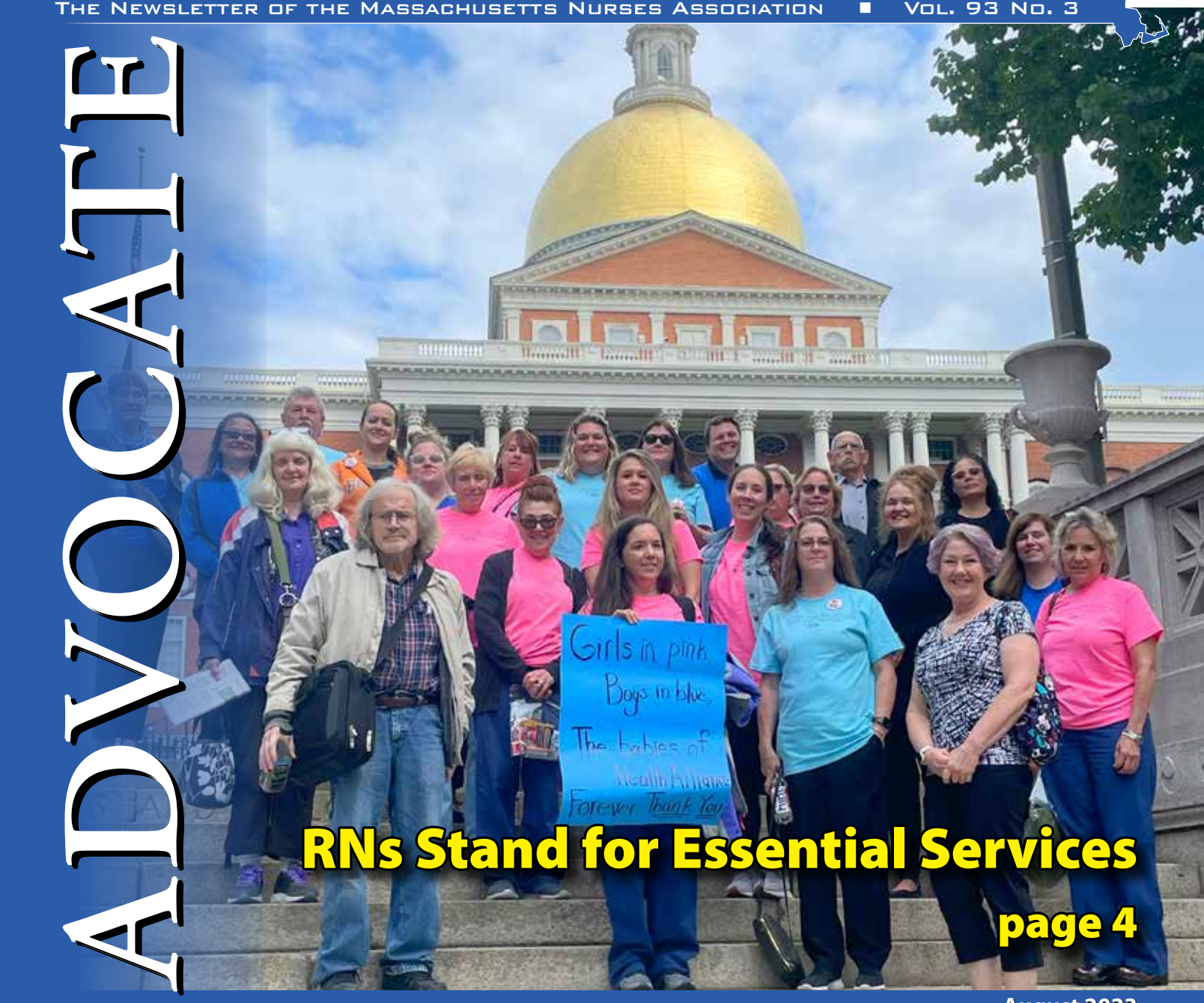
the Massachusetts nurse ADVOCATE

The Newsletter of the Massachusetts Nurses Association ■ Vol. 93 No. 3



RNs Stand for Essential Services

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August 2023

MNA℠ Massachusetts Nurses Association

Look for us on Facebook & Twitter

On the web: massnurses.org

President's Column

Katie Murphy

A person walks into their local hospital seeking care for substance use disorder only to find the clinic door locked.

A pregnant woman contacts the hospital in her community to sign up for prenatal classes and instead reaches a recorded message stating that prenatal services and the maternity department are no longer available at this facility.

A worried family whose child requires in-hospital care is told that the child will need to be transferred more than twenty miles away because their local hospital has closed its pediatric unit.

We are hearing these examples all too frequently. Our patients, our families, and our communities are being robbed of local, high-quality healthcare service every day. It feels as though we hear of a closure of a service or a unit every week.

Case in point: UMass Memorial Health recently announced that the maternity department at Leominster Hospital would be closing later this year. At almost the same time, the DPH ruled that the 32-bed addictions treatment unit at Steward Healthcare's Morton Hospital is, in fact, an essential service that is needed by the greater Taunton community. But, if history is to be relied upon, that DPH ruling won't matter and Steward will close the unit anyway.

As frontline caregivers, we know the crisis into which a patient is placed when they cannot access the care they need. We know our patients arrive at our facilities sicker and requiring even more care. We know that they will need to use the emergency departments as primary care sites when no other options exist. And it is our collective voice that raises the alarm time after time.

Our most recent annual survey of nurses throughout the commonwealth revealed that they do not have enough time with their patients. And this is seen in our homecare population as well. Healthcare providers are being asked to do more with less. Every day we talk with policymakers in every forum to protect our patients. Patient safety is paramount, and this is being addressed at the bargaining table across the state.

We all have a role to play in this ongoing fight to maintain adequate healthcare services in our communities. Every conversation is an opportunity to advocate for our patients. We do this at the bedside and at the table and in our cities and towns. Each time a closure is announced, nurses from that facility speak out telling powerful stories of real people who get their care there.

Their stories are profound, their words are honest, and their recommendations for preserving services are worth following. Yet, that rarely — if ever — happens.

Most recently nurses from Leominster and Taunton spoke out against the pending closures in their communities. We continue to work with the legislature to strengthen the protection that could be provided by the state's Department of Public Health.

Each one of us can make a call to our state representative and senator and urge them to support our bills, which can be found on our website.

Many lives depend on it.

In Solidarity,

Katie Murphy RN

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MNA Massachusetts Nurses Association

MNA Members at Cambridge Health Alliance Mobilize and Go Public as Nurse Educators Are Laid Off and Management Stalls at the Contract Table

The 902 nurses and healthcare professionals who work on the three campuses of Cambridge Health Alliance (CHA) began mobilizing this past spring after management announced layoffs, began stalling at the negotiating table, and refused to take members' concerns about staffing and competitive wages seriously.

To date, they have held a successful petition drive, press conference, and informational picket at all three campuses — with MNA members at CHA ready and able to execute further actions should a fair and equitable contract not be reached soon.

The nurses' and HCPs' campaign picked up speed when, in May, CHA management announced its decision to lay off five nurse educators, thereby increasing pressure on the remaining staff to deliver safe care with limited resources.

At CHA, nurse educators play an essential role given the number of new graduate nurses and travel nurses that management has opted to rely on recently. In the MNA's most recent "Survey of the State of Nursing in Massachusetts," 78% of nurses newer to the profession reported that they do not have enough time to provide their patients with the care and attention each one needs. Without nurse educators readily available to support CHA's new graduates, already dangerous working conditions will be unnecessarily exacerbated and will drive even more new graduates away from the bedside.

CHA plans to eliminate two nurse educator positions from Cambridge Hospital and three from CHA Everett. In the new configuration, one nurse educator will cover a "service line" (i.e., med/surg; labor and delivery; OR) across all three campuses. The exact educator positions being lost include:

- Cambridge Hospital: Med/Surg
- Cambridge Hospital: Maternity/Labor & Delivery
- CHA Everett: Psych
- CHA Everett: PACU
- CHA Everett: In-Patient Diabetes

"Cutting our nurse educators is a bad decision, and it will impact the safe care of our patients," said Suzy Dailey, RN and union co-chair at Cambridge Hospital. "Experienced nurses are not staying at CHA because the hospital chooses not to invest in retention. As a result, CHA continues to over-rely on expensive travel nurses and newer, less-experienced nurses who very much need the support and expertise of nurse educators."

The MNA members working at the three CHA campuses are currently in contract talks, and they are bringing the issue of layoffs to the table. Also a top priority during this round of talks: much-needed improvements to staffing and working conditions, and competitive wages.

"Nurses and healthcare professionals from CHA can literally drive across a bridge and find better staffing and working conditions," said Jen Tynan, RN and union co-chair at Cambridge Hospital. "Many have already done so, and more will join them if management doesn't put in the time and money to make things better."

If finances are the root cause behind management's short-sighted decision to lay off the nurse educators — as well as refusing to address other critical issues at the negotiating table in a timely manner, including staffing and wages — the MNA members at CHA are bewildered and angry.

"Last year CHA spent $19.9 million on travel nurses," added Diane Roberto, RN and Somerville Hospital co-chair. "For that money, CHA could hire enough nurses and healthcare professionals to safely staff the hospital the way our patients deserve to have it staffed, and they could all be paid the competitive wages they need and deserve." The "Survey of the State of Nursing in Massachusetts" showed that 77% of nurses report an increase in the use of travel nurses, with the majority of those reporting (53%) that the quality of care is worse at hospitals that increasingly rely on travel nurses. ■

June 20 State House Hearing Examined Hospital Service Closures and Financial Transparency Bills as Healthcare Corporations Try to Shutter Maternity Services in Leominster and an Addiction Treatment in Taunton

The dangerous trend of hospital corporations choosing profits over safe and accessible patient care came under scrutiny during a June 20 State House hearing when lawmakers heard from nurses, community members, and other advocates about legislation aimed at overhauling the state's essential health service closure process.

In recent years closures of everything from ICUs to pediatric, maternity, behavioral health, and addiction treatment programs from Western Mass to Cape Cod have become the norm — and they all closed despite overwhelming community opposition and after the Department of Public Health deemed those services essential to protecting the public health in those communities.

Legislators heard testimony about a bill that would shine the light on hospital finances and financial holdings, including hundreds of millions stashed in offshore tax havens, while limiting CEO pay — shinning the light on misguided efforts at profit-taking by hospital executives, while depriving communities of safe care and needed services.

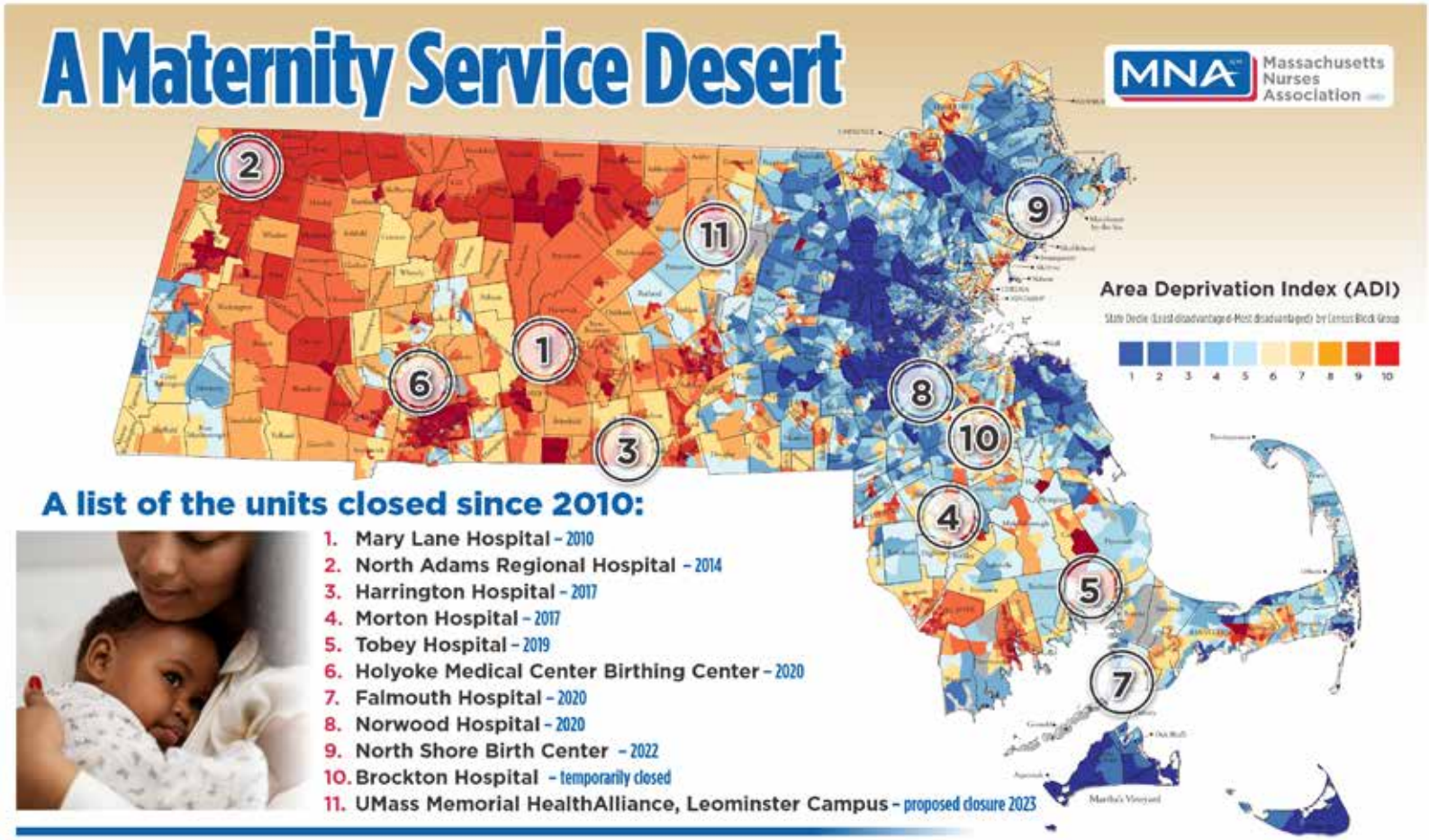
Specifically, the Joint Committee on Health Care Financing heard testimony on An Act Relative To The Closing of Hospital Essential Services (S.736/H.1175), sponsored by Senator Julian Cyr and Representative Ed Coppinger, and An Act Relative to Hospital Profit Transparency and Fairness (S.790/H.1179), sponsored by Senator Michael Moore and Representative Josh Cutler.

Among those who attended were a bus full of MNA nurses from Leominster Hospital and community activists who are still hoping to save the birthing center at Leominster Hospital. That unit is slated for closure by UMass Memorial Health in September.

Strengthening Hospital Closure Law

The hearing came amid a healthcare crisis in Massachusetts created by hospital corporations prioritizing financial gain over patient safety and care access for years before and during the COVID-19 pandemic. Understaffing is causing nurses to flee the bedside and entire communities such as Leominster and Taunton are threatened by maternity and addiction treatment closures.

Since 2009, more than 40 hospitals or units have closed in Massachusetts, according to a review of public records. In most cases, they closed even though the Department of Public Health examined the closure's impact and deemed the services "necessary for preserving access and health status in a particular service area." That Massachusetts has an extensive record of closures despite DPH recommending against them speaks to the urgent need to strengthen our public health laws.



"Current Massachusetts law is failing to meet this moment of crisis for patients and their caregivers," said MNA President and ICU nurse Katie Murphy. "Access to essential services has declined across the commonwealth because our healthcare system follows a corporate, profit-driven Wall Street model and our state has limited powers to ensure patients can receive necessary care.

"We need to re-center patients as the most important part of our healthcare system rather than profits," Murphy added. "We must ensure mothers and babies, people suffering from mental health or substance use issues, and all our most vulnerable residents are able to access the care they need."

A powerful coalition of nurses, healthcare professionals, patients, community members and elected officials quickly joined together following the announcement in May by UMass Memorial Health that it intended to close the birthing center located at UMass Memorial HealthAlliance-Clinton Hospital's Leominster Hospital Campus. The coalition held a rally and lawmakers called on UMass to stop the closure and negotiate.

And in early June, the DPH found that the 32-bed MORCAP (Morton Comprehensive Addiction Program), located at Steward Morton Hospital in Taunton, is an essential service "necessary for preserving access and health status within the hospital's service area." The finding followed strong opposition and extensive testimony from local public officials, nurses, and addiction treatment and community advocates who testified during a required public hearing that the closure will only add to a growing crisis in the region, as local hospital emergency departments are already overburdened with patients waiting for addiction-treatment beds and services.

MNA President Murphy called the DPH's finding and its call for a plan from Steward an "empty exercise" because the department has no ability to require the treatment service to remain open. State Senator Marc Pacheco, who represents Taunton and other communities served by MORCAP, submitted scathing written testimony critical of the process, stating in part, "If the Department or Division officially finds services to be

'essential,' and then does nothing to prevent those services from being eliminated, then I respectfully submit that our current classification system has no actual value or purpose."

In response to these proposed closures and the long history of shuttered services reducing or eliminating access to essential healthcare despite DPH hearings and findings, the MNA has worked with its legislative partners to propose a bill that would give the DPH, attorney general, and the public more tools to hold hospitals accountable for closures.

An Act Relative to the Closing of Hospital Essential Services would:

- Extend the official notice period to the DPH in advance of a closure or discontinuation of health services.
- Require any hospital proposing closure or discontinuation of health services to provide evidence of having notified and provided the opportunity for comment from affected municipalities before the notification period begins.
- Instruct the attorney general to seek an injunction to maintain the essential services for the duration of the notice period.
- Prohibit the hospital from eligibility for an application for licensure or expansion for a period of three years from the date the service is discontinued, or until the essential health service is restored, or until such time as the DPH is satisfied with a modified plan.
- Prohibit the closure of beds, units, or facilities during any declared state of emergency pertaining to healthcare.

"We are proud as nurses and healthcare professionals to stand up for our patients and their access to care. However, it is the weakness of our current essential services law that requires caregivers and communities to fight so hard against closures," Murphy said. "The Department of Public Health is toothless when it comes to halting a hospital closure, even when it goes through a hearing process and determines the services are necessary."

According to a white paper on maternal services in Massachusetts published by MNA's Congress on Nursing Practice, the decision by UMass to close its Leominster maternity service follows a trend by other healthcare corporations in the state to close vital community-based programs and services as a means of funneling their patients to larger and more profitable major medical centers.

Maternity services have been a specific target for these closures, creating what the March of Dimes has characterized as "maternity deserts," meaning regions where residents lack appropriate access to needed maternity care, particularly for those serving poorer communities and people of color. Last year a Special Legislative Commission on Racial Inequalities in Maternal Health in Massachusetts issued a report showing how racial minorities are negatively impacted by inequitable policies and practices, including lack of access to appropriate maternal care. In the last decade, Massachusetts has seen the loss of at least 10 maternity units, each of which was evaluated by DPH and deemed essential to preserving the health of those communities.

Hospital Financial Transparency and CEO Pay

MNA nurses and healthcare professionals also testified on June 20 about the harm inflicted by a system that prioritizes corporate profits above safe patient care and access to essential healthcare services.

"Healthcare disparities are worsening because our system unequally distributes financial resources, leaving behind the disadvantaged and most vulnerable while allowing huge corporations to profit and give executives millions," said Murphy. "Requiring greater financial transparency and clawing back excessive CEO pay will help us re-center our priorities on ensuring safe and accessible patient care."

The Hospital Profit Transparency and Fairness Act would:

- Require hospitals to be transparent about their financial holdings and other activities.
- Assess any hospital receiving taxpayer dollars that has an annual operating margin above a specific, predetermined cap.
- Assess any hospital receiving taxpayer dollars that provides a compensation package for its CEO that is greater than 100 times that of the hospital's lowest paid employee.
- These assessments would be deposited in a newly created Medicaid Reimbursement Enhancement Fund to increase Medicaid reimbursement rates to eligible hospitals.
- This would limit excessive CEO salaries and limit and claw back excess profits to ensure that taxpayer dollars are dedicated exclusively to safe patient care and necessary services for all communities in the commonwealth.

From left to right: Irene Hernandez, Susan Buchholz and Eladia Romero, prominent community advocates for Northern Worcester County and leaders of the recently formed Community United to Save Our Birthing Center.

Leominster Hospital nurses and community supporters board the bus for the essential services hearing at the State House on June 20.

Most hospitals in Massachusetts receive at least half their revenues from tax dollars, including Medicare, Medicaid, taxpayer funded grants, loans, subsidies, and waivers on local, state, and federal taxes. Yet legislators and voters are largely in the dark about the nature and scope of hospital financial holdings, including how much money hospitals store in offshore accounts or why hospitals don't keep their excess funds in Massachusetts' banks.

A review of financial holdings in 2019 showed that hospital corporations across Massachusetts had placed at least $1.6 billion in the Cayman Islands and other well-known offshore tax havens. Rather than use this money for safe staffing or preserving essential services, the corporations kept it in a place where there are far fewer restrictions on its use. When the pandemic hit, many of these same hospitals cried poor, laid off or furloughed workers, and further cut staffing levels.

At the same time, hospital CEOs in Massachusetts are often paid excessive salary packages that bear no relationship to the quality of care and patient outcomes like readmission rates and infection rates, where our hospitals rank among the worst in the nation. As the Boston Business Journal reported last year, many Massachusetts hospital executives saw their pay rise during the height of the pandemic — including executives at Mass General Brigham, Beth Israel Lahey Health, UMass Memorial Health Care, Boston Medical Center, and Dana-Farber Cancer Institute—even as some of them froze worker pay and retirement benefits. ■

Leominster Hospital maternity nurses Amy Gagnon and Tara Corey offer their testimony at the essential services hearing, while their colleagues cheer them on.

The Power of Involvement

By Deb Sullivan, MNA Associate Director of Labor Education

As we move forward from our annual labor summit and clinical conference and head toward our annual convention, we can certainly say that the MNA is an exceptionally busy organization.

In several of our bargaining units, new committees are being formed, negotiations are underway, hospitals and healthcare facilities are being organized, and first contracts are being bargained and fought for.

There are multiple legislative initiatives being brought forward to offer relief to nurses on a variety of issues, from safe staffing to violence in the workplace.

The "Diversity, Equality, and Inclusion Committee" (DEI) is meeting and working to establish a diverse and meaningful voice for all, throughout the association.

All this crucial work requires not only the resources and time of MNA staff but also of our MNA nurses and healthcare professionals, for they — no, you! — are the ultimate voice of power at the bedside and beyond to advocate for change and progress in your profession.

Perhaps there has been an issue in your workplace that directly involves you and you want to help effectuate change. Perhaps you are interested in learning more about the union and how it works. Perhaps there is cause for concern that you would like to see brought forward and do not know how to do it or to whom to talk. If that is the case, we have the resources to help!

A good place to start is to reach out to your MNA labor representative (also called your associate director, or AD) or a member of your bargaining committee in your workplace. You can also reach out to the MNA's labor education department directly by emailing rpatenaude@mnarn.org.

The MNA is an organization of resolute professionals who work collectively toward improving conditions in the workplace and support a better quality of life for all in our society. Within the association, there are many opportunities to have your voice heard and to advocate for change in whatever way you feel is meaningful.

As is always the case, many hands make light work. Without a contingent of people willing to involve themselves in different things going on, it is difficult to create needed change. Your voice matters! Without your input and involvement, it is much harder to determine the path forward. Let's face it, you likely spend more time at work than anywhere else in your life. You may as well try to make it the best possible place!

Please get involved. There is so much that needs to be done and such a variety of issues that something will surely spark your interest. Who knows, your involvement could lead to exciting and fun opportunities to work with others in your profession from across the state to grow in more diverse ways than you have ever imagined!

Hoping to meet and collaborate with you soon! And we are looking forward … always! ■

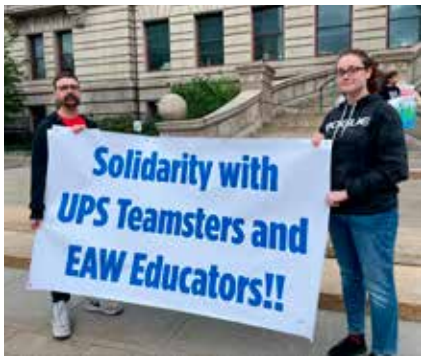
MNA Joins Worcester May Day Rally

On Monday, May 1 the MNA joined the Worcester Community Labor Coalition's May Day "Listen to the Workers" rally at Worcester City Hall. Carla LeBlanc, of St. Vincent Hospital, spoke at the rally about the need to pass important legislation that will provide safe RN staffing in our Massachusetts hospitals, prevent workplace violence, and maintain essential health services in our communities. She also pledged the MNA's support and solidarity for Worcester educators, represented by the MTA, and UPS workers, represented by Teamsters Local 170, who are engaged in labor fights in the city. Other topics addressed by workers at the rally included wage theft, climate justice, the need for affordable housing, and inclusionary zoning in Worcester. ■

Photo #1

Photo #2

International Workers' Day, also known as Labor Day in some countries and often referred to as May Day, is a celebration of workers and the working classes that is promoted by the international labor movement. It occurs every year on May 1, or on the first Monday in May. ***Photo #1:*** *MNA members and staff are joined by State Senator Robyn Kennedy (D-Worcester) at the rally.* ***Photo #2:*** *Carla LeBlanc, RN, speaking at the rally.*



Celebrating DDS CCS Western Region/Unit 7 During Nurses Week

In May, the Unit 7 DDS nurses who work for the Western Region of CCS enjoyed a memorable and delicious MNA-sponsored Nurses Week luncheon as a way of celebrating how important and valued they are in their clinical roles. In addition to lunch, plenty of MNA T-shirts, lunch bags, cups, and information about upcoming CEU events were available. Badge cards that include a copy of the Weingarten Rights were also provided as a reminder of members' rights if called into a meeting with management which might result in discipline.

First Informational Picket for the MNA Nurses at Dana-Farber Cancer Institute – Merrimack Valley a Success!

The MNA RNs of Dana-Farber Cancer Institute–Merrimack Valley (DFCI–MV) held a successful informational picket on Friday, June 2. The picket came after the MNA called in a federal mediator to help resolve negotiations due to management's refusal to help ensure high-quality patient care by agreeing to a fair contract.

Nurses who care for oncology patients at DFCI–MV voted to join the Massachusetts Nurses Association in July 2022 to secure a protected voice in all decisions impacting their work and nursing practice. The nurses are seeking fair pay and equal benefits as DFCI Boston nurses, allowing DFCI–MV to maintain the nurses necessary to provide critical patient care.

"Our nurses are dedicated to our patients and play a key role in providing advanced cancer and blood disorder treatments," said Kerrin Albert, infusion RN at DFCI–MV. "A fair contract will give us a stronger voice in ensuring safe patient care conditions and the pay and benefits we need to retain the highly qualified nurses DFCI–MV needs."

"Dana-Farber has refused to compensate Merrimack Valley nurses appropriately for the complex oncology care we provide and the commitment we show to our patients," said Kate Mitchell, FNP-BC, AOCNP at DFCI–MV. "Our clinic will lose nurses to other oncology centers — and patients will find it harder to receive the care they deserve — if Dana-Farber does not listen to its nurses and agree to a fair and reasonable contract."

"The COVID-19 pandemic has shown that nurses are in high demand because of the important direct patient care we provide and the challenges we face providing that care," said Errin D'Arcangelo, oncology nurse navigator at DFCI–MV. "If Dana-Farber is unwilling to provide the benefits and retirement protections nurses need, they will look elsewhere. We can defy cancer together if Dana-Farber nurses caring for patients are respected and appreciated."

DFCI–MV opened in 2020 with 24 exam rooms and 32 infusion bays. The location offers expanded cancer and blood disorder care and outpatient services for adult patients in the region. ■

MNA℠
PEER ASSISTANCE PROGRAM

Are you a nurse in recovery and would like to assist a colleague in need?

The MNA Peer Assistance Program is a free and confidential peer support program available to all nurses in Massachusetts. We offer confidential peer support to nurses seeking recovery support. Our program is completely separate from the Mass Board of Nursing and Substance Abuse Rehabilitation Program.

We are seeking volunteer nurses, in recovery for at least three years, to lend support to nurses seeking recovery. For more information, please contact Carol Mallia RN, MSN at 781-830-5755 or cmallia@mnarn.org or view the MNA Peer Assistance Program website at

www.peerassistance.com

MNA Massachusetts Nurses Association

Sign Up Today!

Safe Patient Handling & Mobility Conference

Wednesday, September 13, 2023

Four Points Sheraton Hotel in Norwood

Photo Courtesy of HoverTech International

See page 14 for full details and registration information.

Massachusetts Nurses Association 2023 General Election Ballot

President, Labor (1 for 3 years)
Katie Murphy

Secretary, Labor (1 for 3 years)
Joan Ballantyne

Director, Labor*
Region One: (vacant)
Region Two: (vacant)
Region Three: (vacant)
Region Four: (vacant)
Region Five: (vacant)

Director At-Large, General (3 for 3 years)
Connie Gassett
Susan Wright Thomas
Meghan Mahoney
Ellen Farley Wylie
Ania Noel-Edward

Director At-Large, Labor, (4 for 3 years)
Mary Havlicek Cornacchia
Ania Noel-Edwards
Connie Wilder
Colleen Wolfe

Labor Program Member who is a non-RN Health Care Professional (1 for 3 years)
(vacant)

Nominations Committee, (5 for 3 years)-1 per Region
(vacant)

Bylaws Committee, (5 for 3 years)
Michael D'Intinosanto

At-Large Position in Regional Council (3 years 2 per region)
Region One: (vacant)
Region Two: (vacant)
Region Three: (vacant)
Region Four: Elizabeth Mulholland
Region Five: (vacant)

NENA Delegate (9 for 3 years)
Karen Coughlin
Michael D'Intinosanto

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.

Ballots will be mailed no later than August 4.
Deadline for ballots to be received is September 4.

Bios of candidates for MNA office, 2023

PRESIDENT

KATIE MURPHY, MSN, RN, CCRN, CNRN
Framingham, MA

Employment: Brigham & Women's Hospital

Education: Framingham State University, MSN, 2012
Boston University, Bachelors, 1982
Vermont College, Associates, 1975

Present/Past MNA Activities: President, Board of Directors

Serving as the President of the Massachusetts Nurses Association has been the honor and privilege of a lifetime. The work that you do every day is important, critical work. We care for the most vulnerable and the most powerful and provide that care with the highest standards, often under challenging conditions. But as organized nurses, we have a greater platform to advocate for our patients and our colleagues at every level. You know the circumstances under which you work in your facility. We know the forces working against high-quality and equal access to healthcare in Massachusetts. Throughout the pandemic, nurses all over the state fought for their patients. I heard that refrain everywhere I went, every meeting I attended and our communities are healthier and stronger because of that ethic. I took office soon after the first peak of the pandemic, taking the baton from Donna Kelly-Williams who had lead the MNA and I strove to continue her work for safe staffing and working conditions. I have combined my decades-long career as a bedside nurse with many years of public service to work to achieve the goals set by our members. I have met and spoken with nurses and healthcare professionals across the state and in every setting. In fact, that is the aspect of this role I relish the most: meeting with members and hearing your stories. I humbly ask for your vote and allow me to continue to serve you.

SECRETARY

JOAN BALLANTYNE, RN
Mansfield, MA

Employment: Norwood/SEMC

Present/Past MNA Activities: R5 Chair

DIRECTOR AT LARGE, GENERAL

CONNIE GASSETT, RN
Boston, MA

Employment: Retired -Brigham & Women's Hospital

Education: University of Delaware, BSN, 1973

Present/Past MNA Activities: BOD, 20years BWH Committee

MEGHAN MAHONEY, BSN, RN, CNRN
Dorchester, MA

Employment: Brigham & Women's Hospital

Education: Northeastern University, BSN, 2018
Whitman Hanson Regional High School, Diploma, 2013

Present/Past MNA Activities: BWH Health & Safety Rep (current)

My name is Meghan Mahoney and I am hopeful to serve you, the nurses of the Massachusetts Nurses Association, as a member of the MNA Board of Directors. I graduated from Northeastern University in May 2018 and began my career as a staff nurse at Brigham and Women's Hospital in Boston, MA. Here, I have worked as a nurse both in the Emergency Department as well as inpatient and outpatient Neurology. It has been a privilege to learn from experienced and professional nurses who have not only taught me how to

be a strong nurse, but also demonstrated the critical importance of having a strong union. In my relatively short career thus far, I have witnessed both the COVID-19 pandemic and what I consider to be a significant cultural shift associated with it. Hospitals across the country as well as their executives continue to thrive by implementing egregious cost saving measures, to the detriment of our patients and nurses. Nurses continue to leave the bedside in droves, and the experienced nurses that we have relied on to pass on their critical base of knowledge to newly licensed nurses are becoming far more scarce. My contribution would be eager participation with a willingness to listen to and learn from my colleagues. As we continue to navigate this new age of healthcare, I am dedicated to being a voice of change. I appreciate your consideration and hope to serve you in this role. Thank you!

ANIA NOEL-EDWARD, RN
Hyde Park, MA

Employment: MGB Healthcare

Education: Chamberlain University, MSN, in program
Curry College, 2004

Healthcare has evolved and not necessarily for the better. Right now, nurses spend less time with the patients who need us most. Nurses have more responsibilities, mostly designated by management as a way to seek reimbursements and increase revenue. This is a major contributor to the decline in the field. Less people want to go into nursing, and more nurses are leaving the profession every day. We were already burned out and fatigued when the pandemic hit. For a while, we thought that Covid would shed a spotlight on the oppressive working conditions that nurses face every day. And for a while it did, but things changed quickly because of the strain on an already-overtaxed system. As a result, nurses feel devalued. If I am elected to this role, I will use this position to advocate for nurses and the value we bring to healthcare and the world. I will create tables for nurses where we can come together in dialogue to be our own advocates to the hospital. I would also like to see more opportunities to advance our education and careers. Thank you for considering me, I hope to have your vote.

SUSAN WRIGHT THOMAS, MSN, RNC
Hull, MA

Employment: Quincy, College

Education: Worcester State University, MSN, 2016
Brockton Hospital School of Nursing, Diploma, 1993

Present/Past MNA Activities: Board of Directors, Awards Committee (chair), Region 5 Representative (Cambridge Hospital)

I am running for re-election to the MNA Board of Directors because I have perspective and experience that continue to grow as I transition from role to role in my career. I maintain close connections to the Cambridge membership and continue to serve as the unit's representative to Region Five. I consult and advise the unit on grievances and contract maintenance to resolve recent issues and more importantly, prevent grievances. As a nurse educator in an Associate Degree Nursing program I keep contact with former students to maintain an awareness of current practice and issues they experience in their transition to practice.

The major challenges for the profession are the fracturing of our workforce by misguided Management proposals: Nursing Compact, classification of nurses as independent contractors, and the expansion into the nursing domain of workers with limited expertise (EMTs). There is also an opportunity to develop a true pathway to respect and professional growth for our Nursing Home workers, LPNs and CNAs. If we are to resolve the crisis in care for our Emergency services and acute hospitals we need to clear the pipeline to long-term care.

As we learned from our work to pass the Safe Care ballot question, too many academics fail to recognize the perspective of the bedside nurse whom we purport to prepare for practice, aligning themselves with Management. I ask for your consideration and vote so that I may continue to steer our Union in these vital directions.

ELLEN FARLEY WYLIE, RNC
Middleboro, MA

Employment: Retired

Education: UMass Dartmouth, BSN

Present/Past MNA Activities: BOD, Unit 7 BOD

DIRECTOR AT LARGE, LABOR

MARY HAVLICEK CORNACCHIA, BSN, RN
Westborough, MA

Employment: Tufts

Education: Fitchburg State College, BSN, 1988

Present/Past MNA Activities: Workplace Violence, Congress Health & Safety

I would appreciate your vote to continue my advocacy, and to give voice to those who's voices need to be heard. As a member of the MNA, Board of Directors, I have had so many opportunities to speak at the state house, at public hearings, and public forums, and across several media platforms, highlighting health and safety issues, affecting nurses and our patients across the Commonwealth.

As cochair of the bargaining committee at Tufts, I represent over 1400 nurses. I have been a participant on committees and the workplace violence task force at MNA. I am honored to be a NENA delegate.

It is imperative that we continue to raise awareness of critical issues and educate our legislators and the public about those issues affecting nurses and our patients. Please allow me the opportunity to utilize the resources that the MNA provides to continue working to ensure the safety of our profession, and to provide safe care for our patients.

ANIA NOEL-EDWARD, RN
Hyde Park, MA

Employment: MGB Healthcare

Education: Chamberlain University, MSN, in program
Curry College, 2004

Healthcare has evolved and not necessarily for the better. Right now, nurses spend less time with the patients who need us most. Nurses have more responsibilities, mostly designated by management as a way to seek reimbursements and increase revenue. This is a major contributor to the decline in the field. Less people want to go into nursing, and more nurses are leaving the profession every day. We were already burned out and fatigued when the pandemic hit. For a while, we thought that Covid would shed a spotlight on the oppressive working conditions that nurses face every day. And for a while it did, but things changed quickly because of the strain on an already-overtaxed system. As a result, nurses feel devalued. If I am elected to this role, I will use this position to advocate for nurses and the value we bring to healthcare and the world. I will create tables for nurses where we can come together in dialogue to be our own advocates to the hospital. I would also like to see more opportunities to advance our education and careers. Thank you for considering me, I hope to have your vote.

CONNIE WILDER, RN
Bridgewater, MA

Employment: Good Samaritan Medical Center

Education: Quincy College, Associates, 1994

Present/Past MNA Activities: Current Union Rep, Negotiation Committee Member

COLLEEN WOLFE, RN
Charlton, MA

Employment: UMass Memorial

Education: QCC, ADN, 1995

Present/Past MNA Activities: Finance Committee, Co-chair of Memorial BU

AT-LARGE REGIONAL COUNCIL

REGION 4

ELIZABETH MULHOLLAND,PMHCNS/BS
Tewksbury, MA

Employment: Tewksbury Hospital

Education: UMass Lowell, MSN, 2002
University of New Hampshire, BSN, 1993

Present/Past MNA Activities: BOD 2020-2023, Secretary 2020-present Reg 4

BYLAWS COMMITTEE

MICHAEL D'INTINOSANTO, RN
Winchendon, MA

Employment: Retired- U7

Education: Fitchburg State College, BSN, 1999o
Laboure' Jr College, ADRN, 1984

Present/Past MNA Activities: Past Chair Unit 7, Vice Chair MNA PAC

NENA DELEGATE, LABOR

KAREN COUGHLIN, RN, PMH-BC
Arlington, MA

Employment: Retired-MNA Unit 7/DMH/Taunton State Hospital

Education: Harvard Trade union Program, 2017
Massasoit Community College, Associates, 1984

Present/Past MNA Activities: Current Director At-large, General/MNA Board of Directors, Past MNA Vice President 2010-2019, MNA NENA (Northeast Nurses Association) Delegate, Current NENA President, Current Chair, MNA Workplace Violence & Abuse Prevention Task Force, MNA Finance Committee, MNA Convention Committee, MNA Congress on Nursing Practice, Past Vice Chair Unit 7 (MNA Bargaining unit) Executive Board, Past Chair, unit 7 local @ Taunton State Hospital, Current Secretary, Regional Council 5, Current MNA delegate, Greater Boston Labor Council, Executive Board.

I have been honored to participate in numerous capacities within the MNA (see above).Our struggles continue; our members continue to fight and advocate for best practices, safe patient limits and the resources and equipment needed to safely care for their patients, themselves, and their practice. The issues we face here are common across the country.

NENA was established in 2015 with the MNA as a founding Organizational Member. As their website states, "NENA's mission and vision is to promote quality health care by advocating for the collective interests of healthcare providers and their patients throughout the Northeast." Since 2015 NENA has successfully helped over 7,000 healthcare workers (including here in MA) come together to have a collective voice, protecting our professional practice and our patients. I have been honored to sit on the NENA Board of Delegates for several years. I currently serve as the President of NENA.

I am energized by and driven to advocate for workers to have a voice at the table. I believe in fighting for the health and safety of ourselves, our patients, and our communities. I believe in advocacy, unionism, building coalitions, and fighting for what is right and just. So does NENA.

I respectfully ask for your vote to continue to be a delegate of NENA.

Thank you so very much.

MICHAEL D'INTINOSANTO, RN
Winchendon, MA

Employment: Retired- U7

Education: Fitchburg State College, BSN, 1999o
Laboure' Jr College, ADRN, 1984

Present/Past MNA Activities: Past Chair Unit 7, Vice Chair MNA PAC

MNA℠ Massachusetts Nurses Association

CNE

continuing nursing education

For Fall 2023 Continuing Nursing Education Program registration, please visit:

https://www.massnurses.org/nursing-resources/continuing-education/courses

In-Person Offerings

Region 1

The Impact of Substance Use Diseases and Addiction on Patients, Family, and the Community

Description: The purpose of this program is to educate nurses on the public health dilemma of the drug crisis and its impact on the medical profession, patients, families, and the community. This program will include the pathophysiology of addiction, the perspectives of the family and victim, and the stressors/challenges that can create a pathway to substance use and addiction. This program will also discuss the stigma associated with the disease of substance use disorder and addiction.
Presenter: Charlene Verga, MSN, RN, CEN, LNC
Date: Wednesday, October 18, 2023
Time: 5 – 5:30 p.m., Registration/Dinner
5:30 – 7:30 p.m., Program
Location: Delaney House, 3 Country Club Road, Holyoke; delaneyhouse.com
Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

Region 2

Workers' Compensation in the Existing Healthcare Environment

Description: The result of a work-related injury or disease can alter a worker's life. Nurses and other healthcare professionals need to know the typical barriers in accessing timely Workers' Compensation-related healthcare, as well as current legal and union protections. The presentation will utilize case studies during the discussion to focus on the necessary actions individuals must take when reporting and documenting an injury to avoid greater possible negative health and economic impacts.
Presenters: Attorney Charles Donoghue and Christine Pontus, MS, RN, COHN-S/CCM
Date: Thursday, September 28, 2023
Time: 5:30 – 6 p.m., Registration/Dinner
6 – 8 p.m., Program
Location: The Beechwood Hotel, 363 Plantation Street, Worcester; beechwoodhotel.com
Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

Region 3

Understanding Autism Spectrum Disorders

Description: This program will provide information on the identification, classification, management, and clinical interventions for patients with autism spectrum disorders and their families. This program will specifically review the role of the nurse and other healthcare providers in caring for an adult or pediatric patient with autism or other special needs.
Presenters: Shannon Sousa, MS, CCC-SLP, ATP; Jan Randall
Date: Monday, September 25, 2023
Time: 5:30 – 6 p.m., Registration/Dinner
6 – 8:15 p.m., Program
Location: Massachusetts Maritime Academy, Beechmore Conference Center, 11 Buttermilk Way, Buzzards Bay; maritime.edu
Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

Region 4

What's New in Diabetes Care: 2023 American Diabetes Association Standards of Care for Kids and Adults

Description: The Centers for Disease Control and Prevention (CDC) estimate that over thirty-seven million people of all ages in the US are living with diabetes. Nurses are uniquely situated to provide the education and support that is required for good glucose control and management. Diabetes Self-Management Education and Support (DSMES) are an essential part of nursing interventions for patients and families. This program will address current best practices for diabetes care including the newest medications, use of technology, and disparities in care in both pediatric and adult populations. Current public policy will also be addressed.
Presenters: Linda Salvucci, MSN, RN, CDCES; Julia Welch, FNP-C, CDCES; Megan Collins, MA
Date: Tuesday, October 17, 2023
Time: 5 – 6 p.m., Registration/Light Dinner
6 – 8:15 p.m., Program
Location: Danversport Yacht Club, 161 Elliot Street, Danvers; danversport.com
Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

Region 5

Best Practices in Protecting Your License Against a Board of Nursing Complaint

Description: The Massachusetts Board of Registration in Nursing (BORN) is one of several regulatory agencies with influence on nursing practice in the commonwealth. It exists to govern nursing practice and protect the public. This program will help to clarify the role and BORN process that is utilized when a complaint is filed against a nurse's license. Causes of action for discipline by the BORN will be discussed, as well as best practices to decrease the risk of having a complaint filed against a nurse's license.
Presenter: Elizabeth Turner, Esq., RN
Date: Thursday, November 30, 2023
Time: 5 – 5:30 p.m. Registration/Dinner
5:30 – 8 p.m., Program
Location: MNA Headquarters at 340 Turnpike St., Canton
Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

General In-Person CE

Safe Patient Handling and Mobility Conference: Motivating Change

Description: Utilizing SPHM assistive devices and techniques promotes improved outcomes for patients and supports caregivers' well-being. The challenge, adopting a culture that welcomes change.
Presenters: TBA
Date: Wednesday, September 13, 2023
Time: 7:30 – 8 a.m., Registration/Continental Breakfast
8 a.m. – 4 p.m., Program
Location: Four Points by Sheraton Norwood, 1125 Boston-Providence Turnpike, Norwood
Fee: Member/Associate Member: Free. However, a $99 placeholder fee, which will be returned upon attendance, or notification of cancellation if received by September 6, 2023. Non-Members, $99 charge, refunded if cancellation is received by August 30, 2023.
Continuing Education Credits: Will be provided

Disparities in Maternal Child Heath: Actions for the Obstetrical Nurse

Description: This program will explore the impact of disparities in maternal child healthcare. Research has confirmed how disparities and inequalities in the clinical management of maternal child health has negatively impacted health outcomes. This program will explore how the underlying systemic, institutional, and human factors contributed and perpetuated disparities in maternal child healthcare. The program will also discuss how obstetrical nurses can positively impact patient care in addressing disparities at the bedside.
Presenter: Lucinda Canty, PhD, CNM, FACNM
Date: Wednesday, October 18, 2023
Time: 5:30 – 6 p.m., Registration/Dinner
6 – 8:15 p.m., Program
Location: Double Tree by Hilton, 5400 Computer Drive, Westborough
Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

Advanced Cardiac Life Support (ACLS) and Basic Life Support (BLS) Course

Description: Participants will obtain both a BLS and ACLS certification upon the successful completion of the course. New certification participants must attend both Day 1 and Day 2 sessions. Recertification participants are welcome to attend Day 1 but are only required to attend the Day 2 skills session either from 9 a.m. to 12 p.m. or 12:30 to 3:30 p.m.
Presenters: Carol Mallia, MSN, RN; Mary Sue Howlett, Ph.D., RN/FNP-BC, CEN; Charlene L. Verga, MSN, RN, CEN, LNC; other instructors for the clinical session
Dates: Tuesday, October 17, 2023 (Certification)
Wednesday, October 25, 2023 (Recertification Only)
Time: Day 1 –Tuesday, October 17, 2023; 9 a.m. – 4 p.m.
Day 2 – Wednesday, October 25, 2023; Two Sessions:
Session One: 9 a.m. – 12 p.m. or
Session Two: 12:30 – 3:30 p.m.
Location: Day 1 – MNA Headquarters, 340 Turnpike Street, Canton
Day 2 – MNA Headquarters, 340 Turnpike Street, Canton
Book/Card Fee: MNA Member/Associate Member, $50; Non-Members, $250
Education Credits: WILL NOT BE AWARDED FOR ACLS/BLS
MNA Contact: To register, please contact Liz Chmielinski at 781-830-5719 or email echmielinski@mnarn.org

The Nurse's Role in Caring for Risk of Violent Patients: Fourth Amendment and Patient Search and Seizure

Description: Workplace violence against health care providers is a complex phenomenon fraught with ethical/legal challenges. This program will discuss mitigating risk factors of potentially violent patients, Fourth Amendment and private search and seizure. Case studies will be analyzed and discussed.
Presenter: Britain Thames, Esq., RN, JD
Date: Tuesday, December 5, 2023
Time: 5:30-6 p.m., Registration/Dinner
6-8:30 p.m., Program
Location: MNA Headquarters, 340 Turnpike Street, Canton, MA 02021
Fee: Member/Associate Member: Free. However, a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

Region 1 Virtual Offering:

Responding to an Unsafe Patient Assignment: Legal, Moral, and Practical Implications

Description: This program will provide you with the advocacy skills and the communication strategies needed to appropriately respond when you are told "just do your best," but your nursing judgment determines you cannot safely meet the needs of the patient. Topics will include patient abandonment, mandatory overtime, and assuming an assignment under duress or objection. Documentation of unsafe assignments and mandatory liability overtime will be explored. The program will explain who should accept the liability and responsibility for an unsafe assignment.
Presenters: Carol Mallia, MSN, RN; Mary Sue Howlett, Ph.D., RN/FNP-BC, CEN; Joe-Ann Fergus, Ph.D., RN
Date: Monday, November 6, 2023
Time: Login, 5 – 5:30 p.m.; Program, 5:30 – 7:30 p.m.
Location: This program is a live, virtual continuing educational program offered on the Zoom platform.
Fee: Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

Region 2 Virtual Offering

Celiac Disease and Non-Celiac Gluten Sensitivity: What Does It All Mean for the Nurse?

Description: Celiac disease is an autoimmune disease that impacts genetically predisposed persons to a lifetime of dietary challenges. In 2019, the Celiac Foundation estimated that one in one hundred people worldwide are living with celiac disease. This program will describe the pathology of celiac disease, common signs and symptoms, and nursing considerations related to the care and management of Celiac disease in persons living with chronic illness.
Presenter: Laurie A. Higgins, MS, RDN, LDN, CDCES
Date: Wednesday, November 15, 2023
Time: Login, 5:30 – 6 p.m.; Program, 6 – 8 p.m.
Location: This program is a live, virtual continuing educational program offered on the Zoom platform.
Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

Region 3 Virtual Offering

The Growing Use of Anti-Depressant Medications: A Global Update

Description: The number of people living with acute and chronic depression continues to grow locally, nationally, and internationally. The treatment of these illnesses often includes the prescription of various classes of anti-depressant medications. Nurses providing bedside care for these patients must have an extensive knowledge of the actions, indications, and potential side effects of these medications. This program will focus on the most diagnosed types of acute and chronic depression, and the pharmacologic and psychosocial supports vital to effectively treating patients living with depressive illnesses.
Presenter: Judith Jorge Leonard, PMHNP-BC
Date: Monday, October 23, 2023
Time: Login, 5:30 – 6 p.m.; Program, 6 – 8 p.m.
Location: This program is a live, virtual continuing educational program offered on the Zoom platform.
Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

Region 4 Virtual Offering

Documentation Dangers and Their Impact on The Defense: Case Examples, Highlights, and EMR Impacts

Description: Documentation is one of the most important elements of nursing practice. In this program, best practices for good documentation will be highlighted and the issues and impacted defensibility in a malpractice case will be presented. The program will include examples of how medical record documentation can be used to identify gaps that can be interpreted/manipulated through litigation, as well as how insufficient documentation impacts testimony and liability. The use of EMR footprints will also be discussed.
Presenter: Joanne Gulliford Hoban, JD
Date: Tuesday, September 26, 2023
Time: Login, 5:30 – 6 p.m.; Program: 6:00 – 8:15 p.m.
Location: This program is a live, virtual continuing educational program offered on the Zoom platform.
Fee: Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

Region 5 Virtual Offering

Cannabis Stigmatization, Disclosure, and Risk Assessment

Description: This presentation will survey the primary domains of stigmatization as overarching barriers to cannabis-use disclosure and behavioral assessment among patients in the healthcare setting. Knowledge of cannabis use patterns are an integral component to providing fully informed care to patients and mitigating associated risks of cannabis use. Key pharmacokinetic and pathophysiological considerations will be discussed.
Presenter: Daniel D. King, DNP, APRN, CRNA, CPPS
Date: Thursday, October 26, 2023
Time: Login, 5:30 – 6 p.m.; Program, 6 – 8:15 pm
Location: This program is a live, virtual continuing educational program offered on the Zoom platform.
Fee: Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

General CE Virtual Offering

Caring for Persons with the Challenges of Dementia in a Post-Pandemic World: Updates for the Present and Future

Description: This program will provide updates on the medical conditions and progressive illnesses that cause patients to experience dementia symptoms. Demographic updates will be provided on the incidence of dementia illnesses throughout New England and beyond. The program will conclude with a presentation of strategies for providing care for persons living with dementia in a post-COVID society.
Presenter: Judith Pare, PhD, RN
Date: Wednesday, December 13, 2023
Time: Login, 5 – 5:30 p.m.; Program, 5:30 – 8:30 pm
Location: This program is a live, virtual continuing educational program offered on the Zoom platform.
Fee: Fee: Member/Associate Member: Free, although a $25 placeholder fee, which will be returned upon attendance, is required to complete registration. Non-Members, a $95 charge is required to complete registration.
Continuing Education Credits: Will be provided

SPHM Spotlight:

Did you know that …

"Nursing is an occupation most at risk from lower back pain (LBP), with rates exceeding heavy industry workforces."*

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

*Tariq RA, George JS, Ampat G, et al. Back Safety. [Updated 2022 Oct 3]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. Available from: https://www.ncbi.nlm.nih.gov/books/NBK519066

MNA℠ Massachusetts Nurses Association

SAVE *the* DATE:

October 11 - 12, 2023

MNA Convention & Business Meeting

Quincy Marriott Hotel

We look forward to seeing you there!

Attention all Artisans!

You are invited to showcase your creations as a vendor at this year's Convention. Space is limited and vendor selection will be based on the need to vary the merchandise for optimal shopping experience.

If interested, please submit a description of the merchandise available for sale, with three to five photos of the items and send a request for a vendor application to **jmarshall@mnarn.org** by September 1st, 2023.

A $50 place holder check is required for the vendors, but will be returned upon attendance. Each vendor must donate a raffle item.

Due to chemical sensitivity, no fragrance items will be included.