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**United American Nurses President Ann Converso, RN
Professionals for the Public Interest
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Good morning. Thank you to AFL-CIO's Department for Professional Employees and my colleagues in the associations represented here today for hosting this event.

I'm pleased to speak to you briefly about why the formation of this alliance between unions and professional associations is important to nurses, and how nurses, as health care professionals, act everyday to protect the public, our patients.

When this coalition was founded two years ago, there are some who may have thought that an alliance between labor unions and associations was a bit unusual. Strange bedfellows.

As a registered nurse and union member, I disagree. Nurses can spend our careers being active both in our unions and our professional associations, and the two actually are complementary in their objectives.

For me and the nurses I represent, every minute spent at the bedside of a patient RNs are acting both as health care advocates, protecting our patients and protected by our union, and highly trained professional caregivers. For RNs to do their job well as nurses, they must play both roles.

So I was excited when DPE and our friends on the association side decided to come together to promote the role of nurses, teachers, engineers, scientists, librarians and other professionals as protectors of the public. It is a recognition that is long overdue and lays the foundation for great work we can accomplish together.

I was also pleased to see President Obama's recognition of the important role professionals play in defending the public's interests.

Nurses aren't strangers to the debate of whether you can be a professional and a union member. From the time we receive our licenses, RNs run up against a long-held perception that you can't be true to the profession of nursing and be a union member. I have never understood that because as a nurse I have always been both. I was a nurse at the bedside for 36 years. I came into the role of president of my local bargaining unit by fluke—I filed my first grievance over a day off request and became president of my local.

For me, my union membership was the ultimate professional voice to protect my patients. My union gave me, as a bedside nurse, an equal voice in decision-making where, for a long time, RNs were treated less like trained patient advocates and more like handmaidens by hospital management, supervisors and doctors.

Nurses are the frontline of patient care in a hospital.

From looking at the monitors and the telemetry equipment, we will know you are likely to have a heart attack before you have it.

If you're grateful that your doctor unexpectedly showed up in your hospital room at 4 am to check on you, remember that the doctor is there because your nurse notified him and asked him to come in.

It's your nurse's training and judgment as a health care professional that allows us to pick up on those signs. And it's union membership that protects nurses when they speak out on behalf of you, the patient. No disrespect to doctors.

When nurses use their union megaphone to speak out for better staffing standards that protect nurses and patients ... for improved health and safety practices on the job ... for a salary that respects and values the high-skill care we bring to you ... make no mistake, we are fighting as professionals for the protection and well-being of our patients, and the integrity of nursing, whether in our local hospitals, internationally, locally or nationally and on Capitol Hill.

That is, I believe, what has attracted an increasing number of nurses to their unions. Nurses are tired of not having a voice, of not being taken seriously and of not being able to effectively advocate for the patients that we serve.

Let me give you a real-life example. The Michigan Nurses Association/UAN represents RNs at Borgess Medical Center in Kalamazoo.

Nurses have told us, and a mountain of research has confirmed, that when there are too few RNs at the bedside, patient care suffers. Patients suffer with increased falls, secondary infections, hospital-acquired pneumonia and more. Surgery patients in hospitals with too few nurses are 6 percent more likely to die from complications like shock and sepsis.

At Borgess, due to budget constraints hospital management changed the RN-patient ratio to give each nurse more patients every day, every shift. Since then, patient satisfaction has dropped by almost 20 percent. Patient falls and hospital-acquired pressure ulcers increased dramatically. And there has been a decrease in nurse satisfaction and an increase in RN turnover.

Nurses at Borgess are mobilizing, through their union, to educate their community about what has happened at that hospital as a result of management's policy of short staffing. They've begun gathering hard data on these changes to illustrate to management and their community how patient health is being compromised due to these cost-cutting measures.

Nurses are using the forum and mouthpiece of their union to deal with staffing concerns and patient care issues. They are sounding off as professionals as they advocate for their patients, and as union members.

Professionals and unions, protecting the public. The two go hand in hand.

I appreciate being here today—for the nurses we represent, nurses in other unions and those other nurses who are not yet organized.

Thank you.

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