

Advocating and Working Together to Protect Our Staff and Patients During COVID-19

We, the staff at Kalispell Regional Health, are on the front lines in the delivery of healthcare to our patients in need. We are working together to take reasonable steps to protect patients, clients, families and employees from unnecessary exposure to communicable diseases such as COVID-19. We have proposed a **Memorandum of Understanding** with KRH Administration that outlines the following:



"As a nurse working at the bedside, my focus is always on making sure my patients get safe, high-quality care. The coronavirus is a real danger all of us here in Kalispell. The truth is, anyone who walks into our hospital could have the coronavirus and then transmit it to other people. That's why it's so important to have the right masks and other personal protective equipment available to healthcare workers on the front lines. I understand that there is a mask shortage, and

we need suppliers and the government to step up and make sure every hospital has what it needs. We also need KRMC to provide consistent guidance, screening and training during the COVID-19 crisis. It's not right for nurses like me to feel like we're playing Russian Roulette with our health. I know KRMC is trying to manage a difficult situation, but we need them to move faster to protect the health of caregivers and the community. We offered some solutions to management on some proactive measures and we hope they do the right thing." **Tara Lee, Pediatrics, RN**



"I want to share with you our union victory from this week. We had a situation in our department that felt unsafe — a provider was going to perform an elective procedure (after KRH said they would only be doing non-elective procedures) and we were concerned about the proximity this doctor had with a confirmed COVID-19 employee. We didn't feel it was appropriate to be doing this procedure, especially because the patient could potentially have been immunocompromised. My co-workers and I felt we had to step in and do something. We wrote a letter to our director, demanding this case be cancelled or another doctor assigned, and many of us nurses voiced our opinions against the procedure directly to our director. Our director was resistant at the beginning, not taking our concerns seriously — but we kept pushing. At the last minute, they cancelled the procedure! We take an oath as nurses to protect our patients — not to knowingly put them in potentially harmful situations. Don't let administration intimidate you from standing up for yourself and your patients. We were successful because we came together to advocate for our patients' and co-workers' safety. It wouldn't have been the same if it had been just one nurse saying no."

Mary Lamar, RN, Holding Room

- 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.
- 2.** An employee who self-quarantines based on concern of social exposure to COVID-19 shall have immediate access to CIB hours on day one until the employee is able to return to work.
- 3.** When possible, telework or alternative assignments may be provided as an accommodation.
- 4.** 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.
- 5.** 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.
- 6.** KRH will provide training to ensure employees have orientation and competence in any newly assigned roles.
- 7.** Creating a Regional Float Pool that defines floating within the facility and between facilities so that employees can float to where the need is if requested by management.

We had bargaining this week and gave management the remainder of our proposals which included:

- A 25-step wage scale that reflects our years of experience and ensures we can recruit and retain nurses
- Across-the-board increases that will keep up with the cost of living
- Premiums like charge pay, certifications, shift differentials
- Retirement: A base contribution of 4% into our retirement. Lower the vesting period to three years. Ensuring that all employer contribution to our retirement plan is deposited each pay period.
- Kid Kare: Add a flexible option to scheduling that reflects our schedules and keeps the rates the same during the life of the contract
- Severance package: In case of a layoff, we would receive pay and benefits while we look for other work
- Home options
- Clinic staffing

Next bargain is April 15.

COVID-19 Safety Action:

Great news! Today we presented to Brian Matthews, bargaining director for management, with a larger version of our demands for the safety of staff and patients during this COVID-19 pandemic. Also present during the presentation were members of our bargaining team via Zoom meetings — our way of recognizing the importance of social distancing while continuing to have a presence. Ryan Pitts, our CNO, was conveniently unavailable. We presented these demands yesterday to Brian and we are getting movement. They have requested another virtual bargaining session tomorrow, and stated today that a lot of these issues will be addressed.



The actions we take in house are strong! This is how we will win a GREAT contract. We need to all stick together and fight for what is right for our patients and the safety of ourselves. Together we CAN move this mountain, and change the face of healthcare for the better!"

Donna Nelson, Pathways, RN & Kim Paulsen, IMC, RN



"I've worked on the 3rd surgical unit the entire eight years I've been at KRH and love it. This past Tuesday myself and several other nurses brought a letter to administration that nurses from the bargaining team drafted addressing concerns we intended to take up in bargaining for the safety of our patients. We, as nurses, would like to know that we plan to follow CDC guidelines to a T. Since we, as front line staff, are the ones who have to implement these decisions being made, many of us would like to

think that administration would be including us completely in the loop on decisions made and the thinking behind them, so that we all have the same story with how this crisis is being handled. As a union, we're working to make sure that we have clear strategies & transparency when it comes to filling staffing gaps, accessing leave, and the PPE our community is counting on. We hope to hear a response on what we're presenting in bargaining as soon as possible and come to agreement."

Kimberly Yarck, 3rd Surgical, RN

