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ADVOCATE

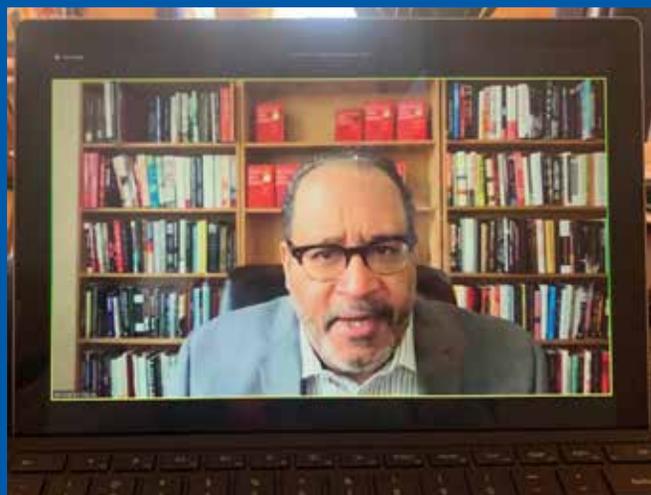


MNA Massachusetts Nurses Association

EXAMINING THE IMPACT OF

RACISM & SOCIAL INJUSTICE

IN NURSING PRACTICE & HEALTHCARE



MNA's Webinar a Resounding Success

page 6

December 2020



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On the web: massnurses.org



President's Column



Katie Murphy

November 2020 finds us in a time of transition, both nationally and at the MNA. At another time, we would have recently celebrated our organization's successes and planned for our future goals at our annual convention, which is typically held in October of each year. We also would be wishing some elected MNA leaders a wistful farewell while welcoming others to our incoming team.

But a global pandemic set us on a different course.

Over the past many months, we have renewed our advocacy on so many levels. We continue to fight for strong contracts that include staffing levels that will make our workplaces and our patients safer. We have communicated our expertise and knowledge about patient care and bedside nursing during COVID-19 to state officials, including a weekly letter to Governor Baker alerting him to issues that must be addressed statewide. In fact, our team of MNA members and staff have

worked tirelessly to keep Massachusetts citizens safe during this global pandemic. As the MNA's newly elected president, I look forward to being on the front lines of these fights with you. I will stand by your side as we continue our work at the bedside, at the table, on Beacon Hill, and beyond.

This edition of the *MassNurse* includes many articles that will prove helpful to both your day-to-day work and your union life. There is a story about our recently updated reporting forms for mandatory overtime, the ICU law, and unsafe staffing (pg. 6), and there is also a story about our brand-new workplace violence reporting form (pg. 4). All these forms are available online at massnurses.org and can be accessed from the homepage. In addition, they can be submitted virtually, or you can download and print a paper version. Please take a moment to locate these forms online, and please always be prepared to use them. Doing so will help to protect your patients, your practice, and your license.

The new workplace violence reporting form is especially important right now. As stress increases in our communities

due to the troubles and trauma brought on by COVID-19, data is showing an uptick in violence in many settings — including healthcare facilities.

Helpful to any bargaining units that are about to return to the table is the labor education article located on pgs. 7-9. This piece reviews some of our best-in-class and/or most unique contract language and showcases why that language is worthy of inclusion in other contracts. And to any of you who are already at the table with your proposals all submitted, keep this important article in mind for next time. By then, we expect we will have added more examples of best-in-class language to the list!

I hope you enjoy this edition of *MassNurse*, and please know that I want to hear from you regarding issues or topics that we need to address going forward. We have our work cut out for us, as we always do. But MNA nurses are the strongest and most effective advocates for patients and I have the deepest respect for the work that you all do, every day, in every setting.

Be safe, and all my best. ■



MNA's Annual Labor Summit

Save the Date: Thursday, March 18, 2021

Because the MNA expects we will still be grappling with the COVID-19 pandemic and all of its social distancing requirements, this event will be an online event (likely via Zoom or a similar webinar platform). Please watch our website, Facebook page, and your email for details; they will be coming soon.

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At the Table

Leominster Nurses Ratify New Contract

The nurses at the Leominster Campus of UMass Memorial HealthAlliance – Clinton Hospital ratified a new contract agreement in late October. The agreement — which came after nearly 15 months of contract talks and a long hiatus due to COVID-19 — includes language that focuses on maintaining patient safety standards, as well as language that positions nurses and hospital management to build a more collaborative relationship over the coming months.

Highlights of the tentative agreement include:

- Maintenance of nurses' patient assignment standards
- The creation of a new staffing committee that will be made up equally of MNA members and hospital management team members

- Improvements to the workplace violence prevention language
- Fair wage increases that total 6.5 percent over the length of the contract

The four-year agreement, which includes one retroactive year, runs from July 22, 2019 to July 21, 2023.

“Despite the many challenges we encountered in reaching this settlement, we are confident that this agreement will support the needs of everyone involved, especially our patients,” said Natalie M. Pereira, a Leominster Hospital RN and chairperson of the MNA bargaining unit.

Tobey RNs Reach Tentative Agreement

After 15 months of negotiations, the MNA nurses at Tobey Hospital in Wareham reached a tentative contract agreement with management on Nov. 4. Highlights of the three-year agreement include:

In year one, a 2% across-the-board increase added to all steps, and a new 2% step added to the top of the scale. In year two, a 2% across-the-board increase added to all steps. And in year three, a 2% across-the-board increase added to all steps.

The nurses also won improvements to weekend, night, and on-call differentials; improvements to life insurance premiums; and improvements to the grievance and arbitration process. In addition, they successfully fought off a proposal from management that would have made overtime pay inaccessible until nurses worked a full hour beyond the end of their shift.

Who's at the Table?

- Anna Jaques (Beth Israel Lahey Health system)
- Baystate Home Health (Baystate system)
- Baystate Noble (Baystate system)
- Beth Israel Deaconess Hospital-Plymouth (Beth Israel Lahey Health system)
- Boston VNA Healthcare Professionals
- Brockton Hospital
- Brockton VNA
- Cambridge Health Alliance
- Cape Cod Hospital (Cape Cod Healthcare system)
- Cape Cod VNA East & West (Cape Cod Healthcare system)
- Mercy Medical Center (Trinity Health of New England system)
- Providence Behavioral Health Hospital (Trinity Health of New England system)
- Saint Vincent Hospital (Tenet system)
- St. Luke's Hospital (Southcoast system)
- Unit 7

★ Massachusetts Nurses Association 2020 General Election Results ★

President, Labor:
Katie Murphy

Secretary, Labor:
Trish Powers

Director, Labor:
Region One: Donna Stern
Region Two: Catherine Mysliwicz

Region Three: Karen Duffy
Region Four: Elizabeth Mulholland
Region Five: Ellen MacInnis

Director At-Large, General:
Ellen Farley
James McCarthy
Susan Wright-Thomas

Director At-Large, Labor:
Joan Ballantyne
Emma Dragon
Connie Gassett
Mary Havlicek Cornacchia

Labor Program Member who is a non-RN Health Care Professional:
Gloria Bardsley

MNA Develops and Launches Workplace Violence Reporting Form

The MNA's Workplace Violence Task Force developed and recently released its "Workplace Violence Reporting Form." This form is available for both download and online filing at forms.massnurses.org/forms/workplace-violence-reporting-form. The intent of this form is to help those seeking assistance after an assault and to collect data to provide evidence on the frequency and severity of workplace violence.

The Workplace Violence Reporting Form is a formal, written report that gives members the ability to provide the MNA notification of workplace violence incidents and to have follow up with someone regarding the incident if they so choose. Forms submitted will be protected on the MNA's secure website and faxed forms will be secured in locked

files to maintain the confidentiality of submissions, subject to any lawful order compelling release of the information. Data (absent personal identifiers) provided on the forms will be reviewed to identify and analyze trends which can lead to safer practice recommendations. This information will also be an invaluable resource when lobbying for workplace violence legislation, as it will provide documented vs. anecdotal evidence of workplace violence. If you have additional questions, please call the MNA's Health & Safety Division at 781-821-4625.

A reportable violent incident is any threatening remark or overt act of physical violence against a person(s) or property. Do not include a patient's name or any health information that may compromise a patient's right to privacy.



Massachusetts Nurses Association • 340 Turnpike St. • Canton, MA • 02021 • Tel: 781-821-4625 • Fax: 781-821-4445

MNA Workplace Violence Reporting Form

A reportable violent incident is any threatening remark or overt act of physical violence against a person(s) or property. Do not include a patient's name or any health information that may compromise a patient's right to privacy.

1. Member name: _____
2. Facility name: _____
3. Date & time of incident: _____ Incident report filed with hospital: yes no
4. Specific location of incident (ex.: hallway, pt. room, garage, etc.): _____
5. Type of unit (ex.: emergency room, ICU, med-surg, etc.): _____
6. Violence directed toward: patient staff visitor other
Assailant: patient staff visitor other
Assailant: unarmed armed specify weapon: _____
Assailant: male female
7. Predisposing factors (check all that apply): short staffing drug/alcohol use dissatisfied with care/waiting time
 grief reaction prior history of violence gang related other (describe): _____
8. Description of incident (check all that apply): physical abuse verbal abuse sexual abuse other
Describe: _____

9. Injuries: no yes Describe: _____

10. Were there witnesses? yes no
11. Were you able to get help and get to a safe area? yes no
12. Were you relieved of your assignment? yes no
13. Notifications: supervisor yes no hospital security yes no police yes no
local MNA committee member or MNA staff yes no
14. Disposition of assailant: stayed on premises escorted from premises left on own other
Describe: _____

15. What measures do you think could be taken to prevent further incidents of this type? _____

16. Would you like someone from your local MNA committee or MNA staff to contact you? yes no
 MNA committee MNA staff
If yes, please provide a non-work email and/or phone number where you can be reached: _____

Downloaded PDF forms, fax to MNA, Attn: Division of Health & Safety at 781-821-4445.

The MNA is committed to decreasing incidents of workplace violence for the health and safety of all healthcare workers and believes that employers have a responsibility to provide safe and healthful working conditions. This includes preventing and addressing conditions that lead to violence and abuse by implementing effective security and administrative work.

NSO Liability Insurance Covers Nurses Who Are Victims of Workplace Violence

The current healthcare environment has left nurses and other healthcare professionals (HCPs) at an increased risk for both physical and emotional harm. The nurse is often the target of a patient or family member who is left frustrated and disillusioned by this system when not well cared for.

The issue of workplace violence and assaults against nurses and HCPs is a major concern. In fact, a recent survey of the state's nurses found that nearly 60% of nurses in the commonwealth have experienced some form of workplace violence in the past two years, with some reporting multiple assaults.

Over the years, many nurses and HCPs have told the MNA that they wished they had purchased liability coverage prior to an incident in the workplace that led to a surprise discipline or liability problem. Members should be aware that there is now liability coverage available to them that can help should they be victims of a workplace assault.

Workers' compensation is available for nurses who are injured on the job. This insurance is provided by the employer and it will cover medical expenses and a portion of lost time expenses associated with the injury after an initial period of time out of work.

Workers' compensation can be a very difficult process for nurses to navigate. Therefore, we often refer members who are having problems with their claim to a workers' compensation attorney. The MNA advises members to report an injury immediately to their employer and to document the incident with date, time, and witnesses to the injury or harmful event. This includes keeping and maintaining ongoing medical records as it relates to a claim made on behalf of the member. Having the correct documentation will help to expedite the process.

Too many nurses and HCPs think if they practice as they should they will be fine, but that is most definitely not the case. Anyone can get dragged into a lawsuit or unfairly accused by a supervisor, family member, or co-worker. Also, members are often told they will be covered by their employer, but that is not true in the vast majority of cases. Nurses certainly should not rely on that false promise. What MNA members should do is secure additional, relevant insurance well ahead of a workplace violence injury. NSO (Nurses Service Organization) is the MNA's preferred provider for this type of insurance.

The assault coverage benefit works as follows:

- The NSO coverage of assault claims is in addition to the standard professional liability coverage, which includes workplace violence counseling. The coverage will reimburse a healthcare provider for medical expenses incurred or for damage to a healthcare provider's property should a healthcare provider be attacked and injured at work or when commuting to or from the healthcare provider's workplace. The assault must be a willful attempt to inflict harm by another (a person, not an animal). Workplace violence expands the coverage to include emotional counseling as a result of the assault. The limit for assault coverage for an individual is \$25,000 aggregate. This policy won't reimburse you for goods lost or stolen during an assault.
- The assault coverage is excess over other available insurance such as workers' compensation, if that is approved.

The MNA believes that if a major liability insurance provider starts paying out claims, they will have an incentive to pressure employers to make their workplaces safe for employees.

MNA strongly encourages all nurses to:

1. Obtain liability insurance; it runs about \$100 per year for most nurses
2. Contact the MNA if you are assaulted
3. File a claim with NSO or your own carrier if different

The MNA also believes that all members should carry some form of liability insurance, notably one that has "tail insurance," or insurance that covers you after you leave the employer or retire. This protects you from incidents that happened while you were working and insured, even if you're no longer insured.

For more information contact:

- Chris Pontus, RN, MS, COHN-S/CCM at 781-830-5754 or cpontus@mnarn.org
- Mary Crotty, JD, MBA, BSN at 781-830-5743 or mcrotty@mnarn.org
- <https://www.nso.com/malpractice-insurance/individual>

NSO offers a 10% discount for nurses who complete an online malpractice CE course:



Save 10% on the cost of your NSO professional liability insurance premium.

You can receive a 10% non-cumulative risk management credit on your individual professional liability premium for up to three years once you complete 6 contact hours in Focus on Malpractice Prevention.

<https://www.nso.com/malpractice-insurance/individual>

MNA's Webinar on "Examining the Impact of Racism and Social Injustice in Nursing Practice and Healthcare" a Resounding Success, but Still Only First Step in Long Journey

On November 18, at 11:15 a.m. hundreds of committed and concerned members, supporters, and activists joined what MNA president Katie Murphy described as the most important educational program that the MNA could offer: a half-day webinar aimed at building awareness of the systemic racism and resulting injustices that underpin, not just the healthcare profession, but our society overall — though she also poignantly added that “in the year 2020, we as a nation should be well past the need for such programs.”

The program, which featured nationally recognized keynote speaker Dr. Michael Eric Dyson as well as two panels of MNA members and leaders whose lives and careers have often been unfairly and unnecessarily defined by their skin color, drew an online crowd of over 250 attendees. At the end of the program, many of those attendees went on to call for additional programming in order to maintain the positive energy and momentum the webinar generated:

“I posted [about the webinar] on Facebook, and in the comments I added some of [Dr. Dyson’s] quotes. My peers, Black and Brown nurses, jumped on the thread tonight after work and they are going CRAZY asking for [a link to the recorded webinar]. It is great to see so many people interested. We cannot lose momentum. We are in Wisconsin, the themes addressed by your panelists are an exact copy of what we see here. We have a lot of work to do.”

“The presentation yesterday on racism and social injustice has left a powerful impression on me and I wish to extend a very grateful thank you to the organizers of the event. The keynote speaker, presenters, and each panelist brought profound depth of insight, enlightenment, truth, and emotion to the learning experience. I am hoping this presentation will be repeated on a regular basis or there will be another method for this information to be shared with other nurses.”

Samantha Joseph-Erksine, RN, MNA member, and co-chair of the MNA’s Diversity Committee, both echoed those sentiments and doubled down on the MNA’s commitment to take seriously its charge to lead the way in building the just and equitable society that all people deserve. “While this is the end of today’s educational offering,” said Joseph-Erksine at the end of the program, “it is just the first offering in what will be the MNA’s ongoing dialogs and activities related to anti-racism and social injustice. This is part of the MNA’s deeper commitment to being an agent of change in improving the lived experiences of our members and our communities. We encourage you to join us on this journey in learning how we can all work together to bring meaningful change to our communities and our places of work.”

For resources from and related to the webinar, including a full recording of the program, visit massnurses.org/social-injustice. ■

Thank you to all of our RN panelists who took part in the Nov. 18 webinar: Claudine Bruff-Lopes, Joe-Ann Fergus, Charlene Hollins, Candice Jones, Samantha Joseph-Erksine, Judith Laguerre, Sarah Maroney, Shannon Niles, and Victoria Pike.

MOT, ICU, and Unsafe Staffing Forms Updated in Order to Help Enforce Laws, Offer You Protections

Forms available on the MNA’s homepage at massnurses.org

The MNA has new forms available online to document incidents of mandatory overtime (MOT), violations of the ICU patient limit law, and unsatisfactory staffing. The goal of the newly updated forms is to gather and relay the important data contained within them as concisely and efficiently as possible to the agencies and parties that need them. For example, the MOT and ICU forms will be sent to the Massachusetts Department of Public Health (DPH) and Massachusetts Attorney General’s office (AG). This will allow the MNA to create a record of employer violations of these established laws, which may provide a basis for legal action by the DPH or the AG. These forms also provide notice to employers and the agencies that your completion of the form is protected under the Massachusetts Whistleblower Protection Act, so that we can avail ourselves of this law if necessary.

The purpose of the unsatisfactory staffing form is to document problems with staffing due to poor staffing, lack of support staff, and/or changes in patient acuity. These forms can then be used by your MNA union representative and union leadership at labor-management and/or staffing meetings to address issues related to staffing.

But perhaps of most importance is the use of these forms to protect yourself and your license. Documenting these violations of the law or reasonable staffing can provide you with some protection if there are issues that arise specific to patient care during the periods documented.

All forms can be submitted virtually or can be downloaded and printed out. Just visit massnurses.org; the forms are in the third section down on the homepage (underneath both the billboard and news areas). ■

The image shows two overlapping forms from the Massachusetts Nurses Association. The top form is titled "Documentation of Violation of MGL Chapter 111, Section 201 (re: ICU Staffing)". It includes sections for "BACKGROUND", "INSTRUCTIONS", "HOSPITAL DEMOGRAPHICS AND CONTACT INFORMATION", and "TYPE OF VIOLATION". The bottom form is titled "MANDATORY OVERTIME REPORTING FORM" and includes sections for "CONTACT INFORMATION", "INCIDENT REPORT", and "INCIDENT REPORT DETAILS". Both forms are designed for reporting violations of state laws related to nursing practice.

Sample Contract Language Worth Considering

by Joe Twarog, Associate Director of Labor Education



When bargaining units negotiate successor agreements, it provides the union with a chance to establish innovative and valuable contract language that is worthy of emulation. In addition to the standard contract clauses that should be in MNA all contracts — just cause, union orientation, paid release time for the negotiating team, a preamble, non-discrimination, union leave, and union access to name a few — there are a number of other subjects that are worthy of addressing and that, if settled and ratified, can make MNA contracts premier examples of our union power and solidarity.

Juneteenth as a Paid Holiday

Juneteenth, celebrated on June 19, is the oldest nationally celebrated commemoration of the ending of slavery in the United States. Dating back to 1865, it was on June 19 that the Union soldiers, led by Major General Gordon Granger, landed at Galveston, Texas with news that the war had ended and that the enslaved were now free. Note that this was two and a half years *after* President Lincoln’s Emancipation Proclamation. But due to lax enforcement of Lincoln’s Proclamation, Texas at the time was the most remote of the slave states and ignored the intent of the Proclamation. Therefore, the Proclamation had to be enforced by the Union army. Also known as America’s Second Independence Day, Emancipation Day, Juneteenth Independence Day, and Black Independence Day, Juneteenth honors enslaved people, African American heritage, and the many contributions that Black people have made to the United States.



In July of 2020, Gov. Charlie Baker signed a law designating Juneteenth as an official holiday in the state of Massachusetts, adding it to the list of holidays on which employees must be paid holiday pay and cannot be required to work.

Tanisha M. Sullivan, President of the Boston branch of the NAACP stated, “Commemorating Juneteenth is an important acknowledgement of the sacrifice of formerly enslaved Black people in this country, and a reminder of the ongoing racial justice work needed for the promise of freedom to be a reality for all of us.”

Juneteenth celebrations often include religious services, readings, inspirational speeches, games and contests, prayer services, picnics, rodeo events, baseball, singing, and, of course, feasting. Red food and drink are common as an homage to African narratives and West African traditions. Music was an important part of the culture of enslaved people, and it was always included in early celebrations of Juneteenth. Afro-jazz, blues, and worship music are a critical part of these festivities, with the hymn “Lift Every Voice and Sing” being of particular significance. It is a song written as a poem by James Weldon Johnson (1871–1938) in 1900 and set to music by his brother J. Rosamond Johnson. It voices a cry for liberation and the affirmation for African-American people, and is a prayer of thanksgiving for faithfulness and freedom, with imagery evoking the biblical Exodus from slavery to the freedom of the “Promised Land.” The Emancipation Proclamation is also commonly read as a part of Juneteenth celebrations.

It is important that this holiday is clearly recognized in MNA contracts.

Voting Day, Paid Time Off

Even as voting by mail is increasing, a contract clause that allows time off for workers to vote in person is important to pursue. Some MNA contracts already have such language allowing time off to vote. Examples include:



- An employee whose hours of work preclude him/her from voting in a town, city, state, or national election shall upon application be granted a voting leave with pay, not to exceed two (2) hours, for the sole purpose of voting in the election. -- **State Chapter of Health Care Professionals, Unit 7**
- A bargaining unit RN whose hours of work preclude her/him from voting in a town, city, state or national election shall, upon application, be granted a voting leave with pay, not to exceed two (2) hours, for the sole purpose of voting in the election. -- **UMass Medical School**

Time to Vote

“Time to Vote” is a nonpartisan, business-led initiative to help ensure employees across America do not have to choose between voting and earning a paycheck. Participation includes giving employees access to and information about early voting or vote-by-mail options, offering paid time off on Election Day or making it a day without meetings. Some 383 companies have joined Time to Vote, including:

Abercrombie & Fitch Co.	Gap, Inc. Google	Baseball Nike, Inc.
Bank of America	JPMorgan Chase & Co.	Patagonia
Best Buy	J Crew Group	Pepsi
Blue Apron	LEGO Systems Inc.	REI Co-op
Capital One	Levi Strauss & Co.	Timberland
Chobani	Major League	Zillow Group
Farmers Insurance		

Even Walmart, the largest private employer in the U.S. with 1.5 million workers, (and viciously anti-union) are provided three paid hours to vote during the day if their scheduled shift doesn't otherwise allow them to leave while polls are open. And outdoor equipment retailer Patagonia completely closed its headquarters, distribution center, and stores nationwide for the general elections in 2016 and 2018, and it will continue the practice in 2020. Employees are paid for these full days off.

So, if the business community is promoting ways for their workers to vote, organized labor and the MNA certainly should make proposals at the bargaining table also.

Strong Language on Health and Safety Equipment, Including PPE, Face Shields, etc.

In the current pandemic crisis, it is painfully clear that appropriate PPE be made available to all healthcare workers, without debates around possibly cleaning masks, scrubs, etc. While most MNA contracts include health and safety language, it is apparent that spelling out the need for safe equipment is critical. To underline the urgency of this matter, the union can propose the filing of such grievances at Step #3 followed by expedited arbitration. It serves no purpose other than intentional delay to go through the entire grievance process which tends to take many months. Below is a sample of current MNA health and safety clauses:

From Providence Hospital, Article XIV 14.01 Health & Safety

- The Providence Hospital acknowledges its responsibility to provide safe and clean building and grounds for its employees. Providence Hospital will adhere to all applicable state and federal laws.
- Exposure to communicable or contagious diseases: Recognizing the RN's risk of exposure to communi-

cable disease in the ordinary course of performing their duties, the Hospital agrees to provide educational and preventative measures to safeguard the health and welfare of all RNs.

Diversity/Racial & Social Justice Training

The union contract can incorporate racial and social justice training programs as added in-services. Such programs are vital in these days of increased racial tension. The parties to the contract could co-sponsor such trainings, while jointly researching and selecting an organization to conduct the training.

Leave of Absence for Miscarriages/Pregnancy Loss

Miscarriage or pregnancy loss is not uncommon, occurring in about 25% of pregnancies. And while an employee can attempt to take a leave of absence either through the FMLA, the ADA, the Pregnancy Discrimination Act, or the Massachusetts Paid Family Leave, it is best to have such a leave clearly spelled out in the contract in order to avoid management contesting the need for the leave. Also, recognizing that some women may choose to keep a pregnancy loss a private matter, this type of leave provides a more personal option.

Some companies already offer their employees such leave ...

Reddit, gives 8.5 paid weeks to employees who have pregnancy losses. It is available whether the employee or partner had a miscarriage, their surrogate did, or an adoption fell through. Someone who has an abortion also qualifies.

A dedicated policy makes all the difference, said Katelin Holloway, who leads people and culture at Reddit. She knows from experience, having suffered a miscarriage herself. Holloway believes a “pregnancy loss leave” signals to employees that Reddit supports them. They do not have to dip into paid time off or use sick days or bereavement leave. An employee needs to tell only one person: the human resources partner for the department. No doctor's note is required.

“We trust our people,” said Reddit's Holloway. “A fundamental part of being an employee here is that we believe in the integrity of our employees.”

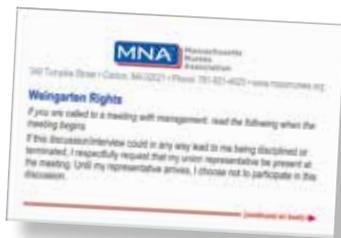
Microsoft says a miscarriage qualifies an employee for up to two weeks of bereavement leave. Adobe lets employees take time to grieve a pregnancy loss using the company's unlimited paid time off.

From a San Francisco Chronicle article, July 12, 2019

Weingarten Rights

Add into the collective bargaining agreement Weingarten Rights and other issues such as:

- The employer must notify the employee and floor representative of any investigatory interviews and possible disciplinary action; and,
- “Disciplinary announcement” – when the employer presents the employee discipline document *without asking any questions* – a Floor Rep may be present.



Domestic Violence Leave

Some contracts already have this type of language in their contracts, but support for victims could be advanced by adding it everywhere. An example of such contract language includes:

An employee may use up to a maximum of fifteen (15) paid days per calendar year for the purpose of arranging for the care of him/herself or his/her child(ren) or for attending to necessary legal proceedings or activities in instances where the employee or his/her child(ren) is a victim of domestic abuse at the hands of another. Said fifteen (15) paid days are in addition to any other paid leave which the employee may accrue under the provisions of this Agreement. Any documentation required by the employer to implement leave under this Section shall be kept strictly confidential, and any notations made on an employee status record shall be nonspecific. -- **State Chapter of Health Care Professionals, Unit 7**

Display of MNA Insignia or Flag

While such a proposal is not a mandatory subject of bargaining but rather a permissive one, simply making such a proposal sends a strong message to the employer. The proposal could state that the facility will display in its lobby some identification (supplied by the MNA) which establishes that workplace as being union represented. The proposal could also include that the facility fly the MNA flag in front of the institution. While these proposals may seem atypical of standard union proposals, they help to advance the union as a critical component of the facility and an equal partner in delivering quality patient care.



Union Seat on the Board of Directors

As with the previous suggested contract clause, this would be a permissive subject of bargaining. The union deserves a designated labor seat on the hospital's or VNA's board of directors as representative of the workers who are the ones who deliver patient care. The union therefore should have input on how the facility/agency is run. Such a proposal, however, will not be wildly embraced by management. The UAW (United Auto Workers) has had a seat on various auto maker's boards over the years. And it is not uncommon in Europe for unions to hold such seats.

Subcontracting

Strong language that prohibits the employer from subcontracting or contracting out bargaining unit work is essential to protect the integrity of the bargaining unit's work and to prevent layoffs or any reduction in hours.

A few years ago, the MNA lost an arbitration involving two RNs who were laid-off but whose work was taken over for one by a manager and for the other a tele-med company in Minnesota. As preposterous and illogical as it sounds, the arbitrator ruled that since there was no specific contract language that protected the bargaining unit work from being contracted out or diminished, the employer could do that.

Release Time for Union Work

A proposal for release time for union members to conduct union work as outlined in the following example:

An unpaid leave of absence for a period not to exceed one year shall be granted to nurses to accept a full-time position with the Association. If such leave does not exceed three calendar months, the nurse will be reinstated to her/his former bargaining unit position. Upon returning from such leave of more than three months, the nurse will be given the first opportunity to return to a position for which she/he is qualified and will be given the first opportunity to return to her/his former position when the position is open. No more than two bargaining unit members may be on an Association Leave at the same time, and no individual employee may take more than one Association Leave during the term of this Agreement. -- **St. Vincent Hospital/Worcester Medical Center**



Organized labor should always lead the way in improving workers' lives and well-being. These suggested contract concepts help to keep union members moving in that direction. ■

Highlights and Soundbites



Verbal Intervention™ Training

The MNA is excited to offer the Crisis Prevention Institute's (CPI) "Verbal Intervention™ Training," an integrative learning program designed to provide attendees with increased awareness and practical interventions to apply in a crisis or during escalating situations. The program will be offered using a

blended learning approach. Participants will complete an online module and then attend a live Zoom webinar with CPI-certified MNA educators. Detailed instructions for the training will be provided to all registrants.

Program: CPI Verbal Intervention™ Training

Date and Time: February 10, 2021, 9:30 a.m. to 12:30 p.m.

This program will award participants with a CPI Blue Card for Verbal Intervention™ Training, continuing education units are NOT available.

Time to Renew your 2020 Massachusetts Nursing License!

MNA reminds everyone to renew their nursing license for 2020 if you have not already done so. Early in the pandemic, Governor Baker extended the period to renew until the pandemic emergency ended. At this point, the MNA strongly encourages you to renew if you delayed doing so during this 2020 renewal year for any reason.

The online site for the Massachusetts Board of Registration in Nursing for license renewal or to print out your license is <https://www.mass.gov/nursing-licenses>.



Are you an Amazon.com shopper?

The Massachusetts Nurses Foundation is a registered charitable organization on Amazon.com.

AmazonSmile is a website operated by Amazon that lets you enjoy the same wide selection of products, low prices, and convenient shopping features as on Amazon.com. The difference is that when you shop on AmazonSmile (smile.

amazon.com), the AmazonSmile Foundation will donate 0.5% of the purchase price to the eligible charitable organization of your choice.

How do I select the MNF as a charitable organization to support when shopping on AmazonSmile?

On your first visit to AmazonSmile (smile.amazon.com), you need to select a charitable organization to receive donations from eligible purchases before you begin shopping. Please consider registering Massachusetts Nurses Foundation Inc. as your charitable organization. They will remember your selection, and then every eligible purchase you make at smile.amazon.com will result in a donation.



Your Wellbeing is Crucial During These Unprecedented Times

The current public health crisis is causing significant and sometimes overwhelming levels of stress for many of us. A useful framework for managing that ongoing stress is keeping in mind the key components of self-care: reflection (noticing your reactions and patterns of response); regulation (thinking about the choices you make in response to the stress); and relaxation (learning how to have moments of calm and balance). There are multiple resources available to our members on the "Support and Self-Help" tab of the MNA website.

One example: The MassSupport Network, a FEMA-funded counseling and support program. This program offers to MNA members and their families up to three free and confidential individual counseling sessions, along with a bridge to

other resources as needed. Also available are support groups focused on grief and loss (up to four sessions).

To access services call MassSupport at 888-215-4920, or e-mail MassSupport@riversideecc.org. ■



Massachusetts Nurses Association

Full member (75 percent) of applicable dues rate

Subject to verification, members who qualify for one of the following categories may elect to pay 75 percent of the annual dues:

1. Health professional labor program member—any healthcare professional, other than a registered nurse, who is represented for purposes of collective bargaining by MNA;
2. Limited hours labor program member—any labor program member who is represented for purposes of collective bargaining by MNA and who has 988 or fewer hours paid in the preceding calendar year.

It is the responsibility of any registered nurse and/or other healthcare professional to verify to the satisfaction of MNA on an annual basis his/her eligibility for the 75 percent dues category within any of the foregoing categories by April 1 of each year. Upon receipt of such verification of eligibility in the prior calendar year, the member shall receive the reduced dues rate effective the following July 1 through June 30.

Application for Minimum Hours Reduced Dues Category

Please print clearly and application needs to be received by **April 1** to the Membership Division of MNA

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

at the following MNA facility(s) of employment for the year of application (*list each MNA facility separately*):

1. _____
2. _____
3. _____

Signed _____

Date _____

Personal Email Address: _____

Eligibility for the Reduction is verified by MNA with each Employer Confirmation of receipt of this application will be emailed to your MNA email account within 72 hours of receipt.

MNA will set up your email to be forwarded to your home email.

Contact Division of Membership, 781-821-4625, if you need assistance accessing your member email.



Massachusetts Nurses Association • 340 Turnpike Street • Canton, MA 02021

Fax: 781-821-4445 • Email: membership@mnarn.org



CE

continuing education

The MNA Launches Its
**New FREE CE Platform
and Programs!**



In November, the MNA transitioned to a new FREE CE platform, the Hippotlian CE Platform, which is accessible at hippotlian.com/sign-in/MNA

With access to the new FREE Hippotlian CE Platform you can:

- Access the MNA's online learning programs
- Obtain MNA certificates of completion and contact hours
- Create an online portfolio of your CE certificates
- Develop a learning plan
- Reflect on the benefits of your learning to your practice

By now, all members should have received an email (at the email address they have on file with the MNA) that includes an invitation link to the Hippotlian CE Platform.

If you did not receive that email, if you can no longer find that email, or if you have general questions about the new platform, please use one of these helpful resources:

- Phone Support: 1-256-673-4867
- Email Support: help@hippotlian.com

Someone from Hippotlian will be available to assist you 24 hours a day, seven days a week.