

the Massachusetts

# nurse



THE NEWSLETTER OF THE MASSACHUSETTS NURSES ASSOCIATION

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ADVOCATE



**Milford Nurses  
Ratify First Contract!**

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November/December 2022



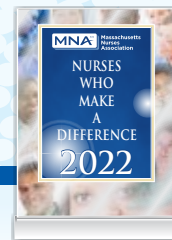
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# THE 2022 ANNUAL AWARDS RECIPIENTS



**Marlena Pellegrino**  
Recipient of the Judith Shindul-Rothschild Leadership Award



**Patricia Powers**  
Recipient of the Elaine Cooney Labor Relations Award



**Lynn Morgan-Risacher and Laurie Spheekas**  
Recipients of the Elaine Cooney Labor Relations Award



**Tiffany Vassell**  
Recipient of the MNA Image of a Professional Nurse Award



**Victoria Pike**  
Recipient of the MNA Human Needs Services Award



**The MNA Committee for the Brigham & Women's Nurses**  
Recipients of the MNA Solidarity Award



**Jennifer Tynan**  
Recipient of Elaine Cooney Labor Relations Award



**P. Karen Duffy**  
Recipient of the MNA Image of a Professional Nurse Award

Recipients not photographed include Nichola Douglas, Aracelis Delacruz, Briana Ferreira, and Sharon Daley.



# President's Column



Katie Murphy

*"Every moment is an organizing opportunity, every person a potential activist, every minute a chance to change the world."*

--Dolores Huerta, American labor leader and activist.

Nurses are busy people. Work obligations, family, school, community volunteering, committees, fitting in a workout. It seems like we have a never ending to-do list. We are involved and invested in uncountable aspects of our lives and the lives of others. I am constantly amazed at the work that all of you do.

As labor activist Dolores Huerta noted, with every conversation we have an opportunity. An opportunity to effect real change, whether large or small, in our field. And every one of us is an activist, as we are the experts. When we advocate for nurses, we are advocating for our patients. We are called upon right now to increase this activism for our profession and our patients.

If there is one thing that management fears, it is solidarity. The solidarity of standing with our colleagues as management works to divide us. We have spent the last three years on the front lines of a global pandemic, and we are still having the same issues with management regarding staffing and the resources we need to care for our patients.

In 2023, let us work on increasing our activism together. Let's attend bargaining unit meetings and encourage colleagues to do the same. Let's continue to attend the MNA's continuing education programs that are offered (for free!) both in person and online on the MNA website.

As we approach the New Year, I feel certain we will continue to confront the challenges we always have faced. As such, I will make a request to you. This year, do one union activity. Participate in a picket line; make a call to your legislator when asked to do so; attend a CE program; take part in a local union meeting. The most compelling advocacy I have seen is when nurses who have rarely spoken in the public square or taken part in union activities speak from the heart and describe dangerous working

conditions that place patients and caregivers in peril. When those nurses speak, people listen!

I also strongly urge every bargaining unit to send at least one member to the Labor Summit which will be held on March 15 and 16. Let's share ideas and experiences and then take that strength back to our workplaces. Let's use all the resources at our disposal and continue to make a difference every day.

In 2023, let us work together as MNA sisters and brothers to amplify our voices! ■

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## Support the MNF as you shop on Amazon!

On your first visit to AmazonSmile (smile.amazon.com), select 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 of 0.5% of the purchase price.

### the Massachusetts nurse ADVOCATE

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# The Dos and Don'ts of Delegation

In today's fragmented and dysfunctional so-called "healthcare system," growing responsibilities and demands on your time and attention as a nurse are endless. The industry's relentless pursuit of "lean" and "efficient" systems has resulted in understaffed and under-resourced systems where nurses have become the duct tape holding broken systems together.

In these broken systems, "help" in the form of unlicensed personnel, invaluable parts of a collaborative healthcare team, when deployed correctly, can make an unbearable day tenable. In an ideal world, well-trained unlicensed assistive colleagues make it possible for nurses to manage assignments, spreading the work out by handing off appropriate tasks.

There is however rarely anything "ideal" about the work environment of many healthcare providers in hospitals today. Years of understaffing of non-nurse healthcare professionals, nurses, and assistive personnel in the face of the increased acuity of patients admitted to the hospital have stressed all facets of the system leading to multiple system failures. In such an environment delegation becomes a survival tactic rather than a thoughtful intentional deployment of a complex clinical nursing skill. Under these conditions nurses rarely have the time or inclination to make a thorough assessment of the appropriateness of delegation. Delegation becomes a default setting built into the staffing grid.

Although delegation has become a default setting it is not without risks. Inappropriate delegation carries risks for harm to the patient and increased risk of harm in the form of moral distress and legal liability for the assistive personnel and nurse, as well as increased risk of harm in the form of financial liability for the healthcare facility. In order for delegation to be done safely it should be thoughtfully planned, taking into account the patient's status, environment, the tasks, and the skill set of the delegate, among other key factors.<sup>1</sup>

## Delegation Defined

Delegation is defined by the Massachusetts Board of Registration in Nursing in 244 CMR 10.0, Definitions and Severability as "the authorization by a licensed nurse to an unlicensed person to provide selected nursing activities."<sup>2</sup> In essence Delegation involves a Registered Nurse (delegator) distributing or assigning a portion of patient care to assistive unlicensed personnel (delegate).

## Unlicensed Personnel as Defined by the BORN

The BORN defines unlicensed persons, regardless of the title given by the employer, as "a qualified, responsible individual who has verifiable, documented, initial and ongoing competen-



cies. An unlicensed person (ULP) functions in a complementary or assistive role to the licensed nurse in providing direct patient care or carrying out common nursing activities and is employed by an entity other than the patient."<sup>2</sup> The RN must recognize that certification (such as a prehospital provider, i.e., paramedics) is not a license, therefore that person is an ULP, and some activities may be appropriate to be delegated to them, but under very specific criteria from the Nurse Practice Act.

## The Role of RN Delegation per the BORN

*Delegation must occur within the framework of the job description of the delegatee and organizational policies and procedures and must also be in compliance with 244 CMR 3.05(4) and (5).*

The BORN empowers Registered Nurses to use their clinical judgment in deciding the appropriateness of delegating tasks needed for the care of patients under their care. Your employer or manager *cannot delegate for you* and cannot mandate you to delegate. The Nurse Practice Act makes clear that the final decision to delegate is the responsibility of the delegating nurse and "Employer policy or contractual language cannot mandate the licensed nurse to delegate, nor mandate any components of the delegation process."<sup>3</sup>

## How to Decide

Within the scope of nursing practice, for an activity to be delegable, it must meet one or more of the following criteria. The task:

- 1). Can be performed according to an established sequence of steps leading to a predictable outcome
- 2). Does not require nursing assessment and judgment during implementation
- 3). Does not involve modification
- 4). May include collecting, reporting, and documentation of simple data

- 5). Can involve activities that meet or assist the patient in meeting basic human needs including, but not limited to, nutrition, hydration, mobility, comfort, elimination, socialization, rest, and hygiene

Before delegating to unlicensed personnel (ULP), it is important for the registered nurse to ask themselves specific questions. The following questions are adapted from the regulations on delegation and the responsibility of the Registered Nurse:

### Delegation checklist:

- Does the activity to be delegated require an RN level of care? (If no, you may be able to delegate)
- Does the activity require the ULP to assess, analyze, interpret, plan and/or evaluate patient data? (If no, you may be able to delegate)
- Did you assess the patient's nursing care needs to ensure the activity can be safely delegated? (If yes, you may be able to delegate)
- Does the employer have documentation of the ULP's competence to perform each activity identified in the ULP's job description? (Periodically validated; administratively communicated the ULP's job functions and competencies to the RN; who is responsible to delegate to the ULP? (If yes to all, you may be able to delegate)
- Does the ULP effectively collaborate, communicate, and cooperate with other HCP (Healthcare Personnel) and with the patient? (If yes, you may be able to delegate)

- Have you provided the ULP with a nursing plan of care that includes the desired effect of the activity? The sequence of steps to perform the activity? The adverse side effects to be reported to you? The need to report to the RN those activities that do not produce the desired effect. (If yes to all, you may be able to delegate)

Speedup and understaffing of registered nurses have become endemic in healthcare today. As a result, the push to do more with insufficient resources is driving the push for delegation as a default component in staffing assignments. It is imperative that nurses are familiar with and understand the regulations and policies that govern their practice so they can make sound clinical judgments and advocate for best practices to protect their patients, their colleagues, and their licenses.

If you have any questions, reach out to MNA nursing staff Joe-Ann Fergus at [jfergus@mnarn.org](mailto:jfergus@mnarn.org) or Mary Sue Howlett at [mhowlett@mnarn.org](mailto:mhowlett@mnarn.org) ■

- 1 Eveleigh, M. (2018). Safe delegation techniques for practice nurses. Nursing in Practice <https://www.nursinginpractice.com/professional/safe-delegation-techniques-for-practice-nurses>
- 2 MA Board of Registration in Nursing (2021), 244 CMR 10.0 Definitions and Severability, p. 54. <https://www.mass.gov/doc/244-cmr-10-definitions-and-severability/download>
- 3 MA Board of Registration in Nursing (2021), 244 CMR 3.05: Delegation and Supervision of Selected Nursing Activities by Licensed Nurses to Unlicensed Persons, pp 10-11. <https://www.mass.gov/doc/244-cmr-3-registered-nurse-and-licensed-practical-nurse/download>

## RN Accept

(Algorithm 1)

## or Reject An Assignment

Ask yourself all parts of the following questions:

Is the given assignment permitted by the Nurse Practice Act and Code of Ethics?

No to any → → **Reject Assignment**

Yes to all ↓

Are all aspects of assignments/procedures consistent with Standards of Practice, facility policy and supporting scientific rationale?

No to any → → **Reject Assignment**

Yes to all ↓

Do you perceive yourself competent in all areas required by the assignment?

No →

Any NO → **Articulate Practice Concerns**

Yes ↓

Do you have the resources to respond to complications and assure patient safety and quality of care?

No →

Is negotiation of ALL questions satisfactory?

Yes ↓

Is the staffing adequate and patient assignment reasonable?

No →

No

Yes

Yes ↓

Would a reasonable and prudent nurse accept this assignment under these circumstances?

No →

**Re-negotiate assignment**

**Accept assignment**

Yes ↓

Do you have the stamina to perform safe patient care and not be fatigued due to mandatory overtime or long hours?

No →

If negotiation unsatisfactory...

Yes ↓

Are you prepared to accept the potential risks and consequences associated with this work assignment?

No →

**Reject Assignment**  
Notify supervisor.  
Prepare for consequences and document ALL events. Complete MNA objection form.

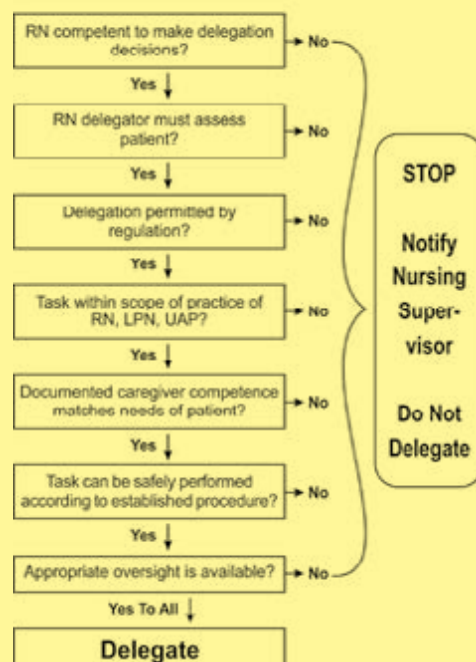
**Accept Assignment Under Protest**  
Prepare to accept potential risk of consequences. Document ALL events. Complete MNA objection form, notify supervisor.

If YES to all:

assume responsibility and accept assignment

## RN Delegation of Nurse Activities

(i.e. Tasks & Procedures) to RN, LPN or Unlicensed Assistive Personnel (Algorithm 2)





# Milford Regional Medical Center Nurses Ratify First-Ever MNA Contract!

The more than 500 registered nurses of Milford Regional Medical Center voted overwhelmingly on November 16 to ratify their first collective bargaining agreement after unionizing in 2021 and working together to secure improvements to patient care, working conditions, wages, and benefits.

“Our MNA contract will immediately benefit nurses and patients and will make a positive impact in our community for years to come,” said Sara Burton, MP1 nurse at MRMC and Co-Chair of the MNA Bargaining Committee. “Milford Regional Medical Center nurses are amazing caregivers and have shown that working together gives us strength to overcome a global pandemic or any challenge thrown our way. This contract values our dedication to patient care and will help us provide the conditions to recruit and retain the nurses we need.”

“Through our unionization and during first contract bargaining we benefited from the support we showed each other as colleagues and backing from our community,” said Christina Buxton, 5th FL nurse at MRMC and Secretary of the BMC MNA Bargaining Committee. “The result is a contract that Milford nurses were extremely proud to ratify and that will ultimately benefit everyone connected to our hospital.”

## Contract Agreement Highlights

- Every MNA nurse will receive an increase each year through the establishment of a wage step scale that guarantees nurses annual raises. There will be 4% between each step, with a nurse’s placement on the scale depending on skill year and retroactive pay to April 3, 2022.
- In addition to the scale and its associated annual raises, there will be a total of 8.5% across-the-board raises for every nurse over the next two years.
- The contract guarantees that charge nurses will be without a patient assignment or have a reduced patient assignment on in-patient units. Also, nurse educators are an additional resource for nurses during the 3 p.m. to 7 a.m. period.
  - Charge nurses provide a valuable role overseeing the assignment of patients among other staff on a unit, ensuring an efficient flow of patients in and out of the unit, communicating with physicians and others to ensure patients receive the care they need and most

importantly, providing an extra pair of hands when a patient crisis occurs. This role cannot properly be fulfilled when they are also expected to have a full patient assignment.

- Overtime will take effect for Milford nurses once they reach a point where they are working one hour past their shift, or more than 40 hours in a week.
- For health insurance purposes, nurses will be considered full-time at 32 hours per week.
- The agreement secures just cause, which is a well-established and universally recognized standard in labor law. This contract provision will provide nurses protection against arbitrary or unfair discipline. This helps ensure that nurses can advocate for patients and colleagues without fear of retaliation.



- The contract includes a grievance and arbitration process. These contract clauses — part of all MNA contracts — are a crucial tool for addressing and rectifying violations of the contract.

Long-standing issues negatively impacting Milford nurses and their patients were made worse by the COVID-19 pandemic and prompted nurses to seek to join the MNA in December 2020. Nurses voted overwhelmingly to join the MNA in February 2021. Soon after, Milford nurses elected their colleagues to represent them and began the process of negotiating a first union contract. ■

# Newton-Wellesley RNs Vote for New Contract that Invests in Caregivers to Improve Patient Care and Help Overcome COVID-19 Staffing Impacts

The registered nurses of Newton-Wellesley Hospital (NWH) voted overwhelmingly on September 30 to ratify a new contract with the hospital that makes critical investments in nurses and their ability to provide safe, high-quality patient care

“I am so proud of our nurses and what this agreement will do to help us recruit and retain the nurses we need to provide quality patient care at Newton-Wellesley Hospital,” said Julie Gordon, a NWH cardiac care nurse and MNA Bargaining Committee Co-Chair. “With these improvements for nurses and our patients, we look forward to restoring Newton-Wellesley Hospital as a trusted place of healing for our community.”

“This hard-won contract will help Newton-Wellesley Hospital nurses provide safe patient care and address staffing shortages that have contributed to nurses leaving our profession,” said Adam Castagno, a NWH operating room nurse and MNA Bargaining Committee Co-Chair. “By sticking together through months of negotiations, we convinced the hospital and Mass General Brigham to do the right thing and put more resources into frontline staff and patient care.”

## Contract Agreement Highlights:

- A 5% across-the-board wage increase in year one (retroactive to April 1, 2022) and a 5% across-the-board wage increase in year two.
- A new full 4.5% top step on the wage scale in year one (retroactive to April 1, 2022).
- A brand-new Nurse Practitioner/Nurse Midwife wage scale.
- Increases to the BA, MA, and doctoral degree differentials.
- Increases to the evening and night differentials, OR Resource and Laser Nurse pay, relief charge/relief pod coordinator pay, and on-call pay.
- Increases to the on-call pay categories, creation of a new on-call category for RNs in units requiring 96 or more hours of call in a six-week schedule.
- Adds Juneteenth as a new premium pay holiday
- Summer vacation bonus trial for the duration of the contract with an opportunity to extend if successful.

## Lawrence General RNs Ratify New Contract

The five hundred unionized nurses of Lawrence General Hospital overwhelmingly voted in favor of ratifying their new three-year contract in late August. The ratification came after 14 months of contract negotiations, 12 of which included a federal mediator.

### Contract Highlights

The new agreement includes numerous workplace enhancements and improvements, including:

#### Staffing Improvements

Charge nurses will not have a patient assignment in the ICU and on the medical/surgical and telemetry units during the day and evening shifts. In addition, charge nurses will have no more than three patients during the night shifts. This is expected to significantly improve patient care conditions at Lawrence General as it will allow charge nurses to coordinate the overall needs of patients and nurses, as well as the workflow on each individual floor/unit. It will also allow the charge nurses to assist colleagues with more complex cases, while also picking up patient assignments should staff become overburdened.

### Wages that Will Improve Nurse Recruitment and Retention

- For regular RNs, the elimination of a 20-year “tenure requirement” that previously stalled members on the wage scale at Step 19.
- Retroactive pay
- Over the three-year contract, regular nurses will see wage improvements of between 5% and 6.5% depending on their step placement. Per diem nurses will also see wage increases of up to 6.5%, with a marked improvement to the lower portion of that scale in the hopes that it will help recruit and retain newer nurses to the hospital.

### Health Insurance

- Access to the health insurance program for part-time nurses working at least 20 hours per week
- Expansion of some “Tier 1” services which will provide nurses with more healthcare options/choices
- Preservation of the plans existing costs and benefits through 2024

The newly ratified contract will run through September 30, 2024.



## Welcome, Brigham and Women's Harbor Medical South Shore Endoscopy RNs!

Congratulations to the Brigham and Women's Harbor Medical South Shore Endoscopy nurses on winning their union election with an 83% yes vote on Tuesday, September 27, 2022. Welcome to the Massachusetts Nurses Association (MNA). You won despite obstacles from management, sending a clear message that you will now be part of all the decisions that affect you, your patients, and the work you do. You should be proud of the work that you did to make this a reality. As the newest members of the MNA, you now join with over 23,000 nurses and Healthcare Professionals across Massachusetts including several thousand MNA RNs in the Massachusetts General Brigham healthcare system who have empowered themselves by having a voice in their workplaces.

## With Most Recent Contract Settlement, 1,300 Additional MNA Nurses in UMass System Win Substantial Wage Increases, Workplace Improvements, and More

In recent months, more than 2,770 nurses and healthcare professionals unionized with the Massachusetts Nurses Association and working in hospitals owned and operated by UMass Memorial Health Care ratified new contracts that include both historic wage increases and substantial workplace improvements.

Wage increases vary between 8% and 19.5%, depending on the facility and the length of the contract.

“Our UMass nurses and healthcare professionals have been the backbone of the Worcester-area hospitals since the pandemic started in 2020. But these same professionals have also been overburdened and have often burned out,” said Katie Murphy, RN and MNA president. “Too many patients, too few resources, and insufficient compensation have forced them to leave the bedside. But with overdue improvements like those seen in these UMass contracts, we expect that nurses will return to and stay at the bedside — which is exactly what our local communities need.”

In total, MNA nurses and healthcare professionals at four local UMass hospitals settled contracts this past quarter. They include:

- UMass Memorial, which ratified a three-year contract on June 29, 2022
- Marlborough Hospital, which ratified a two-year contract on July 28, 2022
- Clinton Hospital, which ratified a two-year contract on September 7, 2022

- UMass University, which ratified a three-year contract on September 29, 2022

Especially noteworthy are the wage increases and wage scales for the 2,500 nurses at Worcester's UMass University and UMass Memorial hospitals. These contracts, which are now in synch, already had a guaranteed pension; full-time health insurance for nurses who work more than 20 hours per week; and patient limits in most hospital areas. The new wage scale will bring nurses with more than 17 years of experience to nearly \$82 per hour by 2024. Nurses with less than 17 years of experience will see a 33% wage increase over that same time.

UMass University and UMass Memorial have struggled to recruit and retain staff over the last few years, which has impacted the ability of the hospitals to live up to the patient limits outlined in the contract. With these new wage scales in place, there is hope that more nurses will come to and stay in Worcester to finally realize the safe patient limits provided in the contract.

### Contract Highlights for UMass Memorial (ratified on June 29, 2022)

The new contract, which covers 1,137 RNs and healthcare professionals at UMass' Memorial and Hahnemann campuses in Worcester, provides members with a 5% across-the-board wage increase in year one, a 5% overall increase in year two, and a 4% across-the-board increase in year three. In addition, all wages



## **WATCH! St. Vincent Hospital Nurses Deliver Petition to CEO about Unsafe Staffing, Elimination of IV Team**

On October 27, St. Vincent nurses spoke to the press and delivered a petition to the CEO over the hospital's decision to cut a specialized IV team as well as their decisions to degrade patient-care conditions throughout the Worcester facility. Visit [www.bit.ly/StVpetition](http://www.bit.ly/StVpetition).



are retroactive and the steps on the overall wage scale were made consistent throughout, resulting in 5% increases between all steps. The contract will also secure significant increases for per-diem nurses, who generally work on an “as-needed” basis but have played incredibly vital roles over the last two years. This contract is the second at a UMass facility to be updated to use gender-inclusive pronouns.

### **Contract Highlights for Marlborough Hospital** *(ratified on July 28, 2022)*

The 216 MNA members at Marlborough Hospital will receive, in addition to the standard step progression, a 4% across-the-board wage increase over the contract's two-year term. All wages are retroactive and the steps on the wage scale have been made consistent throughout, resulting in 4% increases between all steps. Depending on their location on the wage scale, pay increases for some members will be as high as 19.5% over the contract's span. The agreement also includes a new “Baylor Plan” option, which is an incentive plan that will pay a nurse who works 24 hours over a weekend as if they worked 30 hours. The goal of the plan is to help with the recruitment and retention of nurses for weekend shifts.

In addition to wage improvements, the new contract includes language that enhances the grievance process and the hospital's workplace violence prevention protocols.

### **Contract Highlights for Clinton Hospital** *(ratified on September 7, 2022)*

The 80 MNA members at Clinton Hospital negotiated across-the-board wage increases of 8% in their new two-year contract,

won a new step at the top of the scale, and successfully renegotiated the wage scale overall so that every step reflects a 4% increase. In addition, RNs who serve as charge nurses will now earn an additional \$2.50 per hour, and nurses temporarily assigned to higher-class work will earn \$5 more per hour.

### **Contract Highlights for UMass University Medical Center** *(ratified on September 29, 2022)*

The 1,339 MNA members at UMass University Medical Center successfully negotiated wage increases that, over the contract's three-year span, total a minimum of 14%. This increase consists of across-the-board increases (5% in year one, 5% in year two, and 4% in year three) and the standardizing of the wage scale so that there is an eventual 5% increase between all steps. Wages and benefits are retroactive to February 6, 2022. The contract also permanently recognizes a previously established “Baylor Plan,” which is an incentive plan that will pay a nurse who works 24 hours over a weekend as if they worked 30 hours. The goal of the program is to help with the recruitment and retention of nurses for weekend shifts.

The nurses also won improvements to vacations, paid personal leave, and weekend scheduling for those working in the float pool (i.e., the dedicated group nurses whose role is to step into short-staffed units and/or relieve other nurses during their meals, etc.).

# Newly Established “Massachusetts Nurses Honor Guard” is a Local Non-Profit Committed to Honoring and Remembering Recently Deceased Nurses

## Volunteer Nurses Needed for “Ann O’s Watch”

In 2021, the St Elizabeth’s Medical Center staff was devastated by the tragic loss of their friend and colleague Ann O’ Flaherty, RN. Ann was a nurse at St. Elizabeth’s for over 30 years. Since Ann dedicated her life to the nursing profession, St. Elizabeth’s honored her with “The Nightingale Tribute,” reading the poem “She/He Was There” by Duane Jaeger, RN, MSN.

The Nightingale Tribute was developed by the Kansas State Nurses Association in 2003 to be used to honor nurses at the end of their lives. The ceremony includes a short synopsis of the nurse’s career and a reading of the aforementioned poem. A white rose is placed on the casket and the ringing of a triangle signals a “final call to duty.” During these readings, a porcelain Nightingale lamp with a white candle is lit in the nurses’ honor. When the nurse does not respond to a third and final call to duty, they are relieved of their duties and asked to rest in peace. The candle is extinguished, and the lamp is presented to the family along with roses to signify the nurse’s devotion to their profession. The service takes about five minutes and can be tailored to fit the beliefs of the nurse being honored and/or their family.

This year, the first Massachusetts Nurses Honor Guard Chapter was developed in Ann O’ Flaherty’s memory: Ann O’s Watch.



Many thanks to Ann’s family for allowing the Guard the privilege to respect Ann’s memory in this way.

If you are interested in incorporating all or part of the Nightingale Tribute into a loved one’s services, or if you are interested in serving as a volunteer who delivers Nightingale Tributes, please contact [help@nursehonorguardma.com](mailto:help@nursehonorguardma.com). Donations are also gratefully accepted.

For more information please visit: [NURSEHONORGUARDMA.COM](http://NURSEHONORGUARDMA.COM) or email [help@nursehonorguardma.com](mailto:help@nursehonorguardma.com).

## Social Media posts too good not to share...

**I Support The Nurses of HealthAlliance**

**The MNA Nurses of Northeast Hospital Corporation**

**The MNA Nurses of Anna Jaques Hospital**

Betty was a right supervisor at AJH for decades. Sadly she passed away last year. She created a tradition of giving all staff a chocolate Christmas calendar for each child they have. Her friends want to see her heart of love and tradition carried on. They dropped these off to be given out in her memory. Coming to you the end of this week! ❤️



## Take Action to Help Those Healthcare Workers Without a Union Voice

Organizing is the lifeblood of the labor movement. Existing MNA members have our union as a vehicle to redress the injustices nurses and healthcare professionals have endured during the pandemic. Our non-union counterparts, however, do not have the same power and voice. They face moral injury without an advocate, and they are losing hope. We each have the power to bring this gift of the MNA to non-union healthcare workers and transform anger and anguish into hope and power.

Building our density and power by helping non-union RNs and HCPs organize builds power for all of us. People are on fire to join unions right now. The pandemic exposed and exacerbated the long-standing exploitation and “Walmartization” of the healthcare industry. That’s a big reason why, right now, folks are hungry for the union difference. That hunger is the worst fear of their bosses, and bad bosses should be terrified.

The bosses right now are trying to divide us: full-time vs. per diem; RN vs. healthcare professional; union vs. non-union. Union busters are always looking for lines of division that they can manipulate. If they can weaken the MNA, they can keep all the power for themselves. We fight this by organizing.

The MNA organizes nurses and healthcare professionals such as social workers, pharmacists, physical therapists, etc. Are you willing to take action to help organize these non-union healthcare workers?

The next time you are in a conversation with a non-union healthcare worker who is angry, tired, fired-up, and ready to go, ask them to take a picture of the QR code on this page. The code

will enable them to connect with us, and it will be their first step in building their union.

### Some Quick Organizing Dos and Don'ts

- Do listen to the person’s story.
- Don’t try to sell them on the union: they’re building something not buying something.
- Do find out what their issues are.
- Don’t try to solve the problem for them: that’s actually disempowering. They can solve their own problems by unionizing.
- Do talk to people you know and trust.
- Don’t talk to managers or so many people that managers will inevitably find out.



# The MNA<sup>SM</sup> to EUROPE & BEYOND Traveler 2023

in collaboration with



## HIGHLIGHTS OF TUSCANY AND ROME

May 27th to June 5th, 2023

Trip price is \$4229 per person, double occupancy if paying via check. Price will be reduced if the group size is over 25 passengers.



## GRAND TOUR OF PORTUGAL

Featuring the Douro River Valley and the Portuguese Riviera

September 8th to 18th, 2023

Trip price \$4729 per person, double occupancy if paying via check. Price will be reduced if the group size is over 30 passengers

**Tours above include:** air from Boston, departure taxes & fees, transfers, hotel, all tours and most meals. A fabulous value! Space fills fast on MNA tours. Click on the QR code to sign up to receive the trip details once they become available as well as periodic travel announcements. For questions, contact Carol Mallia at [cmallia@mnarn.org](mailto:cmallia@mnarn.org).



# Did you know that ...



**Direct caregivers need the necessary protections and equipment to further promote their own safety and the safety of their patients; more voices must be proactive.**

The MNA's committee's on **Health & Safety** and **Safe Patient Handling & Mobility** are here to help with all of your workplace and practice concerns. Reach them at **781-821-4625** and by asking for the Division of Nursing.

**MNA<sup>SM</sup>** Massachusetts Nurses Association



## MOT, ICU, and Unsafe Staffing Forms Available Online to Help Enforce Laws and Offer You Protections

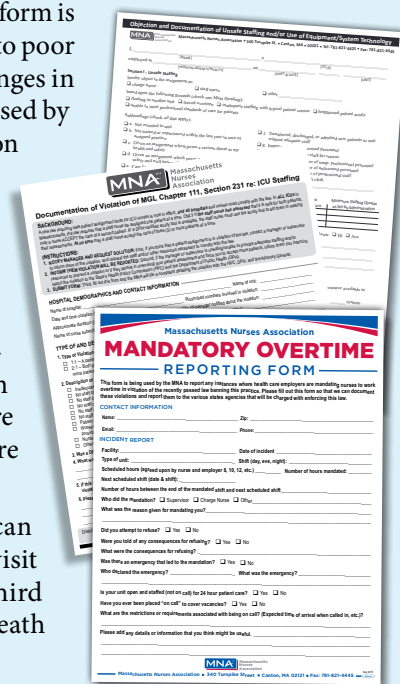
Forms available on the MNA's homepage at [massnurses.org](http://massnurses.org)

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](http://massnurses.org); the forms are in the third section down on the homepage (underneath both the billboard and news areas). ■



## What Can Be Done to Support Victims of Workplace Violence and Abuse?



The MNA is committed to decreasing incidents of workplace violence for the health and safety of all healthcare workers, believing 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 practices to protect the safety and health of all workers. If you or a peer are a victim of a workplace violence (WPV) we encourage you to:

- 1) Follow the steps outlined in the "Actions You Should Take if Assaulted at Work," available here:
- 2) Notify the MNA by completing a WPV Reporting Form, available here:



### Need additional assistance?

Contact the MNA's division of health and safety at 800-882-2056.

# Call for Nomination/Consent to Serve for the 2023 MNA General & NENA Delegate Elections

I am interested in active participation in:

## MNA General and NENA Delegate Election

- |   |   |
|---|---|
| <input type="checkbox"/> President, Labor*, 1 for 3 years                     | <input type="checkbox"/> Labor Program*, (1 for 3 years) [non-RN]                             |
| <input type="checkbox"/> Secretary, Labor*, 1 for 3 years                     | <input type="checkbox"/> At-Large Position in Regional Council<br>(3-year term; 2 per Region) |
| <input type="checkbox"/> Director, Labor*, (5 for three years) [1 per Region] | <input type="checkbox"/> Nominations Committee, (5 for 3 years) [1 per region]                |
| <input type="checkbox"/> Director At-Large, General*, (3 for 3 years)         | <input type="checkbox"/> Bylaws Committee, (5 for 3 years)                                    |
| <input type="checkbox"/> Director At-Large, Labor*, (4 for 3 years)           | <input type="checkbox"/> NENA Delegate, Labor (9 for 3 years term)                            |

\*"General" means an MNA member in good standing and does not have to be a member of the labor program. "Labor" means an MNA member in good standing who is also a collective bargaining unit member. "Labor Program Member" means a non-RN health care professional who is a member in good standing of the labor program.

Please type or print - Do not abbreviate

Name & credentials \_\_\_\_\_  
(as you wish them to appear in candidate biography)

Work Title \_\_\_\_\_ Employer \_\_\_\_\_

MNA Membership Number \_\_\_\_\_ MNA Region \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Non-work email: \_\_\_\_\_

### Educational Preparation

School	Degree	Year

Present or Past MNA Offices/Association Activities (Cabinet, Council, Committee, Congress, Unit, etc.) *Past 5 years only.*

MNA Offices	Regional Council Offices

Candidates may submit an **emailed** statement not to exceed 250 words. Briefly state your personal views on nursing, health care and current issues, including, if elected, what your major contribution(s) would be in particular to the position which you seek. This statement will be used in the candidate biography and published on the Massachusetts Nurses Association website. Statements, if used, must be emailed to **mnaelections@mnarn.org**, subject: elections-no later than May 31, 2023.

\_\_\_\_\_  
Signature of Member

\_\_\_\_\_  
Signature of Nominator (leave blank if self-nomination)

**Received Deadline: All nominations/consent forms and candidate statements must be received by 4:30 p.m. on May 31, 2023.**

**Return To: Nominations and Elections Committee  
Massachusetts Nurses Association  
340 Turnpike Street, Canton, MA 02021  
email: mnaelections@mnarn.org**

- Application must be mailed, faxed or emailed to the attention of the MNA staff person for Nominations and Elections Committee. Candidate statements must be emailed to [mnaelections@mnarn.org](mailto:mnaelections@mnarn.org).
- Acknowledgment of receipt of your submission will be emailed to your non-work email account within 48 hours of receipt.
- Retain a copy of this form for your records.
- Form also available on MNA Web site: [www.massnurses.org](http://www.massnurses.org), under applications and forms.



# 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.

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### 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 personal email account within 72 hours of receipt.**



Massachusetts  
Nurses  
Association

**Safe Limits  
Save Lives**

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

Fax: 781-821-4445 • Email: [membership@mnarn.org](mailto:membership@mnarn.org)

**MNA**<sup>SM</sup>

Massachusetts  
Nurses  
Association

**SAVE** *the* **DATE**



**MARCH 15-16, 2023**

Wednesday 6 - 9 p.m. • Thursday 9 a.m. to 4 p.m.

**Bargaining Unit Representative Networking  
Session on Wednesday evening**

*New location:*

**Four Points by Sheraton Norwood**

