

REGION ONE NURSE

VOLUME 41, NUMBER 2

THE VOICE OF NURSES IN WESTERN MASSACHUSETTS

SPRING 2014

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Donna Stern, co-chair of the Baystate Franklin Medical Center, speaks about the tentative agreement.

Letter From The Chair

Chris Folsom

I'd like to congratulate the Franklin Nurses on their victory settling their contract with Baystate. A true David and Goliath story, a small bargaining unit who stood together and stood up to a giant. Their courage and perseverance inspires me; they are my heroes.

This will be the last paper edition of the Region One newsletter. In order to go green, this newsletter will now be posted online. As much of the world's communication is now performed in cyber space, hopefully this will make it easier for our members to access the MassNurse Advocate, MNA Facebook page and the national Nurse magazine, which all include useful information and can also be accessed on the MNA website: <http://www.massnurses.org>.

If you need help finding your MNA password or have questions, you can call the Membership Department in Canton at 781-821-4625.

Anyone who would like to continue receiving a paper copy of the Region One Newsletter can contact Allyson Garcia, Office Manager at 413-584-4607.

Happy and healthy Spring to All!

Alice Freedman

A long time member of the MNA, a wonderful nurse, a teacher and an advocate for nurses, died on January, 2014 at the age of ninety-two.



Just this past July, Alice Friedman agreed to do an interview with me, so I could learn how she got involved with collective bargaining and how the right to collective bargaining was won for nurses in Massachusetts in 1964 (effective January, 1965). This is a slightly edited version of the story Alice told me.

"My husband...worked for the Amalgamated Clothing Workers Union, so I knew something about it from that involvement. And I thought I should know more, so I took a course at Northeastern University at night on collective bargaining. It was taught by Sam Jacques, you don't know him, he was from MIT, but teaching at night at Northeastern. When I took that course there were two women in the course. Everyone else was a man. ...so we were the only women and that's how I learned more about collective bargaining and I thought we needed it, so that's how I got involved.

...quite a number of years later, when we tried to make it legal in Massachusetts, that's where I became more active because we had a committee that tried to get the law changed so that we could do collective bargaining. Do you understand why we couldn't do it? Because the hospitals didn't have to engage in collective bargaining, because they were non-profit. We tried to change that in Massachusetts.

When the issue came up in the State House, it was to be heard at a committee and we went to the committee. There were so many nurses we had to move to the Gardner Auditorium. There were four of us who talked. It was the president of MNA and someone from Holyoke and myself and another person.

....so when this was heard at the State House, the opposition was mainly the Massachusetts Hospital Association. Their spokesman, he shuffled up and said, "I need the nurses, because I have a cold." it was funny but anyhow we defeated them and we won. The unions didn't oppose us and the doctors didn't oppose us. It was the Hospital Association that opposed us and the representatives from Mass General in Nursing, they opposed us.

...to get the legislation passed, the nurses had to talk to their local representatives to get them to vote that way and that was good...we got it passed in Massachusetts and then, it was years later(1974), they got (the right to collective bargaining) nationally recognized."

From in interview with Alice Friedman, conducted July 5, 2013 by Roslyn Feldberg (former MNA Associate Director and independent scholar) and transcribed by Donna Olson.

Contract for Franklin Medical Center!

On February 7, with nurses set to strike at Franklin Medical Center, the Registered Nurses of Baystate Franklin Medical Center reached a tentative agreement on a new five-year contract with Baystate Health System. The Agreement was reached when Baystate finally withdrew its proposal to eliminate "daily overtime" after 28 months and 45 negotiation sessions. Baystate's insistence on eliminating "daily overtime" and only pay overtime after 40 hours worked had been the key sticking point throughout negotiations. Ultimately Baystate agreed to maintain "daily overtime" with the addition of a one-hour grace period. Meaning, any work that is performed beyond one hour after the end of a nurse's scheduled shift triggers payment of time and one half back to the end of the nurse's scheduled shift; and in all cases, nurses have the protected right to refuse to work overtime if, in the judgment of the nurse, it would jeopardize the care of his/her patients. The Agreement was ratified by the membership unanimously on February 13, 2014.

This was not an easy agreement to come to. Toward the end management would not come to the table for face-to-face discussions during negotiations, but would instead stay behind closed doors and have the federal negotiator be a go between. For months management repeated the same refrain: they would only sign a contract that had the terms of their "last, best, and final offer" of June 26, 2013; they did not want to negotiate, they just wanted the nurses to sign a contract with their terms. It was clear that Baystate did not want its nurses to have the strength of a collective voice and was trying its best to push the union out.

But the nurses of BFMC had the strength of their convictions and a lot of community support behind them. Following a heavily attended community forum organized by nurses and community allies in March of last year, members of the community formed the Community Health Care Initiative with a mission to keep and expand services at BFMC and to ensure that health care providers work under conditions that promote high quality health care. Today this organization continues to grow in membership and to pursue its mission, and the nurses at Franklin Medical Center are committed to helping this effort.

The Bargaining unit recognizes that reaching this hard-fought victory would not have been possible without all the support from the communities throughout Franklin County, nurses from other bargaining units, amazing MNA staff, our sisters and brothers from other unions, and elected officials. In closing, the nurses at BFMC realize that anything is possible if you stay strong and remain as one!

Article By: Suzanne Love, Donna Stern and Linda Judd



Top: Franklin Medical Center Nurses. **Bottom:** Donna Kelly-Williams, President of the MNA, speaks at the celebration in Greenfield for the Franklin Medical Center Nurses on March 14, 2014.



State House Hearing on Ballot Initiatives



Massachusetts Nurses Association members from across the state waiting for the Hearing to start on March 24, 2014.

It was standing room only in the Gardner auditorium at the State House hearing on March 24, 2014 as nurses, health care advocates, former patients and academic researchers came to testify on two critically important issues affecting the health care of every resident in Massachusetts. The Committee on Health Care Financing held the hearing on two ballot initiatives that garnered over 200,000 signatures from Massachusetts voters this past fall.

★ For more information Regarding The Patient Safety Act (House Bill 3843) and The Hospital Profit Transparency and Fairness Act (house Bill 3844), visit PatientSafetyAct.com.



Linda Judd, co-chair of Franklin Medical Center, testifies at the Hearing.



Nykole Roche, Associate Director/Strategic Researcher for the MNA, testifies at the Hearing.

REGIONAL COUNCIL ONE*OFFICERS*

Chair, Christine Folsom, UNIT 7-DMR Community Services
West

Vice Chair, Gail Bean, West. Mass. Hospital

Secretary, Irene Patch, UNIT 7- Holyoke Soldier's Home

Treasurer, Diane Michael, Providence Hospital

BARGAINING UNIT SEATS

Chris Clark, Baystate VNA

Alexander Neary, Berkshire Medical Center

Gerri Jakacky, Berkshire Medical Center

Sally Surgen, Cooley Dickinson Hospital

Carol Ahearn, Cooley Dickinson Hospital

Linda Judd, Baystate Franklin Medical Center

Donna Stern, Baystate Franklin Medical Center

Stephen Mikelis, Mercy Hospital

Paul Dubin, Noble Hospital

Pam Fournier, Noble Hospital

Ruth O'Hearn, North Adams Regional Hospital

Leslie Campbell, VNA & Hospice at Cooley Dickinson Hospital

Sheryl Moriarty, VNA & Hospice at Cooley Dickinson Hospital

Diane Michael, Providence Hospital

Laurie Scriptor, West Springfield School Nurses

Elizabeth Bonafilia, West Springfield School Nurses

Avon Maxwell, Vibra Springfield

UNIT 7

Christine Folsom, UNIT 7- DMR Community Services West

Carol Konrad, UNIT 7-Holyoke Soldiers Home

Mary Turner, UNIT 7-Pittsfield Public Health

Sherry Ferrier, UNIT 7-Western Mass. Hospital DPH

Save The Dates

- 9th Annual Clinical Nursing Conference

Date: May 9, 2014

- State House Rally and Lobby Day For the Patient Safety Act & the Hospital Profit Transparency & Fairness Act

Date: May 21, 2014

Time: 11 a.m.

Where: State House, Boston

Call or email Eileen Norton at 781-830-5777,

enorton@mnarn.org to let us know you are attending and to reserve a seat on one of the buses the MNA is securing for the event.

- Region One Annual Retreat

Date: June 25, 2014

Location: Chandler's Restaurant

25 Greenfield Rd.

South Deerfield, MA 01373

Contact Allyson at Region One office for more details on the Retreat: 413-584-4607

BARGAINING UNIT UPDATES

Mercy- There are several grievances being addressed. The most prominent is a case sent to arbitration last Fall; objecting to the elimination of all the bargaining unit Case Managers and then the hiring of 35 FTE new non bargaining unit RN's that, the MNA believes, are performing those very duties of the RN's who were laid-off.

In addition, there were two unrelated arbitrations filed in response to termination without just cause, where the arbitrator in both cases ordered the nurses back to their respective positions. In the earlier matter, the nurse was reinstated, however her back pay and return of earned time was in dispute. After much back and forth, the MNA has filed an unfair labor practice charge with the NLRB and is awaiting their response.

The nurses had filed a health and safety grievance that encompassed a number of concerns ranging from the lack of enforcement of the hospital policy that requires that staff and visitors be fragrance free. As a result the hospital has increased the signage and been discussing in staff meetings the need to be fragrance free. Also, all contractors, in their service contracts with the hospital have language notifying them of the policy and the requirement to comply. The other part of this grievance addressed a problem specific to the OR and how specimens were collected and stored in formalin. The hospital had told MNA it would purchase pre-poured containers with caps which will reduce the nurses exposure to formalin by eliminating the need to pour.

Providence Hospital- The Providence Committee has been inundated with meetings and grievances and have been working to maintain stability and good patient care especially during this time of manager turnover. The nurses on the children's units have been meeting regularly with each other and with management to address the many issues that arise. Despite the new law preventing Mandatory Overtime, the outgoing Director of Nurses had utilized Mandatory Overtime as a means to staff some of the units. With her departure, the overtime has significantly decreased. The hospital has by law, had to report these occurrences, and the MNA has an active class action grievance.



Researching Your Facility:

A Quick Guide to Understanding More about Your Hospital

Nykole Roche, AD/Strategic Researcher, Division of Labor Action

This guide is an effort to provide you with the tools you need to quickly access more information about your hospital. Some of the questions nurses typically have are about a facility's finances, executive leadership, and staffing, and below are several resources that may be able to answer some of your questions.

Finances

Nonprofits in the U.S. are required to submit a *Form 990* (financial statement) to the IRS. The *Form 990* contains information on an organization's revenues and expenses, assets and liabilities, total employees, compensation, and so on. The *Form 990* often includes an Audited Financial Statement, which provides a narrative account of a hospital's financial situation and will offer more details, including Related Party Transactions, affiliated businesses, capital projects and expenditures (construction; medical equipment), charity care, and community support efforts.

Foundation Center (<http://foundationcenter.org/findfunders/>)

This website provides free access to the last five or six years of an organization's *Form 990*s.

Center for Health Information and Analysis (CHIA)

(<http://www.mass.gov/chia/researcher/hcf-data-resources/financial-performance.html>)

CHIA is a state agency that tracks information on the healthcare industry, releases reports on hospital financial performance, administers databases of hospital utilization and discharges, and maintains and reports on a number of other health-related issues. CHIA releases the quarterly Hospital Fact Sheet – a quick snapshot of a hospital's finances over the last several years, up to the end of the most recent fiscal quarter.

Community Benefits

Attorney General (http://www.cbsys.ago.state.ma.us/cbpublic/public/search_programs.aspx?section=1)

In Massachusetts, nonprofit hospitals are required to assess the healthcare needs of their communities and work with community partners to develop programs. Hospitals provide the AG with a report that includes community characteristics, populations in need of healthcare, and details on each program the hospital offers.

Leadership

Hospital Website & Press Releases

The best and most accessible sources for information on executive leadership and Boards of Directors are hospital websites and press releases, which provide bios for new Board members and tout the activities and achievements of executives.

Form 990

For information about executive compensation, the best source is the *Form 990*'s **Part VII** or **Schedule J**: Compensation of Officers, Directors, Trustees, Highest Compensated Employees, and Independent Contractors

LinkedIn (<http://www.linkedin.com/>)

Once you've identified who the key players in an organization are, you may want to find out more about them. LinkedIn offers information on the professional backgrounds of high-profile execs and Board members.

Staffing

Patient Care Link (<http://www.patientcarelink.org/>)

Patient Care Link (formerly Patients First) provides unit-by-unit staffing reports and plans. The information is reported by the hospitals, so the veracity of the information is hard to determine, but there is no better option.

Continuing Education Programs

DID YOU KNOW? Continuing Education Classes can be found on the MNA Website for All Regions?

To view the Continuing Education Courses offered and/or print out the entire brochure from your computer, follow these simple steps:

- ⇒ go to: <http://www.massnurses.org/>
- ⇒ Then click on the "Nursing Resources" link on the top menu of the website
- ⇒ Then click on the "Continuing Education" link on the left of your screen
- ⇒ Then click on the link: "[View the Course Calendar Online](#)"
- ⇒ There you will find a list of all the Continuing Education classes, divided by the month that they are in.
- ⇒ From that screen you can also click on the link: "[Or download the entire Continuing Education calendar brochure here](#)"

That brochure includes the registration form, which you may print out and send in to the Regional Office that is offering the course you are signing up for. **Programs are added to the website months before their date.**

Any Questions? Call Allyson Garcia, Office Manager for Region One, at 413-584-4607 or email at: region1@mnarn.org

Remaining Region One Continuing Education Courses for Winter/Spring 2014

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.

Date: April 8, 2014

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

5:30-7:45 p.m., Program

Location: Log Cabin, 500 Easthampton Rd, Holyoke; 413-535-5077

Fee (by check only): Member/Associate Member, free*; Non-members, \$95

*Requires \$25 placeholder fee which will be returned upon attendance

What's Bugging You? Nursing Considerations in Insect and Tickborne Illness

Description: This program will provide nurses with information regarding tickborne illness including risk factors, symptoms, assessment, diagnostic indicators, and treatment recommendations. Mosquito-borne illnesses will also be explored.

Date: April 29, 2014

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

5:30-7:45 p.m., Program

Location: The Hotel Northampton, 36 King St., Northampton; 413-584-3100

Fee (by check only): Member/Associate Member, free*; Non-members, \$95

*Requires \$25 placeholder fee which will be returned upon attendance

⇒ Please contact Office Manager, Allyson Garcia, if you have questions about registering.

413-584-4607 OR
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WE'RE ON THE WEB

WWW.MASSNURSES.ORG

WWW.MASSNURSES.ORG/REGION1

Regional Council One is a unit of the MNA/NNU. The Regional Council supports the MNA bargaining units, the Massachusetts Nurses Foundation and the MNA PAC in promoting the primary functions of education, political organizing, democratic member involvement and support for collective bargaining. The Regional Council also promotes education for professional activities, regional coalitions of MNA bargaining units and general members interested in advocacy. The Regional Council is accountable to the regional membership and the MNA Board of Directors and acts in accordance with general MNA policies and bylaws.

The Regional Council meets every fourth Monday of the month in the Region One office. Region One has several committees that we invite members to join: Education, Finance, Health and Safety, History, Legislative, Newsletter, and Scholarship Committees. Let your voice be heard, join us!

Call the Region One office for more information: 413-584-4607.

REGION ONE NURSE is published three times a year by Regional Council One. It is a publication made available to MNA Region One members to inform and meet member needs by providing information on nursing, health care, and labor issues. We invite our members to submit items to the newsletter, especially through the editorial voice. A strong democratic union requires an informed membership. All submissions are subject to editing and none will be returned. For more information contact the Region One office at 413-584-4607 or email: region1@mnarn.org