MNA REGIONAL GOUNCIL 5 GREATER BOSTON

NEWSLETTER OF MNA REGIONAL COUNCIL 5

Regionally Speaking

VOLUME ONE, ISSUE TWO • July 2010

Council Members

Fabiano Bueno, Chair Boston Medical Center

Ginny Ryan, Vice Chair Faulkner Hospital

Betsy Prescott, Secretary St. Elizabeth's Medical Center

Ann Marie McDonagh, Treasurer
Tufts Medical Center

MNA Board Rep (2009-2011)

Dan Rec

MNA Board Rep (2008-2010) Ginny Ryan

At-Large (2009-2011)
Ann Marie McDonagh & Patricia O'Neill

At Large (2008-2010) Karen Higgins & Dan Rec

Each of these Region 5 facilities holds an elected voting representative at Region 5 council meetings:

American Red Cross
Boston Medical Center
Boston VNA

Brigham & Women's Hospital

Cambridge Hospital
Carney Hospital

Norwood Hospital

St. Elizabeth's Hospital

Dana Farber Cancer Institute

Dialysis Clinic, Inc. Faulkner Hospital

Harvard Vanguard Medical Associates Kindred Health Care—Braintree

Medford School Nurses

Newton Public Health

Newton-Wellesley Hospital

Quincy Medical Center Radius—Boston

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Radius—Quincy

Somerville Hospital
Tufts Medical Center

Tutis Medical Certer

Whidden Memorial Hospital Unit 7 Representative

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CHAIR'S MESSAGE

Look well to the characters and qualifications of those you elect and raise to office and places of trust. Matthias Burnett, Pastor of the First Baptist Church in Norwalk, 1803

The Massachusetts Nurses Association (MNA) is a one-member/one-vote democratic organization where the members set the agenda. An elected Board of Directors is made up of frontline nurses and health care professionals from across the Commonwealth. Nurses also have the opportunity to address local issues and to mobilize within their own communities through Region 5/Greater Boston.

An important tool for voicing your opinions is your vote - for your leaders who represent your interests and views. MNA will hold its Board of Directors election this September. You should find and vote for a candidate that reflects your views. By not voting, you give someone else the right to allow their views to directly affect you.

Since its founding in 1903, the MNA has been the most powerful and effective voice on nursing and health care in the



Commonwealth. MNA created the Nurse Practice Act and the RN license designation, developed a uniform curriculum for the education of nurses, wrote the first code of ethics for nurses and passed, or helped to pass, nearly every state law governing nursing practice, including the law allowing nurses to unionize in Massachusetts.



Fabiano Bueno Region 5 Chair

Being a member of the MNA means you should participate in voting, but also take the opportunity to participate on the various task forces, committees and other events held on the state level, as well as in your region. You should also participate in your local bargaining unit, for the simple fact that in so doing you have a direct impact on your worklife and your professional practice. Regional Council 5 is also a vehicle for the members to explore, learn and become active in MNA and to influence the direction of your professional association.

The bargaining units are the point of origination for the identification of key issues of concern for nurses and the place where we identify and develop specific requests for action and resources from the Board of Directors to assist members in meeting their specific needs. You also have the opportunity to attend open meetings, special events, board meetings and the MNA convention where you can influence the direction of the organization. But none of this can happen unless you participate and unless you vote.

Please be sure to cast your vote this September for the candidates you feel will best serve your professional interest.

Convention 2010 Region 5 Reimbursements: R5 members are eligible for convention reimbursement. Contact the R5 office or check the R5 website for more information and reimbursement forms.

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Bargaining Unit Updates



American Red Cross. No report submitted.

Boston Medical Center submitted by Lisa Swattelle. The ENC Campus ER is being closed; 28 nurses to initiate bumping. A vote of no confidence on the VP of Nursing has been taken by the bargaining unit and it was reported to the outgoing and incoming CEO. The committee has been meeting frequently to accomplish positive goals to members. Hospital administration continues to have a hostile approach to the negotiating committee and members. The hospital has contracted a firm to consult on cost savings ideas.

Boston VNA. No report submitted.

Brigham & Women's Hospital. No report submitted.

Cambridge Hospital submitted by Susan Wright Thomas. We are facing tough negotiations with take-backs and retiree health insurance concessions on the table. We are holding firm and are confident of strengthening our contract. Recent reductions in force and the grave illness and passing of respected and loved colleagues have left many of us dispirited and discouraged. We do have good things happening too. A considerable achievement of the Cambridge bargaining unit has been the establishment of the Nurse's Development Fund, the pooling of unused tuition reimbursement funds from which we award scholarships to our members, their families and CHA employees going into nursing. We also have a maintained a strong clinical ladder program to recognize excellence in clinical practice. In June we held a dinner to honor the scholarship recipients and celebrate the achievements of our clinical ladder nurses. A grant from Region 5 made this possible and we are grateful for the support of MNA.

Carney Hospital submitted by Elaine Graves.

We've been in negotiations since November. We have had about five negotiation sessions with really no progress. We are working with the Norwood and St. E's negotiating teams as a group on PTO which the hospital wants badly so we are making writing it in our favor along with pension. All three hospitals met in May. We have made some progress on a few no money issues and still have a way to go before our contract is done.

Norwood Hospital submitted by Joan Ballantyne. Our last session was a joint one with St. Elizabeth's and Carney. We presented management with a PTO proposal which was to be in exchange for resolution of our pension issue. The following joint session was cancelled by management. Staffing issues continue to be a problem especially on the weekends with multiple unsafe staffing forms being submitted. Lastly, we will hold a town meeting regarding our sale on 6/16 at a local school. We are hoping for a good turnout from our bargaining unit and that they come prepared with many questions and comments regarding the planned sale of our system. Watch this space as they say.

St. Elizabeth's Medical Center submitted by Betsy Prescott. Since our last report, SEMC has

lost another CNO. We are now working with our interim CNO, a manager from one of our units appointed to cover by corporate. A national search is underway. We have lost 3 more unit managers. A new model of PCD's and unit managers is being considered. Staff nurses have been approached for these new roles. We are in negotiations and are working closely with Norwood and Carney on a mutually agreed upon benefit package, specifically addressing our pension concerns. We are having joint negotiation sessions with all 3 committees. We are in the window of a JACHO review. Management is trying to adopt a written script for hourly rounding which takes approximately10 minutes per patient. We hosted a CEU dinner program on 'Lateral Violence' on June 14; it was posted on the Region 5 website and was open to all Region 5 members.

Dana Farber Cancer Institute. No report submitted.

Dialysis Clinic, Inc. submitted by Peter Costello. All is quiet. We recently issued a request for proposals to the members in preparation for upcoming contract negotiations. Contract expires September 30.

Faulkner Hospital submitted by Ginny Ryan. Faulkner We ratified our 2 year contract in March and are concentrating on increasing member-involvement within the bargaining unit. In Sept. the exec. comm. will be hosting a "Nurse Appreciation Day" to honor our bargaining unit and to strengthen our Solidarity. Elections will be held next year.

Harvard Vanguard Medical Associates no chair/designee, no report submitted.

Kindred Health Care—Braintree no chair/ designee, no report submitted.

Medford School Nurses submitted by Lucinda Riggin-Jay. In June our 11-member unit voted to reject an offered change in our current contract. We voted not to defer raises. Our current contract already reflects raise deferrals for this past year. We look forward to exercising our

solidarity this summer, thanks to Karen Roberto's efforts at the MNA.

Newton Public Health. No report submitted.

Newton-Wellesley Hospital submitted by Laurie Andersen. We are working hard to fight the increase in nurse-patient ratios on the medical-surgical floors. We have gone from 4 patients to 5 and the charge nurses are now taking patients when they weren't before. All in the name of money and budget issues. We are encouraging the hospital to continue the new grad program even though we are not posting many RN jobs at the moment. We hold a monthly staffing committee meeting to discuss unsafe staffing forms with the management team, and recently have had some good effect from the med surg areas writing up their nurse/ patient ratio issues, and the psych area verbalizing their discontent with the lack of professional staff numbers. After a three-year contract, we are now approaching a fall of contract negotiations with one of our main issues being nurse-patient ratios among other essential issues including retirement, bereavement and health insurance. We have surveyed the bargaining unit and will open hours in the cafeteria at NWH to discuss issues, to pass in surveys and to get in touch with the bargaining unit in general.

Quincy Medical Center submitted by Joanne Hart. After our last negotiating session iwith a federal mediator, the hospital declared impasse. The hospital wants financial give backs and the nurses want clarification of current staffing language and an end date to the financial concessions. As a result, the hospital's last and final offer was implemented. This included a 3% across the board pay cut for all RNs and a 5% increase in health insurance. We filed an unfair labor charge. An informational picket was held in April. We have formed an action committee and are in the process of meeting with city council members. If the labor board does not rule in our favor, we have no doubt the nurses will take a strong stand and do whatever is necessary to ensure



Dorchester Day Parade was held 6/6/10. It was a huge success with members and their families marching with the MNA mobile unit. Hope you join us next year. Photo taken by Sandy Eaton.

Staffing & Healthcare... a local bargaining unit perspective

I would like to share what has been happening at Tufts Medical Center. Ellen Zane is our CEO. When she first came, there was a sense of hope that she would be able to help the Medical Center, which had been struggling financially. However, we have come to know her as someone who is into big business, marketing and painting a picture of the hospital that simply does not exist. It is evident that her primary focus is about money, not patient care. Her lack of acknowledgement for the nurses' commitment to Tufts patients is evident in everything she does. With the hiring of a new CNO and new CFO, there is currently an underlying disregard and disrespect for the nurses who have been the foundation of the hospital. Nurses have been the crucial component of our patients feeling cared for and treated like family at Tufts Medical Center. With the new CFO we now hear how expensive senior staff?" are commonplace.

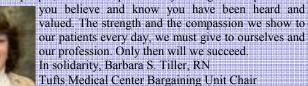
Recently nurses were invited to participate in a design team to redevelop our care delivery model. Allegedly this was so that we could become more efficient, make Tufts a great place to work and ultimately save \$34 a day. Some nurses were hopeful and participated, only to find out that this was a smoke screen. They were not interested in the nurses' input for any other reason than to be able to say at the end, that we as nurses (our union) had participated in developing the new plan that was unfolding and approved of cutting nursing staff and replacing them with unlicensed personnel.

The staffing is slowly decreasing because every person that leaves is not being replaced. Nurse patient ratios have increased and all shifts have to deal with time intensive discharges and admissions or transfers. The unlicensed personnel are slow in coming and often untrained, needing lots of coaching from staff who do not have time. There is also a lack of retention as they quickly find themselves overwhelmed and disenchanted. The new staffing grids have little give. They state the number of patients with the corresponding number of techs and nurses allowed, without any consideration for the acuity of the patients. When there isn't a tech (which is often), then the staff goes without.

Nurses find themselves struggling to keep up, not getting breaks unless they hand off their patient load to another nurse who already has the same overwhelming assignment. RNs are consistently finding lack of time to recognize issues until they become big problems for patients. ICUs are now seeing doubling or tripling of patients, regardless of the acuity. The hospital administration treats its facility like an assembly line, not a care facility and this hurts patients. They are saving \$34 a day at the expense of our patients and staff.

As bad as this seems, there is an unintended consequence. Nurses have realized that without a union, we would be at their complete mercy. They have become better informed and involved by reading the newsletters and regular flyers, stopping by open meetings and coffee hours, heading to job actions at other facilities as well as participating in a large informational picket at Tufts held in February. They have leafleted about violations that occurred and of the ratio changes so that patients are aware of the decreased staffing. They have been to the State House and talked to their legislators regarding safe staffing and violence legislation. We held consistent sub-group meetings to understand what the issues are in different areas and to strategize how to push back. We will be holding a vote for a local dues fund for future job action capability in June as we build solidarity for negotiations in the fall. Reaching out to other bargaining units in the state and participating in some of the national events has made nurses realize that we are not alone in this fight and that together we will be stronger. They have begun to learn that to get involved is to be empowered and they are the ones that must stand up and fight for their patients, their practice and themselves.

I challenge every nurse: what can you do to help make your workplace better? Is there an hour you can give on a weekly or monthly basis to make us stronger in our fight? You will find, once you participate you will be rewarded with the results of that gesture. You will meet new people, and feel empowered by having stood up for what





Radius—Boston submitted by Mina Warrick. We have a new VP for Nursing Services. Received printed contracts and distributed them to our members.

Radius—Quincy. No report submitted.

Somerville Hospital submitted by Diane Roberto. There are many important changes coming to Somerville Hospital. Our medical building is undergoing major renovations for new primary care offices for the staff of Somerville Internal Medicine Associates and Somerville Primary Care. We are also expanding our Eve Care Center. New doctors are joining our team from emergency medicine, internal medicine, gastroeneterology, podiatry, urology and more! Over the past three months, the ED's Press Ganey patient satisfaction scores ranked it first in Massachusetts and among the top 10 EDs nationally. New rapid assessment protocols ensure that patients are seen by a nurse within two minutes of arrival and by a doctor in an average of 20 minutes, making Somerville one of the fastest emergency departments in the country. In addition, the Somerville Hospital MNA Executive and Negotiation Committees have currently entered into negotiations for their newest contract.

Tufts Medical Center submitted by Barbara Tiller. We celebrated nurses week with a pizza luncheon with good attendance. RNs were encouraged to wear black and boycott nurses week events. After the luncheon RNs leafleted about OSHA violations committed at the hospital which resulted in a \$5.000 fine imposed for lack of proper documentation on reporting of employee injuries. We continue to meet with management regarding poor staffing and unsafe situations that have come from the new "Model of Care." This has included some tripling of ICU patients. In June we have a vote planned for a local job action fund to prepare for future action activities and to send the hospital a strong message as we head into negotiations this fall.

Whidden Memorial Hospital. No report submitted.

Unit 7 Representative submitted by Steve Robins. We continue to fight against the state's plan for the closure of most of our DDS facilities. Unit 7 will continue to work with COFAR on behalf of the DDS clients. During the Senate budget process, with a lot of work, phone calls, and visits to legislators, we did get feasibility study language for the DDS facilities and also the state-operated group home line item was restored. Next these items will move onto the

Conference Committee, where we need a favorable report in order to keep these items. The Conference Committee usually presents its report by the third week of June. By this newsletter publication date, we are hoping to have received a favorable report! Unit 7, which is the State Health Care Professionals, is currently without a contract. We broke off negotiations a while ago to protect existing language, as the State prepared for closures and lay-offs to reduce expenses. We correctly read the situations, as the State failed to fund the contracts that it had with the other Unions. Other unions also ended up with 'Furlough Days' (unpaid work), while Unit 7 would not agree to a furlough program without seeing that it would protect our members' positions. The State could not show that our sacrifice would do anything beyond hand money back to them. We are also happy to report that we had a large number of Unit 7 members from within Region 5 attend and participate in the NNU's 1st Staff Nurse Assembly in Washington DC in May. Unit 7 members talked about meeting nurses from across the nation and coming to the realization that we are faced with the same struggles and are working on the same issues. Visit the MNA website to see video and photos on the event and look for your fellow Unit 7 members!

Save the Dates

For more information on any of these events, contact the Region 5 office.

Future Council Meetings:

Wednesday, July 21, 2010 @ 6PM Wednesday, September 22, 2010 @ 6PM

MNF Golf Tournament

LeBaron Hills Country Club, Lakeville, MA Monday, July 19, 2010 @ 8AM

Susan G. Komen **3-Day for the Cure**

Join us as medical crew or medical day volunteer July 23-25, 2010

Summer MNA Labor **School hosted by Region 5:**

Mediation De-Mystified with Guest Speaker Josh Flax MNA Headquarters, Turnpike Street, Canton, MA Thursday, August 19, 2010, 5PM-7:30PM

Canton Block Party

Visit our informational booth Saturday, September 25, 2010

MNA REGIONAL COUNCIL 5 **ENCOURAGES MEMBERS** TO VOLUNTEER JULY 23-25, 2010 • BOSTON Get Ready for Greatness 4 Join the Tean

MNA Convention

Worcester DCU Center (see page 1 for reimbursement info for R5 members) October 13-15, 2010

Fall MNA Labor School hosted by Region 5:

Track 2: Role of the Floor Rep., Grievances & Arbitration MNA Headquarters, 340 Turnpike Street, Canton, MA Mondays 9/13, 9/27, 10/4, 10/18, 10AM-12PM or 5:30PM-7:30PM

Track 3: Collective Bargaining

MNA Headquarters, 340 Turnpike Street, Canton, MA Mondays 11/8, 11/22, 12/6, 12/20, 10AM-12PM or 5:30PM-7:30PM

Fall CE Hosted by Region 5:

De-escalation Techniques: Protecting Nurses and Patients MNA Headquarters, 340 Turnpike Street, Canton, MA Tuesday, October 5, 2010, 6PM-9PM

Your Best Defense: Lowering Your Legal Risks MNA Headquarters, 340 Turnpike Street, Canton, MA Thursday, November 4, 2010, 6PM-9PM

Workplace Violence Prevention Lombardo's, 6 Billings Street, Randolph, MA Tuesday, November 30, 2010, 8:30AM-4PM

Chemical Sensitivity: Scents may trigger responses in those with chemical sensitivities. Men and women are requested to avoid wearing scented personal BANK

The Greater Boston Please bring non-perisnable neings, mach attend council meetings and CE programs hosted by MNA Region 5.



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