providence Tarzana Patient Care Committee is important because it is one way we can address worksite concerns. This group works directly with management to resolve anything from lack of staffing to not enough clean linen being provided to the unit. Committee members include: Karen Pelone (L&D), Sandy Thompson (ER), Jim Owen (PACU), and Linda Epstein (CVICU). **If you would like to join this committee, contact one of the committee members, or Union Representative Judith Serlin at (213) 247-4584.**

From the SEIU 121RN & Providence Tarzana Patient Care Committee

Rapid Response RNs

The hospital will establish the new position of Rapid Response RN. With implementation of this change, we all win. We are hopeful that this change will allow the Charge RN to focus on the job of being a Charge RN without multitasking. The unit wins because nurses will get the assistance they need from their Charge. The patient wins because the rapid response nurse will be able to focus on them. Congratulations to all those who voiced their opinion on this important issue. Watch for the new job description.

Working off the Clock

It is not often that management and our Union agree on something straight up. We do on this: **DO NOT work off the clock.** You are not protected by the hospital's liability insurance or Workers' Compensation if you are not clocked in, and all the work you do might be for naught.

Working off the clock is not to be confused with incidental overtime. Management should not be disciplining you for incidental overtime. If an RN consistently accrues incidental overtime, our managers should examine whether the RN has a time management problem or a workload problem and then work with us so that we are able to clock out on time.

Education Lunch Meeting

The drug companies are no longer subsiding the lunch meeting, so the hospital's position is that employees will



Bright Ideas



Call-Off Lists

We just finished the call-off policy for the following areas: CVICU/ICU, CVU/DOU, Med Surg 1, 2, 3, 4 and Oncology. (See reverse side of this flyer.)

We will now start working on guidelines for the **extra shift list.** If you have suggestions, send an email to serlinj@seiu121rn.org have to pay if they are interested in attending.

Safe Patient Handling Law

The hospital is ordering safe lifting equipment so it can comply with the new law. Expect to see it in the middle of the year.

Increase in Patient Falls

The CNO spoke on the importance of the CNA in preventing falls and improving patient satisfaction. The hospital is continuing to study the role of the CNA and the need for CNAs in each unit.

L&D Computers

The hospital previously researched having computer work stations in patient rooms in L&D. They did not make any changes at that time, but are now looking into what they can do to help improve computer charting in patient rooms. The existing computers are difficult to use in the rooms as they are not ergonomically correct. The hospital will see if there is any new equipment they can purchase to improve this.

Policies

The hospital is working on updating policies and procedures to make them more user friendly and accessible to all employees online. At this time, there are some outdated policies and they are hard to find.

Breaks and Lunch

Management told us that they believe that RNs can "buddy up" during breaks and lunch without violating Title 22. We believe this violates Title 22 and nurse-to-patient ratio laws. This will be a long-term conversation with the hospital. Just as RNs before us fought for the ratios, we now have to stand up to ensure they are followed.

Providence Tarzana Medical Center SEIU 121 RN Understanding of Call Off per Past Practice November 2011	Article 11. K. 1-8 in the 121RN union contract outlines CALL-OFF/FLEXING. #4 States "The current method used to determine appropriate call-off shall remain in effect for the term of this Agreement. For each job classification above and within each category above, Call-Off/flexing shall be by rotation beginning in reverse order of seniority provided the remain- ing Employee(s) are able to perform the work"	 In accordance with Article 11K3 factors to consider when making Call-Off/Flexing decisions are: Individual Unit needs Acuity of the patients Skill set of the RNs Premium labor (registry, OT, DT), extra shifts, volunteers and per diem staff will be called off first. 	The current practice is as follows:	 The goal is to assure FT & PT employees in the hospital are given the opportunity to work their regular shifts and to assure call off/flexing is distributed fairly among all staff. 	2. If the Hospital determines a need for a daily cancellation, the hospital will call off by job classification (meaning RN), by unit, and follow Article 11 (K) (3) (a-h).	 However, before calling off Part time or Full time employees who are working a regular shift, the hospital will call off Per Diem, premium labor (registry, overtime and double time) or extra shift em- ployees utilizing the Float clusters as defined in Article 12 (E)(1) and then following the call off/ flexing order (including reviewing call off hours/seniority) as defined in Article 11 (K) (3) (a-h). 	4. FT or PT RN may then float provided they have the necessary skills, competencies and orientation to float as needed.	5. If there are no RNs to call off in categories defined in Article 11 (K) (3) (a – h) within the Float Cluster, then a Full Time/Part Time employee may need to be called off. The hospital will call off/Flex Part Time and Full Time employees utilizing the float cluster then follow the call off/flexing order (including reviewing call off hours/seniority) as defined in Article 11.	6. FT or PT RN may then float provided they have the necessary skills, competencies and orientation to float as needed.	 The above applies to the following clusters: M/S 2, 3, 4, Oncology CVICU/ICU CVU/DOU All other units will continue past practice of Call-Off/Flex by each unit. 	8. Every two weeks, the Nursing Office will provide the Managers with updated call off hours which the Managers will make available to staff on the units.
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