

# UNAC/UHCP's Track Record: Protecting Patient Care & Safety



“We never gave up on protecting our patients and community. Now we have a contract that guarantees nurses a strong voice in patient care and improving our hospital.”

— Susan Justin, RN, ICU, Beverly Hospital

“In our Mother-Baby unit at Parkview the Charge Nurse was always assigned patients. Also, RNs had to take care of four couplets—mamas and babies—eight patients each. We voiced the problems, but nothing happened. When we got our union and won our contract, they started to listen. We now have three dedicated Charge Nurses without patient assignments on each shift, and only 3 couplets. Morale is up and patient care has improved. If we didn't have a union we wouldn't get anything.”

—Ana Cooke, RN, Mother-Baby, Parkview Community Hospital

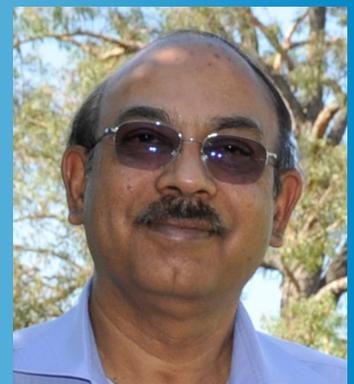


“Before UNAC, we would go through the chain of command to address staffing shortages, but if management chose to ignore us, there was nothing we could do. With UNAC/UHCP, violations of staffing ratios have been stopped immediately. The issue is no longer swept under the rug if management doesn't want to deal with it.”

—Sandi Marques, RN, ICU/Cath Lab, St. Francis Medical Center

“There were a lot of unfair and dangerous practices at the hospital, like short staffing. Since we won our contract, Management has begun to follow safe staffing laws. They never worried about it before. But now it's written into the contract, so they worry about putting it into practice.”

— Isaac Saroia, RN, PACU, Beverly Hospital



# Inland & Rancho Need Safe Staffing



“One night when I was working as relief charge nurse we were seriously understaffed. We had only one secretary for three units, and she had to go home early. We had only one CNA. I ended up doing admissions for 13 patients that night, in addition to covering the secretary’s work, and all the nurses’ breaks, without ever taking a break myself. I don’t know how I survived that night. Even after I got home I couldn’t sleep because I kept thinking, with all those admissions, did I forget something important?”

–Normita Miranda, RN, 2 West Nights, Inland Valley Medical Center



“I have been part of the IVMC trauma team for over five years. I took a new Position as an at-all-times nurse, because as a regular staff nurse I was told to manage care of patients that placed me out of ratio. Just the other day I was taking care of three patients, then had one moved out to take care of a critical trauma patient. According to the current California nurse-to-patient staffing, the ratio for a trauma patient is 1:1. But I still had two other patients! I believe this was not only unsafe for my patients, but for my nursing license. **Our patients deserve better care!**”

–Bridget Martin, RN, ER, Inland Valley Medical Center

## If You Care About Safe Staffing Vote Yes to Join UNAC/UHCP

### Nurses’ Forum: Hear Directly From UNAC/UHCP RNs

Thursday, January 17 | *Two Times: 8 AM and 8 PM*

Embassy Suites | 29345 Rancho California Rd., Temecula CA 92591

**For More Information:** Fernando Bribiesca | 702-588-3366  
Ted Roberts | 321-332-8761