

CRONA MEMBERSHIP MEETINGS

May 2017

CRONA CEU Class

Use your tuition reimbursement funds and/or education hours and join CRONA at Flemings Steak house (in Palo Alto) on Thursday May 25, 2017. CRONA is pleased to host this introspective class on the increasing prescription drug epidemic. Dr. Lembke author of "Drug Dealer MD: How Doctors were Duped, Patients Get Hooked, and Why it is so hard to Stop".

Cost \$125, a check sent to the CRONA Office is your registration.

AAU Staffing:

Most up to date information per Gretchen Brown (this has been sent to all PCM and APCM):

- *Patients admitted to Intensive Care orders will be staffed at a minimum of 1:2 as before (no change)
- *Patients with admit to Intermediate Intensive Care orders will be staffed at a minimum 1:3 as before (no change)
- *Patients with admit to Acute Care orders will be staffed at a minimum 1:5 as before (no change)
- *Patients with admit to Acute Care orders AND Cardiac monitoring orders will remain at a 1:3 staffing ratio to decrease confusion
- We will not have patients staffed 1:4 since all Cardiac monitored patients will remain 1:3 (this is to reduce confusion)

The hospital will be meeting with CDPH to get more clarification on these issues.

Required Breaks

Nurses are entitled to "paid break" time and "unpaid meal" time during their shift. SHC is enforcing their policy of break patterns 15/30/15/15. CRONA is in the discussion with the hospital regarding possible changes that would be beneficial to both the hospital and Nursing, BUT until we hear otherwise it is imperative that you document and get paid for ALL missed breaks and/or lunch. A "break" is when you are relieved of ALL nursing duties so that you can actually leave the unit and take a break. DO NOT chart, carry your hospital phone, sit at the desk to answer call bells, etc.... THIS IS YOUR TIME. If you are not offered a break, then you need to charge for it on API under missed meal/break. Even missing ONE 15 minute paid break is to be compensated by the hospital. This is a penalty charge of one hour.

Shift

Four (4) – Six (6) Hours

Breaks

One (1) paid fifteen (15) minute break

Eight (8) – Ten (10) Hours

Two (2) paid fifteen (15) minute breaks
One (1) unpaid thirty (30) minute meal
break

Twelve (12) Hours

Three (3) paid fifteen (15) minute breaks
One (1) unpaid thirty (30) minute meal
break

Packard 2.0 (3rd Floor Conversion)

PCU350/360 are in the process of selecting their new homes in Packard 2.0.

Nurses on PCU380 will transfer directly to PCU300 in P2.0 (maintaining their same shift and commitment)-no preference form needs to be completed

Nurses on PCU350/360 will need to select a preference unit in P2.0 (PCU300 or PCU400) by 5:00 pm on May 8, 2017. (All staff will maintain their same shift and commitment)

Each P2.0 unit has a target of FTE to staff. If more staff sign up for particular unit than is needed adjustments will be made according to skill mix and seniority.

Nurses will know their new units by May 26, 2017. Nursing competencies/education will be analyzed and given prior to the move into P2.0.

The reduced commitment side-letter is currently in effect now, and positions will continue to be re-evaluated as new nurses are hired and after looking at the commitment mix in the 2 new P2.0 units. All units must have at least an 80/20 full-time to part-time mix.

Of note: The unit preference process (while maintaining same shift and commitment) has been discussed with CRONA at Nurse Practice and follows the Lucile Packard Children's Hospital And CRONA Re Packard 2.0 2016 side-letter.