



## Members' Memos: Letters to the Editor

In the summer 2006 edition of Nurses United News, we invited members to write in. Here is a nurse's response to the articles on shared governance and Magnet hospitals that appeared in that issue.

Dear Editor,

*I read the articles on Magnet status and shared governance several times in the summer edition of NU News, and I am still wondering what it all means. Is it just another looks-good-on-paper thing that has no real-world relevance?*

*Look at section II, Structure, in the shared governance outline: a "circular model" that is "flat on the top." This is a contradiction in terms: circles do not have flat tops. Do you see why I cannot understand this stuff, let alone buy into it?*

*A staff nurse deciding what care is to be given? Preposterous! Our practice is driven by the policies and procedures of our institution, not by a nursing "whim."*

*Accountability? Oh! What a convenient scapegoat we can become if the decisions we make fall through.*

*continued on back page*

**Nurses United wishes you happy holidays and a peaceful and prosperous New Year.**

## President's Corner

Dottie Hararas, RN

It is the time of year to prepare for negotiations for a renewed contract with the hospital. Actually, we started this process back in June 2006 and continued through December when we publicized and held monthly Negotiation Committee meetings. All Nurses United members were invited to attend and describe their issues to us in real time.

Besides these monthly forums, we have prepared the Nurses United 2007 Negotiation Survey. It is a part of this newsletter and can be completed and sent back to Nurses United. You can also find it on our Web site at [www.nursesunited.org](http://www.nursesunited.org). In addition, NU shop stewards will be visiting their assigned units to distribute the surveys and/or to collect them from you. It is vitally important that the Negotiation Committee knows what the most important issues are to NU members.

Please send your name and e-mail address to [nursesunitedorg@aol.com](mailto:nursesunitedorg@aol.com).

Important announcements will be coming out, via e-mail, in the weeks and months ahead as negotiations begin in earnest in mid-January 2007, and we want to be able to contact you in a timely manner. We need to know how you would prioritize important issues. Take some valuable time to complete and return the Nurses United 2007 Negotiation Survey!

The union continues to do good work as it represents nurses regarding workplace issues. Because we always have much to accomplish, we continuously need dedicated members who want to see Nurses United continue to successfully represent nurses at Washington Hospital Center. Stay in touch with us, and let us know what you can do to help. Our union is stronger with our continued unity and everyone's participation. ■

## CONTENTS

<i>ADOs — Keep Them Coming . . . . .</i>	<b>2</b>
<i>Recent NLRB Ruling Concerning Supervisory Status of Charge Nurses . . . . .</i>	<b>2</b>
<i>Nurses United 2007 Negotiation Survey . . . . .</i>	<b>3</b>
<i>Parking Fees for WHC Nurses with 25 Years or More of Seniority . . . . .</i>	<b>3</b>
<i>Our Nurses United Elected Leadership Continues to Excel . . . . .</i>	<b>4</b>
<i>More on Shared Governance and Magnet . . . . .</i>	<b>5</b>
<i>Congratulations . . . . .</i>	<b>6</b>
<i>Nurses United President Dottie Hararas, RN . . . . .</i>	<b>6</b>
<i>Letter to All Members from Dottie Hararas, Nurses United President and CEO . . . . .</i>	<b>6</b>
<i>Nurses United President and Chief Executive Officer . . . . .</i>	<b>7</b>

## ADOs — Keep Them Coming

Give our negotiating team the information they need to assist them when discussing working conditions and workplace issues with management. Complete an ADO (assignment despite objection) form when conditions at work seem unsafe or undesirable. ADO forms are available online ([www.nursesunited.org](http://www.nursesunited.org)) and can be downloaded and printed out for your use.

The following units submitted ADO forms between June 10, 2006, and November 20, 2006:

- Cancer Institute— Infusion Center
- 2C
- 3NE
- 5C
- 4C
- 2EI
- 4E
- 5E
- MOR
- 2G
- 5A/ICN
- 5NW (L&D)

## Recent NLRB Ruling Concerning Supervisory Status of Charge Nurses

On October 3, 2006, the National Labor Relations Board (a government entity) ruled on three cases, setting forth guidelines for determining whether an individual is a supervisor as defined by Section 2(11) of the National Labor Relations Act (NLRA). Supervisors are not protected by the NLRA and may be excluded from belonging to a bargaining unit (union).

Across the country, the NLRB's recent decisions are being referred to as the "Oakwood Trilogy," because one of the decisions related to permanent charge nurses at that facility who were deemed to be supervisors and therefore not covered by the NLRA and not eligible to belong to a union.

The greater labor community has been abuzz over the impact the NLRB's decision could have on other healthcare facilities, including hospitals, industrial settings, and other employment settings. Unions throughout the country are actively and aggressively monitoring employers' decisions regarding this new definition of supervisor.

On November 13, 2006, the Washington Hospital Center went on record and assured Nurses United leadership that WHC "has

decided not to challenge the status of such (resource) nurses. As a result, these (resource) nurses will remain bargaining unit nurses." This means that the nurses at WHC who are assigned charge or resource duties can and will continue as members of Nurses United, the union that represents RNs at the hospital.

We are pleased with WHC's decision and think it is the right one. Putting this issue to rest means we can all focus on the highest priority at WHC — our patients and the care we give to them. ■

### Pop Quiz: Combined Years of WHC RN Experience of NU Board Members

Adding up the years they've spent at Washington Hospital Center working as RNs, the nine members of Nurses United's board of directors have a combined total of

- A. 99 years
- B. 125 years
- C. 167 years
- D. 187 years

Find the answer at the bottom of page 5.

## Nurses United 2007 Negotiation Survey

Please complete both sides and return to Nurses United.

Please answer the following questions to help Nurses United prepare contract proposals that reflect the desires of the membership.

**Negotiations will begin the week of January 15, 2007.**

Please return the survey ASAP to a Nurses United representative, or mail to:

**Nurses United**  
**8737 Colesville Rd.**  
**Suite 950**  
**Silver Spring, MD 20910**

or fax to **301-588-8854**

YOUR ANSWERS WILL BE KEPT CONFIDENTIAL.

Name (please print) \_\_\_\_\_

Unit \_\_\_\_\_

Home Phone \_\_\_\_\_

Employee # \_\_\_\_\_

E-mail (please print) \_\_\_\_\_

Place an X by your classification:

Full Time     Part Time     WIN     Float

Other (please print) \_\_\_\_\_

1. Rank the following items based on importance to you.

Use numbers 1 through 16. The number 1 represents the most important, and the number 16 represents the least important. Use each number only once.

\_\_\_ Wage increase

\_\_\_ Improved life insurance

\_\_\_ PTO increase

\_\_\_ Improved short-term disability

\_\_\_ Overtime pay

\_\_\_ More holidays

\_\_\_ Pension plan

\_\_\_ Improved long-term disability

\_\_\_ Shift differential

\_\_\_ Improved health insurance

\_\_\_ Parking

\_\_\_ Retirement incentives

\_\_\_ Tuition assistance

\_\_\_ Annual leave

\_\_\_ Shared governance/Magnet

\_\_\_ Other (please print) \_\_\_\_\_

*continued on next page*

### Nurses United NEWS

Official Newsletter of Nurses United of the National Capital Region

#### Managing Editor: Patty Ronayne, RN

Suzanne "Sue" Johnson, RN  
 Vice President  
 3H, Ext. 7-7221

Nurses United of the  
 National Capital Region  
 8737 Colesville Road, Suite 950  
 Silver Spring, MD 20910  
 Phone: 301-588-8853  
 Fax: 301-588-8854  
 Web Page: [www.nursesunited.org](http://www.nursesunited.org)  
 E-mail: [nursesunitedorg@aol.com](mailto:nursesunitedorg@aol.com)

Stephen Frum, RN  
 Chief Shop Steward  
 2H, 202-494-8083

Ruth "Betsy" Cerullo, RNC  
 Treasurer  
 5F, Ext. 7-6561

Mary Smith, RN  
 Corresponding Secretary  
 NICU, Ext. 7-6510

#### Nurses United Officers

Dorothy "Dottie" Hararas, RN  
 President  
 5F, Ext. 7-6561

Marie Edelen, RN  
 Recording Secretary  
 2G, Ext. 7-7121

Geri Lee, RN  
 Board Member  
 L&D, Ext. 7-6512

Josephine Owusu, RN  
 Board Member  
 2NEIMC, Ext. 7-9140

Patricia "Patty" Ronayne, RN  
 Board Member  
 2G, Ext. 7-7121

**Please address all  
 correspondence to  
 Managing Editor, NU News**

Nurses United of the  
 National Capital Region  
 8737 Colesville Road, Suite 950  
 Silver Spring, MD 20910

The information in this newsletter is provided as a service to Nurses United members. It does not constitute legal advice. If you have a workplace problem, before you file a grievance or take legal or other action, please read the union contract and contact a shop steward or the chief shop steward.

Copyright © 2006 Nurses United of the National Capital Region  
 All Rights Reserved

The materials in this newsletter and on the Nurses United Web site are copyrighted. You may, however, use the material if in writing you credit "Nurses United of the National Capital Region" as the source.



## Parking Fees for WHC Nurses with 25 Years or More of Seniority

This past year, Nurses United discovered that quite a few nurses who had reached 25 years of seniority at Washington Hospital Center were still paying parking fees. Article 23.1(b) of the collective bargaining agreement (contract) clearly states, "Nurses with twenty-five (25) or more years of Hospital seniority shall receive free parking."

Nurses United made certain that these nurses would no longer be paying parking fees and that the specific nurses were reimbursed by the hospital for erroneously deducted parking fees.

If you know that you have at least 25 years of seniority at WHC

and are still having parking fees taken out of your paycheck, please let Nurses United know.

More recently, parking fees have been deducted from the paychecks of nurses who have 25 years or more of seniority and who previously had not been paying the fees. If you know that parking fees were erroneously taken out of your paycheck and you have 25 years or more seniority at WHC, please notify Nurses United.

When nurses notify us, we notify WHC. The hospital will reimburse nurses for erroneously deducted parking fees, in addition to ensuring that they are coded not to have parking fees deducted. ■

## Nurses United 2007 Negotiation Survey

continued from page 3

2. Rank the following items based on importance to you.

Use numbers 1 through 6. The number 1 represents the most important, and the number 6 represents the least important.

Use each number only once.

\_\_\_ Health and safety

\_\_\_ Floating/Reassignment

\_\_\_ Staffing

\_\_\_ Restrictions on mandatory overtime

\_\_\_ Committees/Councils

\_\_\_ Scheduling flexibility

3. What is the total increase in percent you would like over the next three years? \_\_\_\_\_ %

4. Please put an X by your answers to the following questions:

A. Do you think we should retain the concept of “unit-based seniority”?

Yes  No

B. Would you like more 36-hour positions on your unit?

Yes  No

C. Would you like more WIN positions on your unit?

Yes  No

D. How important is a retention bonus to you?

Very important  Not very important

E. Do you think it is important to replace travelers or agency nurses with “regular staff nurses”?

Yes  No

5. Other concerns: Use the space below to describe any other job-related problems that you think should be dealt with in contract negotiations. If you have ideas for possible solutions, be as specific as you can. Use additional paper if necessary. (Please print.)

---

---

---

---

---

---

---

### What happens at negotiations depends on ALL OF US, including you!

Now that you’ve thought about priorities for bargaining, please indicate which responsibilities you can assume to help build our negotiating strength.

Serve as a unit rep, helping to get information out to nurses on my unit.

Distribute leaflets to nurses.

Be part of a phone tree to contact five other nurses when our representatives want to get a message out quickly.

Attend meetings or events to show that we support our negotiators.

Help with research to develop and support our bargaining process.

Other: \_\_\_\_\_

## More on Shared Governance and Magnet

### Nurses United Executive Committee

Many Nurses United members have been voicing continuing concerns about the duplication of resources, time, and money being put into the shared governance initiative that the hospital put in place several years ago and that it continues to promote.

Take a moment to compare the duplicative structures and consider the conclusion presented here. Then draw your own conclusion.

#### Points of Comparison

- Nurses United was created by, for, and of the Washington Hospital Center nurses and voted in by many hundreds of WHC nurses during a legally sanctioned NLRB election.

- Shared governance is a concept created, implemented, funded, and directed by management at WHC.

- Nurses United has a functioning constitution and bylaws ratified by NU members.

- Shared governance has a constitution and bylaws not ratified by NU members.

- Nurses United has the Quality Patient Care Committee (QPCC), founded on language negotiated by nurses and placed in the collective bargaining agreement (contract).

- Shared governance has a Performance Improvement Committee initiated and administered by management.

- Nurses United has the Labor Management Committee, founded on language negotiated by nurses and placed in the collective bargaining agreement (contract).

- Shared governance created a Magnet Steering Committee, formed and steered by management, with volunteer nurses participating under management’s approval and direction.

- Nurses United has a board of directors duly elected by the members in fully sanctioned, democratic annual elections.

- Shared governance has a Coordinating Council, which operates under management initiatives with volunteer nurses participating under management’s approval and direction.

- Nurses United has 30 shop stewards who are duly elected by the members in fully sanctioned annual elections and are available to represent nurses regarding workplace issues.

- Shared governance has Magnet Champions who volunteer, under management’s approval and direction, to promote the concept of shared governance.

- Nurses United has a Shop Steward Committee composed of nurses who discuss with their peers important issues that affect nurses in the work setting and who explore and initiate methods of representing nurses.

- Shared governance has councils formed and steered by management, with volunteer nurses participating under management’s approval and direction.

- Nurses United has the ADO (assignment despite objection) forms to pinpoint hot spots on specific units and forwards them to the QPCC for review and action, when appropriate.

- The Shared Governance Coordinating Council has developed an SOCC form that management is directing nurses to use to report problems.

#### Conclusion

- Nurses United is an all-inclusive, legal, democratic structure created of, by, and for the nurses at WHC through a legally sanctioned NLRB election. It is the exclusive bargaining agent for eligible WHC nurses regarding pay, hours of work, and working conditions. Nurses United, with its predecessor, has been in existence representing nurses at WHC for the past 30 years.

- Shared governance was initiated by WHC management a few years ago, with minimal staff nurse inclusion or decision making, using a highly paid consultant to advise and guide their initiative.

Consultant Tim Porter-O’Grady, EdD, RN, CS, FAAN is quoted here, in part, from his article titled “Overview and Summary: Shared Governance: Is It a Model for Nurses to Gain Control Over Their Practice?”

“While collective bargaining is not traditionally seen as shared governance activity, it certainly falls well within the context of shared decision making. As an option, collective bargaining provides a mechanism for nurses to undertake a legally sanctioned approach to participation in decision making within clearly defined and prescribed parameters. ... It serves as a viable mechanism for nurses to respond to issues that dramatically affect their ability to do nursing’s work and also issues that affect the delivery of patient care.” ■



## Our Nurses United Elected Leadership Continues to Excel

by Dottie Hararas

We are extremely proud of all Nurses United members, who continue to provide the best possible care to our patients. Recently, we learned of a special circumstance that we would like to share with you.

Nurses United’s treasurer, Ruth (“Betsy”) Cerullo, WHC Float Pool (5F unit based) nurse at Washington Hospital Center, who also works full time at INOVA Alexandria Hospital, was recently selected by the medical staff at the Alexandria

facility as their 2006 Nurse of the Year. The award recognizes her exceptional skills as a nurse and clinician. Betsy is a Level IV, RN-C, L&D nurse at INOVA Alexandria Hospital. She was presented with the award at the Hilton Hotel on December 6, 2006.

Congratulations, Betsy! We are very proud of you. As one who has had the pleasure of working alongside Betsy on 5F, I can say that she is a nurse extraordinaire. ■

## Congratulations

Please join us in welcoming Dottie Hararas, RN, to Nurses United's first salaried executive position as our elected president and chief executive officer, effective November 1, 2006. She has been functioning in that

capacity as a volunteer since the founding of Nurses United in April 2003. Dottie is a proven leader and strong nurse advocate. We are fortunate that she has accepted this role. Congratulations, Dottie! ■

## Nurses United President Dottie Hararas, RN

### Outline of Union and Collective Bargaining Accomplishments

**1967** Graduated from Washington Hospital Center School of Nursing

**1967 until present** Employed as a registered nurse at WHC

**1970s** Founding member of the WHC Staff Nurses Association

**1970s – 1980s** President of the WHC Staff Nurses Association

**1975** Led the union-organizing campaign for registered nurses at WHC

**1976** Conducted a successful NLRB signature campaign and union election for nurses at WHC

**1978** Conducted a successful 32-day union recognition strike, winning a first collective bargaining agreement contract for nurses at WHC, after which all registered nurses returned to their previous positions per a negotiated amnesty clause

**1978** First contract ratified by union membership

**1978** Participated as a guest panelist at the ANA convention discussing the topic "How to Conduct a Successful Strike"

**1978 – 1980s** Elected as ANA convention delegate

**1978 – 1980s** Co-negotiated the collective bargaining agreements (contracts) by and between WHC and the union

**1978 – 1990s** Held various offices in the union, culminating with president of District of Columbia Nurses Association (DCNA) and chairperson of DCNA Economic and General Welfare Council

**2003** Founding member of Nurses United

**2003 – 2004** Co-negotiator of the first collective bargaining agreement (contract) by and between the WHC and Nurses United

**2003 to present** Acting and elected president of Nurses United

**2003 to present** Paid president and chief executive officer of Nurses United through member ratification of NU constitution and bylaws ■

## Letter to All Members from Dottie Hararas, Nurses United President and CEO

After accepting the newly established paid position of president and CEO of Nurses United, Dottie Hararas sent the following letter to all union members. We are reprinting it here to ensure that all NU members get the opportunity to read it.

Dear Nurse Colleague,

I wanted to personally write to let you know that the Nurses United board of directors has brought me on staff in an executive salaried position as your elected president and chief executive officer.

This is the first such position for Nurses United, and I am excited about all of the possibilities. On November 1, 2006, when the decision was made, an announcement went on the top of the NU

home page and via e-mail message to the 690 members who have provided us with their e-mail addresses.

At our quarterly NU membership meetings and in discussions with many individual nurses, it became clear that members felt that Nurses United would be stronger with a full-time executive on staff. Our NU constitution and bylaws, unanimously ratified by membership, spells out that the NU president is also the CEO. I have been functioning in that capacity since April 2003. On our Web page, click on the hyperlink in the announcement, and it will take you to a page that describes the activities of the president and an outline of accomplishments in bringing empowerment, collective bargaining strength, and union job protection to WHC nurses through the negotiation of contracts with the employer from 1978 to the present [also found in this issue].

We have had an attorney and an IS/IT professional on retainer since the inception of Nurses United in 2003; now I become its

## Nurses United President and Chief Executive Officer

### Outline of Major Activities and Responsibilities

The president of Nurses United is also the designated chief executive officer (CEO), as described in the union's constitution and by-laws. The following list summarizes what those combined roles entail.

- Serves as ex officio member of all Nurses United committees and subcommittees, excluding Nominations and Elections, and receives and coordinates reports from committee members.
- Corresponds and consults on a daily basis with the chief shop steward to discuss member disciplines, grievances, arbitrations, and other matters related to member representation.
- Communicates on a regular basis with the treasurer and is second signature on Nurses United checks; reviews and initials monthly checking account reconciliation.
- Corresponds with Nurses United officers and board members in consultation with their assigned projects, including updating the vice president on all union matters.
- Prepares the agendas for the Executive Committee board meetings, Labor/Management Committee meetings, and all general membership meetings.
- Presides at monthly Executive Committee board meetings and quarterly general membership meetings.
- Participates on the Nurses United Negotiating Committee, as mandated by the NU constitution and bylaws.
- Communicates directly with the president and CEO of Washington Hospital Center on critical issues and matters pertinent to RNs and the Nurses United membership.

- Communicates directly with the senior vice president for human resources at Washington Hospital Center.
- Communicates regularly with the senior director for employee and labor relations at Washington Hospital Center.
- Attends and presents at monthly sessions for new nurse orientation, distributing contract booklets, Nurses United newsletters, and other pertinent contact information.
- Serves as administrator for the Nurses United computer system in consultation with informational system personnel.
- Coordinates the security lock systems and the safes at both union offices and is administrator of the codes for each.
- Coordinates the voice mail system of phone messages for both union offices and is administrator of the codes for each.
- Attends annual Washington Hospital Center Employee Recognition for Longevity awards presentations.
- Attends and participates in events of the annual Nurses Week sponsored by Washington Hospital Center.
- Serves as liaison to the Nurses United legal consultant.
- Communicates with the president of SEIU Local 722 to discuss matters in common.
- Communicates with other union entities, including SEIU, 1199, CAN, MNA, and UAN, among others, on an as needed basis. ■

first salaried executive employee. For me, this means that, after working as an RN at WHC for 39 years, I am now on an extended unpaid union business leave of absence (per contract Article 16) from the hospital and working full time, exclusively, for Nurses United. We have learned that many unions provide a salary, with benefits, to their elected presidents, including SEIU/Local 722, the union that represents the non-RN workforce at WHC.

Our nurses deserve a dedicated, full-time union executive devoted to helping make our union as strong as it can be as contract negotiations begin on January 15, 2007. Besides these responsibilities, I will also devote myself to the support and careful tracking of the representational work done by our dedicated elected volunteer officers and shop stewards as they handle the many pressing issues within the hospital that impact our membership. I plan greater visibility of Nurses United on the nursing

units in the hospital as well as enhanced accessibility to Nurses United for the membership.

Thank you for your well wishes. As you might expect, I plan to continue my deep devotion, dedication, and commitment to the NU membership, the elected NU leadership, and the nursing profession. I encourage every NU member to stay current by visiting our Web page, checking unit bulletin boards for announcements, communicating with us via e-mail, reading the quarterly Nurses United News newsletter, attending meetings, staying in touch with your shop stewards, considering volunteering to be a shop steward or unit representative, and voting at our annual elections. Our strength is in our unity, and your participation is vital to our continued success.

In your service, I am yours truly,  
Dottie Hararas, RN, President and CEO  
Nurses United of the National Capital Region

## Members' Memos: Letters to the Editor

*continued from page 1*

*As far as decision making goes? Whatever "corporate" plans will be implemented. Look around the hospital at new systems and initiatives put in place. Sure there are token nurses on committees, but every suggestion given by staff nurses is disregarded by executives. It becomes clear that "corporate" has already decided what is to be done, and is going to do, regardless of any suggestion, etc., from staff nurses; the dye is cast, in other words.*

*Again, it looks so fine on paper, but it is the "same old, same old." As it is, we are barely able to get our work done now, let alone do work that managers should be doing.*

*Sorry, but this is the way I see it.*

*Submitted by a WHC clinical staff nurse and NU member.*

*Name withheld at nurse's request.*



**Nurses United of the  
National Capital Region**  
8737 Colesville Road, Suite 950  
Silver Spring, MD 20910