Several hundred of our healthcare members in the United States and Canada responded to our online survey regarding safe staffing and mandatory overtime. Respondents work in a variety of job classifications and employer types. While each healthcare worker has a unique perspective, the aggregate results of the survey point to a unifying theme: From the perspective of surveyed members, there is a serious staffing crisis in the healthcare sector in both of our countries.

While it’s important to note that we must caution against making broad generalizations from the relatively low response rates, this survey gives us the tools to dig deeper into staffing issues in individual bargaining units and job classifications. If you would like to run this—or any—survey with your members, please have your Staff Representative contact the Health Care Workers Council. Surveys modeled around this one can be very helpful when preparing for making proposals around safe staffing during negotiations.

Responses from survey participants indicate the following key themes:

- Healthcare professionals express low job satisfaction when it comes to current conditions of the workplace, and inadequate staffing is the most significant problem.
- Healthcare professionals report that these shortages do not let them give the quality patient care they want to give and can even put patients at risk.

Nearly 60% of respondents say that “helping patients and their families” is what they enjoy most about their profession. However, inadequate staffing levels, reduced time with patients or residents, and inadequate pay/benefits stunt that enjoyment. In fact, just 8% of respondents say they are “very satisfied,” with their careers.

The issue of inadequate staffing is a complicated one and respondents say that a combination of employer practices contributes to the mounting problem:

- 76.5% of respondents report a decrease in “time I have to complete assigned tasks.”
- 80.6% of respondents report “increased patient care load.”
- 52.7% of respondents have seen positions in their workplace frozen or eliminated.
- 46.4% of respondents have experienced their employer combining jobs/ job classifications.

Increasing acuity of patients and residents magnify these potentially harmful employer practices even further. 72% of respondents say the acuity of patients or residents has increased over the past few years.

The combination of all these factors results in a staggering 76.3% of respondents reporting that the “quality of care at my facility has decreased” as the result of increased workload/unsafe staffing.

Where do we go from here? While inadequate staffing is a serious issue for healthcare workers and our patients in both the U.S. and Canada, it is not an insurmountable one. Long-term strategic plans to strengthen our local unions and fully prepare for negotiations are necessary in order to win safe staffing at the bargaining stable. If hospitals, nursing homes, and other healthcare providers improve conditions for health professionals – and therefore improve conditions for our patients – we can make real progress in providing the quality professional health care that all patients need and deserve.
Patient deaths in hospitals might be reduced by easing nurses’ workloads and emphasizing education in hiring, a new study suggests. The findings can help administrators make informed staffing decisions.

Decision-makers must plan nurse workforces in the face of scarce resources and health care reforms. Past studies of how nurse staffing and education affect patient outcomes led the Institute of Medicine to recommend that 80% of nurses in the U.S. have a bachelor’s degree by 2020. Many hospitals now aim to hire more bachelor’s degree-trained nurses, and nearly 25 U.S. states have proposed or enacted legislation to improve hospital nurse staffing.

A research team led by Dr. Linda Aiken of the University of Pennsylvania and Dr. Walter Sermeus of the Catholic University of Leuven in Belgium analyzed patient outcomes associated with nurse staffing and education in 9 European countries. The scientists reviewed the hospital discharge data of more than 420,000 patients who underwent common surgeries. The researchers also surveyed more than 26,500 nurses in the study hospitals to measure nurse staffing and education levels.

The team assessed how these nursing factors affected the likelihood of patients dying within 30 days of hospital admission. The study was supported by the European Union’s Seventh Framework Programme and NIH’s National Institute of Nursing Research (NINR). Results were published online in the Lancet on February 25, 2014.

The researchers estimated that each additional patient in a hospital nurse’s workload increased the likelihood of a patient dying within 30 days of admission by 7%. Nurse education also affected outcomes. A better educated nurse workforce was associated with fewer deaths. For every 10% increase in nurses with bachelor’s degrees, there was a drop in the likelihood of patient death by 7%.

In hospitals where 60% of nurses had bachelor’s degrees and cared for an average of 6 patients, the researchers calculated, the likelihood of patients dying after surgery was nearly one-third lower than in hospitals where only 30% of nurses had bachelor-level education and cared for an average of 8 patients.

“Our study is the first to examine nursing workforce data across multiple European nations and analyze them in relation to objective clinical outcomes, rather than patient or nurse reports,” Aiken says. “Our findings complement studies in the U.S. linking improved hospital nurse staffing and higher education levels with decreased mortality.”

“This study emphasizes the role that nurses play in ensuring successful patient outcomes and underscores the need for a well-educated nursing workforce,” says NINR Director Dr. Patricia A. Grady.

**Around the Union.**

**Mylan Pharmaceutical Local Union 8-957: Combine Expertise and Collaboration to Keep Members Safe**

When Mylan Pharmaceutical began to process a new drug, which requires specialized procedures in order to process safely, Local Union 8-957 understood the importance of working quickly and collaboratively with the employer to ensure the ongoing safety of its members. Because this particular product has the potential to produce a variety of health and safety issues, the Local Union Executive Board, Union Safety Committee, Sharon Thompson from the USW Health, Safety and Environment Department, and district Staff Representative Stanley Biggus worked along with Mylan to ensure that both the employer and our members understood potential hazards and followed proper procedures to ensure the ongoing safety of all involved.

Regarding the process, Local Union President Pat Fowler said, “This is an example of how we can utilize the expertise of our International Union and the Local Union Leadership to work together with an employer in order to do our jobs well and to do them safely.”

**OSHA Reaches Out to Health Care Workers**

Did you know that a hospital is one of the most hazardous places to work? The 2011 worker injury rate in U.S. hospitals was twice of that experienced in manufacturing workplaces. This means that workers from hospitals are more likely to be injured at work than many other workers. Because of this, the U.S. Department of Labor’s Occupational Safety and Health Administration developed a resource for healthcare workers.

OSHA has launched a new website with specific information on safety for healthcare workers. This website provides information for workers to use to reduce injuries. This information provides healthcare workers with tools to evaluate workplace safety hazards, improve patient handling programs, and incorporate safety and health management systems. This website also pinpoints the most hazardous work conditions in the healthcare field—back strains from patient handling, slips and falls, needle sticks and exposure to blood borne pathogens.

“These materials can be utilized by USW health care local unions to prevent worker injuries and improve patient safety,” stated Fred Redmond, USW International Vice President of Human Affairs.

The healthcare website provides materials on safe patient handling that are intended to recognize the most common type of injuries hospital workers face. These resources are easily accessible through the OSHA website at www.osha.gov/hospitals and more help is available from the USW’s Health, Safety and Environment Department by contacting the department by email at safety@usw.org.

**Organizing Training for Local Union 9460**

Staff from our International Organizing Department were invited to Duluth, Minn., by Local Union 9460, to help run a training for new member organizers. The local leadership made the decision to expand their healthcare organizing in the Duluth-Metropolitan area. They currently represent over 2,400 healthcare members. Maria Somma, Assistant Organizing Director, led the three-day training that covered researching and probing targets, building committees, house visits, and more. With the focused efforts of the Local and the International on growing the membership at Local Union 9460, we feel confident in resulting victories.
A nun who worked for five years as a registered nurse at the Allegheny County Jail infirmary was fired last week for spearheading unionization efforts, an organizer for the United Steelworkers union said Monday.

Sister Barbara Finch, a Sister of St. Joseph of Baden, had her security clearances revoked and was dismissed from her job Thursday after she expressed concerns about staffing, safety issues and patient care during meetings at the jail, said Randa Ruge, the union organizer.

“It became clear that she was one of the leading activists in the organizing drive,” Ms. Ruge said, referring to ongoing unionization efforts at the jail.

Ms. Ruge described Sister Barbara as a “sacrificial lamb” and said that the union is “concerned that taxpayer dollars are being used for union-busting.”

The Steelworkers union on Friday filed an unfair labor practice charge against Corizon Health Inc., the Tennessee-based firm that manages county jail health services. The charge, sent to the National Labor Relations Board, is that Corizon dismissed her in retaliation for participating in union activities.

“This is a clear case of intimidation and union-busting at its worst,” United Steelworkers International president Leo W. Gerard said in a statement. “Sister Barbara has been an outspoken advocate of change for these courageous workers and their patients, and this kind of illegal and unjust action, unfortunately, is par for the course with Corizon.”

“It is our policy not to discuss personnel issues in the news media. I can confirm that we abide by all labor laws; if there is a question to address with the NLRB, we will do so,” said Susan Morgenstern, a Corizon spokeswoman.

An Allegheny County spokeswoman also declined comment.

Union members, jail employees and other union advocates held a protest Downtown Monday, bringing attention to Sister Barbara’s complaint and making known their support for the right of workers to unionize.

Corizon took over management of Allegheny County Jail health services in September, after signing a contract with Allegheny County last summer for $11.4 million a year.

Steelworkers representatives have said that, since Corizon took over, they’ve received reports of bad working conditions. In January, the union filed a labor petition to unionize about 110 members of the Allegheny County Jail medical staff. The National Labor Relations Board has scheduled an election Feb. 14.

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Read more: http://www.post-gazette.com/local/region/2014/02/04/USW-Jail-nun-nurse-was-fired-for-union-organizing/stories/201402040075#ixzz2uv1sh2rB