

the Massachusetts

# nurse



THE NEWSLETTER OF THE MASSACHUSETTS NURSES ASSOCIATION

Vol. 84 No. 2



## Controlling Our Destiny!

ADVOCATE



**RNs take fight for safe patient care directly to the voters with ballot campaign**

July/August 2013



On the web: [massnurses.org](http://massnurses.org)

**Inside: MNA General Election info**

# MNA shares safe staffing message at nursing conference in Boston

“Safe Staffing Now” was the overriding cry heard from nurses from all over the country, including Alaska and Hawaii and beyond (such as Canada, Bahamas, Israel and Peru) who stopped to talk and share their patient safety and staffing concerns with MNA and NNU staff at our tables at this year’s huge Critical Care Nursing Expo at the Boston Convention Center in May. An estimated 8,000 nurses attended the three-day conference sponsored by the American Association of Critical Care Nurses targeted at providing education for high acuity and critical care nurses.

There was considerable discussion about improved working and patient care conditions in California since the passage of nurse-to-patient staffing ratio legislation and much agreement on how to achieve safe patient care staffing ratios in Massachusetts and across the country. ■



## It's never too late to stay connected: MNA launches retiree group

The initial meeting for the MNA Retiree Group was held at the MNA headquarters in Canton this spring. MNA realizes that retired nurses still have much to contribute to the profession and the association and a retiree group is an excellent way to stay connected and involved.

The mission and goals of the group will be determined by the group’s members in conjunction with the Board of Directors. At the initial meeting the retirees were given examples by the MNA staff directors of areas where they can be of help. One example is the MNA Safe Patient Care ballot initiative now underway.

Other meetings are planned, so if you are retired or soon to be retired and want to join call Eileen Norton at 617-543-4943 or email ENorton@mnarn.org. ■



**Members of the new MNA Retiree Group.** Standing, from left: Brian Paul, Linda Winslow, Mary Colby, Jeannine Williams, Tina Russell, Kathy McDonald, Donna Kelly-Williams, Rosemary O'Brien, Ruth Carrington, Liz Kennedy, Judith Dyer. Seated: Dorthoy Bentley, Pat Demers Burke, Nancy Pearl.

- 3** President's column: Fighting for patient safety and protection
- 4** Update on new law banning mandatory overtime
- 4** Funding assured for Taunton State Hospital for another year
- 5** Advocating successfully to save pediatric mental health unit
- 6** BFMC charged for illegal attempt to silence RNs in Greenfield

- 7** Medford school RNs file for mediation seeking end to discriminatory practice
- 8** Safe Patient Care ballot campaign: How you can help
- 10** Convention time!
- 12** MNA election bios
- 18** Free CE courses: Fall/winter schedule



### Like us on Facebook

The MNA Facebook page is an excellent source for the latest news and information about the organization, nursing/health care and our ongoing activities and campaigns. This page is all about community. We invite you to get involved and welcome members' thoughts, comments, links, photos, questions and opinions. [Facebook.com/massnurses](https://www.facebook.com/massnurses).



## **Our fight for patient safety and protection**

***A new approach to an old and persistent problem of the critical need for safe patient limits  
MNA's expertise, resources and humanity key to success***

By **Donna Kelly-Williams**  
*MNA President*

This issue of the *Massachusetts Nurse* is dedicated to a new and exciting approach by our members to address the single most important issue impacting the quality and safety of our patients, and the integrity of our nursing practice—the need for enforceable limits on nurses' patient assignments in our acute care hospitals.

Numerous surveys of our membership over the years, both in our individual bargaining units and statewide, have consistently shown RN staffing levels and the safety of nurses' patient assignments to be the most important issue for our members, and the nursing community in general. In the last 15 years, there have been more than 17 strike votes and at least three strikes where the issue of patient safety and RN staffing levels was at the center of these disputes. In the last three years, nurses at St. Vincent Hospital in Worcester, Tufts Medical Center, and UMass Memorial Medical Center were on the verge of striking over this issue and last fall Quincy Medical Center conducted a one-day strike to win limits on patient assignments to protect their patients.

The true victims of this crisis have been our patients. According to the CDC, more than 2,000 patients a year die from preventable medical errors and infections, complications directly related to the lack of safe limits on nurses' patient assignments. More than 40 studies in the most prestigious medical and nursing journals in the world have been published that clearly show that unsafe patient limits for nurses is a direct cause of a number of serious complications, increased cost for health care and, yes, as stated above, thousands of preventable patient deaths. And the situation is only getting worse as hospitals, many of them owned by Wall Street conglomerates, or massive health care networks, have embarked on an unprecedented effort to slash services, cut staff and increase patient assignments – in the interest of profits.

If you have been a member of the MNA/ NNU for any length of time, you are well aware of our long struggle to win passage of legislation to establish safe limits on nurses' patient assignments to address this crisis. The first version of this legislation was introduced in 1995, and we have filed versions of the bill every legislative session since then. Earlier in the decade, a version of this bill passed the House of Representatives two times with veto proof majorities, yet we have never been able to



Donna Kelly-Williams

get the legislation through the Senate.

In the wake of the economic crisis of 2009, the legislative appetite for this legislation waned, and the MNA/ NNU changed its emphasis on addressing this issue away from the legislature and

focused more on winning staffing changes at the bargaining table. As mentioned above, we have found that any attempt to win staffing protections in our union contracts require a minimum of an overwhelming strike vote or strike. And when we win those protections, they come with a price, which is the hospital's call to pay for appropriate staffing by lowering nurses' pay and benefits.

Once again we have filed legislation to address this issue, but our membership has made it clear that they want us to simultaneously pursue a different approach to winning these much-needed patient protections. At our annual convention last year, a motion was put forth and passed by our membership that called upon the Board of Directors to move this issue directly to the public—our patients—through the creation of a binding question on the 2014 ballot that would result in a law to establish safe limits on nurses' patient assignments for every unit in the hospital, with the addition of an acuity system to further codify safe patient limits based on the acuity of their patients for that shift.

In response, the Board has worked with MNA staff to develop a campaign to pursue the will of the membership to embark on the campaign to place this question on the 2014 ballot, and eventually to win the public vote to pass this long-awaited law.

We believe nurses are in a perfect position to succeed in this approach, as you are the most trusted professionals on the planet, and because, within your own network of family and friends, you have an easily identifiable group of folks who understand what you do and who would be readily willing to sign petitions in support of this initiative. That doesn't mean this effort won't take a concerted effort from our membership and staff, as well as the resources to mobilize this campaign. To that end, the Board of Directors, as directed by

the membership, is applying all the required resources to this campaign, and our national organization, National Nurses United, recently voted to offer us the logistical and financial support we will need to win this fight.

This issue of the *Massachusetts Nurse* provides information about this exciting initiative and how it works (see Pages 8-9). In addition, MNA/ NNU members in all of our bargaining units are joining this effort, and organizing in your facilities to gather support for this initiative.

Be on the lookout for information in your bargaining unit as to how you can join the

**At our annual convention last year, a motion was put forth and passed by our membership that called upon the Board of Directors to move this issue directly to the public—our patients—through the creation of a binding question on the 2014 ballot.**

campaign. You can also visit the MNA website for more information at [www.massnurses.org](http://www.massnurses.org) as well as a new campaign web site we have launched to educate the public about this issue with the theme "Just Ask About Patient Safety." The theme is based on the fact that the most important variable impacting the safety of our patients is the number of patients assigned to a nurse at one time. As you know, that number can have life and death consequences for our patients. The site helps the public understand the importance of safe RN staffing, shares research on the issue, and tells them how to get involved in our campaign to make hospitals safer for them and their families. The new ballot campaign website is [www.PatientSafetyAct.com](http://www.PatientSafetyAct.com). We encourage you to visit the page and to share it with your friends and neighbors. ■

# Nursing practice alert: Update on new law banning mandatory overtime

Last August, Gov. Deval Patrick signed into law a health care payment reform bill that includes a ban on mandatory overtime proposed by the MNA/NNU. That provision prohibits hospitals from requiring a nurse to work beyond her regularly scheduled shift except in the case of an emergency situation where the safety of the patient requires its use and when there is no reasonable alternative.

This summer, the Massachusetts Health Policy Commission completed long-awaited guidelines, which define what constitutes an emergency situation for purposes of allowing mandatory overtime.

Consistent with the MNA/NNU and the Legislature's intent, the Health Policy Commission made clear in its statement of goals for the emergency guidelines that the law and the new guidelines "prohibit the use of mandatory overtime as a staffing strategy."

The guidelines achieve the MNA/NNU goal by allowing administrators to use mandatory overtime only in rare and specific circumstances, including:

- Cases of municipal, state or national emergencies
- In the wake of major catastrophic events, such as the Marathon bombing, major storm or act of terrorism; or a major internal hospital disaster, such as a power outage, riot or building collapse
- The guidelines clearly prohibit declaration of an emergency due to day-to-day hospital operations and prohibit mandatory overtime as a result of understaffing of nurses, sick calls, the flu season and leaves of absence

The guidelines also require hospitals to provide reasonable alterna-

## What to do if your hospital attempts to violate the law

Under the new guidelines, hospitals must file reports (via an online reporting system) for every instance within 30 days of when they declare an emergency and assign mandatory overtime. They must provide an explanation of what type of emergency occurred to cause the need for MOT, list the number of nurses assigned overtime and the number of hours each nurse was forced to work beyond his or her shift.

The hospital reports are not readily available to the public, though the MNA is working with the DPH to ensure greater public transparency. Also, the MNA is concerned about the accuracy of the reporting by hospital administrators.

To ensure the industry complies with the law and is accurate in its reporting, the MNA encourages nurses to report all instances of mandatory overtime to the MNA online at [massnurses.org](http://massnurses.org). We will track your reports against those filed by the hospitals to ensure all instances of mandatory overtime are reported. More importantly, we will use this information to work with the Health Policy Commission to make changes to their guidelines to prevent hospitals from abusing this law.

tives to the use of mandatory overtime by utilizing float pools, per diems, and the posting of full schedules up to four weeks out. Finally, the guidelines provide for ongoing monitoring of the industry's compliance with the new rules, and the opportunity to revisit the guidelines if they are being abused. ■

## Taunton State Hospital funding assured through June 2014

Another victory was achieved for those affected by mental illness in Southeastern Massachusetts through this year's state budget. MNA nurses and advocates worked with the Massachusetts Senate and House of Representatives to guarantee funding for the remaining 45 continuing care beds at Taunton State Hospital through June 30, 2014.

While the House of Representatives' budget funded the continued operation of Taunton State Hospital, it was only provided through December, when the Mental Health Advisory Commission formed in last year's budget submits its report on the mental health system to the Legislature. The original intent of that report was to provide detailed information that the Legislature can use for future funding and policy decisions. Sens. Marc Pacheco (D-Taunton) and John Keenan (D-Quncy) filed a budget amendment to extend the funding through June 2014 so that the final report could be used as a resource while formulating the state budget for the next fiscal year, which starts in July 2014. Their budget amendment received more than 16 co-sponsors and was adopted by the Senate.

Additionally, Pacheco and Keenan were successful in securing passage of other budget amendments aimed at keeping mental health services

at Taunton State Hospital. One directs the Mental Health Advisory Commission to study the potential future use of the Cain building at the state hospital to determine how to best meet the mental health needs in the commonwealth. The recommendations will look at development of three pilot programs: a state-operated pilot crisis stabilization unit which would be fully operational 24 hours a day, seven days a week; a pilot program for non-violent offenders with mental health diagnoses currently serving their sentences in state or county correctional facilities; and a pilot program for females who are committed for substance abuse detoxification and are evaluated as having co-occurring mental health and substance abuse disorders. This would allow for the continued access to care in Southeastern Massachusetts while also targeting which services are needed most.

Thanks to the continued work of MNA nurses and the support of our friends in the Legislature, the final version of the budget included these important provisions from the Senate. Taunton State Hospital will continue to provide treatment for 45 patients and further study will take place to determine the need for services in Southeastern Massachusetts. ■

the Massachusetts  
**nurse**

ISSN 0163-0784: USPS 326-050

**President:** Donna Kelly-Williams, 2011-2013

**Vice President:** Karen Coughlin, 2012-2014

**Secretary:** Ellen Farley, 2011-2013

**Treasurer:** Ann Marie McDonagh, 2012-2014

### Regional Directors, Labor:

**Region 1:** Ann Lewin, 2011-2013; Sandra Hottin, 2012-2014

**Region 2:** Patricia Mayo, 2011-2013; Katie Murphy, 2012-2014

**Region 3:** Karen Gavigan, 2011-2013; Beth Piknick, 2012-2014

**Region 4:** Patricia Rogers Sullivan, 2012-2014; Kay Marshall, 2011-2013;

**Region 5:** Dan Rec, 2011-2013; Michael Robinson, 2012-2014

**Directors (At-Large/Labor):** Linda Condon, 2012-2014;

Kathy Metzger, 2011-2013; Diane Michael, 2012-2014;

Michael Savoy, 2011-2013; Betty Sparks, 2012-2014;

Nora Watts, 2011-2013; Colleen Wolfe, 2011-2013

**Directors (At-Large/General):**

Sandy Eaton, 2012-2014; Rick Lambos, 2012-2014; Kathy

Logan, 2011-2013; Kathy Reardon, 2012-2014; Paula Ryan,

2011-2013; Meredith Scannell, 2012-2014; Susan Wright

Thomas, 2011-2013

**Labor Program Member:**

Gloria Brady, 2011-2013

**Executive Director:** Julie Pinkham

**Managing Editor:** David Schildmeier

**Editor:** Jen Johnson

**Production Manager:** Erin M. Servaes

Published bimonthly by the Massachusetts Nurses Association, 340 Turnpike Street, Canton, MA 02021.

Subscription price: \$25 per year. Foreign: \$30 per year  
Single copy: \$3.00

Periodical postage paid at Canton, MA and additional mailing offices.

**Postmaster:** Send address corrections to Massachusetts Nurse, Massachusetts Nurses Association, 340 Turnpike Street, Canton, MA 02021.

Massachusetts Nurses Association   National Nurses United

## RNs become activists when kids' mental health unit comes under attack

In April, the Cambridge Health Alliance made a stunning and unexpected announcement: it would be eliminating 11 of its 27 inpatient beds for child psychiatric care and ceasing services for children under age 8.

The CHA, a hospital system with three campuses in cities just north of Boston, had long been dedicated to caring for the emotional, mental and behavioral health needs of the commonwealth's children. Through the unique in-patient programs and services offered at its Child Assessment Unit (CAU) and Adolescent Assessment Unit (AAU), the CHA had earned a reputation as an innovator and leader in psychiatric care for the young. In fact, the CAU has been an award-winning facility entirely focused on helping children ages 3 to 12 who are in acute emotional or behavioral distress.

That's when the dedicated nurses who work with these troubled children decided to become advocates and worked to stop the closure.

"These are the sickest children in the state," said Kerry McCalister, RN. "Some are suicidal or homicidal, some are experiencing auditory or visual hallucinations, and some are so aggressive they can't make it through a school day. From an advocacy point of view, it's very concerning because this is a time when children and families need *more* access to care."

The unit's nurses began a petition signing and button campaign to bring public attention to the issue and building a team of supporters who were dedicated to saving the CAU. Next on the agenda: putting on a show of force at a public hearing on the proposed closing.

As part of the legal process to close the unit, the state Department of Public Health invited testimony at a May hearing. Well over 100 family members, nurses, care providers, legislators and mental health advocates packed

the seats and signed up to have their chance to explain why the CAU's services are essential to the community.

"The children in the CAU come to us with some of the most challenging and difficult diagnoses that a child could ever face," testified Gina Galarza, an MNA nurse who has worked on the unit for 13 years. "And the CAU is one of the only facilities in the state that can help them by providing age appropriate services in an age-specific environment. Where will they go if this unit is closed?"

"If the proposed reduction and subsequent closure move forward," testified Paula Robicheau, an RN on the CAU, "the message to our very youngest patients will be this: 'Sorry, someone else will have to take care of you, we can't.' For many of these young children, that is a message they have heard too many times already in their young lives: from families, from foster families, from schools, and from various placement programs. By decreasing the overall services and beds available to these children, CHA is saying that these stressed and troubled children and their families are not a priority."

"There is no clinical justification for this closing," testified Donna Kelly-Williams, a pediatric nurse at Cambridge Hospital and president of the MNA. "If it happens, children who are suffering from serious mental health conditions will wait longer for care, they will

travel long distances for care, or they will go without care altogether. We are here today to urge the Department of Public Health to prevent this closure from happening."

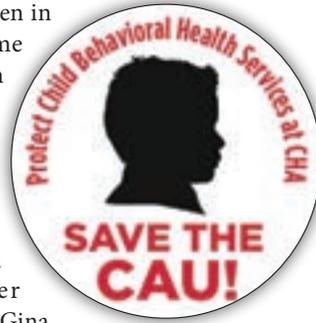
### Double dose of success

Following the public hearing, the DPH reviewed the various testimonies, details and statistics with one goal in mind: to make a recommendation as to whether or not the services the CAU offers are, in fact, essential. It took less than three weeks for the DPH to decide that the unit provides essential services to vulnerable children from throughout Eastern Massachusetts and that it should be maintained.

A week later, management at Cambridge Hospital released the following statement: "We are pleased to let CHA staff know that Cambridge Health Alliance will continue operations at both the Child Assessment Unit and Adolescent Assessment Unit during the next fiscal year ... we [have] received an overwhelming outpouring of support from elected officials, advocates, patient families, and local residents, who rallied in support of the award-winning, top-quality care provided at both units. Our decision to withdraw our unit integration notice was informed by this support ..."

This is just the latest example of MNA nurses stepping up to support their patients, using a phrase they have said too many times in recent years: "You're balancing the hospital's budget on the backs of those who are most vulnerable!"

After the announcements, MNA President Kelly-Williams said, "We will forge ahead and work with all stakeholders and the recently established Mental Health Commission to address the growing mental health crisis in the commonwealth." ■



## Morton Hospital RNs help convince DPH to support keeping pediatric unit open

Nurses at Morton Hospital helped convince the state to issue a finding against closing a Level II 13-bed pediatric unit, which Steward Health Care sought to close.

RNs, joined by parents, former patients and elected officials, testified at a May hearing about the harmful effects of closing the unit that has served the area's children for more than 50 years.

The state Department of Public Health ruled in June that the unit provides an "essential service" and cited a number of serious issues about the planned closing.

Staffed by a team of expert caregivers, including RNs and LPNs who together have more than 200 years of experience, the unit cares for children who suffer from a variety of acute medical conditions, undergoing tests or undergoing and recovering from surgical

procedures.

"We greatly appreciate DPH's findings that this is an essential service, and that the loss of this service will deprive children throughout the region the care they deserve," said Joyce Wilkins, RN, chair of the MNA/NNU local bargaining unit at Steward Morton Hospital. "Our hope now is that the unit remains open to continue to provide excellent care for children and that state officials do whatever is necessary to ensure that this service remains open for these vulnerable children."

The DPH called into question the census data provided by Morton Hospital management to justify the closing and demanded that Steward provide detailed records of every patient cared for in the unit for the last three years, while also calling upon Steward to provide a detailed plan as to how they will address the concerns of the



State Sen. Marc Pacheco (D-Taunton), speaking against the proposal to close the pediatric unit at Morton Hospital.

community and maintain access to services for these children, which will then be reviewed by DPH. ■

# NLRB issues complaint against BFMC for illegal attempt to silence RNs and for its refusal to provide info regarding its proposal to increase overtime

The National Labor Relations Board, the federal agency that oversees laws governing collective bargaining and worker's rights, has issued a complaint against Baystate Franklin Medical Center. The complaint is based on Baystate management's attempts to illegally restrict union activity among the hospital's 209 nurses who are members of the Massachusetts Nurses Association/National Nurses United (MNA/NNU), and Baystate's refusal to provide information in the course of negotiations with the MNA. The NLRB has scheduled a hearing on the complaint for Oct. 2.

The nurses at BFMC have been in contract negotiations for 18 months with Baystate management. The first part of the complaint regards communications from hospital managers to nurses during the period of a one-day strike last October. In those communications nurses were instructed that they were not to discuss any union matters in any areas of the hospital including hallways, nurses' stations and the hospital cafeteria. This is a clear violation of employees' rights under the National Labor Relations Act.



Greenfield-area citizens showed their support for Baystate Franklin Medical Center nurses at a July 25 rally.

"It was clear to us that Baystate was attempting to break the law to silence nurses, who were only exercising their right to advocate for ourselves and our patients," said Linda Judd, RN, a nurse at the hospital and co-chair of the MNA/NNU bargaining unit for BFMC. "We are pleased that the NLRB has validated our position and supports our effort to exercise our rights under the law."

The second part of the complaint is based on Baystate's refusal to provide information regarding proposals they have made in the course of negotiations. A central issue in the negotiations and behind the nurses' strike is the nurses' desire to end the practice of nurses having to work excessive hours beyond their shift as a result of the hospital's failure to provide appropriate and safe RN staffing levels. Academic and medical journals have published numerous studies that show when nurses work beyond the length of their normal shift (usually eight, 10 or 12 hours) the likelihood of errors increases and patient safety is put at risk. One of the current contractual provisions to curb extended shifts is the requirement that any work beyond the end of the shift is paid at an overtime rate. Baystate continues to insist on eliminating the overtime protection for working beyond the shift's end. In making its demand

***"Management is illegally withholding information while demanding that we accept dangerous working conditions, which we cannot do."***

for this concession, Baystate management has claimed that this is the "industry standard practice for overtime," yet has repeatedly refused to respond to the MNA/NNU's many requests for factual information to support its position, which precipitated the NLRB's complaint against the hospital.

The nurses adamantly oppose this practice because they know this protection is in place in all MNA/NNU hospital contracts (which include 70 percent of the hospitals in Massachusetts) and is a policy at most of the state's few non-union hospitals as well.

Nurses at BFMC fear that eliminating this curb on management's behavior would result in far more instances of nurses being required to work extended shifts since the economic disincentive would be removed.

"This issue is of great importance to both nurses and patients, because an exhausted nurse cannot provide safe patient care," said Donna Stern, RN, a nurse at the hospital and co-chair of the local bargaining unit at BFMC. "Our management is illegally withholding information while demanding that we nurses accept dangerous working conditions, which we cannot do."

This NLRB complaint follows an NLRB intervention last summer, when Baystate management unlawfully declared an impasse in negotiations with the nurses at Baystate Visiting Nurse Association and Hospice in Springfield. Because of the NLRB's intervention, Baystate rescinded its declaration of impasse and returned to negotiations. However, an additional set of charges related to bad-faith bargaining are now being filed by the MNA nurses at that Baystate facility.

There has been an outpouring of support for nurses' collective bargaining rights over the last year. At last summer's Democratic State Convention in Springfield, the delegates unanimously passed a resolution calling on Baystate to conduct good faith negotiations with the MNA nurses and to come to a fair agreement. The Greenfield City Council passed a similar resolution last year. Thousands of Franklin County residents have signed a petition of support for the BFMC nurses and delegations of community supporters and elected officials have called on Baystate to avoid further conflict and settle a fair contract with the nurses. ■

## Medford school RNs file for mediation seeking end to discriminatory practice

The Medford school nurses filed for mediation with the Massachusetts Division of Labor Relations after trying repeatedly to work with Superintendent Roy Belson and the school committee to resolve the long-outstanding contract issue of pay equity with teachers and other professionals in the school system.

The school nurses, who believed they had made significant headway on the issue of pay equity during their last contract talks, have endured repeated delays since filing to reopen their contract in October of 2011, which was a full eight months ahead of the existing contract's expiration date. Instead, for almost a full year and a half, the Medford School District failed to answer related written requests, telephone calls and, overall, failed to meet its obligation to bargain with the school RNs.

Finally, in February, the nurses were contacted by the school district, and the first negotiation session got underway on March

21. Since then, things have remained stalled:

- During prior negotiations, the school committee and superintendent made a commitment to resolve the long outstanding issue of pay equity. As a result, the nurses developed and presented a cost-neutral proposal for pay equity early in the current negotiations.
- The superintendent and school committee have given no definitive response to their prior commitment to pay equity or the nurses' current proposal.

The Massachusetts Department of Education has, for 18 years, required school nurses to obtain the same education as teachers, social workers, psychologists, librarians, occupational therapists, physical therapists and adjustment counselors.

While Medford pays its professional staff exactly the same, it excludes its school nurses and pays them almost 20 percent less. The

mayor, school committee and superintendent offer no explanation for this discriminatory treatment. The nurses' proposal would cost no more to implement than the salaries due under the present discriminatory system.

"We feel we have an irrefutable case to make in mediation given the vital role we play in our school system, and in view of the fact that school nurses have the exact same level of education and certification requirements as other professionals in the system," said Lucinda Riggan-Jay, RN, chair of the nurses' local bargaining unit. "Yet, we are not paid as professionals. In fact, we aren't even being treated like professionals at the table in these current negotiations."

The 11 school nurses are responsible for providing full nursing coverage to 10 schools and care for more than 5,000 students who depend on their professional health services to be safe, to stay well and to be prepared to learn. ■

### Prior to annual assembly, nurses rally against oil pipeline

With the magnificent expanse of the Golden Gate Bridge as backdrop and pathway, MNA and NNU nurses from across the country rallied together in June to call for an end to the Keystone XL Pipeline project, a ghastly effort to transport poisonous tar sands 1,700 miles from Canada to Texas, exposing hundreds of communities en route to calamitous spills, ruined water systems and deleterious health effects. More than 1,500 nurses were joined by environmental activists from many organizations in the rally that took place before the annual Staff Nurse Assembly in San Francisco. Their colorful signs told the story: "Clean Energy Creates Jobs" and "One Planet, One People, No Pipeline."



### "Calling" All Volunteers

*"Unless someone like you cares a whole awful lot, nothing is going to get better. It's not."*

-Dr. Seuss, The Lorax

Have you considered using your professional expertise to **make a difference** in the lives of people affected by Alzheimer's disease? Alzheimer's disease is quickly becoming an epidemic. The **Alzheimer's Association** is more committed than ever to our vision of **A World without Alzheimer's disease.**

Our **24/7 Helpline** is looking for qualified volunteers to respond to calls and provide **support** & information to individuals, families and professionals with questions about Alzheimer's and other dementias.

**Helpline** volunteers cover a 4-hour shift between 9am and 5pm, Monday through Friday in our Watertown office.

Our **Helpline** volunteers not only optimize the quality of life for people who are affected by Alzheimer's disease but also personally benefit from an extremely **satisfying** and **meaningful** volunteer experience.

If you have any questions or would like to learn more about this crucial volunteer role, please contact **Kim L'Ecuyer**, Programs Volunteer Coordinator at:

**Kim.lecuyer@alz.org**  
or by calling (617)868-6718.

If you are "someone who cares a whole awful lot" and will consider becoming a **Helpline** volunteer!

**alzheimer's association®**  
Massachusetts/New Hampshire Chapter

### The Congress on Health and Safety is accepting new members.

This vital group works with all members of the MNA to improve workplace safety and establish the very highest standards of health and wellness for all working nurses.

The Congress meets the second Wednesday of every month at 6 p.m. in Canton at the MNA headquarters. Supper is provided; mileage is reimbursed.

For questions and/or application for acceptance please contact Peg O'Connor at 781-830-5776, or Christine Pontus at 781-830-5754.

**We look forward to working together!**

Massachusetts Nurses Association **MNA** National Nurses United



# MNA launches Safe Patient Care ballot campaign

**Will take the issue directly to those with most influence: Registered voters!**

If you have been an RN in Massachusetts for any length of time, you are aware of the dramatic and often chaotic changes that have unfolded in the commonwealth's health care sector in recent years. Mergers, acquisitions and health care reform, as well as the arrival of for-profit hospitals, have turned the business of health care into a mega, money-making industry that puts profits before patients.

This practice of putting profits before patients unfolds in countless ways for an individual during a typical hospital stay. But MNA members know that the best example of this lies in management's insistence on giving RNs dangerously high patient caseloads. As a result, the safe care of your patients is being jeopardized because nursing care has been scaled back in the name of cost savings.

The MNA's fight to end this trend is well over a decade old. Throughout that time, we have made minimal headway legislatively with our safe patient care bills—for example, getting one bill passed in the House only to be thwarted by the Senate. At other points we have had success at the bargaining table, securing patient limit lan-

guage that improves upon truly terrible conditions but that, overall, is a far cry from what is ideal for our patients.

Too many years have passed without this issue being resolved, and too many patients have suffered as a result. It is time to take the next step in this fight, and that next step will be to go directly to those with the most at risk: the commonwealth's registered voters.

## What is a ballot initiative and why are we doing one?

A ballot initiative is a process that empowers the voters to propose legislation and to enact or reject that legislation at the polls. It is a process that is independent of the state Legislature and its lawmaking power, which means that it is a type of election that is commenced and carried out by the people.

The purpose of a ballot initiative is to permit registered voters to resolve questions where their elected representatives have failed or refused to proceed with a change that the public desires.

With these details in mind, MNA members made a motion at last year's annual convention requesting that a ballot initiative specific to safe patient care get underway. The motion passed overwhelmingly. Why? Because MNA nurses everywhere knew that it was time to take control of their destiny and to stop relying on the Legislature.

Furthermore, the research and data specific to safe patient care entirely support the MNA's efforts on this front. For example:

- Higher nurse workloads are associated with more patient deaths, complications, and medical errors (AHRQ Healthcare Innovations Exchange, September 2012).
- Overcrowding and understaffing have had a negative effect on patient safety and quality of care, evidenced by the flourishing of health care-acquired MRSA infections (*Lancet Infectious Disease*, July 2008).
- A national study on the rate of death from cardiac arrest in hospitals found that the risk of death from cardiac arrest in the hospital is nearly 20 percent higher on the night shift. The authors highlight understaffing during the night shift as a potential explanation for the death rate (*JAMA*, February 2008).

Equally compelling are the following statistics:

- Each and every time the MNA membership is surveyed the need for safe patient limits is identified as *the number one issue* affecting patients and their safety.
- Likewise, members consistently identify safe patient limits as the issue that the MNA should be investing its time and resources into resolving.

## Ballot success: how we'll get there

Currently, MNA members from across the commonwealth are out in their hospitals, communities, neighborhoods, and churches gathering the one thing most needed for a successful ballot initiative: signatures!

What is meant by "gathering signatures" exactly? Well, our process involves first collecting "pledges" in what we are calling our "Sign Plus



9” campaign. The goal of this part of the campaign is to have every MNA nurse sign the pledge form and then gather nine other pledges from family members, friends or neighbors. The pledge means that you will be willing to sign the actual legal petition once it becomes available in September.

In September, the “pledge process” will evolve into a petition drive ... meaning members will go back to their original nine pledges and have them sign the official legal petition. This process will enable the MNA to gather the signatures quickly.

Countless pledges have been gathered already, but many more are needed. And this is where you can really assist in the process.

**Your call to action**

If you are willing to gather pledges—even just nine, plus your own

—we will be that much closer to securing the success of this ballot initiative. It is easy, it is fast and it is an issue that sells itself given how important the role of safe staffing is to the health and safety of your patients.

To start gathering pledges now, tear out the pledge form located on the back of this magazine. Please be sure to use the first line for yourself (i.e., include YOUR name and contact information so we know who to go back to with the petitions in September). Once you have gathered your nine additional pledges, simply fax the completed form to 781-821-4445.

To learn more about how to gather pledges in support of this initiative, or to volunteer in another capacity, contact Eileen Norton at 781- 830-5777 or via email at [enorton@mnarn.org](mailto:enorton@mnarn.org). ■

**Tools for the ballot initiative battle**

**“Just Ask” at PatientSafetyAct.com:** The recently launched “Just Ask” campaign is a grassroots effort to create awareness with the public about the safety and protections that should be available to every patient who is admitted to a hospital.

Found online at PatientSafetyAct.com, the web site is replete with facts and background information, and also includes an easy-to-use letter writing tool that the public can use to contact the legislature about safe patient care.

**Facebook:** Located at [facebook.com/JustAskAboutPatientSafety](http://facebook.com/JustAskAboutPatientSafety), this public forum provides a perfect venue to networking, collaborating and organizing in support of patient safety. Visit and “like!”

**Twitter:** Read tweets, share your tweets and re-tweet what’s hot on and from [twitter.com/PatientSafetyMA](http://twitter.com/PatientSafetyMA)

**Pledge drive:** For MNA members ready to jump into signature gathering, the MNA can teach you and give you everything you need for easy success. From background info to pledge forms, everything you’ll need is ready to go. Simply contact Eileen Norton at 781-830-5777.

**Pledge gathering in six simple steps**

1. Locate and tear out the pledge form located on the back of this magazine
2. Put **YOUR** name and contact information on the first line
3. Think of nine people who you see regularly and who support you and your work
4. Contact those nine people and ask them to support this safe patient care initiative
5. Add their names and contact information to lines two through 10 on the form
6. Within the next 10 days, fax the completed form to Eileen Norton at 781-821-4445

To learn more about how to help support this initiative, or to volunteer in another capacity, contact Eileen Norton at 781- 830-5777 or via email at [enorton@mnarn.org](mailto:enorton@mnarn.org).

Check out the back cover for the pledge form

NAME PLEASE PRINT	FULL ADDRESS	RV* CELL#	EMAIL
1.			
2.			
3.			
4.			
5.			

# CONVENTION 2013

CONTROLLING OUR DESTINY  
ENSURING OUR FUTURE

★ **October 9-11 • Hyannis, MA**

## Schedule

### Wednesday, October 9

6:00–7:00 p.m. Awards Dinner registration  
7:00–9:00 p.m. Awards Dinner  
8:00–10:30 p.m. Reception, music, cash bar

### Thursday, October 10

7:30–8:30 a.m. Labor Program's Continental Breakfast, Registration, exhibits and silent auction  
8:30–10:00 a.m. Welcome and Opening Remarks with Donna Kelly-Williams, President MNA. Keynote: Manuel Cortes, General Secretary Transport Salaried Staffs' Association, London; Professors Michael Ash and Thomas Herndon, Political Economy Research Institute, University of Massachusetts Amherst  
10:00–10:30 a.m. Break, exhibits and silent auction  
10:30–11:30 a.m. Bargaining unit updates and reports  
11:30 a.m.–12:25 p.m. Ballot Initiative Update with Hedy Dumpel, RN, JD, (CNA): "The California Experience with Safe Staffing Legislation"

12:25–12:30 p.m. Community Outreach: Presentation to Independent House, Hyannis  
12:30–2:00 p.m. Unit 7 Annual Meeting and lunch  
12:30–2:00 p.m. Lunch, exhibits (closing at 2) and silent auction  
2:00 p.m. Business Meeting  
7:00–8:00 p.m. President's Reception  
8:00–11:00 p.m. Fun event featuring Act Four, Region 3 craft fair and member activities

### Friday, October 11

7:30–8:30 a.m. Silent auction closes, Registration, Breakfast  
8:30–9:00 a.m. MNA PAC Meeting  
9:00–9:15 a.m. Break  
9:15–10:15 a.m. Trauma: Children and Families  
10:30 a.m.–noon "Boston Strong, MNA Proud," Nurses from Tufts, BWH, BMC, NWH, Norwood and Faulkner.

## Speakers

**Manuel Cortes** is the General Secretary of the Transport Salaried Staffs' Association (TSSA), the union for people in travel and transport in the United Kingdom and Ireland with 22,300 members. He is a forceful voice against the privatization of transportation and of the austerity measures that have dramatically failed in the UK and advocates for actions as the financial transaction tax. He recently attended the Harvard Trade Union Program.

**Hedy Dumpel, RN, JD** is the National Director of Nursing Practice and Patient Advocacy for the California Nurses Association/National Nurses Organizing Committee.

**Professors Michael Ash and Thomas Herndon** are coauthors of the landmark study "The Austerity Agenda and the Erosion of Social Protections" which challenges the austerity hawks' attempts to eviscerate the public sector, labor unions and basic social protections.

**Maxine L. Weinreb, Ed.D** is a licensed educational psychologist with degrees in counseling and human development. She is the Director of the Child Witness to Violence Project and coordinates all training provided by the Project. Maxine provided assistance and training to early childhood professionals in New York after the terrorist attacks on September 11, 2001. She has presented nationally about the issues of childhood stressors, especially those related to exposure to violence.

## Venue



Resort & Conference Center at Hyannis  
35 Scudder Avenue  
Hyannis, MA 02601  
866-828-8259

**Registration Deadline: Sept. 8, 2013**

### Two easy ways to register:

- Complete the form on the next page and return to MNA
- Online at [massnurses.org](http://massnurses.org)

# REGISTRATION FORM

Name \_\_\_\_\_ Email \_\_\_\_\_  
Please Print  
Address \_\_\_\_\_ Phone (night) \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (day) \_\_\_\_\_  
I am a(n):  MNA Member/Associate Member  Full-time student/Unemployed/Retired\*  
 Non-member  MASNA students (free, but you must call to register: 781-830-5727)  
 Check here if you require gluten-free meals.  
 Check here if you require special assistance during the convention, and please call 800-882-2056 x727.

## Three Convenient Packages/Business Meeting

**Thursday-Only Package:** Includes events on Thursday: keynote, plenary session, all meals, exhibits  
 MNA Members **\$45**  Reduced Members\* **\$35**  All Others **\$60**  MASNA students **n/c** \$ \_\_\_\_\_

**Friday-Only Package:** Includes events on Friday: keynote, plenary session, breakfast  
 MNA Members **\$35**  Reduced Members\* **\$30**  All Others **\$50**  MASNA students **n/c** \$ \_\_\_\_\_

**Two-Day Convention Package — Thursday and Friday:**  
Includes events on Thursday and Friday with the exception of the Awards Dinner  
 MNA Members **\$75**  Reduced Members\* **\$70**  All Others **\$100**  MASNA students **n/c** \$ \_\_\_\_\_

**Business Meeting Registration (only) • Thursday, 2:00 p.m.** **no charge**

\*includes full-time students (minimum 12 credits), unemployed and retired.

## Optional Events

**Please check boxes below if you plan to attend the following events:**

Awards Dinner • Wednesday, 6:00 - 9:00 p.m. \$50

Dinner selection (please check one):  Native Cod  Turkey  Vegetarian

Unit 7 Annual Meeting/Lunch (Unit 7 members only) • Thursday, 12:30 - 1:30 p.m. **no charge**

Reception • Thursday, 7:00 - 8:00 p.m. **no charge**

Fun Event • Thursday, 8:00 - 11:00 p.m. **no charge**

**Total Convention Fees:** \$ \_\_\_\_\_

## Payment

Please mail this completed form with check made payable to MNA to:

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

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

Account # \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

For credit card registration you may fax this form to 781-821-4445; please call to verify receipt at 781-830-5727.

For office use only: Chg code: \_\_\_\_\_ Amt: \_\_\_\_\_ Date: \_\_\_\_\_ Ck#: \_\_\_\_\_ Ck. Date: \_\_\_\_\_ Init: \_\_\_\_\_

## General Information

### Accommodations

#### Resort and Conference Center at Hyannis

The Resort and Conference Center at Hyannis is an all-season resort on 52 acres. It includes an 18-hole par-3 golf course, indoor and outdoor pools, extensive health and fitness center and a luxurious spa and salon.

Rooms are \$109 per night (double or single) with 11.7% Mass. occupancy tax. Check in time is 3 p.m. and check out is 11 a.m.

### Chemical Sensitivity

Attendees are requested to avoid wearing scented personal products when attending the 2013 MNA Convention. Scents may trigger responses in those with chemical sensitivity.

### Contact Hours

On Friday October 11, 2013 Continuing Nursing Education contact hours will be awarded by the Massachusetts Nurses Association. The MNA is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

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

### Questions

Call MNA's Division of Nursing at: 800-882-2056 x727.

# Bios of candidates for MNA office, 2013

*Editor's Note: All biographies are printed exactly as they were submitted by individual nominees.*

## President, Labor

### Donna Kelly-Williams, RN

Arlington, MA

**Employment:** Cambridge Hospital 1974-Present

**Education:** Masters in Management in Healthcare, Cambridge College, 2009; Certificate, Harvard Law School Trade Union Program, 2009; Bachelors of Arts in Labor Studies, University of Massachusetts, 2007; AD/RN Lasell College, 1978

**Present/Past MNA Activities:** MNA President 2009-Present, Vice President, National Nurses United 2012-Present; Past Chair Cambridge Hospital MNA Bargaining Unit MNAV, Regional Council 5 VP

**Candidate Statement:** As a practicing registered nurse and full time staff nurse, I continue to be humbled by the trust and confidence patients and our communities have in our profession. We have a tremendous obligation to protect ourselves, our fellow nurses, healthcare professionals and the patients entrusted to our care every day. MNA's commitment to have a limit set on the number of patients a nurse would care for at one time, through legislation, contract negotiations and a ballot initiative has brought unprecedented recognition for the MNA's devotion to the care of all patients' in the commonwealth. Nurses across the state are in contentious negotiations with staffing, layoffs, retirement and healthcare benefits, and restructuring, and I have been there, attending membership meetings, walking picket lines, and meeting with state and local legislators to support all nurses and healthcare professionals across the state. I have also embraced the opportunity to travel to many states across the country representing MNA as unionized nurses have stood up for their rights, and with the MNA Board of Directors have created Northeast Nurses Association (NENA) to further our unity and strength. I truly know what MNA members are experiencing across the state and I am fully committed to continuing to serve, support, and promote all members of the Massachusetts Nurses Association, as it is the membership that is the strength and navigator for the future of the MNA. I respectfully ask for your vote to continue to be a strong presence, voice and activist for our patients, our profession, and the Massachusetts Nurses Association.

## Secretary

### Ellen Farley, RN-BC

Middleborough, MA

**Employment:** Taunton State Hospital

**Education:** AD, Bristol Community College, 1979

**Present/Past MNA Activities:** MNA BOD Secretary, Unit 7 Executive Board Secretary, Reg 3 Council Treasurer

**Candidate Statement:** I am an active member in the MNA attending meetings and participating in many events such as our annual Convention, Leadership Summits, State Council, and pickets supporting others in their time of need. I work politically helping with Legislative meetings/drops at the Statehouse and in their districts, and have testified at the Statehouse on behalf of our bills and to specific Committees. I have also worked closely with the District Attorney to ensure we have a safe work environment.

I feel being unified, well organized, and having the ability to see the big picture for the future of staff nursing is very important. I have supported joining NNU so we have a voice in Washington DC to promote those things we as staff nurses need in order to deliver good nursing care.

I have been an advocate for my colleagues promoting the goal of MNA to address workplace violence, documenting assaults on staff, and supporting employees who have been victims of workplace violence. I have addressed workplace violence in several forums. I was instrumental in the establishment of a "Safety for All" Committee at my hospital which was comprised of three unions and administration to evaluate workplace violence issues. This led to the development of a Statewide Inpatient Workplace Work Group. I have also promoted contract language surrounding issues related to safety in the workplace to the Commonwealth during negotiations, and am extremely active on my local level. I have spoken nationally sharing my story and promoting workplace violence prevention and programs.

## Director, Labor

### Region 1

#### Donna Stern, RN

Hadley, MA

**Employment:** BFMC

**Education:** BSN, UMass Amherst, 2005; MSW, Boston College, 2002; BS, University of Maine-Farmington, 1992

**Present/Past MNA Activities:** Bargaining unit Co-chair, Bargaining Unit Vice-chair, MNA Awards Committee

### Region 2

#### Ellen Smith, RN

Douglas, MA

**Employment:** UMass Memorial-University  
**Education:** ADN, Cape Cod Community College, 1994

**Present/Past MNA Activities:** BOD MNA 2008-2012, MNA Awards committee, Delegate MNA/NENA-present, Vice Chair-Reg Council 2, Chairperson UMass-University-present, Grievance Chair-past

### Region 3

#### Karen Gavigan, RN

Berkley, MA

**Employment:** Steward Good Samaritan

**Education:** BSN, Curry College, 2000; Diploma, Massachusetts General Hospital, 1975

**Present/Past MNA Activities:** Boar of Directors, MNF Committee

**Candidate Statement:** I have been a nurse for 38 years and have been on the board of directors for the last 2 terms, I am dedicated to our profession. In this era of transition from community based service to corporate entities we need to advocate for our profession and our patients. I feel that MNA is a steadfast voice for our nurses and patients, we have seen this in recent occurrences all around the state. Please consider me and I will do my best to represent all.

### Region 4

#### Kathleen (Kay) Marshall, RN

Newton Junction, NH

**Employment:** Anna Jaques Hospital

**Education:** ADN, Edna McConnell Clark School of Nursing, NYC, 1980; LPN, The Medical Center of Princeton School of Practical Nursing, 1977; Diploma, North Andover high School, 1973

**Present/Past MNA Activities:** Bylaws Committee, BOD, Regional 4 Council

**Candidate Statement:** If reelected I will continue to work to ensure the safety at both my patients and my fellow nurses. As I continue to work at the bedside I'm constantly aware of the predicament of nurses and patients. The inadequate staffing and the inability of people to seek and obtain safe care due to such staffing patterns. There is an increasing number of those who cannot afford care and medicine due to financial restraints. With the MNA and the NNU I have had the opportunity to work on the Safe Staffing Bills and the Robinhood Tax both of which I feel are important and necessary. I look forward to continuing this work and representing both Nurses and Patients. Thank you

## Region 5

### Dan Rec, RN

*Bridgewater, MA*

**Employment:** Faulkner Hospital

**Education:** BSN, Northeastern University, 1985

**Present/Past MNA Activities:** BOD Director, Labor Region 5 2010-present, Finance Committee 2011-present, Treasurer, Region 5 2011-present, BWFH-Cochair, NNU Delegate 2012-present, Convention Committee 2004-present, Safe Patient Handling 2012-present

**Candidate Statement:** I have always been a proud and active member in MNA and my bargaining unit of Faulkner Hospital since 1985. Currently I am the Co-Chair of Faulkner Hospital and hold the office: Board of Directors of MNA and the other committees noted above. I strongly believe that unity and solidarity will contribute to making positive changes in my profession as MNA and NNU move forward.

I am asking to be re-elected to the BOD-Labor seat so I may continue to advocate for registered nurses in our state and country by taking action in strengthening our commitment in safe patient care. I have been and will continue to lobby for all patients and nurses. I respectfully request your vote. In solidarity.

### Barbara Tiller, RN, BSN

*Wrentham, MA*

**Employment:** Tufts Medical Center

**Education:** BSN, Alfred University, 1986

**Present/Past MNA Activities:** TMC Bargaining Committee chair 2009-present, Board of Directors 2008-2012, NNU Delegate 2009-2012

**Candidate Statement:** I have been a nurse for 27 years in various bedside nursing positions. Most recently as the Chair at Tufts Medical Center and a Clinical Resource Nurse. I continue to see the struggles of the acute care nurse caring for patients in all areas of care. We as nurses have not fully realized the power and voice that we have as a union and with hard work and perseverance we can overcome so many obstacles in front of us that effect our profession and the patients we care for. As union members we pay for resources that are available to us to allow us to have an organized voice. As a member of the board I will continue to work hard at educating, encouraging, engaging and mobilizing nurses to better understand, engage and make our MNA the strongest it can be at standing up and speaking for our profession. The work ahead of us for the safe staffing initiative will take many hands but so valuable to our work. As a member of the board I will continue to work hard by supporting all MNA actions. I will continue to fight to protect nurses and the compensation

they deserve for the highly skilled work and advocacy that they provide for the patients we care for.

I ask for your vote with the knowledge that I will be fully engaged and active in MNA's mission to support and further the profession of nursing.

## Director At Large, General

### Lisa Cargill, RN, CNOR

*Worcester, MA*

**Employment:** UMass Memorial

**Education:** RN to BS program, Framingham State University; AD Science, Laboure College, 1989

**Present/Past MNA Activities:** Vice Chair Memorial Campus, Member of STAT

**Candidate Statement:** I have been an active union member for over 30 years. I currently serve as Vice Chairperson of my local. I played an integral part in starting the Professional RN AFGE local at the VA in Boston where I served as Executive VP. I believe we practice in one of the most revered and trusted professions in healthcare. To that end, it has been my goal to act as an advocate, not only for my patients, but also for my coworkers. It is with fierce passion that I advocate for the health and safety of my colleagues. I love to teach, and try my best to instill the high standards which I set for myself and as such for those I precept and work with. I would consider it an honor to be a member of the MNA Board of Directors. Thank you for your consideration. Lisa R. Cargill RN CNOR Ro 10:10 "For it is with your heart that you believe..."

### Katie Christopher, RN, BSN

*Dorchester, MA*

**Employment:** Boston Medical Center

**Education:** BSN, Chamberlain College, 2012; AD Nursing, Laboure College, 2001

**Present/Past MNA Activities:** Region Council 5

**Candidate Statement:** My name is Katie Christopher; I am a Critical Care Resource Nurse at Boston Medical Center. I have experience in both medical and surgical intensive care units. I have worked at Tufts Medical Center as well in their critical care areas. I am running for the Board of Directors of the Massachusetts Nurses Association, my intention is to support all nurses throughout the state by advocating for safe staffing and the delivery of safe care to all patients. I am a member of the negotiating committee at Boston Medical Center as well as the Region 5 committee. I am an advocate for my patients as well as my peers. Nursing is an ever changing field; it is my responsibility to continue to evolve in my practice while striving to achieve what those nurses have

done before me. I want to represent my generation, by engaging my peers in productive discussions that will lead to planning our future. This will reflect the growth of our ever changing profession with the continued support of the Massachusetts Nurses Association

### Katherine Metzger

*Taunton, MA*

**Education:** BA, UMass Boston, 2003; Diploma/AD, Children's Hospital, 1978

**Present/Past MNA Activities:** BOD, Region 3

### Paula Ryan

*Marshfield, MA*

**Employment:** Quincy Hospital

**Education:** Diploma, Quincy City Hospital, 1967

**Present/Past MNA Activities:** BOD

**Candidate Statement:** I have been proud member of MNA since 1967 when Quincy City Hospital was the first to be organized by MNA. I have served as a committee member for over thirty-five years. As Chair for almost twenty years, I have had the opportunity to lead and advocate for nurses at the local level. It has been an interesting and valuable experience.

In this fast changing and challenging health care environment it is evident that our high standard of practice is being negatively impacted. We are seeing a subtle erosion of our profession and standard of care. Ones that set these standards are now ignoring their importance. The policies that guide our practice are disregarded in order to facilitate leadership and managements' alternative goals. Our concerns regarding our practice and the lack of resources needed are minimized and not valued. The recognition of labor and the act of bargaining in good faith is becoming nonexistent. The greed for power and profits of enterprise has impacted our ability to provide high quality and safe care to our patients and community. This is not acceptable. We are the guardians of patient care and advocates for their well-being!

We have much to accomplish. We can succeed with defined goals and a clear vision. Do not underestimate our power.

Having served on the BOD for the past 3 years, I have gained further insight into the inner structure of MNA. I would like to continue to be involved in the process of decision-making and directing a successful future for our practice and profession.

MNA is your voice. United we can make a difference. Please consider me when you vote.

—In Unity, Paula Ryan

**Susan Wright Thomas***Hull, MA***Employment:** Cambridge Hospital**Education:** Diploma, Brockton Hospital School of Nursing, 1993; Master of Science, University of Massachusetts, 1982; Bachelor of Arts, Chatham, 1972**Present/Past MNA Activities:** Board of directors, Chair, Awards Committee, Labor Education Committee, Cambridge Representative Region 5, Secretary/Treasurer Cambridge Hospital**Candidate Statement:** Recently a fellow nurse stated that she could never encourage her daughter to be a nurse. Reflexively I expressed my dismay and disagreed. She spoke of missed holidays, worked weekends, ungrateful colleagues and patients, disrespect from employers and managers. I had to concede to some of her points but I just could not accept her dismissal of nursing as a valued profession. This conversation has remained with me and I have thought about it over and over. I continue to disagree, partly because nursing was bred into me by my mother, but also because I have strong allies in my MNA compatriots who encourage and renew my spirit time and again.

Every day and through the night I see nurses working together to provide the best care they can to anyone who needs it, people we “like” and people we don’t. We treat them all with dignity and respect. It is our responsibility and we meet it. I see us demanding the same for ourselves and each other when we lobby, picket and negotiate. I see us engaging our communities in action. We have refused to be passive handmaidens and I am proud of that. MNA is our support and resource, but most importantly it is all of us working collectively to “be the change we seek.”

Off-shifts, weekends and holidays notwithstanding, I believe that nursing offers great opportunity for personal satisfaction and service to humanity. We have made MNA into an organization that works smart and hard to lead us in preserving nursing as a profession worthy of our daughters, our sons and ourselves. I fully support the MNA/NU Main Street Campaign, the Safe Patient Care Act and our PAC. I pledge to do whatever I can, whenever I can to further our goals and initiatives. I have been honored to serve in my bargaining unit, on committees and on the Board and I ask you to grant me the privilege of continuing to do so.

**Director At Large, Labor****Beth Amsler***Ashland, MA***Employment:** Newton-Wellesley Hospital**Education:** Diploma, The Jewish Hospital

School of Nursing, 1969

**Present/Past MNA Activities:** Congress on Nursing Practice-current, MNA BOD 2008-2012, Vice Chair-MNA Bargaining Unit at Newton Wellesley**Myra Brennan, RN***Manchaug, MA***Employment:** St. Vincent Hospital**Education:** Associates, Quinsigamond Community College, 1993**Present/Past MNA Activities:** Current-Treasurer/Negotiator, Past-Co-Chair, MNA Bylaws Committee**Marie Ritacco***Auburn, MA***Employment:** St. Vincent Hospital**Education:** ADN, Quinsigamond Community College, 1983**Present/Past MNA Activities:** BOD Labor at Large 2 terms, Grievance chair at SVH for 12yrs, Member Reg 2 Council, Member Neg. Comm-SVH**Michael Savoy, RN, BSN***Dartmouth, MA***Employment:** Brigham & Women’s Hospital**Education:** BSN, UMass Dartmouth, 1996**Present/Past MNA Activities:** Brigham & Women’s Hospital Negotiating Committee- At Large, Board of Directors At-Large-Delegate, NNU**Candidate Statement:** I have been a Union Emergency Department staff nurse for 15 years, for the last 10 of those years I have served as an At Large Representative on the Brigham & Women’s Hospital Negotiating Committee. More recently, I have served in an At Large Labor seat on the MNA Board of Directors and as a Delegate to the NNU. I remain a staunch advocate of safe and sane staffing, and a supporter of working conditions that allow bedside nurses and healthcare professionals to provide the very best care for their patients. I am always impressed by the dedication shown by members to their patients despite often working in difficult circumstances. Consequently, I remain committed to advocating for nursing and our allied health professionals, our patients and our Union. With a strong Association, I believe we can actually achieve; improved retiree health benefits, improved pension plan language, strong contracts, safe and rational patient staffing legislation, and that we can further the drive to organize the unorganized nurses in Massachusetts. I will continue to support and fight for the democratic roots of our Association, and firmly believe that the involvement of all members of the MNA is the key to our Unions future. All the Associations’ members are needed to guide the direction of the MNA, and with your continued support, I will be

your voice and I will endeavor to carry out these goals and be your advocate on the Board of Directors. Thank you for your vote.

**Nora Watts, RN, BSN***Westborough, MA***Employment:** Newton Wellesley Hospital**Education:** BSN, Northeastern University, 1975**Present/Past MNA Activities:** MNA Board of Directors, Past MNA Treasurer, Local Bargaining Unit Co-Chair**Candidate Statement:** As a full time working staff nurse, local unit co-chair and MNA board member, I recognize the challenges faced by nurses and patients in the profit driven healthcare system. I believe that nurses have an obligation to protect our profession and our patients. As such, I spend many of my “off duty hours” as an active advocate for nurses and patients. As my local unit Co chair I strive to make the voice of staff nurses heard and I defend the rights of my colleagues on the job. As a board member, I am an active participant bringing forward issues identified locally. I sit on the finance committee and the MNA PAC. I have been to the State House and the halls of Congress to support our goal of passing staffing legislation and to advocate for our profession. I remain fully committed to the passage of safe staffing. Nurses have long been protectors of the health and wellbeing of the citizens of the Commonwealth and of the nation. Safe R.N. staffing must become law for nurses to effectively continue to do that work.

We have a strong union, a union that is dedicated to serve its members and our patients. It has been an honor to serve on the MNA board. I ask for your vote so that I may continue to work toward the goals of the members of MNA and plan for our future.

**Colleen Wolfe, RN***Charlton, MA***Employment:** UMass Memorial**Education:** ADN, Quinsigamond Community College, 1995**Present/Past MNA Activities:** BOD Member director At Large, Co Chair UMass Memorial & Hahnemann Bargaining Unit, At Large Region2 Council, Chair of Staffing Co**Bylaws Committee****Elizabeth Kennedy, RN***South Easton, MA***Employment:** Retired**Education:** RN Grad, Faulkner Hospital School of Nursing, 1956**Present/Past MNA Activities:** Past-Nomination Committee, Bylaws-Nursing Practice, Present-Education Committee, Continuing Ed

**Candidate Statement:** I have served the MNA as a contributing member of various committees and task forces over the past several years. I also served as a unit chair for my collective bargaining unit for at least eight years. In this era of continuous changes in health care and the nursing profession, my expertise with bylaws, gleaned over three terms on the MNA Bylaws Committee; my experiential background in nursing and my knowledge of the MNA, its mission and operation, prepares me well for future appointment to the Bylaws Committee.

### Congress On Nursing Practice

**Linda Barton, RN, BS, CCRN**

*Stoughton, MA*

**Employment:** Norwood Hospital

**Education:** BS, Curry College, 2007

**Present/Past MNA Activities:** Congress on Nursing Practice

**Candidate Statement:** I ask you to consider voting for me for another term on the Congress on Nursing Practice. I have been a nurse and have been employed at Norwood Hospital since August, 2001. Norwood Hospital is now part of the Steward Healthcare System. We have many challenges ahead of us. I think I am a strong voice for the system nurses and all nurses as a member of the Congress. I am passionate about nursing, nurses, patient care and safety. I am an ICU nurse and am particularly interested in the issues surrounding medication administration, end-of-life care, and the emotional, physical, and financial impacts of "doing too much, too often." I teach BLS and ACLS to the Norwood nurses and those who attend the MNA classes; I really enjoy teaching and attempt to make my classes fun while instructing my colleagues in the skills they may need to perform in order to save a life. I believe a sense of humor and laughter is at least as important to our work life as intelligence, motivation, empathy, and good practice, and I do try to make my colleagues laugh at least once a shift, no matter how rough the day is. I am proud of the work I and the other members of the Congress have accomplished. We have a lot of work still to do and ask that you give me your vote to continue to represent nurses and nursing as an active and vocal member of the Congress on Nursing Practice.

**Mary Dolye Keohane**

*Abington, MA*

**Employment:** MA Eye & Ear Infirmary

**Education:** Diploma, St Elizabeth's Hospital School of Nursing, 1977; Boston College

**Present/Past MNA Activities:** Congress on Nursing Practice

### Congress On Health Policy

**Ruth DiMarzo, RN**

*East Bridgewater, MA*

**Employment:** Good Samaritan Medical Center

**Education:** RN, MCC

**Present/Past MNA Activities:** Emergency Preparedness Task Force, Workplace Violence Task Force, Violence Prevention Plan Committee, diversity Committee, congress on Health & Safety, Regional Council 3, Steward Leadership Council, GSMC Negotiating Committee, Floor Rep

**Lynne Starbard, RN**

*Worcester, MA*

**Employment:** UMass Memorial-Memorial

**Education:** Associates, Quinsigamond Comm College, 1977; Anna Maria College

**Present/Past MNA Activities:** Chair Region 2, Secretary PAC, Chair Congress Health Policy/Leg, Co-chair UMass Memorial-Memorial

### Congress On Health And Safety

**Terri Arthr, RN, BS, MS**

*E. Falmouth, MA*

**Employment:** Medical Education Systems

**Education:** MSM, Lesley College, 1987; BS, Bob Jones University, 1976; Diploma, Greenville Gen Hosp School of Nursing, 1971

**Present/Past MNA Activities:** Congress on Health & Safety

**Mary Havlicek Cornacchia, RN, BSN**

*Westborough, MA*

**Employment:** Tufts Medical Center

**Education:** Tufts Medical center Perioperative Nurse intern Program, 2013; BSN, Fitchburg State College, 1988

**Present/Past MNA Activities:** Congress on health & Safety, Co-chair Tufts bargaining committee 2010-present

**Candidate Statement:** As I seek re-election for a second term on the Congress of Health and Safety, I feel proud to be a part of this group. It is empowering to be an active member of the MNA and as the co-chair of the TUFTS bargaining committee for a second term, I have encouraged and facilitated nurses in tapping in to the multiple resources available through the MNA. One of those resources is the Congress on Health and Safety which has been instrumental to so many working nurses across the commonwealth. This group not only addresses and resolves existing environmental and safety issues in the workplace, it extensively researches and promotes ideas for safer workplace environments and injury prevention programs for working nurses. It would be an honor to continue my participation on this Congress and continue to share what I learn as a member and to continue to educate working

nurses about the resources available to them to address and resolve unsafe environmental workplace issues. Respectfully submitted, Mary Havlicek Cornacchia, RN, BSN

**Elizabeth O'Connor**

*Milton, MA*

**Employment:** Brigham & Women's Hospital

**Education:** BS, Fitchburg State College, 1976

**Present/Past MNA Activities:** Congress on Health & Safety

**Candidate Statement:** Since receiving my BSN from Fitchburg State College (now Fitchburg State University), in 1976, I have been employed by Brigham and Women's Hospital in Boston, as a staff nurse. Most of my experience has been in intensive care Medicine, initially in the Medical ICU, then the past 25 years in the Coronary care ICU. I have had a long tenure as a member of the hospital's safety committee, and am currently serving as one of two appointed. MNA Nurse members of this group. We meet monthly along with several managers from a wide range of departments. My active relationship with the MNA, beyond membership status of 37 years, also goes back many years, when I was first elected to the Congress of Health and Safety, I continue to feel concern for our members, and their ability to work in a safe environment free from workplace hazards impacting health, or personal safety. It is this work on the Congress of Health and Safety that I wish to continue, to ensure that no member take undue. Risks that are preventable, and through education, as well as collaboration, progress is made and maintained to that end.

### At-Large Regional Council

#### Region 2

**Myra Brennan, RN**

*Manchaug, MA*

**Employment:** St. Vincent Hospital

**Education:** Associates, Quinsigamond Community College, 1993

**Present/Past MNA Activities:** Current-Treasurer/Negotiator, Past-Co-Chair, MNA Bylaws Committee

#### Region 3

**Rosemary O'Brien, RN**

*S. Harwich, MA*

**Employment:** Retired

**Education:** RN, Catherine Laboure School of Nursing, 1968

**Present/Past MNA Activities:** Workplace Violence and Abuse Prevention Task Force, Co-Chair, Safe Patient Handling Task Force, Secretary Region 3 Council,

**Candidate Statement:** My name is Rosemary O'Brien and I have been in nursing for over 50 years. I have worked as a staff nurse in a hospital, an industrial nurse in a factory, a

school nurse, and as a nurse consultant in the community.

I continue to be active in the MNA as the Chair of the Workplace Violence and Abuse Prevention Task Force, as the Co-Chair of the Safe Patient Handling Task Force, and as Secretary of the Region III Council.

My goal at this point in time is to see that our Patient Protection Act becomes law. To do this I need your support and your vote.

#### **Nicky Powderly**

Forestdale, MA

**Employment:** Falmouth Hospital

**Education:** BSN, University of Massachusetts, 1995; ADN, Bunker Hill Community College, 1981

**Present/Past MNA Activities:** Chair Falmouth

Hospital BU, current Secretary FH BU

**Candidate Statement:** I have been a nurse for 32 years and an active member of MNA. During the last 6 years of my 14 years at Falmouth Hospital I served as Chair of the Bargaining Unit, Council Member of Regional Council 3 and Member of the Regional Council 3 Finance Committee. I currently serve as Secretary of the Falmouth Hospital Bargaining Unit and would like to continue my participation as a Council Member and Finance Committee Member to preserve and manage the focus of the support, programs and services that the Regional Council provides regional members.

#### **Region 4**

**Judith Gross, RN, BSN, CMSRN**

Gloucester, MA

**Employment:** Addison Gilbert Hospital

**Education:** BSN, Boston College, 1970; Diploma-Nursing, Methodist hospital Brooklyn, NY, 1967

**Present/Past MNA Activities:** Awards Committee, Member Region 4 Board (Council), Region 4 Education Comm

#### **Norma Ouellette, RNC**

Merrimac, MA

**Employment:** Lawrence General Hospital

**Education:** MSN, St. Joseph's College, present; BSN, Univ. of NH, 1995; AD, Northern Essex Community College, 1991

**Present/Past MNA Activities:** BOD, Nom. Comm, BOD at Large (currently) past pres multiple committees ■

## **Massachusetts Nurses Association 2013 Final Ballot**

### **President, Labor\*, 1 for 2 years**

Donna Kelly-Williams

### **Secretary, Labor\*, 1 for 2 years**

Ellen Farley

### **Director, Labor\*, 5 for 2 years (1 per Region)**

*Region 1*

Donna Stern

*Region 2*

Ellen Smith

*Region 3*

Karen Gavigan

*Region 4*

Kathleen "Kay" Marshall

*Region 5*

Barbara Tiller

Dan Rec

### **Director At-Large, General\*, 3 for 2 years**

Katie Christopher

Susan Wright Thomas

Lisa Cargill

Katherine Metzger

Paula Ryan

### **Director At-Large, Labor\*, 4 for 2 years**

Myra Brennan

Marie Ritacco

Nora Watts

Beth Amsler

Michael Savoy

Colleen Wolfe

### **Labor Program Member\* who is a non-RN Health Care Professional 1 for 2 years**

### **Nominations Committee, 5 for 2 years (1 per Region)**

*Region 1*

*Region 2*

*Region 4*

*Region 4*

*Region 5*

### **Bylaws Committee, 5 for 2 years**

Elizabeth Kennedy

### **Congress on Nursing Practice 5 for 2 years**

Linda Barton

Mary Doyle Keohane

### **Congress on Health Policy, 5 for 2 years**

Ruth Dimarzo

Lynne Starbard

### **Congress on Health and Safety 5 for 2 years**

Terri Arthur

Mary Havlicek Cornacchia

Elizabeth O'Connor

### **Center for Nursing Ethics & Human Rights, 2 for 2 years**

### **At-Large Position in Regional Council 2 for 2 years, (2 per region)**

*Region 1*

*Region 2*

Myra Brennan

*Region 3*

Rosemary O'Brien

Nicky Powderly

*Region 4*

Judith Gross

Norma Ouellette

*Region 5*

\*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 labor program member. Labor Program Member means a non-RN Healthcare Professional who is a member in good standing of the labor program.

## **PhD Program in Nursing at the University of Massachusetts Boston.**

*A Unique Opportunity for Baccalaureate Nurses*

### **ATTENTION BS/BSN NURSES! BECOME A NURSE RESEARCHER**

- › Boston's only public BS-to-PhD program
- › Work with internationally renowned faculty researchers
- › A Carnegie-rated research university with high research activity

- › Acquire expertise across the life span:

**Health Policy    Population Health**

*Cancer, Chronic Conditions, Health Disparities*

[WWW.PHDNURSING.UMB.EDU](http://WWW.PHDNURSING.UMB.EDU)  
RESEARCH ASSISTANTSHIPS AVAILABLE

DF/HCC

DANA-FARBER/HARVARD CANCER CENTER  
A Comprehensive Cancer Center Designated by the National Cancer Institute



# Notice to members and non-members regarding MNA agency fee status in private employment under the National Labor Relations Act

This notice contains important information relating to your membership or agency fee status. Please read it carefully.

Section 7 of the National Labor Relations Act gives employees these rights:

- To organize
- To form, join or assist any union
- To bargain collectively through representatives of their choice
- To act together for other mutual aid or protection
- To choose not to engage in any of these protected activities

You have the right under Section 7 to decide for yourself whether to be a member of MNA. If you choose not to be a member, you may still be required to pay an agency fee to cover the cost of MNA's efforts on your behalf. If you choose to pay an agency fee rather than membership dues, you are not entitled to attend union meetings; you cannot vote on ratification of contracts or other agreements between the employer and the union; you will not have a voice in union elections or other internal affairs of the union and you will not enjoy "members only" benefits.

Section 8(a)(3) of the National Labor Relations Act provides, in pertinent part:

It shall be an unfair labor practice for an employer – (3) by discrimination in regard to hire or tenure of employment or any term or condition of employment to encourage or discourage membership in any labor organization: Provided, that nothing in this Act, or in any other statute of the United States, shall preclude an employer from making an agreement with a labor organization . . . to require as a condition of employment membership therein on or after the thirtieth day following the beginning of such employment or the effective date of such agreement, whichever is the later. If such labor organization is the representative of the employees as provided in Section 9(a), in the appropriate collective bargaining unit covered by such agreement when made. . .

Under Section 8(a)(3), payment of membership dues or an agency fee can lawfully be made a condition of your employment under a "union security" clause. If you fail to make such payment, MNA may lawfully require your employer to terminate you.

This year, the agency fee payable by non-members is 95 percent of the regular MNA membership dues for chargeable expenditures. Non-members are not charged for expenses, if any, which are paid from dues which support or contribute to political organizations or candidates; voter registration or get-out-the-vote campaigns; support for ideological causes not germane to the collective bargaining work of the union; and certain lobbying efforts. MNA has established the following procedure for non-members who wish to exercise their right to object to the accounting of chargeable expenditures:

## 1. When to object

Employees covered by an MNA union security clause will receive this notice of their rights annually in the MassNurse. If an employee wishes to object to MNA's designation of chargeable expenses, he or she must do so within 30 days

of receipt of this notice. Receipt shall be presumed to have occurred no later than three days after the notice is mailed to the employee's address as shown in MNA's records.

Employees who newly become subject to a contractual union security clause after September 1, or who otherwise do not receive this notice, must file any objection within 30 days after receipt of notice of their rights.

MNA members are responsible for full membership dues and may not object under this procedure. MNA members who resign their membership must object, if at all, within 30 days of the postmark or receipt by MNA of their individual resignation, whichever is earlier.

Objections must be renewed each year by filing an objection during the appropriate period. The same procedure applies to initial objections and to renewed objections.

## 2. How to object

Objections must be received at the following address within the 30-day period set forth above:

Massachusetts Nurses Association  
Fee Objections  
340 Turnpike Street  
Canton, MA 02021

Objections not sent or delivered to the above address are void.

To be valid, objections must contain the following information:

- The objector's name
- The objector's address
- The name of the objector's employer

- The non-member's employee identification number
- Objections must also be signed by the objector

Objections will be processed as they are received. All non-members who file a valid objection shall receive a detailed report containing an accounting and explanation of the agency fee. Depending on available information, the accounting and explanation may use the previous year's information.

## 3. How to challenge MNA's accounting

If a non-member is not satisfied that the agency fee is solely for chargeable activities, he or she may file a challenge to MNA's accounting. Such a challenge must be filed within 30 days of receipt of MNA's accounting. Receipt shall be presumed to have occurred no later than three days after the notice is mailed to the employee's address as shown in MNA's records.

Challenges must be specific, and must be made in writing. Challenges must be received by MNA at the same address listed above in section 2 within the 30-day period to be valid. Challenges not sent or delivered to that address are void.

Valid challenges, if any, will be submitted jointly to an impartial arbitrator appointed by the American Arbitration Association. MNA will bear the cost of such a consolidated arbitration; challengers are responsible for their other costs, such as their travel expenses, lost time, and legal expenses, if any. Specifically challenged portions of the agency fee may be placed in escrow during the resolution of a challenge. MNA may, at its option, waive an objector's agency fee rather than provide an accounting or process a challenge. ■

Massachusetts Nurses Association MNA<sup>SM</sup> National Nurses United

**CE**

*continuing education*

*Fall/Winter 2013*

**Course Schedule and Registration Information: Pages 18-23**

REGION 1



REGION 2



**Breast Cancer: Latest Advances and Corresponding Nursing Care**

**Description:** This program will discuss the latest advances in breast cancer screening, diagnosis, treatment and survivorship highlighting significant nursing interventions throughout the breast cancer continuum. The role of the nurse navigator in supporting patients through the breast cancer journey will also be reviewed.

**Presenter:** Rachel Richards, MSN, ANP-BC, CBEC

**Date:** Oct. 15, 2013

**Time:** 5 - 5:30 p.m., Registration/Dinner  
5:30 - 8:30 p.m., Program

**Location:** Log Cabin, 500 Easthampton Road, 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 at program.

**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. The presenter will offer strategies for creating calmness in crisis circumstances through mindfulness techniques.

**Presenter:** Pam Ressler, RN, BSN, HNC

**Date:** Nov. 6, 2013

**Time:** 5 - 5:30 p.m., Registration/Dinner  
5:30 - 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 at program.

**Contact hours:** Will be provided.

**Morning Session: Knee Surgery Update: Nursing Management**

**Description:** This program will address current modalities in knee surgery, patient assessment, pre- and post-operative nursing management and the patient's rehabilitative course. Anticipated future developments will also be considered.

**Presenter:** Nancy Hiltz, RN, MS, ONC

**Date:** Dec. 3, 2013

**Time:** 9 - 9:30 a.m., Registration/Continental Breakfast  
9:30 a.m. - 12:30 p.m., Program; 12:30 - 1:15 p.m., Lunch

**Afternoon Session: Hip Surgery Update: Nursing Management**

**Description:** This program will address current modalities in hip surgery, patient assessment, pre- and post-operative nursing management and the patient's rehabilitative course. Anticipated future developments will also be considered.

**Presenter:** Nancy Hiltz, RN, MS, ONC

**Date:** Dec. 3, 2013

**Time:** 1 - 1:15 p.m., Afternoon Registration  
1:15 - 4:15 p.m., Program

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

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

**Contact hours:** Will be provided.

**To register:** complete the following Regional Registration Form 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

**Street Drugs: What Nurses Need to Know**

**Description:** This program will provide nurses with a comprehensive overview of current common street drugs and the etiology, pharmacological treatments and lifestyle changes required to achieve recovery. Evidence-based interventions will be described.

**Presenter:** Jake Nichols, PharmD, MBA, BCPS

**Date:** Sept. 17, 2013

**Time:** 5 - 5:30 p.m., Business Meeting  
5:30 - 6 p.m., Registration/Dinner  
6 - 8 p.m., Program

**Location:** American Legion Dudley-Gendron Post, 158 Boston Road, Sutton; 508-865-2995

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

**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 also be discussed along with acute kidney injury.

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

**Date:** Nov. 12, 2013

**Time:** 5 - 5:30 p.m., Business Meeting  
5:30 - 6 p.m., Registration/Dinner  
6 - 8:30 p.m., Program

**Location:** The Beechwood Hotel, 363 Plantation Street, Worcester; 508-754-5789, www.beechwoodhotel.com

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

**Contact hours:** Will be provided.

**The Practice of Trauma Informed Care: Moving Toward a Public Health Approach to Violence and Abuse**

**Description:** This program covers new approaches to "trauma informed care," where the current practice is to treat every patient as if they have a trauma history (i.e., car crash, military/war zone story, childhood sexual abuse, or rape) that is affecting their health. Included are consensus principles of trauma informed care, the empowerment model, relational collaboration with providers. In addition, speakers will discuss vicarious trauma for health care personnel to help nurses minimize its harmful effects.

**Presenters:** Erin Miller, MPS, MPA, CASAC-T; Karen Hetzel, PhD, PMHCNS-BC

**Date:** Dec. 3, 2013

**Time:** 5 - 5:30 p.m., Business Meeting  
5:30 - 6 p.m., Registration/Dinner  
6 - 8 p.m., Program

**Location:** American Legion Dudley-Gendron Post, 158 Boston Road, Sutton; 508-865-2995

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

**Contact hours:** Will be provided.

**To register:** complete the following Regional Registration Form 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

TWO-PART, ALL DAY EVENT



## How to Protect Yourself from the Complexities of Computerized Health Care

**Description:** With the emergence of health care information technology applied to patient records (electronic medical records, or EMRs), nurses are experiencing new documentation problems that can result in patient safety issues. Several specific instances, as well as potential safeguards for nurses will be discussed.

**Presenters:** Tammy Murphy, RN, ASN, LNC, CAP III  
Barbara Levin, BSN, RN, OCN, LNCC

**Date:** Sept. 18, 2013

**Time:** 5:30 – 6 p.m., Registration/Dinner  
6 – 8:15 p.m., Program

**Location:** Trowbridge Tavern and Canal Club (located behind the 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 at program.

**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 the mechanics of injury and the initial nursing assessment of the adult and pediatric multi-trauma patient.

**Presenter:** Joseph S. Blansfield, RN, MS, ANP-BS

**Date:** Nov. 5, 2013

**Time:** 5:30 – 6 p.m., Registration/Dinner  
6 – 9 p.m., Program

**Location:** Trowbridge Tavern and Canal Club (located behind the 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 at program.

**Contact Hours:** Will be provided.

## Alcohol Withdrawal: Nursing Management

**Description:** This program will enhance nurses' assessment and management of hospitalized patients with alcohol withdrawal. The actions, indications and nursing considerations and clinical management regarding pharmacological treatments will be described.

**Presenters:** Donna White, PhD, RN, CS, CADAC; Deidre Houtmeyers, RN, MS, CAS, LADC-1

**Date:** Dec. 4, 2013

**Time:** 5:30 - 6 p.m., Registration/Dinner  
6 – 9 p.m., Program

**Location:** Trowbridge Tavern and Canal Club (located behind the 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 at program.

**Contact Hours:** Will be provided.

**To register:** complete the following Regional Registration Form and submit to the MNA Regional Council 3, PO Box 1363, Sandwich, MA 02563. For questions, please contact Region 3 at 508-888-5774 or email region3@mnarn.org



## Health Care Issues in the LGBT Patient

**Description:** This session will enable the nurse to enhance clinical practice through an understanding of the complex physical and social health issues facing lesbian, gay, bisexual and transgender patients.

**Presenter:** J. Aleah Nesteby, BA, MSN, RN/NP

**Date:** Sept. 24, 2013

**Time:** 5 p.m., Registration/Dinner  
6 - 8:15 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 at program.

**Contact hours:** Will be provided.

## Cardiac Pharmacology: Considerations for Nurses

**Description:** This session will enable the nurse to enhance clinical practice through a better understanding of actions, indications, and nursing considerations relative to the major categories of cardiac medications.

**Presenter:** Jake Nichols, Pharm. D., MBA, BCPS

**Date:** Oct. 22, 2013

**Time:** 5 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 at program.

**Contact hours:** Will be provided.

## The Economics of Health Care

**Description:** This program will provide nurses with information regarding new health care legislation, cost containment, and reimbursement changes, all of which are contributors to a difficult work environment for nurses.

**Presenter:** Sarah Kemble, MD, MPH

**Date:** Nov. 5, 2013

**Time:** 5 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 at program.

**Contact hours:** Will be provided.

**To register:** complete the following Regional Registration Form and submit to the MNA Regional Council 4, 50 Salem Street, Building A, Lynnfield, MA 01940. For questions, please contact Region 4 at 781-584-8012 or email region4@mnarn.org



## Case Studies in Trauma: Considerations for Nurses

**Description:** This program will enhance nurses' assessment and management of the adult and pediatric trauma patient through a case study analysis.

**Presenter:** Joseph S. Blansfield, RN, MS, CS, CEN, NP

**Date:** Sept. 10, 2013

**Time:** 5:30 - 6 p.m., Registration/Dinner  
6 - 9 p.m., Program

**Location:** MNA Headquarters, 340 Turnpike Street, Canton, MA; 781-821-4625, [www.massnurses.org](http://www.massnurses.org)

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

**Contact Hours:** Will be provided.

## Breast Cancer: Latest Advances and Corresponding Nursing Care

**Description:** This program will discuss the latest advances in breast cancer screening, diagnosis, treatment and survivorship highlighting significant nursing interventions throughout the breast cancer continuum. The role of the nurse navigator will also be reviewed in supporting patients through the breast cancer journey.

**Presenter:** Rachel Richards, MSN, ANP-BC, CBEC

**Date:** Oct. 2, 2013

**Time:** 5:30 - 6 p.m., Registration/Dinner  
6 - 9 p.m., Program

**Location:** MNA Headquarters, 340 Turnpike Street, Canton, MA; 781-821-4625, [www.massnurses.org](http://www.massnurses.org)

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

**Contact Hours:** Will be provided.

## How to Protect Yourself from the Complexities of Computerized Health Care

**Description:** With the emergence of health care information technology applied to patient records (electronic medical records, or EMRs), nurses are experiencing new documentation problems that can result in patient safety issues. Several specific instances, as well as potential safeguards for nurses will be discussed.

**Presenters:** Tammy Murphy, RN, ASN, LNC, CAP III  
Barbara Levin, BSN, RN, OCN, LNCC

**Date:** Oct. 16, 2013

**Time:** 5:30 - 6 p.m., Registration/Dinner  
6 - 8:15 p.m., Program

**Location:** MNA Headquarters, 340 Turnpike Street, Canton, MA; 781-821-4625, [www.massnurses.org](http://www.massnurses.org)

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

**Contact Hours:** Will be provided.

**To register:** complete the following Regional Registration Form 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@mna.org](mailto:region5@mna.org)

## Safe Patient Handling

**Description:** At the conclusion of this program, participants will be able to assess the needs of patients with mobility problems, and implement an ergonomic plan for patient care to maximize the safe and effective movement of patients with limited mobility.

**Presenters:** Intro: Beth Piknick, RN, VP-NNU; Sandra Wettergreen; Gail Connolly, Physical Therapist; Janet Dubois; Chris Pontus, MS, RN, COHN-S/CCM; Peg O'Connor, MMHC, RN, COHN, HRM; Charles Donahue, Esq.; and TBA

**Date:** Sept. 24, 2013

**Time:** 8 - 8:30 a.m., Registration

8:30 a.m. - 3:30 p.m., Program (Please note: NO BREAK-FAST, but coffee, juice and water will be available at registration; light lunch will be provided).

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

**Contact Hours:** Will be provided.

**MNA Contact:** Susan Clish, 781-830-5723

## 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

**Date:** Sept. 26, 2013

**Time:** 8 - 8:30 a.m., Registration

8:30 a.m. - 4 p.m., Program (light lunch provided)

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

**Contact Hours:** Will be provided.

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

## Basic Dysrhythmia Interpretation

**Description:** This three-part course is designed for registered nurses working with cardiac monitoring. Implications and clinical management of cardiac dysrhythmias will be discussed. The course will include a text book and require study between the sessions.

**Presenters:** Mary Sue Howlett, MS, RN/FNP-BC, CEN  
Carol Mallia, MSN, RN

**Dates:** Oct. 1, 2013 (Part One); Oct. 8, 2013 (Part Two);  
Oct. 15, 2013 (Part Three)

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

**Fee:** Non-member, \$195; Member/Associate Member, \$30. \*Requires a \$50 placeholder fee which will be returned upon attendance at program plus a non-refundable cost of \$30 for the calipers and workbook.

**Contact Hours:** Will be provided.

**MNA Contact:** Theresa Yannetty, 781-830-5727

## 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 recertification course. **This challenging course is best suited for nurses working in acute or critical care areas. Attendees must be proficient in dysrhythmia interpretation prior to the course.**

**Presenters:** Carol Mallia, MSN, RN; Mary Sue Howlett, MS, RN/FNP-BC, CEN; Charlene Richardson, MSN, RN, CEN, LNC

**Dates:** Oct. 22, 2013 and Oct. 29, 2013 (certification)  
Oct. 29, 2013 (recertification)

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

**Fee:** Certification: MNA Member/Associate Member, \$25\*; Non-member, \$250

Recertification: MNA Member/Associate Member, \$25\*; Non-member, \$195

**\*Requires \$100 placeholder fee which will be returned upon attendance. There is a non-refundable cost of \$25 for the workbook.**

**Contact Hours:** Will be provided for first-time certification only. Contact hours are not provided for recertification.

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

## Drug Use and Abuse: Recognition and Awareness for Professional Nurses

**Description:** This program will discuss the illicit use of drugs among teens and adolescents and its implications for emergency personnel, community response and law enforcement. The program will also provide participants with the opportunity to be introduced to the many illicit drugs of abuse from the perspective of a law enforcement officer.

**Presenters:** Detective Patrick Glynn, Quincy Police Department; Donna White, Ph.D., RN, CS, CADAC; Charlene Richardson, MSN, RN, CEN, LNC

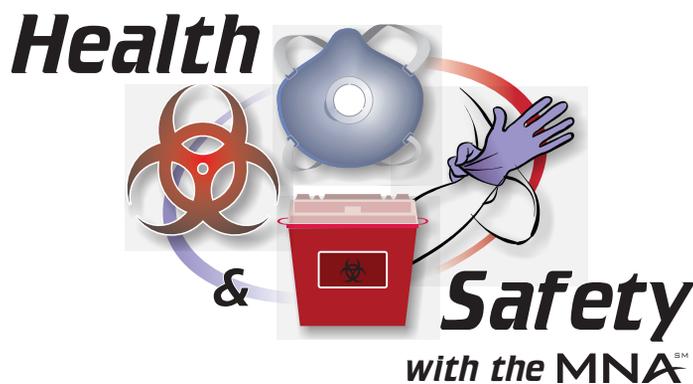
**Date:** Nov. 7, 2013

**Time:** 5-5:30 p.m., Registration (light supper provided)  
5:30-8:30 p.m., Program

**Fee:** Member/Associate Member, free\*; Non-member, \$95. \*Requires a \$25 placeholder fee which will be returned upon attendance at program.

**Contact Hours:** Will be provided.

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



### Program Requirements

To successfully complete a program and receive contact hours, you must read the entire program, take and pass the Post-Test and complete the Program Evaluation. To pass the Post-Test, you must achieve a score of 80% or above. Your certificate of completion will be available immediately, from the "My Account Page", upon successful completion of the program.

### Accreditation

The Massachusetts Nurses Association is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. All programs are free of charge to MNA members and others.

### Contact Hours

Contact hours will be awarded by the Massachusetts Nurses Association.

**[www.massnurses.org](http://www.massnurses.org)**

Click on **MNA CE ONLINE** on the home page under **Professional Development**.



## CONTINUING EDUCATION ONLINE

**Current program topics include:**

### Preventing Workplace Violence in Health Care Settings

The purpose of this program is to provide information and resources for nurses and other health care workers to recognize and address workplace violence that affects nurse's health and safety and the well being of their patients. Continuing Nursing Education Contact Hours for this activity, Preventing Workplace Violence in Health Care Settings, will be awarded until *February 17, 2014*.

# REGIONAL REGISTRATION

**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](http://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.

**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.



Please print. Mail this completed form along with a separate check for each course to appropriate region. Please make copies of this form for courses at multiple regions or download this brochure at [www.massnurses.org](http://www.massnurses.org).

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Place of Employment \_\_\_\_\_

\_\_\_\_\_ RN \_\_\_\_\_ LPN \_\_\_\_\_ APN \_\_\_\_\_ Other (specify) \_\_\_\_\_

**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.

- Breast Cancer: Latest Advances and Corresponding Nursing Care** 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.
- Knee Surgery Update: Nursing Management and Hip Surgery Update: Nursing Management** Non-member: \$195 • Member/Associate Member: \$50 placeholder fee

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

- Street Drugs: What Nurses Need to Know** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- Acute and Chronic Renal Disease** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- The Practice of Trauma Informed Care: Moving Toward a Public Health Approach to Violence and Abuse** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee

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

- How to Protect Yourself from the Complexities of Computerized Health Care** 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
- Alcohol Withdrawal Nursing Management** 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 Street, Building A, Lynnfield, MA 01940.

- Health Care Issues in the LGBT Patient** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- Cardiac Pharmacology: Considerations for Nurses** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- The Economics of Health Care** 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.

- Case Studies in Trauma: Considerations for Nurses** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- Breast Cancer: Latest Advances and Corresponding Nursing Care** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee
- How to Protect Yourself from the Complexities of Computerized Health Care** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee

# MNA HEADQUARTERS REGISTRATION

**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/payment of fee is available online. Visit our website at [www.massnurses.org](http://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, Discover or AMEX by calling the MNA contact person listed or by mailing a **separate check for each program** to the MNA, 340 Turnpike Street, 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 781-821-4625 or 800-882-2056 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 except for ACLS certification. Contact hours for ACLS certification are awarded by Ocean State Educational Seminars.

**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.

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

## Directions to MNA Headquarters

**From Logan International Airport:** Take the Ted Williams Tunnel. Follow signs to I-93 S/ SOUTHEAST EXPRESSWAY. Stay on I-93 S for approximately 15 miles. Take EXIT 2A/ RT-138 S/ STOUGHTON. Follow directions from RT-138 below.

**From Boston:** Take I-93 S/ SOUTHEAST EXPRESSWAY. Stay on I-93 S to EXIT 2A/ RT-138 S/ STOUGHTON. Follow directions from RT-138 below.

**From Cape Cod/South Shore:** Take RT-3 N. Merge onto US-1 S/ I-93 S via exit number 20 on the left toward I-95/ DEDHAM. Take EXIT 2A/ RT-138 S/ STOUGHTON. Follow directions from RT-138 below.

**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/ RT-138 S/ STOUGHTON. Follow directions from RT-138 below.

**From the West:** Take Mass. Pike East to I-95 S/ RT-128 S. 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/ RT-138 S/ STOUGHTON. Follow directions from RT-138 below.

**From RT-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.

**Now Available**  **Online registration for courses offered at MNA Headquarters. Go to [www.massnurses.org](http://www.massnurses.org).**

Please print. You may make copies of this form or download this brochure at [www.massnurses.org](http://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 Street • 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: \_\_\_\_\_

**Safe Patient Handling** Non-member: \$195 • Member/Associate Member: \$50 placeholder fee.

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

**Basic Dysrhythmia Interpretation** Non-member: \$195 • Member/Associate Member: \$30 non-refundable cost for workbook and caliper, \$50 placeholder fee.

**ACLS Certification and Recertification** Certification: MNA Member/Associate Member, \$25 non-refundable cost for workbook\*; Non-member, \$250 Recertification: MNA Member/Associate Member, \$25 non-refundable cost for workbook\*; Non-member, \$195 \*Requires \$100 placeholder fee which will be returned upon attendance.

**Drug Use and Abuse: Recognition and Awareness for Professional Nurses** Non-member: \$95 • Member/Associate Member: \$25 placeholder fee.



# SAFE STAFFING BALLOT INITIATIVE

## REGISTERED VOTER PLEDGES

*Please fill out slot #1 with your information*

NAME PLEASE PRINT	FULL ADDRESS	RV* CELL#	EMAIL
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

\* RV = Registered Voter - please indicate with a check mark

