

Minnesota Nursing **ACCENT**



FEATURE NEWS: **Legislative Wrap-Up** Page 2

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Legislative Wrap-Up 2015



Lawmakers listen to nurses - pass healthcare workplace violence prevention

MNA members saw some major victories in the 2015 Legislative Session, including passage of a measure designed to increase workplace safety for healthcare workers.

Nurses were tireless advocates for workplace violence prevention, safe patient care, and other critical nurse and union issues throughout the session.

MNA members traveled to the Capitol, made phone calls, sent emails, and testified at legislative hearings to make their voices heard – and it worked. MNA's top issues made significant progress in the session, thanks in large part to member involvement. Here's a rundown:

Violence against healthcare workers prevention

Nurses appreciate legislators for taking steps to prevent violence against workers in hospitals following a dramatic attack on staff at St. John's Hospital in Maplewood last November.

Under the new law, hospitals will be required to create and implement violence prevention plans.

MNA worked with Maplewood police to fight for a bill that includes law enforcement in the planning and reporting process. Facilities must share their plans with law enforcement and report incidents to them as well. The bill also requires hospitals to provide training to all healthcare personnel on de-escalation and violence prevention.

MNA nurses fought hard for this bill, and the Minnesota Hospital Association originally opposed it.

While MNA doesn't wish to see hospitals penalized for incidents that happen inside facilities, the bill still lacks public reporting of incidents, which could help researchers develop programs to prevent future attacks on healthcare workers.

Nurses will continue to monitor for incidents and ensure that hospitals keep up with plans and training in the future.

Safe Patient Standard

The Safe Patient Standard initiative saw progress in the 2015 session. The House Health and Human Services Finance Committee heard powerful testimony from nurses about the need for legislation to ensure patient safety at an April informational hearing.

MNA members shared their experiences of repeated situations where they had too many patients to care for at one time, risking the safety and health of the people in their care.

Legislators were so moved by the testimony that they went more than an hour over their allotted time asking questions and discussing the issue.

We're looking forward to further advocacy in the 2016 Legislative Session.

MinnesotaCare

MNA was part of a coalition opposing the elimination of MinnesotaCare, the healthcare program for Minnesotans who do not have access to affordable coverage. The coalition fought off a proposal to repeal MinnesotaCare, which had been included in the House budget.

However, legislators added a provision imposing higher premiums and out-of-

Minnesota Nursing Accent

Minnesota Nurses Association
345 Randolph Avenue, Ste. 200
Saint Paul, MN 55102
651-414-2800/800-536-4662
Summer 2015

PUBLISHER
Rose Roach

MANAGING EDITORS
Barb Brady
Chris Reinke

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Office Hours:

Monday-Friday 8:15 a.m. - 4:30 p.m.

Subscriptions

Published:

March, June, September, December

Opinions

All opinions submitted are subject to the approval of the publisher, who reserves the right to refuse any advertising content which does not meet standards of acceptance of the Minnesota Nurses Association.

Minnesota Nursing Accent
(ISSN 0026-5586) is published four times annually by the

Minnesota Nurses Association

345 Randolph Avenue, Ste. 200,

Saint Paul, MN 55102.

Periodicals Postage paid at

Saint Paul, MN and additional mailing offices. Postmaster, please send address changes to:

Minnesota Nurses Association

345 Randolph Avenue, Suite 200

Saint Paul, MN 55102.



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EXECUTIVE DIRECTOR'S COLUMN

The power of standing together

by Rose Roach, MNA Executive Director



Since becoming MNA's Executive Director last fall, I have met hundreds of wonderful members on picket lines, at the Capitol, in hospitals and facilities, and at various MNA events.

What an outstanding group of dedicated professionals! Your commitment to your patients, the nursing profession, and your communities is amazing.

MNA has a long and proud history. We have been at the forefront of nearly every major social movement over our rich 110-year history, including public health, women's rights, and civil rights. We are recognized leaders in healthcare, social and economic justice; and as a strong, effective union.

Unfortunately there's no time to rest on our accomplishments. We must keep fighting. We must continue our leadership role in the face of some critical challenges for MNA members and the labor movement as a whole.

Unions are under attack as never before. Wisconsin – right next door – is a frightening example of what could happen to Minnesota and other states across the nation.

First, public unions were attacked and undermined by Act 10, pushed by Gov. Scott Walker and his anti-union supporters.

Private unions were next, when Wisconsin's Legislature passed a Right to Work bill earlier this year. The Right to Work (for less) law affects MNA members in Wisconsin who work at private hospitals and nursing homes in River Falls, Hudson, and Superior.

Of course, MNA is standing with our members as we navigate this new assault on working families. Right to Work is a vicious attack based on lies.

We know from experience in other states that Right to Work decreases workers' livelihoods. Workers in Right-to-Work states have lower wages, health insurance benefits, and retirement benefits.

Right to Work harms local economies: Workers with less disposable income make fewer purchases, creating a vicious death spiral for the economic security of their community.

In addition, every \$1 million in wage cuts translates into an additional six jobs lost in the economy.

How in the world can people justify this law? It is shameful.

The only way to fight these attacks is for us to be united in purpose and action.

We won't be able to take on the corporatization and the deskilling of the nursing profession unless we stand together – all 20,000 MNA members standing with 180,000 NNU and other union members throughout Minnesota, Iowa, Wisconsin, and the U.S.

That's what unions are all about – a collective voice of the workers having a say in their terms and conditions of employment. Never forget, the union is YOU.

This cartoon says it all: we stand on each others' shoulders and lift everyone up. It's the only way we can fight the corporations trying to destroy us.

MNA leaders, members and staff must be stronger, more bonded together than ever before as we move into 2016, when there not only will be state and national elections, but more than half of MNA hospitals will bargain their contracts.

You can expect a tough fight on all fronts next year.

Let's get ready now. Let's talk to each other about the benefit of having a legally binding contract protect our rights, the power and strength we have in each other, and the value of standing together as we take on the corporate power structure that seeks to dehumanize the nursing profession.



A large, stylized handwritten signature, likely of Rose Roach, the MNA Executive Director.

"I am opposed to 'right to work' legislation because it does nothing for working people, but instead gives employers the right to exploit labor."
– Eleanor Roosevelt

PRESIDENT'S COLUMN

Happy Birthday Medicare

by Linda Hamilton, RN, BSN

What? Why do we celebrate the 50th birthday of Medicare? The answer I use is: because that is what nurses do.

Minnesota nurses have a rich history of promoting the health and safety of our patients and our communities. Did you know that MNA members were early leaders in the fight for women's rights, civil rights, and equal access to healthcare for all, including passage of MinnesotaCare?

In 1958, MNA members at the American Nurses Association House of Delegates were crucial in the passage of a resolution supporting "health insurance for disabled, retired and aged" – setting nurses' unwavering support for what would become Medicare.

The same militant leaders with a vision of eliminating the sickness, disease, and despair of poverty, sexism, and racism fought for Social Security and Medicare. Did you know that Teddy Roosevelt, Franklin Roosevelt, Harry Truman, and John Kennedy tried to enact a government-run healthcare system?

When President Lyndon Johnson took office, he said he wanted to create a society that cares for its citizens. There was not the public or legislative will to enact a government health plan for all, so they decided to move in steps.

First, Medicare would serve the elderly, with plans to add people with disabilities, those requiring dialysis, and others later.

A 1964 study showed that 75 percent of adults under 65 had hospital insurance from their employers, while only half of American seniors had hospital insurance. At the time, more than one in three elderly Americans were poor.

Since Medicare and Social Security went into effect, about 97 percent of the elderly have insurance coverage and their poverty rate is about the same as those in the 18-64 age group.

Medicare not only provided healthcare, it also was a strategy to end racial discrimination. It required hospitals to demonstrate they had a "nondiscrimination" policy. They no longer could have a different standard of care for minorities. This policy also required equal job opportunities in our hospitals.

Now there's a success story to celebrate and replicate! And that's what MNA is doing.

We are hosting a birthday BBQ bash and education July 29-30 to celebrate the success of a single-payer system that has provided access to healthcare for so many Americans over its 50 years.

The theme is "Medicare: As American as Apple PIE. Protect. Improve. Expand."

We start out on July 29 with an education session for everyone who wants to learn more about Medicare for All at the MNA office from 6-8 p.m.

The education is a great warm-up for the real fun: the Medicare 50th Birthday BBQ Bash is 5-9 p.m. at the Highland Park shelter in St. Paul on July 30. Join your fellow MNA nurses and others who care about making healthcare a human right

– and enjoy food, pie, games, and some fun activities!

Visit our website at www.mn-nurses.org and MNA's Facebook page for details and to sign up.

Let's make a whole lot of noise on July 30 and continue the work of nurses, FDR, Truman, Kennedy, and Johnson to ensure healthcare for all.



Linda Hamilton RN, BSN

Medicare Birthday BBQ Bash July 30

Celebrate Medicare's 50th anniversary with your MNA colleagues and others who support single-payer healthcare and the belief that healthcare is a human right

Medicare has provided guaranteed healthcare to millions of Americans since it was signed into law 50 years ago

Join MNA members, patients, caregivers, providers, policymakers, and neighbors to celebrate Medicare's success – and call to improve and expand it:



It's as American as Apple Pie

Education workshop on single payer healthcare

Wednesday, July 29

6-8 p.m.

MNA Offices

345 Randolph Ave. • St Paul 55102, Ste 200

**Free
event**

BBQ Bash

Thursday, July 30

5-9 p.m.

Highland Park Shelter

1227 Montreal Ave. • St. Paul

Picnic, live music, lawn games, bouncy house, pie, letter writing

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pocket expenses on Minnesotans struggling to make ends meet.

While some important details were left to be determined, it appears the average impact per Minnesota adult will be around \$370 in 2016.

That's about a week's pay for a full-time worker making minimum wage.

"The state is sitting on an almost \$2 billion surplus," said MNA President Linda Hamilton. "It's unconscionable that in positive economic times we'd even consider cutting quality healthcare for working families in Minnesota."

Hamilton said nurses see first-hand the impact of inadequate health insurance.

"Nurses talk to patients who are coming to the doctor, maybe for the first time," Hamilton said. "They even ask us, 'How much will this cost?' Cost is a barrier to being healthy. If these patients are pushed into a plan with a high premium or co-pay, they will be forced to decide if they can manage the expense of early, less expensive care in clinics and urgent care settings. If they delay care, they will end up much sicker and in the most expensive settings for care - the emergency room and hospital. We won't see them again until it's too late."

Nurses also support a permanent fix to funding MinnesotaCare, which will sunset in 2019.

Without one, they expect hospitals will see an increase in their charitable care.

MNA nurses will continue to advocate for universal single payer healthcare as the answer to controlling healthcare costs and providing high quality, accessible healthcare to all Minnesotans.

Community EMT

The Legislature approved a measure creating a separate first responder title called the Community Emergency Medical Technician (CEMT), who will be able to visit recently discharged patients.

At the patients' homes, CEMTs will ensure they're following the recovery

plan, observe the recovery area, prevent falls or accidents, ask if patients understand their medication procedures, and collect vital information.

The law states that a CEMT may not do anything that falls under the Nurse Practice Act, but the language is vague enough that not every agency in the state may interpret it that way.

Monitoring of this program will be necessary to ensure that no CEMT attempts skills or tasks that are designated for nurses.

Medical marijuana

The Legislature did provide protection to healthcare workers who may interact with patients who are authorized to use medical marijuana.

The new language says that an employee or agent of a facility is not subject to violations for possession of medical cannabis while carrying out employment duties, including providing or supervising care to a registered patient, or distribution of medical cannabis to a registered patient.

MNA will provide continuing education about the medical marijuana law and its impact on nurses, as well as information about the employee protection language.

The medical marijuana law goes into effect on July 1, 2015.

MNA Organizational Goals and Priorities for 2015

MNA Mission Statement

1. Promote the professional, economic, and personal well-being of nurses.
2. Uphold and advance excellence, integrity, and autonomy in the practice of nursing.
3. Advocate for quality care that is accessible and affordable for all.

MNA Purpose

The purpose of the Minnesota Nurses Association, a union of professional nurses with unrestricted RN membership, shall be to advance the professional, economic, and general well-being of nurses and to promote the health and well-being of the public. These purposes shall be unrestricted by considerations of age, color, creed, disability, gender, health status, lifestyle, nationality, race, religion, or sexual orientation.

MNA Strategic Goals

1. MNA empowers registered nurses to use their collective strength, knowledge, and experience to advance and enhance safe and professional nursing practice, nursing leadership, and the community health and well-being.
2. MNA exemplifies a positive, powerful union of professional nurses that advances nursing and patient interests.
3. MNA promotes effective RN staffing and safe working conditions for both patients and registered nurses in direct patient care, in policy and political arenas, and in our communities.
4. MNA increases membership and participation as a union of professional nurses through effective internal and external organizing, member activism, education, and mobilization.
5. MNA actively promotes social justice, cultural diversity, and the health, security, and well-being of all in its organizational programs and in collaboration with partner organizations.
6. MNA, in solidarity with the National Nurses United and the AFL-CIO, will promote the rights of patients, nurses, and workers across the United States.

2015 Organizational Priorities

1. All activities of the MNA will incorporate the principles of the Main Street Contract approved by the MNA House of Delegates in 2011.
2. Position MNA for negotiations from strength across Minnesota, Wisconsin, and Iowa.
3. Organize to increase MNA membership and continue to increase solidarity and participation of membership locally, regionally, and nationally.
4. Work to elect politicians who will implement nurse-friendly public policy, including safe staffing, a healthcare system that includes everyone and excludes no one, and single payor healthcare legislation.
5. Build solidarity to promote and support NNU and the AFL-CIO to advance labor nursing issues.
6. Assess risks and actively oppose any attacks on nursing practice and workers' rights, including any attempts of deskilling of the Professional nurse's scope of practice and right-to-work legislation.
7. Continue MNA's campaign for patient safety to ensure the integrity of nursing practice, nursing practice environments, and advance safe patient staffing standards and principles.

AT THE CAPITOL



We make a difference

by Mary Turner, GAC Chair,
North Memorial Hospital

The Capitol — it used to be the building that I visited once a year with my children on their school field trips.

Beyond that, I had no reason to go there until a few years ago, when I became an active member of the Governmental Affairs Commission (GAC) at MNA. Now it is like a second home.

I still remember the trepidation I felt two years ago, standing in those hallowed halls waiting to make my first attempt at being a volunteer nurse lobbyist.

I recall waiting for the legislator to come out of the Senate chamber after I sent a hand-written note requesting a few minutes of his time.

I was told that I had about two minutes to convince this person of the importance of safe staffing and what it meant to nurses and patients alike.

I recall thinking, “What if I screw this up? Or worse, no words come out of my mouth?”

As it turned out, I discovered that if you truly believe in what you’re saying, the words will just flow. So, a nurse advocating for patient safety? Piece of cake!

Soon, it was a weekly event for the GAC members to go to the Capitol to meet with different legislators—sometimes in their offices, but most often in the hallways outside of some committee session. We became very adept at maneuvering the maze of offices, tunnels, back hallways, and stairwells in the Capitol and State Office Building.

This past session, we began bringing individual hospitals’ nurses for their own “Mini-Day on the Hill.” My favorite was the HCMC Day, when we rode the train from their hospital to the Capitol.

We were in luck: we connected with everyone on our list and even saw the Governor!

We were standing outside of one of the chambers when suddenly Governor Dayton came out and started to head for the stairs. Not being someone to pass up an opportunity, I called out, “Say Governor, the nurses are here to say ‘Hi’ to you.”

He turned around immediately, came back, and proceeded to shake hands, converse, and pose for pictures. We made sure we asked him about his latest hip surgery and told him we were around if he needed us.

Then came the informational hearing for our staffing bill. We were going to have 15 minutes, which ended up being two hours. Nurses showed up in droves and packed the room.

The testimony was real and heart wrenching, as is the case when talking about human lives.

We also had 2,000 Concern for Safe Staffing forms to back us up, which I personally handed over to the CEO of the Minne-

sota Hospital Association.

However, no experience can compare to the Wednesday of this past Nurses Week, when I was in the balcony overlooking the floor of the House of Representatives and I listened as a resolution honoring nurses was presented for their approval.

To my surprise, the whole House showed their overwhelming support by giving the nurses of Minnesota a standing ovation.

Of course, I burst into tears of pride, but I remember thinking of all the other nurses not in the room and how this is what they deserve for Nurses Week.

We had made a difference; our presence had been felt; and our show of red was known and respected throughout Capitol Hill. It was an unforgettable moment for Minnesota nurses.



Get connected

by Diane McLaughlin, GAC member

Some MNA members believe that we as professional nurses should not be politically active. I used to share that belief. I thought I would never get involved in talking to elected officials or elections.

Over time, I saw that nurses must stand up for what we believe in and share those beliefs with others, including legislative leaders. They are the ones who make so many decisions that affect our patients and the care we provide.

Being a professional doesn’t mean we should stay out of important issues and activities. We must be engaged: Nurses should work with other people and push for the betterment of us all.

We individually vote as private citizens, and some of us actively support our chosen candidates.

MNA provides a simple, direct method to connect with legislators: the annual Nurses Day on the Hill, followed later with Student Day on the Hill.

Years ago, I mustered the courage to attend my first Day on the Hill. I enjoyed the education and encouragement MNA offered to participants to meet and speak with their legislators.

It’s initially scary to talk to a legislator. It’s out of a nurse’s realm, but it’s challenging – and a challenge we can all easily meet.

Participatory democracy is our political model. It negates no legislative party or union member. It brings nurses’ power into reality with the values nurses share: caring, compassion, and community, all brought to bear politically.

I now enjoy my political activity. I participate in MNA’s Gov



ernmental Affairs Commission – GAC – to support my union and our legislative agenda. It's so enjoyable to be with other nurses and do this together as a group.

I've also become comfortable talking to legislators. They're real people with real issues who want to talk to their constituents – like us. We may not always agree on everything, but going there and participating is the most important.

Most Wednesday mornings during this past legislative session, MNA nurses and staff were at the Capitol talking with, informing, and working among the legislators and their staff. We worked both sides of the aisle for support on these and other issues:

- Safe Patient Standard;
- Workplace Violence Prevention;
- Community Emergency Medical Technician;
- Rape Kit Inventory Reduction.

Bringing nurses' values to bear on our legislators shares our voice as these elected individuals make the laws we all live by.

And it works! We do make a difference. We saw some major victories in the 2015 session, including passage of a workplace violence prevention bill.

A few years ago, MNA members worked closely with other groups on the Right to Work issue. Nurses saw that Right to Work affects everyone – not just unions. It affects a community: decent wages and benefits that support families.

Right to Work did not become law in Minnesota, thanks in large part to the collaboration and advocacy of many groups, including MNA.

I urge MNA members to take that first step and get involved. We do make a difference for our community, our families, and our co-workers.

"We have such positive, solid people overall in our membership who want to stop suffering and create a better world. I would urge you to forget about the negative people in and outside of our membership, and look to the power and promise of the nurses who are genuinely compassionate."

- RoseAnn DeMoro
Executive Director, National Nurses United

Mini lobby days have maximum impact

Fun. Rewarding. Make a difference. That's how MNA members describe talking to their elected officials as part of MNA's "Mini Lobby Days" this legislative session.



In addition to the annual Day on the Hill, MNA members went to the Capitol on Wednesdays during the 2015 legislative session to advocate for priority issues including the Safe Patient Standard and workplace violence prevention.

These "Mini Days on the Hill" turned out to be a major success. Approximately 100 members - more than ever before – came to St. Paul and took their case directly to the people who make decisions about critical issues.

Some members "adopted" a day for their facilities, bringing groups to lobby together on behalf of their bargaining units.

Members who participated agree the "Mini Days" were worthwhile – and urge other members to get involved next year!



Vote for your MNA leaders in 2015 – Online or by mail

MNA members will elect their 2016-2017 leaders in 2015.

The Board of Directors, the Commission on Nursing Practice and Education, the Commission on Governmental Affairs, the Committee on Elections, delegates to the MNA House of Delegates, and delegates to the Minnesota AFL-CIO are all up for election.

A sample ballot of all candidates will be available for review on the Member Portal on MNA's website on July 15. The ballots will be mailed to all members on Oct. 15 and must be returned by Nov. 16.

NEW THIS YEAR: an option to vote online or by mail.

LABOR ADVOCACY

Arbitration ruling: contracts matter

You can't ignore a contract even if a bargaining unit only has nine nurses. Clearwater County learned this lesson last month when an arbitrator upheld a grievance and forced the county to give a nurse the pay her experience had earned.

As a result, not only did one of the nurses receive a year's worth of back pay for the raise she was denied, but all future nurses in the same position will be guaranteed their raises at the proper time.

The grievance arose when Patti Winger, the chair of the MNA home health nurses for Clearwater County, discovered that she had not gotten a pay raise to the 15-year wage step that she thought she was entitled to. When she went to learn why, the county claimed that it never counted one's prior credit for experience toward the 15-year step and all subsequent steps.

Patti filed a grievance, forcing the county to explain its stance further. The county claimed that credit for experience was handled differently from length of service. Though there was no mention of credit for experience in the contract, the county alleged it had a past practice of such credit not applying after the 10-year step.

MNA did not accept this claim. To establish a past practice, the party must show that the practice was mutually accepted by both parties and had been exercised many times over several years.

In the case of Clearwater County, over the 15 years in question, only one nurse had been affected, and she only worked three more months. Moreover, no nurse ever remembered being told about the claim and the employer could produce no policy or documentation that stated otherwise. Our choice to move the case to arbitration was easy.

In the end, Arbitrator Harley Ogata swiftly ruled for MNA. "The evidence indicates the issue was never discussed with the union," Ogata wrote. "[N]othing else in the record would bring this arbitrator to the conclusion that the 'policy' was established as a binding past practice on the party."

As a result, Patti received the back wages for the difference between what she had been paid and what she should have been paid. Nurses going forward will have their credit for experience treated equally for purposes of length of service. It was a big win for the Clearwater County nurses and for MNA as a whole, who reminded everyone: **CONTRACTS MATTER**.

Takeaways:

- 1) Both parties have to clearly agree on a past practice to assert that it should override the clear language of the contract.
- 2) Never take the employer's word for granted; claims of a past practice need a great deal of evidence to prove.



WestHealth ratifies first contract

RNs at Abbott Northwestern WestHealth Emergency Department and Urgent Care in Plymouth had some tough going as they negotiated their first contract, but they held firm for a fair agreement.

They ratified their first collective bargaining agreement as part of MNA in May, after reaching a tentative agreement earlier in the month.

WestHealth opened in 2013, and RNs immediately saw they needed a union.

The facility was understaffed from the beginning, and nurses were treated differently than their colleagues at Abbott Northwestern in Minneapolis.

"There was a huge discrepancy in pay, holidays and other benefits at first," said bargaining team member Sue Redalen. "We put together a proposal for a fair system of



Carrie Boris, Lori Filipek, and Susan Redalen

raises and benefits and gave it to management and never heard back. It was very frustrating for us."

The RNs contacted MNA, and a few months later, they voted for contract representation by MNA.

Negotiating with management was difficult at times, but the bargaining team and members stood together.

The new contract they agreed upon in April provides a foundation for continued improvements in wages, holiday pay, and other benefits in the future.

"Each and every RN can feel secure that there are language and processes in place to guarantee fairness and security in our workplace," said bargaining unit co-chair Lori Filipek. "With a contract, we have guarantees. Without a contract, there are no guarantees."



Minnesota Nurses Association

110th Annual Convention and House of Delegates

October 3-6

DoubleTree by Hilton Hotel, Bloomington

Chart MNA's Course at the 2015 Convention
and House of Delegates.



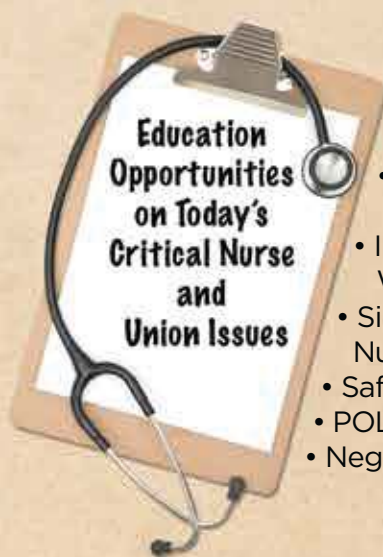


MNA Convention

Guide Our Future - Learn

Honors and Awards Banquet • Silent Auction

Don't miss out on this great opportunity to make important decisions about the future of nursing.



- Collective Advocacy: Strategies to Fight Back by National Nurses United Practice Experts*
- Right-to-Work education and the Importance of Unions
- Workplace Violence Prevention: Exploring Solutions from Local to Legislative*
- Infectious Disease and Emergency Preparedness: Protecting Healthcare Workers and the Public*
- Single-Payer Healthcare: Envisioning a Healthcare System Based on Nursing Values*
- Safe Patient Standard Campaign*
- POLST: Conversations on End-of Life Planning*
- Negotiation Tactics, Best Practices on Strategy, Actions, Campaigns

Prepare for the Future - 2016 is a Critical Year for Nurses and Unions

- More than half of MNA's bargaining units will negotiate a new contract in 2016
- 2016 elections will shape the outcome of MNA priorities, including Safe Patient Standard
- Right-to-Work and Other Anti-Union Measures Threaten All

Major decisions about these issues and MNA policy are made at the House of Delegates (HOD), MNA's governing body, which meets yearly at the MNA Convention in October. The HOD is composed of the MNA Board of Directors and delegates elected by the MNA membership.



*Free Contact Hours Available

Breakout groups for public health, psychiatric, specialty groups
Legislative forum

Silent Auction for Disaster Relief Fund -
extended hours in 2015

Entertainment: The Magic of Comedy with
Tim Gabrielson following the Honors and Awards Banquet



Convention October 3 - 6

Learn and Talk About Critical Nursing and Union Issues

Auction to Benefit Disaster Relief Fund • MNA History Hall - Celebrate MNA's 110 Years

Opportunity to connect with MNA members from throughout Minnesota, make MNA's future, talk about issues important to you - and have some fun!

Be a delegate and help shape our future.

Just fill out the form below and mail to Julie Kinsel, 345 Randolph Ave, Ste 200, St Paul, MN 55102, or find the form on the Member Portal on MNA's website at www.mnnurses.org

Consent to Serve as a Delegate to the MNA House of Delegates

After MNA's statewide officer elections have been completed, there still may be open Delegate positions. By signing this form, I agree to serve in one of these open positions, commit to participating in activities on behalf of MNA, and support MNA's mission, strategic goals, and priorities.

I understand that I must attend the entire House of Delegates. According to House of Delegates policy, this form must be submitted no less than seven days prior to a House of Delegates session. In addition, I must have been a member in good standing for at least three months prior in order to serve.

I further understand that my term as Delegate will expire December 31, 2015. If I am unable to complete this term, I will notify the MNA office so my position can be replaced.

Name Printed _____

Signature _____

Date _____

Please return this form to Julie Kinsel at MNA via mail or fax (651-695-7000).

Adopted by the MNA Board of Directors, March 18, 2015



MNA Convention — Get Inspired

Workshops, education sessions on the latest nurse and union issues

Unite - Network with MNA Colleagues

Show your solidarity as we come together to set MNA's course
at the House of Delegates

Silent Auction • Honors and Awards Banquet
Entertainment

At A Glance

Saturday, Oct. 3

- NNU Education session

Sunday, Oct 4

- Education sessions on infectious diseases, workplace violence
 - POLST (lunch & learn)
 - Delegate Briefing
- Bylaws and Resolutions Forum
 - Legislative Forum
- Board Meet and Greet

Monday, Oct. 5

- Interest Groups Meet
- House of Delegates
- Honors and Awards Banquet
- Entertainment with comedian and magician Tim Gabrielson

Tuesday, Oct. 6

- Interest Groups Meet
 - Single-Payer, Safe Patient Standard Education
 - 2014 Survey Results Forum
 - House of Delegates
- Network and have fun!**

Registration - Minnesota Nurses Association 2015 Convention

Name: _____

Phone: _____ Home E-Mail: _____

Employer: _____

Hotel Accommodations

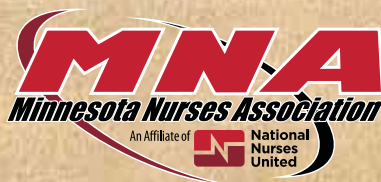
We have a block of sleeping rooms reserved for Convention attendees at the DoubleTree. You must call the hotel directly to make your arrangements. The hotel's number is 800-222-TREE. Let them know you are with the Minnesota Nurses Association in order to get our group rate of \$129. **Cutoff date is September 17, 2015. For further information and member responsibilities, please go to your Member Portal.**

MNA Delegates - Please designate which free events you plan to attend:

- ☐ Bylaws/Resolutions Forum (Sun.)
- ☐ Legislative Forum (Sun.)
- ☐ Meet and Greet (Sun.)
- ☐ Education - Collective Advocacy (Sat.)
- ☐ Education - Workplace Violence (Sun.)
- ☐ Education - Infectious Diseases (Sun.)
- ☐ Education - POLST (Sun.)
- ☐ Education - Single Payer (Tues.)
- ☐ Education - Safe Patient Standards (Tues.)
- ☐ Honors and Awards Banquet (Mon.)

Please mail the completed form to Julie Kinsel at the MNA office, 345 Randolph Avenue #200, St. Paul, MN 55102 or fax to 651-695-7000.

Please note: MNA will reimburse the Friday night hotel room for members who travel 75 miles or more and attend the full day of NNU Education. Saturday thru Tuesday night will be reimbursed for all delegates based on double occupancy.



345 Randolph Avenue, Ste 200
St. Paul, Minnesota 55102
651-414-2800 / 800-536-4662
Fax: 651-695-7000
Web: www.mnnurses.org

LABOR ADVOCACY

Member activism, unity produce contract in Cloquet



Kerri Schneberger, Jane Braun

Unity and member involvement were key to successful negotiations in Cloquet this spring.

MNA members ratified a new contract with Community Memorial Hospital in April, after “cordial” negotiations.

Members attribute the relatively smooth bargaining to increased member participation and communication.

“More members helped with phone trees, fliers, informational meetings, and talking to each other,” said bargaining team member Cheryl Schilla. “We listened to members’ concerns and incorporated them into proposals.”

“Our members were united,” said bargaining team member Cheryl DeMenge. “We encouraged everyone to get involved, learn the issues, and support the bargaining team.”

The new contract increases wages and makes major improvements to scheduling, personal holidays, and education.

Members ratify Horizon Public Health contract

When public health agencies in five western Minnesota counties decided to merge, employees who belonged to MNA and AFSCME faced some questions about representation under the new agency.



They chose to work together to ensure their members continued to have strong contracts and union representation.

Douglas, Pope, Stevens, Traverse, and Grant counties merged their public health agencies into Horizon Public Health at the beginning of 2015.

MNA and AFSCME agreed to jointly represent all of the Public Health employees and combine their energy to get the best possible first contract for all of those workers. The result was a good beginning to creating more gains, especially for the lowest paid of the people who take care of those who do not have a safety net.

“It says a lot for MNA and AFSCME that we were willing to come together as one,” said negotiating team member Jenni Olson.

Merging the agencies was stressful for members, but they agree that the cooperation between unions made the change easier.

Members reached a tentative agreement on a new contract for the merged agency in February and ratified it in March.

The new contract increases wages and benefits for all members.

Bemidji Clinic RNs ratify contract

RNs at Sanford Bemidji Clinic ratified their first contract earlier this year after being officially recognized as part of MNA last October.



RNs say they’re happy to have a contract that protects patients and nurses alike.

“We’re excited about having a contract that protects our rights and ensures we’re all treated fairly,” said negotiating team member Christine Sheikholeslami.

“The new contract creates a wage scale, so raises are allocated fairly and consistently,” said member Tina Hawver.

The contract raises wage for all members, creates security in scheduling, and provides all other contract language to the Clinic RNs that hospital employees receive, such as more affordable health insurance and a cap on mandatory low-census days.

In 2017, the hospital and clinic nurses will all bargain together for a new contract as one united group.



Medicare 50th Birthday BBQ Bash July 30

Highland Park Shelter, St. Paul
1227 Montreal Ave., St. Paul

Register online at

www.mnnurses.org/event/medicare-50th-anniversary

MNA MEMBERS IN ACTION

Nurses Week 2015

From proclamations by the Governor and Legislature to open houses, food drives, education and workshops, information tables and events in hospitals, Minnesota celebrated Nurses Week 2015 in many ways.



St. Joseph's Hospital RNs round and share materials



MNA hosted an open house for members



HCMC RNs informational table shares MNA materials, information and popcorn



River Falls RNs remind members they're lifesavers – with Lifesaver candy



Duluth members enjoyed serious and fun times



United Hospital RNs show pride in the nursing profession at May 5 open house



Willmar RNs joined by the community to celebrate Nurses Week



RNs in Bemidji information tables, evening get-together engaged members and showed a strong presence at the hospital



MNA members at Methodist Hospital show pride in the nursing profession

MNA MEMBERS IN ACTION

Education sessions at 2015 Convention cover critical issues

MNA Nursing Practice & Education Commissioners have consulted and worked closely with the Governmental Affairs Commission, the Ethics Committee, the Health & Safety Committee, and the Convention Planning Committee - all in an effort to provide education at convention that will support and enhance this year's theme: Navigating the Future; Steering to Success.

On Saturday, October 3, practice experts from National Nurses United will present Collective Advocacy: Strategies to Fight Back.

The following sessions will address various themes MNA leadership feels are timely and beneficial. We will offer nursing contact hours for the following sessions:

- Workplace Violence Prevention: Exploring Solutions from Local to Legislative;
- Infection Disease & Emergency Preparedness: Protecting Healthcare Workers and the Public;
- Single-Payer Healthcare: Envisioning a Healthcare system based on Nursing Values;
- Safe Patient Standard Campaign;
- POLST: Conversations on End of Life Planning (This will be a one-hour lunch and learn).

Additional presentations:

- o Member & Staff Panel – Negotiation Tactics, Best Practices on Strategy, Actions, Campaigns, Whistleblowers;
- o Welcome presentation by Executive Director Rose Roach, addressing the challenges of Right To Work.



MNA members support union sisters and brothers

MNA members work closely with colleagues in other unions in Minnesota and the U.S. on issues including protecting MinnesotaCare, minimum wage, single-payer healthcare, the Robin Hood Tax on Wall Street, affordable college, protecting the environment, and much more.

Early this year, MNA members turned out in force to support SEIU Healthcare members in the Metro area as they fought for a fair contract.

MNA members wore "We are One" stickers, spoke out publicly, and picketed with SEIU Healthcare members as they stood up to unfair demands from management. SEIU Healthcare reached agreement on a new contract in February.



Nurses prepare for another big showing at the Minnesota State Fair



Nurses had a big impact on the 2014 Minnesota State Fair and plans are in the works for the 2015 Great Minnesota Get Together. This year's fair begins Thursday, Aug. 27, and runs through Labor Day, Sept. 7.

Last year, nurses staffed every day of the fair and volunteers collected more than 4,000 signatures for our safe staffing petition.

Nurses talked to thousands of fairgoers and explained how nursing is the only caregiving profession in the state that doesn't have a minimum staffing standard.

In 2015, nurses will be explaining the value of their work and allow fairgoers to send a thank you to a special nurse in their lives or all nurses in Minnesota.

Nurses will have photo opportunities and hand out MNA-

and nursing-related items to fairgoers.

Nurses will continue to talk about the need for safe staffing and what patients need to know about staffing before they go to the hospital for a procedure.

There will be hand-outs and information about our Safe Patient Standard campaign as well as the fight for a Single Payer insurance system in Minnesota.

The MNA kiosk is at the Labor Pavilion at the corner of Dan Patch Ave. and Cooper St. The AFL-CIO theme this year is "Winning for all Workers," and plans include more music and presentations than before.

Sign-up for fair volunteering is now on MNA's website at www.mnnurses.org.

Required training for volunteers is on three dates: Aug. 4, Aug. 11, and Aug. 12. Volunteers will receive special scrubs and tickets for attending the fair.

Check www.mnnurses.org to sign up and for more details as they are developed in July and August.

PROTECT YOUR PRACTICE

Nursing care plans are essential part of scope of practice

By Mathew Keller, RN JD, MNA Nurse Practice & Policy Specialist



Nursing care plans. Love them or hate them, they remain a central facet of nursing practice.

Indeed, the Joint Commission requires that “an individualized plan of care [be] developed and documented for each patient,”¹ while the Minnesota Nurse Practice Act specifies that registered nurses are

responsible for “collaborating with the health care team to develop and coordinate a plan of care” as well as for “developing nursing interventions”² to be integrated with that plan of care.

Because care planning is specifically relegated to RNs in the Minnesota Nurse Practice Act, and because accrediting organizations place such a high emphasis on the care plan, the act of developing, coordinating, and implementing the plan of care represents an essential element of RN professionalism, autonomy, and scope of practice that RNs should embrace.

While there is enormous inconsistency in the form of care plans, the intent is invariably to provide a roadmap for the care of the patient.

One alarming trend is the standardization of care plans. In a facility with standardized care plans, each patient admitted to a hospital with a pneumonia diagnosis receives a generic pneumonia care plan with little or no opportunity for nursing staff input.

In some facilities, these standardized care plans are developed by the company that implemented the facility’s electronic medical records; for others, the standardized care plan may have been developed by the medical staff.

In any event, generic care plans developed by outside sources with little to no RN input are a barrier to the professionalism and autonomy of the nursing profession.

When care plans are not developed by staff RNs, but are standardized from the electronic medical record, “there appear to be substantial system problems resulting from a lack of nursing input into the module’s design and functionality.”³

This leads to inefficient and perhaps even useless nursing care plans that do not reflect actual nursing practice.⁴

As one systematic review of care plan literature put it, “lack of nursing input has contributed to the failure of the nurses in these studies to embrace care planning and, at times, even to be able to judge whether a different care planning approach would result in better patient outcomes.”⁵

Care plans with limited utility lead to “shadow documentation” systems where nurses chart outside of formal medical records in order to better track the care of their patients. Because of this, staff nurse input and buy-in into the development and utilization of care plans is key to beneficial care planning and improving patient outcomes.

As a profession, registered nurses should be aware that care planning is an essential element of their scope of practice. Developing, coordinating, and designing nursing interventions for care plans is a practice reserved specifically for RNs under the Minnesota Nurse Practice Act.

If we do not protect and embrace our scope of practice with respect to care plans, other professions will, and we will have lost an essential element of nursing practice.

Tips for designing effective care plans:

- Advocate for staff nurse input into the form and function of standardized care plans. This will help ensure the care plans have at least a minimum of utility to nursing staff and fulfill their role of roadmaps to the nursing care of a patient.
- At the very least, RN staff should have the ability to modify the care plan to fit the needs of each patient. Practice professionalism by individualizing care plans to the fullest extent.
- Research shows that the best care plans are nursing driven, but interdisciplinary in nature. Use the care plan to communicate to other members of the health-care team which nursing interventions you are implementing that are important to them (e.g. managing postexertion pain and nausea following physical therapy/occupational therapy).
- Successful RN adoption of care plans is directly correlated with plans that are clinically driven, individualized, and have a sense of RN ownership. Fight for your right to care plan!

¹ See JCAHO Standard COP.2.1

² MN Statute § 148.171 Subd. 15 (2-3)

³ Lee TT, Lee T-Y, Lin K-C, et al. Factors affecting the use of nursing information systems in Taiwan. *J Adv Nurs*.2005;50(2):170-8

⁴ Coldwell G, Page S. Just for the record. *Nurse Manage*. 1996;2(9):12-3.

⁵ Keenan GM, Yakel E, Tschannen D, et al. Documentation and the Nurse Care Planning Process. In: Hughes RG, editor. *Patient Safety and Quality: An Evidence-Based Handbook for Nurses*. Rockville (MD): Agency for Healthcare Research and Quality (US); 2008 Apr. Chapter 49.

Official Call to Convention

MNA's 110th Convention and House of Delegates is October 3-6, 2015, in Bloomington

Watch the Member Portal for more information coming soon.

www.mnnurses.org



Nominate unsung heroes for MNA Honors & Awards

Deadline is July 15

Do you have colleagues who go above and beyond for patients and the nursing profession with little recognition?

An outstanding practitioner, an inspiring educator or mentor, an unfailing supporter of nurses in collective bargaining, an RN who models leadership, or a researcher who has made a real difference for patients?

Nominate them for MNA honors and awards.

MNA's Honors and Awards recognizes the achievement and dedication of members who deserve a special 'thank you.'

They'll be honored at MNA's honors and awards ceremony during the annual convention in October.

Visit MNA's website at www.mnnurses.org for details about each award and how to nominate an unsung hero!



SUBMIT PROPOSALS FOR RESOLUTIONS, BYLAWS BY JULY 15

We are inviting you to submit proposals for resolutions and changes to the MNA Bylaws.

The MNA House of Delegates will convene October 3-6 to consider these proposals.

The deadline for individual members or structural units to submit proposals in writing to MNA is 11:59 p.m. on July 15, 2015.

For details and forms, visit the Member Portal on MNA's website at www.mnnurses.org

Share a smile!



Nursing isn't always serious. There are humorous and heartwarming moments as well. Share those stories with your colleagues around Minnesota – send them to Accent and we'll publish them in our new 'Quips and Quotes' section. Email them to Barbara.brady@mnnurses.org

Have a Voice in MNA

Join a committee or commission and shape our union

Several have openings right now, including:

- Commission on Nursing Practice and Education
- Commission on Governmental Affairs
- MNA Foundation
- Membership/Organizing Committee
- Committee on Elections
- Health and Safety Committee
- Honors and Awards Committee

The functions and responsibilities of each group are explained in MNA's bylaws; or you can contact the MNA office at 800-536-4662 for more information.

The terms of all committees and commissions expire December 31, 2015.

If you are interested in being appointed to one of these groups, please contact Julie Kinsel at Julie.Kinsel@mnnurses.org.



PRACTICE AND EDUCATION COMMISSION UPDATE

The Practice and Education Commissioners are pleased to announce two new classes for MNA's Continuing Education Program in the fall of 2015. Both classes will be part of the updated MNA Leadership Series.

All members are welcome and encouraged to attend. This is a great way to meet fellow MNA members, share ideas and experiences across facilities, as well as socialize and enjoy free nursing contact hours!

The first topic addresses the role of the charge nurse.

MNA members know all too well that the charge nurse plays a significant role in ensuring that nursing care is delivered safely and effectively on every shift. Too often, the charge nurse is put in a difficult position, one that might unwittingly risk his or her license, and the license of the bedside RN.

The commissioners believe much will be gained from a conversation among nurses addressing ways in which the charge nurse can and should advocate for patient safety as well as the professional practice of staff nurses.

Our second topic, Welcoming Members: New Hire Orientation, focuses on developing the future leaders of MNA.

We need to be proactive in mentoring and welcoming new nurses into our union.

This training includes highlights from MNA history, toolkits on MNA activism and organizing, as well as honing leadership skills. This topic is vital in our efforts to build power and solidarity, and to communicate the value of our MNA contracts - the oldest of which date back to 1947.

Let's be certain that we pass the torch onto a new generation of MNA leaders ready to advocate for their profession and their patients.

Be sure to check the MNA website for upcoming dates and times.

<http://www.mnnurses.org/nursing-practice-education/continuing-education-center>

JUNE

Take advantage of the free continuing education classes MNA offers just for members!

Learn about the latest in nurse practice, leadership and advocating for your profession and patients.



**TUESDAY
JUNE 23**

Duluth Education
10:00 a.m. - 5:00 p.m.
Representing Members
10:15 a.m. - 12:15 p.m.
Step-One Grievances
12:45 p.m. - 2:45 p.m.
HIPAA
3:00 p.m. - 5:00 p.m.
Holiday Inn Duluth



**WEDNESDAY
JUNE 24**

Duluth Education
8:00 a.m. - 3:00 p.m.
HIPAA
8:15 a.m. - 10:15 a.m.
Refusing Unsafe Assignments
10:30 a.m. - 12:30 p.m.
MNA Leadership/
Empowering Nurses
1:00 p.m. - 3:00 p.m.
Holiday Inn Duluth

Nursing Contact Hours

These programs for 2.4 contact hours each have been designed to meet the Minnesota Board of Nursing continuing education requirements. However, the nurse is responsible for determining whether these activities meet the requirements for acceptable continuing education.

JULY



WEDNESDAY JULY 1

Practice
9:00 a.m. - 4:00 p.m.
 Nurse Practice Act
 9:00 a.m. - 11:00 a.m.
 HIPAA
 11:30 a.m. - 1:30 p.m.
 Unsafe Assignments
 1:45 p.m. - 3:45 p.m.
 MNA St.Paul Office



WEDNESDAY JULY 15

Advocacy
9:00 a.m. - 4:00 p.m.
 Representing Members
 9:00 a.m. - 11:00 a.m.
 Step-One Grievances
 11:30 a.m. - 1:30 p.m.
 Mobilizing Members
 1:45 p.m. - 3:45 p.m.
 MNA St.Paul Office



WEDNESDAY JULY 22

Grand Rapids Education
8:00 a.m. - 3:15 p.m.
 Representing Members
 8:15 a.m. - 10:15 a.m.
 Mobilizing Members
 10:30 a.m. - 12:30 p.m.
 Unsafe Assignments
 1:00 p.m. - 3:00 p.m.
 Sawmill Inn Grand Rapids



WEDNESDAY JULY 29

Single-Payer Health Care
 Health care is one of the most vital issues of our time. Join our campaign to achieve affordable, accessible and high-quality health care for all Minnesotans.
6:00 p.m. - 8:00 p.m.
 MNA St. Paul Office

AUGUST



WEDNESDAY AUGUST 12

Maple Grove/West Metro
9:00 a.m. - 2:30 p.m.
 Nurse Practice Act
 9:15 a.m. - 11:15 a.m.
 HIPAA
 11:30 a.m. - 1:30 p.m.
 MNA leadership Panel
 1:30 p.m. - 2:30 p.m.
 Hilton Garden Inn Maple Grove



THURSDAY AUGUST 13

Advocacy
9:00 a.m. - 4:00 p.m.
 Representing Members
 9:00 a.m. - 11:00 a.m.
 Step-One Grievances
 11:30 a.m. - 1:30 p.m.
 Mobilizing Members
 1:45 p.m. - 3:45 p.m.
 MNA St. Paul Office



WEDNESDAY AUGUST 26

Practice
9:00 a.m. - 4:00 p.m.
 Nurse Practice Act
 9:00 a.m. - 11:00 a.m.
 HIPAA
 11:30 a.m. - 1:30 p.m.
 Unsafe Assignments
 1:45 p.m. - 3:45 p.m.
 MNA St. Paul Office

Help union members and their families during times of need. Working Partnerships Third Annual Golf Tournament

The tournament benefits Working Partnerships, a nonprofit that helps union members and their families during seasonal unemployment, layoffs, lockouts, and other emergencies.

Working Partnerships engages and educates union members on public policy, community resources, and volunteerism.



**Monday
September 21
Hillcrest Golf Course**
 St. Paul

**8. a.m. Shotgun Start
\$145/Person**

Entry Fee Includes:

18 holes of golf, cart, light breakfast and catered lunch, sleeve of golf balls, goody bag, practice range, and door prizes!

To register, call Ashley Novak at 612-379-8130, ext. 112

or visit

<http://workingpartnerships.org>.



345 Randolph Ave., Ste. 200
St. Paul, MN 55102

Register Now!

MNA Convention and House of Delegates



Oct. 3-6

DoubleTree Hotel • Bloomington

Navigate MNA's Future

www.mnnurses.org

The Minnesota Nursing Accent **Summer 2015**