

MASSACHUSETTS NURSE

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State Senate fails to act on safe RN staffing bill

■ Session ends without final action on important patient safety measure

The Massachusetts Legislature ended its 2005-2006 formal session last month without the Senate taking action on the compromise safe RN staffing bill that the House of Representatives had passed overwhelmingly in May. Despite approval of the Patient Safety Act by a veto-proof House majority (133-20) and what promised to be a similar vote in the Senate, Senate leadership would not allow the bill on the floor for a vote.

In fact, a majority of senators had already signed on as sponsors of H.2663, the original, much stronger version of the safe RN staffing bill, and in the last legislative session the

Senate had passed a budget amendment calling for safe patient limits for nurses. During the last two weeks, many Senate supporters lobbied the Senate president to bring H.4988 to the floor for a vote.

The bill directed the state's professional public health experts to establish ideal patient-to-RN ratios for different acute care medical units and to set maximum patient limits that hospitals could not exceed. The limits would have been based on extensive scientific research, expert testimony and accepted best practices.

"It's unfortunate that this vital life-saving measure never got the full hearing it deserved," said MNA president Beth Piknick. "The biggest losers in this debate are the patients in Massachusetts hospitals

who will continue to suffer the dangerous consequences of their nurses being forced to care for too many patients at once. Every day we delay setting safe limits on patient assignments, we can expect to see a continued increase in preventable medication errors, longer hospital stays and, yes, needless patient deaths due to chronic understaffing in our state's acute care hospitals."

Despite the current setback, the MNA believes the hard work and tireless advocacy of thousands of nurses and supporters of safe patient limits has put this legislation on the verge of becoming law in Massachusetts. The MNA pointed to several developments as proof of the support for and growing momentum of safe-ratio legislation:

See *Safe staffing*, Page 4

After 1,000+ days, Unit 7 OKs new contract

After 1,085 days without a contract, the MNA's Unit 7 bargaining unit ratified an agreement with the state of Massachusetts on June 21.

"This contract was very difficult to settle but it serves the needs of our members and brings much needed relief," said Mike D'Intinosanto, president of the Unit 7 bargaining unit. "While the process was very long and drawn out, the negotiation committee continued to draw strength from the membership. Although we work in many sites around the commonwealth, the nurses, therapists and other health care professionals gave us constant feedback as we went down this road."

The contract, which covers July 1, 2003 through Dec. 31, 2007, includes pay increases of 11 to 18 percent for RNs and other mem-

bers, which will make the pay scale more competitive in the marketplace.

"While we have more to do, this settlement brings our membership closer to being equivalent with the private sector," said D'Intinosanto. "This should give our patients and their families a comfort level that these senior and experienced nurses, as well as other health care professionals, will continue to provide excellent care to the state's most vulnerable patients."

Other highlights of the contract settlement include:

- Mandatory overtime: The MNA and the state will meet on issues pertaining to overtime and staffing during the contract. If a resolution is not reached,

See *Unit 7*, Page 6



Sen. Ed Augustus (D-Worcester) at the State House on behalf of Unit 7.

MNA unveils new in-house printing facility, mobile unit

State-of-the-art tools will add more power to the MNA's punch!



Hot off the press. Nancy Gilman, co-chair at NEMC, watches as her unit's newsletter is printed on the press' maiden run.



Get your motor running. The MNA's new mobile unit has arrived and is ready to support local units across Massachusetts.

Complete details of these exciting new ventures, Page 3

July/August 2006

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Mark your calendars!

This year's MNA convention will be Oct. 4, 5 & 6 in Sturbridge.

Details, Page 20.

For the latest developments impacting nurses, visit www.massnurses.org

Nurses' guide to single-payer reform

Health care plan assigned to Constitutional Convention committee

By Michael P. Norton & Jim O'Sullivan
As printed by State House News Service

The Legislature on July 12 dealt a huge blow to thousands of citizen activists pushing a plan to make health insurance access a constitutional right, rerouting the petition to a committee where most on Beacon Hill believe it will die.

Members of the House and Senate voted 118-76 to send the proposal to a special committee of the Constitutional Convention. The convention recessed until Nov. 9, two days after the statewide election where sponsors of the constitutional amendment had hoped to secure a historic vote.

In July 2004, the Legislature advanced the amendment to the current convention on a 153-41 vote.

Ann Eldridge Malone, a registered nurse from Boston and one of the 10 original signers of the amendment, which had attracted tens of thousands of signatures of support, said after the vote that "words can't describe the depth of disappointment."

Citizen volunteers were shocked, Eldridge Malone said, and felt they would have prevailed had lawmakers voted on the amendment itself. "It felt like a slap in the face to democracy," she said. "It was a slap in the face to citizens who have given their all for three years."

Legislative negotiators of this year's historic health care access law said the constitutional amendment deserves more scrutiny while the new law is given a chance to work.

Supporters of the constitutional amendment, during debate on the amendment, said it might be the only option available to force the new law to be implemented and to prevent an erosion of its ambitious goals.

The constitutional amendment, approved during the 2003-2004 session, needed only 50 votes to merit a statewide vote on this November's ballot. Technically, the amendment is still alive as long as the convention remains open, but its chances appear severely diminished by today's vote. Legislative leaders acknowledged a chance that the proposal could be approved and placed on the November 2008 ballot.

The amendment would obligate the Legislature to "ensure that no Massachusetts resident lacks comprehensive, affordable, and equitably financed health insurance coverage for all medically necessary preventive, acute and chronic health care and mental health care services, prescription drugs and devices," and subject legislation needed to meet that constitutional mandate to statewide voter approval.

Amendment sponsors consoled each other

in the halls of the capitol afterwards.

Barbara Roop, co-chair of the Health Care for Massachusetts Campaign, said after the vote that the campaign would do everything it could to get on the ballot, even in 2008.

"Clearly, we're extremely disappointed that an amendment that had the overwhelming support of members, based on the testimony, was put into a study with no direction, no date certain, and unclear to be honest what they're studying, when in fact the amendment itself is the platform and lock-in for what they've done," said Roop.

Lawmakers acknowledged the vote had seriously wounded the measure's prospects.

"We didn't give it an injection of adrenaline by what we did," said Sen. Steven Tolman (D-Brighton), who spoke in favor of the amendment and wondered why his colleagues would not support a measure that was philosophically in sync with the law they just approved.

During debate on the floor, Sen. Richard Moore (D-Uxbridge), who co-chairs the Joint Committee on Health Care Financing and helped negotiate the landmark reform, said implementation of the Chapter 58 changes deserve "a chance to work." His committee co-chair, Rep. Patricia Walrath (D-Stow), another top negotiator, concurred and will

sit with Moore atop the House-dominated committee handling the measure.

Both Senate President Robert Travaglini (D-East Boston) and House Speaker Salvatore DiMasi (D-North End) voted to reassign the petition to committee. Several senators changed their vote during the roll call from opposition to support of the motion.

Rep. Frank Hynes (D-Marshfield) asked Travaglini how to ensure the committee would report. Travaglini, the presiding officer, drew laughter with the remark, "The speaker and I have talents that manifest themselves occasionally" in influencing committee chairs.

Eldridge Malone said she feared the health care access law, like others before it, would disintegrate without a constitutional mandate. "Everyone knows if you look closely at Chapter 58, it has some good sections, but it's like Swiss cheese—it's full of holes," she said.

"History does have a tendency to repeat itself. We've passed other far-reaching reform laws with good elements that were never fully implemented because there was opposition that spent a lot of money on sophisticated lobbying and spreading misinformation perhaps and then the laws were never implemented and that could very well happen again." ■

Massachusetts health care reform falls short

By Rand Wilson and John Horgan
As printed in Labor Notes

Frustrated by the lack of action on health care reform at the national level, activists are working for state-level reforms that could be models for a future, more sympathetic federal government.

Massachusetts recently gained national prominence when a reform bill was signed into law. Unfortunately, the "breakthrough" solution that has been trumpeted as reaching near universal coverage is a false promise.



Ann Eldridge Malone, RN and John Horgan, working on the healthcare amendment at the labor summit at MNA on Jan. 25.

Like most states, Massachusetts has a serious health care crisis. The number of uninsured is rising (state estimates are as high as 750,000 people), costs are the highest in the country and bargaining for contracts is often stalemated over employers' cost-shifting demands.

Last year a number of large unions and the state AFL-CIO were drawn into a coalition that sought to expand coverage for the uninsured. Although coalition allies (the ACT! coalition, led by Health Care For All) believed in winning reforms that would improve the system, the coalition also included elite leaders from the private insurance industry,

doctors groups and hospitals.

This strange alliance meant that from the outset the coalition was committed to crafting a plan that would not upset the special interests most responsible for the current mess. And for a little extra insurance, these special interest groups spent \$7.5 million on lobbyists to make sure that the outcome of any reforms wouldn't jeopardize their profits and power.

Backroom dealings

Behind closed doors with top legislative leaders, the reform coalition's leaders crafted a plan. It did make some modest gains by undoing cuts in state Medicaid programs that benefit the poorest people. And the largest pool of uninsured people—low-wage, often part-timer or temporaries—will be eligible for subsidized insurance plans.

However, the combination of an individual and employer mandate to achieve these gains has dangerous consequences. Under the legislation, employers with more than 10 workers who do not make a "fair and reasonable" contribution toward employee health insurance will only be required to contribute a fee of up to \$295 per year.

The Massachusetts legislation has the potential to seriously erode employer-based coverage. In effect, it tells employers to pay \$295 a year and let the taxpayers subsidize care for your workers.

But wait, it gets worse. If a company's employee uses the state's "free care pool" more than three times or its employees as a group use the pool more than five times a year, there is an additional "free rider" surcharge.

This creates an incentive for employers to fire employees who use the free care pool and

to hire only younger, healthier workers. It encourages employers to avoid hiring workers with health problems. It will discourage uninsured workers from seeking care and lead uninsured workers to pay out of pocket for care rather than risk applying for coverage from the free care pool.

Another downside of the bill is the "individual mandate" that essentially transfers the entire burden of paying for the uninsured to taxpayers and the uninsured themselves. It will require many working families to pay for coverage they simply cannot afford.

Finally, it pits families making over \$60,000—who are not eligible for subsidies, but are required to purchase insurance—

against families that make less and are eligible for state subsidies.

By establishing a new public consensus that individuals are primarily responsible for health coverage, these proposals will make dropping coverage more acceptable. The public will be asked to fund subsidies for private insurance companies to offer low-cost insurance for low- and moderate-income adults. These plans will inevitably wind up being "catastrophic" health plans, leading to more personal bankruptcies.

To learn more about Jobs with Justice campaign, go to www.healthcareformass.org. Rand Wilson is a union organizer. John Horgan is a union steward at Verizon. ■



President's column**Despite nurses' great efforts, no vote by Senate**

By **Beth Piknick**
MNA President

It is with both a sense of profound disappointment and a deep sense of pride that I write this month's column—disappointment at the lack of action by the Senate to vote on the safe RN staffing bill and pride in the effort put forth by the MNA members, staff and supporters who brought this issue to the very brink of ultimate success.

Was it not for a last-minute failure by the Senate to allow the people's voice to be heard on this patient safety issue, we would all be celebrating a tremendous victory in the history of Massachusetts nursing. We offer great praise to our many friends and allies

in the House of Representatives for casting an historic 133-20 vote in favor of H.4988. It was a proud moment. And as we moved to the Senate, we knew we had the votes there to win. We acknowledge those senators who worked hard to have the bill taken up.

But the final votes never had the chance



Beth Piknick

to be cast and counted. As a result, patients in Massachusetts hospitals will continue to suffer needlessly, too many giving their very lives for the want of long awaited political action on this bill.

But we can all take heart that a statement was made in this process and that thousands of front-line nurses rose to the occasion and influenced the political process. In talking to senators and representatives, we learned that thousands of calls, emails, letters and postcards were flooding their offices—20 to one—in favor of the bill.

Many times the MNA called for nurses to become active and, every time, thousands of you answered the call.

Getting this close is heartbreaking, but it is also true that it is a sign that ultimate victory is not far off. Many senators who we talked to about this issue made it clear that they understood that this issue was not going away and that the hospital industry would most certainly need to be held accountable and soon.

For those of you who are disappointed and discouraged, I don't blame you. But I urge you not to give up your power and to continue to invest your passion in this fight. Too many patients' lives are at stake; the very future of our profession is at stake.

We are on the right side of this issue, and we will win in the end. ■

MNA unveils new in-house printing facility and mobile unit

State-of-the-art tools will add more power to the MNA's punch!

The central meeting room at the MNA's Canton headquarters was buzzing with excitement during the Board's May meeting as the members excitedly waited for Beth Piknick, MNA president, to make the long-awaited announcement: that the organization's new in-house print shop was 100 percent operational.

But the Board was in for another bit of good news as well: the mobile unit/RV that would be used by both the MNA and its sister organization NENA (New England Nurses Association) was in the final stages of being "wrapped" in its pro-nurse imagery—and it would be on the road in time for the safe staffing bill's trip through the Senate.

"These new state-of-the-art tools will add more power to the MNA's already potent punch," explained Piknick, "Not only will they allow the MNA to be more effective in both its outreach and advocacy work, but they will dramatically increase the organization's visibility throughout New England in immeasurable ways."

High-tech printing

The new Heidelberg press—which is the

printing facility's star performer—celebrated its maiden run during the May Board meeting, with Nancy Gilman, co-chair of the MNA bargaining unit at New England Medical Center, ceremoniously hitting the "start" button on a run that produced more than 2,000 color copies of the unit's latest newsletter.

"Having this kind of capability at our fingertips will literally change the way our bargaining units do business," added Piknick. "And with the addition of two new staff people—Ed Berg and Tom Lent who, combined, have more than 70 years of printing experience—and with Erin Servaes managing the pre-press side of things, this shop will be able to handle almost any type of print job out there."

Features and benefits of the new facility include:

- Production of almost all printed material can be handled in-house
- More control over printed materials and publications
- Quicker turnaround of printed materials
- Able to produce materials that vary

in size, from business cards to posters

- Jobs can be printed in full color
- The facility can also manage jobs that require folding, cutting and saddle stitching

To learn more about how your bargaining unit can utilize the MNA's new in-house printing facility, contact your bargaining unit's MNA labor director.

High-tech road trips

With over 85 unionized facilities in the state of Massachusetts alone, sending the MNA and all of its resources to the nurses, patients and union advocates who need them has long been on the organization's to-do list.

The best way to achieve this goal? Procure a fully-equipped mobile unit that could go to the nurses.

"Visually, the mobile unit symbolizes everything that nurses currently do at the bedside while still emphasizing what they're trying to achieve on behalf of their colleagues and the profession overall," said Piknick. "It will travel throughout New England and it will be used as a mobile office for outlying bargaining

units, as well as a command center/public awareness tool during pickets, strikes, outdoor events, and union activities—both MNA and otherwise."

Features of the mobile unit include:

- Four separate, interior offices with a larger meeting area located at the back of the unit
- Fully-equipped with wireless technologies that will allow for phone capabilities, e-mailing and faxing
- TV hookup and DVD
- Outdoor public address system
- A bathroom
- A small kitchen

"Whenever nurses are engaged in a public activity—be it a community parade, a bargaining unit strike, or an event in support of another union—the new mobile will be able to powerfully represent nurses and the work they do on behalf of their profession and the labor movement overall," added Piknick.

To learn more about how the mobile unit can benefit your next public event, call Eileen Norton in the MNA's organizing department at 781-830-5777. ■



The new mobile van ...

... and a panoramic view of the MNA's new in-house print shop.



Nursing on Beacon Hill: Legislative Update

School nurse tenure bill

Legislation filed by Rep. Christine Canavan (D-Brockton) provides that a school nurse who has been working for the three previous consecutive school years shall be considered a teacher, and shall be entitled to professional teacher status. This bill, H.1087, effectively provides school nurses with tenure and dismissal protection and also adds a new tool in the fight for pay equity.

The bill passed the House and Senate earlier this year and was sent back to the Legislature by the governor with an amendment. The Legislature is in the process of rejecting the governor's changes and re-enacting the bill.



Nursing on Beacon Hill LEGISLATIVE UPDATE

Sexual Assault Nurse Examiner

A significant lobbying campaign waged by advocates, the public health and public safety/law enforcement community has led to increased funding for the SANE program in the state budget for the upcoming fiscal year. The SANE program, which now includes a pediatric SANE component, received \$3.6 million in funding during the budget process.

Additionally, a bill filed by Sen. Susan Tucker (D-North Andover) and Rep. Peter Koutoujian (D-Waltham) will codify the SANE into the state law. The bill has passed through two legislative committees and an initial affirmative vote in the House of Representatives.

MNA to be actively engaged in pension reform debate

A special commission created by the Legislature to examine the current retirement classification system for public sector workers in Massachusetts recently released its recommendations. This is a critical issue for registered nurses and health care professionals in the state's health and human service system. With the end of the Legislative session nearing, it is unlikely any specific legislation will be acted upon this session, but this is an issue the MNA will take an active role on during the next legislative session. ■

...Safe Staffing

From Page 1

- The hospital industry's bill, which set weaker, watered-down standards, never made it out of committee.
- Recent polling found that 70 percent of physicians, 90 percent of RNs and 80 percent of voters support the safe RN staffing legislation.
- The Massachusetts House of Representen-

tatives became the only state legislative chamber in the country besides California's to pass legislation setting a limit on how many patients a nurse is assigned at one time.

- The Coalition to Protect Massachusetts Patients, an alliance that grew to encompass 106 leading health care and consumer advocacy organizations, strongly sup-

ported the bill.

In the coming months, the MNA intends to work aggressively to support the re-election of those legislators who strongly supported the measure, support new candidates who will make passage of this legislation a priority, continue to build and grow its coalition in support of safe staffing, and prepare its campaign for the next legislative session. ■

Fighting for safe RN staffing



State Sen. Marc R. Pacheco (D-Taunton), backed by supporters of the Patient Safety Act during a June 11 press conference and rally at the State House. Dozens of nurses and nurse advocates were in attendance and each had the opportunity to hear speakers including: John McCormack, a patient advocate and author of Taylor's Law; Jeremiah Hurley of the Massachusetts Senior Action Council; Linda Debenedictis, president and founder of the New England Patients' Rights Group; and Beth Pknic, RN and president of the MNA.



A Vote for the nurses: Rep. Stephen Canessa (D-New Bedford) with MNA advocates and nurses in the weeks leading up to the House's groundbreaking vote in support of the safe ratios bill. Both Canessa's support and vote were invaluable to the MNA, and to nurses everywhere, who have been advocating of behalf of the commonwealth's patients.

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MASSACHUSETTS NURSES ASSOCIATION



House roll call vote on safe RN staffing bill

Note: Due to a database error, the June edition of the *Massachusetts Nurse* included an incorrect voting record for several House members on H. 4988, the compromise Safe RN

Staffing bill. Reps. John Binienda, Stephen Canessa, James Leary, David Linsky and Frank Smizik all voted "Yes." We apologize for the error. The correct record is below.

Y	Cory Atkins, D-Concord
Y	Demetrius Atsalis, D-Barnstable
Y	Bruce Ayers, D-Quincy
Y	Ruth Balsler, D-Newton
Y	John Binienda, D-Worcester
Y	Deborah Blumer, D-Worcester
Y	Daniel Bosley, D-Framingham
Y	Garrett Bradley, D-Hingham
Y	Arthur Broadhurst, D-Methuen
Y	Antonio Cabral, D-New Bedford
Y	Jennifer Callahan, D-Sutton
Y	Christine Canavan, D-Brockton
N	Gale Candaras, D-Wilbraham
Y	Stephen Canessa, D-New Bedford
Y	Mark Carron, D-Southbridge
N	Paul Casey, D-Winchester
Y	Cheryl Coakley-Rivera, D-Springfield
X	Edward Connolly, D-Everett
N	Virginia Coppola, R-Foxboro
X	Robert Correia, D-Fall River
Y	Michael Costello, D-Newburyport
Y	Robert Coughlin, D-Dedham
Y	Geraldine Creedon, D-Brockton
Y	Sean Curran, D-Springfield
Y	Robert DeLeo, D-Winthrop
N	Viriato deMacedo, R-Plymouth
Y	Brian Dempsey, D-Haverhill
Y	Salvatore DiMasi, D-Boston
X	Paul Donato, D-Medford
Y	Christopher Donelan, D-Orange
Y	Joseph Driscoll, D-Braintree
Y	James Eldridge, D-Acton
Y	Lewis Evangelidis, R-Holden
Y	James Fagan, D-Taunton
Y	Christopher Fallon, D-Malden
Y	Mark Falzone, D-Saugus
Y	Robert Fennell, D-Lynn
Y	Michael Festa, D-Melrose
N	Barry Finegold, D-Andover
Y	Jennifer Flanagan, D-Leominster

Y	David Flynn, D-Bridgewater
Y	Linda Dorcena Forry, D-Dorchester
Y	Gloria Fox, D-Roxbury
Y	John Fresolo, D-Worcester
Y	Paul Frost, R-Auburn
Y	William Galvin, D-Canton
N	Colleen Garry, D-Dracut
Y	Susan Gifford, R-Wareham
Y	Anne Gobi, D-Spencer
Y	Emile Goguen, D-Fitchburg
Y	Thomas Golden, D-Lowell
Y	Shirley Gomes, R-Harwich
Y	Mary Grant, D-Beverly
Y	William Greene, D-Billerica
Y	Denis Guyer, D-Dalton
Y	Patricia Haddad, D-Somerset
Y	Geoffrey Hall, D-Westford
Y	Robert Hargraves, R-Groton
Y	Lida Harkins, D-Needham
Y	Bradford Hill, R-Ipswich
Y	Kevin Honan, D-Boston
N	Donald Humason, R-Westfield
Y	Frank Hynes, D-Marshfield
N	Bradley Jones, R-North Reading
Y	Louis Kafka, D-Stoughton
Y	Michael Kane, D-Holyoke
Y	Rachel Kaprielian, D-Watertown
Y	Jay Kaufman, D-Lexington
N	John Keenan, D-Salem
Y	Thomas Kennedy, D-Brockton
X	Kay Khan, D-Newton
Y	Peter Kocot, D-Northampton
Y	Robert Koczera, D-New Bedford
Y	Peter Koutoujian, D-Newton
Y	Paul Kujawski, D-Webster
Y	Stephen Kulik, D-Worthington
N	William Lantigua, D-Lawrence
Y	James Brendan Leary, D-Worcester
Y	Stephen LeDuc, D-Marlborough
N	John Lepper, R-Attleboro

Y	David Linsky, D-Natick
Y	Barbara L'Italien, D-Andover
Y	Paul Loscocco, R-Holliston
Y	Elizabeth Malia, D-Boston
Y	Ronald Mariano, D-Quincy
Y	J. James Marzilli, D-Arlington
Y	James Miceli, D-Wilmington
Y	Michael Moran, D-Boston
N	Charles Murphy, D-Burlington
Y	James Murphy, D-Weymouth
Y	Kevin Murphy, D-Lowell
Y	David Nangle, D-Woburn
Y	Patrick Natale, D-Lowell
Y	Harold Naughton, D-Clinton
Y	Robert Nyman, D-Hanover
Y	Thomas O'Brien, D-Kingston
Y	Eugene O'Flaherty, D-Chelsea
Y	Shirley Owens-Hicks, D-Boston
Y	Marie Parente, D-Milford
Y	Matthew Patrick, D-Falmouth
Y	Anne Paulsen, D-Belmont
Y	Vincent Pedone, D-Worcester
Y	Alice Peisch, D-Wellesley
N	Jeffrey Perry, R-Sandwich
Y	Douglas Petersen, D-Marblehead
N	George Peterson, R-Grafton
Y	Thomas Petrolati, D-Ludlow
Y	Anthony Petrucci, D-East Boston
N	William Smitty Pignatelli, D-Lenox
N	Elizabeth Poirier, R-North Attleboro
Y	Karyn Polito, R-Shrewsbury
N	Susan Pope, R-Wayland
X	Denise Provost, D-Somerville
Y	John Quinn, D-Dartmouth
Y	Kathi-Anne Reinstein, D-Revere
Y	Robert L Rice, D-Gardner
Y	Michael Rodrigues, D-Westport
N	Mary Rogeness, R-Longmeadow
Y	John Rogers, D-Norwood
Y	Richard Ross, R-Wrentham

Y	Michael Rush, D-Boston
Y	Byron Rushing, D-Boston
Y	Jeffrey Sanchez, D-Boston
Y	Tom Sannicandro, D-Ashland
Y	Angelo Scaccia, D-Boston
Y	John Scibak, D-South Hadley
Y	Carl Sciortino, D-Somerville
Y	Frank Israel Smizik, D-Brookline
N	Todd Smola, R-Palmer
Y	Theodore Speliotis, D-Danvers
Y	Robert Spellane, D-Worcester
Y	Christopher Speranzo, D-Pittsfield
Y	Joyce Spiliotis, D-Peabody
Y	Harriett Stanley, D-West Newbury
Y	Thomas Stanley, D-Waltham
Y	Marie St. Fleur, D-Boston
Y	Ellen Story, D-Amherst
Y	William Straus, D-Mattapoisett
Y	David Sullivan, D-Fall River
Y	Benjamin Swan, D-Springfield
Y	Kathleen Teahan, D-Whitman
Y	Walter Timilty, D-Milton
Y	A. Stephen Tobin, D-Quincy
Y	Timothy Toomey, D-Cambridge
Y	David Torrisi, D-North Andover
X	Philip Travis, D-Rehoboth
Y	Eric Turkington, D-Falmouth
Y	Cleon Turner, D-Dennis
Y	James Vallee, D-Franklin
Y	Anthony Verga, D-Gloucester
Y	Joseph Wagner, D-Chicopee
Y	Brian Wallace, D-Boston
Y	Patricia Walrath, D-Stowe
Y	Martin Walsh, D-Dorchester
Y	Steven Walsh, D-Lynn
N	Martha Walz, D-Boston
Y	Daniel Webster, R-Pembroke
Y	James Welch, D-West Springfield
Y	Alice Wolf, D-Cambridge
Y=Yes N=No X=Not Voting	

Mass Nurses PAC announces endorsements for fall primary

The Mass Nurses PAC has made several key endorsements for the Sept. 19 state primary.

These candidates have a voting record in support of safe RN staffing and supporting important RN and health care professional issues, including voting for H. 4988, the compromise safe RN staffing bill on May 24.

Please visit www.massnurses.org for updates.

Antonio Cabral: 13th Bristol – New Bedford

Mark Falzone: 9th Essex – Saugus

Paul Kujawski: 8th Worcester – Webster

Marie Parente: 10th Worcester – Milford

John Rogers: 12th Norfolk – Norwood

Joyce Spiliotis: 12th Essex – Peabody

Marie St. Fleur: 5th Suffolk – Boston

Benjamin Swan: 11th Hampden – Springfield



Antonio Cabral



Mark Falzone



Paul Kujawski



Marie Parente



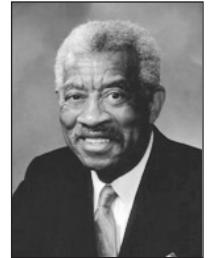
John Rogers



Joyce Spiliotis



Marie St. Fleur



Benjamin Swan

Unit 7 contract: perseverance, unity and public awareness

...Contract

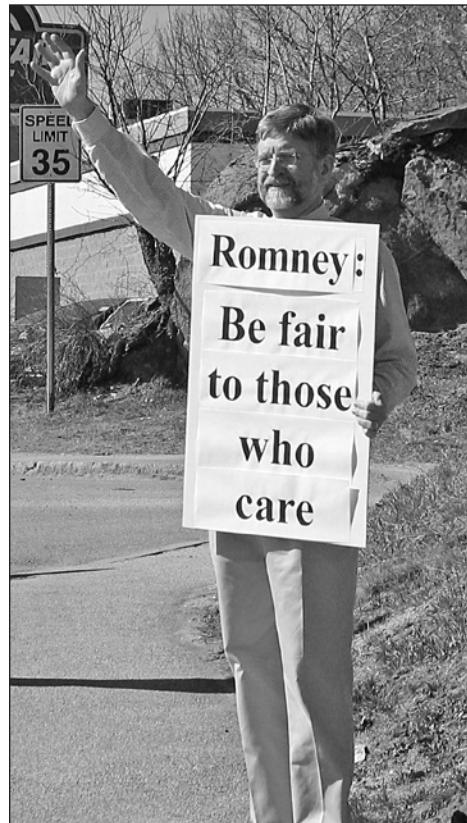
From Page 1

the contract calls for mandatory mediation.

- Dental trust fund: The state will increase its contribution to the Dental Trust Fund by \$2 per week, per full-time equivalent.
- Vacation buy back: Full-time employees may buy back up to seven vacation days a year. This will save the state money it would have to spend covering these days with another employee.

State-employed health care professionals include registered nurses, physicians, pharmacists, psychologists, occupational therapists, physical therapists, dentists, speech and hearing therapists and podiatrists. They work in soldiers' homes for disabled veterans, state hospitals for the mentally ill and psychologically disabled, residential facilities for mentally retarded adults, centers for HIV and drug-affected mothers and children, group homes for those cannot live independently, and high security facilities for violent adolescents or suicidal and homicidal residents.

According to D'Intinosanto this settlement will create energy for the next set of talks. "Looking back, this has been a long and tough process. But, more than ever, we are anxious to get back to the table with a new administration in 2007. There are still many issues important to the quality care we deliver to our patients that have yet to be resolved." ■



July 2006: Taunton State Hospital



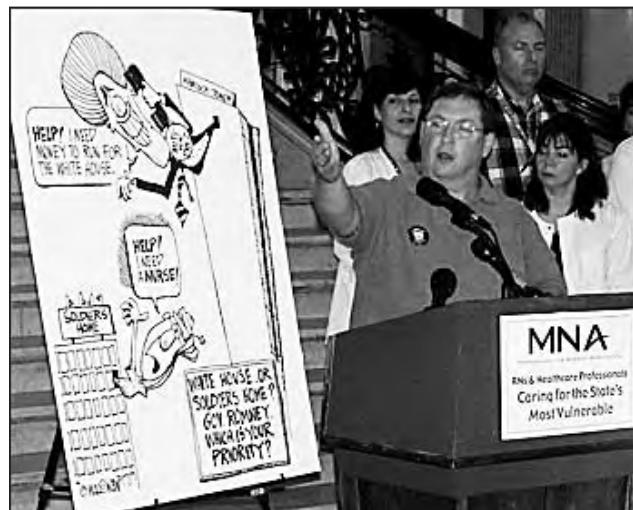
December 2005: Statehouse rally



December 2005: Grinch



April 2006: Worcester State Hospital



October 2005: Bill Fyfe



April 2006: Soldiers Home, Holyoke

Keeping nurses safe on the job: News from the Congress on Health and Safety

Personal disaster planning for individuals and families: begin today

By Evie Bain

Recently, at a joint meeting of the Congress on Health and Safety and the Workplace Violence and Abuse Prevention Task Force, there was discussion about emergency planning for individuals and families. It was agreed that a previous publication on "Personal Preparedness for Disaster" should be updated and run in the *Massachusetts Nurse* again for good measure.

The newest and most comprehensive documents for emergency planning can be found at www.ready.gov, then click on Ready America. This site will lead you to the preparedness plans developed by the Department of Homeland Security and, specifically, the plans recommend that everyone:

1. Get a kit of emergency supplies
2. Make a plan for what you will do in an emergency
3. Be informed about what might happen

While nurses ponder these suggestions/questions, and while negotiations around emergency preparedness in hospital and community settings evolve, the importance of personal and household preparedness may be neglected. Household preparedness goes beyond the milk, bread and batteries that we New Englanders gather like squirrels when snow is in the forecast.

In your own backyard

Learning about your community will reveal what chemical hazards may threaten your safety. Is there a nuclear power plant near your home? Or a chlorine storage tank or a railroad track that may transport hazardous materials? Learn about the response plan in your community and then think about how you and your family fit into it.

Other questions to consider: Where are the

shelters that would be accessible? Can you take your pets with you to shelters?

FEMA (at www.fema.gov) notes that families may be separated during a disaster, and we can all understand this possibility based on the stories that came out of Hurricane Katrina. Because of this terrifying but real possibility, make and communicate a plan for each person in your family to check in with a friend or relative who lives out of the area.

In addition, make sure that all family members know how and when to shut off water, gas and electricity at the main switches. Consult with your local utilities if you have questions.

The kit: what to pack

A disaster supply kit with food, water and supplies for at least three days is recommended as the first level of preparedness. As we begin thinking of an influenza pandemic, the need may be for a few weeks supply. A normally active person requires two quarts of water daily, just for drinking. While a healthy person can survive on half their usual food intake for an extended period or even without food for many days, water intake must remain at normal levels. Store enough water. Canned foods are a good source of emergency rations—just be sure that a manual can-opener is safely tucked in with the supplies. Replace and restock food supplies every six months.

The portable, battery-operated radio and



flashlight (that gets checked as storms are predicted) are also identified as part of disaster kit along with matches in a waterproof container; a shut off wrench; pliers; duct tape; and scissors. Duct tape repairs almost anything, temporarily.

Important household documents, along with a small amount of cash, kept together with important phone numbers, insurance papers and a credit card, are items that should be stored in a watertight container and kept readily accessible. Organizing this now will save time and confusion if you must evacuate rapidly.

Finally, a disaster supply kit for your car that includes smaller amounts of emergency rations of food and water, seasonal driving supplies, a shovel and extra winter clothing, including hats and gloves should be in your

trunk in the event of that next hurricane or blizzard.

For more insights, details and suggestions, visit www.ready.gov/america/states. ■

Health & Safety Contacts

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Proposed MNA Bylaw Amendments 2006

The MNA Bylaws Committee proposes the following Bylaw amendments for discussion at MNA's Convention in October, 2006. Members should review these prior to the discussion and vote scheduled to take place during the Annual Business Meeting at Convention on Oct. 5, 2006 at the Sturbridge Host Hotel, Sturbridge.

Please Note: Language in **bold type** is language proposed to be stricken from the MNA Bylaws; language which is *italicized* is proposed to be added to the MNA Bylaws.

1. Article V – Board of Directors

Current	Proposed	Rationale
Section 3: Term of Office b. No officer or director shall be eligible to serve more than two consecutive terms in the same office or more than six consecutive years on the Board of Directors. A member who has served more than a half a term in any office shall be deemed to have served that term.	Section 3: Term of Office b. Strike subsection b. Reletter subsections c.-e. as b.-d.	Promote the maintenance of our organizational history, knowledge and expertise available to the membership by the deletion of the current bylaw. Proposed by MNA Board of Directors.

2. Article V – Board of Directors

Current	Proposed	Rationale
Section 3: Term of Office c. In case of a vacancy in the office of President, the Vice-President shall become President. The Board of Directors shall fill all other vacancies for the unexpired term according to the next highest number of votes for that position in the most recent election when applicable.	Section 3: Term of Office c. Strike second sentence and substitute: <i>Other officers shall be appointed by the Board of Directors in the case of a vacancy.</i> If adopted, will read: c. In case of a vacancy in the office of President, the Vice-President shall become President. Other officers shall be appointed by the Board of Directors in the case of a vacancy.	This change maintains the choice of the membership to not elect an individual to a particular officer position. Proposed by MNA Board of Directors.

Division of Labor Action: Education & Training

RNs right to a union in jeopardy! The Kentucky River decision and the NLRB

By Joe Twarog

Since the Wagner Act (the National Labor Relations Act) was passed in 1935 establishing the right of workers to organize into unions and also forming the National Labor Relations Board, the definition of "employee" has been hotly debated. The Wagner Act did not specifically address the issue as to whether supervisors and professional employees were to be covered by the Act. But early NLRB decisions (*Packard Motor Car v. NLRB*, 1947) concluded that supervisors were protected. This meant that supervisors, such as foremen and professional occupations, were deemed to be "employees" and therefore able to organize into a union for the purposes of collective bargaining. But the story does not end there.

Following the Packard Motor decision, the Supreme Court ruled that it did not have the power to exclude groups or categories of employees from the Act, but that only Congress did. Quickly the Republican controlled Congress passed the Taft-Hartley Amendments that explicitly excluded supervisors from the protection of the NLRA.

Since then, there has been a tortuous and winding road of decisions by the NLRB and the Supreme Court that addressed the issue of "supervisory" status and the inherent tensions of the normal duties of professional employees. In 2001, the Clinton-appointed Board ruled in two cases (*The Health Care & Retirement Corporation of America* and *Kentucky River Community Care*) where nurses had no power to fire or hire other employees while using ordinary professional or technical judgment in directing less-skilled employees would not be considered "supervisors" because they were exercising their judgment for the benefit of the patients and not the employer.

But this left an opening for the Supreme Court to overturn that ruling and send it back to the NLRB. The issue for review was how to define "supervisor" and what elements

contribute to such status. When it came to nurses, the court found that the NLRB had "created a false dichotomy ... between acts taken in connection with patient care and acts taken in the interest of the employer." The court felt that these were inseparable.

The politicization of the NLRB and the Supreme Court

The board held through a number of other decisions that nurses who provided typical nursing services in a hospital or nursing home, were not supervisors. Yet the Supreme Court rejected that interpretation in 2001 and the issue was sent back to the NLRB. In the meantime, new anti-worker appointees took their seats on the NLRB as well as on the Supreme Court.

Consequently as these bodies (the NLRB and Supreme Court) have taken a much more conservative and political tone over recent years, the definition and tests have continually expanded. The result of this trend is that more and more workers are being denied the right to unionize. In fact, whole categories of workers (e.g. college faculty members, graduate employees, etc.) are now being threatened with their legal right to organize by virtue of essentially political decisions.

Furthermore, the NLRB has refused to even hear oral arguments on the critical issues at hand, despite appeals from various unions and interested parties. In fact, the NLRB has not heard any oral arguments on any pending cases for the past 5 years, since 2001, the year that the Bush administration began. They have only accepted written briefs. The briefs for these 2006 cases were due no later than September 2003!

Current cases for NLRB decision

The NLRB is expected to issue its decision on supervisory status this summer or fall. It threatens the basic right of registered nurses to organize. That decision is inaccurately referred to by the short-hand reference as the

Kentucky River decision (named after a case *NLRB v. Kentucky River Community Care, Inc.*, 2001) However, the cases currently pending before the NLRB actually address issues left open by the Kentucky River decision.

There are three cases now pending. They are: *Oakwood Healthcare Inc.* (UAW), *Golden Crest Healthcare Center* (USW) and *Croft Metals, Inc.* (Boilermakers). These decisions will impact the way that "supervisor" is interpreted and applied by the board and will have wide-ranging, and potentially devastating results on workers' basic right to form a union. They are not consolidated cases however, therefore each will be decided separately by the NLRB and the decisions may be issued over time.

Issues to be "clarified"

At issue is whether registered nurses (and other lead workers) are essentially supervisors. The National Labor Relations Act defines supervisors as "any individual having authority, in the interest of the employer, to hire, transfer, suspend, lay off, recall, promote, discharge, assign, reward, or discipline other employees, or responsibility to direct them, or to adjust their grievances, or effectively to recommend such action, if in connection with the foregoing the exercise of such authority is not merely routine or clerical in nature, but requires the use of independent judgment." This means that supervisors are not considered as "employees" under the act and do not have the rights or protections to organize a union.

Clearly registered nurses use independent judgment every day in the normal course of their work. That is the very nature of such professional occupations. RNs also often direct and assign work in their role as charge nurse. Yet these are the narrow issues that the NLRB will decide on, thereby broadening the definition of "supervisor" and denying nurses the right to a union.

The question essentially becomes one of whether employees with a very minimum

amount of authority in the workplace is enough to consider them as supervisors for the purposes of the NLRA.

Impact and threat

The threat is real. It will impact health care and other skilled and professional occupations, as well as the construction industry. The decisions will inevitably result in much litigation that will waste union members' dues money while enriching union-busting consultant firms and attorneys. The NLRB decisions (assuming the worst) would most likely not immediately or automatically eradicate or abolish nurses' unions. The employer would have to act upon the decision by challenging the status of RNs as "employees"—thereby the litigation.

If nurses lose the protection as "employees" under federal law, they could be disciplined or terminated for engaging in union activity. They would also lose the opportunity to join a union and their ability to have a voice on the job, as well as to be effective patient advocates.

MNA's response

It is the MNA position that whatever the decision of the NLRB, we will fight its attempt to strip away the basic right of all workers to organize.

This strategy will be debated and formulated by the MNA and implemented by each bargaining unit. The plan will not be limited to a draining and lengthy legal battle - but will include an aggressive mobilization of nurses to challenge the decision every day and everywhere!

The MNA expects also that the optimal way to challenge such an anti-worker decision will be to work jointly with other unions across the state in a concerted and dynamic campaign. The expectation is that nurses and other workers will have to fight to save their union or be subject to the whims of the employer. ■

Will get pay hikes of 10 – 32 percent

Worcester school nurses ratify contract with pay parity with teachers

After more than three years of negotiation with the city, the registered nurses of the Worcester Public Schools have ratified a new union contract that grants the nurses' parity with the pay scale of teachers and other professionals in the system—a major issue of concern for school nurses across the commonwealth.

"We are very pleased that the school committee and the mayor have agreed to a contract that recognizes our professional role and the value we bring to the health and education of Worcester's school children," said Cathy Watterson, RN and chair of the nurses' bargaining unit for the Worcester Public Schools. "This contract will provide us with a competitive wage scale that will allow us to recruit and retain the school nursing staff needed to keep children in Worcester healthy and ready to learn."

The nurses, who are represented by the MNA, had been in negotiations over the new contract for nearly three years. The issue of parity with teachers was the major sticking point in the talks and a major concern for the nurses who have the same level of education and certification requirements as teachers yet have been paid more than 30 percent less than teachers.

The new two-year contract—which covers July 1, 2003 through June 30, 2005—creates a new pay scale for school

nurses that mirrors that of the teachers. It will increase pay for nurses at the bottom of the scale by 10 percent and by 32 percent for school nurses who are at the top of the pay scale. Nurses with a master's degree will also receive an annual stipend of \$3,500 per year.

Poor pay and strenuous working conditions for school nurses has led to a shortage of nurses available to cover all of the schools in Worcester, depriving many students of the level of health services they required.

The staffing shortage has been occurring at a time when the student population of Worcester includes large numbers of students with serious health conditions. There are more than 9,000 visits per month to the school nurses' offices, with more than 2,500 medications distributed. There are more than 2,000 students with asthma; 176 with life-threatening allergies; 76 with diabetes; 255 with seizure disorders; 123 with cardiac conditions; and 1,000 on medications for attention deficit disorder. In addition, another 377 are treated for depression and 806 for behavioral/emotional conditions.

According to the Massachusetts School Nurses Organization, 113 school districts in Massachusetts currently provide school nurses pay parity with teachers—including 49 with some form of parity and 64 with full parity. ■



Military leaves of absence covered in many MNA contracts

By Joe Twarog

Since the United States is still at war, it is useful perhaps to review employee's rights regarding military leaves of absence given that many registered nurses serve in the military. Many MNA contracts include language addressing military leave.

A typical contract clause addressing military leave is similar to this one found in the Noble Hospital contract:

"The Hospital will comply with the requirements of applicable state and federal laws relating to Nurses who are called to serve in the National Guard or the Armed Forces of the United States. A Nurse who is called for an annual two (2) week training period in the Military Reserve or National Guard will be paid the difference between the military pay and allowance and the Nurse's basic earnings from the Hospital. Such a Nurse will have the military pay certified by the appropriate Commanding Officer."

Other contracts have more detail and address longer military service circumstances, as well as benefits and re-employment rights. However, there is a federal statute that addresses these issues.

USERRA

The Uniformed Services Employment and Reemployment Rights Act of 1994 (USERRA) is a federal law that protects the employment rights of individuals who voluntarily or involuntarily leave employment to undertake military service or certain types of service in the National Disaster Medical System. It is the statute that defines benefit and re-employment rights for workers who leave work to serve in the military.

Covered employers

Virtually all employers are covered by USERRA, even if they have only one employee. The statute provides protection for employees participating in uniformed services including the Army, Navy, Marines, Air Force, Coast Guard; Reserves, Army and Air National Guard, Commissioned Corps of the Public Health Service, and any other category

or individuals designated by the president.

Covered employees

All employees are covered under USERRA, including full-time, part-time, per diem, temporary, probationary and seasonal



Joe Twarog

employees. An individual becomes covered by the act upon notice of hire. There is no waiting period or minimum threshold of time or number of hours (as with the Family and Medical Leave Act) that must be worked before one comes under the provisions of USERRA. So if an individual is hired to work on July 1 and is scheduled to begin work on July 8, but is called up for military duty on July 2 that person is covered under the law. Employees must provide advance written or verbal notice to an employer before leaving employment to perform military service, unless such notice is impossible or precluded by military necessity.

Military leave and benefits

The leave is an unpaid leave under USERRA but, at the employee's option, can be paid through the use of accrued vacation or other paid leave, or by contractual provision. The employer is not allowed to mandate use of paid leave during the military leave.

USERRA protects an employee's benefits tied to seniority while on military leave. This means that pay and pension are not affected by the time that an employee is on military leave. Time spent on such a leave is not considered as a break in service for these purposes, and an employee who returns from a military leave is entitled to all the rights and benefits as if she/he had been working continuously during that time period. This means that if during such period the wage rates increased, the returning employee is

entitled to that new rate of pay as well as any bonuses and annual step increases that would have occurred. Similarly, for pension purposes, the employee is considered to have worked through the period of the leave.

However, the employee on military leave does not accrue vacation or sick leave time during that period, unless provided for in the contract.

Health insurance

Health Insurance coverage may be continued for up to 18 months if the employee elects for the continuation. If the leave does not exceed 30 days, the employee may not be required to pay more than the employee's share of the premium (where applicable). But if the leave exceeds 30 days, the employee may be required to pay up to 102 percent of the full premium for continued coverage.

Job security and re-employment

Employees honorably discharged from military service are entitled to reinstatement to their civilian job if the military leave was less than five years in duration. This five-year cap does not apply to the annual two-week training periods that occur for reservists and National Guard members however. If the leave was from one to 90 days in duration, the employer must reinstate the employee as if the leave had not been taken—even if it means displacing another employee who temporarily filled the position. For an employee returning from a military leave of greater than 90 days duration, that person must be returned to a position of like pay, status and seniority. In such cases, employers must make reasonable efforts to train a qualifying employee for that position.

Returning employees must notify the employer of their desire to return to employment. The amount of time for notifying the employer varies depending on how long the leave was.

Non-discrimination

USERRA prohibits employers from

discriminating against any employee or prospective employee because of past, present, or future application for, or membership in, a uniformed service. An employer may not deny an individual: initial employment; re-employment; retention in employment; promotion; or any benefit of employment because of military service.



The U.S. Department of Labor Veterans Employment and Training Service (VETS) is authorized to investigate and resolve complaints of USERRA violations. Violations may also be litigated through the union contract.

Massachusetts law and USERRA

The military leave statute in Massachusetts only protects employees on military leave of 17 days or less. It also excludes temporary employees from coverage. Therefore, USERRA provides greater protections and, as a result, that is the statute that employers must adhere to. ■

Division of Labor Action: Bargaining Unit Updates

Brockton VNA ratifies new contract following lengthy negotiations

After almost 19 months of negotiating, the 50 MNA nurses at the Brockton VNA (BVNA) ratified a new contract on July 10 that grants them retroactive pay raises, vastly improved pension benefits and a new certification differential.

The bargaining unit's previous contract expired in July 2004, with negotiations starting in November 2004. Since then, 23 negotiating sessions were held, with nine sessions in front of a federal mediator. The bargaining unit also held an informational picket in April.

"It was a long road," said Fay Alden, co-chairperson of the MNA bargaining unit at BVNA, "but we stuck together, which is what this bargaining unit is known for doing, and we made good things happen—things that will benefit both the RNs and patients of the BVNA."

Heading into negotiations the BVNA had lost 37 percent of its nursing staff during

a period of just a few short years, and the nurses' pay rates were 20 to 30 percent less than other VNAs.

"The acuity level of the patients we see is extremely high," explained Alden. "primarily because patients are now forced out of the hospital before they are ready to go home. As a result, our working conditions and patient assignments have continually become more extensive, involved and challenging—so retaining qualified and dedicated RNs has been very important to our bargaining unit as a result. Unfortunately the conditions we'd been operating under made that level of retention difficult to achieve. But, without doubt, that scenario will change with this new contract."

Highlights of settlement include:

- Fully retroactive pay increases for all members of the bargaining unit.
- Top pay for nurses paid on an hourly basis will be \$33.47 by June 1, 2007

- Top pay for nurses paid on a per visit basis will be \$42.48 by June 1, 2007.
- Vastly improved pension benefit which guarantees employer contribution of 2 to 4 percent for nurses and includes an employer match of 25 percent of employee contributions, for a total match of up to 1 percent of employee contribution of 4 percent.
- Introduction of new \$300 annual certification differential.
- Tuition reimbursement available to all nurses regardless of whether they are paid hourly or on a per visit basis.
- Eight RNs will be allowed to switch their method of payment (hourly or per visit) in October 2006.
- The procedure for scheduling nurses to work on holidays that fall on weekends is clearly defined. ■

West Springfield School Nurses

West Springfield School Nurses continue to be in mediation.

Providence Hospital

Providence Hospital has begun planning for its upcoming negotiations.

VNA & Hospice of Cooley Dickinson

VNA & Hospice of Cooley Dickinson Inc. continues to have very successful membership meetings and has put out its first newsletter. The Hospice nurses continue to struggle with unreasonable scheduling by management and have received full support from colleagues and their non-union team members.

Mercy Hospital

Nurses ratified their contract and also updated its bylaws. Several grievances have been filed recently. ■

Profiles of candidates for MNA office

Vice President, Labor

Donna Kelly-Williams, RN, CPN

Arlington

Employment: Pediatric Clinical Nurse III, Cambridge Hospital

Education: AD/RN, Lasell College, 1978; Certificate, UMass Boston, union administration and management theory, 2006; currently enrolled in labor studies, UMass Boston.

Present offices: MNA Vice President, MNA Region 5 Board of Directors, Nurse Plan (MNA PAC) Board, MNA Finance Committee, Cambridge Hospital MNA President, MNA Convention Committee

Past offices: MNA Board of Directors, Congress on Health Policy

Candidate statement: As a registered nurse specializing in pediatrics, I am humbled by the trust and confidence our patients have in our profession of nursing. We have a tremendous obligation to protect ourselves, our fellow nurses, and the patients entrusted to our care every day, and still, there has never been a better time to be a nurse. Over the past few years, MNA's struggle to have a limit to the number of patients a nurse would care for has brought recognition like never before for the nurses fight for all patients of the commonwealth, and their right for not only safe care, but also care for all. As vice president I will work closely with the president and the MNA Board of Directors as the MNA continues to provide an outreach to all of the collective bargaining units across the state, and give all nurses a voice in the direction of the MNA. Thank you.

Board of Directors

Region, Labor

Diane Michael, RN

Springfield

Region: 1

Employment: Providence Hospital

Education: Diploma, Children's Hospital School of Nursing, 1974

Present offices: MNA Board of Directors Region 1, Labor, BOD Region 1, Co-Chair Providence Hospital

Past offices: Co-Chair Providence Hospital

Mary Marengo, RN

Douglas

Region: 2

Stephanie Stevens, RN, CNOR

Region: 3

Employment: Jordan Hospital, staff nurse operating room

Education: Diploma, Boston City Hospital School of Nursing, 1971

Present offices: MNA Board of Directors, chairperson, board policy committee, BOD Regional Council 3, Jordan Hospital bargaining unit chairperson.

Ginny Ryan, RN

Ocean Bluff

Region: 5

Employment: Faulkner Hospital

Education: AD, liberal arts/ AD nursing, Massachusetts Bay Community College, 1985.

Director At-Large, General

Rosemary O'Brien, RN

South Harwich

Employment: Retired

Education: RN, Catherine Laboure School of Nursing, 1960, Boston College, 1961-1965, UMass Boston 1986-1993.

Present offices: Board of Directors At-Large, Chair of Workplace Violence & Abuse Prevention Task Force, Convention Committee, PAC, Safe Patient Handling Task Force.

Past offices: Congress on Health & Safety, Unit 7 Rep

Candidate statement: After over 46 years as a staff nurse I retired a year ago from my position in the Department of Mental Retardation. The year has passed quickly as I have spent much of my time lobbying nurses' issues at the State House. The Unit 7 contract and, of course, the nurse-patient ratio bill have been top priorities. As a member of the Board of Directors I am able to work closely with MNA leadership to attain what I hope will someday mean that all nurses work in a safe environment not only for themselves but for their patients. My efforts on the Work Place Violence Task Force and the Safe Patient Handling Task Force are both examples of the work I would like to continue to pursue. I humbly ask for your vote so I can continue to do work that is needed for you and your profession.

Helen T. Gillam, RN, BS, MEd-CRRN

Plymouth

Employment: Highpoint Treatment Center,

nurse educator

Education: Diploma, St. Elizabeth Hospital; BS, Boston College School of Nursing; MEd, Boston State College.

Present offices: Board of Directors

Past offices: Bargaining/Union Dev-Pembroke Hospital.

Sharon McCollum, RN, BSN

Dorchester

Employment: Retired, Commonwealth of Mass Unit 7

Education: BSN, University of Vermont, 1974; Currently enrolled, Andover Newton Theological School.

Present offices: MNA Board of Directors, Diversity Committee Chairperson.

Past offices: MNA Board of Directors, Labor Seat 2001-2003.

Catherine Evlog, RN

Saugus

Employment: Retired

Education: SRN, Walton Hospital, England, 1962; BSN, Salem State College, 1965; MSN/NP Boston University, 1987; PhD, Kennedy University, 2002.

Present offices: President Region 4

Past offices: Local chair, Soldiers' Home, Unit 7 Executive Board, Director of Nursing, Board of Director, District 4

Marilyn Crawford, RN.C

North Dighton

Employment: Taunton State Hospital

Education: Diploma, Union Hospital School of Nursing, 1972; BSHCA, St. Joseph's College, Maine, 2001.

Present offices: Congress Health Policy & Legislation, Safe Patient Handling Task Force, Emergency Preparedness Task Force.

Director At Large, Labor

Judith M. Smith-Goguen, RN, BSN

Boylston

Employment: UMass Memorial Medical Center, University Campus

Education: RN, AD, Quinsigamond Community College, 1982; BSN, Worcester State College, 1987

Present offices: Unit Rep (P.T.C), MNA University Campus; Treasurer, MNA; University Campus contract negotiation team member; MNA University Campus safety committee member; MNA University Campus violence prevention committee member and Supplemental time Donation Program Chairperson, Central Mass Labor Council-Vice President, MNA Director At-Large, Labor.

Past offices: Unit Rep. (P.T.C) since 1999, MNA Univ. Campus Contract Negotiation Team member, MNA Univ. Campus Safety Committee member, Central Mass Labor Council vice President (four years)

Nancy Gilman, RN

Chestnut Hill

Employment: New England Medical Center

Education: ADN, Milwaukee Area Tech College, 1975.

Present offices: Board of Directors (Region 5) 2002-2006; Co-chair NEMC Bargaining Unit 2002-2006; NEMC Bargaining Unit Committee 1998-2006; Region 5 Board of Directors 2004-06.

Candidate statement: I have been a critical

care staff nurse for over 20 years. As bedside nurses, we carry a huge amount of professional responsibility, but unfortunately not enough influence in our work places. I believe that working together in our workplaces and throughout the state we can have a huge influence on improving working conditions, professional issues, and care of our patients. As an active member of my local bargaining team, I have seen the power that a union contract can have in providing staff nurses with a voice in our professional life. I am running for a seat on the MNA state board because I think MNA is the best voice for nursing in Massachusetts and it is a true advocate for the staff RN. My goals will be to bring more of us in as active members, to improve our influence within the health care community in Massachusetts, to organize other nurses within our state, and to strengthen our current bargaining units. I am particularly interested in bringing younger newer nurses into MNA. I think through MNA, we have a real voice in our workplaces, the future of nursing and in building a better health care system. I would like to work with you to make MNA the organization that speaks for all of us. I ask for your vote and your active participation in making MNA a strong union.

Bylaws Committee

Susan Mulcahy

Shrewsbury

Region: 2

Employment: UMass Memorial

Education: Diploma, Worcester Hahnemann Hospital, 1970.

Present offices: UMMC, Treasurer, Central Mass Labor Council, VP, Board of Directors, Region 2

Congress on Health And Safety

Elizabeth A. O'Connor

Milton

Employment: Brigham & Women's Hospital

Education: BSN, Fitchburg State College, 1976

Present offices: Congress Health & Safety member, Region 5 Board of Directors.

Past offices: Congress Health & Safety member, Region 5 Board of Directors.

Terri Arthur, RN,BS,MS

East Falmouth, MA

Education: MSN, Lesley College; BS, Bob Jones University; RN Diploma, Greenville General Hospital School of Nursing.

Present offices: Congress Health & Safety, Committee Continued Ed, Committee to Develop On-line CE for MNA, Committee Health & Safety Language for Bargaining Unit Contracts.

Mary Bellistri, RN, BS

Norwell

Employment: Boston Medical Center

Education: Diploma, Boston City Hospital School of Nursing, 1973; BS, Suffolk University, 1981

Present offices: Member Workplace Violence-Abuse Prevention Task Force, Member Boston Medical Center Negotiating Team.

Past offices: Member Congress on Health & Safety.

Regional council final ballot 2006

Region 1 (4 for 2 years)

Irene Patch
Gail S. Bean
Christine Folsom
Sandra Hottin

Region 2 (4 for 2 years)

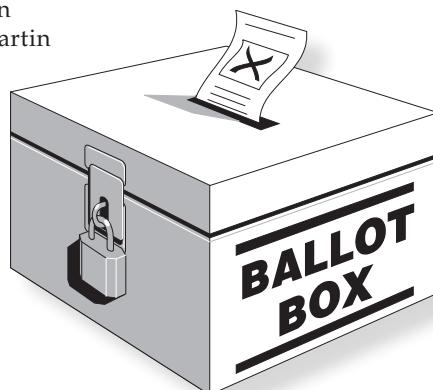
Peggy Kilroy
Ann-Marie Mrozinski
Joanne R. Wenhold

Region 3 (4 for 2 years)

Judith V. Gross
Mary Wignall
Catherine Evlog

Region 4 (4 for 2 years)

Daniel Rec
James G. Moura
Ann Marie McDonagh
Sandy Eaton
Deborah Martin



MNA 2006 final ballot

Vice President, Labor*

1 for 2 years

Donna Kelly-Williams

Treasurer, Labor*

1 for 2 years

Director, Labor*

5 for 2 years (one per Region)

Region 1

Diane Michael

Region 2

Mary Marengo

Region 3

Stephanie Stevens

Region 4

Region 5

Ginny Ryan

Director At-Large, General

4 for 2 years

Sharon McCollum

Marilyn Crawford

Rosemary O'Brien

Helen Gillam

Catherine Evlog

Director At-Large, Labor

3 for 2 years.

Judith M. Smith-Goguen

Nancy Gilman

Nominations Committee

5 for 2 years (one per Region)

Region 1

Region 2

Region 3

Region 4

Region 5

Bylaws Committee

(5 for 2 years) (one per Region)

Region 1

Region 2

Susan Mulcahy

Region 3

Region 4

Region 5

Congress on Nursing Practice

(6 for 2 years)

Congress on Health Policy

(6 for 2 years)

Congress on Health and Safety

(6 for 2 years)

Elizabeth A. O'Connor

Mary Bellistri

Terri Arthur

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. ■

**Regional Council final ballot
is on preceding page**

Unit 7 Consent To Serve

Statewide Election – Unit 7 State Chapter Health Care Professionals
Consent to Serve for the Executive Board

I am interested in active participation in the State Chapter, Health Care Professionals.
If elected by the Unit 7 membership, I am willing to serve as (check one)*:

Officers

- Vice President
- Secretary

Directors

- Nursing (4 to be elected)
- Occupational Therapy
- Pharmacy
- Psychology
- Speech/Language Pathology & Audiology

**All Unit 7 members are eligible to run for vice president or secretary. Only members of each discipline may serve as a director representing that discipline. All terms are for two years.*

Please type or print — Do not abbreviate

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Length of time in Unit 7: _____ years

Present Employment Dept. DMH DPH DMR Other (specify): _____

Work Site _____ Title _____

Present Offices/Association Activities/Local Unit Activities

Past Offices/Association Activities/Local Unit Activities (Past 5 years only.)

Signature of Member

Date

Return Deadline: Sept. 1, 2006

Return to: MNA, Unit 7, State Chapter Nominating Committee,
340 Turnpike Street, Canton, MA 02021



Donations Needed for MNE Annual Auction!

We Need Your Help: The Massachusetts Nurses Foundation is preparing for the annual golf tournament that is scheduled for June 2006, as well as its annual silent and voice auction to be held during the MNA's 2006 convention.

Donations are needed to make these fundraising events a big success. Your *tax-deductible* donation helps the Foundation raise funds to support nursing scholarships and research.

- ✓ Valuable Personal Items
- ✓ Gift Certificates
- ✓ Works of Art
- ✓ Craft Items
- ✓ Memorabilia & Collectibles
- ✓ Vacation Packages
- ✓ Gift Baskets

Your support is appreciated

Jeannine Williams
MNF President

Patricia Healey
MNF Secretary

Contact the MNF at 781-830-5745 to obtain an auction donor form or simply mail or deliver your donation to: MNF, 340 Turnpike Street, Canton, MA 02021



MNA

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?

CALL THE MNA PEER ASSISTANCE PROGRAM

ALL INFORMATION IS CONFIDENTIAL
781-821-4625, EXT. 755
OR 800-882-2056 (IN MASS ONLY)
WWW.PEERASSISTANCE.COM

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. Contact: Donna White, 617-469-0300, x305. Meets: Wednesdays, 7:30–8:30 p.m.
- McLean Hospital, DeMarmeffe Building, Room 116. Contact: LeRoy Kelly, 508-881-3192. Meets: Thursdays, 5:30–6:30 p.m.
- Peer Group Therapy, 1354 Hancock Street, Suite 209, Quincy. Contact: Terri O'Brien, 781-964-9546. Meets: Wednesdays, 5:15 p.m. & coed at 6:30 p.m.
- Caritas Good Samaritan Medical Center, Community Conference Room, 235 N. Pearl St., Brockton. Contact: Eleanor O'Flaherty, 508-559-8897.

Meets: Fridays, 6:30-7:30 p.m.

- Health Care Professional Support Group, Caritas Norwood Hospital, Norwood. Contact: Jacqueline Sitte, 781-341-2100. Meets: 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. Meets: Mondays, 6–7 p.m.
- Health Care Support Group, UMass School of Medicine, Room 123, Worcester. Contact: Emory, 508-429-9433. Meets: Saturdays, 11 a.m.–noon.

Northern Massachusetts

- Baldpate Hospital, Bungalow 1, Baldpate Road, Georgetown. Facilitator: Teri Gouin, 978-352-2131, x15. Meets: Tuesdays, 5–6 p.m.
- Nurses Recovery Group, Beverly Hospital, 1st Floor, Beverly. Contact: Jacqueline Lyons, 978-697-2733. Meets: Mondays, 6–7 p.m.

- Partnership Recovery Services, 121 Myrtle Street, Melrose. Contact: Jay O'Neil, 781-979-0262. Meets: Sundays 6:30–7:30 p.m.

Western Massachusetts

- Professionals in Recovery, Baystate VNAH/EAP Building, Room 135, 50 Maple St., Springfield. Contact: 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. Meets: Wednesdays, 7–8 p.m.

Southern Massachusetts

- Professionals Support Group, 76 W. Main St., Suite 306, Hyannis. Contact: Kathy Hoyt, 508-790-1944. Meets: Mondays, 5–6 p.m.
- PRN Group, Pembroke Hospital, 199 Oak Street, Staff Dining Room, Pembroke. Contact: Sharon Day, 508-375-6227. Meets: Tuesdays, 6:30–8 p.m.

- Substance Abuse Support Group, St. Luke's Hospital, New Bedford, 88 Faunce Corner Road. Contact: Michelle, 508-947-5351. Meets: Thursdays, 7–8:30 p.m.

Other Areas

- Maguire Road Group, for those employed at private health care systems. Contact: John William, 508-834-7036 Meets: Mondays.
- Nurses for Nurses Group, Hartford, Conn. Contacts: Joan, 203-623-3261, Debbie, 203-871-906, Rick, 203-237-1199. Meets: Thursdays, 7–8:30 p.m.
- Nurses Peer Support Group, Ray Conference Center, 345 Blackstone Blvd., Providence, R.I. Contact: Sharon Goldstein, 800-445-1195. Meets: Wednesdays, 6:30–7:30 p.m.
- Nurses Recovery Group, VA Hospital, 5th Floor Lounge, Manchester, N.H. Contacts: Diede M., 603-647-8852, Sandy, 603-666-6482. Meets: Tuesdays, 7–8:30 p.m. ■

MNA Member Discounts Save You Money

Personal & Financial Services

PROFESSIONAL LIABILITY INSURANCE

NURSES SERVICE ORGANIZATION 800-247-1500 (8:00 A.M. TO 6:00 P.M.)
Leading provider of professional liability insurance for nursing professionals with over 800,000 health care professionals insured.

CREDIT CARD PROGRAM

MBNA 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

ISI NEW ENGLAND INSURANCE SPECIALIST LLC 800-959-9931 OR 617-242-0909
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 discounts off mortgage applications for home purchase, refinance and debt consolidation loans. Inquire into no points/no closing costs programs and reduced documentation programs. Receive free mortgage pre-approvals.

TAX REVIEW SERVICE

MERRIAM TAX RECOVERY 508-340-0240
Experts in recovering overpaid taxes.

LIFE & ESTATE PLANNING

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

Products & Services

AUTO/HOMEOWNERS INSURANCE

COLONIAL INSURANCE SERVICES, INC..... 800-571-7773 OR 508-339-3047
MNA member discount is available for all household members. No service charges when choosing convenient EFT payment plan. Prices competitive with AAA. For a no obligation quote visit www.colonialinsuranceservices.com.

CELLULAR TELEPHONE SERVICE

CINGULAR WIRELESS 617-449-8241
T-MOBILE 781-888-0021
Get more of the wireless products and services that keep mobile professionals connected. T-Mobile is offering MNA members and their families a free phone with activation, free nationwide long distance and roaming and free nights and weekends (on specific plans). International rates also available. No activation fee is required for members.

VERIZON WIRELESS..... 617-571-4626
Receive an 8 percent discount on plans priced \$34.99 and above! Receive a free Motorola V60s on any new purchase or upgrade.

NEXTEL COMMUNICATIONS, DON LYNCH..... 617-839-6684
As a member of MNA you and your family can enjoy free incoming call plans and Direct Connect. Call Mark, Patty or Don or visit their Web site at www.nextel.com/massnurses.

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.

JEFFY LUBE DISCOUNT

MNA DIVISION OF MEMBERSHIP 800-882-2056, x726
Obtain an MNA discount card to receive 15% discount on automobile products & services.

CONSUMER REFERRAL SERVICE

MASS BUYING POWER..... 866-271-2196
Mass Buying Power is a no-cost, no-obligation benefit offered to MNA members. Before you make your next purchase visit www.massbuy.com for any new products and services. Log in as a group member (sign-in name: MBP, password, MBP)

DISCOUNT PRODUCTS BY MEMBER ADVANTAGE

MEMBER ADVANTAGE..... 781-828-4555 OR 800-232-0872
Discount prices on a broad range of products. Nationwide shipping or local pickup available. Register at mnadiscountproducts.com (member ID: 391321040).

OIL BUYING NETWORK DISCOUNT

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

WRENTHAM VILLAGE PREMIUM OUTLETS

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

SIGHT CARE VISION SAVINGS PLAN

MNA DIVISION OF MEMBERSHIP 800-882-2056, x726
Obtain your Sight Care ID card to receive discounts on eye exams, eyeglasses & contact lenses at Cambridge Eye Doctors or Vision World locations.

HEALTH CARE APPAREL

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

BROOKS BROTHERS DISCOUNT

Enroll online to receive 15% discount at Brooks Brothers, Adrienne Vittadini and Carolee. Visit <http://membership.brooksbrothers.com>. (ID=87400, PIN=97838)

Travel & Leisure

NEW AVIS RENTAL CARE DISCOUNT

AVIS 1-800-331-1212
Discounts can be used for both personal and business travel. For full benefits, the Avis Worldwide Discount (AWD) number must be given to the reservation agent: Q282414. Visit www.zvis.com to set up your own personal profile or for more information.

HERTZ CAR RENTAL DISCOUNT

HERTZ..... 800-654-2200
MNA members discounts range from 5 – 20% mention MNA discount CDP#1281147.

DISCOUNT MOVIE PASSES

MNA DIVISION OF MEMBERSHIP 800-882-2056, x726
Showcase Cinemas/National Amusements, \$7. AMC Theatres, \$5.50. Regal Cinemas (not valid first 12 days of new release), \$6. Call to order by phone with Mastercard or Visa.

DISCOUNT HOTEL & TRAVEL PRIVILEGES

CHOICE HOTELS INTERNATIONAL (SOS PROGRAM)..... 800-258-2847
20% discount on participating Comfort, Quality, Clarion, Sleep, Econo Lodge, Rodeway & MainStay Suites, Inns & Hotels. Advanced reservations required mention SOS Program #00801502. Membership in Guest Privileges Frequent Traveler Program.

NEW DISNEY DISCOUNT

Members can now take advantage of discounted tickets to Walt Disney World and Disneyland along with other Florida attractions. Begin saving by calling 800-331-6483 or check out the discounts on our Web site at www.massnurses.org.

ANHEUSER-BUSCH ADVENTURE PARKS DISCOUNT

MNA DIVISION OF MEMBERSHIP 800-882-2056, x726
Obtain Adventure Card to receive discount admission to Busch Gardens, Sea World, Sesame Place, Water Country USA & Adventure Island in Tampa, Fla.

UNIVERSAL STUDIOS FAN CLUB

Log onto the MNA Web site at www.massnurses.org and click on the Universal Studios Link to obtain special discount prices.

WORKING ADVANTAGE

Members now have access to discounts for movie tickets, movie rentals, theme parks, ski tickets, Broadway shows, and much more. Register today at www.workingadvantage.com (member ID available by calling 781-830-5726).

SIX FLAGS NEW ENGLAND

MNA DIVISION OF MEMBERSHIP 800-882-2056, x726
Purchase discount admission tickets for \$30 per person (seasonal).

**For more information, contact the representative listed or call member discounts at the MNA, 800-882-2056, x726.
All discounts are subject to change.**

MNA CONTINUING EDUCATION COURSES

Fall 2006 Courses

Post Traumatic Stress Disorder – Nursing Implications

Description This program will address the characteristic signs, symptoms, therapeutic approaches and nursing management of patients experiencing post traumatic stress disorder. Considerations relative to traumatic events throughout the life span and cultural barriers will be included.

Speakers Ronald Nardi, MSN, APRN
Carol Dacey, BSN, RNC
Kim Choi, BSN, RN

Date Sept. 14, 2006

Time 5:30 – 9 p.m. (light supper provided)

Place MNA Headquarters, Canton

Fee MNA Members Free; Others \$95.

Contact Hours* 3.6

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

Basic Dysrhythmia Interpretation

Description  This course is designed for registered nurses in acute, sub-acute and long-term care settings to learn cardiac monitoring and dysrhythmia interpretation. Implications and clinical management of cardiac dysrhythmias will also be discussed. Course will include a text book and require study between sessions one and two.

Speaker Carol Mallia, RN, MSN

Dates Sept. 19, 2006 – Part 1

Sept. 26, 2006 – Part 2

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

Place MNA Headquarters, Canton

Fee MNA Members Free; Others \$125

Contact Hours* 9.0

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

Anatomy of a Legal Nurse Consultant

Description  This program, co-provided by MNA and the Southern New England Chapter, AALNC, will introduce the nurse to the scope of practice of the legal nurse consultant. The history and evolution of this important role, its multifaceted components, including practice environments, litigation process, case evaluation for compliance with standards of nursing/healthcare practice, nurse expert witness role, risk management and other important considerations will be described. Professional certification also will be addressed.

Speakers Legal nurse consultants

Date Sept. 28, 2006

Time 5:30 – 8:30 p.m. (light supper provided)

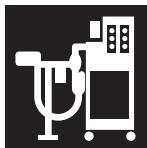
Place MNA Headquarters, Canton

Fee MNA & AALNC members, \$65; others, \$95

Contact Hours* Will be provided.

MNA Contact Liz Chmielinski, 781-830-5719 or 800-882-2056, x719

Advanced Cardiac Life Support Certification and Recertification

Description  This American Heart Association course will provide information on the clinical management of cardiac and respiratory emergencies through case study approach. Course content includes assessment, arrhythmia recognition, intubation, defibrillation and pharmacological interventions. This is a two day certification and a one day recertification course. Recertification candidates must present a copy of their current ACLS card at the time of registration.

Speaker Carol Mallia, RN, MSN and other instructors for the clinical sessions

Date Oct. 11, 2006 and Oct. 18, 2006 (Certification)

Oct. 18, 2006 (Recertification)

Time 9 a.m. – 5p.m. (light lunch provided)

Place MNA Headquarters, Canton

Fee Certification: MNA members Free; Others \$195

Recertification: MNA members Free; Others \$165

Contact Hours* Will be provided.

MNA Contact Liz Chmielinski, 781-830-5719 or 800-882-2056, x719

Diabetes 2006: What Nurses Need to Know

Description  This program will discuss the pathophysiology and classification of Diabetes, Types 1 and 2. Nursing implications of blood glucose monitoring and non-pharmacological interventions such as exercise and meal planning will be addressed. Oral pharmacological agents and a comprehensive update on insulin therapy will be presented. The nursing management of the newly diagnosed diabetic patient, both complicated and not, will be explored. Nursing management of the diabetic patient in

the pre/post operative, ambulatory care, home care and school setting will be discussed.

Speaker Ann Miller, MS, RN, CS, CDE

Date Oct. 19, 2006

Time 8:30 a.m. – 4 p.m. (light lunch provided)

Place MNA Headquarters, Canton

Fee MNA Members Free; Others \$150

Contact Hours* 7.2

MNA Contact Liz Chmielinski, 781-830-5719 or 800-882-2056, x719

Oncology for Nurses

Description  This program will increase knowledge in oncology nursing. The content will include an overview of cancer management, tumor physiology and staging, relevant laboratory testing and treatment strategies and safe handling of neoplastic agents. Chemotherapy administration, classification of chemotherapeutic agents, management of toxicities and adverse effects of treatments and oncological emergencies will be discussed. The program will conclude with pain and symptom management, palliative care and an overview of Hospice care. (Class size limited to 25 participants).

Speaker Marylou Gregory-Lee, MSN, RN, NP, Adult Nurse Practitioner

Date Nov. 1, 2006

Time 8:30 a.m. – 4 p.m. (light lunch provided)

Place MNA Headquarters, Canton

Fee MNA Members Free; Others \$150

Contact Hours* 7.2

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

Critical and Emerging Infectious Diseases

Description  This program is designed to provide nurses with current information regarding critical infectious diseases, e.g. HIV/AIDS, Tuberculosis, Hepatitis, MRSA and emerging infectious diseases, e.g. Avian flu, Marburg virus, SARS, EBOLA, BSE and other diseases. The morning session will address specific diseases, their epidemiology, signs/symptoms, treatment and prevention. The afternoon session will address protecting nurses and others from disease exposure through the use of environmental and work-practice controls, as well as personal protective equipment.

Speakers TBA

Date Nov. 3, 2006

Time 8:30 a.m. - 4 p.m.

Place MNA Headquarters, Canton

Fee MNA Members Free; Others \$150

Contact Hours* Will be provided.

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

Addictions in Nursing: A Profession at Risk

Description  Participants will learn to recognize the characteristics of nurses at risk for substance abuse and substance dependence and identify occupational risk factors and occupational signs of substance abuse. Important considerations in assisting colleagues with substance abuse problems and resources available to them will be addressed.

Speaker Donna White, RN, PhD, CADAC-II

Date Nov. 14, 2006

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

Place MNA Headquarters, Canton

Fee MNA Members Free; Others \$65

Contact Hours* Will be provided.

MNA Contact Liz Chmielinski, 781-830-5719 or 800-882-2056, x719

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 Carol Mallia, RN, MSN

Date Nov. 28, 2006

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

Place MNA Headquarters, Canton

Fee MNA Members Free; Others \$65

Contact Hours* 4.4

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

Cardiac and Pulmonary Pharmacology

Description This program will provide nurses, from all clinical practice settings, with a better understanding of how cardiac and pulmonary medications work. Actions, indications, and nursing considerations will be discussed for the major categories of cardiac and pulmonary medications.



Speaker Carol Mallia, RN, MSN

Date Dec. 5, 2006

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

Place MNA Headquarters, Canton

Fee MNA Members Free; Others \$65

Contact Hours* 4.5

MNA Contact Liz Chmielinski, 781-830-5719 or 800-882-2056, x719

Safe Patient Handling: Protect Your Patient and Your Back

Description This program will address many of the issues and concerns as well as the current possible solutions related to the age old and ongoing problem of safe patient handling in the field of nursing.

Speaker Christine Pontus, MS, RN, COHN-S/CCM

Date Jan. 12, 2007

Time 8:30 a.m. – 1 p.m.

Place MNA Headquarters, Canton

Fee MNA Members Free; Others \$125

Contact Hours Will be provided.

MNA Contact Susan Clish, 781-830-5723 or 800-882-2056, x723

CONTINUING ED 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 minus a 25% processing fee. 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 originally scheduled. Registration fees will be reimbursed for all cancelled programs.

***Contact Hours** Continuing education contact hours for all programs except "Advanced Cardiac Life Support" are provided by the

Massachusetts Nurses Association, which is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. Contact hours for "Advanced Cardiac Life Support" are provided by the Rhode Island State Nurses Association, which is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

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 session and
- 3) Complete and submit the evaluation

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: All CE programs run entirely by the MNA are free of charge to all MNA members. Pre-registration is required.

Free online courses!

NEW online Continuing Education programs on the MNA Web site

Current program topics include:

▶ **Fragrance Free! Creating a Safe Healthcare Environment**

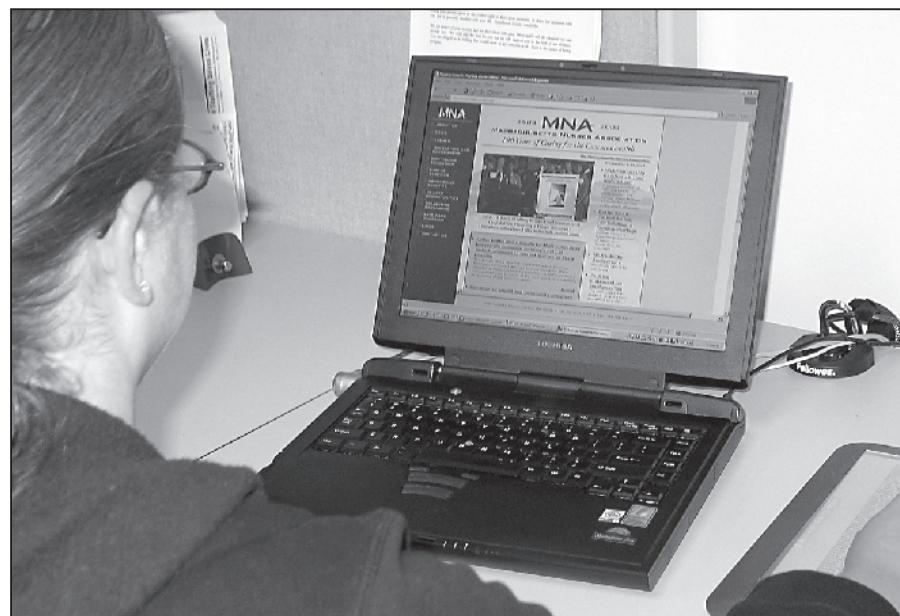
1.2 contact hours

The goal of this program is to ensure a therapeutic environment in which the patient and the nurse can interact, as well as to create a healthy workplace in which employees can practice.

▶ **Workplace Violence**

1.1 contact hours

The goal of this program is to provide nurses and others with an understanding of the extent and severity of workplace violence in the health care setting, the effects this violence has on nurses and other victims and learn to identify hazardous conditions that can be corrected to prevent violence.



Participating RNs and healthcare professionals have the option to either complete their studies in "one sitting" or over the course of several days and/or visits—whatever is most convenient.

Visit www.massnurses.org

Notice to members and non-members regarding MNA agency fee status

In private employment under the National Labor Relations Act

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

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

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

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

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

It shall be an unfair labor practice for an employer -

- (3) by discrimination in regard to hire or tenure of employment or any term or condition of employment to encourage or discourage membership in any labor organization: Provided, that nothing in this Act, or in any other statute of the United States, shall preclude an employer from making

an agreement with a labor organization ... to require as a condition of employment membership therein on or after the thirtieth day following the beginning of such employment or the effective date of such agreement, whichever is the later. If such labor organization is the representative of the employees as provided in Section 9(a), in the appropriate collective bargaining unit covered by such agreement when made...

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

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

1. When to object

Employees covered by an MNA union security clause will receive this notice of their rights annually in the Mass Nurse. If an employee wishes to object to MNA's designation of chargeable expenses, he or

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

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

MNA members are responsible for full membership dues and may not object under this procedure. MNA members who resign their membership after September 1 must object, if at all, within 30 days of the postmark or receipt by MNA of their individual resignation, whichever is earlier.

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

2. How to object

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

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

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

To be valid, objections must contain the following information:

- The objector's name
- The objector's address
- The name of the objector's employer
- The non-member's employee identification number

tification number

- Objections must also be signed by the objector

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

3. How to challenge MNA's accounting

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

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

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

MNA HOODED SWEATSHIRTS NOW ON SALE

Order Form

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

ITEM	SIZE	PRICE	QTY	TOTAL
Sweatshirt	Small	\$35.50		
Sweatshirt	Medium	\$35.50	SOLD OUT	
Sweatshirt	Large	\$35.50	SOLD OUT	
Sweatshirt	X-Large	\$35.50		
Sweatshirt	XX-Large	\$38.50	SOLD OUT	
Sweatshirt	XXX-Large	\$41.50		
Shipping & Handling (\$5.50 per item)				
GRAND TOTAL				

Payment

Check enclosed (Payable to MNA)

Please charge my Visa MasterCard American Express

Card Number _____

Expires (Mo/Yr) _____

Signature as shown on credit card _____

Return this form with payment to MNA, 340 Turnpike Street, Canton, MA 02021

New MNA hooded sweatshirts are now available.

Gray, hooded sweatshirts of cotton/poly blend are excellent quality and feature the MNA logo on the chest and across the back.



The MNA joins MITSS in providing support to nurses involved with an adverse medical event.

To Support Healing & Restore Hope

Program Mission/Philosophy

- We believe that nurses have a professional responsibility to support colleagues who have been affected by unexplained medical outcomes or adverse patient events.
- We believe that early support can lessen the emotional effects on the nurse clinician provider.
- Are you a nurse who has been impacted emotionally by an experience associated with an adverse medical outcome?
- Would you like to talk confidentially to a MITSS therapist?
- Would you like to join in a peer-led support group?
- Would you like to join or participate in a structured support group led by an experienced psychologist?

Medically Induced Trauma Support Services (MITSS), Inc. is a non-profit organization that supports, educates, trains, and offers assistance to individuals affected by medically induced trauma.

MITSS supports clinicians using the following resources:

- One-on-one interaction via phone
- Group sessions led by a professional facilitator
- Training for fellow survivors who would like to help others



Toll-Free Number: 888-36-MITSS
MNA Referral Line: 781-830-5770
www.mitss.org



MNA Baseball Caps



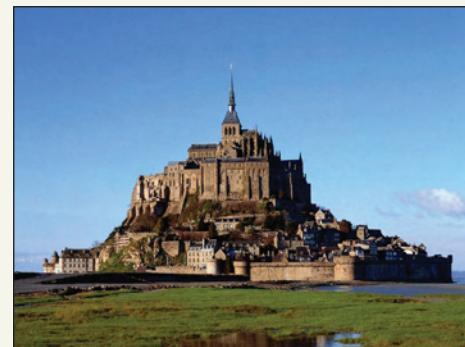
Adjustable baseball caps featuring the MNA logo are \$4.99 each, plus \$3.95 shipping and handling if mailed

To order, contact the MNA's Division of Membership, 781-830-5726, or send checks to: MNA Division of Membership, Attn: MNA baseball hats, 340 Turnpike Street, Canton, MA 02021.

Travel to Europe with MNA in 2007!

Paris & the French Countryside April 10-18, Price: TBA

Our Paris and the French countryside tour begins with three nights in Rouen, and will include two full days of sightseeing, including a day in Normandy and Bayeux to see the D-Day landing beaches, the American Cemetery and a stop to see Queen Matilda's famous Bayeux Tapestry. The next day, we'll visit the Mont St. Michel, the most famous abbey in the world. After a morning tour of Rouen, including a visit to the Cathedral of Notre Dame, and some free time for shopping and browsing; we are off to Paris for a four-night stay. Our first full day in Paris, features a panoramic sightseeing tour and the afternoon at leisure for museum visits. The next day, a morning tour to the Palace of Versailles with the afternoon again free in Paris for shopping and sightseeing. The following day features a Chateau Country tour to the Loire Valley where we will visit Blois and Amboise. We'll tour the Chateau de Chambord and Chateau de Chenonceau.



Sorrento, Italy May 25-June 2, \$1,899*

Join us on a tour of one of southern Italy's premier vacation resorts. This all-inclusive nine-day, seven-night trip includes air, transfers, hotel and all meals as well as guided tours. The tour will feature Sorrento, Naples, Pompeii, the Isle of Capri and Amalfi Drive. Visits to Positano; the Cathedral of St Andrew; the Museum of Correale; orange, lemon and olive groves; vineyards; and the Castel dell'Ovo in Naples will also be arranged. Offered as an all-inclusive trip, this package is a great value.



Costa Del Sol plus Madrid Second week in November, 2007 Price: TBA

This Spain tour will feature the first five nights in the beach resort of Torremolinos on Spain's Costa Del Sol with the last two evenings in Madrid. We will enjoy a sightseeing tour that includes Ronda, Grenada to see the Alhambra, Seville and Gibraltar. En route to Madrid, we'll visit Toledo, and while in Madrid, we'll have a panoramic city sightseeing tour, and visit to the Prado museum. The last afternoon will be free for individual sightseeing and shopping. This tour includes three meals daily except our last full day in Madrid where lunch is on your own while in the Costa Del Sol.



Florence, Venice & Rome Second week in November, 2007 Price: TBA

Join this wonderful nine-day/seven-night trip featuring Florence, Venice and Rome with tours included in each city as well as the beautiful Tuscan cities of Siena, San Gimignano and Assisi. The tour will include four nights in the beautiful Spa town of Montecatini. From there, day trips to Florence, Venice, Siena and San Gimignano will be arranged. The time in Rome will include a full-day sightseeing tour of the Coliseum, the Parthenon, the Spanish Steps, the Trevi Fountain, Vatican City and much more. This trip includes round-trip air from Boston and transfers to and from the hotel. Breakfast and dinner included, as well as one lunch.



Reserve Early Space is Limited

To receive more information and a flyer on these great vacations, contact Carol Mallia via email at cmallia@mnarn.org and provide your mailing address.

*Prices listed are per person, double occupancy based on check purchase. Applicable departure taxes are not included in the listed prices. Credit card purchase price is \$30 higher than the listed price.

Benefits Corner

New MNA member benefit

Blue Cross/Blue Shield of Massachusetts health insurance plans are now available by calling 1-800-422-3545, extension 65414 Susan O'Connell for information in regard to the plans, like HMOBasicBlue Direct, HMOBlueDirect and BlueHealthKids. You may also view a broad idea of costs across the state for the BCBSMA plans on the Mass.gov website for the Division of Insurance. You are eligible for coverage if:

- You are a resident of Massachusetts actually living in Massachusetts;
- You meet the plan's requirements regarding residence within the plan's approved service area;
- And you are not enrolled in Medicare or Medicaid. ■

MNA membership dues deductibility for 2005

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	\$28.50	5.0%

Congress on Nursing Practice to launch mentorship program

A mentorship program for MNA members will begin this fall. There will be two categories of programs: one for experienced nurses who want to become mentors and the other for nurses who want to be mentored.

The mentorship program was developed with three areas of concentration:

- **Labor:** which will provide entry involvement into union-based activities in the workplace
- **Career:** which will provide information on avenues for professional growth and advancement, including specialty areas, advanced education and certification
- **Organizing/legislative initiatives:** which will provide entry into legislative activities and/or statewide initiatives.

Mentors will need to attend a three-hour workshop focused on specific aspects of mentorship. Break-out sessions for the three categories of mentorship also will be featured.

Interested members should fill out the form below and return it to the MNA. For questions, call the Division of Nursing at 781-821-4625.

Application: MNA's Mentorship Program

Name _____

Address _____

E-mail address _____

Phone _____

Years of experience _____ Area of expertise _____

I want to be a mentor I am interested in being mentored

Preferred area of concentration: Labor Career Organizing/Legislative Initiatives

Return to:

MNA's Division of Nursing, 340 Turnpike Street, Canton, MA 02021

Nursing Skills, Legal Skills—

A Winning Career Combination



You have always thought about it... now do it!

When you combine your nursing degree with a legal education, you're opening new doors to opportunity—in hospital administration or in the practice of law where your medical knowledge can help people in new and different ways.

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Massachusetts School of Law at Andover

Auto • Home • Business • Life

Colonial Insurance Services, Inc.

Just for being a MNA member, you and all household members are entitled to savings on your Automobile Policies. This includes all household members, including Young Drivers!

Call Colonial Insurance Services today for a no-obligation cost comparison 1-800-571-7773 or check out our website at www.colonialinsuranceservices.com



Automobile Savings

Automobile discount of 6%. Convenient fee free EFT available.



Homeowners Policy

12% discount when we write your automobile. 3% renewal credit after 1 year the policy has been in effect.



THE MONEY CONFERENCE FOR WOMEN

A PROJECT OF STATE TREASURER TIMOTHY P. CAHILL

A FREE FINANCIAL PLANNING CONFERENCE

Saturday, Sept. 30

8 a.m.–2:30 p.m.

Marriott Hotel, Quincy

COMPLIMENTARY BREAKFAST & LUNCH

Free shuttle service from Quincy Adams MBTA station

All attendees receive a complimentary copy of

"Women & Money" by Dee Lee, CFP

- Do you know how to set up a budget?
- Are you in debt and want to get out?
- Are you thinking about buying a house?
- Do you need/want to take control over your financial situation?

Pre-Registration Required — Space Is Limited

617-367-6900 ext 613

lmartin@tre.state.ma.us

www.themoneyconference.com

INTRODUCING THE NEW MNA HOME MORTGAGE PROGRAM

A new MNA family benefit



As an MNA member, you and your family are entitled to receive free mortgage pre-approvals, and credit analysis.

MNA
MASSACHUSETTS NURSES ASSOCIATION

Reliant Mortgage Company is proud to introduce the **Massachusetts Nurses Association Home Mortgage Program**, a new MNA benefit that provides group discounts on all your home financing needs including:

- Purchases & Refinances
- Home Equity Loans
- Debt consolidation
- Home Improvement Loans
- No points/no closing costs
- Single & Multifamily Homes
- Second Homes
- Condos
- No money down
- Investment Properties

Group discounts: As the only MNA-endorsed mortgage lender, we provide qualified members and their families with low rates and group discounts. Take advantage of free mortgage pre-approvals, free credit analysis, and free review of purchase and sale agreements for homes financed through the program.

Expert advice: Whether you're a first-time or experienced homebuyer, choosing the right mortgage is important business. Reliant mortgage consultants are available to MNA members and their families to answer your questions, and walk you through the mortgage process.

We can advise you with options for refinancing your current mortgage to reduce your monthly payments, change the term of your loan, or put the equity in your house to work to consolidate debt or pay for home improvements. And if less than perfect credit (including bankruptcy or foreclosure) is a problem, ask us about practical "make-sense" underwriting. Whatever your needs, we're here to help. Give us a call at **877-662-6623**. It's toll free.

- \$275 Off Closing Costs
- 1/8 Point Discount off Points Incurred
- Free Pre-Approvals
- Low Rates & Discounts
- No Point/No Closing Cost Programs Available
- Also Available to Direct Family Members

CALL THE MNA ANSWER LINE FOR PROGRAM RATES AND DETAILS:

1.877.662.6623
1.877.MNA.MNA3



2006 MNA Convention

“Solidarity, Strength and Spirit”

October 4-6

Sturbridge Host Hotel and Conference Center



Featured Speakers



Elaine Bernard

Thursday Keynote Address

“Building Power for Nurses in the Workplace”
Elaine Bernard, Ph.D., Executive Director, Labor and Worklife Program, Harvard Law School

The challenges of organizational change for the transfunctional role of nursing staff and their leaders.



Helen Drinan

Thursday Plenary Address

“Standup, Speakout.”
Helen Drinan, Senior Vice President for Human Resources, Caritas Christi Health Care

Steps for effective utilization of human resources for impacting nurses’ working conditions and patient care.



Martha Jurchak

Friday Keynote Address

“From Quinlin to Schiavo: Do You Know Your Legal and Ethical Duties?”

Martha Jurchak, Ph.D., RN and the MNA Center for Ethics and Human Rights.



Regina Shearer

Friday Closing Plenary Address

“Nurses are Our Heroes in Healthcare”
Regina Shearer, Executive Director of Academic Administration, Rivier College, Nashua, N.H.

A joyful, spirited and inspirational presentation applauding nurses’ impact on healthcare.

Convention Schedule

Wednesday, October 4

9–9:30 a.m.	Registration, Continental Breakfast, Silent Auction
9:30 a.m.–Noon	General Labor Program
Noon–1:30 p.m.	Lunch, Live Auction, Silent Auction
1:30–3:30 p.m.	Program Breakouts (TBA)
5 p.m.	Silent Auction closes
6–7 p.m.	Registration for Awards Dinner, Publick House
7–10 p.m.	Awards Dinner—Publick House Historic Inn

Thursday, October 5

7–8:30 a.m.	Registration, Continental Breakfast, Exhibits, Silent Auction
8:30–10 a.m.	Keynote Address: “Building Power for Nurses in the Workplace.” Elaine Bernard, Ph.D., Executive Director, Labor and Worklife Program, Harvard Law School
10–10:30 a.m.	Coffee Break, Exhibits, Silent Auction
10:30 a.m.–Noon	Plenary Session: “Standup, Speakout.” Helen Drinan, Senior Vice President for Human Resources, Caritas Christi Health Care
Noon–2 p.m.	Lunch, Exhibits Open, Live Auction, Silent Auction
Noon–2 p.m.	Unit 7 Business Meeting/Lunch
1–2 p.m.	Region 5 Business Meeting
2 p.m.	Exhibits and Silent Auction Close Mass. Nurses PAC/MNA Business Meeting
6–7 p.m.	MNA Reception
8 p.m.	Mass. Nurses PAC Fundraising Dinner. <i>Join us for an evening of comedy and music.</i>

Friday, October 6

7:30–8:30 a.m.	Registration, Continental Breakfast, Silent Auction
8:30–10:00 a.m.	Keynote Address: From Quinlin to Schiavo: Do You Know your Legal and Ethical Duties? Martha Jurchak, Ph.D., RN, and the MNA Center for Ethics and Human Rights.
10–10:30 a.m.	Break, Silent Auction pick-up
10:30 a.m.–Noon	Closing Plenary Address: “Nurses are Our Heroes in Healthcare.” Regina Shearer, Executive Director of Academic Administration, Rivier College, Nashua, N.H.

For Registration Forms and Complete Details,
www.massnurses.org