

the Massachusetts

# nurse



THE NEWSLETTER OF THE MASSACHUSETTS NURSES ASSOCIATION

Vol. 80 No. 5



ADVOCATE



**MNA/Super Union hold D.C. rally for safe ratios, single payer healthcare**

May 2009

**MNA**<sup>SM</sup>  
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## Reform roundup: support for solid health care reform continues to mushroom

By Sandy Eaton, RN

The Massachusetts Health Care Trust bill, strengthened and re-filed as H.2127, has been assigned to the Joint Committee on Public Health. Rep. Matthew Patrick, D-Falmouth is the lead House sponsor, while Sen. Pat Jehlen, D-Somerville is the lead Senate sponsor.

- On April 4 the MNA's own Beth Piknick charmed all as the guest MC at Mass-Care's annual awards gala in the Ryles Jazz Club in Cambridge, with Jimmy Tingle bringing his own brand of humor to the issues of the day. Dr. Gordon Schiff, past president of Physicians for a National Health Program, was the keynote speaker, emphasizing the wasteful overhead represented by the commercial health insurance industry. He read off a list of CEO salaries that knocked everyone's socks off. He summarized the Massachusetts health reform plan of 2006 as S&M: nothing kinky, just shorthand for subsidies and mandates.
- Scrutiny of the Massachusetts approach to reform intensifies as key elements of this approach are pushed within the Beltway. The major health insurance lobbies are demanding the individual mandate, requiring annual means testing and civil penalties for those not buying their products.
- Meanwhile, Rep. John Conyers' Medicare for All bill, HR676, has garnered ever-growing support, with over five hundred labor organizations in 49 states now on

board, including 20 national unions and 39 state labor federations. Last summer, the National Council of Mayors endorsed it.

- In the weeks following the strong, vocal call for single-payer national health insurance by those gathered outside the Northeast Regional White House summit on health care at the University of Vermont on March 17, U.S. Sen. Bernie Sanders of Vermont introduced his own single-payer bill, S.703.
- Healthcare Now is calling for a national day of action in support of real healthcare reform on May 30. In Massachusetts, Jobs with Justice is organizing a teach-in on the various state and national proposals to be held at Harvard Medical School in Boston on Saturday, May 30 from 10 a.m. – 3 p.m. All are welcome. Details will be posted, as they become available, on the web sites of Jobs with Justice (massjwj.net) and Mass-Care (masscare.org). See you there?
- Both Houses of the Maine state legislature have endorsed a single payer healthcare system and HR 676. The Maine vote follows a similar vote in the New Hampshire House, which in March voted 192-150 in favor of a resolution that endorses HR 676 and a single payer health care system. Separately, a poll conducted by the Maine Medical Society shows that a majority of the state's physicians support a single payer healthcare system. ■



Sandra Hottin, Sandy Eaton, Donna Kelly-Williams, MNA President Beth Piknick at Mass-Care's annual awards gala in Cambridge.

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**MNA**<sup>BM</sup>  
MASSACHUSETTS NURSES ASSOCIATION



# National nurses union update

By Julie Pinkham  
MNA Executive Director

We are taking this opportunity to keep our members updated about ongoing efforts to establish UAN-NNOC, the new national nurses union which is in the process of being founded by the unification of MNA, California Nurses Association/National Nurses Organizing Committee (CNA/NNOC) and United American Nurses (UAN).

As part of this ongoing work, a delegation from the MNA met in Chicago with their counterparts from the CNA/NNOC and the UAN on April 28 and 29 to work out a provisional agreement that would form an interim leadership body and structure designated to create, through five committees, the constitution and structure for vote by the three organizations members this fall.

Highlights of the agreement include:

Creation of an interim leadership body to oversee the creation of a constitution and organizational structure

An interim executive council has been established comprised of three co-presidents—one from each of the founding organizations—which includes a co-president appointed by the MNA. Additional representatives to the executive council will be apportioned: 1 per 10,000 members. This would mean the MNA will have two seats on the executive council, one of which will be a co-president.

The executive council will oversee the process of forming the new national union, with working groups for:

- Unification agreement and constitution drafting
- Operations
- Organizing
- Political work
- Communications

The council will appoint members and staff from each organization to participate in these

working groups.

By agreement, the draft constitution and unification agreement will be completed by June 15 to allow the MNA the time necessary to prepare bylaw proposals, including changes in dues structure for presentation to the membership for a vote at its Annual Business Meeting during Convention on Oct. 1.

Each of the participating organizations would need to complete their individual ratification process by Nov. 15.

Assuming successful ratification by all parties of the “super union” constitution, the agreement calls for a founding convention of the new national union to be held on Dec. 1 at a location to be determined. At the convention, formal elections will be held for positions on the executive council and governing body. Again, MNA will have the authority to select one of three co-presidents for a slate to the new national nurses union.

All parties agreed that the primary focus of the new national union will be on organizing the unorganized nurses in the nation.

## The latest news on dues

We have heard a growing level of excitement from members about the new national nurses union, but not unexpected is the question of dues for the national and its implication for MNA members. Yes there will be dues for the new national. The amount is not yet determined as the two national organizations unifying with MNA have different dues structures and the final amount will be vetted by the committees for recommendation to the provision



Julie Pinkham

council.

It will be helpful to know now what the other founding organizations’ respective dues structures are in order to give our members some perspective and insight.

The CNA/NNOC dues are a formula structure: 2.2 times the base hourly hospital rate for a member with a minimum of \$50 per month and a cap of \$95 per month. The cap is adjusted annually based on a weighted average of hospital bargaining unit increases. The CNA/NNOC structure encompasses all dues—state, national and all AFL-CIO per caps.

The UAN dues are national dues only with individual state affiliate dues varying. The UAN dues are \$130 per year (roughly \$11 per month) with a 2.5 percent annual inflation adjustment. This annual dues structure encompasses the national dues and the AFL-CIO national per caps. The state and local AFL-CIO per caps are handled at the state affiliate level.

Again, while the amount of national dues has not yet been determined, this may be helpful in giving our members some sense of what we can expect. Given this, with member feedback, the MNA has been looking at its current dues structure and will be considering a change from a flat rate structure to a formula structure as part of our review process in moving the national vote forward in October.

## Next steps

The Board of Directors will select its interim co-president and representative for the provisional executive council and will assign members and staff to participate in the working groups to help flesh out the structure of the new organization for vote by our membership in October.

If you have any questions about this process, please email MNA Director of Public Communications, David Schildmeier at dschildmeier@mnarn.org. ■

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## MetroWest Leonard Morse nurses make appeal to community leaders

Nurses from MetroWest Medical Center, Leonard Morse Campus which serves as the health care safety net for the towns of Natick and Framingham, expressed their strong opposition to allowing Partners Healthcare to establish a new surgical center in Framingham at both the Framingham Planning Board and the Natick Board of Selectmen meetings. Newton-Wellesley already has an ambulatory care center in Natick, where they offer mammograms, bone density tests and cardiac ultrasound. All of these services are available through MetroWest Medical Center. Further capacity for these services is not needed.

The nurses expressed concern that if a new surgical center in Framingham takes patients from their system at MetroWest, the expansion threatens the financial viability of their hospital.



MetroWest Leonard Morse Chair, Lynn Shaw RN, testifies before the Framingham Planning Board opposing a new surgical center in Framingham.

Policy makers are beginning to realize the competitive model in health care is not in the best interests of communities, patients and the citizens of the commonwealth.

In their remarks at both meetings nurses stated that in this economic climate, we cannot afford to allow the expansion of one institution to the detriment of another. They pointed to Senate President Theresa Murray's recent call for increased scrutiny prior to building new clinics or hospitals which undermine existing facilities, and underscored that the time has come for a new approach.

As frontline caregivers, Leonard Morse nurses feel that this proposed surgi-center will affect their ability to serve the needs of their community. If this facility takes patients from their system at MetroWest, the expansion threatens the financial viability of their hospital. At Leonard Morse Hospital, and throughout Natick, rumors abound about how the difficult financial climate and how their system's compromised financial health could lead to the closing of services, or worse, the closing of Leonard Morse altogether.

Leonard Morse nurses told community leaders at both meetings that there must be a plan to maintain and possibly expand MetroWest Medical Center in order to care for an aging population that requires the full range of vital health care services they provide.

In addition to their presence at these town meetings, the nurses have begun coalition building efforts with other individuals and organizations in the community who share their concerns about the preservation of MetroWest Medical Center facilities and services. ■

## Discussing patient safety act with Sen. Moore in Worcester



MNA members and coalition partners from the Massachusetts Senior Action Council Worcester chapter hosted a delegation visit with newly elected Sen. Mike Moore (D-Worcester) at the Region 2 office. They talked with him about MNA's ambitious legislative agenda and thanked him for his sponsorship of the Patient Safety Act and the Health Care Workers' Assault Bill, of which Moore is the lead sponsor. Moore said that he will consult with MNA members as an information resource as the legislative session progresses.



# Campaign to save psychiatric services at St. Vincent's in Worcester a success

Congratulations to the MNA nurses at St. Vincent Hospital Center for Psychiatry. Hospital administrators announced on April 22 that they rescinded their closure notice to DPH and that the unit will

remain open. Nurses worked very hard to prevent the closure of this unit, lobbying Worcester-area legislators and Lt. Gov. Tim Murray, and their efforts paid off.



Center for Psychiatry nurses meet with state Sen. Jen Flanagan, chair of the Mental Health and Substance Abuse Committee to discuss the need to keep the unit open.

Center for Psychiatry nurses meet with Jim Leary, chief of staff to Lt. Gov. Tim Murray.

## Rosa pledges support for the patient safety act

MNA nurse representatives from Leominster Hospital and coalition partners from Leominster's senior community met with state Rep. Dennis Rosa (top right) on April 17 at his district office to discuss the importance of passage of The Patient Safety Act. At the end of the very successful meeting, Rosa said that he would support the Patient Safety Act when it comes before him for a vote and that his Leominster constituents provided him with good information that he can use to have informed dialogue with the Leominster Hospital administration. He also pledged to remain in close contact with the MNA.

Leominster resident and nurse at Leominster Hospital, Joyce Hebert RN, demonstrates for Rep. Rosa the steps a nurse must take to ensure a patient's safety when the patient is on infection precautions. In her compelling presentation, Hebert spoke of the increasing number of hospitalized patients who have MRSA infection and the challenges every nurse faces to provide them with safe care when they have too many patients to care for at one time.



## Worcester public school nurses meet with school committee members

The MNA Worcester Public School Nurses hosted a "meet and greet" with members of the Worcester School Committee on Monday, April 13, 2009. The event was attended by School Committee members Jack Foley, Brian O'Connell, Dottie Hargrove and John Monfredo. Bargaining unit leaders Nicole Kazarian, Denise Khalili, Tami Hale, Ellen Capstick and Jane Leidel gave a comprehensive presentation which highlighted the work they do and the vital service they provide to the children of Worcester. The presentation evoked a compelling discussion between elected officials and nurses. School Committee members and nurses pledged to maintain ongoing communication around school health needs in Worcester. ■



MNA committee member Jane Leidel describes an encounter with a student as Denise Khalili, School Committee member Dottie Hargrove, Ellen Capstick and Nicole Kazarian listen.

## The Lilly Ledbetter Fair Pay Act

By Joseph Twarog

Associate Director, Labor Education

Lilly Ledbetter worked for almost 20 years at the Goodyear Tire and Rubber Company in Gadsden, Ala. as a salaried supervisor area manager. She worked the overnight shift from 7 p.m. to 7 a.m., where she reported being sexually harassed and discriminated against. She testified before Congress in 2007 that a supervisor once asked for sexual favors in return for good job performance evaluations. Nonetheless, in 1996 she received a “Top Performance Award” from the company.

But, it was not until she was about to retire that she learned—from an anonymous source—that she was receiving far less salary than her 15 male co-workers performing the same work. While she was making \$3,727 per month (\$44,724 per year), the men were making \$4,286 to \$5,236 per month. This meant that she was being paid 15 percent less than the lowest paid male and 40 percent less than the highest paid male. She had no idea that she was discriminated against since she had been explicitly prohibited by the company from discussing wage rates.

Ms. Ledbetter herself stated that when she was hired by Goodyear, there were two things she was required to do: “. . . to give my fair share to the United Way campaign, being a salaried person, and the other was not to discuss my salary with anyone outside my family.”

### EEOC complaint

In March 1998 she submitted a questionnaire to the Equal Employment Opportunity Commission (EEOC) asking about salaries. She followed that with a formal charge of pay discrimination in July 1998, claiming violations under Title VII of the Civil Rights Act of 1964 and of the Equal Pay Act of 1963.

Goodyear responded by reassigning her to lifting tires.

She filed a suit which went to trial. A jury found in her favor and awarded her \$3.3 million, later reduced by the judge to \$300,000.

The pay discrimination that she suffered in fact is not limited to her working life, since it directly affected her retirement benefits (pension, 401(k) plan and Social Security). So the discrimination continues into her retirement years. Today she lives from paycheck to paycheck as she states “I will be a second class citizen for the rest of my life . . . it affects every penny I have today.”

But the Goodyear Company appealed the lower court’s award to the U.S. Supreme Court. In a 5-4 decision in 2007 delivered by Justice Samuel Alito (*Ledbetter v. Goodyear Tire &*

*Rubber Co.*, 550 U.S. 618), the Supreme Court decided that she was not entitled to any compensation because she had filed her claim more than 180 days after receiving her first discriminatory paycheck. Of course, because of the company’s gag rule on discussing pay, there was no way she could have been aware of this discrimination. But the Supreme Court—in its infinite wisdom—ignored that relevant fact!

However, Justice Ruth Bader Ginsburg strongly dissented with the Court’s majority decision. In a rare practice, Justice Ginsburg read her dissent from the bench. According to *The New York Times*, “To read a dissent aloud is an act of theater that justices use to convey their view that the majority is not only mistaken, but profoundly wrong. It happens just a handful of times a year.” Obviously, Justice Ginsburg felt passionately about this decision.

In her dissent, Justice Ginsburg stated:

“Pay disparities often occur, as they did in Ledbetter’s case, in small increments; cause to suspect that discrimination is at work develops only over time. Comparative pay information, moreover, is often hidden from the employee’s view. Employers may keep under wraps the pay differentials maintained among supervisors, no less the reasons for those differentials. Small initial discrepancies may not be seen as meet for a federal case, particularly when the employee, trying to succeed in a nontraditional environment, is averse to making waves.”

Finally, she challenged Congress to overturn what she called the Court’s “parsimonious reading” of the federal law against discrimination in the workplace.

### Congress acts

In 2007, the Lilly Ledbetter Fair Pay Act was introduced by several Democratic members of Congress. It basically revised the law to have the 180-day statute of limitations for pay discrimination reset with each new discriminatory paycheck.

The bill met strong opposition from corporate America and national Republican leaders including the National Association of Manufacturers, the U. S. Chamber of Commerce, President Bush and Sen. John McCain. Vice-presidential candidate Gov. Sarah Palin saw the bill as only a boon to trial lawyers stating: “I’m absolutely for equal pay for equal work. The Ledbetter pay act - it was gonna turn into a boon for trial lawyers who, I believe, could have taken advantage of women who were many, many years ago who would allege some kind of discrimination.”

In 2009, Congress passed the Lilly Ledbetter Fair Pay Act. As the bill was headed for



President Barack Obama with Lilly Ledbetter, left, and members of Congress in the East Room of the White House in January as he signs the Lilly Ledbetter Fair Pay Act.

a vote, Ledbetter lobbied for its passage with a personal letter to Congress that stated, in part, “I may have lost my personal battle, but I haven’t given up. I’m still fighting for all the other women and girls out there who deserve equal pay and equal treatment under the law. We owe it to our daughters, our granddaughters and ourselves.”

### Obama signs the bill into law

On Jan. 29, 2009, President Barack Obama signed the bill into law—his first official bill as president. It restores the pre-Ledbetter position of the EEOC that each discriminatory paycheck is a wrong actionable under EEOC statutes. The EEOC Web site states that “. . . the Act recognizes the ‘reality of wage discrimination’ and restores ‘bedrock principles of American law.’”

Sadly though, Lilly Ledbetter will not see any adjustment in her income or retirement despite the new law since it has a retroactive date of May 28, 2007. While she was present at the White House for the signing, her husband, Charles, was not with her having died just the previous month of cancer. Yet, in June 2007 Ledbetter stated, “I told my pastor when I die, I want him to be able to say at my funeral that I made a difference.”

She most certainly did. ■

# Employee Free Choice Act update

The furor over the Employee Free Choice Act has reached a fever pitch in our nation's capitol. This bill would make it easier for nurses and other workers to join a union of their choice. It enjoys wide support in the labor movement, the general public and among members of Congress. But business groups have spent tens of millions of dollars spreading disinformation and aggressively lobbying against the bill. Despite the full court press of the business lobby, the bill enjoys majority support in both the U.S. House and Senate. However, the procedural rules of the Senate allow a minority to prevent bills from coming up for a vote through the use of a filibuster. Because of this, supporters of the Employee Free Choice Act will need 60 votes in order to be able to end debate (this is called cloture) and bring the bill to a vote on its merits. Although opponents of the bill have self-righteously – and falsely – described themselves in this debate as defenders of a secret ballot

– they evidently see no irony in preventing the bill from actually being voted on in the Senate. Such is the hypocrisy of the business community.

Arlen Specter, the lone Republican (who is now a Democrat) who voted for cloture when the bill came up in 2007, reneged on his earlier support of the bill, and a small handful of moderate Democrats have also wavered in their earlier support for this legislation. However, media reports of the death of the Employee Free Choice have been greatly exaggerated. There is tremendous support in Congress for addressing the broken labor election system and the resulting growing inequality in our country. Even those who have wavered on the bill as it is currently written have publicly expressed a willingness to work on meaningful legislation to address the problems the bill was meant to solve. It seems very probable that there will be a significant pro-worker change to the National

Labor Relations Act for the first time since it was originally passed in 1935!

It is likely the bill will be slightly altered in committee this summer and will be debated by the Senate in June. It is absolutely critical that we continue to call our legislators and let them know how important this bill is. If you have friends and family in other states, be sure to ask them to call their senators as well. The quality of the bill that comes out of committee will depend entirely on how much pressure we apply to our elected officials. Opponents have no shortage of money to spend to lie about this bill and what the labor movement stands for, and no scruples to bind them to the truth. We must ensure that our voice is heard and that all our elected officials know what our union has done for us, our patients and our community.

For information about how you can help, contact Riley Ohlson at 781-830-5740 or rohlson@mnarn.org. ■

## MNA 2009 preliminary ballot

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

Donna Kelly-Williams, RN

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

Rosemary O'Brien, RN

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

*Region 1*

*Region 2*

Patricia Mayo, RN

*Region 3*

Karen Gavigan, RN, BSN

*Region 4*

Patricia (Patty) Rogers Sullivan, RN, MM

*Region 5*

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

Mary Bellistri, RN

Jim Moura, RN, BSN

Nora Watts, RN, BSN

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

Kathlyn Logan, RN

Colleen Wolfe, RN, ADN

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

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

*Region 1*

*Region 2*

*Region 3*

Linda Condon, RN, BSN

*Region 4*

*Region 5*

Sandy Eaton, RN

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

*Region 1*

*Region 2*

*Region 3*

*Region 4*

*Region 5*

### **Congress on Nursing Practice, 6 for 2 years**

Linda C Barton, BS, RN, CCRN

### **Congress on Health Policy, 6 for 2 years**

Sandy Eaton, RN

Pamela Vaughn Mason DNP (pending)

Tina Russell, RN

### **Congress on Health & Safety, 6 for 2 years**

Patti Duggan, RN, MS

Sandy LeBlanc, RN, CNOR

Kate Opanasets, RN

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

### **At-Large Position in Regional Council, 2 for 2 years (elect 3)**

*Region 1*

Christine Martin, RN, MSN

*Region 2*

*Region 3*

Trudy Bull, RN

Lauren Johnson-Lavender, MSN

*Region 4*

Patricia Rogers Sullivan, RN, MM

*Region 5*

*\*General means an MNA member in good standing & does not have to be a member of the labor program. Labor means an MNA member in good standing who is also a labor program member. Labor Program Member means a non-RN Healthcare Professional who is a member in good standing of the labor program.*

**Consent-to-serve forms, Pages 14 & 15.**





## Year after year, tulips will be a reminder of the MNA's international success

Six months after they were brought to Massachusetts from Holland, two stunning clusters of tulips recently bloomed in front of MNA headquarters in Canton. The tulips, which arrived in the commonwealth as bulbs, were planted by Evie Bain (coordinator of the organization's health and safety division) in celebration of the recent successes of the MNA's Workplace Violence Task and Abuse Prevention Task Force.

In October, the task force received the honor of "Best Poster Presentation Award" for its submission—"Legal Interventions for Addressing Workplace Violence in the Health Sector"—at the International Workplace Violence Conference in Holland. "Our poster presentation focused on the specifics of how to hold perpetrators of workplace vio-

lence accountable for their crimes against nurses and other health care workers," said Rosemary O'Brien RN, chairperson Workplace Violence Task Force, presenter of the poster along with Terri Arthur and Susan Vickory, MNA health and safety advocates.

More than 20 countries were represented at the conference and a total of 43 posters were presented. "Being recognized in Holland was a great honor for the MNA and for the task force," said O'Brien. "It reminded us that our work helps health care workers both locally and internationally. And these breathtaking tulips will, year after year, remind us of this fact." ■

## MNA assistance requested for research on universal/standard precautions

The MNA Congress on Health and Safety is interested in projects to help improve the health and safety of our members. One way we work to improve health and safety is to assist in research projects we feel further this goal. We have therefore agreed to assist in recruitment for a project on barriers to universal precautions/standard precautions.

The goal of the proposed research is to evaluate novel factors that may affect compliance with UP/SP. The basic premise of this research is that nurses want to be compliant with UP/SP but they need the tools to do so.

Standard precautions are a set of precau-

tions that the Centers for Disease Control and Prevention has called for in order to minimize the risk that health care workers will catch an infection from a patient or spread infection among patients. They extend beyond the universal precautions that were developed in the 1980s specifically to protect from blood-borne pathogens.

The study is being conducted by Katherine Kirkland as part of her doctoral dissertation at George Washington University. Kirkland works full-time at the Association of Occupational and Environmental Clinics and also serves as an adjunct assistant professor in the Department of Public Health Nursing Univer-

sity of North Carolina.

Postcards will be mailed to a random sample of MNA members asking them to complete an online survey which should take about 20 minutes to complete. All responses will be both anonymous and voluntary. When completed, you may send an e-mail to a GWU faculty member to be entered in a drawing for one of 20 \$25 Macy's gift cards. Kirkland will not be given your information nor will it be recorded with your response.

If you receive a post card, please complete the survey. For further information contact Katherine Kirkland at [kkirkland@aoec.org](mailto:kkirkland@aoec.org) or at 703-861-6177. ■

# Disaster/emergency preparedness: what you need to know

By Debra Shontz-Stackpole, RN

We live in a world where a whole range of manmade (intentional or technological) and natural disasters are of increasing concern to us as individuals, communities and the nation. Terrorism, floods, hurricanes, fires, earthquakes, winter storms and infectious diseases are all too possible. Therefore, the purpose of disaster planning and preparedness at the individual and family level is imperative to be able to respond to sudden health and safety threats.

One reality is obvious: Families that have not planned and prepared for such an event will be less organized and less effective to face the problems of such an event than those who have planned in advance. Becoming informed, developing an emergency preparedness kit and making a family communications/evacuation plan are necessary steps to best be able to respond to disasters of all types.

## Starting out

One of the first things that we need to do is to determine our potential threats. These disasters will vary depending on what part of the country you live in. In New England we may need to be prepared for snow and ice storms, extreme cold weather, extreme heat waves, power outages, thunderstorms, floods, terrorism, chemical and biological contamination, pandemics and fires caused by drought.

Disaster can strike at any time and usually without advanced warning, so to begin to get organized you need to start in your home. In many situations, first responders may not be able to get to your home for at least 72 hours and that utility services may be down for many days. Also know that wells may be contaminated so you could also be without safe drinking water.

If you need to evacuate your home or are asked to “shelter-in-place,” having the necessary emergency preparedness supply kit on hand will make you and your family more comfortable, calm and able to cope. If you wait to collect the necessary items, or you don’t get advanced warning of a disaster, local stores may very well end up selling out of all the critical supplies you might need. As a result, advance planning is essential. You should also keep a mini survival kit in each car as you may not be at home when a disaster strikes.

## Establish a communications plan

Next, you need to establish an emergency communication plan in which you choose an out-of-town family member or friend that you will all call or e-mail (if you are separated) to be able to check on each other should a disaster



occur. Select someone who isn’t in your immediate area so they may not be directly affected by the disaster. Let this person(s) know they are the selected contact. Make sure your children and their schools have this contact name and telephone number as well.

Your family’s disaster plan should include how you will find each other should you be in different locations (at work, school, home or in the car). You should also find out about the disaster plans at your workplace and your children’s school or day care center. Emergency telephone numbers should be posted by the telephone (fire, police, ambulance and family telephone numbers). If your children have cell phones, have them put these telephone numbers into their cell phones.

Confirm ahead of time with your family a predetermined meeting place away from your home as this will save time and reduce chaos should your home be affected or your community evacuated. Be informed of your town’s plan for notifying its’ citizens of an emergency. If the local authorities ask you to leave your home, you should listen to the radio or TV and follow the instructions of the local emergency officials.

## Preparing to shelter

Take your disaster preparedness supply kit to the car and have your family dress with appropriate clothing that covers their body so they are as shielded as possible. Turn off your utilities if you have the time, but leave on your natural gas unless you are advised otherwise (as it can only be turned back on by a professional). Close and lock all windows and doors and then go to a predetermined safe area. Have your family work as a team to make this transition run as smooth as possible. Discuss ahead of time what each member’s duties are if a disaster should happen. Go over this information along

with the emergency communication plan every six months when you rotate your water supply and any medications that are in your supply kit. Rotate your canned goods, etc., every year or on their expiration dates.

If you are directed to “shelter-in-place,” you need to remain inside your home, school or office to protect yourself. You must close and lock the windows and doors to the outside. Turn off any appliance that brings in outside air such as fans, air conditioners, heating systems and close fireplaces/woodstoves. Go to the room that you and your family have discussed as part of your emergency communication plans. This should be an interior room without windows, if possible, that is above ground level.

Take your emergency/disaster preparedness supply kit and a battery powered radio or TV into the room to listen to local officials as updated information becomes available. Work as a team to seal all cracks around any windows and doors using duct tape and plastic sheeting. Stay there until you are told that all is safe or that you should evacuate the area.

## Other things to consider

Do you know where the closest shelter is to your home? How prepared are you and your family? As you find answers to these questions, as a you work to develop your own emergency preparedness plan, share your knowledge and experiences with any family, friends, co-workers and neighbors who can help spread the word about disaster/emergency preparedness with others.

For more information visit [redcross.org](http://redcross.org).

Debra Shontz-Stackpole, RN is a member of the MNA’s Emergency Preparedness Task Force” If you would like more information about the task force contact Chris Pontus at 781-830-5754 or [cpontus@mnarn.org](mailto:cpontus@mnarn.org)

# Emergency disaster preparedness supplies check list

## Personal

- First aid kit and first aid book
- Medical information list for **each** member of family
- Photo identification (license, passport)
- Cash/money (ATM's and credit cards won't work if electricity is out)
- Prescription medications\*\*
- Glucose and/or blood pressure monitoring equipment
- Aspirin/Tylenol/Ibuprofen
- Antacids
- Vitamins
- Anti-diarrheal medication
- Antiseptic/alcohol wipes
- Band-aids
- Thermometer
- Dentures
- Eye glasses (2 pair)/contact lenses/sunglasses
- Baby Items: diapers/wipes/baby food/formula
- Nursing mothers should have a contingency plan for feeding their baby in case they are separated
- Plastic baby bottles/nipples
- Infant medications/medicine dropper
- Scissors
- Tweezers
- Feminine hygiene products/BCP
- Safety pins
- Facial tissue
- Toilet paper/moist towelettes
- Tooth brush/tooth paste
- Paper towels
- Soap/liquid antibacterial hand soap
- Shampoo
- Sunscreen
- Blankets/sleeping bags/pillows for each person
- Sturdy shoes or work boots
- Coats/hats/gloves
- Rain gear/vinyl ponchos
- One complete change of warm clothing per person
- Books/crayons/games/cards/puzzles for children
- iPod(s)

## Food

- Water (at least 1 gallon/per person/per day, for 3 days)\*\*
- Food (at least a 3-day supply of non-perishable food that requires no refrigeration, no preparation and no cooking/per person)
- Canned meats: tuna, sardines, ham, chicken, etc.
- Canned fruits and fruit juices
- Canned vegetables



- Dried fruit and canned nuts
- Canned soup
- Peanut butter
- Granola bars
- Trail mix
- Crackers
- Bread
- Tea bags/Instant coffee
- Cookies
- Dry cereal
- Powdered milk
- Jelly
- Your family's comfort foods

## Equipment

- Battery powered radio and extra batteries
- Can opener (manual)/bottle opener
- Cell phone (charged) and car charger
- Maps (plan evacuation route with your family)
- Spiral notebook/pens/pencils/stamps
- Whistle(s)
- Plastic utensils, paper plates, hot and cold cups
- Aluminum foil/sealable plastic bags
- Trash bags/plastic ties (for personal sanitation use)
- Needle and thread
- Work gloves/safety goggles
- Hammer/nails/ccrewdriver/shovel
- Wrench or pliers to turn off utilities (electricity & water)
- Pocket knife
- Watch or battery-operated clock
- Non-latex gloves
- Flashlights/spare bulb/extra batteries
- Signal flare
- Compass

- Duct tape/plastic sheeting
- Dust/face masks
- Matches in waterproof container
- Permanent marking pen
- Emergency thermal blanket
- Rope
- Fire starting supplies
- Cans of Sterno
- Fire extinguisher (ABC type)
- Waterproof plastic container with lid for important papers (vital records/copies of insurance policies/identification and bank account records/passports/birth certificates/video or CD of personal belongings in home)

- Additional watertight containers
- Emergency telephone numbers
- Household chlorine bleach (When diluted nine parts water to one part bleach, bleach can be used as a disinfectant.)

*Do not use scented, color safe or bleaches with added cleaners. To purify water add 16 drops of bleach per gallon of water, stir and let stand for 30 minutes. If the water does not have a slight bleach odor, repeat the dosage and let stand another 15 minutes. This is the only liquid agent that should be used to purify water.*

## Pets

- Pet food, dry or canned and water
  - Pet supplies/leash
- (Red Cross disaster shelters **cannot** accept pets except service animals that assist people with disabilities.)*

**\*\*Periodically rotate these items so they are exchanged out of the emergency storage bin every six months and replaced with new items.**



MNA members join the march to the Capitol.



MNA President Beth Piknick addresses the crowd.

More than 500 RNs and patient advocates from across the U.S. rallied in front of the nation's Capitol to hear speakers on single-payer health care and two health care bills including the National Nursing Shortage Reform and Patient Advocacy Act, sponsored by Sen. Barbara Boxer (D-Calif.) and the Nurse and Healthcare Worker Protection Act of 2009, sponsored by Rep. John Conyers (D-Mich.). Speakers included representatives from the California Nurses Association/NNOC, the United American Nurses, and MNA as well as actor Mike Farrell and Sen. Bernie Sanders (D-Vt.)



## As U.S. launches swine flu emergency, Worcester eliminates staff that protects city

As the nation mobilized to confront the intensifying outbreak of swine flu, a coalition of more than 30 civic, community, labor and health care organizations/leaders held a press conference on April 29 in front of the Worcester Department of Health and Human Services to launch a campaign to preserve public health services in the city of Worcester—the very services that would protect the residents of the state's second largest city from swine flu, as well as 150 other infectious diseases.

The event, organized by the Massachusetts Public Health Association, featured speeches by a number of local public health experts who joined the growing coalition. A joint letter of concern from the coalition was delivered by these same experts to City Manager Michael V. O'Brien, Mayor Konstantina Lukes and the Worcester City Council. The letter announced the coalition's opposition to the recently announced budget cuts that eliminated virtually all services provided by the

city's public health department. Public health services slated for elimination by these cuts include: surveillance control and prevention of numerous infectious diseases; immunization clinics to protect vulnerable children and adults; health services and screening for the elderly; and emergency preparedness and response to natural disasters and potential terrorist attacks.

"These programs and services are critical to not only the physical, but also to the economic health of the city of Worcester. Please recognize the core value of public health—the prevention of expensive illnesses and injuries down the road—by ensuring that its programs are spared from devastating cuts," said Dr. Stephanie Chalupka, public health researcher, registered nurse, and member of the Massachusetts Public Health Association in Worcester.

The letter also responded to recent public statements made by members of the City Manager's staff in the media, alluding to the

possibility of the city "forming partnerships with local hospitals, health providers, and colleges that have expertise in public health" as the sole means of compensating for the elimination of city services.

"While public and private collaborations such as these are essential for a public health department to meet all of the needs of a city the size of Worcester, it is vital to maintain independent government authority to determine health policy and priorities as well as provide coordinated services," said Valerie Bassett, executive director of the Massachusetts Public Health Association. "Worcester needs to keep the 'public' in public health."

In addition to the April 29 event, the coalition also held a rally outside of City Hall on May 5 at 5:30 p.m.—the same time the Worcester City Council was meeting to discuss the very cuts the coalition opposes.

For up-to-the-minute details on the coalition's work, visit [massnurses.org](http://massnurses.org) ■

## Bargaining unit updates

### Tobey Hospital

The bargaining unit nurses at Tobey Hospital barely ratified a memorandum of agreement with the hospital as part of an economic reopener for the third year of their contract. The agreement was reached at mediation after spending six months at the bargaining table. The agreement provided a 3.5 percent new step at the top of the pay scales for staff nurses and resource nurses. The new step was effective Oct. 1, 2008 with nurses at the top of the scale moving to the new step on their anniversary dates after the effective date. It also increased Steps 1 and 2 by 2 percent. Tobey Hospital agreed that if Southcoast Hospitals Group adjusted the wages for registered nurses at Charlton Hospital or St. Luke's Hospital, they would increase the wage rates for similarly situated registered nurses at Tobey Hospital. Tobey nurses on Steps 3 to 18 were not happy with Southcoast's insistence

that there would be no across-the-board increase or additional moneys added to their steps. The medical/surgical units are consistently experiencing high volume without appropriate staffing, and Southcoast's willingness to increase wages for the least experienced nurses was seen as short-sighted and wrong.

### Morton Hospital

The Morton Hospital bargaining unit has reached an agreement with the hospital on a wage reopener. Initially management had also been demanding costly changes in the health insurance but the nurses were able to fight these off. Under the agreement staff nurses will receive a new 2 percent step on the top of the wage scale. There will also be an increase in the on call rate to \$4.25 per hour.

**MNF**

Rosemary Smith RN

**Memorial Golf Tournament**

**Save the Date!**

**Monday**  
**July 20, 2009**

to benefit Scholarship Programs for  
Nursing & Healthcare Professionals

Visit [www.massnurses.org](http://www.massnurses.org) or  
call to register at  
**781-821-4625 x745**

# Consent to Serve for the MNA 2009 Election

I am interested in active participation in Massachusetts Nurses Association.

## MNA General Election

- |   |   |
|---|---|
| <input type="checkbox"/> President, General*, 1 for 2 years                 | <input type="checkbox"/> Nominations Committee, (5 for 2 years) [1 per region]    |
| <input type="checkbox"/> Secretary, General*, 1 for 2 years                 | <input type="checkbox"/> Bylaws Committee (5 for 2 years) [1 per region]          |
| <input type="checkbox"/> Director, Labor*, (5 for two years) [1 per Region] | <input type="checkbox"/> Congress on Nursing Practice (5 for 2 years)             |
| <input type="checkbox"/> Director At-Large, General*, (3 for 2 years)       | <input type="checkbox"/> Congress on Health Policy (5 for 2 years)                |
| <input type="checkbox"/> Director At-Large, Labor*, (4 for 2 years)         | <input type="checkbox"/> Congress on Health & Safety (5 for 2 years)              |
| <input type="checkbox"/> Labor Program Member*, (1 for 2 years)             | <input type="checkbox"/> Center for Nursing Ethics & Human Rights (2 for 2 years) |

\* "General" means an MNA member in good standing and does not have to be a member of the labor program. "Labor" means an MNA member in good standing who is also a labor program member. "Labor Program Member" means a non-RN health care professional who is a member in good standing of the labor program.

Please type or print — Do not abbreviate

Name & credentials \_\_\_\_\_  
(as you wish them to appear in candidate biography)

Work Title \_\_\_\_\_ Employer \_\_\_\_\_

MNA Membership Number \_\_\_\_\_ MNA Region \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

### Educational Preparation

School	Degree	Year

### Present or Past MNA Offices/Association Activities (Cabinet, Council, Committee, Congress, Unit, etc.) Past 5 years only.

MNA Offices	Regional Council Offices

Candidates may submit a **typed** statement not to exceed 250 words. Briefly state your personal views on nursing, health care and current issues, including, if elected, what your major contribution(s) would be to the MNA and in particular to the position which you seek. This statement will be used in the candidate biography and published in the *Massachusetts Nurse Advocate*. Statements, if used, must be submitted with this consent-to-serve form.

\_\_\_\_\_  
 Signature of Member

\_\_\_\_\_  
 Signature of Nominator (leave blank if self-nomination)

**Postmarked Deadline:** Preliminary Ballot: March 31, 2009  
 Final Ballot: June 16, 2009

**Return To:** Nominations and Elections Committee  
 Massachusetts Nurses Association  
 340 Turnpike Street, Canton, MA 02021

- Hand delivery of material must be to the MNA staff person for Nominations and Elections Committee only.
  - Expect a letter of acknowledgment (call by June 1 if none is received)
- Retain a copy of this form for your records.
  - Form also available on MNA Web site: [www.massnurses.org](http://www.massnurses.org)

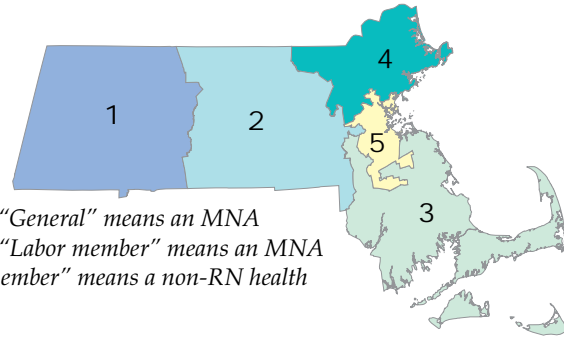
# 2009 Consent to Serve for the MNA Regional Council

I am interested in active participation in MNA Regional Council

At-Large Position in Regional Council (2-year term; 2 per Region)

*I am a member of Regional Council*

Region 1    Region 2    Region 3    Region 4    Region 5



General members, labor members and labor program members are eligible to run. "General" means an MNA member in good standing and does not have to be a member of the labor program. "Labor member" means an MNA member in good standing who is also a labor program member. "Labor program member" means a non-RN health care professional who is a member in good standing of the labor program.

Please type or print — Do not abbreviate

Name & credentials \_\_\_\_\_  
(as you wish them to appear in candidate biography)

Work Title \_\_\_\_\_ Employer \_\_\_\_\_

MNA Membership Number \_\_\_\_\_ MNA Region \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

## Educational Preparation

School	Degree	Year

## Present or Past MNA Offices/Association Activities (Cabinet, Council, Committee, Congress, Unit, etc.) Past 5 years only.

MNA Offices	Regional Council Offices

Candidates may submit a **typed** statement not to exceed 250 words. Briefly state your personal views on nursing, health care and current issues, including, if elected, what your major contribution(s) would be to the MNA and in particular to the position which you seek. This statement will be used in the candidate biography and published in the *Massachusetts Nurse Advocate*. Statements, if used, must be submitted with this consent-to-serve form.

\_\_\_\_\_  
Signature of Member

\_\_\_\_\_  
Signature of Nominator (leave blank if self-nomination)

**Postmarked Deadline:** Preliminary Ballot: March 31, 2009  
Final Ballot: June 16, 2009

**Return To:** Nominations and Elections Committee  
Massachusetts Nurses Association  
340 Turnpike Street, Canton, MA 02021

# MNA Member Discounts **Save You Money**

Log onto “myMNA,” the new members-only section of the Web site

## Personal & Financial Services

### PROFESSIONAL LIABILITY INSURANCE

NURSES SERVICE ORGANIZATION .....800-247-1500  
Leading provider of professional liability insurance for nursing professionals. [www.nso.com](http://www.nso.com).

### CREDIT CARD PROGRAM

BANK OF AMERICA .....800-847-7378  
Exceptional credit card at a competitive rate.

### TERM LIFE INSURANCE

LEAD BROKERAGE GROUP .....800-842-0804  
Term life insurance offered at special cost discounts.

### LONG TERM CARE INSURANCE

WILLIAM CLIFFORD .....800-878-9921, x110  
Flexible and comprehensive long-term care insurance at discount rates.

### SHORT TERM DISABILITY INSURANCE

INSURANCE SPECIALIST LLC .....888-474-1959  
Six-month disability protection program for non-occupational illnesses & accidents.

### LONG TERM DISABILITY INSURANCE

LEAD BROKERAGE GROUP .....800-842-0804  
Provides income when you are unable to work due to an illness or injury.

### RETIREMENT PROGRAM

AMERICAN GENERAL FINANCIAL GROUP/VALIC .....800-448-2542  
Specializing in providing retirement programs including 403(b), 401(k), IRA, NQDA, Mutual Funds, etc.

### DISCOUNT TAX PREPARATION SERVICE

TAXMAN INC. ....800-7TAXMAN  
20% discount on tax preparation services.

### HOME MORTGAGE DISCOUNTS

RELIANT MORTGAGE COMPANY .....877-662-6623  
Save on your next home loan/mortgage with discounts available to MNA members and their-families. Receive free mortgage pre-approvals.

### LIFE & ESTATE PLANNING

LAW OFFICE OF DAGMAR M. POLLEX .....781-535-6490  
10-20% discount on personalized life & estate planning.

### BLUE CROSS BLUE SHIELD

For details on health insurance plans, call 800-422-3545, ext. 65414

## Products & Services

### AUTO/HOMEOWNERS INSURANCE

COLONIAL INSURANCE SERVICES, INC. ....800-571-7773  
MNA discount available for all household members. No service changes with convenient EFT payment.

### CELLULAR TELEPHONE SERVICE

AT&T WIRELESS .....800-882-2056, EXT. 726  
MNA members can now go to any AT&T Wireless company store for all transactions. 8% discounts on rate plans, 20% on accessories.  
T-MOBILE .....866-464-8662  
Get a free phone, free nationwide long distance and roaming and free nights and weekends (on specific plans). No activation fee for members.

### DISCOUNT DENTAL & EYEWEAR PROGRAM

CREATIVE SOLUTIONS GROUP .....800-308-0374  
Best benefits—a health care savings plan that cuts the cost of health care expenses. Discounts on dental, eyecare and chiropractic expenses.

### CONSUMER REFERRAL SERVICE

MASS BUYING POWER .....866-271-2196  
Before you make your next purchase visit [www.massbuy.com](http://www.massbuy.com) for any new products and services.

### DISCOUNT PRODUCTS BY MEMBER ADVANTAGE

MEMBER ADVANTAGE .....781-828-4555 OR 800-232-0872  
Discount prices on a broad range of products. Register at [mnadiscountproducts.com](http://mnadiscountproducts.com)

### OIL BUYING NETWORK DISCOUNT

OIL BUYING NETWORK .....800-660-4328  
Lower home oil heating costs by 10–25 cents/gallon or \$150 per year.

### WRENTHAM VILLAGE PREMIUM OUTLETS

Present your MNA membership card at the information desk to receive a VIP coupon book offering hundreds of dollars in savings.

### CAMBRIDGE EYE DOCTORS

Obtain your Sight Care ID card to receive discounts on eye exams, eyeglasses & contact lenses at Cambridge Eye Doctors or Vision World.

### HEALTH CARE APPAREL

WORK 'N GEAR DISCOUNT .....800-WORKNGEAR  
Receive 15% discount off all regularly priced merchandise. Visit [www.massnurses.org](http://www.massnurses.org) for a printable coupon to present at time of purchase.

### BROOKS BROTHERS DISCOUNT

15% discount at Brooks Brothers, Adrienne Vittadini and Carolee. <http://membership.brooksbrothers.com>.

## Travel & Leisure

### CAR RENTAL

AVIS CAR RENTAL .....1-800-331-1212  
Discounts can be used for both personal and business travel.

HERTZ CAR RENTAL .....800-654-2200  
MNA members discounts range from 5 – 20%. (For MNA discount CDP, call 781-830-5726.)

### EXCLUSIVE TRAVEL DEALS

MNA VACATION CENTER .....WWW.MNAVACATIONS.COM  
Powered by TNT and Goahead tours. Get exclusive access to travel specials at prices not available to the public.

DISCOUNT MOVIE PASSES .....781-830-5726  
Showcase Cinemas/National Amusements, \$7.75. AMC Theatres, \$6. Regal Cinemas (not valid first 12 days of new release), \$6.

### DISNEY DISCOUNT

Discounted tickets to Walt Disney World and Disneyland along with other Florida attractions. Call 800-331-6483 .

### ANHEUSER-BUSCH ADVENTURE PARKS DISCOUNT

Obtain Adventure Card to receive discounts to Busch Gardens, Sea World, Sesame Place, Water Country USA & Adventure Island in Tampa, Fla.

UNIVERSAL STUDIOS FAN CLUB .....888-777-2131  
Log onto the MNA Web site at [www.massnurses.org](http://www.massnurses.org) and click on the Universal Studios Link to obtain special discount prices.

### WORKING ADVANTAGE

Discounts for movies, theme parks, ski tickets, Broadway shows. [www.workingadvantage.com](http://www.workingadvantage.com).

### SIX FLAGS NEW ENGLAND

One day pass only \$25. Contact MNA's Division of Membership at 800-882-2056, x726.





# WORKPLACE HAZARDS

to Nurses & Other Healthcare Workers

## Beyond the Salary: Safety at Work

June 4 & 5, 2009

Hoagland Pincus Conference Center  
222 Maple Avenue  
Shrewsbury, MA 01545

This conference is co-provided by the Massachusetts Nurses Association and the University of Massachusetts Lowell, Center for Health Promotion and Research



### Schedule

#### Thursday, June 4, 2009

7:30 a.m. to 4:30 p.m. (registration 7:30 a.m. to 8:30 a.m.)

- ▶ **Nurses' Safety at Work: A Global Perspective**  
*Susan Wilburn, RN, MPH, World Health Organization.*
- ▶ **Workers' Compensation: What Nurses Need to Know**  
*Sarah Gibson, Attorney, Law Office of Sarah Gibson*
- ▶ **Who is Really Getting Injured and How** *Jon Boyer, ScD, U Mass Lowell*

• **Lunch**

• **Breakout Sessions:**

**Home Care Safety** *Pia Markkanen, ScD*

**Sharps Safety – What Devices Are You Using?** *Angela Laramie, MPH*

**Stress in Healthcare Settings** *Nicole Champagne, EdD*

**Ergonomics and Lifting** *Jamie Tessler, MPH*

• **Repeat Breakouts**

4:15 to 4:30 p.m. • **Evaluation and Closing**

Thursday Evening • 7:00 to 9:00 p.m.

**Buffet Dinner and Entertainment** • The Beechwood Hotel, Renaissance Room • 363 Plantation Street, Worcester, MA 01605 • **Musical Entertainment:** Jonathan and Annie Rosen • Cost: \$50.00 per person

#### Friday, June 5, 2009

7:30 a.m. to 3:30 p.m. (registration 7:30 a.m. to 8:30 a.m.)

- ▶ **Environmental Health – Safe Drug Disposal** *Stephanie Chalupka, EdD, APRN*
- ▶ **Technical Advances in Violence Prevention** *Kate McPhaul, PhD, RN*

• **Breakout Sessions:**

**Protecting Yourself from Infectious Disease** *Tom Fuller, ScD*

**Staying Safe Around Hazardous Drugs** *Kathy Sperrazza, ScD (c.), RN*

**Fragrance Free Work Environments** *D. Paxson Barker, BS, RN*

**Workplace Violence Prevention** *Rosemary O'Brien, RN*

• **Lunch**

• **Repeat Breakouts**

• **Closing Session**

▶ **Next Steps** *Jonathan Rosen, CIH*

3:20 to 3:30 p.m. • **Evaluations and Closing**

#### Program Description

This two day conference will present the latest research findings on work environment issues related to cause and prevention of Musculo-Skeletal Injuries, Needlestick Injuries, Workplace Violence and Abuse, Infectious Disease Transmission, Exposure to Hazardous Drugs, and Injuries in the Home Care setting. The environmental health concerns of improper disposal of medications and strategies for safer disposal will also be addressed. Additionally, issues of workers' compensation, injury frequency and severity and nurses stress in healthcare settings will be addressed.

#### Chemical Sensitivity

ATTENDEES ARE REQUESTED TO AVOID WEARING SCENTED PERSONAL PRODUCTS WHEN ATTENDING THIS CONFERENCE. SCENTS MAY TRIGGER RESPONSES IN THOSE WITH CHEMICAL SENSITIVITY.

#### Contact Hours

Continuing nursing education contact hours will be provided.

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

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

#### Registration Information

No charge for MNA Members and Associate Members. A placeholder fee is required and will be returned the day of the program to those who attend.

Please return the completed registration form with a check payable to MNA for \$75.00 for the full conference or \$50.00 for single day attendance. For more information contact Susan Clish, Division of Health and Safety at 781-830-5723 or 800-882-2056 x 723.

**Non-Members:** Conference fee of \$75.00 for full conference and \$50.00 for a single day.

#### Overnight Accommodations

The Beechwood Hotel, 363 Plantation Street, Worcester, MA, 01605, 508-754-5789. Ask for the MNA Overnight rate - Rooms Double Occupancy \$135.00 plus tax.

#### Program Cancellation

MNA reserves the right to change speakers or cancel programs for extenuating circumstances.

## Workplace Hazards Conference • Beyond the Salary: Safety at Work • June 4-5, 2009

Name \_\_\_\_\_

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

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: Daytime \_\_\_\_\_ Evening \_\_\_\_\_

Place of employment \_\_\_\_\_

Please indicate your two choices for the following Thursday Breakout sessions: (seating limited to 30)

\_\_\_\_\_ Home Care Safety \_\_\_\_\_ Sharps Safety \_\_\_\_\_ Stress in Healthcare \_\_\_\_\_ Ergonomics

Please indicate your two choices for the following Friday Breakout sessions: (seating limited to 30)

\_\_\_\_\_ Protecting from Disease \_\_\_\_\_ Staying Safe \_\_\_\_\_ Fragrance Free \_\_\_\_\_ Workplace Violence

Every effort will be made to accommodate your selections. To register please return the completed form with your check(s) for the appropriate fee payable to MNA to:

**MNA • Attn. Susan Clish • 340 Turnpike Street • Canton, MA 02021**

### Please check:

**Full Conference**  
\$75 fee

**Thursday only**  
\$50 fee

**Friday only**  
\$50 fee

*Placeholder fee will be returned at registration for members only.*

**Entertainment & Dinner at Beechwood on June 4th**

*Please enclose a separate check for \$50 made payable to MNA with memo line: Dinner at Beechwood*

# 2009 MNF scholarships available



- ▶ Scholarship
- ▶ Research
- ▶ Education

Massachusetts Nurses Foundation, Inc.

- **New:** Rosemary Smith Memorial Scholarship for MNA members seeking advanced degree in nursing, labor studies or public health policy
- **New:** School Nurse Scholarships for MNA members enrolled in an accredited program related to school health issues
- Unit 7 RN pursuing higher education
- Unit 7 HCP pursuing higher education
- Regional Council 5 Scholarship for child of an MNA member pursuing higher education (other than nursing)
- Regional Council 5 Scholarship for child of an MNA member pursuing a nursing degree
- Regional Council 5 Scholarship to an MNA member's spouse/significant other pursuing nursing degree
- Regional Council 4 Scholarship for MNA member pursuing nursing degree/higher education
- Regional Council 3 Scholarship for MNA member pursuing BSN
- Regional Council 3 Scholarship for MNA member pursuing MSN/PhD
- Regional Council 3 Scholarship for MNA member's child pursuing BSN
- Regional Council 2 Scholarship for MNA member pursuing nursing degree/higher education
- Regional Council 2 Scholarship for MNA member's children pursuing nursing degree
- Carol Vigeant Scholarship for entry level nursing student in Worcester area
- Kate Maker Scholarship for entry level nursing student in Worcester area
- Janet Dunphy – MNA Regional Council 5 member pursuing baccalaureate degree
- Janet Dunphy – MNA Regional Council 5 member pursuing master's degree
- Janet Dunphy – MNA Regional Council 5 member pursuing doctoral degree
- Regional Council 1 MNA member's children pursuing nursing degree
- Faulkner Hospital School of Nursing Alumnae Memorial Scholarship

Printable applications with instructions and eligibility requirements are available at [www.massnurses.org](http://www.massnurses.org). To have an application mailed, call the MNF voice mail at 781-830-5745.

- Application Deadline: June 1, 2009 •



## 4<sup>TH</sup> ANNUAL *Deb Walsh* OB/GYN LECTURE SERIES PRESENTED BY MNA REGION 3



### Obstetric and Newborn Challenges

**Program Description:** This program will address the key obstetrical emergencies challenging peri-natal nurses today. The issues of nursing care and support for families and staff related to an intra-uterine fetal demise will be discussed. The program will conclude with an overview of the nursing care related to neonatal stabilization.

**Date:** June 4, 2009

**Time:** 8:00 a.m. – 3:00 p.m.

**Location:** Canal Club Function Facility  
100 Trowbridge Rd, Bourne, MA 02532  
Phone: 508-743-9000 • Hotel: 508-759-0800  
[www.canal-club.com](http://www.canal-club.com)

### Agenda

- 8:00 - 8:30 a.m. Registration
- 8:30 - 9:30 a.m. Obstetric Emergencies (*speaker TBA*)
- 9:30 - 10:30 a.m. IUFD Care and Support for Families and Staff  
Michelle Souza, RN, BS
- 10:30 - 10:45 a.m. Break
- 10:45 - 12:15 p.m. Neonatal Stabilization including umbilical line placement (*speaker TBA*)
- 12:15 - 1:00 p.m. Lunch
- 1:00 - 3:00 p.m. Neonatal Stabilization cont.

**Registration:** Registration will be processed on a space available basis. There is a **non-refundable** fee of \$50 for this class. If you do not attend the program or fail to call to cancel, the fee will NOT be refunded.

To register for this program, please contact the MNA Regional Council 3 office at 508-888-5774 or [region3@mnarn.org](mailto:region3@mnarn.org).

**Chemical Sensitivity:** Scents may trigger responses in those with chemical sensitivities. Men and women are requested to avoid wearing scented personal products when attending this meeting/program.

**Program Cancellation:** MNA reserves the right to change speakers or cancel programs for extenuating circumstances. In case of inclement weather, please call the MNA Regional Council 3 office at 508-888-5774 to determine whether a program will run as originally scheduled. Registration and fees will be reimbursed for all cancelled programs.

# MNA CONTINUING EDUCATION COURSES

Summer 2009

## Cardiac and Pulmonary Emergencies

**Description:** This program is designed for registered nurses in acute, sub-acute and long-term care settings to learn the clinical management of cardiac and respiratory emergencies. Clinical management of chest pain, brief EKG interpretation and ABG interpretation will be covered. Clinical management of respiratory distress will also be discussed.

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

**Date:** June 16

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

**Place:** X&O Restaurant, Stoughton

## Interpreting Laboratory Values

**Description:** This program will enhance the nurse's ability to evaluate and determine the clinical significance of laboratory values. Clinical case studies will be used to illustrate the relationship of laboratory values to patient conditions. Clinical management of abnormal laboratory values will be discussed.

**Speaker:** Mary Sue Howlett, BSN, RN, CEN

**Date:** June 17

**Time:** 5–9 p.m. (light supper provided)

**Place:** MNA Headquarters, Canton

**Fee\*:** MNA Members/Associate Members, free\*; Others, \$95

**\*Requires \$25 deposit which will be returned upon attendance.**

**Contact Hours:** Will be provided.

**MNA Contact:** Phyllis Kleingardner, 781-830-5794 or 800-882-2056, x794

## Wound Care

**Description:** A comprehensive overview of the factors affecting wound care and strategies for managing complex wounds. A thorough review of wound products will enable the attendee to select the optimal dressing based on clinical findings and new dimensions of wound care.

**Speaker:** Carol Mallia, RN, MSN

**Date:** June 23

**Time:** 5–9 p.m. (light supper provided)

**Place:** MNA Headquarters, Canton

**Fee\*:** MNA Members/Associate Members, free\*; Others, \$95

**\*Requires \$25 deposit which will be returned upon attendance.**

**Contact Hours:** Will be provided.

**MNA Contact:** Phyllis Kleingardner, 781-830-5794 or 800-882-2056, x794

## Medical/Surgical Nursing Summit: Focus on Cardiac and Respiratory

**Morning Session:** *Rescuing the Airways: Management of Acute Respiratory Failure*

**Description:** Utilizing an interactive case study approach, this program will describe the etiologies and pathophysiologic process of acute respiratory failure. Program will include arterial blood gases, suctioning, chest tube management, tracheostomies and non-invasive positive pressure ventilation.

**Presenter:** Carol Daddio Pierce, RN, MS, CCRN, ACNP

**Afternoon Session:** *Mr. Smith is Having Chest Pain—Now What?*

**Description:** A case study approach to the assessment, nursing considerations and pharmacological management of myocardial

infarction and heart failure for the novice to intermediate nurse.

**Presenter:** Catherine Saniuk, RN, MS, CCRN

**Date:** Aug. 12

**Time:** 8:30–9 a.m. Registration  
9 a.m.–noon Morning Session  
Noon–1 p.m. Lunch Provided  
1–4 p.m. Afternoon Session

**Location:** MNA Headquarters, Canton

**Fee\*:** MNA Members/Associate Members Free\*; Others \$195

**\*Requires \$50 deposit which will be returned upon attendance.**

**Contact Hours:** ANCC: 2.6 per session; BORN: 3.2 per session

**MNA Contact:** Theresa Yannetty, 781-830-5727 or 800-882-2056, x727

## Basic Dysrhythmia Interpretation

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

**Presenters:** Mary Sue Howlett, BSN, RN, CEN; Carol Mallia, MSN, RN

**Dates:** Aug. 18 – Part 1

Aug. 25 – Part 2

**Time:** 5–9 p.m. (light supper provided)

**Place:** MNA Headquarters, Canton

**Fee\*:** MNA Members/Associate Members Free\*; Others \$195

**\*Requires \$50 deposit which will be returned upon attendance.**

**Contact Hours:** Will be provided

**MNA Contact:** Phyllis Kleingardner, 781-830-5794 or 800-882-2056, x794

## Continuing Education Course Information

**Registration:** Registration will be processed on a space available basis. Enrollment is limited for all courses.

**Payment:** Payment may be made with MasterCard, Visa or Amex by calling the MNA contact person for the program or by mailing a check to MNA, 340 Turnpike St., Canton, MA 02021.

**Refunds:** Refunds are issued up to two weeks before the program date. No refunds are made less than 14 days before the program's first session or for subsequent sessions of a multi-day program.

**Program Cancellation:** MNA reserves the right to change speakers or cancel programs due to extenuating circumstances. In case of inclement weather, please call the MNA at 781-821-4625 or 800-882-2056 to determine whether a program will run as scheduled. Registration fees will be reimbursed for all cancelled programs.

**Contact Hours:** Contact hours will be awarded by the Massachusetts Nurses Association for all programs. To successfully complete a program and receive contact hours or a certificate of attendance, you must: (1) sign in; (2) be present for the entire time period of the program; and (3) complete and submit the program evaluation.

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

**Chemical Sensitivity:** Scents may trigger responses in those with chemical sensitivities. Participants are requested to avoid wearing scented personal products and refrain from smoking when attending MNA continuing education programs.

**Note:** CE programs provided solely by the MNA are free of charge to all MNA members. Pre-registration is required for all programs.



# MNA<sup>SM</sup>

## LABOR SCHOOL



Track 1: MNA Overview and Structure					
Region	1	2	3	4	5
<b>Week 1: Overview of the MNA</b> Divisions By-laws How policies, decisions are made One member, one vote	11/18	<b>C O M P L E T E</b>	11/19	<b>C O M P L E T E</b>	<b>C O M P L E T E</b>
<b>Week 2: Legislative and Governmental Affairs</b> Division: Political Activity	12/2	<b>L E T T E R</b>	1/7	<b>L E T T E R</b>	<b>L E T T E R</b>
<b>Week 3: Nursing Division/Health and Safety</b>	12/16	<b>T E C H N I C A L</b>	12/10	<b>T E C H N I C A L</b>	<b>T E C H N I C A L</b>
<b>Week 4: Public Communications</b>	1/6	<b>E D U C A T I O N A L</b>	1/21	<b>E D U C A T I O N A L</b>	<b>E D U C A T I O N A L</b>
<b>Week 5: Organizing Division</b>	1/20	<b>D I S T R I B U T I O N A L</b>	2/4	<b>D I S T R I B U T I O N A L</b>	<b>D I S T R I B U T I O N A L</b>

Track 2: Role of the Floor Rep., Grievances and Arbitration					
Region	1	2	3	4	5
<b>Week 1: Role of the MNA rep</b> Identifying grievances What is grievable Grievances vs. complaints—how to tell the difference, how to work with the member	7/14	4/22	3/18	6/18	<b>C O M P L E T E D</b>
<b>Week 2: Components of the grievance procedure</b> Time lines and steps When/how to settle grievances Discipline vs. contract interpretation grievances Burden of proof, just cause, due process, seven tests of just cause Past practice <ul style="list-style-type: none"> <li>• Definition</li> <li>• Difficulty in proving a practice</li> <li>• Burden in proving a practice</li> </ul>	7/28	5/6	4/1	7/7	
<b>Week 3: How to file grievances</b> How to write a grievance Investigation/identifying sources of information Right to information Information requests Constructing the case	8/11	5/19	4/15	7/23	
<b>Week 4: Presenting the grievance</b> Dealing with management Settling the grievance	8/25	6/3	4/29	8/13	
<b>Week 5: Arbitration</b> Why it's good for the members Why it's bad for the members Unfair labor practices Weingarten rights Organizing around grievances	9/1	6/16	5/13	8/27	

Track 3: Collective Bargaining		
Region	1	2
<b>Week 1: Negotiations and the Legal Basis</b> Process overview Bargaining ground rules	4/14	12/3
<b>Week 2: Preparing for Bargaining</b> Importance of internal organizing Contract action team Contract calendar, planning events Surveys, meetings, other methods of gathering proposals from members Setting priorities Developing a campaign	4/28	1/14
<b>Week 3: Committee Decision Making</b> Conduct at the table Dates, location, etc Open bargaining. Pros & cons. Opening statements Proposal exchange	5/12	1/28
<b>Week 4: Table Tactics/Reading Signals</b> Implementing the contract campaign The contract action team Writing contract language	5/26	2/11
<b>Week 5: Costing the Contract</b> Bargaining video Picketing and strikes Bargaining unit job actions Impasse/contract extensions	6/16	2/25
<b>Week 6: Use of the Media</b> Reaching agreement, writing final language Committee recommendation Ratification process Midterm bargaining	6/30	3/10

Track 4: Computer Training		
Region	1	2
<b>Week 1: Excel 1</b>	2/2	
<b>Week 2: Excel 2</b>	2/17	
<b>Week 3: Excel 3 graphs &amp; application</b>	3/12	
<b>Week 4: Word 1</b>	3/26	
<b>Week 5: Word 2</b>	4/9	
<b>Week 6: Publisher 1</b>	4/27	

After a very successful first year, the MNA Labor School has been expanded and restructured. It now consists of six separate tracks of classes in each Region running five to seven weeks each, depending on the track. Two new tracks have been added. One focuses on the MNA structure and divisions, and the second track on computer training (Excel, Word and Publisher). Classes are standardized, so if one particular class is missed in one region, it can be picked up in any other region.

At the conclusion of each track, participants receive a certifi-

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

Preregistration through the Regional office is necessary. Classes generally run from 5–7:30 p.m., with a light meal included. All courses are free and open to any MNA member. **Classes in red will be held from 10 a.m.– noon.**

3	4	5
11/17	3/4	4/20
12/1	3/18	5/4
12/15	4/13	5/18
1/5/10	4/23	6/8
1/19/10	5/6	6/15
2/2/10	5/21	6/29

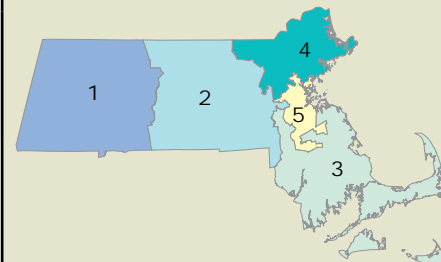
3	4	5
9/8	2/12	2/9
	2/26	2/23
9/22	3/19	3/2
10/6	4/6	3/16
10/13	4/16	3/30
	4/30	4/13

Track 5: Building the Unit, Building the Union							
	Region	1	2	3	4	5	
<b>Week 1: Member Participation/Basic Foundation</b> Purpose of a union Bargaining unit structure & officers By-laws, why they're important Organizing model, internal organizing		7/14			6/18	9/15	
	<b>Week 2: Organizing the Workplace</b> Mapping the workplace Using contract action teams outside of bargaining Organizing around grievances	7/28			7/7	9/29	
		<b>Week 3: Attacking Member Apathy</b> Effective union meetings Internal communication structure Member feedback	8/11			7/23	10/13
			<b>Week 4: Strategic Planning</b> Developing Plan Assessment Intervention	8/25			8/13
<b>Week 5: Workplace Action</b> Identifying Action Plan, preparation and calendar Pressure tactics/Work to rule Strikes	9/1				8/27	11/10	

Track 6: Labor Law and Special Topics						
	Region	1	2	3	4	5
<b>Week 1: Family and Medical Leave Act</b> Massachusetts Small Necessities Leave Act						
	<b>Week 2: Fair Labor Standards Act</b> Overtime rules Labor-Management Reporting and Disclosure Act Union officer elections					
<b>Week 3: Workers Compensation</b> Occupational Safety and Health Act						
	<b>Week 4: Americans with Disability Act</b> Age Discrimination Act Worker Adjustment & Retraining Notification Act Employment Discrimination HIPAA Uniformed Services Employment and Reemployment Rights Act of 1994					
<b>Week 5: NLRB &amp; the Kentucky River/Oakwood cases</b> Nurse supervisor issues						

*Dates to be scheduled for all Regions.*

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



### Labor School Locations

**Region 1, Western Mass.**

241 King Street  
Northampton  
413.584.4607

**Region 2, Central Mass.**

365 Shrewsbury St.  
Worcester  
508.756.5800

**Region 3, South Shore/  
Cape & Islands**

60 Route 6A  
Sandwich  
508.888.5774

**Region 4, North Shore**

10 First Avenue, Suite 20  
Peabody  
978.977.9200

**Region 5, Greater Boston**

MNA Headquarters  
340 Turnpike Street, Canton  
781.821.8255

# MNA<sup>SM</sup>

## Peer

## Assistance

## Program

*Help for Nurses  
with Substance  
Abuse Problems*



- Are you a nurse who is self-prescribing medications for pain, stress or anxiety?
- Are you a nurse who is using alcohol or other drugs to cope with everyday stress?
- Would you appreciate the aid of a nurse who understands recovery and wants to help?

Please call us at  
781-821-4625, ext. 755  
or 800-882-2056 (in Mass. only)  
[peerassistance.com](http://peerassistance.com)

All information is confidential

*The MNA Peer Assistance Program is a confidential program  
provided by the MNA to assist chemically dependent nurses.*

## Support Groups for Nurses and Other Health Professionals with Substance Abuse Problems

*Below is a list of self-help groups facilitated by volunteer nurses who understand addiction and the recovery process. Many nurses with substance abuse problems find it therapeutic to share their experiences with peers who understand the challenges of addiction in the health care profession.*

### **Boston Metropolitan Area**

- Bournwood Hospital, Health Care Professionals Support Group, 300 South St., Brookline. Donna White, 617-469-0300, x305. Wednesdays, 7:30–8:30 p.m.
- McLean Hospital, DeMarmeffe Building, Room 116. LeRoy Kelly, 508-881-7889. Thursdays, 5:30–6:30 p.m.
- Caritas Good Samaritan Medical Center, Community Conference Room, 235 N. Pearl St., Brockton. Steve Nikolsky, 508-238-8024. Thursdays, 6:30–7:30 p.m.
- Health Care Professional Support Group, Caritas Norwood Hospital, Norwood. Jacqueline Sitte, 781-341-2100. Thursdays, 7–8:30 p.m.

### **Central Massachusetts**

- Professional Nurses Group, UMass Medical Center, 107 Lincoln Street, Worcester. Contacts: Laurie, 508-853-0517; Carole, 978-568-1995. Mondays, 6–7 p.m.

- Health Care Support Group, UMass School of Medicine, Outside Room 123, Worcester. Emory, 508-429-9433. Saturdays, 1–2 p.m.
- Adcare Hospital of Worcester, 107 Lincoln Street, Worcester. Contacts: Lorraine, 508-410-0225. Mondays, 6–7 p.m.

### **Northern Massachusetts**

- Baldpate Hospital, Bungalow 1, Baldpate Road, Georgetown. Dana Fogerty, M.A., 978-352-2131, x57. Tuesdays, 5–6 p.m.
- Nurses Recovery Group, Beverly Hospital, 1st Floor. Jacqueline Lyons, 978-697-2733. Mondays, 6–7 p.m.
- Partnership Recovery Services, 121 Myrtle Street, Melrose. Jay O'Neil, 781-979-0262. Sundays 6:30–7:30 p.m.

### **Southern Massachusetts**

- Peer Group Therapy, 1354 Hancock St., Suite 209, Quincy. Chris Sullivan, 617-838-6111. Tues. 5:15 p.m., Wed., 5:15 p.m. & coed at 6:30 p.m.
- PRN Group, Pembroke Hospital, 199 Oak St., Staff Conference Room, Pembroke. Sharon Day, 508-667-2486. Tuesdays, 6:30–8 p.m.
- Substance Abuse Support Group, AdCare Michelle, 508-965-2479. Mondays, 7–8:30 p.m.

### **Western Massachusetts**

- Professionals in Recovery, Baystate VNAH/EAP Building, Room 135, 50 Maple St., Springfield. Marge Babkiewicz, 413-794-4354. Meets Thursdays, 7:15–8:15 p.m.
- Professional Support Group, Franklin Hospital Lecture Room A, Greenfield. Contacts: Wayne Gavryck, 413-774-2351, Elliott Smolensky, 413-774-2871. Wednesdays, 7–8 p.m.

### **Other Areas**

- Maguire Road Group, for those employed at private health care systems. John William, 508-834-7036 Mondays.
- Nurses for Nurses Group, Hartford, Conn. Contacts: Joan, 203-623-3261, Debbie, 203-871-906, Rick, 203-237-1199. Thursdays, 7–8:30 p.m.
- Nurses Peer Support Group, Ray Conference Center, 345 Blackstone Blvd., Providence, R.I. Sharon Goldstein, 800-445-1195. Wednesdays, 6:30–7:30 p.m.
- Nurses Recovery Group, VA Hospital, 6th Floor Lounge, North 650, Manchester, N.H. Contacts: Janet K., 978-975-5711 Sandy, 603-391-1776. Tuesdays, 7:00–8:00 p.m.



**Inside this issue:  
An MNA window decal for your car.  
Display it proudly!**



**MNA membership dues deductibility for 2008**

The table below shows the amount and percentage of MNA dues that may **not** be deducted from federal income taxes. Federal law disallows the portion of membership dues used for lobbying expenses.

Region	Amount	Percent
All Regions	\$39.00	5.0%

The **MNA** <sup>SM</sup> *Traveler* in collaboration with *Durgan Travel Service*

**Nine Days in Spectacular Spain at a Beautifully Reduced Rate**



**Costa Del Sol, Spain - Oct. 28 - Nov. 5, 2009 • ~~\$2149~~ **\$2049****

This Spain tour will feature the first 5-nights in the beach resort of Torremolinos on Spain's Costa Del Sol with the last 2 evenings in Madrid. We will enjoy a sightseeing tour including Ronda, Toledo, Grenada to see the Alhambra, Seville, and Gibraltar. This tour includes 3 meals daily except our last full day.

**Prices include air, transfers, hotel, all tours and most meals. A fabulous value! Space fills fast, reserve early.**

\* Prices listed are per person, double occupancy based on check purchase. Applicable departure taxes, fuel tax and travel insurance are **NOT** included in the listed prices. *For more information on these great vacations and to be placed in a database to receive yearly flyers, contact Carol Mallia at [cmallia@mnarn.org](mailto:cmallia@mnarn.org) with your mailing address.*

**ARE YOU A NURSE STRUGGLING AFTER A BAD PATIENT OUTCOME?  
WE UNDERSTAND — WE CAN HELP.**

MITSS support team members are aware of the difficult emotional, social and professional issues a nurse has to deal with following an adverse event.

**Nurses may experience:**

- Feelings of loss
- Shame and guilt
- Depression
- Anxiety
- Feelings of isolation and being alone
- Doubts about professional competence
- Difficulties at work and at home

**MITSS provides confidential:**

- Telephone "hotline" support
- Short-term individual counseling
- Support groups for nurses led by a licensed clinical psychologist
- Referral services for emotional support

**You chose a caring field.  
Maybe it's time to take care of yourself.**

MITSS services are available to any nurse and are not restricted to MNA members. Call us toll free at 888-36MITSS or visit [www.mitss.org](http://www.mitss.org).



*There are few individuals or occupations whose members can cope with what direct care registered nurses experience as routine. High levels of intense stress, emotionally and physically demanding work, and a constantly expanding body of knowledge necessary to competently do the work exist within confused channels of authority and the professional and social mandate to be a "good nurse." As we, the nation's 2.9 million registered nurses, continue to view our work beyond the central passive concept of "caring" and build upon our active professional mandate of "advocacy"—the powerful and active voice of nursing will drive both the design and delivery of patient care and shape this bold new frontier of nursing.*

- BARRY ADAMS, RN



## WELCOME TO THE NEW FRONTIER

THE MNA<sup>SM</sup> SALUTES NURSES FOR THE MONTH OF MAY

NATIONAL NURSES DAY • MAY 6, 2009