the Massachusetts nurse

ADVOCATE

The Newsletter of the Massachusetts Nurses Association ■ Vol. 94 No. 1

Victory for Framingham Union

page 14

February/March 2024

MNA℠ Massachusetts Nurses Association

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President's Column

Katie Murphy

Nurses and Healthcare Professionals across the state continue to strengthen protections for patients and staff in so many settings. Contracts have been settled with strong wage packages and staffing language. Bargaining units have fought for and won first contracts. We are proud to welcome the courageous nurses of Framingham Union Hospital (pg. 14) to MNA as of January of this year. Nurses and healthcare professionals continue contacting us and asking about improving working conditions at their hospitals.

But issues like unsafe staffing, the corporatization of healthcare, and protecting healthcare services for the most vulnerable persist. I am continually impressed by my conversations with members across the state who are working tirelessly on these issues for their patients.

Once again, Gallup has placed nurses as the most trusted professionals for high honesty and ethical standards (pg. 3). Our colleagues who are healthcare professionals, whom we work with side-by-side every day, embody those characteristics as well.

It should be noted though that our colleagues at St. Vincent Hospital are being actively punished for standing up for patient safety (pgs. 10-12). After enduring a grueling 301-day strike, these nurses continue to advocate for their patients, but their corporate owners are retaliating. The St. V nurses, like union members everywhere and in all sectors, are not relenting though. When we advocate for our patients and colleagues, we all win. When we know our contracts, it gives us greater power at the bedside to care for our patients at the level they require.

I urge everyone to participate in our upcoming educational events and actions. Our annual "Virtual Career Fair" for new nurse graduates (pg. 7) will be on March 26. Please pass the news of this program on to friends and relatives who are on the cusp of launching their nursing careers. We also have "MNA Advocacy Day: From the Bedside to Beacon Hill," scheduled for May 8 (pg. 5). It has been a long time since we have visited with our legislators in the Statehouse during Nurses Week, but we currently have several bills in the Legislature that address our most pressing issues, including staffing, workplace violence prevention, and protecting existing healthcare services, facilities, and hospitals.

Our Advocacy Day allows us to speak directly to our legislators about our work and our patients. As you can see from the enclosed flyer (pg. 5) the MNA is providing prep sessions for interested attendees. I have always said that our members' words — which are always spoken from the heart — are the most eloquent and important I have heard. Our elected leaders feel the same when they hear from you.

I look forward to being with you at the Statehouse on May 8.

In Solidarity,

Katie Murphy RN

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Nurses Remain Most Trusted Profession for 22nd Straight Year, Per Annual Gallup Survey

Amid a healthcare crisis that has seen hospital executives closing essential services and refusing to address patient safety and inadequate staffing problems, Americans find nurses to be the most trusted profession and business executives to be among the least, according to an annual Gallup survey released January 22.

Nurses are viewed as having "very high" or "high" ethical and honesty standards by 78% of the public, 13 points higher than any other profession even as the Gallup poll this year saw an overall decline in trust among most professions surveyed. Only 12% of Americans said they trusted business executives, down from 20% in 2019.

"With our healthcare system in crisis, Americans turn to nurses for the truth," said Katie Murphy, a practicing ICU nurse, and President of the Massachusetts Nurses Association. "Nurses remain the most trusted because as patient safety and essential services come under threat from profit-seeking executives, nurses relentlessly stand up for their patients and profession."

Even as nurses remain the nation's most trusted and ethical profession for 22 straight years, they face enormous challenges. According to the 2023 State of Nursing in Massachusetts survey, more than 8 in 10 registered nurses said the quality of patient care in hospitals had gotten significantly worse over the previous two years as they described being emotionally exhausted, increasingly disengaged and more likely to leave the profession or reduce their hours.

- 71% of nurses said in the 2023 MNA survey that their biggest obstacle to care is understaffing/having too many patients.
- As many nurses plan to leave the field within two years because of understaffing and burnout as retirement (40% retirement, 20% overworked/understaffed and 19% burnout/exhaustion/stress).
- Among nurses already not working in a hospital who used to work in a hospital, 18% left because of understaffing (the most common reason) and 15% because of work hours/schedule.
- Newer nurses are disproportionately feeling the impact of the healthcare crisis.
    - Sixty-three percent of nurses with 0 to 5 years of experience say understaffing is their biggest obstacle to providing quality care, compared to 56% of all nurses.
    - Of those nurses planning to leave the field within two years, 67% of newer nurses say they will find work outside of healthcare, compared to 31% of all nurses.
- In overwhelming numbers, nurses support a legislative solution that would develop a statewide maximum limit on the number of patients a registered nurse at Massachusetts hospitals can be assigned at one time.
    - Seventy-six percent of all nurses said they strongly support this safe patient limits bill, and 12% somewhat support it.
    - Nearly every nurse (97%) surveyed with 0-5 years of experience said they "strongly support" the legislation.

Gallup notes that since nurses were added to the survey in 1999, they have topped the list of most trusted professions every year except in 2001, when firefighters were recognized shortly after the Sept. 11, 2001, terrorist attacks for their heroism and bravery. ■

Dana-Farber Cancer Institute – Merrimack Valley Nurses Vote Overwhelmingly to Ratify First MNA Contract Following Strike Advocating for Investment in Local Nurses and Quality Patient Care

Registered nurses and nurse practitioners at Dana-Farber Cancer Institute – Merrimack Valley secured a contract after unionizing to help retain a strong workforce and high-quality cancer care for local patients.

METHUEN, Mass. – Registered nurses and nurse practitioners at Dana-Farber Cancer Institute–Merrimack Valley (DFCI–MV), represented by the Massachusetts Nurses Association (MNA), voted on Wednesday, January 24 to ratify a first MNA contract that will help nurses continue to provide the high-quality cancer care that patients in Merrimack Valley need and deserve.

The DFCI–MV nurses voted overwhelmingly on Wednesday to ratify an agreement reached earlier this month that provides nurses with strong wage increases to help with recruitment and retention, and benefits that cannot be changed during the life of the contract. Those two contract areas were critical going into the nurses' one-day strike on September 27, which was followed by a two-day lockout imposed by DFCI.

"Winning this strong MNA contract shows what nurses are capable of when we work together on behalf of our patients and professional practice," said Kate Mitchell, FNP-BC, AOCNP at DFCI–MV. "We are excited to use our contract to help keep nurses at Dana-Farber Merrimack Valley so we can continue to provide high-quality cancer care to local patients."

"Community support was critical to our success in negotiating a union contract that makes significant improvements over our previous working environment," said Kerrin Albert, Infusion RN at DFCI–MV. "When we hit the strike line and were locked out, our solidarity as nurses was boosted by many patients, residents, elected officials, and union allies. We want to thank all of them for their amazing support."

"Despite hard-fought negotiations, we persisted and earned a powerful tool for any nurse trying to advocate for their patients — a union contract," said Errin D'Arcangelo, Oncology Nurse Navigator at DFCI–MV. "While our focus during the strike was competitive pay and secure benefits, our contract also gives us a wide range of legally enforceable rights that will make Dana-Farber Merrimack Valley a place where nurses want to come and stay long-term."

MNA Contract Highlights

- Duration: The contract begins July 1, 2023, and ends June 30, 2026.
- Wage Step Scale: A wage step scale that provides fair and transparent pay increases for nurses as they gain years of experience at DFCI–MV. The scale will feature 4% increases between steps.
- Ratification Bonus and Retro Pay: Nurses will receive a $3,000 ratification bonus as well as retroactive pay increases back to July 1, 2023.
- Competitive Pay: Nurses will receive a series of across-the-board raises (ATB) in addition to the wage step scale to help keep nurse pay competitive and enable DFCI–MV to recruit and retain nurses. The nurses will receive a 3.5% ATB in July 2024 and 3% ATB in July 2025. DFCI will also add a new top step over two years to the scale.
- Secured Benefits: The contract protects various benefits, such as retirement security, time off, holidays, health insurance, etc. from being changed during the contract without agreement by the nurses.
- Just Cause: This is a well-established and universally recognized standard in labor law providing nurses protection against arbitrary or unfair discipline. This helps ensure that nurses can advocate for patients and colleagues without fear of retaliation.
- Grievance and Arbitration: These clauses — part of all MNA contracts — are a crucial tool for addressing and rectifying violations of the contract.

DFCI–Merrimack Valley 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. DFCI–MV nurses voted in June and July 2022 to form a union and join the MNA in an election overseen by the National Labor Relations Board. The MNA also represents approximately 600 nurses at the DFCI main campus in Boston under a separate contract. ■

Consider Becoming an MNA Peer Supporter

with support from the Betsy Lehman Center

These days, too many healthcare staff are feeling stressed, sad, and exhausted. Challenges stemming from the COVID-19 pandemic persist and MNA members continue to deal with staffing shortages, high patient workloads with sicker patients, lack of respect and professionalism from their employers, and continued health and safety issues, including an increase in workplace violence. These and other workplace issues can cause feelings of anxiety, stress, exhaustion, and diminished confidence in practice skills.

Offering Peer Support to Colleagues Can Help

Research shows that trained peer supporters can help colleagues cope with difficult emotions affecting their well-being and work performance. This is why the MNA is creating a Peer Support Network.

Volunteer peer supporters are NOT expected to function as therapists but instead provide emotional first aid.

Volunteers Will:

- Attend four hours of training
- Offer about two hours/month of peer support services
- Complete a brief form after each peer support interaction
- Attend two “Support for the Supporter” meetings annually

Interested in Becoming a Peer Supporter?

Contact the MNA’s director of nursing, Judith Pare at jpare@mnarn.org.

Berkshire VNA Nurses and Healthcare Professionals Reach Tentative Agreement on First MNA Contract to Stabilize Staffing and Improve Patient Care

The nurses and healthcare professionals of the Berkshire Visiting Nurse Association (BVNA), represented by the Massachusetts Nurses Association (MNA), reached a tentative agreement on December 15 with Berkshire Health Systems, agreeing on contract terms that give BVNA clinicians a wage step scale and tackle some productivity issues to help with recruitment and retention and address patient care access problems.

"We have fought long and hard for this contract because we care deeply about our patients and their ability to receive high-quality homecare throughout Berkshire County," said Tamaryn Clowdus, physical therapist, and Co-Chair of the MNA Bargaining Committee at Berkshire VNA. "Our collective strength as union nurses and healthcare professionals, along with the community and our labor supporters, was essential in helping us reach an agreement. We are pleased to have secured a wage step scale, productivity improvements, and many other contract provisions that will benefit clinicians and patients for years to come."

Berkshire VNA clinicians had been negotiating their first contract after initially forming a union two years ago. The tentative agreement followed a December 4 informational picket well-attended by community supporters. The informational picket was the latest in a series of actions by BVNA nurses and healthcare professionals. In October, the clinicians delivered a petition to BHS CEO Darlene M. Rodowicz emphasizing the fact that the BVNA has experienced a significant loss of permanent staff since at least

December 2021, destabilizing homecare service access and posing a serious risk to continuity of patient care.

In May, BVNA nurses and healthcare professionals held a virtual community forum on the changing state of home care. In April, they delivered a petition signed by community members urging BHS to move quickly to settle a fair contract. BVNA registered nurses, MSWs, and physical, occupational and speech therapists joined MNA in December 2021 following an election overseen by the National Labor Relations Board.

The medical needs of Berkshire VNA patients are varied and complex, including post-surgical conditions such as total hip or total knee replacements; stroke; Parkinson's Disease; Multiple Sclerosis; Amyotrophic Lateral Sclerosis (ALS); cardiopulmonary conditions; amputations; and post-trauma care (breaks, fractures). In recent years, many hospital-based services for patients have shifted to in-home services, making VNAs and their caregivers an essential and ever-expanding part of the healthcare system. Hospitals now move patients back home faster, leading to a dramatic increase in the size and complexity of the region's at-home patient population. ■

Update: The BVNA RNs and HCPs overwhelmingly ratified their contract on December 22, 2023.

Scholarship Funding Available Through The Massachusetts Nurses Foundation

MNF

Printable applications are available beginning January 2024 at https://www.massnurses.org/mnf/scholarships

The deadline to apply is June 1, 2024.

For further information or to request an application be mailed to you, please call the MNF voice mail at 781-830-5745 and leave a message with your name (please spell) and address or email Cindy Messia at cmessia@mnarn.org.

Virtual Career Fair

MNA is hosting a virtual career fair and educational program for senior nursing students

FREE

program for senior nursing students and nursing faculty.

Topics will include:

- Suggestions for NCLEX Preparation
- How to best manage a job search in today's challenging job market
- Interview strategies to ensure a new graduate orientation and preceptorship for successful transition to the RN role

Tuesday, March 26, 2024 • 6 - 8:30 p.m.

Pre-Registration is required. We will be hosting a Career Fair with four Breakout Sessions (each for 15 minutes in length). Participants who preregister can select the facilities they would like to meet with.

Follow the QR code to register:

For questions, please email Transitions@mnarn.org or call 781-830-5719.

MNA℠ Massachusetts Nurses Association

BI Anna Jaques Hospital RNs Reach Tentative Agreement on New Three-Year Contact to Recruit and Retain the Staff Needed to Ensure Quality Patient Care

The negotiations committee representing 350 registered nurses at Beth Israel Lahey Anna Jaques Hospital (AJH), after more than six months of negotiations, has reached a tentative agreement on a new three-year contract that will provide significant improvements in wages and benefits, as well as long-sought improvements in staffing and nurses' working conditions that will allow the hospital to recruit and retain the staff needed to ensure the best possible care to patients.

"This was an enormous achievement that recognizes the nurses at AJH for their dedication and professionalism," explained Eileen Ryan, RN, a nurse on the hospital's ambulatory care unit and co-chair of the Massachusetts Nurses Association's (MNA) local bargaining unit for the nurses. "We presented management with 25 proposals which essentially created a new and improved contract. This could never have happened if we didn't have the support, encouragement, and participation of our 350 nurses. During this time, we also have been fortified by the support from all hospital caregivers and our community. The common theme between hospital staff members and the community is that we all care about our hospital, and we all share a willingness to work to make it stronger."

Earlier this month community leaders submitted petitions with more than 1,200 signatures to hospital administrators from community members in support of the nurses' cause, a development, along with the nurses earlier 99 percent vote to authorize a strike if needed, that the nurses credit with moving the negotiations in a more positive direction.

Highlights of the tentative agreement include:

- **Competitive wage increases, as the AJH nurses were the lowest-paid nurses before the settlement.** The new contract includes wage increases ranging from 10.5% up to 65% in the first 12 months of the new agreement.
- **New Weekend Incentive Program.** To entice better staffing on weekend shifts the contract includes a new program that compensates nurses who agree to work weekend shifts with an additional stipend for covering those shifts. Nurses who commit to working two 12-hour shifts over a weekend will receive a stipend of $480 in addition to their regular rate of pay, and those committing to three shifts will receive an additional $720. The pact also includes increases to several shift differentials including those for nurses with a bachelor's and master's degree in nursing, nurses working as charge nurses on the floor, nurses who are on call, and for those precepting less experienced staff.
- **Hospital staffing improvements.** The pact includes improvements to staffing levels in the hospital's intensive care unit to ensure that AJH complies with the state's ICU staffing law. It also codifies and allows the union to enforce current staffing levels for each area of the hospital, and prevents any reductions in those staffing levels, while affirming that the hospital cannot assign mandatory overtime in keeping with the state law prohibiting the practice. Finally, the contract creates new positions for "meal break" nurses who are available to allow nurses to take their legally required meal breaks. Last year the Attorney General cited and fined the hospital based on nurses' complaints of chronic inability to take breaks even during shifts longer than 12 hours. The agreement also provides incentives for per diem RNs (who work shift to shift) to make ongoing commitments of a certain number of shifts per six-week period. Finally, the agreement includes nurses who wish to pick up extra shifts a bonus for doing so, a move designed to ensure better staffing in times of need.
- **Improvements to nurses' benefit package**. The agreement includes improvements to the nurses' earned time benefit, retirement benefit, reimbursement for profession-related tuition costs, and health insurance benefits.

The MNA's Anna Jaques bargaining committee has submitted the tentative agreement to the 350 union members for ratification, who will vote on it in the next three weeks.

"This contract if approved by our members will further enable nurses to provide safe and personalized healthcare the way they know how to provide," added Margaret Mirecki, RN, who works on the hospital's telemetry unit and serves as co-chair of the nurses' MNA local bargaining unit. "We look forward to returning to a new-found sense of pride in our hospital and how we are valued and perceived. It wasn't an easy road to get there, but we are committed to improving patient care and, with this new contract, to retaining the talented nurses we have, while enticing others to join our team. We applaud our co-workers who have weathered the storm and stayed at AJH to see this contract through." ■

The Anna Jaques RNs overwhelmingly voted to ratify their contract on February 26. Congrats!

The MNA℠ Traveler to EUROPE & BEYOND 2024

Exciting News! MNA is Expanding it's Travel Offerings

MNA has partnered with Collette Travel to expand our tour offerings in 2024.

In 2024 MNA is hosting the Lake Como Switzerland tour in May with Durgan Travel and in September we have partnered with Collette Travel to offer Switzerland, Bavaria and Austria.

Lake Como & Switzerland – May 15 to 23, 2024. Trip price is $3599 pp/double occupancy if paying via check. Price will be reduced if the group size is over 25 passengers

Join us on a tour of one of Northern Italy's premier vacation resorts. This nine night trip includes air, transfers, hotel, and most meals as well as guided tours daily. Our tour will feature guided visits to the picturesque lake-side towns of Como and Bellagio. We will discover Lake Maggiore and the Borromean Islands and the narrow alleyways and villages of this area. Next, we head to the Italian Alps and explore the towns of Sondrio, Postalesio and Berbenno. A highlight of this tour will be a visit to the fashion capital of Milan. After a panoramic tour of the city we will visit the 14th century Gothic Duomo and take an elevator to the roof-top for one of the most amazing views of the city. We will be treated to the great experience onboard the UNESCO Bernina Express Red Train as we travel to the famous ski resort town of Saint Moritz, Switzerland. We will stop in Engadine and Maloia in the Lakes Region. On our last full day on the trip we will visit the charming city of Bergamo to explore the old town with the back-drop of the Bergamese Alps. This package is a great value to a high-end resort destination. Don't miss the opportunity to visit this spectacularly beautiful part of Northern Italy and Switzerland.

Explore Switzerland, Bavaria and Austria (with an optional post tour extension to Vienna) September 4 – 13, 2024 - $4799 pp/double occupancy

This amazing tour begins with a 4-night stay in the Capital City of Bern, Switzerland. In addition to touring the UNESCO World Heritage Site of Bern we will visit the small mountain village outside of Interlaken and Lucerne, the "Swiss Paradise on the Lake." On our way to Innsbruck, we will explore Liechtenstein, the smallest German-speaking country in the world and the only country to lie entirely within the Alps. While in Innsbruck we will travel through the picturesque Austrian countryside to Salzburg and tour Mirabell Gardens (seen in *The Sound of Music*) and Getreidegasse (birthplace of Mozart), as well as many other highlights of this beautiful city. During our stay in Austria, we will experience the rich musical tradition of mountainous Austria during a Tyrolean folklore show hosted by a well-known local musical family. On our last full day of touring we will visit the Linderhof Palace and the Ettal Abbey, a Benedictine monastery founded in 1330 before enjoying a farewell dinner at a traditional Tyrolean restaurant. Discover the beauty of the Alps with this fun-filled tour. For the full brochure and registration information, go to: https://gateway.gocollette.com/link/1222283

In 2025, we are excited to offer Costa Del Sol Spain & Madrid for only $3999 per person double occupancy, May 17- 25, 2025 - see: https://gateway.gocollette.com/link/1229448 or QR code on the left for the details. A Greek Island Hopper tour in September and German Christmas Market tour in December is in the planning stage for 2025.

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

Sign up for email updates on MNA travel:

St. Vincent Nurses File Complaints with State and Federal Agencies Citing Dangerous Conditions that Jeopardize the Safety of Patients Admitted to the Hospital

The nurses of St. Vincent Hospital, who are represented by the Massachusetts Nurses Association (MNA) recently filed several official complaints with the Department of Public Health Division of Healthcare Quality, Joint Commission (which accredits acute care hospitals), the Center for Medicare and Medicaid Services, and the Mass. Board of Registration in Nursing in response to a growing and dire crisis in the safety of care for patients admitted to the Worcester-based facility.

The complaints are based on hundreds of reports filed in real-time by nurses over the last six months that highlight significant deficiencies in staffing, hospital policies, allocation of technology, and a deliberately punitive management culture that is resulting in dangerous delays in the administration of needed medications and treatments, preventable patient falls and other complications, including preventable patient deaths.

"We are sickened to report, but find ourselves duty bound to do so, that the conditions documented in these complaints raise serious concerns about the safety of patient care at our hospital," said Marlena Pellegrino, RN, co-chair of the nurses' local bargaining unit with the MNA. "As these complaints show, our administration has created an environment that too often violates the dignity of our patients and compromises our ability to meet accepted standards of patient care. As we wrote in our complaint to these agencies, 'In our role as legally mandated advocates for our patients we appeal to these agencies to immediately intervene, and take whatever steps are necessary to prevent the further erosion of patient care conditions, and to protect our patients and our community from continued harm and unnecessary suffering.' "

While care conditions have been of grave concern for nurses for several years, they have taken a turn for the worse since CEO Carolyn Jackon installed a new Chief Nursing Officer Denise Kvapil, who has implemented a concerted campaign to cut staffing levels and increase nurses' patient loads in blatant violation of the nurses' union contract, a contract negotiated with Tenet Healthcare to improve patient care at the hospital and to end the nurses historic 10-month strike in 2021-22.

Marla Pellegrino speaks at the press conference.

The nurses have filed more than 500 official reports of staffing/patient care conditions that jeopardized the safety of their patients from July through December of 2023, with an alarming 102 reports filed in January of this year alone. In the nurses' 22-page complaint, they cite several specific instances of unsafe staffing and other conditions that violated specific regulations established by the Joint Commission, Medicare and Medicaid, the Department of Public Health, and the Board of Registration in Nursing that are required by these regulators to ensure the safety of patient care, including:

The hospital continues to admit patients despite inadequate staff to appropriately meet the patients' needs, in violation of TJC (The Joint Commission) standard PC.01.01.01 "The hospital accepts the patient for care, treatment, and services based on its ability to meet the patient's needs." Nurses continue to witness the violation of the hospital's handbook on Patient Rights and Responsibilities, but their concerns have gone unanswered. The hospital repeatedly violates 105 CMR 130.311: "Registered Nurse Coverage- There shall be a sufficient number of registered nurses on duty at all times to plan, supervise and evaluate nursing care, as well as to give patients the nursing care that requires the judgment and specialized skills of a registered nurse" and 105 CMR 130.312: "Registered Nurses, Licensed Practical Nurses, and Ancillary Staff Coverage- The number of registered nurses, licensed practical nurses and unlicensed nursing personnel assigned to each nursing unit shall be consistent with the types of nursing care needed by the patients and the capabilities of the staff."

The complaints provide documentation and reports of Tenet's failure to adhere to these standards. Here are some examples, all occurring in December and January:

- A confused and restless patient was accepted in transfer to the SVH emergency department from another facility. The patient required a 1:1 sitter but none was available. The patient suffered an unwitnessed fall. Nurses report falls to be a regular occurrence due to the poor staffing conditions.
- Cardiac patients were accepted to the hospital and admitted to the unit despite no cardiac telemetry boxes available on the unit (telemetry boxes refer to special monitors to track cardiac activity and are critical to spotting a potential cardiac arrest). One patient, admitted in hypertensive crisis with a blood pressure of 242/130 was ordered for cardiac monitoring but was not monitored while receiving antihypertensives that were new to him. Hospital policy requires cardiac monitoring is required when administering at least some of the patient's medications. The resolution presented by hospital administrators was "hoping that patients would be discharged" and make available boxes; nurses were instructed to call the admitting physician and request the order be discontinued.
- One RN called a "Rapid Response" on three of her patients in the same shift ("Rapid Response" refers to a call by the nurse for extra help for patients entering a cardiac crisis). Medications were given late; bed alarms and call bells went unanswered; patient assessment and skin care hygiene was delayed or missed entirely; patient in restraints not monitored as required by policy violating TJC Standards. Nurses' report an increase in the need for "Rapid Response" calls directly attributable to nurses not having the time to monitor and care for patients to prevent a negative downturn in their condition.
- A nurse was assigned a new admit to the ICU despite needing to hold pressure on an arterial bleed in another room; No staff available to monitor a patient ordered for 1:1 and the assigned nurse was responsible for a second patient violating the TJC standard, and the Massachusetts law requiring one nurse to each patient in the ICU based on their acuity level. The hospital rarely staffs intensive care units with enough staff to provide this level of care to the most critically ill patients.
- On the maternity unit, "a patient who was fully dilated and pushing (in active labor) for more than 5 hours was "on hold" for a C-section and multiple patients were placed "on hold" for inductions because of inappropriate staffing levels violating TJC Standards.
- All medication administration and care delivery was delayed. There was no supervisor or critical care support in response to a "Rapid Response" call for a critically ill patient, delaying the expert care required for the patient. A patient ordered for 1:1 safety monitoring was not monitored as such and was frequently found getting up alone, at risk for fall. A patient with a massive unstageable wound was frequently incontinent of stool but could not be provided the hygiene and skin care deserved in a timely manner. Due to lack of staff and time to monitor patients, numerous nurses reported patients left to lie in their own urine and feces for extended periods of time, a unwarranted assault on their dignity, while also placing these patients at risk for bedsores and infections.

Cuts to Staffing in Emergency Department Pose Greatest Threat to Patients

The nurses highlight the hospital's busy emergency department as an area of greatest concern for both nurses and patients due to the administration's draconian efforts to gut contractually guaranteed staffing levels. While the nurses contract calls for at least 12 nurses to be on duty to care for patients, the hospital cut ED staffing by over 50 percent, on most nights, running this busy, urban emergency department to operate with just four or five nurses.

There have been nights when four nurses were responsible for more than 100 patients, including critically ill patients waiting for a bed in the ICU, patients in need of monitoring for a stroke or heart failure, and behavioral health patients, some of whom are at risk for suicide, or potentially violent who were left unattended in the ED's behavioral health annex with no RN assigned, which is a blatant violation of Joint Commission standards. National standards for emergency department care call for an ED nurse to be assigned a maximum of five patients at a time, yet at St. Vincent, there are many days and nights when nurses can have 13 – 15 patients apiece.

The complaint also details many instances where there is no "triage nurse", a nurse to evaluate incoming patients to assess the nature of their illness and need for care, and to determine which patients need to be seen first. This is a critical role in any ED, but takes on added significance at SVH as the facility is a designated stroke center, which obligates the facility to ensure timely identification, monitoring and intervention for those patients suspected of suffering a stroke. There are many documented instances where there is no triage nurse available to perform this function, with a waiting room that may have 40 to 50 patients waiting for care. The hospital also places patients who are admitted and boarding in the ED waiting for a bed to open, with no RN oversight, again, a blatant violation of standards for this care.

The administration also staffs the emergency department, an area that calls for highly skilled and experienced nurses, with newly graduated nurses or novice nurses, in an understaffed environment where all the staff is overwhelmed, and there is no ability to support or mentor these nurses.

Adding insult to the injury of working in such an unsafe environment, the nurses point to the lack of any meaningful response to their concerns and for the safety of their patients, and as a result, 27 nurses in the department have signed onto a complaint with the Board of Registration in Nursing against hospital nursing administration for its failure to provide appropriate care conditions that "has placed patients at risk."

Management Responds to Nurses Safety Concerns with Campaign of Retaliation

In the wake of this crisis, the nurses at SVH and the MNA have been attempting to establish a positive working relationship with the administration since the end of the strike, and at every turn those efforts have been rebuffed, only to face a concerted campaign of recrimination, daily violations of the nurses' union rights and of late, unlawful and unwarranted retaliation against the nurses who had the audacity to advocate for their patients and their rights.

The impact of Tenet's practices and behavior over the last two years has been devastating by design. A hospital that once had more than 800 nurses now is staffed with around 500, with more than 250 pending vacancies. While nurses struggle every day to keep their patients safe, Tenet management refuses to engage in any meaningful effort to recruit and retain needed nursing staff. Nurses who are recruited to the facility, particularly newly graduated nurses, end up leaving their positions, many before they even finish their orientation.

The nurses point out that Tenet spent more than $5 million a week during the nurses strike to recruit more than 200 travel nurses to break the strike and avoid safer staffing levels, and now that it is settled, the hospital is refusing to hire a significant number of travel nurses to ensure appropriate patient care. When nurses in the maternity unit requested the need to contract with travel nurses to ensure a safe staffing level to provide care for mothers and newborns, hospital administration responded that the budget did not support it. This is occurring when Tenet Healthcare turned a profit of more than $854 million for the third quarter of 2023, a profit margin of 17 percent.

Since the strike ended, the nurses have filed more than 100 grievances against the employer for violation of the contract, and dozens of pending charges for unfair labor practices, Tenet has refused to re-engage in a long-standing practice of holding regular meetings between nurses and management to resolve these issues, and recently attempted to bar MNA staff from entering the hospital to conduct lawful union business.

This month, after the nurses filed their complaint with the Board of Registration in Nursing and other agencies, and shortly after the BORN began its investigation of the complaint, three nurses in the emergency department involved in the complaint were terminated, and six nurses on other units in the hospital, including the co-chair of the bargaining unit Dominique Muldoon were suspended without pay for their efforts to object to unsafe patient assignments.

The MNA has responded by filing a charge of unfair labor practice against Tenet and is seeking injunctive relief to reverse the terminations and suspensions. The MNA is also preparing an official complaint under the state's Healthcare Whistleblower law, which will be filed in Superior Court against the retaliatory terminations.

The concluding paragraph of the nurses' complaints makes clear the nurses' position, and reads: "These conditions are abhorrent by any medical or nursing standard and the nurses of St. Vincent Hospital are both outraged and overwhelmed by the suffering they have endured. As a result, dozens have left the facility unable to accept such lax and dangerous standards, as well as from the repeated abuse they have received from their administration. As an agency responsible for holding providers accountable for the care they provide, we reiterate our call for your immediate intervention, as without proper oversight, we fully expect many more patients to be harmed, and tragically, a number of our patients will die." ■

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

Update: Steward Healthcare Crisis

As the *Massachusetts Nurse Advocate* went to press, the state and more than 3,000 of our members who work at eight hospitals owned and operated by embattled Steward Healthcare, were grappling with the fallout of a financial crisis for the for-profit system that is threatening the survival of all of Steward's hospitals in our state.

In response, the MNA issued the following statement: "The nurses and the MNA have been in regular contact with the employer, state agencies, policymakers, and the media, about the issues related to Steward for more than three years. While we appreciate that all stakeholders are now responding to these issues, the focus now should be on stabilizing this crisis and ensuring this and all communities are receiving the care they expect and deserve. Bottom line, we have a healthcare system and a healthcare workforce that has been pushed to the breaking point and we cannot afford nor should we accept as a City or as a Commonwealth the loss of any bed or service, and certainly not the loss of any of these hospitals, as the loss of any hospital or service at this time would be devastating for the vulnerable communities served by these facilities. In the coming weeks decisions must be made to ensure the orderly transition of Steward facilities so that these communities continue to receive the care they need and that surrounding hospitals are not overwhelmed by the prospect of potential closures. The MNA has and will continue to work with all stakeholders to develop a plan to address this current crisis, while also creating appropriate processes and oversight to ensure a safer, more equitable health care system for future generations."

In late February, the MNA was invited to have nurses testify before the Boston City Council Committee on Public Health about the crisis, where Ellen MacInnis, MNA board member and nurse at Steward-owned Saint Elizabeth's Medical Center provided compelling testimony outlining the MNA's concerns.

"I have worked at St. Elizabeth's for more than 25 years and believe that our facility provides a vital service to our city and that the loss of our facility will deliver a devastating blow to the entire health care infrastructure, particularly to some of the most vulnerable and marginalized patients who depend on us for their care," MacInnis testified.

"The issue now is how do we, all of us involved in health care, and all those who guide public policy on the delivery of healthcare, how are we going to respond once again to ensure that the communities who depend on these hospitals for care, continue to receive the full services these hospitals provide. As the famous saying goes, failure is not an option. That is why the MNA and all nurses in the Steward system have been calling on all policy makers on every level, as well as all providers and stakeholders to our health care system to work together to find a viable solution to this crisis that preserves these services for those most vulnerable patients and communities we are all here to serve. We need to stop talking about the closure of these hospitals and start talking about how we can transition these hospitals to new providers so that we can keep them open and to provide care to these communities."

The MNA currently represents nurses and other healthcare professionals for collective bargaining at Steward-owned Carney Hospital, Good Samaritan Medical Center in Brockton, Holy Family Hospital in Haverhill, Holy Family Hospital in Methuen, Morton Hospital in Taunton, Nashoba Valley Hospital in Ayer, Norwood Hospital and St. Elizabeth's Medical Center in Brighton. ■

Newton School Nurses Turn Out in Force to Support Striking Teachers

Wearing their MNA blue and holding homemade signs, the Newton School Nurses were hard to miss when they joined up with the Newton school teachers on their picket line on January 19.

Lucy Boyer, vice chair of the Newton School Nurses with MTA president Max Page after her inspirational support speech.

Framingham Union Hospital Nurses Vote to Join Massachusetts Nurses Association and Unite to Improve Conditions for Patients, Clinicians, and the Community

Framingham Union Hospital nurses have exercised their right to unionize, voting overwhelmingly on Wednesday, January 10 to join the Massachusetts Nurses Association. This successful election enables the nurses to work together to improve patient care conditions and advocate for the professional respect they deserve.

"Caring for patients in a hospital has never been more challenging and complex," said Framingham Union RN Paivi Ratu-Rodriguez. "Our election victory gives us the power to make positive changes that benefit our patients, the working environment of our colleagues, and our entire community."

"We are thrilled to have our union!" said Framingham Union RN Adam Crawford. "Framingham Union nurses now have a strong and independent voice to address the patient safety issues we face daily. As union nurses, will use our legal rights to improve care conditions and our nursing practice."

Approximately 280 Framingham Union nurses participated in an election overseen by the National Labor Relations Board (NLRB) after filing a petition with the NLRB in September 2023. The vote count was 188 MNA yes to 37 no. Nurses overcame attempts at union-busting and a months-long delay because of an appeal filed by hospital owner Tenet Healthcare. Following the NLRB election, nurses will establish local union guidelines, vote for their elected leaders and bargaining committee, and begin determining proposals for first contract negotiations.

The main themes nurses identified for why they wanted to join the MNA included:

- To improve nurses' ability to provide quality safe patient care.
- To promote a safe and healthy working environment.
- To revive and preserve a sense of pride, morale, and respect in their community hospital.
- To feel valued, treated with respect as a profession and satisfaction in their work.

"An overwhelming majority of Registered Nurses at Framingham Union Hospital have decided that we would like to have a real and independent voice on all decisions that affect us, the work we do and the patients we take care of," the nurses wrote in a letter they delivered to the hospital CEO in September. "We would like to be real partners with you in setting priorities for our workplace and ensuring a healthy future for Framingham."

The MNA is the largest union and professional organization of nurses and healthcare professionals in Massachusetts. It represents 25,000 members in healthcare facilities across the state, including nurses at more than 70 percent of the Commonwealth's acute care hospitals. The MNA is led by a board of directors that is directly elected by its membership and consists of front-line nurses and other healthcare professionals. ■

Massachusetts Nurses Association

CNE
continuing nursing education

For Spring 2024 Continuing Nursing Education Program registration, please contact:
Liz Chmielinski at 781-830-5719, echmielinski@mnarn.org or
Dayana Ocasio at 781-830-5721 or docasio@mnarn.org

In-Person Offerings

Region 1

Substance Use Disease: The Danger of Illicit Drug Use

Description: This program will provide an overview of substance use disease and the danger of illicit drug use. The increase in overdose deaths during the pandemic will be discussed. Different drug substances and the effects and treatment modalities will be analyzed.
Presenter: Charlene Verga, MSN, RN, CEN, LNC
Date: Wednesday, April 24
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

Addressing the Commercial Sexual Exploitation of Children (CSEC): A Public Health Issue

Description: CSEC is an ever-changing form of interpersonal violence impacting all communities across the Commonwealth. Nurses are in a unique position to identify and support patients who are experiencing this abuse and provide interventions that can connect survivors to services for a safe exit and healing trajectory. Hear from a survivor of CSEC, turned doctoral-prepared nurse practitioner, as she discusses strategies for identification and connection to youth experiencing or at risk of commercial sexual exploitation.
Presenter: Rachel Niemiec, DNP, FNP-C
Date: Tuesday, May 21
Time: 5:30 – 6 p.m., Registration/Dinner; 6 – 8:15 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

Addressing the Commercial Sexual Exploitation of Children (CSEC): A Public Health Issue

Description: CSEC is an ever-changing form of interpersonal violence impacting all communities across the Commonwealth. Nurses are in a unique position to identify and support patients who are experiencing this abuse and provide interventions that can connect survivors to services for a safe exit and healing trajectory. Hear from a survivor of CSEC, turned doctoral-prepared nurse practitioner, as she discusses strategies for identification and connection to youth experiencing or at risk of commercial sexual exploitation.
Presenter: Rachel Niemiec, DNP, FNP-C
Date: Wednesday, May 1
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

Addictions (Substance Use Disorder) and Health-Related Issues

Description: Drug addiction is a brain disease. Although initial drug use might be voluntary, drugs of abuse have been shown to alter gene expression and brain circuitry, which in turn affects human behavior. Once addiction develops, these brain changes interfere with an individual's ability to make voluntary decisions, leading to compulsive drug craving, seeking, and use. This session will include a healthcare perspective on the issue of drug use while examining the prevalence of drugs in the society we live in. Some health effects occur when drugs are used at high doses or after prolonged use, while others may occur after just one use. Cardiovascular disease, stroke, cancer, HIV/AIDS, hepatitis, and lung disease can all be affected by drug abuse.
Presenter: Donna M. White, RN, PhD, CARN, CADC II, LADC I
Date: Tuesday, June 11
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

Multi-Generational Nursing Workforce:Challenges and Opportunities

Description: The nursing workforce today includes members of five different generations. Generational differences can create new challenges for achieving a harmonious workplace because of the merging of generations, including diverse work attitudes, beliefs, and values in the workplace.
Presenter: Donna M. White, RN, PhD, CARN, CADC II, LADC 1
Date: Thursday, May 23
Time: 5:30 – 6 p.m., Registration/Dinner; 6 – 8:15 p.m., Program
Location: MNA Headquarters; 340 Turnpike Street, 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 Offerings

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, PhD, RN/FNP-BC, CEN; Charlene L. Verga, MSN, RN, CEN, LNC; other instructors for the clinical session.
Dates: Wednesday, April 3, 2024 (Certification)
Wednesday, April 10 (Recertification only)
Time: Day 1-Wednesday, April 3; 9 a.m. – 4 p.m.
Day 2-Wednesday, April 10. Two Sessions:
Session One: 9 a.m. – 12 p.m.
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: Certification: MNA Member/Associate Member, $50; Non-Member, $250. Recertification: MNA/Associate Member, $50; Non-Member, $250
Continuing 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 Complexities of Nurse Licensure Compact: What Nurses Need to Know

Description: One of the greatest factors that can affect a nurse's experience — with everything from nurse-practice standards and continuing education to patient safety and work satisfaction — is the state in which he/she is licensed. Yet, forty-one states have joined the "Enhanced Nurse Licensure Compact" (NLC), which allows nurses who are licensed in one Compact state to practice in any other Compact state without having to obtain additional licensure. During this CE program, presenters and attendees will discuss the realities of Massachusetts possibly entering the Enhanced Nurse Licensure Compact and what it could mean for nurses' licenses and practice.
Presenters: Megan Collins, MS; Elizabeth Turner, Esq., RN
Date: Wednesday, May 22
Time: 5 – 5:30 p.m., Registration/Dinner; 5:30 – 8:30 p.m., Program
Location: MNA Headquarters; 340 Turnpike Street, 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

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 of the BORN, as well as the process 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: Wednesday, June 19
Time: 5 – 5:30 p.m. Registration/Dinner; 5:30 – 8 p.m., Program
Location: MNA Headquarters; 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

Virtual Offerings

Region 1 Virtual Offering

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

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Presenter: Elizabeth Turner, Esq., RN
Date: Wednesday, March 27
Time: Pre-Program Login, 5 – 5:30 p.m.; Program, 5:30 – 8 p.m.
Location: This program is a live "Virtual Continuing Educational Program" offered via Zoom
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

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, March 19
Time: Pre-Program Login, 5 – 5:30 p.m.; Program, 5:30 – 8:30 p.m.
Location: This program is a live "Virtual Continuing Educational Program" offered via Zoom
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

Consumer Product Chemicals: Characterizing Exposures and Potential Health Impacts

Description: Many of the personal care and household products that we use every day can have an impact on our health. This program will explore some of the harmful chemicals commonly found in consumer products. The speaker will describe current research on exposures to these chemicals, including exposure disparities and implications for vulnerable groups. The program will conclude with research-backed recommendations for limiting exposure.
Presenter: Robin Dodson, ScD
Date: Wednesday, March 27
Time: Pre-Program Login, 5:30 – 6 p.m.; Program, 6 – 8 p.m.
Location: This program is a live "Virtual Continuing Educational Program" offered via Zoom

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

Gender-Affirming Care for a New Generation

Description: There are about 1.4 million transgender people in the United States, which is about the same as the prevalence of Type 1 diabetes. Rates of transgender identity are increasing among youth, with 2.9 percent of Massachusetts high school students describing themselves as transgender or questioning their gender. Yet, many in healthcare have little to no formal education about how to provide appropriate care to transgender patients. This program will address key concepts and terms related to transgender identity; the social, legal, and medical steps that transgender people may take to affirm their identities; and how transgender people experience the healthcare system through the lens of minority stress. We will also talk about developmental perspectives on gender identity among youth, and strategies for supporting transgender and questioning youth in school and primary care settings.
Presenter: Eli Goldberg, MD
Date: Monday, April 1
Time: Pre-program login, 5:30 – 6 p.m. Program, 6 – 8:15 p.m.
Location: This program is a live "Virtual Continuing Educational Program" offered via Zoom
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

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

Description: This program will provide nurses with the advocacy skills and communication strategies to respond when they hear, "Just do your best" while nursing judgement determines they cannot safely meet the needs of the patient. Discussion topics will include patient abandonment, mandatory overtime, and assuming an assignment under duress or objection. Documentation of unsafe assignments and mandatory overtime will be explored. The program will explain who should accept the liability and responsibility for an unsafe assignment.
Presenters: Joe-Ann Fergus, PhD, RN; Carol Mallia, MSN, RN; Mary Sue Howlett, PhD, RN/FNP-BC, CEN
Date: Wednesday, May 8
Time: Pre-program login, 5:30 – 6 p.m., Program, 6 – 8 p.m.
Location: This program is a live "Virtual Continuing Educational Program" offered via Zoom
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

Be strong enough to stand alone,be yourself enough to stand apart, but be wise enough to stand together when the time comes. -Mark Amend
#butfirstletmetakeaselfie
#unionstrong

MNA Massachusetts Nurses Association

SAVE the DATE

18th annual Clinical Nursing Conference

All Day, In-Person Event

MAY 3, 2024

Four Points by Sheraton Norwood

See you there!

Save the Date

MNA Massachusetts Nurses Association

CONVENTION 2024

October 8-10

MARGARITAVILLE Resort CAPE COD

Great Food ✶ Business Meeting ✶ Unit 7 Meeting
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President's Reception ✶ Awards Dinner
PAC Meeting ✶ Continuing Education

LET THE FIN BEGIN

Nurse and Health Professional Discount Mortgage Program

Refinancing your mortgage or buying a home? MNA members receive free mortgage advice.

MNA members may also take advantage of mortgage discounts and benefits offered to members of the Massachusetts Nurses Association through CrossCountry Mortgage.

Discounts available to MNA members:

- Free appraisal - up to $600 lender credit at closing
- Free flood certificate - up to $25 lender credit at closing
- Free legal review of your purchase and sale agreement - a $500 value
- Additional $275 off attorney fees
- 10% off owner's title insurance
- 10% off Homestead Act in Massachusetts

Benefits available to MNA members:

- Free pre-approval for your home financing
- Your family members can also participate in this program
- Dedicated team of Mortgage Specialists
- Free mortgage consultation to discuss your current situation and future goals

Call: 877.662.6623 **Email: MNA@myccmortgage.com**

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New website for MNA members: **homesformna.com**

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TERMS & CONDITIONS: Available for first lien mortgage purchase and refinance money loans only. Offer can only be redeemed by closing a loan with the 99 Rosewood Drive Suite 225, Danvers, MA 01923 branch of CrossCountry Mortgage, LLC. Offer will be redeemed at closing in the form up to $2,000 lender credit (must be applied before any seller paid credits). Borrower cannot receive cash at closing. Approval subject to CrossCountry Mortgage, LLC, mortgage insurance, and loan purchase underwriting guidelines and property approval for loan. Available only on loans originated through completed residential mortgage loan applications received directly by CrossCountry Mortgage, LLC before 5:00 p.m. on April 1, 2024 and which close on or before May 31, 2024. Loan program terms and conditions are subject to change without notice. Offer must be presented with an application for a residential mortgage loan. Only one offer per loan transaction will be accepted. No cash value. Offer will be rescinded if the borrower elects to cancel the loan transaction or the conditions for sale of the loan change. CrossCountry Mortgage, LLC has the right to accept, decline, or limit the use of any discount or offer. Equal Housing Opportunity. All loans subject to underwriting approval. Certain restrictions apply. Call for details. CrossCountry Mortgage, LLC is licensed in the Commonwealth of Massachusetts as Massachusetts Mortgage Lender and Mortgage Broker MC3029. CrossCountry Mortgage, LLC. NMLS3029 NMLS1401242 (www.nmlsconsumeraccess.org). 23LO_8678r6mep

Massachusetts Nurses Association
Full member (75 percent) of applicable dues rate

Subject to verification, members who qualify for one of the following categories may elect to pay 75 percent of the annual dues:

1. Health professional labor program member—any healthcare professional, other than a registered nurse, who is represented for purposes of collective bargaining by MNA;
2. Limited hours labor program member—any labor program member who is represented for purposes of collective bargaining by MNA and who has 988 or fewer hours paid in the preceding calendar year.

It is the responsibility of any registered nurse and/or other healthcare professional to verify to the satisfaction of MNA on an annual basis his/her eligibility for the 75 percent dues category within any of the foregoing categories by April 1 of each year. Upon receipt of such verification of eligibility in the prior calendar year, the member shall receive the reduced dues rate effective the following July 1 through June 30.

Application for Minimum Hours Reduced Dues Category

Please print clearly and application needs to be received by April 1 to the Membership Division of MNA

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

at the following MNA facility(s) of employment for the year of application (*list each MNA facility separately*):

1. _____
2. _____
3. _____

Signed _____

Date _____

Personal Email Address: _____

Eligibility for the reduction is verified by MNA with each employer.

Confirmation of receipt of this application will be emailed to your personal email account within 72 hours of receipt.

MNA℠ Massachusetts Nurses Association **Safe Limits Save Lives**

Massachusetts Nurses Association • 340 Turnpike Street • Canton, MA 02021
Fax: 781-821-4445 • Email: membership@mnarn.org

MNA℠ Massachusetts Nurses Association

MNA Advocacy Day

From the Bedside to Beacon Hill

May 8, 2024

10 a.m. to 2 p.m. State House Boston, MA

Join us to celebrate Nurses Week 2024 with an **MNA Day of Advocacy** at the Massachusetts State House. Bring your insight, your experience, and your voice to Beacon Hill in support of protecting patient safety, improving workplace safety, and protecting healthcare access. Legislators need to hear directly from you how these issues affect you and your patients – their constituents – and how they can help to improve care in the Commonwealth.

There will be a speaking program followed by meetings with individual legislators. MNA staff will accompany you to these meetings and there will be several virtual prep sessions ahead of May 8th to help you prepare.

Lunch will be provided.

Register Now:

We look forward to seeing you there!