N.Y. rally protests Cerberus-Steward practices
Large banks and Wall Street firms wrecked our economy. They wiped out pensions and portfolios. Because of their greed, they threw us into a recession, cost us millions of jobs, and squandered American productivity. Yet nobody has paid the price for this wrongdoing. No one has gone to jail. In fact, they remain some of the most profitable businesses in America, doling out hundreds of millions of dollars in executive bonuses. And they pay some of the lowest tax rates in the country.

It’s time for Main Street to say to Wall Street: “We want our money back!”

Join with the National Nurses United as we call on Wall Street to pay for the damage it has caused on Main Street. Main Street is taxed enough; let’s establish a Wall Street Transaction Tax — it could raise $350 billion to rebuild our country.

Here’s the way to reclaim the American Dream — Join with NNU to promote the Main Street Contract for the American People:

• Jobs at living wages for everyone.
• Guaranteed health care for all.
• A secure retirement, with the ability to retire in dignity.
• Equal access to quality, public education.
• Good housing and protection from hunger.
• A safe and healthy environment.
• A just taxation system where corporations and the wealthy pay their fair share.

YES! I want to take the pledge to fight for a Main Street Contract for the American People

Visit MainStreetContract.org to learn more and to join the fight.
As hospitals push for BSN-only hiring, MNA calls for different approach

By Donna Kelly-Williams, RN

Sparked by a recent initiative and report generated by the Robert Wood Johnson Foundation and the Institute of Medicine on the “future of nursing,” a number of hospitals are beginning to introduce policies where only nurses with a bachelor of science in nursing (BSN) degree will be hired into new positions for Massachusetts hospitals, a policy opposed by the MNA as short-sighted with far-reaching implications for nursing and health care.

While attending many MNA membership meetings across the state I have heard from a number of nurses in different facilities reporting that holding a BSN is a requirement for all new hires at the facility. We have also learned that Cerberus-Steward has a plan in place to make BSN a mandatory job requirement for all staff within three to five years, depending on your years of service. A number of nurses have also reported that nurses with many years of clinical experience, board certifications and degrees in public health, health management and education, among others, are being denied transfers and re-employment after educational leaves and deployment to care for underserved populations.

In my role as MNA president, I have been attending meetings of a working group of nurses in various roles who are discussing how this initiative will be implemented in our state. The changes in policy are based on some information in the IOM report regarding the need for enhanced educational preparation for nurses, as well as the academic progression of nurses currently practicing, given the increasingly complex world of nursing practice today.

The MNA values and supports our colleagues who have a BSN, and the MNA has been instrumental in fighting for contract language for tuition reimbursement and other initiatives that recognize and reward nurses for academic progression. Through the Massachusetts Nurses Foundation, the MNA awards generous scholarships for nurses to advance their education. Thousands of hours of free continuing education are provided by the MNA each year, which allows nurses to develop the skills they need to advance their clinical competency and educational preparation.

We are participating in this working group as a means of providing a balanced perspective on this issue that is respectful both of the nurses currently in the workforce and of those coming into the profession. Here are some of the points we have been making:

- All nurses, no matter what their entry into practice, must pass the exact same licensing exam. We are all held to the same standard, and our ability to meet that standard must be the overarching factor. While some research shows patients in hospitals can do better when being cared for by BSNs, there is also research that demonstrates that nursing experience at the bedside can be equally effective. There are also dozens of studies that show that it is not educational preparation that makes the difference, but it is the number of patients assigned to each nurse, no matter what their educational level, that makes the biggest difference in patient outcomes.

- While our economy is in distress and salaries are stagnating or being cut, the cost of a four year education in this country continues to increase. At the same time, most hospitals are cutting back on tuition reimbursement benefits and continuing education opportunities.

- There is little or no uniformity in the curriculum between BSN programs, nor is it easy to transfer credits from AD and other programs into different schools, which makes educational development more difficult and cumbersome. There also are long waiting lists to get into all nursing programs, and a longstanding faculty shortage, so creating a larger pipeline of BSNs is even more difficult with a predicted nursing shortage.

- Finally, there is the issue of diversity in nursing. When I go to speak at nursing schools across the state, it is in the AD programs where I see the largest number of nurses from different ethnic and racial backgrounds. Given all the points above, and the fact that we are looking at a growing shortage in the supply of nurses, we don’t believe this is the direction in which we should be moving.

In the months to come, we will continue to follow this issue, and we will continue to advocate for all nurses for the good of our profession and our patients.
Shrewsbury residents and MNA members Mary Colby, RN, and Susan Mulcahy had an excellent meeting with Rep. Matthew Beaton (R-Shrewsbury) to discuss MNA’s Patient Safety Package in November.

Governor signs law to protect bargaining rights for public sector workers

Gov. Deval Patrick recently signed into law a bill that was backed by many labor unions, including the MNA, and will positively affect collective bargaining for public employees. An Act Relative to the Terms of Collective Bargaining Agreements, which codifies the use of so-called evergreen clauses in collective bargaining contracts, was enacted by the House and Senate just prior to Thanksgiving.

Evergreen clauses extend the terms and conditions of current collective bargaining agreements while labor unions and employers negotiate a new agreement. The new law addresses a Massachusetts Supreme Judicial Court ruling that evolved last October, which held that evergreen clauses violate the state’s labor relations statute if they extend contract terms beyond three years.

Since the labor relations statute was enacted in 1973, there has been widespread acceptance of evergreen clauses by the commonwealth’s public employers and labor unions. The new law explicitly allows evergreen clauses and reaffirms over 40 years of well-established labor law. As acknowledged by the SJC, evergreen clauses provide “a continuing code of conduct while parties negotiate a new bargaining agreement.” Such continuity is important during contentious periods in labor relations, when a contract is about to expire or has expired, particularly during periods of severe economic strain.
After 12 months of fruitless negotiations, the registered nurses of the Baystate Visiting Nurses Association (BVNA) picketed in late November to inform the community of their employer’s anti-union tactics and its failure to engage in good faith negotiations over key issues, including wages and the nurses’ health insurance benefit.

“As these negotiations have gone on it has become clear to us that Baystate management is attempting to bust our union by taking away our rights to negotiate over our wages and other benefits. Baystate has held fast on its demand that it will unilaterally decide wages. They say RNs will get whatever Baystate determines to give the non-union employees. This is totally unacceptable and clearly an attempt to bust our union,” said negotiating committee member Greg Pendrick, RN.

The 58 RNs in the Massachusetts Nurses Association bargaining unit have had 18 negotiation sessions since January.

Baystate set the tone for these negotiations by bringing in a national law firm, Jackson-Lewis, known for its strident anti-union representation. Baystate’s Jackson-Lewis attorney has consistently refused to compromise on issues. Last month, the MNA filed a complaint with the National Labor Relations Board charging Baystate with surface bargaining over Baystate’s refusal to consider MNA proposals regarding the health insurance benefit, while insisting that MNA accept their proposed plan without any change. The MNA also recently filed charges after Baystate management told RNs they couldn’t wear MNA buttons at work. After a hearing, Baystate agreed to post a statement that MNA members were allowed to wear the buttons.

“Our frustration has reached a very high level,” said Pendrick. “We have come forward with a number of packages that would equitably settle the contract only to be told it is not enough. Many of us have been caring for patients in the Springfield area for many years. We deliver the highest quality of care to vulnerable patients in their homes every day. We are not asking for the moon, but we are saying that we will fight to retain our contract and all the rights and benefits that come with it.”

The nurses chose to have picket lines on successive days. On Monday they picketed the offices of Baystate Visiting Nurses Association on Maple Street in downtown Springfield to spread the word that they are outraged about Baystate’s attempt to break their union. On Tuesday, they picketed at the construction site of Baystate’s “Hospital of the Future.” According to Pendrick, “Baystate says it is building ‘a visionary new facility that will meet our community’s needs today’. We are asking Baystate to share a vision of respect and commitment to their caregivers working in the community by working with us to settle an equitable contract.”
Hundreds of nurses and their supporters from across the U.S. converged outside the offices of Cerberus Capital Management in New York on Dec. 20 to protest the practices of the multi-billion dollar private equity firm’s health care unit, Steward Health Care System. Cerberus-Steward, which now operates 10 hospitals in Massachusetts, has partnered with a number of physician practices locally and is also entering the health insurance market. Cerberus-Steward has come under increasing criticism for cornering the market with predatory practices, undercutting patient care with its push for profits.

The nurses—who came from Massachusetts, New York, Washington, D.C., California, Illinois, Pennsylvania and Nevada—were all members of National Nurses United. At the rally, allies from several advocacy groups joined them as well as protesters from Occupy Wall Street. The highlights of the demonstration included a street performance and a 10-foot, three-headed dog, “Cerberus,” the mythical canine at the gates of Hell.

“As patient advocates on the front lines, nurses are sounding the alarm about the entrance of cut-throat private equity firms, like Cerberus, into the health care marketplace,” said Karen Higgins, RN and co-president, National Nurses United. “It is a development that spells danger for patients and communities across the country.”

Cerberus owns an array of businesses, including the Freedom Group subsidiary—a leading manufacturer of guns and ammunition. Last year it added the chain of hospitals to its portfolio.

Nurses who work at those hospitals say that Cerberus-Steward has failed to maintain quality patient care standards at the Massachusetts facilities in contravention of an agreement reached with the state and with its employees. The OK for the profit-maker to take control of the non-profit facilities was tied to keeping patient care a top priority. The company makes daily threats to close services or entire hospitals in direct violation of its assurances to the state as a condition of entering the marketplace.

The nurses report a number of alarming changes since Cerberus-Steward took over. Staffing levels have been reduced, specialty units for the care of specific conditions have been eliminated and patients are treated like products on an assembly line. Even the most basic supplies are not available when nurses need them; for example bread, crackers and juice (which nurses need to stabilize diabetic patients) are no longer available on the floors.

Some nurses who spoke out to protect their patients have been fired, in direct violation of federal labor law. To its RNs, Cerberus-Steward reneged on its contract, dropping the promised defined benefit pension plan—a benefit promised to keep RNs on the job. It is threatening to cut health benefits to some nurses, as well.
Earlier this month, Cerberus-Steward announced a partnership with Compass Medical, a group of 90 doctors. This fall, Steward bought into Whittier Independent Practice Association and its 150 MDs. A protest by community hospital groups to Massachusetts Attorney General Martha Coakley said these purchases “violate the assurance by Steward … that such apparent predatory actions against community hospitals would not take place.”

There are concerns that MD practices in deals with Cerberus-Steward would refer their patients to those hospitals, excluding non-profits. In a Nov. 23 letter to the AG, the Massachusetts Council of Community Hospitals wrote, “What tools will be used to measure market power and leverage?”

On Dec. 12, Cerberus-Steward announced it will begin marketing a health insurance plan. Steward Community Choice limited network plan has coverage for most ailments steering patients to Steward hospitals and doctors. ■

RNs from Massachusetts turned out in force in New York to protest at the parent company of Cerberus-Steward.
The signs tell the story. Below, support from the Transport Workers Union Local 100.
It’s a mad, mad, Mad Libs world
By Deb Rigiero

I am probably aging myself, but I am betting that maybe 50 percent of you know what I am talking about when I say Mad Libs. Those paper pads that would have a paragraph or short story with “fill-in the blanks” placed strategically in the paragraph so it would usually make a funny story.

Lately, we seem to be living in a mad world where we are being asked to follow a script when doing our work.

Do any of you ever feel like a puppet on a ventriloquist’s lap? Have any of you heard about the 10/5 foot rule in your workplace? If you are walking and you see someone 10 feet away you should smile. When you get about five feet away you should greet them.

What are some of the “scripts” in your workplace? Are we all interchangeable now? I bet some of you even put a smiley face along with your initials on your dressings like a server puts on the check. The last hotel I stayed at the desk clerk would say “hello Debra” every time I passed the desk. I was thinking, ‘Isn’t she nice to remember my name?’ But now I’m thinking, ‘It was all just part of a script.’ How do you know? Try the Mad Libs at right and see if you agree with me.

I say it is time for us to challenge the phoniness of it all and to be real. It is OK to be happy, sad, frustrated, surprised and angry. It is OK to have your face show emotion. When you smile, your eyes should smile. When you frown, your forehead should wrinkle and if you are harried it’s OK if it shows on your face. It’s also OK to forget someone’s name, or to be frustrated and to show it.

I still don’t understand why employers think a scripted response is better than a real response. In fact, if it is better, why don’t they script the way they speak to their employees?

If I am a patient, I want to know that the nurse isn’t trying to hide the fact that her assignment is unmanageable. When I am in a restaurant, I really want to know what they recommend (is the fish fresh?). When I am in a plane, I want to know that pilot has not been drinking or is sleepy. When I ask the doctor what she thinks, I really want to know. When I ask someone how he or she is doing, I really mean it.

I am not suggesting that we be rude, disrespectful or abusive. All I am suggesting is that we be real.

Any Workplace, USA
Hello, my name is ______. I am your ______.

How are you today? How can I ______ you today?

Would you like a ______? Did I introduce you to my ______? Their name is ______. Did they get your ______ today? Is everything to your satisfaction? Can I offer you a ______?

Hello, my name is ______. I am the manager.

How was your visit with us? How can we help you? Did ______ your ______ meet all of your needs? Is there anything else you would like? Here is your check.

Have a ______ day.

There is a number to call on the ______. If you call that number and complete a quick survey about your visit with us you will receive a ______. Thank you and come again.
MNA position statement on medication error

Developed and revised by the
MNA Congress on Nursing Practice, December 2011

Medication errors happen. And in today’s complex patient care environments, medication errors can occur in the practice of even the most diligent nurses.

The Institute of Medicine estimates 7,000 deaths and 1.3 million injuries occur each year because of medication errors in American hospitals (August 31, 2011). USA Today reported that medication errors are among the most common medical errors, harming at least 1.5 million people every year (July 21, 2006). And according to the Agency for Health Care Quality, medical errors are the leading cause of death and injury in America.

Only the most serious errors come to our attention through the media. Registered nurses know there are many more errors than are actually reported. Nurses have always accepted the responsibility for their medication practice, and nurses who administer medications practice the six rights of medication administration: the right patient, the right medication, the right dose, the right route, the right time, and the right documentation.

However, the act of administering medication is only one action in a system with complex processes involving multiple steps and disciplines. Adding to this complexity are computerized medication ordering systems, and dispensing and scanning systems for medication administration. Some hospital medication systems have all of these processes in place while others have partial systems. Each one of these systems (order entry, medication dispensing and procurement, monitoring and patient documentation) may require each nurse to enter multiple user names and passwords. This further contributes to the complication of medication administration and increases the risk of a medication error.

Other factors cited by nurses that contribute to error include stress, a high volume of work, inexperience with particular clinical events and a lack of familiarity with the practice setting.

In 1999, MNA's Congress on Nursing Practice developed a new “Six Rights for Nursing Medication Administration” which is now copyrighted and included in basic nursing textbooks. It is as follows:

1. The right to a complete and clearly written order
2. The right to have the correct drug route and dose dispensed
3. The right to have access to information
4. The right to have policies on medication administration
5. The right to administer medications safely and to identify problems in the system
6. The right to stop, think and be vigilant when administering medications

These rights can only be practiced in a safe environment with a safe patient assignment that contributes to a “Just Culture Environment.” A Just Culture Environment finds a middle ground between errors caused by systems failure (staffing, lack of adequate equipment, incompatible computerized programs) and the nurses’ ability to practice safely. Just Culture builds on the fact that nurses and systems are not perfect. Under Just Culture conditions, individuals are not blamed for honest errors but are held accountable for willful violations and gross negligence. Just Culture supports an atmosphere of trust and supports learning from errors in order to improve the safety awareness through sharing of information.

In 2007, the Massachusetts Board of Registration in Nursing conducted its own study involving complaints of preventable medication errors. The BORN report recommended a number of environment-based error prevention strategies that included:

- Insure medication administration workspaces are free of distraction and noise
- Design nursing workflow to reduce interruptions during medication administration
- Include unit level nursing staff in the systematic evaluation of clinical policies and procedures
- Systematically monitor the effectiveness of changes made to the practice environment as the result of nursing errors and “close calls”
- Collaborate with unit-level staff in the creation of a non-punitive environment

MNA supports and encourages all best practice initiatives embraced by the Massachusetts Coalition for the Prevention of Medical Errors. Barriers to the implementation of these best practices should be eliminated. The coalition has been at the forefront of national discussions on how to prevent medical errors, emphasizing best practices, communication and collaboration.

MNA nurses too often find that their expanded patient care assignments are unsafe. Fewer nurses are assigned to more patients with higher acuity and more complex medication regimens.

The MNA asserts that:

- The “giver” of a medication is only one part of the medication delivery system
- It is ineffective to focus only on error and should include the entire medication delivery system
- A systems-oriented approach to medication error is essential
- A non-punitive environment is essential for error reporting
- Proactively moving from a mind set of blame/punishment to an “error/correction philosophy” is crucial

The MNA continues to be the voice of support for each nurse’s effort to provide the highest quality care.

Visit massnurses.org for references
By The MNA Safe Patient Handling Task Force

Last May, the MNA hosted nearly 800 nurses at Worcester’s DCU Center for a tremendously successful one-day clinical conference. The conference provided attendees with access to a wide range of research and clinical evidence aimed at enhancing nursing practice in the commonwealth, include practice issues related to safe patient handling.

The MNA’s Safe Patient Handling Task Force has made a commitment to bring cultural changes to nurses’ consciousness, and through various forms of education and proposed legislation the MNA is aiming to enhance the safe care of patients while eliminating the risk of lift injuries for nurses.

As part of the clinical conference, the Safe Patient Handling Task Force developed a questionnaire in order to obtain information about their workplace (such as education, equipment, work practices and patient assessment) as it relates to safe patient handling and the related issue of lift injuries.

This questionnaire was not set up as a survey but rather a general informational gathering tool to help determine the state of injury prevention awareness in the nurses who attended the conference. There are some limitations and assumptions made in gathering this data, such as blank spaces were considered to be “no” answers if there were “yes” answers completed in the same questionnaire. However, we believe it is indicative of some very disturbing trends in health care.

Questionnaires were distributed to 784 nurses of whom 566 responded with varying degrees of completeness. However the majority were fully completed, giving a response rate of 72 percent.
The results indicate that fewer than 12 percent of the responding nurses told us they have a “No Lift Policy.” More than 85 percent of hospitals have some type of lifting device, most of which are slides for lateral transfers. Alarmingly, 46 percent of nurses that responded have been injured lifting or moving a patient in the workplace. Education seems to be completed by more than 50 percent of the responders, which means that slightly less than half of nurses have not been educated.

Slides are predominantly the equipment type used to care for patients with the remainder of the equipment listed used very sparingly. There could be a number of reasons why, in order for nurses to use equipment they need to have the equipment available, accessible, and be trained in its use.

Education on lifting techniques and any equipment that may be available is primarily done annually and only 25 percent of those asked had any education at all. Approximately 18 percent received education when hired. That number increased with annual education but essentially no education occurred on transfer to another unit, even though you might go to an orthopedic or geriatric unit. Hospitals that receive new or rental equipment based on patient needs educate nurses on this equipment only 8 percent of the time in the hospitals where the nurses responded to our questionnaire.

Nurses are using slides in caring for patients but the use of slides is limited. Full body lifts are required to be used if a patient is found on the floor—either from falling while walking or from falling out of bed. According to the responders, only 53 percent of the nurses responding have a full body lift available to them for use in the workplace.

This graph reinforces that for whatever reason, nurses are not using lifting devices and at the same time large numbers are getting hurt in the workplace.

Muscular skeletal injuries frequently impair or disable a nurse from caring for patients, themselves and their families. These are devastating injuries that can be prevented by safe work practices and the use of lifting devices. Hospitals and health care systems know that investing in safe equipment is not only cost effective but the return on investment is major.

Although this questionnaire is not representative of all organizations, it is representative of many. The MNA Safe Patient Handling Task Force has developed a toolkit that explains existing work practices and how prevention is necessary to protect our most valuable resources, our nurses. It also explains the different lifts and their use in caring for patients and the importance of the initial assessment of patients in order to plan the use of safety devices. More information on a Safe Patient Handling educational program is available at the MNA Web site, at the Health and Safety page. The Division of Health and Safety acts as a resource to prevent injuries and to counsel injured nurses through the Workers Compensation process. For questions, call Peg O’Connor or Christine Pontus at 781-821-4625.
Protect your patients and practice with the MNA’s updated Safe Staffing Form

The MNA’s unsafe staffing form has been updated to reflect new technologies that many hospitals have implemented. Additional copies of this form are available on the MNA’s Web site and paper copies can also be obtained through the MNA office or through the associate director who works with your bargaining unit.

Instructions on how to use this form are also available on the Web site. Visit massnurses.org or call 781-821-4625 for details.

Objection and Documentation of Unsafe Staffing and/or Use of Equipment/System Technology

I, _______________________________ [NAME] _______________________________ [TITLE], employed at _______________________________ [HOSPITAL/AGENCY/FACILITY] _______________________________ [SHIFT & DATE] _______________________________ [UNIT], hereby object to the assignment as: _______________________________ charge nurse _______________________________ staff nurse _______________________________ other _______________________________.

I believe the situation described above is unsafe. I will continue to provide the best professional nursing care possible in this situation. However, I decline to accept any legal responsibility for any untoward events that may occur as a result of unsafe staffing by the hospital/agency/facility.

Signature _______________________________ Date _______________________________.

Section II – Technology

I am objecting to the aforementioned assignment based on equipment/system technology. I was given an assignment where I did not receive _______________________________.

Name the technology (system, program, device) _______________________________; and how patient care was affected _______________________________.

Supervisor(s) notified: _______________________________ Time _______________________________ Response _______________________________.

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

Please type or apply pressure when writing.
Log onto “myMNA,” the new members-only section of the Web site

**Personal & Financial Services**

**American General Financial Group/VALIC**  
Retirement program.

**Bank of America Credit Card**  
Get the Bank of America MNA member Platinum Plus® Visa® credit card.

**Colonial Insurance Services, Inc.**  
Auto/Homeowners Insurance. Discount available for household members.

**Insurance Specialists, Inc.**  
Sickness/Accident Disability Insurance

**John Hancock Life Insurance Company**  
Long Term Care Insurance

**Law Offices of Dagmar M. Pollex, PC**  
Estate Planning Services.

**Lead Brokerage Group, Inc**  
Long Term Disability Insurance and Term Life Insurance.

**Membership Benefits Group**  
Short Term Disability.

**Nurses Service Organization**  
Professional Liability Insurance.

**Reliant Mortgage Company**  
Save on your next home loan/mortgage.

**Products & Services**

**Associated Edge (Formerly Members Advantage)**  
Discount prices on Audio/Video Products, Home Appliances, & more!

**AT&T**  
Save 24% on qualified voice and data plans with AT&T Wireless.

**BJ’s Wholesale Club**  
Check website for special rates and offers throughout the year.

**Brooks Brothers Discount**  
Enroll online to receive 15% discount at Brooks Brothers.

**Cambridge Eye Doctors**  
Vision care at rates discounted down from our regular retail pricing.

**Cape Clogs**  
MNA Members receive 10% off.

**Dell Computers**  
7% discount is waiting on you!

**Finesse Florist**  
10% discount to all MNA members.

**Get Scrubs Medical Apparel and Accessories**  
Show your MNA Membership card and receive 20% discount.

**Hewlett-Packard**  
HP & Compaq consumer products at discounts typically up to 10% off.

**Oil Network Discount**  
Lower your heating costs by 10-25 cents a gallon.

**Sprint Nextel Communications**  
23% off rate plans.

**T-Mobile**  
10% on qualifying monthly recurring charges for new & existing customers.

**Valvoline**  
Instant Oil Change & AAMCO centers 15% discount on total purchase.

**Work ‘n Gear**  
You’ll save 15% off all regularly priced merchandise every day.

**Wrentham Village Premium Outlets Discount**  
Receive a VIP coupon book offering hundreds of dollars in savings.

**Travel & Leisure**

**Avis Car Rental Discount**  
Low, competitive corporate rates and discounts on promotional rates.

**Boston Bruins & TD Garden**  
The Boston Bruins have exclusive online deals.

**Canobie Lake Park (Seasonal)**  
Discounted park tickets sold at MNA.

**Citi Performing Arts Center | Shubert Theater**  
MNA members get a savings on tickets to various shows.

**DCU Center Worcester**  
MNA members get a savings on tickets to various shows.

**Disney World & More — Tickets At Work**  
Discounts to theme parks & entertainment in Florida and other locations.

**Go Ahead Tours, TNT Vacations and CruisesOnly Offers**  
Save an additional $150 per person on regular tour package prices.

**CruisesOnly Offers The Lowest Prices In The Industry.**  
TNT Vacations save an additional 5% on already low prices.

**Hertz Car Rental Discount**  
Discounts offered to MNA members range from 5-20%.

**Movie Passes**  
Showcase Cinemas/National Amusements . . . . . . . . $7.75 each
AMC Theatres ........................................... $6.00 each
Regal Cinemas ........................................... $6.50 each
Rave Motion Pictures ............................... $7.50 each

**Mr. John’s Limo**  
All members are entitled to minimum 10% discount.

**Six Flags New England (Seasonal)**  
Discounted park tickets sold at MNA and online.

**Universal Studios Fan Club**  
Discounts at Universal Studios and Universal’s Island of Adventure.

**Water Country (Seasonal)**  
Discounted park tickets sold at MNA and online.

**The Worcester Sharks**  
Discounted rates on tickets to select home games at the DCU Center.

**Working Advantage**  
Discounts on skiing, Broadway theaters, online shopping & more.
### Track 1: Leadership Development and the MNA/NNU

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### Track 2: Role of the Floor Rep., Grievances and Arbitration

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<td><strong>Week 4:</strong> Presenting the Grievance, Settling Grievances, Arbitration, ULPs</td>
<td>4/11/12</td>
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### Track 3: The Collective Bargaining Process

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<td><strong>Week 1:</strong> Nollective Bargaining and the Legal Foundation, Process Overview, Ground Rules, Bargaining Committees and the Contract Action Teams</td>
<td>5/2/12</td>
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<td><strong>Week 2:</strong> Preparing for Bargaining - Surveys, Calendar, Priorities, Defining and Developing a Contract Campaign, The Committee Decision Making Process</td>
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<td><strong>Week 3:</strong> At the Bargaining Table – Tactics and Signals, Roles at the Table, Writing Contract Language, Leverage &amp; Pressure Tactics, Use of the Media</td>
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<td><strong>Week 4:</strong> Contract Costing, Strikes &amp; Job Actions, Mediation, Impasse, Agreement, Committee Recommendation and Ratification</td>
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### Track 4: Computer Training

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<td><strong>Week 6:</strong> Using the Internet and MNA email</td>
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### Track 5: Labor Law and Special Topics

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<td><strong>Week 1:</strong> Family and Medical Leave Act, Mass. Small Necessities Leave Act, Worker Adjustment and Retraining Notification Act</td>
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<td><strong>Week 2:</strong> Fair Labor Standards Act, Labor-Management Reporting and Disclosure Act, HIPAA</td>
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<td><strong>Week 3:</strong> Workers Compensation, Occupational Safety and Health Act, Americans with Disabilities Act, USERRA</td>
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<td><strong>Week 4:</strong> The Kentucky River/Oakwood Cases and the NLRB and Nurse Supervisory Issues, The National Labor Relations Act and Chapter 150(e)</td>
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After a one year hiatus the MNA Labor School is being re-launched. The Labor School has been overhauled and updated. There are now five separate tracks each comprised of four weeks of classes. Only the computer training track will have six weeks of classes to allow enough time to cover all of the material.

Tracks listed in red for Regions 1, 2 and 5 will have classes offered in each track in the mornings at 10 a.m. – noon and at 5 – 7:30 p.m. Snacks are provided for the morning classes and a light meal is provided for the evening classes.

At the conclusion of each track, participants receive a certificate of completion. Any MNA member who completes any two tracks will receive an MNA Labor School blue jacket. There are no pre-requisites to attend any track—members are free to attend any track they choose and need not follow them in order. Each track is self-contained, focusing on a specific area of interest.

Preregistration through the respective Regional office is necessary. Classes generally run from 5–7:30 p.m., with a light meal included. All courses are free and open to any MNA member.

For further details:
massnurses.org
781-830-5757

### Labor School Locations

**Region 1, Western Mass.**
241 King Street
Northampton
413.584.4607

**Region 2, Central Mass.**
365 Shrewsbury St.
Worcester
508.756.5800

**Region 3, South Shore/Cape & Islands**
60 Route 6A
Sandwich
508.888.5774

**Region 4, North Shore**
50 Salem Street, Building A
Lynnfield
781.584.8012

**Region 5, Greater Boston**
MNA Headquarters
340 Turnpike Street, Canton
781.821.8255

### Track 3: The Collective Bargaining Process

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Based on historical fact, *Fatal Decision: Edith Cavell WWI Nurse*, is a novel that tells the story of the legendary British nurse whose duties as a healer clashed with the demands of a ruthless occupying regime during World War I.

Written by MNA member Terri Arthur, a long-time staff nurse, educator of nurses and union activist, this riveting novel is about the profession of nursing, the brutality of war, and the risks of commitment. It is a testament to one woman’s courage, resilience, intelligence, and determination to make some sense out of the violence of war.

Arthur spoke with *Massachusetts Nurse* about the book and her experience writing it.

**Who is Edith Cavell and what inspired you to write about her?**

“Did you know her?” is the first line of my book. When you finish reading this book, you will feel as if you did. You will follow this British nurse when, against many obstacles, she pioneers the formal training of nurses in Belgium in 1908. Stand with her in World War I when the ruthless German regime occupies Belgium and she must decide whether to take in two wounded British soldiers—risking her life—or refuse them, risking theirs. You can feel the fear of capture as she moves into the dangerous and clandestine world of the Belgian underground where she becomes a pivotal figure in rescuing soldiers, an act that ultimately changed the course of the Great War.

Haunted by the images on a set of vintage postcards, I was compelled to learn more about Edith. A nurse myself, I was surprised that neither I, nor any of my nursing colleagues were familiar with Edith’s amazing story. Then I discovered that none of the books written about Edith had been written by a nurse. I strongly felt that as a nurse, I could throw fresh light on the story of this extraordinary woman. With the help of Dr. Gail Lenehan, editor of the Journal of Emergency Nursing, an article I wrote about Edith was published in that journal in 2006. In response to that article, readers sent in letters from all over the world, including China, showing a strong interest. The truth is that once this story caught my attention, I felt as if I had no choice but to write it.

**How did you do research for this book and how long did it take you to write it?**

I spent two years researching the book, which included two trips to Belgium and three to the United Kingdom, and four years writing it while I was working as a staff nurse at Jordan Hospital in Plymouth. I visited all of the British archives that had information about her and got to know the archivists by their first name. In order to write this book the way I wanted to, I had to be where she was and surround myself with as much as she experienced as possible. I didn’t want to write another history book that told the story. I wanted to show the story—to breathe life into Edith, so I wrote it like a novel. I knew nothing about WWI when I started, and had to read up on that too.

**What was it like to take on the daunting task of writing a historical biography?**

I tried NOT to write this story but it haunted me because nurses have so few heroes. Like Cavell, they slip into obscurity. I never knew when I started how I could complete this story. I mean, it took place in another country, England, 100 years ago, then it shifted to Belgium where they spoke French and Flemish, and then the Germans invaded Belgium and I had to deal with German.
I had to put my feet on the ground where she walked, and see what she saw. I had no idea it would take two years of research and four years of writing all the while still researching, but I couldn’t stop writing it.

The interesting thing is that whatever I needed at each stage of my writing, it would come to me in unpredictable ways—and always when I needed it the most. One book that I found in an old barn gave me the information I needed about the German officers who controlled Brussels at the time. Another book I wanted was out of print. While visiting the hospital in Brussels named after Edith, the nursing director surprised me by offering me the missing book. When I visited the Anglican cathedral near her home, I stumbled on the celebration of the 90th anniversary of her death. The church was packed with about 1,000 people. It was awe-inspiring. Impressed that an American nurse was present to honor her, a BBC news reporter put a microphone and camera in front of me, and I ended up on the evening news.

You have been a nurse for years; so how did you learn to write a novel?

I’ve always liked to write and had a few published articles to my credit, but I knew I had a steep learning curve when it came to writing a novel. I attended writing seminars, classes, and workshops—anywhere I could find them. I subscribed to two writing magazines and read them religiously every month. I have always been a reader but now I read for technique, style, plot, characterization, description, suspense, how to start a chapter and how to end it. I attended a fiction-writing seminar for physicians every year for five years and learned what to do and not to do. I have always loved to write but this was like getting another degree.

What was your process for writing the book?

The working conditions had become so bad at the hospital where I worked for 27 years, that I took the first buy-out it offered. It was financially stingy but it did offer to pay for my health insurance until I turned 65. So I took the paltry amount, lost 600 hours of sick time, and went to another hospital to work evenings per diem. By working per diem, I had control over my time to travel or take classes. I attended every class on writing that I could find and became a member of a writing club on the Cape.

What is important about Cavell’s story that nurses need to know today?

What struck me is that, like Cavell, nurses face difficult choices every day. When a nurse refuses to take an assignment that she knows is unsafe, she takes the risk of being disciplined. If she agrees to work the assignment, she takes the risk that her patients will suffer. Every day that we go to work, we face what is called a “Hobson’s Choice,” one that has no good outcome. Cavell’s story exemplifies that dilemma, but she did what every nurse does—she chose for the safety of her patients knowing it may be a personal risk. Cavell got no medals for saving over a thousand soldiers under the very noses of the German occupiers. Her decision plunged her into the dangerous and clandestine world of the Belgian underground, where she became an important link in the mission of Allied soldiers. For nine months, this quiet, religious nurse, went about saving over a thousand soldiers under the very noses of the German occupiers, Edith was forced to make a decision when two wounded British soldiers came to her seeking asylum. She took them to the hospital but instead of helping them, the Germans arrested her and she was court-martialed. She was sentenced to death by firing squad.

Why is it important for nurses to know this history, or any history of our profession?

We need to know where we came from in order to know where we are going. Nurses today stand on the shoulders of some courageous and brave nurses of the past. Knowing this should make us proud of who we are. The road to our future is paved with the ashes of history. We need to know where we came from in order to know where we are. The road to our future is paved with the ashes of history. We

Where can one buy the book?

It can be bought on all major Web sites such as Amazon, Barnes and Noble and Alibris, and retails for $17.95. It is also available as an e-book for Kindle, Nook and iPad.

An inspiring story every person should know and none will forget. Based on historical fact, this novel tells the story of the legendary Edith Cavell, a British nurse whose duties as a healer clashed with the goals of a ruthless occupying region during World War I. At the request of a brilliant but hot-headed surgeon, Edith went from London to Brussels to create Belgium’s first school of nursing. At the height of her success, the German army occupied Belgium and took over her hospital and school. Swept up in the struggle to survive under the repressive and brutal control of the German occupiers, Edith was forced to make a decision when two wounded British soldiers came to her seeking asylum. She took them to a hospital but instead of helping them, the Germans arrested her and she was court-martialed. She was sentenced to death by firing squad.

Edith Cavell’s story is about the profession of nursing, the brutality of war, and the risks of commitment. It is a testament to one woman’s courage, resilience, determination, and determination to make some sense out of the violence of war. “Patriotism is not enough,” said Edith: “Edith Cavell...has taught the bravest man among us the supreme lesson of courage.” —Prime Minister Asquith

“For Edith Cavell—her duty was to humanity, and her legacy is its triumph!” —Prime Minister Gordon Brown

Cover design by Linda Callaghan - Christchurch, New Zealand

Join the author for a book signing

Terri Arthur will be at the Region 3 office on Cape Cod on Thursday, Feb. 16 (snow date, Feb. 23 from 3:30-5 p.m.) Refreshments served. The office is at 60 Route 6A, Sandwich (across the Stop & Shop Plaza and Merchant’s Circle).
This was the first meeting of the 2011-2012 MNA Board of Directors. Members, staff and guests introduced themselves. Alan McDonald, MNA legal counsel, reviewed the fiduciary responsibilities of Board members. He went over the duty of care and the duty of loyalty, as well as state and federal law.

Executive Director Julie Pinkham and the Labor directors updated the BOD on current issues facing the bargaining units.

Maryanne McHugh, interim director of legislation, reported that the Workplace Violence Prevention bill was reported out favorably. The Evergreen legislation was enacted by the House and the Senate. Roland Goff, director of strategic campaigns, reviewed the history of the legislation and the importance of it to our public sector employees. It will go to the governor to be signed into law.

David Schildmeier, director of public communications, introduced Stephen Dill, a consultant on social networking. They reviewed MNA’s new Facebook page and how it would work. MNA launched its new Facebook page at 2:30 p.m.

President Donna Kelly-Williams reported on the Nursing Leadership Coalition meetings she has been attending. They are discussing the Institute of Medicine’s “The Future of Nursing: Leading Change, Advancing Health” report. The BOD asked for a link to the report to be put on our Web site for members to read.

The BOD reviewed motions passed at Convention. It is looking at ways to survey the membership.

Save the date—Dec. 20 Steward/Cerbersus protest in New York: There will be a bus leaving from MNA Canton and one from the North Shore and picking up in Worcester. Members will have an opportunity to walk around and shop in the city before heading home.

The BOD appointed Karen Bustin to the Finance Committee in a non-BOD seat.
Now Available ➡ Online registration for courses offered at MNA Headquarters. Go to www.massnurses.org

MNA is proud to provide FREE continuing nursing education programs to foster professional growth for its members. Offering the programs locally to its members improves access and convenience. We hope you appreciate this service and find these courses are helpful.
**Morning Session**

**Your Best Defense:**

**Lowering Your Legal Risks with Documentation and More**

**Description:** This program addresses the common reasons for suits against nurses. The nurse’s responsibilities in relation to standards of care, documentation and communication will be discussed in the context of malpractice, its prevention and occurrence. Case studies will be utilized.

**Presenters:** Barbara Levin, BSN, RN, ONC, LNCC; Tammy Murphy, ASN, RN, LNC

**Date:** March 21, 2012

**Time:** 8:30 – 9 a.m., Registration/Continental Breakfast

9 a.m. – 12 p.m., Program; 12–12:45 p.m., Lunch

**Afternoon Session**

**Medical Mistakes and Mishaps**

**Description:** This program will address the legal aspects of professional nursing practice, including malpractice, preventive measures, the path of a lawsuit, and the RN Board of Registration’s approach to violations of the Massachusetts Nurse Practice Act.

**Presenters:** Barbara Levin, BSN, RN, ONC, LNCC; Tammy Murphy, ASN, RN, LNC

**Date:** March 21, 2012

**Time:** 1:00 p.m. – 4:00 p.m.

**Location:** Cranwell Resort, Route 20, Lenox; 413-637-1364, www.cranwell.com

**Fee (by check only):** Member/Associate Member Free; Non-Members $195. ‘Requires a $50 placeholder fee, which will be returned upon attendance.

**Contact Hours:** Will be provided.

**First Aid to 911: Considerations for Pediatric Assessment**

**Description:** This program will address the nursing care and management of school-aged children who sustain a variety of traumatic injuries. Assessment, treatment and transfer considerations will be discussed.

**Presenter:** Lindsey Elliott, BSN, RN, CPN, CPST

**Date:** April 10, 2012

**Time:** 5:30 – 6 p.m., Registration/Dinner; 6 – 8 p.m., Program

**Location:** The Hotel Northampton, 36 King Street, Northampton; 413-584-3100, www.hotelnorthampton.com

**Fee (by check only):** Member/Associate Member, free; Non-member, $95. ‘Requires a $25 placeholder fee, which will be returned upon attendance.

**Contact Hours:** Will be provided.

**De-Escalation Techniques: Protecting Nurses and Patients**

**Description:** This program will address behavior that threatens the welfare of patients, staff and others. Participants will learn how to recognize and manage aggressive and out-of-control behavior and its escalation as well as how to influence its presentation.

**Presenter:** Ronald Nardi, MSN, APRN

**Date:** May 1, 2012

**Time:** 5 – 5:30 p.m., Registration/Dinner

5:30 – 8:30 p.m., Program

**Location:** Log Cabin, 500 Easthampton Street, Holyoke; 413-535-5077, www.logcabin-delaney.com

**Fee (by check only):** Member/Associate Member, free; Non-member, $95. ‘Requires a $25 placeholder fee, which will be returned upon attendance.

**Contact Hours:** Will be provided.

**To register:** Complete the Regional Registration Form located on page 26 and submit to the MNA Region 1 Office, 241 King Street, Suite 226, Northampton, MA 01060. For questions, please contact Region 1 at 413-584-4607 or email region1@mnarn.org

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**Region 2**

**Recognizing and Supporting Our Nurse Colleagues with Substance Abuse Problems**

**Description:** This program will identify the risk factors for nurses with substance abuse problems and will offer strategies on how to assist these nurse colleagues. Program will include a discussion of how to identify diversion and the management of substance abuse in the workplace.

**Presenter:** Carol Mallia, RN, MSN

**Date:** March 14, 2012 • Please note this is a Wednesday.

**Time:** 5:30 – 6 p.m., Registration/Dinner

6 – 8 p.m., Program

**Location:** Buca di Beppo Restaurant, 7 Boston Turnpike, Shrewsbury; 508-792-1737, www.bucadibeppo.com

**Fee (by check only):** Member/Associate Member, free; Non-member, $95. ‘Requires a $25 placeholder fee, which will be returned upon attendance.

**Contact Hours:** Will be provided.

**Medical Mistakes and Mishaps**

**Description:** This program will address the legal aspects of professional nursing practice, including malpractice, preventive measures, the path of a lawsuit, and the RN Board of Registration’s approach to violations of the Massachusetts Nurse Practice Act.

**Presenters:** Barbara Levin, BSN, RN, ONC, LNCC; Tammy Murphy, ASN, RN, LNC

**Date:** April 10, 2012

**Time:** 5:30 – 6 p.m., Registration/Dinner

6 – 9 p.m., Program

**Location:** The Manor, 42 West Boylston Street, Route 12, West Boylston; 508-835-4722, www.ourmanor.com

**Fee (by check only):** Member/Associate Member, free; Non-member, $95. ‘Requires a $25 placeholder fee, which will be returned upon attendance.

**Contact Hours:** Will be provided.

**Managing Conflict: The Verbal Solution**

**Description:** This program will provide nurses with an understanding of the management of conflict in the workplace and skills necessary to its effective management.

**Presenter:** Joe-Ann Fergus, RN, BSN, MA, PhDc

**Date:** May 23, 2012 • Please note this is a Wednesday.

**Time:** 5:30 – 6 p.m., Registration/Dinner

6 – 8 p.m., Program

**Location:** Buca di Beppo Restaurant, 7 Boston Turnpike, Shrewsbury; 508-792-1737, www.bucadibeppo.com

**Fee (by check only):** Member/Associate Member, free; Non-member, $95. ‘Requires a $25 placeholder fee, which will be returned upon attendance.

**Contact Hours:** Will be provided.

**To register:** Complete the Regional Registration Form located on page 26 and submit to the MNA Region 2 Office 365 Shrewsbury Street, Worcester, MA 01604. For questions, please contact Region 2 at 508-756-5800 or email region2@mnarn.org
Mental Health Update: Bipolar Disorder and Borderline Personality Disorder

Description: This program will enhance the nurse’s ability to provide care to patients with a spectrum of mood disorders and personality disorders through an understanding of the primary focus of diagnosis and treatment as well as the impact on other health-related areas.

Presenter: Mary Linda O’Reilly, MS, APRN, BC

Date: March 6, 2012 (snow date is March 13, 2012)

Time: 5:30 – 6 p.m., Registration/Dinner

6 – 8:30 p.m., Program

Location: Trowbridge Tavern and Canal Club (located behind hotel) 100 Trowbridge Road, Bourne; 508-743-9000, www.trowbridgetavern.com

Fee (by check only): Member/Associate Member, free; Non-member, $95. Requires a $25 placeholder fee, which will be returned upon attendance.

Contact Hours: Will be provided.

Coping with Stress: The Mind/Body Connection—A Program for Nurses

Description: This program focuses on mindfulness and tools of resiliency for nurses in diverse environments of practice, with the commonality that nurses everywhere are dealing with unprecedented stress today. The presenter offers strategies for creating calmness in crisis circumstances through mindfulness techniques.

Presenter: Pam Ressler, RN, BSN, HNC

Date: April 3, 2012

Time: 5:30 – 6 p.m., Registration/Dinner

6 – 8 p.m., Program

Location: Trowbridge Tavern and Canal Club (located behind hotel) 100 Trowbridge Road, Bourne; 508-743-9000, www.trowbridgetavern.com

Fee (by check only): Member/Associate Member, free; Non-member, $95. Requires a $25 placeholder fee, which will be returned upon attendance.

Contact Hours: Will be provided.

A Response to Workplace Violence and Its Implications for Nurses

Description: The purpose of this program is to provide nurses with a plan of action for the prevention of violence and to adapt this plan to apply within their facility to maximize the protection of all health care workers and patients.

Presenter: Margaret E. O’Connor, MMHC, RN, COHN, HRM; Christine Pontus, RN, MS, COHN-S/CCM

Date: May 3, 2012

Time: 5:30 – 6 p.m., Registration/Dinner

6 – 8:30 p.m., Program

Location: Trowbridge Tavern and Canal Club (located behind hotel) 100 Trowbridge Road, Bourne; 508-743-9000, www.trowbridgetavern.com

Fee (by check only): Member/Associate Member, free; Non-members, $95. Requires a $25 placeholder fee, which will be returned upon attendance.

Contact Hours: Will be provided.

Managing Conflict: The Verbal Solution

Description: This program will provide nurses with an understanding of how to effectively manage conflict in the workplace. Specific approaches/skills learned will enable attendees to successfully handle conflicts with co-workers/others.

Presenter: Joe-Ann Fergus, RN, BSN, MA, PhDc

Date: April 3, 2012

Time: 5 – 6 p.m., Registration/Dinner

6 – 8:30 p.m., Program

Location: Salvatore’s Function Facility, 354 Merrimack Street, Lawrence; 978-291-0220, www.salvatoresrestaurants.com/#lawrence-riverwalk

Fee (by check only): Member/Associate Member, free; Non-member, $95. Requires a $25 placeholder fee, which will be returned upon attendance.

Contact Hours: Will be provided.

The Kinematics and Initial Assessment of a Multi-System Trauma Patient

Description: This program will provide a better understanding of mechanisms of injury and the initial nursing assessment of the adult and pediatric multi-trauma patient.

Presenter: Joseph S. Blansfield, RN, MS, ANP-BC

Date: May 22, 2012

Time: 5 p.m., Registration (dinner at 5:15 p.m.)

6 – 9 p.m., Program


Fee (by check only): Member/Associate Member, free; Non-member, $95. Requires a $25 placeholder fee, which will be returned upon attendance.

Contact Hours: Will be provided.

Current Trends in Bariatric Surgery

Description: This program will discuss the current options for bariatric surgery. Patient considerations and pre-operative preparation will be explored. Program will conclude with a discussion of the nursing care implications for the different types of bariatric surgery.

Presenter: Nicole J. Pecquex, MD

Date: June 6, 2012

Time: 5 – 6 p.m., Registration/Dinner

6 – 8:30 p.m., Program

Location: Danversport Yacht Club, 161 Elliot Street, Danvers; 978-774-8620, www.danversport.com/contact.htm

Fee (by check only): Member/Associate Member, free; Non-member, $95. Requires a $25 placeholder fee, which will be returned upon attendance.

Contact Hours: Will be provided.

To register: Complete the Regional Registration Form located on page 26 and submit to the MNA Region 3 Office, PO Box 1363, Sandwich, MA 02563. For questions, please contact Region 3 at 508-888-5774 or email region3@mnarn.org

To register: Complete the Regional Registration Form located on page 26 and submit to the MNA Region 4 Office, 50 Salem Street, Building A, Lynnfield, MA 01940. For questions, please contact Region 4 at 781-584-8012 or email region4@mnarn.org
Infectious Diseases Update: TB and Hepatitis

**Description:** This talk will address the issues of tuberculosis and the different types of infectious hepatitis. It will cover the causes, epidemiology, natural history and treatment of each of the illnesses, address nursing implications for each of the illnesses as well as the nursing implications for each.

**Presenter:** Mary Linda O’Reilly, MS, APRN, BC

**Date:** March 29, 2012

**Time:** 5:15 – 6 p.m., Registration/Dinner
6 – 9 p.m., Program

**Location:** Lombardo’s, 6 Billings St., Randolph; 781-986-5000, lombardos.com

**Fee (by check only):** Member/Associate Member, free; Non-member $95. *Requires a $25 placeholder fee, which will be returned upon attendance.

**Contact hours:** Will be provided.

What to Do When the Massachusetts Board of Registration in Nursing (Mass. BORN) Comes Knocking on Your Door

**Description:** This program will enhance the nurse’s understanding of the Massachusetts Nurse Practice Act; the dimensions of nurse licensure; the role of the Massachusetts Board of Registration in Nursing (Mass. BORN) in assuring professional accountability; the Mass. BORN disciplinary process; and nurse liability protection.

**Presenter:** Janet E. Michael, MS, JD, RN

**Date:** April 5, 2012

**Time:** 5:30 – 6 p.m., Registration (light supper provided)
6 – 9 p.m., Program

**Location:** MNA Headquarters, 340 Turnpike St., Canton; 781-821-4625

**Fee (by check only):** Member/Associate Member, free; Non-member $95. *Requires a $25 placeholder fee, which will be returned upon attendance.

**Contact hours:** Will be provided.

Acute and Chronic Renal Disease

**Description:** This program will provide a comprehensive overview of the major components and complications of chronic kidney disease. Nursing management strategies for chronic kidney disease will be discussed along with acute kidney injury.

**Presenter:** Lisa Dumouchel, MSN, APRN

**Date:** May 15, 2012

**Time:** 5:15 – 6 p.m., Registration/Dinner
6 – 9 p.m., Program

**Location:** Phillips House Banquets and Meetings, 780 Morrissey Blvd., Boston, 02122; 800-890-0032, www.phillipsboston.com

**Fee (by check only):** Member/Associate Member, free; Non-member $95. *Requires a $25 placeholder fee, which will be returned upon attendance.

**Contact hours:** Will be provided.

To register: Complete the Regional Registration Form located on page 26 and submit to the MNA Region 5 Office, 340 Turnpike Street, Canton, MA 02021. For questions, please contact Region 5 at 781-821-8255 or email region5@mnarn.org
Diabetes: What Nurses Need to Know

**Description:** This program will discuss the pathophysiology and classification of Diabetes-Types 1 and 2. Oral pharmacological agents and a comprehensive update on insulin therapy will be presented. Nursing management of the newly diagnosed patient and diabetic patients in the pre/post operative, ambulatory, and homecare settings will be addressed.

**Presenter:** Ann Miller, ANP, MS, CDE

**Date:** April 12, 2012

**Time:** 8 – 8:30 a.m., Registration 8:30 a.m. – 4 p.m., Program (light lunch provided)

**Location:** MNA Headquarters, 340 Turnpike St., Canton; 781-821-4625.

**Fee:** Member/Associate Member Free; Non-member, $195. Requires a $50 placeholder fee, which will be returned upon attendance.

**Contact Hours:** Will be provided.

**MNA Contact:** Liz Chmielinski, 781-830-5719

Advanced Cardiac Life Support (ACLS) Certification and Recertification

**Description:** This AHA course will provide information on the clinical management of medical emergencies through a case study approach. This is a two-day certification and a one-day re-certification course. This challenging course is best suited for nurses working in acute or critical care areas. Attendees must be proficient in dysrhythmia interpretation.

**Presenters:** Carol Mallia, RN, MSN; Mary Sue Howlett, MS, FNP-BC, CEN and other instructors for the clinical sessions

**Dates:** April 25 and May 2, 2012 (certification) May 2, 2012 only (recertification)

**Time:** 8:30 – 9 a.m., Registration 9 a.m. – 5 p.m., Program (light lunch provided)

**Location:** MNA Headquarters, 340 Turnpike St., Canton; 781-821-4625

**Fee:** Certification: MNA Members/Associate Members Free; Non-member, $250 Recertification: MNA Members/Associate Members Free; Non-member, $195 *Requires $75 placeholder fee, which will be returned upon attendance.

**Contact Hours:** Will be provided for first-time certification only. Contact hours for ACLS certification are awarded by Ocean State Educational Seminars, which is a provider of contact hours through the Florida State Board of Nursing FBN2534. Contact hours are not provided for recertification.

**MNA Contact:** Liz Chmielinski, 781-830-5719

Oncology for Nurses

**Description:** This program will provide a comprehensive overview of cancer nursing, including treatments, oncological emergencies, pain management and palliative care. This is not an advanced class in cancer nursing.

**Presenter:** Marylou Gregory-Lee, MSN, APN-BC, OCN, Adult Nurse Practitioner

**Date:** June 6, 2012

**Time:** 8 – 8:30 a.m., Registration 8:30 a.m. – 4 p.m., Program (light lunch provided)

**Location:** MNA Headquarters, 340 Turnpike St., Canton; 781-821-4625

**Fee:** Member/Associate Member Free; Non-member, $195. Requires a $50 placeholder fee, which will be returned upon attendance.

**Contact Hours:** Will be provided.

**MNA Contact:** Phyllis Kleingardner, 781-830-5794

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**To register:** Complete the MNA Headquarters Registration Form located on page 27 or register online at massnurses.org. Credit card payment is available for CE courses offered at MNA headquarters.
Registration Directions: Registration will be processed on a space available basis. All programs are free to members, however, there is a placeholder fee of $25 for all evening programs and $50 for all full day programs. This fee will be returned upon attendance at the program. Program fees for non-members are $95 for evening programs and $195 for all full day programs. If registrants do not attend the program or call to cancel, the fee will NOT be refunded. Please submit a separate check for each program and mail to the appropriate region office. If registering for programs in more than one region, please duplicate the registration form or download from www.massnurses.org and submit registration forms to the appropriate region offices with the specified fee.

Payment: Payment may be made by mailing a separate check for each course to the appropriate regional headquarters. At this time regional offices are unable to process credit card information for this purpose. Thank you for your understanding on this matter.

Program Cancellation: MNA reserves the right to change speakers or cancel programs due to extenuating circumstances. In case of inclement weather, please call the MNA Region Office registration contact telephone number to determine whether a program will run as originally scheduled. Registration fee will be reimbursed for all cancelled programs.

Contact Hours: Contact hours will be awarded by the Massachusetts Nurses Association for all programs.

Region 1: Make check payable to: MNA Region 1 Office and mail to MNA Region 1 Office, 241 King Street, Suite 226, Northampton, MA 01060.

- Your Best Defense: Lowering Your Legal Risks with Documentation and More & Medical Mistakes and Mishaps
  - Non-member: $195 • Member/Associate Member: $50 placeholder fee
- First Aid to 911: Considerations for Pediatric Assessment
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee
- De-Escalation Techniques: Protecting Nurses and Patients
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee

Region 2: Make check payable to: MNA Region 2 Office and mail to MNA Region 2 Office, 365 Shrewsbury Street, Worcester, MA 01604.

- Recognizing and Supporting Our Nurse Colleagues with Substance Abuse Problems
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee
- Medical Mistakes and Mishaps
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee
- Managing Conflict: The Verbal Solution
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee

Region 3: Make check payable to MNA Region 3 Office and mail to MNA Regional Council 3, PO Box 1363, Sandwich, MA 02563.

- Mental Health Update: Bipolar Disorder & Borderline Personality Disorder
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee
- Coping with Stress: The Mind/Body Connection-A Program for Nurses
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee
- A Response to Workplace Violence and Its Implications for Nurses
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee

Region 4: Make check payable to: MNA Regional Council 4 and mail to MNA Regional Council 4, 50 Salem St., Building A, Lynnfield, MA 01940.

- Managing Conflict: The Verbal Solution
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee
- The Kinematics and Initial Assessment of a Multi-System Trauma Patient
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee
- Current Trends in Bariatric Surgery
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee

Region 5: Make check payable to: MNA Region 5 Office and mail to MNA Region 5, 340 Turnpike Street, Canton, MA 02021.

- Infectious Diseases Update: TB and Hepatitis
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee
- What to Do When the Mass. BORN Comes Knocking on Your Door
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee
- Acute and Chronic Renal Disease
  - Non-member: $95 • Member/Associate Member: $25 placeholder fee

To successfully complete a program and receive contact hours or a certificate of attendance, you must: (1) sign in; (2) be present for the entire time period of the program; and (3) complete and submit the program evaluation.

The Massachusetts Nurses Association is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.

Chemical Sensitivity: Scents may trigger responses in those with chemical sensitivities. Please avoid wearing scented personal products when attending MNA continuing education programs.

Disability Help: Please contact the MNA Regional Council Office with any questions about special needs accessibility.
Registration Directions: Registration will be processed on a space available basis. All programs are free to members; however, there is a placeholder fee of $25 for all evening programs and $50 for all full day programs (except for ACLS). This fee will be returned upon attendance at the program. Program fees for non-members are $95 for evening programs and $195 for all full day programs (except for ACLS). If registrants do not attend the program or call to cancel, the fee will NOT be refunded.

For courses offered at MNA headquarters, registration is available online. Visit our Web site at www.massnurses.org and register for the course of your choice from our Events Calendar.

Payment: Payment may be made with a Master Card, Visa, AMEX or Discover by calling the MNA contact person listed or by mailing a separate check for each program to the MNA, 340 Turnpike St., Canton, MA 02021.

Program Cancellation: MNA reserves the right to change speakers or cancel programs due to extenuating circumstances. In case of inclement weather, please call the MNA at 781-821-4445; please call to verify receipt, 781-821-4625.

For courses offered at MNA headquarters, registration is available online. Visit our Web site at www.massnurses.org and register for the course of your choice from our Events Calendar.

Contact hours will be awarded by the Massachusetts Nurses Association for all programs except for ACLS certification. Contact hours for ACLS certification are awarded by the Rhode Island State Nurses Association.

To successfully complete a program and receive contact hours or a certificate of attendance, you must: (1) sign in; (2) be present for the entire time period of the program; and (3) complete and submit the program evaluation.

The Massachusetts Nurses Association is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.

Contact hours for ACLS certification are awarded by Ocean State Educational Seminars, which is a provider of contact hours through the Florida State Board of Nursing FBN2534.

Chemical Sensitivity: Scents may trigger responses in those with chemical sensitivities. Please avoid wearing scented personal products when attending MNA continuing education programs.

Disability Help: Please contact the MNA Division of Nursing with any questions about special needs accessibility.

Directions to MNA Headquarters


From the North: Take I-95 S/ RT-128 S to I-93 N/ US-1 N. You will see a sign reading “I-93 N to Braintree/Cape Cod.” Continue onto I-93 N/ US-1 N for 1.2 miles. Take Exit 2A/Route 138 S/Stoughton. Follow directions from Route 138 below.


From Route 138 (Turnpike Street): Drive approximately 2 miles (you will pass through two traffic lights). Take a left at the billboard which reads 320-348 Turnpike Street. Follow the road, which curves to the right. You will see the brick Massachusetts Nurses Association building. The MNA is on the second floor.

Due to heavy traffic volume on major roadways, please allow extra travel time.

Please print. You may make copies of this form or download this brochure at www.massnurses.org.

Name: _______________________________________________ Phone: ______________ Email: _____________________________________________

Address: ____________________________________________ City: __________________ State: __________ Zip: ________________

Place of Employment ________________________________________________________________

_______________________________________ RN _______ LPN _______ APN _______ Other (specify) __________

Please mail this completed form with check made payable to MNA at: Massachusetts Nurses Association • 340 Turnpike St. • Canton, MA 02021

Payment may also be made by: □ VISA □ MasterCard □ American Express □ Discover

Account #: ____________________________________________ Expiration Date: __________ Security Code: __________

For Credit Card registrations you may fax this form to: 781-821-4445; please call to verify receipt, 781-821-4625.

For office use only: Chg code: __________ Amt: Date: __________ Ck#: _________ Ck Date: __________ Init: __________

☐ Basic Dysrhythmia Interpretation Non-member: $195 • Member/Associate Member: $50 placeholder fee

☐ The Environment and Its Impact on Nurses Non-member: $95 • Member/Associate Member: $25 placeholder fee

☐ What’s Bugging you? Nursing Considerations in Insect-borne Illness Non-member: $95 • Member/Associate Member: $25 placeholder fee

☐ Diabetes: What Nurses Need to Know Non-member: $195 • Member/Associate Member: $50 placeholder fee

☐ ACLS Certification and Recertification Certification Non-member: $250 • Certification Member/Associate Member: $75 placeholder fee

Recertification Non-member: $195 • Recertification Member/Associate Member: $75 placeholder fee

☐ Oncology for Nurses Non-member: $195 • Member/Associate Member: $50 placeholder fee
The health and safety of direct patient care nurses is a priority for the MNA. Federal and state regulators encourage immediate reporting and treatment following an exposure to human blood; however, there is evidence of work environment barriers that prevent some health care workers from receiving the highest standard of care in a timely and efficient manner.

Possible barriers include:

• Health care providers and managers may not recognize conditions which represent a potential bloodborne pathogen exposure emergency.
• Training to help providers recognize and understand these conditions may be inadequate or non-existent.
• Health care providers exposed to a patient’s blood may not be able to obtain the status of the source patient’s blood.
• Post-exposure treatment options and timing can be compromised as a result of difficulties in obtaining source patient informed consent for blood testing.

We need your help in taking a short on-line survey to learn about the perceptions of these barriers by nurses and other direct patient care providers. MNA will use the data collected to take action to improve the efficiency and timeliness of post-exposure follow-up procedures.

We value your professional input and with your help, we will improve the system and the quality of care for health care workers. Please take a few minutes to visit this Web site and complete the survey.

www.surveymonkey.com/s/MNA-BBP
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Not every applicant will qualify for these programs.
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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 health care 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 health care professional to verify to the satisfaction of MNA on an annual basis his/her eligibility for 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 submit to the Membership Division of MNA by April 1.

Name __________________________________________________________________________________________
Address ________________________________________________________________________________________
City ___________________________ State _____________________ Zip __________________________
Telephone: Daytime ___________________________ Evening ___________________________

This is to certify that I __________________________________________________________________________, RN was paid for a total of _____________________ hours in the year January 1, 2011 through December 31, 2011 *
at the following MNA facility(s) of employment for the year of application (list each MNA facility separately):
1. _____________________________________________________________________________________________
2. _____________________________________________________________________________________________
3. _____________________________________________________________________________________________

I certify under penalty of perjury that the information herein is true and complete to the best of my knowledge.

Signed _________________________________________________________________________________________
Date ___________________________________________________________________________________________

* MNA reserves the right to verify this information to determine eligibility

Confirmation of receipt of this application will be emailed to your MNA email account.

Massachusetts Nurses Association • 340 Turnpike Street • Canton, MA 02021
The MNA is offering an exciting new opportunity for you to join the largest professional registered nurse organization in Massachusetts.

The **New MNA Associate Member Program** opens the door for you to become involved and work with other nurses to make a difference today and for future generations of nurses.

Who is eligible to be an associate member?
Any registered nurse who is not covered by an MNA collective bargaining agreement.

What benefits am I entitled to as an associate member?
• You will receive the MNA’s newsletter, *the Massachusetts Nurse*, and other information about issues affecting your profession.
• You can collaborate with other nursing professionals through MNA committees in an effort to solve problems facing the profession. This includes groups dealing with: clinical nursing practice, occupational health & Safety, workplace violence, nursing ethics, diversity, emergency preparedness and legislative/political action.
• You will have access to MNA’s free CE programs:
  » Includes full-day, half-day and evening CE programs
  » Provides access to free online CE offerings

You can take advantage of MNA's member-only discounts, some of which include:
• MNA Endorsed Nursing Malpractice Insurance
• Entertainment Discounts: Disney, Discount Movie Passes, Six Flags New England Discounts
• Travel Discounts
• Discounts on Cell Phone Service Plans: AT&T, Sprint, T-Mobile
• Discounts on Household Needs: Auto/Homeowners Insurance, Oil Network Discounts

What is the dues rate for an associate member?
Subject to verification, nurses who qualify for associate membership may elect to pay $20 per month or $240 per year as their annual dues.

For more information on how to become an associate member, call the MNA membership department at 800-882-2056 x726 or e-mail jfergus@mnarn.org.

You may also visit the MNA Web site at www.massnurses.org.