

## **NURSES** push for safe staffing and more bargaining dates

This week, RNs explained the nurse staffing issues that exist across the health system to management.

- **NURSES** from ambulatory care described their unique frustrations with the lack of an acuity system to determine staffing needs.
- **NURSES** from inpatient areas described how management admits new patients to their units without making the staffing adjustments necessary to keep up.
- **NURSES** told management how **night shift staffing levels are unjustifiably low**, and how **cuts to ancillary staff** in certain areas have made patient care more difficult.



UMPNC/MNA members from Pediatric Rheumatology

Our UMPNC/MNA bargaining team will be proposing safer staffing levels for all RNs and ancillary staff, along with strong protections for ambulatory care RNs as well. **As frontline caregivers, UMPNC/MNA NURSES have both a duty and a right to speak up for patients when staffing decisions are made.**

We are pressing the University for more bargaining dates before the end of June, when our current contract expires. Management agreed to some additional dates, but not the amount we believe is needed. Wearing red shows your support for our team and tells management they must commit the necessary time for bargaining.



### **Alert:** Bed Bugs Reported in Two Units

UMPNC/MNA received reports of bed bugs in Med Inn Infusion and 12 West this week, and is closely monitoring the situations. We are concerned over the proliferation of bed bugs in patient care and working areas, and have also heard reports of symptoms such as nausea after people were exposed to the chemical cleaning agents the University is using to address the infestation.

*If you are experiencing bed bug infestations or symptoms provoked by chemical cleaning agents, share your concerns with your Area/District Reps.*

### Electronic charting survey now open

Our UMPNC/MNA bargaining team created a follow-up survey addressing the difficulties caused by electronic charting requirements.

**Your input will help illustrate how serious of a problem this, and help push management into responding.** Visit [minurses.org/survey](http://minurses.org/survey) to fill out the short online survey before March 23.

Stay up to date on our bargaining progress at [minurses.org/umpnc](http://minurses.org/umpnc)

**UMPNC** an affiliate  
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## UMPNC/MNA **NURSES** Reject Management's Move Toward Two-Tier Healthcare for Patients and Two-Tier Wages for RNs

Six years ago, while working on 5C, I overheard a conversation between the admitting clerk and charge nurse. A discreet request was being passed along to give a private room to a patient who was a major University donor, and therefore, deserving of VIP treatment during their stay.

5C has immunocompromised patients for whom its limited number of private rooms are medically necessary; at times of higher census, otherwise healthy postoperative patients are usually placed in semi-private rooms with a shared bathroom.



UMPNC/MNA District Rep Tammy Thompson, RN (L), and UMPNC/MNA Secretary Ted McTaggart, RN (R)

*The charge nurse's response, "All of our patients are Very Important People. We are not going to give preferential treatment to one patient over others."*

I remember feeling proud that the charge nurse stood up for the principle that all our patients are deserving of the same excellent care, regardless of who they are. Despite occasional discreet requests from higher ups, U of M has never had an official policy dividing patients into "first class" and "second class" status...until now.

Victors Care is a shameful step toward making "VIP" medicine an official policy at Michigan Medicine. Top-tier care will be reserved for the wealthy. The vast majority of us, who cannot afford the price tag of \$3,600 per year on top of insurance premiums, will be expected to settle for "second class" status.

UMPNC/MNA nurses reject the notion that any patient is deserving of anything less than top-tier care. Healthcare is a human right, not a privilege for those who can afford to pay.

*Within a week of announcing two-tier healthcare for patients, Michigan Medicine management has also declared its intention to establish two-tier wages for nurses who work in certain offsite ambulatory care clinics.*

Last year, Michigan Medicine acquired a urology clinic in Muskegon, Michigan. The RN brothers and sisters at West Shores Urology clinic in Muskegon are members of our union and have been trained to uphold the same excellence in care that all UMPNC/MNA RNs provide. Nevertheless, Michigan Medicine has made clear its intention to institute a separate wage scale for RNs at West Shore Urology.

UMPNC/MNA RNs, regardless of where they work, give their all every day to save lives and build healthier communities. As "the leaders and the best," we must reject the notion that some deserve less than others. We stand with RNs in Muskegon and affirm the principle of equal pay for equal work. As an old union slogan goes, "An injury to one is an injury to all!"



The elected RNs of our bargaining team are fighting for ALL patients, regardless of who they are, and all UMPNC/MNA members, regardless of where they work.

UMPNC/MNA **NURSES** say "**NO**" to two-tier healthcare for patients, and "**NO**" to two-tier wages for RNs.

-Ted McTaggart, RN — UMPNC/MNA Secretary