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## Union claims high infection rates in Stanford Hospital dispute

Medicare penalized Stanford Health Care two years in a row for high hospital-acquired infections

by Sue Dremann / Palo Alto Weekly

High rates of hospital-acquired infections at Stanford Health Care have caused Medicare to reduce payments to the hospital for the second year in a row.

Now, members of Service Employees International Union-United Healthcare Workers West (SEIU-UHW), the union that represents 1,800 employees at Stanford Hospital, claim the high rates are because of inadequate staffing and training, union members said during a press conference at Stanford Medical Center on Tuesday.

But hospital officials are disputing that assertion. They say the data is old and the union is using a strong-arm tactic to gain leverage during contract negotiations. The current contract expires in August, according to union spokesman Tom Parker.

The dispute over infection rates is focused on Stanford's Palo Alto campus alone, Parker said.

Union members said on Tuesday that the issue isn't just another ugly fight over a contract. They have been asking for more stringent changes and better staffing for a year.

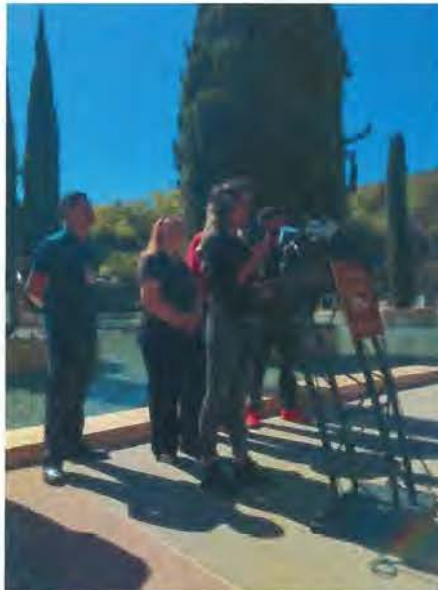
"That is not a bargaining tactic," said Linda Cornell, a union member and 37-year patient-unit secretary. "We are not here today as a first course of action."

A Nov. 21 union memo to Suzanne Harris of Stanford Employee and Labor Relations shows that union members had been asking the hospital to address high-infection-rate and worker and patient safety concerns for at least several months. Two weeks ago, union representatives were to meet with hospital CEO David Entwistle to discuss the concerns related to the infection data but the hospital canceled the meeting, they said.

Stanford Health Care received a penalty reduction in reimbursements from the Centers for Medicare & Medicaid Services in fiscal years 2016 and 2017 after the hospital had higher than appropriate rates of hospital-acquired infections, including surgical site infection after colon surgery and abdominal hysterectomy; diarrhea-causing *Clostridium difficile* (*C. diff*), and catheter-associated urinary tract infections, among others, according to data from the Centers for Medicare.

The hospital-reported data was from 2016.

The Centers for Medicare Services' Hospital-Acquired Condition Reduction Program ranked 3,203 hospitals nationwide during fiscal year 2017 for their hospital-acquired infection rates and penalized 769 hospitals.



Salyna Nevarez, a Stanford Health Care phlebotomist, discussed her concerns about acquiring patient infections at a SEIU-UHW press conference on July 11, 2017. Photo by Sue Dremann.



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