

# Labor Management Project Case Study

## Mount Sinai Hospital of Queens



“

Effective communication will lead to effective nursing teams, which produces better patient care.

”

Mary Godineaux, Nurse Manager, 2 East

“

Having open and honest discussions allowed everyone to voice their thoughts on issues related to sick time; now our sick time usage has improved greatly.

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Percy Basioa, 1199SEIU Registered Nurse, 2 East



2 East Staff from Mt. Sinai Queens

### BACKGROUND

Mount Sinai Hospital of Queens is a 235-bed community hospital located in Astoria, New York. In 2004, the RN Division of 1199SEIU United Healthcare Workers East and the League of Voluntary Hospitals and Nursing Homes negotiated contract language to address RN staffing effectiveness issues. Having recognized that there were many issues that affected the achievement of agreed-upon staffing ratios, existing committees within each League RN hospital would meet to develop strategies to maintain safe staffing levels (referred to as the clause of the contract) and to review the following issues:

- Incidents and reasons for mandatory overtime
- Unsafe staffing condition reports
- Incidents of voluntary overtime
- Use of per-diem, agency and traveler nurses
- Sick time utilization
- Leaves of absence
- Vacancies

### PROCESS

The Mount Sinai Queens – Quality Performance Improvement Project (QPIP) Committee was designated to address the Section F indicator – sick time utilization. Committee members included the 1199SEIU Organizer and Contract Administrator, 1199SEIU RN Delegates, and the Mount Sinai Queens CNO, Director of Nursing and representatives from Human Resources. The QPIP committee mutually agreed to review the related data and identify the steps needed to address two of the indicators: unsafe staffing conditions and sick time utilization.

Unsafe Staffing Conditions – The QPIP committee reviewed the data regarding how and where (by units, staff and shifts) the unsafe condition reports originated. They also reviewed information reported on the Unsafe Condition Report Log and how it was being addressed. After a thorough review of all data, the committee realized the existing Unsafe Condition Report Log did not include important information for reporting and follow-up. Together, the committee revised the document to include documentation related to the causes of – and steps taken to potentially resolve – the outstanding issues.

The Union Organizer, Contract Administrator and the RN representatives agreed to educate the RN hospitals citywide on the new Unsafe Staffing Conditions Report Log and ensure appropriate follow-up to flagged items presented in the log.

Sick Time Utilization – Next, the committee decided the Section F indicator, Sick Time Utilization, would be an ideal project for 2 East, a Medicine Surgical Unit with a high acuity level. The RN Contract Administrator and the 2 East Nurse Manager spearheaded the development of a Unit-Based Committee. The committee reviewed the sick time usage data and conducted focus groups with the entire 2 East staff to present and discuss the data and the root cause for sick time usage. Some topics raised during the focus groups included the staffing concerns, stress-related environment and incidences, teamwork, communication and respect. Together the union and management team identified effective ways to address the following:

- Effective communication techniques
- Training for team self-scheduling
- Consistent forums to discuss sick time usage
- “Having a Team-Building Approach”

## 2 EAST GOALS

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- Improve communication and problem-solving between staff on 2 East
- Implement team self-scheduling
- Decrease sick time utilization

## OUTCOMES

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The 2 East Sick Time Usage Project was a success. The Automated Nurse Scheduling Office System Report (ANSOS), which includes sick time, sick time without pay, family medical leave and medical leave, generated the following data:

- In 2006, before the project started, 2170 hours of sick time usage
- In 2007, when the project started, 2418 hours of sick time usage
- In 2008, after the project started, 1,840 hours of sick time usage
- In 2009, after the project started, based on number of sick calls received in last five months, estimated 1,146 hours of sick time usage – 53% reduction from 2007

## CHALLENGES / LESSONS LEARNED

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Sick time usage is a major issue citywide. The 2 East Sick Time Usage Project used a collaborative approach to address the needs of the RNs, management and patients. Trust was a huge factor throughout this project. Having upfront discussions to remind the team of the purpose of the project became a constant message throughout all the meetings held on the unit. The 2 East unit staff continues to operate and meet regularly as a team to discuss issues pertaining to sick time usage.

