HUDSON COUNTY
BOARD OF CHOSEN FREEHOLDERS

RE:

REGULAR MEETING : TRANSCRIPT OF
OF THE :
HUDSON COUNTY BOARD OF : PROCEEDINGS
CHOSEN FREEHOLDERS :

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OPEN SESSION
Hudson County
Administration Building,
Freeholders Chambers
567 Pavonia Avenue
Jersey City, New Jersey
Monday, December 30, 2013
4:30 p.m.

BEFORE:
ANTHONY ROMANO, CHAIRMAN
DOREEN DiDOMENICO, Freeholder
JEFFREY DUBLIN, Freeholder
E. JUNIOR MALDONADO, Freeholder
JOSE C. MUNOZ, Freeholder
WILLIAM O'DEA, Freeholder

ALSO PRESENT:
EDWARD J. FLORIO, ESQ., Board Counsel
DONATO J. BATTISTA, Hudson County Counsel
ABRAHAM ANTUN, County Administrator
ALBERTO G. SANTOS, County Clerk

Job No. NJ1784727
FREEHOLDER DI DOMENICO: Here.
THE CLERK: Dublin.
FREEHOLDER DUBLIN: Here.
FREEHOLDER MALDONADO: Here.
THE CLERK: Munoz.
FREEHOLDER MUNOZ: Here.
THE CLERK: O'Dea.
FREEHOLDER O'DEA: Here.
THE CLERK: Rivas. Chairman Romano.
CHAIRMAN ROMANO: Here.

In accordance with the provisions of the Open Public Meetings Act, notice was provided that the Hudson County Board of Freeholders will hold a Special Meeting, December 30th, 2013, at 4:30 p.m., at the Administration Building Annex, Third Floor, 567 Pavonia Avenue, Jersey City, New Jersey. The purpose of this Special Meeting is to discuss the quality of health care at the Jersey City Medical Center. Formal action may be taken. Copies of this notice have been posted on the Freeholder's bulletin board, filed at the Office of the County Clerk, and copies of the notice were faxed and mailed to the editors of the Jersey Journal and the Star Ledger on December 13, 2013.

FREEHOLDER O'DEA: Do we have sign-ups?
THE CLERK: Yes, there are cards here if there are any speakers. Mr. Kabili -- do you want to open with speakers right away, Mr. Chairman?
FREEHOLDER O'DEA: I mean the purpose of this meeting was based on information provided to us at a prior Freeholder meeting. Concerns have been raised as to whether or not health care at the facility has been adversely impacted by events that are occurring there related to the unions there and their efforts to decertify unions there, et cetera, and based on information provided to us, the concerns are some of those efforts that the administration at the hospital have either fostered or allowed, have, in fact, had an adverse impact on the health care being provided. The purpose of this hearing is a fact-finding effort from individuals who work at the facility, potentially could have been patients at the facility, et cetera, to gather information to determine what's happening and what we as a Board may do. In all likelihood, we will send the transcript to either a State level to the Commissioner of Health based on information, or other entities that may contract with them or have oversight.
THE CLERK: Proceed with speakers, Mr. Chairman?
MR. TULLY: Good afternoon, ladies and gentlemen, Freeholders. My name is Steven Tully, Kearny, New Jersey. I am the assistant director for A.F.S.C.M.E. Council 52. I am proud and privileged to represent workers at the Jersey City Medical Center. I have appeared before you a couple of times before, and I have told you about constant attacks on our members, our union members, in an effort to try to get rid of the union. During this effort the Medical Center has put forward to rid the employees of their representation, we have received many reports and calls, quite frankly, horror stories, about the tactics the Medical Center was using to get rid of the union.

These meetings were often held with the employees under the guise of trainings. There was no training that went on. It was strictly an effort to get rid of the union. While members expressed more money if they got rid of the union. The Medical Center, after we had filed unfair labor practice charges, went so far as to schedule an illegal vote to try to get rid of the union. We filed unfair practices charges with the National Labor Relations Board. But during this process of holding this illegal vote, the Medical Center held mandatory captive audience meetings with our members.

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were scheduled and called in without any regard to
the impact that it had on patient care.

Tonight, we have some speakers who are
members from the Jersey City Medical Center, some
employees who are going to speak up, but I hope you
understand that the atmosphere at the Medical Center
right now for the workers is one of tremendous
intimidation and fear. It is rampant in the Medical
Center right now. Now management is telling the
workers that they have no union, which means they
have no protections.

Now, we have continued to actively
represent the members, despite what the Medical
Center says and their false claim that there is no
union, and we have continually challenged the
Medical Center aggressively for their illegal
contact through charges at the National Labor
Relations Board, and we’ve been advised by the labor
board that they will be issuing complaints on the
unfair practice charges that we filed.

We have also asked them to go into Federal
Court to get injunctive relief to overturn these
illegal actions immediately. We will handle our end
at the labor board. That’s for to us do, and
there’s a process to handle that. I don’t want to
talk about that tonight. The focus tonight should
be on the impact that the Medical Center’s tactics
have had on patient care.

I mentioned before about intimidation and
fear. Tonight you’re going to hear from courageous
people who are willing to speak out about what’s
been going on at the Medical Center. I hope you
appreciate how much courage it takes for them to
stand up before you, to go on the record and speak
out. I also want to just state for the record that
if there is any retaliation by the Medical Center
against these members speaking before you, we will
handle it through our process in the National Labor
Relations Board, but we will also be back here to
report it to you immediately.

When things are not right, people
shouldn’t be afraid to speak out. They should have
the right to speak out and speak the truth,
particularly in an area as sensitive as patient
care. So I ask you tonight to listen to what these
workers have to say, listen carefully, and take a
good long look at what has been happening at the
Medical Center in Jersey City. Thank you.

THE CLERK: Abigail Luistro.

FREEHOLDER O’DEA: We had several
people come in. Anyone who just came in and you
would like to speak, we have cards to sign up at the
front.

CHAIRMAN ROMANO: We are going to
have a ten-minute limit, and we will be keeping on
topic, affect on patient care.

MS. LUISTRO: Good evening. My name
is Abigail Luistro. I'm a registered voter, and I am currently employed at the
Jersey City Medical Center since September 11th,
2000. At you know from the last time we were here, we asked Joe Scott to return to the table.

Unfortunately, the issue has not been not resolved,
or do we have a contract. Instead matters have
gotten worse.

The IEP consultant, a/k/a, a union buster,
has launched an antiunion campaign. What was once a
collective bargaining for a fair contract, is the
management's bid to have full control of their
employees through fear and deception. Yes, I am
scared like many of my co-workers. I am afraid of
backlash and retaliation from management. But the
truth of the matter is, my ethical purpose has given
me courage to stand here today to speak out and not
be afraid to speak out. They should have
the right to speak out and speak the truth,
particularly in an area as sensitive as patient
care. So I ask you tonight to listen to what these
workers have to say, listen carefully, and take a
good long look at what has been happening at the
Medical Center in Jersey City. Thank you.

THE CLERK: Abigail Luistro.

FREEHOLDER O’DEA: We had several
hospital had an election to decertify the union on November 13th and 14th. Note, the voting was done in pencil. The management had offered transportation and childcare to encourage and scare employees that the vote is mandatory. Why scare?

Because I have witnessed for a long time, a majority of the time, weren't offered transportation during inclement weather, so why is it okay for us to have available transportation to vote, but we had to manage on our own to go to work for the purpose of patient care?

Another incident was after the election. I was working on a psych tour. The supervisor told the techs go to the seventh floor solarium for a town hall meeting in regards to our benefits as a nonunion member. They had left the floor for the nurses to do our job as well theirs just to attend another management meeting. So in conclusion I ask, why is management putting patients at risk just so they can decertify our union? Shouldn't patients and safety be the priority?

FREEHOLDER O'DEA: Ms. Abigail, the mandatory training meetings that took place prior to the vote on the decertification, what transpired at the meeting?

MS. LUISTRO: Basically, it was to get to the meetings, the union was showed the National Labor Board Manual describing what would happen if we ever went on strike, how we would be replaced, how they promised we will get more if we get rid of our union.

FREEHOLDER O'DEA: So the mandatory training actually consisted of Mr. Yessin providing information and speaking on what occurs if employees should strike, and explaining to the employees I guess the benefits of what would happen if you didn't have a union?

MS. LUISTRO: Yes.

FREEHOLDER O'DEA: You said that this session took approximately how long?

MS. LUISTRO: Two hours, and we were going to have an election, and it was up to us if we still wanted the union to be the one to represent us.

FREEHOLDER O'DEA: How many people approximately attended -- first of all, do you remember the date or approximate date this occurred?

MS. LUISTRO: Three weeks before the November 13th and 14th.

FREEHOLDER O'DEA: Approximately how many other employees in the session that you attended?

MS. LUISTRO: Like seven. It was just one session, two hours, about seven to ten employees in the room.

FREEHOLDER O'DEA: And to your knowledge, were any of these sessions held for other employees?

MS. LUISTRO: It was all for the union members of A.F.S.C.M.E.

FREEHOLDER O'DEA: So to your knowledge, are you aware of the fact that similar sessions were held on time for all other employees of that union?

MS. LUISTRO: Yes.

FREEHOLDER O'DEA: Thank you.

FREEHOLDER MALDONADO: I have one question. The employees were working their regular working hour at the juncture that they were called into this two-hour mandatory meeting?

MS. LUISTRO: Correct.

FREEHOLDER MALDONADO: If you work in ICU --

MS. LUISTRO: I do.

FREEHOLDER MALDONADO: During that session, you were responsible for overseeing a potential suicidal patient, and you were asked to go to a mandatory, leaving that person, that patient, attended by only one tech, when there should have been three on the floor?

MS. LUISTRO: One tech to watch the patient, and the one tech who watch the whole ICU.

FREEHOLDER MALDONADO: When there should be how many?

MS. LUISTRO: Two to three.

CHAIRMAN ROMANO: What is your position?

MS. LUISTRO: Patient care

technician, I'm also like a medical assistant.

CHAIRMAN ROMANO: That would be the RNs are on the floor, it's not what you do, in other words, you're not a CNA?

MS. LUISTRO: Somewhat like one.

CHAIRMAN ROMANO: There are a certain number of CNAs. Other that nurses, they have the techs just in case?

FREEHOLDER O'DEA: Are you in a position to have the requisite expertise to answer that question?

MS. LUISTRO: (Nods.)
FREEHOLDER O'DEA: We have to ask her some questions. They're not experts. Did you or anyone else you know at the meeting, the meeting you attended, raise a concern that the meeting was held on a time and for an extended period of time that affected your performance or the work you were supposed to be doing related to health care?

MS. LUISTRO: I mean like the one-to-one that was basically a suicidal, so I had to be there just to make sure for patient safety, that I had to be there. Apparently, since I was gone, somebody replaced me, but there was one less person to help on the floor if emergencies come.

FREEHOLDER O'DEA: So that is the terrified. I was terrified every time I came before gone, somebody replaced me, but there was one less attorney for their, you know, who knows what they want to do to be there just to make sure for patient safety, normal policy and procedure of the hospital?

FREEHOLDER O'DEA: Were you the only individual for that unit at that particular session that was pulled out?

MS. LUISTRO: Yes.

FREEHOLDER O'DEA: During other sessions that you know had occurred, are there other individuals that performed the same duties that you performed that were pulled out, others that would lead to the same exact reduction of staff during the two hours you were there?

MS. LUISTRO: Not that I'm aware of.

FREEHOLDER O'DEA: Thank you.

THE CLERK: Elvin Santos.

MR. SANTOS: Good afternoon, ladies and gentlemen, Board of Freeholders. My name is Elvin Santos, and I'm a proud resident of Jersey City. I'm a former employee. I recently got terminated October 24th of this year for being an elected official of A.F.S.C.M.E. During my time there before I was terminated, I went to two of these meetings.

CHAIRMAN ROMANO: I'm trying to find out what it is for normal policy and procedure of the hospital?

FREEHOLDER O'DEA: I was talking about the one-to-one that was basically a suicidal, so I had to be there just to make sure for patient safety, that I had to be there. Apparently, since I was gone, somebody replaced me, but there was one less person to help on the floor if emergencies come.

FREEHOLDER O'DEA: During the period, that you were treating on that day?

MS. LUISTRO: Yes.

FREEHOLDER O'DEA: So that is the normal policy and procedure of the hospital?

FREEHOLDER O'DEA: During the period, that you were treating on that day?

MS. LUISTRO: Yes.

FREEHOLDER O'DEA: So that is the normal policy and procedure of the hospital?

FREEHOLDER O'DEA: During the period, that you were treating on that day?

MS. LUISTRO: Yes.

FREEHOLDER O'DEA: During the period, that you were treating on that day?

FREEHOLDER O'DEA: During the period, that you were treating on that day?

MS. LUISTRO: Reduction of staff for 12 rooms on each side on. If you pull a housekeeper off that floor for two hours, bed discharges are going to be behind. The rooms are not going to be cleaned how it's supposed to be cleaned. Just to touch on patient care techs, normally, we arrange three or five to a floor. If you remove even two, that's going to put a strain on any patient that's calling for help for anything, whether they need to use the bathroom, whether they're in pain, whether they have a simple question to ask anyone. They make a big deal about the pillars, economical health and patient safety. To my knowledge, that's not following through what they promised their patients coming into the hospital.

Literally, it's not, because their main purpose was pushing their antiunion campaign just for their, know who knows what they want to do with us? Obviously, everyone in the hospital is terrified. I was terrified every time I came before this Board to speak. It was a large burden on my back. So I could understand the fears that my fellow colleague have. Unfortunately, they were able to, you know, do what they did to me to try to set an example so that nobody would come forward to speak.

Unfortunately, you guys weren't aware of what actually was transpiring on behalf of the consultants roaming the floors, you know, at will.
freely in areas where you're supposed to have specialized people to work, and you have consultants roaming around the floors, pulling each and every person one by one, on patient floors, next to patients, just to tell them that they don't need a union to represent them, not to worry, that they'll take really good care of you if you give them the only protection that you have in the hospital so. 

FREEHOLDER O'DEA: How many consultants on an average day were at the facility?

MR. SANTOS: I've seen at least three to five new faces. Their badges always said consultants. That led me to believe -- all our badges have our job title and our name and department you work for. When you just have a first name on your badge, and it just says consultant, I know who you work for. You were there to break us.

FREEHOLDER O'DEA: Did you ever ascertain whether any of those people that had tags that said "consultant" performed any work related to the hospital, whether it was dietary, housekeeping, clinical?

MR. SANTOS: No, they didn't. All they did was walk the floors, pulling people while they were working on work time just to tell them they don't need a union. They had a basically captive audience. They were going from five to ten co-workers within the building, people from the second floor, people from the fourth floor, seven or ten people at the meeting, sitting there two hours. You have eight-hour shifts, you know, pulling them for two hours and no time to get the break you get. That's like three hours that your job is not getting done. They tell you don't worry about it.

FREEHOLDER O'DEA: Did you ever attend any of the sessions?

MR. SANTOS: No. They weren't going to call me. I wasn't allowed to go because I was an executive officer.

FREEHOLDER O'DEA: Did people that attended meetings come to speak to you subsequent?

MR. SANTOS: Yes. I have given testimony because I was assigned to represent my members, I still am, and they basically came and told me, I had one co-worker of mine, a patient caretaker, she told me clearly that Brent Yessin told him to his face that the only reason why he's there is to decertify the union because that's what Joe Scott is paying him for, and he said, ultimately he ratified the contract and he did his job, and the only reason he's still around is because he wants to decertify the union. That's what Joe Scott wants, and that's what Joe Scott is paying for.

FREEHOLDER O'DEA: When you were terminated, what was the official reason?

MR. SANTOS: They said I entered an unrestricted area. Sorry.

FREEHOLDER O'DEA: Prior to that, what, if any, disciplinary did you have on your record?

MR. SANTOS: None, all verbal warnings from years ago. I had a recent one, but it got basically taken away. I got notified.

FREEHOLDER O'DEA: You had never been suspended?

MR. SANTOS: No.

FREEHOLDER O'DEA: This was on October 25th?

MR. SANTOS: Yes, I was terminated October 25th.

FREEHOLDER O'DEA: Prior to the vote?

MR. SANTOS: Yeah, well, they ultimately isolated me from all the members from the main building. They shipped me to a whole other building right across from the main hospital before that.

FREEHOLDER O'DEA: Do they operate under a progressive discipline?

MR. SANTOS: Yes.

FREEHOLDER O'DEA: Based on your knowledge, if you know, on what you were -- assuming that you were guilty of what they charged you with, and the fact that you had not been suspended before, what normally would be the discipline?

MR. SANTOS: I'm going to tell you exactly how my director handled his department. I would have just got a verbal warning. That's it.

FREEHOLDER O'DEA: Do they operate under a progressive discipline?

MR. SANTOS: Yes.

FREEHOLDER O'DEA: Based on your knowledge, if you know, on what you were -- assuming that you were guilty of what they charged you with, and the fact that you had not been suspended before, what normally would be the discipline?

MR. SANTOS: My director, Wayne Griffin.

FREEHOLDER O'DEA: He's the director of what?

MR. SANTOS: Environmental services.

FREEHOLDER O'DEA: How soon after the alleged incident where were you allegedly entered a restricted area?
1 restricted area were you terminated?
2 MR. SANTOS: Two days. It had
3 happened Wednesday. I was terminated Friday.
4 FREEHOLDER O' DEA: Since that
5 facility still had a union, what was the process and
6 procedure for the union in order to terminate?
7 MR. SANTOS: Because you have
8 basically a hearing with your director or manager
9 whoever you want them to conduct, and they tell you
10 to pick a union rep of your choosing. I chose to
11 have my president represent me, and they had us wait
12 for a very long time, at least a half an hour before
13 they actually came into the room. Obviously, I had
14 my manager who came in. He was actually the one to
15 tell me I needed a union rep. I kind of laughed. I
16 told him I would get one. I told him it seemed like
17 every other day, this was happening to someone from
18 the union. He said I don't know, I don't know
19 anything, just tell him to come over there.
20 I reached out to David Fleming and he
21 reached out to David Pernell, and David Pernell is
22 my president. He came to represent me. Initially,
23 they said that I was getting written up, and I was
24 supposed to get suspended for allegedly someone
25 saying that a director from where I got sent to, the

1 ATC building, allegedly saying that I was heard
2 cursing by her, and anybody can tell you anything,
3 obviously, if you want to believe it. So the last
4 time David said he was going to make it, and at least
5 ten or fifteen minutes after that, the director of
6 ICU, nurse manager, Christine Quinones, said I'm
7 investigating and I'll send it to my union.
8 FREEHOLDER O' DEA: Are all the
9 employees of your job category evaluated on an
10 annual basis?
11 MR. SANTOS: Yes.
12 FREEHOLDER O' DEA: What were your
13 evaluations prior to that?
14 MR. SANTOS: Great. Top.
15 FREEHOLDER O' DEA: Okay. I don't
16 have any other questions.
17 FREEHOLDER MALDONADO: Just to be
18 clear, they definitely were not medical, they were
19 not employees that were working on that shift or a
20 different shift you didn't know that might have been
21 there?
22 MR. SANTOS: No, no. They -- I was
23 there for seven years. I worked all shifts. I did
24 a lot of overtime when it was given out. I would do
25 a double, you know. I knew basically everybody, if

1 not by face, by name. These were all new people
2 that the administrator -- that badge didn't say
3 administrator, it just said consultant.
4 FREEHOLDER MALDONADO: Since you
5 started working there, would these consultant have
6 background checks done on them?
7 MR. SANTOS: I wouldn't know.
8 FREEHOLDER MALDONADO: Did you see
9 some of these consultants walking in a restricted
10 area?
11 MR. SANTOS: Yeah, all around the
12 building, I've seen them everywhere.
13 FREEHOLDER MALDONADO: Did any
14 consultant walk in the restricted area that you
15 allegedly were walking in the restricted area and
16 you got fired for that?
17 MR. SANTOS: That's right.
18 FREEHOLDER MALDONADO: Thank you.
19 CHAIRMAN ROMANO: Next speaker,
20 please.
21 THE CLERK: David Pernell.
22 MR. TULLY: May I just clarify
23 something? We are grieving the unfair practice
24 charges. That's the normal process.
25 MR. PERNELL: David Pernell,
training session meetings. So it was a patient over
in Spot 4, which is about three or four cubicles
down from where the charge nurse table is, and she
was yelling for a nurse to come out, and the nurse,
I could tell she was frustrated. She was trying to
deal with us and deal with the phone ringing, and
also this lady that was calling for her.
She finally at that point got up, and
said, I'm going to have to get me a nurse out of the
meeting. So she left to get a nurse. I stayed with
my patient until she got back, and my partner went
to help the lady that at that point walked out of
the room. The only thing she had on was one of
those hospital gowns and some undergarment. He
helped her back to her bed because at that point she
was walking out, and she was yelling for a nurse for
whatever. I don't know what she was looking for.
My partner went and helped her back to
bed. I stayed with my patient. The nurse went out
and she came back with one nurse and finished taking
a patient report, and we transferred our patient
over, and we were there for a good 15 or 20 minutes
by the time we finished our paperwork and stuff, and
we still didn't see anymore nurses. So they were
gone for quite a while.

FREEHOLDER O'DEA: Did the nurse
return that left to try to get another nurse?
MR. PERNELL: Yeah, yeah. She left
and came back with one nurse. She said, I found
somebody, they let a nurse go for me. That nurse
that came, she tended to the lady walking in the
hallway and was also trying to tend to some of the
other people until the other nurses were available.
Like I said, I was there for 15 or 20 minutes before
I left, and I didn't see anymore nurses come. There
was nobody there except that one charge nurse, and I
think it was like two or three clerical staff, doing
some paperwork. As far as patient care people, no,
just one nurse. That was it.
FREEHOLDER O'DEA: This was
approximately two weeks ago?
MR. PERNELL: It was a couple weeks
ago, maybe three weeks ago.
FREEHOLDER O'DEA: Subsequent to
November 13th?
MR. PERNELL: Yeah, after, after they
had the illegal vote that they had to remove the
union. After they had the illegal vote, they were
still having mandatory training sessions. That was
the time for them to drive home the message that we
don't have a union now, guys, so these are all of
the great benefits you can get because you don't
have a union. They're still trying to drive that
message home after the vote.
FREEHOLDER O'DEA: Did you attend any
such meetings, are you in the same union?
MR. PERNELL: I'm the president of
2254.
FREEHOLDER O'DEA: Were you ever
brought into any of those meetings?
MR. PERNELL: No, not into any of	hose town hall meetings. Funny that you said that
because that brings me to my other point I was going
to bring up. These training sessions, normally in
our department, we have quarterly in-service, and
during our in-service, they're for training
purposes. They're suppose to go over the latest in
CPR, strokes, traumas, heat emergencies, cold
emergencies. Usually we go to these in-service
quarterly, and we get credits for our certification
to renew every two or three years.
The last two in-services that we had, it
started out as some basic training, and then halfway
through the meeting, our meeting usually lasts about
four hours. The first two hours we were dealing
with training stuff, and the next two hours at the
meeting was strictly union, antiunion message. They
had one of their Brent Yessin staff there talking
about decertification of the union, why we shouldn't
have a union, and we should vote no for a union.
There was definitely a couple of people that were at
these meetings that didn't want to be there. As a
matter of fact, they stood up and said, you know,
Why are we here, I mean, I thought this was for
training?
It seemed like it was turning into a union
meeting, and we didn't have a union rep there. I
advised people not to stay. As a matter of fact, I
wanted to leave. They were told they can't leave
because we are paying you to be here, so you have to
hear our message. So that was basically, you know,
the message they were sending out in our training
session.
FREEHOLDER O'DEA: Approximately,
when did that take place?
MR. PERNELL: One was on March 23rd,
around that time, that was one, and the last one we
just had was a couple weeks ago, if I'm not
mistaken. The one back in March was the one that
they were actually pushing the contract -- at that
1 point they were talking about the actual -- the
2 actual contract and our vote that we had initially
3 voted no for the contract. They were trying to say,
4 we're going to give you the contract anyway because
5 that is what we have to do because of Obamacare and
6 some of the different things they were bringing up.
7 FREEHOLDER O'DEA: In the meeting in
8 March, you're saying that in-service training
9 sessions are normally four hours and related to
10 in-service training in order to have the latest
11 knowledge and knowledge of changes in the field,
12 generally that would take four hours?
13 MR. PERNELL: Yes, it usually takes
14 about four hours.
15 FREEHOLDER O'DEA: So as a result of,
16 as you stated, only two hours were spent on that,
17 and that resulted those individuals not getting an
18 adequate amount of in-service training, and they
19 should be up to date on all the areas?
20 MR. PERNELL: I wouldn't say that
21 because we have mandatory training all throughout
22 the year. What we don't cover in one, we'll make up
23 in another session. About half the time, about two
24 hours spent is on trauma, trauma protocol, and then
25 it ended when the union buster people came in.
1 that for people that are in your field?
2 MR. PERNELL: I guess you can say
3 that.
4 FREEHOLDER O'DEA: That's a concern
5 that I have, and Mr. Chairman, I would like
6 particularly to find out if this particular training
7 session on or about March 23rd, if the hospital
8 categorized it as four hours of actual training
9 for -- how to categorize it if it was part of four
10 hours required by them. The hospital people may
11 have -- the administrative individual may have
12 falsified documents.
13 CHAIRMAN ROMANO: It's the in-service
14 coordinator that generally does the scheduling, and
15 the in-service training that you're supposed to have
16 mandatory in-service, you sign, in other words you
17 have to sign in?
18 MR. PERNELL: Yeah. What happens is
19 when I come in, I sign my name that I attended, I
20 guess our clinical educator, clinical educator,
21 corresponded how many hours that I did.
22 CHAIRMAN ROMANO: What is the name of
23 the clinical educator?
24 MR. PERNELL: His name would be Steve
25 Cohen, C-o-h-e-n.
1 FREEHOLDER O'DEA: My concern is that
2 if it takes four hours regularly, when did they make
3 two hours up for whatever in-service training?
4 MR. PERNELL: How we get our
5 recertification, whatever they actually are
6 instructing us on, I think at the end of the year,
7 what they will do is write down the clinical hours
8 that we spent on various subjects. If it's an hour
9 on overdose, we'll get a one-hour credit for
10 overdose, so at the end of the year, we generally
11 have more than enough credits.
12 FREEHOLDER O'DEA: My concern is
13 that, for instance, the Administrator is required to
14 take what is called, continuing education hours?
15 MR. ANTON: Yes.
16 FREEHOLDER O'DEA: In the field of
17 our government, they're called continuing education
18 hours. You're required to take X amount of
19 continuing education per year to keep your
20 certification.
21 So if you're required to take sixteen,
22 which is usually the number, and two of the sixteen
23 had nothing do with continuing education
24 certification, only about how to not be in the union
25 anymore, one would argue the hospital misrepresented
1 CHAIRMAN ROMANO: Thank you.
2 FREEHOLDER MALDONADO: For
3 clarification, it was two sessions, right, you went
4 to two separate sessions, and both sessions, they
5 did the same thing, first two hours were training
6 and the last two hours was a union decertification
7 conversation?
8 MR. PERNELL: Yes, that was basically
9 more the first one. The second one, as a matter of
10 fact, the second was on September 11th, and that one
11 was more of the, there's a vote coming, and
12 everybody should vote no.
13 FREEHOLDER O'DEA: Was that the last
14 two hours again, sir?
15 MR. PERNELL: Yeah, yeah, yeah.
16 FREEHOLDER MALDONADO: You can say
17 that four hours of those two sessions were antiunion
18 rhetoric and non-work-related?
19 FREEHOLDER O'DEA: Not related to the
20 in-service training they're required to provide to
21 you on an annual basis as part of your
22 certification?
23 MR. PERNELL: Yeah.
24 CHAIRMAN ROMANO: Thank you. Next
25 speaker.
1 THE CLERK:  Lillian Perez.
2 MR. PEREZ:  Good evening.  I'm just
3 here to talk about a few instances that I witness
4 with the consultants.  I actually had a weekend
5 where I was called into work on my weekend off, and
6 two lower level management, I believe one was a
7 supervisor from the pharmacy department and other
8 one was from laboratory --
9 THE CLERK:  For the record there are
10 four Freeholders, so you can meet as a committee.
11 If the fifth returns, we'll note it for the record.
12 CHAIRMAN ROMANO:  I'm sorry, Miss.
13 MR. PEREZ:  I was also on a
14 one-to-one safety watch because the patient was at
15 risk of a fall.
16 FREEHOLDER O'DEA:  What is your
17 title?
18 MR. PEREZ:  I'm a patient care
19 technician on the medical floor.  So I heard my name
20 being called.  I wasn't sure who it was from because
21 I wasn't able to leave the patient.  Finally, I did
22 hear my charge nurse outside, and she asked the
23 supervisors, who are you looking for?  She said,
24 Right now she's not available because she's on a
25 one-to-one safety watch, and their response was, We
26 can wait out here, is the patient coherent, are we
27 able walk in and speak with her?  She said, No, I
28 don't think it's appropriate for the patient to hear
29 anything concerning what's not patient-related.
30 They walked off.
31 On another occasion I was approached about
32 thirty minutes prior to me punching out.  I was
33 approached by one consultant, and he basically had a
34 forty-five minute conversation with me about not
35 needing the union, we were better off without it,
36 and the benefits of not being a union members.
37 FREEHOLDER O'DEA:  After you punched
38 out?
39 MR. PEREZ:  No, I was still on the
40 clock.  I actually punched about 15 minutes later
41 than three o'clock, which is the normal time that I
42 actually leave.  Basically, the month of October you
43 know, it was a constant harassment.  We were
44 approached every day by lower level supervisors on
45 the benefits of us not being a union member, and you
46 know, this was during like us trying to provide
47 patient care for our patients.
48 And eventually, like I started telling the
49 people I wasn't interested, I didn't want to hear
50 it.  They would still walk behind you.  And I would
51 say a week before the, I'm sorry, elections, that we
52 had, I was approached by two of our managers, and
53 they spoke with me once again, and they actually
54 waited for me outside the room, and they were
55 calling me.  I asked them to wait about five
56 minutes.  I finally walked out of the room, and they
57 just followed me talked to me about the training
58 that I had to attend, and basically asked me what I
59 did get out from it.  I told them basically to vote
60 no, to decertify the union, and so that was
61 basically the feeling.
62 FREEHOLDER O'DEA:  So the people that
63 approached you, were they always these so-called
64 consultants, were they consultants and you said
65 something about lower level supervisors?
66 MR. PEREZ:  If we had a -- there is
67 basically a job title that was given to patient care
68 coordinators.  They basically are RNs, and they
69 basically from what I have seen, they were talking
70 about the union and how it wasn't benefiting us, and
71 they attend meetings from what I see, and just
72 supervisors from housekeeping, laboratory, pharmacy
73 and separate -- I'm sorry.  On two occasions they
74 were the consultants from Brent Yessin.  I was
75 actually approached by two consultants that were
76 dealing with Brent Yessin.
77 FREEHOLDER O'DEA:  Did these
78 consultants identify who they were?  Did anyone ever
79 say, I'm Bill O'Dea, my job is to do this or were
80 they just?
81 MR. PEREZ:  They did introduce
82 themselves.  They did tell me that they were
83 consultants, and basically, they just wanted my
84 feedback how I felt about the union and how I felt
85 that they can benefit us and how they felt we were
86 better off without the union.
87 FREEHOLDER O'DEA:  Did you tell them
88 what your feedback was or no?
89 MR. PEREZ:  Yes.  I told them I was
90 prounion, and I did believe that the union did
91 benefit us, and he basically told me it was
92 different, it's a job setting.  He felt like the
93 union wasn't necessary in a hospital setting.  I
94 also asked him, you know, I thought it was a little
95 unfair that we weren't allowed to have our union
96 meetings within the building, but he was able to
97 approach me on a medical floor without there being
98 any problem, and his response was basically, Well, if
99 you know, we're here with management, and basically
100 management has --
THE CLERK: For the record we have a quorum present again.

FREEHOLDER O'DEA: Did all of these incidents occur while you were working?

MR. PEREZ: Yes.

FREEHOLDER O'DEA: And at any time did you mind what they were saying or their approach to you was detracting from your ability to perform your work if you're in the middle with the patient and somebody comes up?

MR. PEREZ: Absolutely.

FREEHOLDER O'DEA: The reason why, I guess, they didn't want the union to have meetings there, if they work for them, whether that was -- whether you found that distracting and potentially detrimental to your ability to carry out your duties?

MR. PEREZ: Yes, because there were plenty of times where I was rushing to finish whatever I had to do with the patient, just to get it over with to hear whatever they had to say. Also, I asked about my patient care coordinator not to attend training because I heard from other co-workers of mine basically what the training was about, and I wasn't really interested in attending.

FREEHOLDER O'DEA: You did attend the two-hour training?

MR. PEREZ: Uh-huh. Yes, I did.

FREEHOLDER O'DEA: During the period of time, do you remember about what date you attended it?

MR. PEREZ: I believe I attended one of the later meetings. I would say the first week of November.

FREEHOLDER O'DEA: Prior to the election?

MR. PEREZ: Prior to the election.

The election was held the 13th and 14th.

FREEHOLDER O'DEA: What was the approximate time that your sessions were?

MR. PEREZ: I attended the session from eleven a.m. to one p.m.

FREEHOLDER O'DEA: During the time that you were there, did someone replace you on the floor?

MR. PEREZ: Well, what we would do, like when other co-workers went to the meeting, we would just take on -- carry on their job duties and basically have more patients.

FREEHOLDER O’DEA: So the answer is no?

MR. PEREZ: No.

FREEHOLDER O’DEA: The answer is if regularly five people served ten patients, while you were there only four?

MR. PEREZ: Yes.

FREEHOLDER O’DEA: But you shared the workload, the work was expanded for those who remained working?

MR. PEREZ: Yes.

FREEHOLDER O’DEA: During the training sessions, was it an interactive session, were you allowed to speak?

MR. PEREZ: We were allowed to speak. There was one person that was very verbal during the whole thing, and there was occasions where the consultant, I guess, didn't like the feedback she was getting from her, and basically just ignored her, and just continued on talking.

FREEHOLDER O’DEA: While the person was in the room?

MR. PEREZ: Yeah.

FREEHOLDER O’DEA: I have had that feeling sometimes. Not much lately though. Okay.

FREEHOLDER MALDONADO: During the incident that you highlighted, at any juncture were you situated in an area that was restricted, that the consultant was in an area that was restricted, that shouldn't have been there?

MR. PEREZ: I don't think it was appropriate for the supervisors and consultants to wait outside the patient's room. You know, patients have privacy and that was violated.

CHAIRMAN ROMANO: Thank you.

THE CLERK: Mattie Morgan.

MS. MORGAN: Good evening. My name is Mattie Morgan, and I'm a patient care technician at Jersey City Medical Center, and I also have stories about some of the antiunion meetings and how the managers, they were like front lines with these antiunion meeting propaganda tactics. I don't have any further questions.

FREEHOLDER MALDONADO: During the incident that you highlighted, at any juncture were you situated in an area that was restricted, that you situated in an area that was restricted, that the consultant was in an area that was restricted, that shouldn't have been there?

MR. PEREZ: I don't think it was appropriate for the supervisors and consultants to wait outside the patient's room. You know, patients have privacy and that was violated.

CHAIRMAN ROMANO: I would like to know how it affected you on the performance of your job function and patient care.

MS. MORGAN: For instance, I had -- I was working on a weekend, and I was doing an EKG on my patient. I heard the charge nurse call my name over the overhead. She called my whole name, and I
was wondering why. She called me again when I was in the midst of doing something. So I wrapped up real quick because I didn't know what was going on. When I came out of the room, there were two pharmacists at the door, approaching me about the vote, the vote no against the union.

I thought it was odd because the pharmacist don't come out of the pharmacy to socialize with any of the staff accept for nurses. They might come up to the medications room and check on the medication, but don't interact with the rest of us. I thought they were strange that they were sent there to talk about voting against the union, and at the time, it was very stressful in that hospital, very stressful.

I also -- we had -- I went to one of those meetings with Brent Yessin. I think it was the first one that they had. My boss told me that my name was written down to go because everybody's name was on the roster to attend these meetings. I didn't want to go, but I wanted to know what was going on so I went. I went from 1:45 to almost three o'clock. I had to leave to because I have a bus to catch.

Brent Yessin, he was talking about voting no, and he had a booklet about the NLRB, and how we benefit without a union, and the different places he went, and how the companies got -- how they did well without a union, and my shift was covered. They used other techs to cover you when you go to meetings. My patients were given to somebody else to care for while I attended those meetings that they had, and then there was another meeting after the vote no -- it was before the vote. I'm not sure. I think it was after the vote.

We had the town hall meeting. We had scheduled meetings every day from October 23rd to October 31st, at different times, and we were talking to consultants that was with Brent Yessin. He came to the unit at seven o'clock in the morning. He wanted all techs, anybody from 2254, to come out to these meetings, and the charge nurse, I heard her say, I can't make them go. He was insisting that we go to the meetings. I think about four of us went. It's like maybe five techs, four of us went, so there may have been one tech to the floor. FREEHOLDER O'DEA: How long was that meeting?

MS. MORGAN: With Mr. Scott, that meeting took place maybe 45 minutes or a little over that.

FREEHOLDER O'DEA: You're saying that there was a date during the period of October 23rd and October 31st, where there were areas that would normally be served by five techs, only had one tech?

MS. MORGAN: Yes.

FREEHOLDER O'DEA: For forty-five minutes?

MS. MORGAN: Yes. He said everybody come from different units. They were techs. My unit, four from mine, or three from another, whoever wanted to come, all of them.

FREEHOLDER O'DEA: If five techs wanted to go --

MS. MORGAN: He would have took all five of them.

FREEHOLDER O'DEA: He would allowed all five techs and leave not one person there?

MS. MORGAN: Maybe they might have had one tech.

FREEHOLDER O'DEA: Well, you said that everyone was invited?

MS. MORGAN: Everybody was, but you know, there was charge nurse had all the special requests. If she was really, you know, our charge nurse would want to have the techs there.

FREEHOLDER O'DEA: In your case the charge nurse allowed four out of the five, what is the exact title?

MS. MORGAN: Patient care technician.

FREEHOLDER O'DEA: Allowed four of the five patient care techs to leave?

MS. MORGAN: Maybe they might have had one tech.

FREEHOLDER O'DEA: For 45 minutes, what is that charge nurse's name?

MS. MORGAN: Her my name was Carmella, Carmella Abrams, but she's not there anymore.

FREEHOLDER O'DEA: She no longer works at the hospital?

MS. MORGAN: No.

FREEHOLDER O'DEA: Did she leave?

MS. MORGAN: She left, yes.

FREEHOLDER O'DEA: Do you have any idea why she left?

MS. MORGAN: I have an idea. I don't know why not. It's my own idea.
FREEHOLDER O'DEA: What was your
boss's name?

MS. MORGAN: Marilyn Sarnatora.

FREEHOLDER O'DEA: Spell the last
name.

MS. MORGAN: S-a-r-n-a-t-o-r-a. That
brings me to another story with Marilyn before she
left. She started coercing us and harassing us
about these votes and these meetings, you know, you
have to vote, what is your union doing for you, and
why do you think you need a union. I thought that
was very strange. Marilyn never did that. I've
been with her for 12 years. She never brought up
about our union. But when Brent Yessin came, that's
when everybody went crazy and changed, and they
started harassing us because he put the managers on
the front lines to attack us basically.

FREEHOLDER O'DEA: What was Marilyn
Sarnatora's job title?

MS. MORGAN: She was the director of
19 CTs.

FREEHOLDER O'DEA: The patient care.

She retired?

MS. MORGAN: She abruptly retired.

She did. We were at work. It was a Thursday, and I
don't know, she -- I don't know, something happened,
and the next thing I know, we get a text, Marilyn
has just retired. It was on the e-mail that evening
within an hour. We were all in shock because she
didn't say she was retiring, and we were sad because
Marilyn was a nice boss.

CHAIRMAN ROMANO: Thank you. Next
speaker. It seems to me, correct me if I'm wrong, I
think we should ascertain what the legal standing is
on how many patient care technicians are required to
be on a floor at a certain time. I think that's a
question that we need to hear, and in-service
training, is it a violation of State law of the
medical field if it's used for anything but the
performance and enhancement of the education?

FREEHOLDER O'DEA: Jose, you just
shut the lights.

CHAIRMAN ROMANO: That's two of the
keys from my point of view, correct me if I'm wrong,
from what the speaker is bringing out, obviously.
On another note, harassment by pharmacists and
counsel is inconceivable, but I guess that
counsel can tell us what the legal standing is as
far as the number of patient care technicians that
they need.
whole week everybody has been coming up to us and questioning, and I don't know who you are.

He said his name and he said, I'm sorry, I just want to talk to you for a second. I said, I'm on my lunch break right now, it's not even work time, it's my only 45 minutes, and I'm really tired, and I want to eat. He spoke to me about it. I asked where did he come from because I have never seen him before. He said he came from Florida only about two weeks, and he was working there with Mr. Yessin, and they had given him an apartment and a vehicle to move around for the two weeks that he was here, and he was here to do his job. He just wanted to get my feedback. I finished my food. I left. I said, I think I have had everything I need to know from you guys. He kind of followed me after that, and I was really angry. I didn't want to be mean, but I was aggravated. This has been ongoing for -- my nurse manager she was a patient care coordinator, she's kind of like the supervisor of our nurses. I don't really know her title. I don't know her new title. She was harassing us all in our lounge area, and every time I came in there to grab coffee, she would be, what are going do about the union. I told the employees, We don't have to listen to this, we have our patient care technicians do now. I just want to be, what are going do about the union. I told the patients care technicians all of the bedside things that were going on. Every time I turned the room. They don't care.

FREEHOLDER O'DEA: Was anyone else besides four people, if not more than that, people from the pharmacy, did anybody have the names of who these individuals were? Obviously, it would appear these individuals were doing this while they were being paid in the pharmacy, which obviously has probably a very serious potential impact on health care if there were no individuals in the pharmacy to dispatch medication, the medications that patients are required to take. Does anybody who spoke know the names of the individuals?

CHAIRMAN ROMANO: It doesn't have to be the same ones.

FREEHOLDER O'DEA: I'm trying to find out who they are. I would like to know.

MS. RONQUILLO: Stefano is the first name. I don't know the last name. Michael Kursey.

FREEHOLDER O'DEA: Stefano and Michael Kursey, are they both what?

MS. RONQUILLO: They were from pharmacy. I saw them.

FREEHOLDER O'DEA: Were they the two individuals?

MS. RONQUILLO: Yes.

FREEHOLDER O'DEA: Is that consistent with anybody's testimony that spoke and said they were approached by people from pharmacy?

MS. RONQUILLO: Yeah.

FREEHOLDER O'DEA: They were males, okay. Thank you.

THE CLERK: Rosemary Simpson.

MS. SIMPSON: Hello. My name is Rosemary Simpson. I've been working -- first if all, I'm a unit clerk, a floor clerk. It changes depending on what their needs are. I was working for the Jersey City Medical Center 28 years. I'm also an ex-president of this union.

The first thing I would like to clarify is the importance of our patient care technicians. To have a patient care technician leave the unit, a number of them at a time, does cause quite a bit of problems. They draw blood. They do so many -- I want to sum this up. They do most of the work that nurses no longer do bedside care. Our patients care technicians do all of the bedside care, drawing blood, EKG, all of the things except giving medication and do their notes. That is what our patient care technicians do now. I just want to really express --

FREEHOLDER O'DEA: Has the ratio of patient care technicians to nurse increased, so there are now more patient care technicians?

MS. SIMPSON: Yes.

FREEHOLDER O'DEA: Are there more patient care technicians?

MS. SIMPSON: No. They used to be nurses' aides. So they used to be nurses' aides. The hospital kind of pretty much forced them to become patient care, another one of those threatening things, you either do this or you don't have a job. Because of that, I was the president at the time, and because of that, I --

FREEHOLDER O'DEA: How long were you president, when?

MS. SIMPSON: Oh, well, up until a year and a half, yeah, about a year and a half or so ago.
FREEHOLDER O'DEA: How long were you going on, but my problem here too is that, I mean, Now, tell me how you can take an employee off a unit her end of the conversation, she said I need you to hang up, and I said, What happened? wasn't going to be there, and we ended all traipsing 973-410-4040 you know only which union? take an employee off the union for two hours, but for two hours, housekeeper, clerk, tech, otherwise, otherwise, and the gentleman that I encountered. First of all, where it was to supposed to be, they found out it wasn't going to be there, and we ended all traipsing through the halls of the hospital to go down to the emergency room so that we can all squeeze in this area standing around while he expressed to us that we no longer have a union. Now that we're no longer union employees, now sometime in March, we will be able to have the advantages of all the other non-union employees. So just to sum that up, that was the whole thing. He spoke very, you know, really I'm like pissed off at them so, but I just wanted to show you the importance. You're telling me, I have to answer the phones, I have to enter all of the patients orders, you know, some of them critical, but off the unit an hour. So another reason I want to bring that hour up is because we used to have an hour lunch. Now, tell me how you can take an employee off a unit for two hours, housekeeper, clerk, tech, otherwise, and let them go to a class, which I was told it was a class, I'll get to the reason why I was unable to go. I was told it was a class. So now, you can take an employee off the union for two hours, but then say, Well, you can have a 45-minute lunch, which is what our lunch hour is now because we've been told it's just so important you have under that unit that extra 15 minutes, but you can take us off the unit for two hours. I needed to stress that so you understand that part. What happened with me, when I, at the time my head nurse manager was expressing to another employee about these classes. It wasn't told to me. So I said, Wait a minute, what kind of classes? She said, Oh, the hospital is giving a class. I said, I want to go. Well, she came outside, she placed a call, she said, I need to -- and I'm listening to her end of the conversation, she said I need you to add Simpson to the list. Oh, I didn't know. So she hangs up, and I said, What happened? She said, Well, you can't go. I said, Why can't I go? She said, Come in here, I have to tell you in private. So I go in this little area. She said, Well, I've been told you can't go because they already know how you're going to vote. That happened to me on October 15th. I documented and I also sent a text. I was like, If this was truly a class, something that was educational, I'm also an employee of this hospital, why am I not allowed to attend so? FREEHOLDER O'DEA: Were these sessions held only for individuals of unions, and do you know only which union?
get another person, I said, No, the nurse manager was sitting there. But anyway, what was going on during the night shift, two managers came while I was there, and I said, Hello, and I asked them what was going on. They told me nothing, but what was truly going on, they were pulling employees in the conference room talking to them about coming out of the union.

So what this guy Brent Yessin brought in was there for two weeks. The very last day of the election, he approached me, and he tells me, he finally approached me, I know your name is Simpson. The point I'm trying to make here is these people were brought, they are not employees of the Jersey City Medical Center. He would walk up to you with a basket in his hand and say, Take a piece of candy.

If you take a piece of candy, now he would say, well, now, you have to take a card. So the card might have a message that said, Well, what has the union done for you lately, and then you're expected to answer that. These are the games that they were playing. I need you to understand. I wanted to be able to show you some of the things that they were doing truly does not make sense. I wanted you to have a better picture of the patient care techs' responsibility and how valuable they were on the unit, and just to see how far the Jersey City Medical Center have gone to really try to get rid of the union, when they should have been putting all of this energy into taking care of patients.

That's truly what I wanted you to get a better picture of and to see that everything that is happening and transpired in contract negotiations, you have to be there to get really a full understanding what is truly happening at the Jersey City Medical Center. I wanted you to get a better picture.

FREEHOLDER O'DEA: Thank you.

MS. SIMPSON: Thank you.

MR. FLORIO: Next speaker is Susan Cleary.

MS. CLEARY: Good evening, Chairman Romano, Board of Freeholders. I really came here tonight to support my sisters and brothers of A.F.S.C.M.E. I'm Sue Cleary, president District 1199J. I wasn't going to speak, but I want to clarify a couple of things.

1 First, we also represent members at the Jersey City Medical Center. We've got about 45 workers in the dietary department, 150 professional workers, and we have 500 registered nurses. I believe A.F.S.C.M.E. has about 600. We represent a lot of workers inside. We settled our contracts with our professional and dietary groups, and I would tell you it was like swallowing castor oil.

We settled, we didn't want to, but we didn't have much choice.

And I'm particularly concerned, I heard some testimony earlier about nurses being pulled from the emergency room. Our registered nurse agreement expires at the end of January of 2014. They will not spared from this kind of treatment. I will say that very clearly. They're not here to tell you horror stories, but I think next month we will back here with a bunch of registered nurses telling you their stories, if we're not out on the picket line.

I want to say two more things. One, I will tell you throughout the entire process since February with the union busters from out of state, our nurses have told us just how bad it was for the patient care techs, for the union clerks, for the housekeepers, for all of the folks that work on the floors with them. They told us about the morale, about the fear and about the intimidation.

And I suggest to you even without hearing specifics of patient neglect while people are being pulled into meetings, I think it's common sense that when you have a thousand folks working in a hospital, that every day they come to work, they don't know what is going to happen next, who is going to get fired for looking at somebody the wrong way or for doing absolutely nothing, that absolutely will affect patient care, absolutely will affect patient care. It doesn't matter what you do. If you build cars for a living, if you go into work every day not knowing whether or not you're going to be fired, or you're going to have some supervisor or consultant sneaking up on you, talking in your ear about something that is important to you like your union, you're going to probably mess up some of that car, and hospital workers are no different.

So I think it's really important to focus on that. I hope, I think you should be commended for setting up this kind of a meeting. I think it would be even better if there could be even a subcommittee formed to hear some private testimony.
from folks who may not have the courage to come forward. We have also in our union seen retaliation and leaders fired for no reason, made up stories about arguments in the hallway, that witnesses somehow heard things that were never said. We know that. That's why we're here today in solidarity with our sisters and brothers. I think this is a situation that has gotten out of hand. We're not in Florida. We're in New Jersey. We're in Hudson County. This is a labor-friendly County. For me to listen to these stories, I have to tell you, you guys are so courageous. You should be so proud of yourselves.

We've got to do something about this. You're the best Freeholder Board in the state. You are. You're the first ones that passed a living wage ordinance. You've been proactive Freeholders, going back to when our nursing homes were privatized. You were great, and you were always worker-friendly. Let's do something about it. Let's ask how much money is being spent on consultants and cars and hotel and meals and time and money.

FREEHOLDER O'DEA: We have asked for that.

MS. CLEARY: And we still have not gotten an answer, right? We've got to press further. I think we have to do it together. You know, enough is enough here. That affects patient care. When you're taking dollars, and all you know, anybody who lives in or works around Hudson County knows that the Medical Center has been financially troubled for years, but to find magical dollars to pay out-of-state consultants, not just one but a whole bunch of them is mystifying to me.

I think there is has to be some more investigation. They get County dollars. They get County patients. Hudson County workers are in the State health benefits. I believe the Medical Center is part of that plan. We're going through health care reform and health care dollars are for patients, and that's not happening in the Medical Center. I just want to, I guess, echo the request that you pay attention to some of the retaliation.

I expect hard work for the union. We get punished as a union because I'm here. I think they will try to retaliate against my members at the bargaining table. We'll fight that fight. Again, I really want to thank you. I know that you've very proactive, and it is a great start. Let's hope that we can keep going and get some justice for the workers and the patients of the Medical Center.

Thank you.

CHAIRMAN ROMANO: It's good to hear from you.

MR. FLORIO: The next speaker is Kerry, J-i-c-h-a. I don't want to mispronounce your name.

MS. JICHA: My name is Kerry Jicha.

I've been working in the Medical Center since 2005. I became active with my union in the fall of 2012. Before that, I was considered an exemplary employee. Since then, I have been suspended without pay for -- suspended without pay for violating a policy I didn't know existed. I was terminated from a union position very recently in early October, and mandatorily reassigned to nonunion post at an off-site clinic.

FREEHOLDER O'DEA: Can you explain what that means?

MS. JICHA: I was called in. I worked the night shift in the ER. I was hired. I recently finished school as a patient care technician. I was hired for a position. I was training. I was getting great feedback from my supervisors. One morning, I was called while I was sleeping because I'm night shift, I sleep during the day. I was told in four very vague messages to come into HR immediately, no reason why, nothing. So the next day I go into work as normal.

I'm getting continuing training on my duties as a patient care tech because I'm seven days into ten days of training, and the very next day I set out to find out what was going on at HR. They don't open until nine a.m. I told that I was not in trouble, but I needed to come in for a career opportunity. When I came in, I was told that my position has been given to someone else. They decided to go a different way, though I had done nothing wrong.

They cited their implemented contract that they had the option to go with a worker that had been there longer than I was but did not have my seniority as a union member. When I asked questions as to who this person was or why this person never made it into the initial hiring process, they weren't answered. I was told that I couldn't get that information. I was then offered a job on a off-site clinic in a non-union position, or I was told that I can go ask my boss if he has already filled my job in patient transport for less money, if it still existed.
I was told when I asked to leave the office and think about it that it wouldn't be there for long so I should make a decision quickly, and I chose to go work in the off-site clinic because I really believed they had gotten to my previous supervisor. I felt retaliation from the very beginning when I started working with the contract negotiation committee, when I represented members as shop steward, and I filed a grievance because I wanted my old job. I felt I was qualified. I didn't feel what happened to me was justified. A few weeks after that initial meeting on November 7th, I was called into a meeting with Mary Cataudella and Brent Yessin. I asked that a union rep be present. I was told that I was a nonunion employee.

FREEHOLDER O'DEA: Mary? MS. JICHA: Cataudella, I'm not certain of the spelling of that. She is the vice president of human resources, and their consultant Brent Yessin. I tried to bring a rep, but they told me I wasn't entitled to bring a union rep. I told them I would feel comfortable to have a witness. I was told again that I was not in trouble. This was career development, career development, and my rep was not allowed to come in with me. I was then offered money to drop my charges against the hospital because by this point I had several National Labor Relations Board charges against the hospital that are still pending.

FREEHOLDER O'DEA: When you said you were offered money, can you elaborate? MS. JICHA: I prefer not to go into the detail because it's still pending with the NLRB, but I was called into a private meeting, and I was told that if I dropped these charges, I would get a sum of money.

MR. FLORIO: Freeholder, you don't want to jeopardize the speaker, she's still waiting on the NLRB. She's wise to put that on the record and should refrain from speaking on that all.

MS. JICHA: I was pulled off the main building as a union officer in the beginning of the harassment that started with these employees.

FREEHOLDER O'DEA: What was the time frame for this?

MS. JICHA: I was removed from my PCT position on October 9th. I was called in for the meeting with Mary and Brent Yessin on November 7th. As of October 21st, one of my members of my old department was transferred, and I actually just prior to, I had had a promotion. I received a grant to study to become a patient care tech. That was how I got the position in the ER. I was promoted by the hospital because they helped facilitate this grant, and I was told that I was the first person and how well I was doing in my position before they terminated me.

I've also had members because I had been a shop steward bring to me complaints of harassment. On the evening of October 21st, several members of my old department in transport were called into labor orientation sessions. They were mandatory only for union employees. At least four members were pulled off the unit for two hours at a time. They were sent down one-on-one with management, and basically fed antiunion propaganda and were being told how they should vote in the upcoming elections. They felt intimidated because there was no buffer. There was one person in a room full of administrators being told that they were getting some sort of training that had something to do with their job, and some of them are older and don't feel comfortable being confrontational. They were pulled off for two hours at a time, and I know of at least three members that were pulled off that day, which left that department severely short-staffed.

FREEHOLDER O'DEA: What department is that?

MS. JICHA: This is patient transport. Those meetings, the first one took place from three to five p.m. I know another took place from five to seven p.m. These were not the employees' lunches, but they were counted as well as the 45-minute lunch that they were entitled to. The department was severely short-staffed that night. Patient care suffered. Patients weren't getting to tests in a timely manner.

FREEHOLDER O'DEA: When you said the individuals were brought into one-on-one with administrators, that's administrators as opposed to consultants?

MS. JICHA: They were management.

FREEHOLDER O'DEA: They were actually employees of the hospital that serve in management titles?

MS. JICHA: Yes, sir.

FREEHOLDER O'DEA: You were not -- you were not at those sessions?
sessions.

FREEHOLDER O'DEA: At that point in time, you were no longer in the union.

MS. JICHA: I was no longer in the union, and a member that was afraid to go to her session had called me and asked me whether or not she had to attend that session.

FREEHOLDER O'DEA: Did she attend it?

MS. JICHA: She did attend the said session. She was felt coerced, but she went because she was told it was mandatory, that it wasn't an option for her not to go.

FREEHOLDER O'DEA: Did she or anyone else tell you the names of any of the administrators who were in those sessions?

MS. JICHA: She didn't, sir, because she felt afraid of retaliation.

FREEHOLDER O'DEA: Again, as we've stated, the main focus is to see how these actions impacted the quality of care and patient care, and obviously administrators, who should have been administering and overseeing or conducting sessions, I don't know if you call these training sessions, it wasn't training related to your job, that is also a factor towards the issue of whether or not patient care and health care was impacted.

FREEHOLDER MALDONADO: When you were called into the -- when they were called into the session, transport, how many others were left there to do the remainder of the work?

MS. JICHA: At that time of the evening, there are four people scheduled until about eight o'clock. At any given time, there were about two people on the floor because one was always on lunch and one was always in a meeting. You had two people covering a hospital of three to 400 beds.

FREEHOLDER O'DEA: Normally, how many?

MS. JICHA: Normally it's four.

FREEHOLDER O'DEA: Any questions.

MR. FLORIO: That ten minutes is up.

FREEHOLDER O'DEA: I would just for information of Susan Cleary. Susan, I think that if there is any issue, we may be taking testimony about what has occurred. Obviously, I think that we would ask that now this is occurring with another group of employees for similar reasons that we should be alerted immediately, and Mr. Florio, it's one thing for us to take action or ask that someone look into something had occurred.

And Mr. Administrator, I think we have an even higher level of responsibility if it's brought to our attention, if that action is occurring and taking place that may impact the health care of individuals relative to any fact that we're paying the hospital for pursuant to our contract. I would ask that if that is the case that information be brought to our attention immediately, and we Mr. Administrator, you may want to meet with the Executive, Tom, to discuss that. God forbid, now knowing that this is happening, and it's affecting lives, we have an obligation to take action, and it's our responsibility to not go back and forth.

This continues to be occurring in a similar pattern, which quite frankly I find is extremely, extremely disturbing. You said that is Hudson County, not Florida. For Florida, this is pretty good. This is kind of something I read about in a political science class in countries that do not have a democratic process, and people taught lessons trying to organize a union. I have to tell you, taking it on its face, I'm very disturbed.

Mr. Chairman, I would also recommend that someone mentioned we have employees that want to testify to their stories, there are some others who may not want to be here or are not capable of coming out to do that. We should take separate testimony for individuals that want to share their stories about the health care situation that's affected their job, and if they want to share it with us, we should take their written testimony to combine with the other testimony.

Beyond that, someone suggested earlier that, I would defer to either Chairman Romano or the incoming Chairman, to name a committee who can meet in a closed format and take additional testimony from individuals who may be more inclined to speak in that format rather than the public record where obviously their names are read in.

MR. FLORIO: And the last card I have is for Kabili Tayari.

MR. TAYARI: I first want to commend the Board of Freeholders for asking these persons for Kabili Tayari. I was appointed by Mayor Jeremiah Healy and confirmed by the City Council of Jersey City to be a citizen member of the Jersey City Medical Center Board of Trustees. I note that in
September, the Board was being told that, quote, the
town hall meetings were going to be held with
employees. I for one definitely volunteered to
attend such town hall meetings because I had
question marks in my own head.
March the 7th, I think it was, there was a
change of location in the Jersey City Board of
Trustees meeting. I went to the Jersey City Medical
Center to attend that meeting only to discover that
the meeting had been changed and I found out the
next day it had been changed, without informing me
where that was because I was always an advocate for
the lack of fairness that were given to the
employees in the negotiations.

FREEHOLDER O’DEA: Do you know if any
meetings were held?
MR. TAYARI: Oh, certainly. Yes, they were. When I was finally contacted, I had
asked why was I being contacted to sign certain
documents, when we had not had any meetings. I was
told we had meetings. At that point I said, Well,
why wasn't I contacted? I was told that a motion
was taken at the September meeting, they were not
clear that I was a board member. I was reappointed
to the board December the 10th. The City Council --
should say the City Council ratified my
reappointment on December the 10th.
On March the 7th, I was contacted to come
to a board meeting, which was later on changed, and
there was interaction as a board member between me
and the administration, so there is was no question
then I was a member. I opposed that motion at the
September 25th meeting. I want to make something
very clear to sum it up.

FREEHOLDER O’DEA: I want to
understand that. There was a motion made on
September 25th, that did what?
MR. TAYARI: That motion was to
affirm that the reason that I had not been contacted
since March the 7th about any board meetings was
because the administration at the Jersey City
Medical Center did not know that I was an official
board member.
FREEHOLDER O’DEA: Did they -- did
they explain at that time what actions they took to
determine whether or not you were a board members?
MR. TAYARI: The only action that
could speak to was it was a failure of the City
to properly, whatever that meant, to properly notify
them that I had been reappointed, and I pointed out
the fact that it was customary that any board or any
agencies receives a notice from the City Clerk
immediately after the City Council takes action, and
I'm sure that that had occurred. Number two, there
was no confusion in the month of March, so where did
all of this confusion come from?
FREEHOLDER O’DEA: Does the City only
have one representative?
MR. TAYARI: The City has three, a
newly appointed woman. She's a vice president of
Starbucks, I can't think of her name, and Harry
Melendez, so there's three of us.
FREEHOLDER O’DEA: When did they --
MR. TAYARI: Oh, I'm sorry. I lied.
Not Mr. Melendez, the head of the golf course. Oh,
God.
FREEHOLDER O’DEA: We can try to find
that out.
MR. TAYARI: But anyway, he's the
manager of the Liberty National Golf Course.

FREEHOLDER O’DEA: I'm just curious.
Did they continue to be notified?
MR. TAYARI: Well, the woman who is
the vice president of Starbucks was just recently --
FREEHOLDER O’DEA: I understand. She
probably replaced Melendez.
MR. TAYARI: The gentleman from
Liberty National Golf Course and myself were
reappointed, and she was just newly appointed.
FREEHOLDER O’DEA: So you were
reappointed, were both of you reappointed at the
same time?
MR. TAYARI: I think so. I think so.
I think so, but I was mainly focusing on December
the 10th, I know I was reappointed.
FREEHOLDER O’DEA: I would be curious
as to whether or not if he was reappointed on or
about the same time as you were, were they notified
of his reappointment? If they weren't, did he
continue to be an attendee?
MR. TAYARI: I know he wasn't
attending meeting. Why he wasn't attending, I don't
know.
FREEHOLDER O’DEA: Was he at the
meeting of the 25th of September?
MR. TAYARI: Yes.
FREEHOLDER O’DEA: I'm sorry.

MR. TAYARI: It's quite all right. I just want to say in relationship to the September 25th and the November board meeting, it's very important that I'm on the right road. I'm glad the attorney raised what he did in the sense of the person that was just up here speaking. I think first and foremost, what are the procedures spelled out by the National Labor Relations Board as to how to decertify an union? That's number one. I think a lot of incorrect things occurred in how this occurred. The vote was 267 to a hundred and something. There are six hundred employees at the Jersey City Medical Center.

It was already stated that they went from one hour lunch to a 45-minute lunch. It was explained over and over again, the critical necessity to have people on the floor in their unit over and over again. Somebody said something about a legal requirement for nurses. I can tell you what you want a copy of is the Patient Quality Care Report that we hold so high. That's a national report. That is something that we have to submit. That is based upon how well we cover whatever it's patient technicians, nurses, people taking blood or whatever. We brag about this patient care that is already there.

I want to note that union officials were not allowed to put up literature in the elevator or bulletin board about union meetings. They were telling them we can no longer meet after hours on the Medical Center property, whether that was the cafeteria or in a conference room somewhere to the point that they were renting space from the church on Jersey Avenue to have their meetings. They were not allowed to communicate with workers after they got off their shift. In fact, if a worker was off his shift, let's say I worked to three to eleven, at eleven o'clock, I wanted to stand outside on the property and pass out something. No, no, it was grounds to have me removed.

So it's kind of ironic that people are mandated to come to these so-called training sessions, and yet all of these things started occurring February, March, April, to allow them to even talk to each other, even organize. The other thing I want to raise that I think is very important, I have heard, I don't know whether this is true, and I think it was suggested that you meet with people in closed session because people are scared. Some people said they were promised an increase in their pay if they voted for the union. You need to follow up.

I also want you for know some of us have already contacted the Attorney General's office because there is an Attorney General that oversees all hospitals. Also, the Department of Labor needs to be involved in this. There are many things. But these people do not have the wherewithal or resources. I think somebody said earlier about working together, and I'm here not to hurt my hospital, I mean my hospital, I just stood before the City Council and demanded that the ambulance contract should remain there.

But I do believe in what's fair and just. We just celebrated Jesus Christ's birthday, and in Matthew, there is a subject to talk about Joseph, Jesus's earthly father being a just man. We are celebrating Kwanza. Today is the fifth day, Nia or purpose. Who other purpose should we be about than standing up for the least of these workers, 600 of them? I think Ms. Clearly is correct. It's coming up to lead to some other things.

I don't want us to get caught up in technicalities of how many nurses should have been on the floor, and how many nurses should have not been there and what the legal requirements are. I'm a bureaucrat, and I'm glad to be one, I'm a public servant, and I'm glad to be one, and we know we can manipulate this that were paid, and why were consultants?

I am a board member. I have a badge. When I walk around that hospital, I must show security first who I am. It states my name is Kabili Tayari. It states I'm a board of trustee member, and there's a code in that badge that gives me permission when I hit the key code that allows me into certain areas and certain areas I'm not allowed in.

MR. FLORIO: Ten minutes.
MR. TAYARI: Thank you. I just want to sum up and say I know that the Board asked me, Board of Freeholders, to get a copy of Mr. Brent Yessin's contract, and I am a board member, cannot even have it, and that was asked for before you...
asked me to do that. God Bless you. Thank you.

FREEHOLDER O’DEA: Kabili, do you recall voting on this contract?

MR. TAYARI: Oh, let me say to you straight up, I have a lot of concerns about things we don't vote on that are told we don't have to vote on because there is another board that does the voting for the Jersey City Board of Trustees, which is another question that needs to be examined. I mean, Mr. Freeholders, you're asking some valid things, and I only say people are going to accuse us of trying to be political. The campaign is over.

It's over with. Whoever the mayor is, we know who the mayor is. That campaign is over with. I'm glad to see that you have continued to be on top of this because that is another question too.

Why is it that the Jersey City Medical Center Board of Trustees is not voting on these things, and particularly as we're in the middle of a transaction with St. Barnabas? I would make one last suggestion. Contact through your lawyer and your BA, the CEO and law department of St. Barnabas Hospital, and sit down and have a discussion about all of this formally. Thank you.

FREEHOLDER O’DEA: There are no other

FREEHOLDER O’DEA: Mr. Florio, I think that it behooves us to have you ascertain a few things. First is, who is the governing body of the Jersey City Medical Center? Legally, if you need to do research, if you need to file an action in court, I think we can give you the authority on our behalf to do that because we requested nine months ago, maybe longer.

MR. TAYARI: March the 14th.

FREEHOLDER O’DEA: It's interesting that you were here on the 14th, and you didn't get invited to a meeting until six month later. I'm sure that was coincidence.

But Mr. Florio, the fact that we have a contract with that hospital, we have several contracts with that hospital, we have a legal responsibility to understand what is the makeup. Who is the governing body of that hospital? I would like to know they are. I would like to know the names of those individuals. I would like to know the process upon which they are named.

Similarly, I would like to know what is the process and procedure for entering into any contracts that the hospital entered into as a not-for-profit, what or how much of that information is accessible to the public as a hospital, as a not-for-profit that gets charity care and Medicare and Medicaid, but also public funds and public contracts with the City and the County contract, what OPRA requirements they may be subject to because of the sources of funding that impact them.

MR. FLORIO: Freeholder, when you ask about contracts, are you speaking specifically with reference contracts of collective bargaining units?

FREEHOLDER O’DEA: Contracts for --

MR. FLORIO: Expanded to goods and services?

FREEHOLDER O’DEA: Professional service contracts, what level, to what level of their books are required to be open to the public as a hospital, as a not-for-profit, what or how much of that information is accessible to the public as a hospital, as a not-for-profit that gets charity care and Medicare and Medicaid, but also public funds and public contracts with the City and the County contract, what OPRA requirements they may be subject to because of the sources of funding that impact them.

As it relates to this particular hearing, we asked relatively simple questions for simple documents that we never received, and then we never understood the amount and level of expenditures related to those, again, clearly would have an impact on the quality health care provided at the facilities. Millions of dollars are being spent on so-called consultants. You know, we need to understand why that money is not being spent on health care for the patients. As it relates to this particular hearing today, you stepped out temporarily, and one of the recommendations is that, and I don't know if we need a special committee hearing. It would probably make a sense for the Chair of the Health Committee to take it upon herself to conduct an additional committee hearing, which would not be subject to the Open Public Meetings Act, upon which additional individuals could come give testimony.

I would leave it -- I would leave it to the Chair obviously of the committee, but it could be conducted in a manner where individuals would be invited to sit here or wherever. They could be invited into the caucus or committee room so there is a much greater sense of fact that the information they are providing is provided in a more private setting. I leave that up to the Chair.

Lastly, from my perspective, I would ask that we as a Board be provided with an expedited

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800-227-8440 973-410-4040
MR. TAYARI: Can I have a copy?
FREEHOLDER O'DEA: Once we have it, it's available to the public. In addition to being provided to us, that it be provided to the outgoing and incoming Speaker of the State Assembly, the current President of the State Senate, the Office of the Governor, the Congressional representative that represents Hudson County, the two United States Senators that represent the State of New Jersey, and particularly the State Senator and State Assembly Members, who represent the City of Jersey City and the County of Hudson. I believe one of our Legislators is on the Health Committee, correct?
MR. FLORIO: Yes, sir.
FREEHOLDER O'DEA: I would suggest that we not simply send those transcripts to those individuals, but that we send with that a letter from us that requests at their earlier possible convenience after reviewing that transcript, they make arrangements to meet with us either personally or with their appropriate staff to further discuss the information that was provided with that. I don't want to put you on the spot, how soon can we get that?
THE COURT REPORTER: Five days is expedited.
FREEHOLDER O'DEA: So those are just my recommendations to the Board of what our next steps are. Part of the reality or the frustration is that we don't have a direct control of the facility. I would probably go out on a limb and say even the hearing we held today will be viewed by many as an extraordinary step as it relates to an action of a legislative body that has no direct control over it.
However, I think the information provided today forwarded to Members of Congress and Members of the State Legislature can certainly put them on notice and warrant from their positions, who some have direct control over things like licensing, funding, charity care, Medicare, etcetera, may warrant a hearing at a higher level, which obviously many of us would attend and open up ourselves up to be heard. I don't have any other comments. I will leave it up to Freeholder DiDomenico with respect to
the Health Committee.
FREEHOLDER DiDOMENICO: I would reiterate the words that were said, and thank the people that came today who had the courage to speak out and share with us their experience and what they have gone through, and I thank you certainly for the care you provide your patients and the concern with which you take your jobs.
As soon as we begin the New Year with our new Chairperson, I will make every effort to set up that committee meeting and go about contacting employees or allowing anyone who would want to come and speak to the committee to provide private testimony can do so.
FREEHOLDER O'DEA: One last thing, I would ask you to research whether it would be reasonable and appropriate to forward a copy of the transcript to the National Labor Relations Board. It would appear that many of the items raised here today are within their purview, whether it's part of a current investigation that there may be complaints that they're currently dealing with, whether they have authority to go beyond that.
Obviously, it would appear that one of the things we certainly have the power to do is make sure that the information provided to us today is provided to agencies and entities who have more authority than we would to take certain action. I would just note for the record that we did invite notice and warrant from their positions, who some actions they deem they may have the authority to take to look into as a result of the information. Because they like us are elected representatives of the people that came today who had the courage to speak.
officials, and once an elected official is put on notice of a situation, those elected officials are held to a higher level of responsibility as it relates to what they should do.

MR. TAYARI: Mr. Chair, you asked who, Kabili Tayari; Nevin McCann, and the new person -- and the new person, she was just appointed, if I understand she's vice president of Starbucks, but she lives in Jersey City, Veronica Pack -- Park. Park.

FREEHOLDER O’DEA: I’ve seen e-mails from her. Mr. Florio, can you as expeditiously as possible ascertain what the authority of the two board are? There are two boards?

MR. TAYARI: Yes, sir.

FREEHOLDER O’DEA: What is within their governance or within their operating agreements, what each of those are, and then I have to tell you that if that also is reflected by an agreement, it's probably in place with the City of Jersey City where -- did Mrs. Simpson leave?

FREEHOLDER MALDONADO: Kabili, I have a really quick question, Edgar Martinez served or does serve?

MR. TAYARI: Edgar Martinez, Harry Melendez appointees by the board, and the three names I just gave you.

FREEHOLDER MALDONADO: How many members are on the board?

MR. TAYARI: I think there are nine of us. I think they are nine of us.

FREEHOLDER MALDONADO: Would you know if any those individuals have been invited to these meetings that you were not invited to?

MR. TAYARI: If you look at the minutes, which I have reviewed, it appears that there was more phone conversations between those periods, and then only a few of us were actually able to physically attend. What began to happen, I think May, what began to happen in May, all of a sudden there was these joint meetings between the Liberty Health Care Board and the Jersey City Medical Center Board.

And what you see from reviewing the minutes is most of the Jersey City Medical Center Board Members were available by phone only, which raised questions to me as to how much of a timely fashion were they contacted because I would say Edgar and Harry and most of my colleagues are -- we have made it our business to physically be at our board meeting.

FREEHOLDER MALDONADO: Were they voting on issues telephonically?

MR. TAYARI: Yes.

FREEHOLDER MALDONADO: Do your bylaws allow for that occurrence?

MR. TAYARI: Well, that goes back to what Mr. O’Dea said. We’re going through a struggle about where are our bylaws. We have a fact that question has really come to our floor when these labor negotiations started because what we discovered is that we should have, we the Jersey City Medical Center Board, should at least have a
financial and a labor negotiation committee as an actual function, not just by our bylaws, but what seems to be standard operating procedure by most boards of trustees of hospitals. Which is another reason why I suggested, I would suggested it again, Mr. Chairman, that you send a copy of this information to Mr. Barry Ostrowsky, the CEO of St. Barnabas Hospital. Be very clear there are serious discussions about there being a merger between the St. Barnabas and Jersey City Medical Center.

FREEHOLDER O'DEA: The hospital, it says St. Barnabas. It's really serious. It's right in the lobby as you go in there.

MR. TAYARI: Let me say, let me say very honestly that if there had been a vote, I have not seen those minutes and somebody better hurry up and tell us that we're in something other than transactions and discussions.

FREEHOLDER O'DEA: I don't want to cut you off, but we advertised a special meeting, and our special meeting is limited.

MR. TAYARI: That's correct. Send it to the CEO.

FREEHOLDER O'DEA: I don't want to go far afield. We have to limit our scope because we could -- someone could argue our position is tainted beyond the scope.

FREEHOLDER DUBLIN: I have a question for Mr. Florio, can we found out if they are governed by the Sunshine Law, are they?

MR. FLORIO: The short answer is no, but if you look at it in light by which Freeholder O'Dea has tried to cast the inquiry, I won't say no. So I'll look at it, and I'll advised the board.

FREEHOLDER O'DEA: I would tell you that there is case law that, Mr. Florio, has broadened the scope of which the Open Public Meetings Act applies. There is a case of a Trenton hotel or a parking deck in Trenton that broadened the groups that had to potentially be, you know, impacted or affected by -- forget about just the Open Public Meetings Act, more importantly, the Open Public Records Act. That would allow us the opportunity to be able to access information. Anything else? I'll take a motion to adjourn.

MR. FLORIO: Move by Freeholder Dublin. Second by Freeholder Maldonado. All in favor? The meeting is adjourned at 7:03.

(Whereupon the proceeding is then concluded at 7:03 p.m.)

I, SHARI CATHEY, CCR, RPR, License No. 30XI00234700, and Notary Public of the State of New Jersey, hereby certify that the proceedings herein are from the notes taken by me of the Public Portion of the Special Meeting of the Hudson County Board of Chosen Freeholders, held on Monday, December 30, 2013; and that this is a correct transcript of the same.

___________________________
SHARI CATHEY, CCR, RPR
A NOTARY PUBLIC of the State of New Jersey
I.D. No. 2283786
Commission Expires 2/4/17
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