



Minnesota Nursing **ACCENT**

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MNA members prepare for 2016

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2016 bargaining is pivotal

More than half of MNA's bargaining units - 14,000 members - will negotiate new contracts in 2016, including the Twin Cities, Duluth, Mankato, and many others.

"In 2016, we all face many challenges," said MNA President Linda Hamilton. "However, when we stand together, with our co-workers and our community united, we will negotiate fair contracts and stand up for our patients."

Members are gearing up for difficult negotiations and will present a united front at all bargaining tables.

More than 100 negotiation team members from throughout Minnesota attended the first Bargaining Academy training on Nov. 11-12.

Another training will be held for many of the other negotiation teams in preparation for their bargaining.

"MNA members deserve fair contracts that recognize the important work we do," said Hamilton. "To accept status quo is not enough. We must make improvements in our compensation and working conditions and increase our ability to advocate for our patients."

MNA bargaining units negotiating in 2016

LakeWood Health Center - Baudette	CentraCare Health System - Monticello
Murray County Medical Center	Lake View Hospital
Chippewa County-Montevideo Hospital	Virginia Regional Medical Center
Mayo - Fairmont	Owatonna Hospital
Sanford Bagley	Hudson Hospital
Dakota County Public Health	Mayo - Mankato
Douglas County Hospital	Riverwood Healthcare Center
Cook County North Shore Hospital	St. Mary's Hospice Unit B
Cook Hospital	Essentia Health St. Joseph's Medical Center
Rice County Public Health	Rainy Lake Medical Center
Rice Memorial Hospital	Central Iowa Healthcare
Clearwater County Home Care and Hospice	Ely-Bloomenson Community Hospital
Pipestone County Medical Center	Mayo - Lake City
Spencer Hospital	St. Francis Regional Medical Center
Fairview Metro	Mille Lacs County
Abbott Northwestern Hospital/PEI	Colonial Manor Nursing Home
Children's Hospital - Minneapolis	Fairview Northland Medical Center
Children's Hospital - St. Paul	Horizon - Douglas County PH
HealthEast	New Ulm Medical Center
Mercy Hospital	Sanford Bemidji Medical Center
Methodist Hospital	Lakeshore - Ecumen Nursing Home
North Memorial Health Care	St. Joseph's Area Health Services - Park Rapids
Regina Hospital	Mayo - Austin
United Hospital	
Unity Hospital	
CentraCare Health System - Melrose	
FirstLight Health System	
St. Luke's Hospital	
Essentia Duluth Superior	

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Members' goals and priorities make up plan for MNA's future

One of the most exciting moments at the House of Delegates in October was the adoption of the 2016 MNA Strategic Goals and Organizational Priorities.

I was proud to present to the Delegates the strategic plan, developed in collaboration between member leaders and staff, that will help us bring those goals and priorities to fruition.

This strategic plan is MNA's roadmap for a future of strength, growth, and power.

I encourage every member to log in on www.mnnurses.org to see a summary and be part of this exciting journey. Here are some highlights of the goals and objectives:

Goal 1: Empower members to use their collective strength, knowledge, and experience to advance and enhance safe and professional nursing practice, leadership, and community health and well-being. Objectives under this goal include protecting the nursing profession from attempts to dehumanize and deskill it, fighting the anti-labor movement, pressuring employers to strengthen and expand RN involvement in decision-making at their hospitals, and increasing member involvement in the political process. We will develop a volunteer recruitment program, a Retiree Council to involve retired members in MNA, and programs to connect with our young members and student nurses. See stories on page 21.

Goal 2: Exemplify a positive, powerful union that advances nursing and patient interests. Position MNA for negotiating from strength. We will educate and train members for success at the table: no concessionary bargaining. MNA is also adding more information to the Portal on the website, which will be renamed the Member Center and will be password-protected for access to member-only information. We will work with our members in Wisconsin and Iowa on their legislative priorities, and expand trainings for members in Greater Minnesota. All members are a priority, no matter where they live or work.

Goal 3: Promote effective RN staffing

and safe working conditions for patients and RNs in direct patient care, in policy and political arenas, and in our communities. We will continue the campaign for patient safety by passing the Safe Patient Standard bill. A task force will be formed to review the current format of the Concern for Safe Staffing form and draft a plan for its effective usage.

Goal 4: Increase membership and participation through effective internal and external organizing, member activism, education, and mobilization. A plan will be developed to organize the unorganized. We are working with bargaining units to increase their capacity to deal with workplace issues and contract violations.

Facility and MNA leaders are creating an MNA orientation packet for bargaining unit chairs and stewards to use when meeting with new hires.

Goal 5: Actively promote social justice; cultural diversity; and the health, security, and well-being of all in its organizational programs in collaboration with MNA's partners. Elect candidates who support nurse and labor issues. We are planning to intensify the campaign for single-payer healthcare with a staff position dedicated to this issue. MNA will also work to elect pro-nurse, pro-labor candidates to office at all levels and build coalitions around patient safety and healthcare as a human right.

Goal 6: In solidarity with National Nurses United and the AFL-CIO, promote the rights of patients, nurses, and workers across the U.S. Working with our national affiliate, NNU, and our sisters and brothers in the AFL-CIO, MNA will strive to be a leader in rebuilding a strong labor movement.

Goal 7: Ensure that MNA remains financially strong. We must be good stewards of our members' money through fiscally responsible decisions centered on member needs.

This new plan is ambitious but achievable. It moves MNA forward as the leader we are in the house of labor, the Capitol, our facilities, and our communities.



Please share your thoughts with us. Are we going in the right direction? Do you have new ideas to share? This is your union and we want to hear from you. Send me an email at rose.roach@mnnurses.org.

A handwritten signature in black ink, appearing to read 'Rose Roach'.

Single-payer healthcare movement is growing



Hundreds marched on Blue Cross/Blue Shield in Chicago to support single-payer healthcare.

Single-payer healthcare is achievable and necessary, according to MNA members who attended an October conference in Chicago.

MNA members, nurses from throughout the U.S., physicians, business owners, and other healthcare advocates from throughout the U.S. shared strategies, research, and ideas for implementing Medicare for All at the event.

"We came back inspired and ready to step up the campaign for single-payer in Minnesota," said MNA Executive Director Rose Roach. "Minnesota is well positioned to lead the nation in creating a single-payer system that guarantees healthcare as a human right."

Beside education sessions and networking, hundreds marched on Blue Cross/Blue Shield in Chicago to demonstrate the growing movement in support of single-payer healthcare.

PRESIDENT'S COLUMN

We are not 'just' nurses - we are a movement

By Linda Hamilton, RN, BSN



Nurses are the moral compass that guides our planet.

I know this may seem lofty and perhaps almost canned, but I am telling you it is true. During my 21 years as an MNA leader – the last six as your president – I have seen that fact demonstrated over and over.

Nurses stand together on behalf of our patients, our profession, and our communities. We are fearless advocates for those who just need a fair chance in our community and beyond.

When I was first elected president, I was petrified to speak.

Now I find it hard not to talk about the unique and amazing role nurses play in caring for our patients and our community.

As I write my last Accent column as your president, I'd like to share some perspective, lessons I've learned, and thanks.

First, I am so proud of MNA and what we have accomplished. We won many battles at the Legislature, thanks to hundreds of members showing up and speaking to their legislators.

We stood up to Right-to-Work threats, passed a workplace violence prevention bill, protected our Nurse Practice Act, maintained funding for MinnesotaCare and MNsure, protected patients from bill collectors in the ED, and brought attention to safe staffing issues, setting the tone for future staffing laws and healthcare reform.

At the bargaining table, we were the only union in Minnesota not to take concessions in 2010! We made progress on staffing in many contracts. We are in a good position to negotiate in 2016 and beyond.

Nurses are leaders in the labor movement. We are a respected voice in government at all levels. That's because MNA members stand up and take action whenever needed. We show we are not 'just' nurses. We are a movement!

We have a lot to celebrate... but there are many challenges ahead and we can't let our guard down.

In 2016, most of MNA's members will negotiate contracts. I know we will win through solidarity.

The attacks on unions and working families keep coming. We all must stand together against those who want to destroy us with Right-to-Work laws and other legislation, and court challenges to our basic rights.

Over the past 21 years, I have had incredible support from some incredible people. I especially want to thank those who encouraged me to always do my best and who always gave me their best: Bunny Engeldorf, Jean Ross, Gretchen Kingsley, Deb Hagen, Kathleen Moore, and all the nurses who believed I could do this job. They worked tirelessly giving me advice, encouragement, and even forgiveness in the years I have been a leader at MNA.

I also want to thank all the members who welcomed me into their facilities, celebrations, and actions over the years.

The most valuable were those who came with the courage and

conviction to challenge the positions and roles MNA plays in many issues.

These conversations demonstrate the democratic process that makes MNA such a wonderful organization.

They create the diversity of opinions that lead to great decisions in our House of Delegates.

There is no way I can give enough thanks to the nurses at Children's, including my nurse managers. You did so much to support me by creative scheduling accommodations, swapping and picking up my shifts, and so many 'favors.' I can never repay you all.

I also thank the many nurse and labor leaders, MNA executive directors, and staff who mentored and encouraged me to speak up when I would have rather just listened; and my friends who encouraged me to be quiet when I needed to listen.

Last, thank you is not enough for my family. Without their flexibility, tolerance, self-reliance, and most of all love, I never could be who I am or do what I do.

Over the years I was blessed with some awesome experiences. Along the way I met President Obama, former President Clinton, Hillary Clinton - and Bernie Sanders. I had the U.S. Secretary of Health & Human Services, Senator Franken, Representatives Ellison and McCollum, and our Governor in my home. I met with all of Minnesota's U.S. representatives and most if not all state legislators. And so many more.

I even spoke with Denzel Washington in the Wisconsin Capitol during the 2011 protests. (I knew he looked familiar!)

I treasure the funny, touching, sad, inspiring, and incredible experiences and achievements of the nurses I've had the privilege of representing. I know MNA's future is in good hands. Our legacy and vision will carry on.

Our work and our passion unite us. We struggle with the same issues, staffing, workplace violence, inadequate resources, not enough time for work and family, inequality in healthcare and corporate power over all the above.

Thank you for giving me the opportunity to be part of this amazing union and movement!

Linda Hamilton RN, BSN

MNA welcomes new president, officers, leaders

Mary Turner, RN, will take the reins as MNA's new president in 2016.

MNA members elected Turner, officers, the Board of Directors, and commissioners in elections conducted this fall.

"I am honored and humbled by the opportunity to serve our 20,000 members," Turner said. "Thank you all who have supported me. I am so grateful for all the magnificent nurses I will now do my best to represent."

Turner has worked at North Memorial Medical Center in Robbinsdale for 10 years, the last five in the ICU. She also worked at Abbott Northwestern for 10 years before that.

"I've been involved in the labor movement since I was 17," she said. "I was a nursing assistant in a nursing home where, as the night representative, my first big issue was getting a decent holiday meal for the night shift! I've continued that advocacy over the years and my goals have expanded to issues such as making the workplace safe for nurses and all other healthcare workers."

Turner says her vision for the future is that all nurses realize how valuable they are to their communities and how necessary they are to improving the healthcare system and society as a whole.

"MNA and the nursing profession face many challenges," she said. "We will meet them together in a united show of solidarity. Each and every member deserves respect for the work we do and the care that we give. I look forward to meeting members and visiting as many MNA facilities as possible."

Other results announced December 2:

First Vice President: Bernadine (Bunny) Engeldorf

Second Vice President: Deb Haugen

Secretary: Jennifer Michelson

Treasurer: Judy Russell-Martin

Board of Directors – Collective Bargaining

Theresa Peterson
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Melissa Hansing
Doreen McIntyre
Amy Buggert
Patricia Dwyer
Sarah Lake
Robin Henderson
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Jody Haggy
Elaina Hane
Tammy Fritze
Laurie Bahr
Katie Quarles
Candy Matzke
Carolyn Jorgenson

Board of Directors- Non-RN

Katie Grams

Board of Directors - Non-Collective Bargaining Non-Supervisory

Susan Kreitz

MNA newly elected officers, board directors and commissioners

Commission on Governmental Affairs:

Kathrine (Kate) Drusch (CD 2)
Kathleen Malecki (CD 3)
Barbara Forshier (CD 4)
Diane McLaughlin (CD 5)

Newly Elected cont. on Page 19



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.

LABOR ADVOCACY

Unity and involvement lead to Moose Lake contract



MNA members make their presence known at hospital ribbon cutting.

willing to go to different gatherings and were great at communicating with each other. This was one of the biggest factors in reaching such a great outcome with the contract in a shorter time than in the past.”

Negotiations started with the hospital proposing 18 concessions.

“More members got involved because they were concerned about all of the concessions the hospital proposed,” said Zinter. “They thought this was really unfair.”

Members showed management a united front at every step of the way, including attending a board meeting and the ribbon-cutting ceremony for the hospital’s \$38 million building project.

“Management saw we were pushing back more than in the past,” said MNA Moose Lake Co-Chair Kyle Landwehr. “We showed up at a board meeting wearing red, presented a petition signed by nearly all members, and said we appreciate the new building, but it’s not the building that takes care of patients – it’s the nurses and other staff.”

Members also put up more postings around the hospital than in the past and communicated with each other through Facebook, email, and face-to-face meetings.

“Facebook is a fast and effective communication tool,” said Zinter. “Facebook really helped to keep members informed and involved during negotiations. We posted our proposals and the hospital’s proposals, which got a lot of attention.”

Members will continue to use Facebook and email to keep each other involved and united in the future.

Landwehr’s advice to MNA members negotiating contracts: “You shouldn’t be intimidated. You need to push for what is right.”

Murray County contract emphasizes safe staffing

Safe staffing was the priority for MNA members during Murray County Medical Center negotiations this fall.

“We focused on appropriate staffing during negotiations,” said Bargaining Team Member Audrey Groen. “We want to make sure patients receive the care they need and deserve.”

Members negotiated a minimum of three RNs scheduled per shift – a major victory because management had begun to staff fewer than that on night shifts, which could affect patient safety in case of emergency.

Nurses also negotiated increased access to management, including a nurse/management committee and a grievance system that allows for face-to-face meetings.

The no-concession agreement contains wage increases, a cap of 20 hours of call per pay period, and improvements to the weekend bonus.

The Slayton hospital is a critical access facility licensed for 25 beds.

Willmar nurses ratify contract



Back row L-R: Tyler Santjer, Laura Dannen, Ronna Roelofs. Front row L-R: Labor Rep Beth Williams, Carolyn Jorgenson, Nicole Mages, Josh Christoffers.

What a difference two years can make. Just ask MNA members at Rice Memorial Hospital in Willmar.

Their contract negotiations two years ago were very difficult, contentious, and prolonged.

This year, it took one bargaining session – before the contract expired – to reach a very favorable agreement.

“Over the years, our compensation had fallen behind comparable hospitals,” MNA Rice Memorial Chair Carolyn Jorgenson said. “The hospital was having trouble with turnover, recruitment, and retention. Nurses were concerned – and so was administration.”

“We came to the table prepared with data to show just how serious a problem it was,” said Steward Nicole Mages. “The facts spoke for themselves – and the hospital knew it had to do something.”

The wages-and-insurance-only negotiations resulted in compensation that brings Rice Memorial nurses closer to parity with nurses in comparable hospitals, including a wage increase of 11.5 percent over the three-year contract.

“This is a fair agreement that brings us into line with comparable hospitals in our area,” said MNA Rice Memorial Vice Chair Tyler Santjer. “It will help the hospital attract and retain qualified staff. Nurses stood up for a contract that protects patients and staff alike.”

Preparation leads to new contract for Avera Marshall

After two rounds of concessionary bargaining, MNA members at Avera Marshall Regional Medical Center were determined to stand strong in 2015 negotiations.

They made sure all members were prepared to fight, with education days, social events like an all-member barbeque, wearing red, doughnuts and coffee on the first day of bargaining, and keeping members informed and involved.

Their months of preparation paid off: members ratified a new contract in November that increases wages and maintains their current health insurance plan.

"Members felt united," said Bargaining Unit Co-Chair Val Buysse. "We're a cohesive group and members trusted our negotiating team. We're going in the right direction."

"This contract was very quick and there were positive outcomes on both sides," said Bargaining Unit Co-Chair LuAnn Lessman. "We had excellent help from MNA. We felt we could proceed quickly and had great outcomes. We were very fortunate to get a three-year contract."

The hospital offered an extra small wage increase if members switched to the non-contract health insurance plan.

Members voted that down, seeing that it could harm them in the future, and kept the right to negotiate health insurance.

"In the long haul, it was important for our nurses to not accept the proposal and have more stability with our health insurance costs," said Lessman.

MNA welcomes visiting nurses, hospice nurses



L-R: Crystal Yakacki, Kathy Everson, Michele Will, Sarah Simons, Haley Kerman

MNA extends a big welcome to RNs from the MVNA (formerly Minnesota Visiting Nurses Association) and Hospice of the Twin Cities (HOTC), who are integrating operations with the Hennepin County Medical Center.

About 100 RNs will be represented by MNA as of January 1, when the integration becomes final.

"The nurses at MVNA are looking forward to being part of a strong, well organized union with good leadership," said MVNA RN Kathy Everson. "The nurses feel that MNA will provide good support and that we will now be in a position to have our voices heard. MNA has been very transparent and open with the MVNA nurses, making sure our needs were taken into account when negotiating with HCMC."

"This new partnership benefits the nurses of MVNA/HOTC, HCMC and all MNA members," said MNA HCMC Co-Chair Michele Will. "HCMC is gaining 100 new members while the MVNA/HOTC nurses are joining the ranks of more than 1,200 nurses at HCMC and 20,000 MNA members. We are all stronger together. The MVNA/HOTC nurses have a stronger voice with MNA and better contract provisions. We are excited not only about the addition of 100 members but also about the new opportunities this creates for nurses at HCMC and improved care to our patients. Home care and community health nursing are the foundation of our profession. This important work is essential to keeping people healthy and out of the hospital. HCMC will now be able to provide quality nursing care to patients across the care continuum – from home to hospital, from pre-natal teaching to compassionate end-of-life care." "We are excited about this integration and about welcoming this group of uniquely experienced RNS to the HCMC bargaining unit," said HCMC Co-Chair Sarah Simons.

Winona RN activism leads to new contract



Kathy Green-Kaminsky, Penny Wunderlich

"We are the people who work at the bedside of the patients... Our assessments, interventions, and continuous monitoring are the face of Winona Health. We pride ourselves on the good job we do to keep patients safe, help them recover, and live well."

That's part of a powerful letter to the hospital's Board of Directors signed by nearly all Winona Health MNA members this fall, after it became clear the hospital was not bargaining in good faith during contract negotiations.

The hospital started out with a list of very offensive proposed concessions, which prompted nurses to unite and stand up for a fair contract.

They attended negotiations in a show of solidarity, and spoke about issues important to them, such as health insurance, unreasonable overtime, and short staffing.

Members took the unusual step of writing a letter to the Board of Directors to show how deep their concerns were.

The heartfelt letter made the case for a fair contract for RNs, emphasizing their dedication to patients.

"That made an impression on management," said MNA Winona Chair Penny Wunderlich. "It showed we were not going to back down."

RNs and the hospital reached a tentative agreement shortly after the letter went to board members; and members ratified it on November 10.

"We stood together in solidarity and won a fair contract," said Wunderlich. "We were united for the greater good of all – letting management know we value our contract. We know that with a union, we have a voice in the workplace."

LABOR ADVOCACY

Affiliations make us stronger

By Jean Ross, RN, National Nurses United Co-President and MNA member

Why are Minnesota nurses affiliated with National Nurses United and other unions?

As a long-time Minnesota Nurses Association member and now NNU co-president, I know first-hand how important our affiliations are.

When we speak with one loud voice, we are heard. There is strength in numbers.

NNU is a powerful, national movement of direct-care RNs that makes sure our voices are heard everywhere. We are 185,000 members strong. We are known for agitating and not giving up for our members, patients, and the public good.

NNU is a fierce advocate for the nursing profession, patients, and the health and well-being of all Americans. We take a stand and back it up with action.

Here's just one example of NNU's importance. Remember the Ebola outbreak last November? NNU was the driving force behind the national outcry for protecting healthcare workers caring for patients with infectious diseases like Ebola.

NNU took the lead in demanding the optimal protective equipment and training for healthcare workers and patients.

MNA President Linda Hamilton, other nurses, and I talked to dozens of media outlets throughout the U.S., bringing public attention to the importance of protecting healthcare workers caring for patients with infectious diseases of any type.



NNU produced materials, held events, and pushed elected officials to do the right thing.

Here in Minnesota, nurses stood together and did not give up in the face of opposition from the hospital industry. We talked to the news media, held a candlelight vigil, and pushed hospitals to do more to create safe workplaces for nurses and other healthcare workers.

NNU also:

- Sponsors national campaigns for social justice, public health, and nursing, including the Main Street Contract and the Robin Hood Tax;
- Is a national leader for Medicare for All, which will ensure all Americans have access to quality healthcare;
- Supports candidates for federal office who promote our issues, like the endorsement of Bernie Sanders for President;
- Advocates for RNs in Washington, D.C., working to ensure laws and regulations protect our patients and the nursing profession;
- Sponsors programs like the RNRN disaster relief program. Minnesota nurses have traveled the world to care for disaster victims;
- Provides resources and services you can only get from a national organization, like education and training from recognized experts on nursing and healthcare.

MNA members are stronger and healthier because of our affiliations with NNU and other unions.

As the African saying goes, "A single bracelet does not jingle."

A new year – a new website

Introducing MNA's new website.

- A new look
- More ways to find the information you're looking for
- Introducing the Member Center: easy access to members-only information
- Calendar
- Latest news about nursing, MNA members, benefits just for members

Check it out in 2016 at www.mnnurses.org



Grievance Corner

Welcome to the Grievance Corner, a new feature in Accent.

The goal is to inform members about contract issues and grievances that have arisen and been resolved.

Seeing what other bargaining units are doing can give you insight into grievances you can file to protect your contract or ways you can improve your contract in the next round of negotiations.

- Fairview Range Hospital nurses who work two shifts with less than 10 hours in between receive a “quick change premium” equal to payment for time-and-a-half, for the second shift. The grievance arose when several nurses noticed that, when they worked three eight-hour shifts in a 32-hour period — an eight-hour shift followed by a 16-hour shift — they were only getting paid their quick-change payment for eight hours and their overtime payment for eight hours. Management asserted that their system was correct, because there was no expectation that overtime would be “pyramided” with other bonuses; someone could not get two overtime premiums during the same 24-hour stretch. The key to resolution was that the overtime calculation was required to start at the same time of day. If the two shifts for which overtime was claimed happened on the same day, then under Department of Labor standards the Employer would only need to pay for one. But if the two shifts fell on different days, then the Employer would be expected to pay for both. All parties agreed that this was the best solution, and all nurses affected were paid for the shifts.

Takeaways:

Issues with hours and pyramiding can sometimes require very careful analysis of the shifts and the relevant laws; when in doubt, spell it out in the contract!

- Sanford Bemidji informed the Union of its intent to post positions that included 12-hour shifts while working every other weekend, instead of every third. The contract states, “Nurses working 12-hour shifts under a flexible work agreement will be schedule [sic] to work every third weekend. However, a nurse may voluntarily work more than every third weekend.” The Employer interpreted that clause to mean that nurses could voluntarily choose to sign up for a flexible shift that included work every other weekend. In the grievance, we argued that if the clause were read that way, then the first sentence would be meaningless; the Employer could post whatever they wanted, with the idea that accepting any posting would be “voluntary.” The Employer accepted our reading of the language and withdrew the postings.

Takeaways:

- 1) If something is described as “voluntary” or “by mutual agreement,” that language generally means on a “time-to-time” basis, rather than a situation that is “regularly posted.”
- 2) One of the most important rules of interpreting a contract is that it should be read to give meaning to all the clauses. If your interpretation would make certain lines completely meaningless, then it is not a reasonable interpretation. In this case, if the Employer could call a posting a “voluntary agreement,” then the first sentence would fail to limit their discretion at all, and there would be no reason to include it in the contract. Keep an eye out for cases where the Employer is trying to skirt language in the contract; it might be a case like this one.



2016 Mini Days on the Hill

**Sign your hospital up to adopt
your own Day on the Hill in 2016.**

**Visit the State Capitol to talk to
legislators about issues that affect
your patients and your profession.**

It's a rewarding and fun experience!

We meet at the MNA office in St. Paul in the morning to get a briefing from the staff and a quick training on talking to legislators. Then we carpool to the Capitol and tell our elected officials about unsafe staffing and how patients are at risk when there aren't enough nurses on duty, and other priority issues for MNA. MNA staff will be with us to guide us and answer questions — it couldn't be easier.

To get your hospital signed up, please contact Eileen Gavin at 651-414-2871 or Eileen.Gavin@mnnurses.org, or Geri Katz at 651-414-2855 or Geri.Katz@mnnurses.org.

Pick your day now

Available dates this session:

March 8, 9, 10, 22, 23, 24

April 6, 7, 13, 19, 20, 21, 26, 27, 28

May 3, 4, 5, 10, 11, 12

AT THE CAPITOL

State listens to MNA members' demands for protection and training

MNA members: give yourselves a pat on the back.

Because of members demanding better protection and training for healthcare workers caring for patients with infectious diseases following last year's international Ebola outbreak, the Minnesota Department of Labor and Industry (DOLI) announced in October that it's expanding outreach and compliance inspections in order to protect workers in the state's healthcare industry.

In a letter to MNA President Linda Hamilton, DOLI Commissioner Ken Peterson said Minnesota's Occupational Safety and Health Administration (MN OSHA) will increase the number of compliance inspections in the healthcare industry and focus on employers' protection of employees from health and safety hazards including bloodborne pathogens, safe patient handling, and transmission of aerosol diseases.

Last year, MNA representatives met with Commissioner Peterson and other DOLI staff to make the case for better protections for healthcare workers in the face of infectious diseases like Ebola.

MNA and NNU were leading national voices demanding optimal protective equipment and training for healthcare workers in the wake of a patient in a Texas hospital dying of Ebola and two nurses contracting the disease.

The state's decision to expand outreach and inspections shows that standing up for what's right does work.

2016 Legislative preview

MNA will continue to advocate for safe patient staffing, single-payer healthcare, and nursing practice issues in the 2016 Legislature.

The 2016 session, which starts on March 8, will be one of the shorter sessions in recent years.

The session must be done by the second Monday in May, giving legislators only 10 weeks to get their work done.

Because of the way the 2015 session ended, with a one-day special session in early June to pass education, jobs and energy, and agriculture and environment bills, they did not pass a tax or transportation bill.

We expect that a majority of the work in 2016 will center on tax and transportation issues, rather than health and human services or education, which did pass budget bills in 2015.

Additionally, with such a short session, many committees may only meet three or four times before the deadlines for bills passing out of committee, meaning the possibility of passing a major piece of health and human services related legislation is quite small.

The Legislature continues to be split between the two parties, with Republicans in control of the House of Representatives and Democrats in the majority in the Senate.

As with the last session, bills that may make progress in one side of the Legislature may not move in the other side because of political differences over what's the best policy for Minnesota.

In 2016, MNA will continue to educate elected officials about the importance of staffing in hospitals and to support recommendations from the Governor's Health Care Financing Task Force that would move Minnesota toward a single-payer system.

MNA member advocacy is critical to our success.

Please attend our 2016 Day on the Hill on March 14; and sign up for a special Mini Day on the Hill for your facility.



Workplace violence prevention bill signed into law



Governor Mark Dayton signs workplace violence prevention bill surrounded by MNA members.

Governor Mark Dayton signed into law the workplace violence prevention bill backed by MNA in a special ceremony on Oct. 15.

MNA members were instrumental

in passing the measure this year, filling the Capitol and telling legislators their stories about violence they've experienced, and why the bill was urgently needed.

Sen. Chuck Wiger was MNA's champion, introducing the bill and seeing it through the legislative process in just one year.

The new law requires all Minnesota hospitals to have a workplace violence prevention plan and provide training to workers on an annual basis.

The Minnesota Department of Health will enforce the law with licensed hospitals through their annual reviews, in response to complaints, and following adverse events. This includes the ability to fine hospitals for noncompliance.

MNA members shine in winter parades, charity events

MNA members in Duluth, Baudette, Fairmont, Bemidji, and Thief River Falls were among the MNA bargaining units showing their community spirit by participating in parades and charity events in November and December.



Baudette

MNA LakeWood Health Center employees in Baudette collected donations for local senior centers and sponsored a float in the Frost Fest parade on November 21. They collected non-perishable food items and monetary donations for local senior centers.



Bemidji

The MNA Bemidji nurses' float in the Night We Light Parade on November 27 not only made a point about the need for safe staffing, but won the "Best Float" award in the nonprofit category.



Duluth

Members proudly carried an MNA banner and marched in Duluth's Christmas City of the North Parade on November 20.



Fairmont

A snowstorm didn't stop Fairmont members from participating in the November 20 Glows Parade, which kicks off the holiday season.



Thief River Falls

Thief River Falls members raised money for the local food shelf by holding a Souper Cook Off on December 5.



HEALTH & SAFETY

Health and Safety Report

By Mischelle Knipe, RN, Health and Safety Committee Chair

The MNA Health and Safety Committee had a leading role at the 2015 Convention and House of Delegates in October.

The committee developed and was part of two major education sessions: workplace violence prevention and infectious disease.

At a session on the new workplace violence prevention law in Minnesota, MNA members Niki Gjere and Jody Haggy shared information on protecting yourself and others in the workplace, awareness in the environment, reporting violence by the worker, and a facility's responsibility in reporting.

These reporting changes occurred due to passage of the Workplace Violence Prevention Law in the 2015 Legislative Session.

Senator Chuck Wiger and MNA Governmental Affairs Specialist Jon Tollefson held a discussion and answered questions as part of this presentation.

The wealth of information will certainly help nurses protect themselves, other healthcare workers, patients, and family members in the workplace.

A presentation on infectious disease by Dr. June Fisher from the University of California was thought-provoking and chock-full of important information.

She shared information on the history of nurse action in the area of infectious disease, including nurse action during ID outbreaks, up to and including Ebola. We were inspired by all that nurses have accomplished – and what we can do in the future.

MNA nurse involvement in the development of sharps protection and protection of the healthcare worker from bloodborne pathogens has been instrumental in the work we do.

Nurse involvement in negotiations at Duluth St. Mary's resulted in a Letter of Understanding (LOU) for protections in caring for patients with or suspicion of Ebola was recognized and applauded.

The possibility of participating in the future development of PPE was also brought to light during this discussion.

Many of the nurses attending the convention expressed a great deal of interest in this subject.

If you are interested in more information on this work, please contact one of the members of the Health and Safety Committee.

Not all of the lessons learned were during the educational sessions at Convention.

There are many lessons to be learned from the diversity and social changes faced by others.

There is a treasure of vast knowledge that can be derived from the learnings of others and the challenges that we faced in the past.

These lessons can be utilized to overcome obstacles to providing the best care for all.

Not all conversations or stories with lessons learned are without humor. Lil Ortendahl offers more than precise, factual solutions to current day challenges nurses face daily: Lil reminded many of us of the humor in nursing practice as nurses desperately attempt to do the right thing in protecting our patients.

Others shared similar stories. If you have a humorous story about overcoming obstacles in preparing to enter nursing or while on the job, please forward them to me. I would like to compose a collection of such stories.

Please send your stories to mischelle02@gmail.com.

Looking forward to 2016, one of the critical issues the committee is planning to work on is protecting healthcare workers from the effects of chemotherapy. We plan to work with a stakeholder group calling for a Minnesota law standardizing the protection of healthcare workers who may be exposed to chemotherapy drugs.

This is just one of the exciting issues the committee will work on in 2016. If you are interested in joining us, contact Julie Kinsel at julie.kinsel@mnnurses.org.

Bernie Sanders: caring, compassion, community

Senator Bernie Sanders is the presidential candidate who best represents nurses' values of caring, compassion, and community.



That's why National Nurses United endorsed him and why members all over the country are working on his behalf.

MNA members participated in rallies, canvassing, and a march and debate watching party for the Democratic debate in Des Moines, Iowa, on Nov. 14.

The first-in-the-nation Iowa Caucus is a critical milestone for a presidential campaign; polls indicate Sanders is gaining support every day.

The support of nurses could put him over the top.

"Senator Sanders supports nurses and key issues, including guaranteed health care for all; reversing inequality, poverty and hunger; robust action on the climate crisis; taxing Wall Street speculation to fund good paying jobs and education; and many others," said NNU Co-President Jean Ross. "Bernie has the most comprehensive plan on improving Social Security benefits, guaranteed healthcare for all, free tuition at public colleges and universities, ending student debt, confronting climate change, and a host of other issues. That is why the nation's most trusted profession puts its trust in Bernie Sanders—and why we are proud to support him."

MNA is helping to connect interested nurses with volunteer opportunities to support Senator Sanders in both Iowa and Minnesota.

Options include hosting a house party, visiting Iowa voters to encourage them to caucus, and making phone calls in Minnesota.

Please contact Geri Katz at 651-414-2855 or Geri.Katz@mnnurses.org if you would like to get involved.

Practice and Education Commission reflects on productive year

By Bernadine Engeldorf, Chair

It's been another eventful year for the Practice and Education Commission as we continue to monitor trends in healthcare, update and improve our educational opportunities, and defend against assaults on the practice of nursing.

In 2015, we offered more than 20 classes and workshops on topics including labor education and organizing, legislative activism and public engagement, practice issues related to the Nurse Practice Act, safe staffing, and refusing unsafe assignments.

In the past year, MNA delivered 144 distinct courses to 1,598 MNA nurses.

Far from focusing exclusively on the Twin Cities area, this year we offered courses in 34 different locations!

While we may not be able to bring classes to each and every MNA community, we are committed to reaching our members in all regions. In every three-month period, we bring MNA education sessions to one key town within the northern, central, and southern regions of the state.

The Commission just completed developing a new course that examines the charge nurse role and offers an MNA definition of how the charge nurse and the bedside nurse can work in concert for safe staffing.

We are also excited that our new hire orientation task force has reviewed and developed updated content for training materials for new MNA members.

These courses will debut in 2016.

In addition, the Commission assisted in the review, development, and recommendation of education topics for the 2015 MNA Convention.

The Commission provided liaisons to the Ethics Committee working group for POLST education, the Health and Safety Committee, the NNU Practice Committee, and developed our educational partnership with the East Side Freedom Library.

The Commission continues to monitor assaults on nursing practice across the state.

In particular, the Commission identified the following trends in 2014-2015:

- Continued attempts to use social workers, LPNs, physicians, cosmetologists, and other non-RNs to supervise the practice of professional nursing in contravention of the MN Nurse Practice Act;
- Attempts to expand the work of other professions into the legal sphere of professional nursing practice (e.g. Community EMTs, Psychiatric Technicians, Unlicensed Assistive Personnel);

- Standardization and “dumbing down” of nursing practice in line with the corporate healthcare model.

In response to these assaults, the Commission has:

- Lobbied legislators and the Board of Nursing in response to attempted scope creep. We gained modification of a bill authorizing Community EMTs to prevent them from practicing nursing;
- Advocated against Psychiatric Technicians performing RN work at the Department of Labor;
- Made formal complaints to the Board of Nursing regarding practicing without a license;
- Posted blogs and distributed other education materials for the public on nursing issues;
- Continued to advocate for the profession and collaboration with MNA staff to address nursing practice issues;
- The MNA House of Delegates passed two resolutions brought forward by the Commission: to expunge nursing disciplinary records after 10 years, and to support amending the medical marijuana legislation to include intractable pain as a qualifying condition;
- Continued to support the Safe Patient Standard campaign and attended legislative hearings on this and other nurse practice issues.

We expect the next year to be another busy one as the Commission continues to provide oversight of MNA educational sessions and monitors trends in nursing practice.

We are always eager to welcome new members.

The positions are elected, but there may be open seats.

If you are interested in becoming a Practice and Education Commissioner, please contact Julie Kinsel at julie.kinsel@mnnurses.org or 651-414-2864.



Continuing Education



MEMBERS IN ACTION

MNA member elected president of national Nigerian nurses organization

Ngozi Mbibi, DNP, MA, RNC, FWACN, FAAN, is the new president of the National Association of Nigerian Nurses in North America (NANNNA).

NANNNA is an organization of nurses dedicated to promoting health in their communities in North America and Nigeria.

As president, she will work to:

1. Ensure unity among Nigerian Nurses across North America;
2. Improve the health and quality of life of Nigerians;
3. Advocate for policies that impact the health and well-being of Nigerians at home and abroad;
4. Improve the standard of nursing education and nursing practice in Nigeria by collaborating with the Nursing and Midwifery Council of Nigeria;
5. Collaborate with other nursing and civil society organizations to improve nursing care and quality of life for Nigerians;
6. Disseminate research findings and policies to local, state, and federal agencies in order to improve the quality of healthcare for Nigerian citizens.

Mbibi is the chair of the Minnesota chapter, which will host the national organization's annual convention in 2016.

The theme of the conference is 'Strengthening the Healthcare Systems for Global Initiatives: Nurses on the Forefront.'

"We will be needing participation, advice, and professional presentations from MNA," she said.

Members are involved with many community education and volunteer services in Minnesota.

"We mentor young graduates and encourage our members to achieve higher education through collaboration with Grand Canyon University," she said. "We recruit interested individuals into the nursing profession. We have conducted numerous seminars both for our members and the Nigerian community. We have addressed issues like depression, domestic violence, hypertension, diabetes, and the end of life and its impact on families as it relates to Nigerian nurses and other Nigerian communities in Minnesota. We have distributed books, clothes, and computers to communities both in Minnesota and abroad. We volunteer for medical missions to Nigeria and have continued to collaborate with many professional and nonprofit organizations by volunteering time and money."

Mbibi is looking forward to partnering with MNA on future projects, including the 2016 NANNNA convention.



Ngozi Mbibi

Single-payer healthcare movement is growing



Hundreds marched on Blue Cross/Blue Shield in Chicago to support single-payer healthcare.

Single-payer healthcare is achievable and necessary, according to MNA members who attended an October conference in Chicago.

MNA members, nurses from throughout the U.S., physicians, business owners, and other healthcare advocates from throughout the U.S. shared strategies, research, and ideas for implementing Medicare for All at the event.

"We came back inspired and ready to step up the campaign for single-payer in Minnesota," said MNA Executive Director Rose Roach. "Minnesota is well positioned to lead the nation in creating a single-payer system that guarantees healthcare as a human right."

Beside education sessions and networking, hundreds marched on Blue Cross/Blue Shield in Chicago to demonstrate the growing movement in support of single-payer healthcare.

MNA Calendar

January:

GAC - January 27

February:

MNAF - Feb 2

March:

Day on the Hill - March 14

April:

Student Nurses Day on the Hill - April 7

Cloquet member has 'Healing Touch'

An MNA member in Cloquet is taking the lead in bringing pain and stress relief to colleagues – and eventually – patients.

Dawn Schubert provides Healing Touch therapy for colleagues at Community Memorial Hospital on a voluntary basis, with the blessing of her manager and the hospital.

"Healing Touch is an energy-based therapy where practitioners use their hands in a heart-centered and intentional way to support and facilitate physical, emotional, mental, and spiritual health," she said. "I have received very wonderful comments about how the sessions have helped people." The hospital has provided a small office for Schubert to provide the therapy to co-workers after work several times a week.

"It's very relaxing, comforting, helps release stress, and alleviates pain," Schubert said. "Nurses especially have physical and mental stress, and tell me they really appreciate something that helps them."

Schubert is taking classes to gain higher certifications and hopes to provide Healing Touch therapy to patients in the future. She currently has certification through "Healing Beyond Borders."

Many hospitals and other healthcare facilities offer Healing Touch programs, including a pilot program at St. Mary's in Duluth.

"It feels so good to help people feel better," she said.



Dawn Schubert

Need for Safe Patient Standard continues to rise

Patient safety in Minnesota continues to decline as hospitals base staffing decisions on finances, and the state lacks a minimum standard of care for all patients.

The latest research documenting declining patient safety coincides with what Minnesota nurses are reporting on Concern for Safe Staffing forms.

Leapfrog's Hospital Safety Score ranked Minnesota 32nd in the country for the percentage of "A" grades for patient safety, compared to 15th last year.

MNA continues to push for a Safe Patient Standard in the Legislature, as these alarming reports show staffing is getting worse.

MNA now has a Policy Project Specialist focusing on staffing, patient safety, and bringing a Safe Patient Standard to Minnesota.

Carrie Mortrud, RN, is working on staffing via a three-pronged approach: regulatory, members, and the public.



Carrie Mortrud, RN

Regulatory

- Work with the Minnesota Department of Health on creating categories to better understand the types of problems and patient safety issues members report on the Concern for Safe Staffing forms (CFSS);
- Review CFSS forms with the Minnesota Board of Nursing to find a way to gain the Board's support. It's important to point out the Board's mission is to protect the public by holding the systems accountable for ensuring the right nursing staff is available for each patient's specific needs.

Members

- Review and follow up on all the CFSS forms that members submit by contacting labor representatives to learn more about the hospital's staffing habits, grid changes and/or processes to deal with insufficient staffing.
- Track and categorize the data to bring back to members or provide labor representatives data they can use to set up meetings with management to try to make temporary or permanent changes;
- Attend local bargaining unit meetings, and meet with management to work on specific staffing issues.

Patients/Public



- Educating the public. MNA created "New Patient Orientation" cards and handed them out at the State Fair. The cards tell people what to expect when they go to the hospital, and what their rights are as patients.
- Getting the public engaged by asking people to fill out our patient survey at www.safepatientstandard.com, the SPS website.
- She blogs and posts about staffing on Facebook at Carrie Mortrud, RN. She blogs at www.safepatientstandard.com to engage members as well as educate the public.

For specific SPS questions, comments, or assistance, please contact Carrie at Carrie.Mortrud@mnnurses.org.



MEMBER BENEFITS

Member benefits just for members

Don't miss out... your membership in MNA gives you access to a wealth of benefits like scholarships, financial assistance, and discounts on products and services you use every day.

MNAF scholarships and grants

The Minnesota Nurses Association Foundation funds research grants and scholarships for members, members' children in college, and students.



Are you or a colleague planning on research or taking classes in nursing? Do you have a child who's in an undergraduate program? Be sure to visit the MNAF Research Grants and Scholarships page on MNA's website at www.mnnurses.org to see if funding is available.

MNA Financial Wellness

MNA members can talk to independent, objective advisors to plan their financial futures. You can find details on the Financial Wellness Program page on MNA's website at www.mnnurses.org.

MNA Disaster Relief Fund

MNA has a special fund for members affected by disasters like tornadoes, floods, other natural or man-made events that affect life, property, livelihood, or industry. You can find more information by logging in at www.mnnurses.org.



Union Plus Discounts

Union Plus provides union members and their families with valuable consumer benefits. By using the collective buying power of unions, Union Plus offers valuable, discounted products and services exclusively to working families, including:

- Wells Fargo mortgage program to help members and their children buy or refinance a home, including \$500 cash back;
- AT&T wireless - 15% discount;
- Credit cards;
- Entertainment discounts;
- Flowers and gift basket discounts;
- Car rental, auto insurance, Goodyear tires and service, emergency roadside assistance, and the purchase of vehicles;
- Medical bill assistance.

Science Museum Computer Class Discounts

The Minnesota Science Museum has a division that offers a wide variety of computer education courses, from PC or Mac Basics, to designing websites. Through MNA, you can receive \$30 off the price of these courses.

Office Max Discounts

The MNA Office orders office supplies from Office Max.

Based on the large quantity of purchases, and the business account set up, the office receives discounts. Now MNA members can receive the same discounts. Log in on www.mnnurses.org to print out the Retail Connect Card to start saving!

Medicare and Dental Insurance

MNA has made available to its Medicare-eligible retirees and their Medicare-eligible relatives (including aunts, uncles, moms, dads, brothers, sisters and cousins who are Medicare-eligible) a voluntary Group Medicare Retiree plan offered through Medica Insurance, and marketed by Holden Insurance Agency.

A group dental plan is also available for retirees of any age, their spouses and/or children, and any MNA members who currently do not have dental insurance through their employers. More information is at www.mnnurses.org.

Savings on pet insurance

MNA members are eligible for discounts on pet insurance.

Log in at www.mnnurses.org to find more information about those benefits and more.

Don't mess with nurses

Nurses are passionate about their profession.

Hosts of 'The View' television program learned that lesson the hard way this fall.

You may remember host Joy Behar criticizing Miss Colorado for wearing scrubs and talking about her pride in being a nurse during the Miss America competition last October.

Behar asked why she had a "doctor's stethoscope" around her neck.

Nurses around the country rose up and responded to that insult loudly and clearly.

Hundreds of thousands of posts on social media from nurses and people who know what nurses do – physicians, patients, former patients and others – created a firestorm of protest.

The MNA Board of Directors sent a letter to Kelley Johnson, Miss Colorado, thanking her for her "courageous advocacy of our profession. The fact that you used the talent portion of the Miss America competition to showcase what it means to be a caring, compassionate nurse shows your dedication to the nursing profession and our patients."

It took 'The View' a couple tries to apologize when they saw what they had done – and lost some advertisers in the process.

The moral of the story is – don't mess with nurses. We will defend our profession and our patients to the end.



MNAF year in review

By MNAF Chair, Hans-Peter de Ruiter

2015 was another successful year in distributing scholarships.

Thirty MNA members and nursing students received a total of \$69,500 in scholarship support. The MNAF offers scholarships in three broad categories.

The first is for MNA members returning to school for a BSN, Masters or DNP/PhD in Nursing.

When selecting recipients, we seek members who have supported MNA and its institutional goals and priorities, whether through work within hospitals or by engaging in legislative or labor activism at the regional or state level.

The second category comprises current nursing students who have not worked as RNs but have become MNA associate members. To become an associate member, students need to have attended the MNA Student Day on the Hill, volunteered with our organization, or attended an MNA educational session.

The recipients of this scholarship must also demonstrate excellent understanding of and support for the strategic goals of the MNA.

It is exciting to help support the future generation of MNA members and leaders by supporting their education.

Finally, the newest and most competitive scholarship is the Legacy Scholarship.

This scholarship offers children of MNA members a one-time \$2,000 scholarship regardless of their major areas of study. This scholarship was not only initiated to help the members in paying for their children's education, but also to create MNA friends and supporters beyond the nursing profession.



When selecting recipients, we look at the level of MNA involvement of the parent, but even more important is the applicant's demonstrated support for and understanding of the MNA priorities as discussed in the application essay.

Due to the overwhelming level of interest and enthusiasm for the Legacy Scholarship, the MNAF is looking at expanding the number of scholarships next year.

The MNAF is grateful to all members who support the scholarship by selecting MNAF as their dues option.

By supporting nursing education and the education of MNA members, we are not only supporting people for a semester, but helping to strengthen MNA and the cause of the staff nurses in the long run!

The MNAF board would like to recognize committed members Joan Liaschenko, Niki Gjere, Darlene Mechtenberg, and Lori Christian.

We would all like to extend our gratitude to Liz Voss and Desirée McCarthy who will be stepping down after many years of dedicated service to the MNA Foundation.

If you are interested in becoming a member of the MNAF board, please contact Julie Kinsel at julie.kinsel@mnnurses.org or 651-414-2864 for more information.



Share a smile!

Quips and Quotes

A new word is coined at MNA.

During the October House of Delegates, President Linda Hamilton was passionately giving advice to members to be 'vigilant' against hospital management attempts to undermine unions. However, some members heard her say 'bitchilant.' Some of us realized President Hamilton's apparent slip of the tongue coined a new word that can be useful for MNA, with a definition of "the process of constant, recurrent intent with emotion."

Thanks for the slip of the tongue, President Hamilton!

Submitted by Jill Walker Markie and Jen Morse to the Convention Hotline newsletter

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 here. Email them to Barbara.Brady@mnnurses.org

Welcome to the Ethics Committee Corner!

By Liz Voss, Ethics Committee Member; Practice and Education Commissioner



Ethics Book Club and author Hannah Brown

September Book Club Recap

On September 15, the MNA Ethics Book Club had the privilege of discussing “If I Could Tell You” with author Hannah Brown, who resides in Jerusalem and joined us via Skype even though it was 2 a.m. in Israel!

She has a son with autism and drew inspiration for her book from personal experience.

From smiles to tears, the book provides an opportunity for the reader to walk in the steps of four families as they live the autism experience.

Each parent’s situation is as unique as the child. Through sharing personal stories, they discover alternative therapies, develop supportive friendships, and find hope.

During our book club discussion, Hannah shared her insights about having a child with autism. She recounted one experience with a dentist who sat in the waiting room with her son, Daniel, and read him a Dr. Seuss book. Once in the examining room, it took the dentist mere minutes to get a clear X-ray that normally would have been an ordeal.

Hannah was moved by this dentist’s effort to take the time to make an extremely anxious autistic child calmer and more trusting of a medical professional.

Hannah expressed the value of healthcare providers employing a non-judgmental approach toward the caregivers.

She encouraged us to keep an open mind and listen, recognizing that parents are passionate advocates for their child’s optimal health.

Since autism is a spectrum disorder, parents know their child’s unique strengths and challenges.

She suggested using phrases such as “typically developing child” as opposed to “normal” - it is difficult to be reminded your child is “abnormal.”

To increase your understanding about the autism experience, the Ethics Book Club strongly encourages members to read “If I Could Tell You” by Hannah Brown.



2016 Ethics Book Club Selections

By Sue Kreitz, MNA Ethics Committee Chair

We encourage members to join our wonderful book club. This gives you the chance to read some great books and occasionally meet the authors who may join us in person or on Skype.

We love to get recommendations from members as we consider books that will provide rich discussions addressing ethical dilemmas in nursing and healthcare.

Here are the selected titles and dates for 2016 (we meet at the MNA Office in St. Paul from 5-7 p.m.):

Tuesday, February 16

- “*Normal at Any Cost: Tall Girls, Short Boys, and the Medical Industry’s Quest to Manipulate Height*” by Susan Cohen and Christine Cosgrove (2009).

Tuesday, April 19

- “*Hiding in the Open: A Holocaust Memoir*” by Sabrina Zimering (2001).

Tuesday, August 16

- “America’s Bitter Pill: Money, Politics, Back-Room Deals, and the Fight to Fix Our Broken Healthcare System” by Stephen Brill (2014)

October, 2016 (actual date, time, location TBD)

- “*Being Mortal: Medicine and What Matters in the End*” by Atul Gawande (2014).

Tuesday, December 6. TBD

- “The Insanity Offense: How America’s Failure to Treat the Seriously Mentally Ill Endangers Its Citizens” by E. Fuller Torrey (2008, 2012).

Please join us for a Book Club session in 2016!

MNA members make holidays brighter for needy kids



MNA members throughout Minnesota collected thousands of toys for children through the Marines' Toys for Tots program in November and December.

Members from 13 hospitals in the Metro area collected more than 1,000 toys, gift cards, cash and checks, and food. They were featured on KARE-11 TV on December 5.



United stock piles



Toys in MNA lobby



KARE 11



St. Francis, Toys for Tots, Steward Melissa Abeln

Commission on Nursing Practice and Education- Collective Bargaining

Robert Kucera
Lynnetta Muehlhauser
Sherri Lidholm
Brenna Curran

Commission on Nursing Practice and Education- Non-Collective Bargaining

Deb Meyer
Rebecca Romosz

Minnesota AFL-CIO Delegate

Mary Turner
Bernadine (Bunny) Engeldorf
Deb Haugen
Linda Hamilton
Peter Danielson
Theresa Peterson
Jennifer Michelson
Gail Olson
Melissa Hansing
Lori Christian
Judy Russell-Martin
Robin Henderson
Carolyn Jorgenson
Bernadette Fielding
Katie Quarles
Candy Matzke

MNA House of Delegates Collective Bargaining Delegates

Abbott Northwestern Hospital/Phillips Eye Institute

Diane Johnson
Laurie Bahr
Lynnetta Muehlhauser
Margaret (Peggy) Henrickson
Diane McLaughlin

Children's Hospital, Minneapolis

Deb Haugen
Linda Hamilton
Judy Russell-Martin
Melissa Hansing
Kathleen Moore
Amy Buggert
Doreen McIntyre
Tammy Fritze
Kathleen Malecki

Children's Hospital, St. Paul

Elaina Hane

Fairview Lakes Medical Center

Susan Kreitz

Fairview Riverside

Jody Haggy
Candy Matzke
Charlotte (Kava) Zabawa
Phyllis Wood
Brenna Curran
Courtney Lucht

Newly Elected from Page 5

Fairview Southdale Hospital

Sandra Thimmesch

HealthEast St. Joseph's Hospital

Bernadette Fielding
Richard Hebrink
Sandie Anderson

Mercy Hospital

Cassandra Hamilton

Methodist Hospital

Mary McGibbon
Stacy Enger
Lori Christian

State of Minnesota

Rebecca Romosz

North Memorial Health Care

Mary Turner
Theresa Peterson

Rice Memorial Hospital

Carolyn Jorgenson
Tyler Santjer
Nicole Mages

Essentia St. Mary's Medical Center

Mary Kirsling
Deanna Anderson
Mary Beth Boynton

Sanford Bemidji Medical Center

Peter Danielson

Sanford Worthington Medical Center

Deb Meyer

United Hospital

Bernadine (Bunny) Engeldorf
Barbara Forshier
Michael Ciampi
Jennifer Michelson
Robin Henderson
Katie Quarles
Heather Jax
Barbara Kiefat
Cynthia Petty

Unity Hospital

Gail Olson
Mischelle Knipe
Rachelle (Shellie) Marvin

Essentia Health Miller-Dwan Medical Center

Patricia Dwyer
Marcia Swanson

CONVENTION RECAP

Convention recap: navigating the future

Delegates at MNA's 2015 Convention and House of Delegates were inspired, energized, and ready to navigate the union's future following four days of learning, fun, and heartfelt debate about issues and policies.

They made improvements to MNA's Board of Directors, committee and commission structure in order to better serve members, including reducing the size of the Board and changing the terms of office on commissions and committees from two to three years, effective in 2018.

"These changes will make MNA run more smoothly and ensure members participate in our union," said MNA President Linda Hamilton.

They adopted resolutions dealing with Board of Nursing expungement of disciplinary and non-disciplinary records, and medical cannabis.

Log in on MNA's website at www.mnnurses.org to see the resolutions, amended bylaws, legislative platform, and 2016 strategic goals and priorities from the House of Delegates.

"We are not just 'a nurse' – we are a movement," MNA President Linda Hamilton told delegates. "Just in the last year, we fought to protect health-care workers and patients from infectious disease outbreaks, beat the odds to get a workplace violence prevention bill through the Legislature, kept up pressure for a Safe Patient Standard, won some major legal decisions and arbitrations, and secured fair contracts for members in 13 bargaining units. We have a lot to celebrate, but there are many challenges ahead and we can't let our guard down."

Hamilton told delegates that attacks on unions and working families are continuing.

"We all must stand together in solidarity against those who want to destroy us with Right-to-Work laws, court challenges to our basic rights – anything they can think of," she said.



Hamilton said 2016 will be a critical year for unions, the nursing profession, and patients, with more than half of MNA's bargaining units in negotiations, elections for state and federal offices, and a pending U.S. Supreme Court ruling that could take away all unions' rights to charge fair share or agency fees to cover the cost of providing union representation.

Hamilton urged delegates to show solidarity – on the local, state, and national levels.

"It is time for labor to circle our wagons and prepare to fight like our union depends on it – because it does," she said.

MNA Executive Director Rose Roach urged delegates to continue advocating for their patients, their profession, and unions everywhere as 2016 approaches.

"We will be at the bargaining table negotiating on behalf of 14,000 of our members, and we must see this as the opportunity it is – to stop the dehumanizing of the profession, to stop the de-skilling of the profession, to stop the corporatization of healthcare, and to fight – and win – for the safety and care of patients, for the health of our community, and for recognition of the value our members bring to a system that focuses far more on corporate greed than on human need."

Delegates also heard details of the dangers of Right to Work, plans for continuing the campaign for a Safe Patient Standard, the need for a single-payer healthcare system, and how solidarity will be critical in the coming months and years.

Next year's Convention and House of Delegates is Oct. 9-11 at the Radisson Blu in Bloomington.

CONVENTION RECAP

Building relationships with young members, student nurses

One of MNA's ongoing goals is to continue outreach and relationship-building with younger nurses.



What better way to introduce our organization to the next generation of nurses than to develop relationships with students?

This year at the MNA Convention, we were thrilled to welcome Katie Kemp, the president of the MN Student Nurses Association.

Kemp was joined by fellow MSNA board members Andrea Janssen, secretary/treasurer; and Bree Flicek, director of communications.

The MSNA board members joined us for the National Nurses United education and the awards banquet.

Many MNA delegates took the opportunity to meet and bond with these young nursing leaders.

We look forward to continue strengthening these relationships at the Student Nurses Association Convention, which is Feb. 20 at St. Catherine's University.

Welcome sign is out for retired nurses



Retirees at Convention.

MNA is reaching out to a valuable resource: our retired members, to keep them actively engaged in supporting their profession as well as their union.

The MNA Board of Directors recognized the need to increase involvement of retired members in strategic planning earlier this year, and set up a process to include retirees in MNA activities.

"The importance and value of nurses who have retired is immense," said MNA Executive Director Rose Roach. "They are our activists, attending events that working members may not be able to get to. They are mentors who can explain the connection between nursing and political involvement to students and new nurses. And they are our historians. They have the experience and perspective of how nursing has changed, how they were viewed when they started out, and can tell current members why it's so important to be active in advocating for their profession and patients."

If attendance at a special breakfast during the October Convention was any indication, retired members are enthusiastic about this plan. Several dozen retirees packed a room, urging MNA to create more opportunities for them.

The Board of Directors will appoint a special task force to develop recommendations for a permanent Retiree Council.

If you are interested in getting involved in retiree activities, contact Samantha Riazi at 651-414-2885 (or toll free 800-536-4662 ext.185), or Samantha.riazi@mnnurses.org.

Delegates raise funds for charities; support union brothers and sisters

Delegates opened their wallets for charities during the 2015 Convention and House of Delegates, raising nearly \$4,000 for three organizations:

- \$1,422 for the MNA Disaster Relief Fund;
- \$2,000 for Open Your Heart to the Hungry and Homeless;
- \$390 for Doctors Without Borders.

Delegates also collected boxes of snack packs for The Family Partnership's Children's First Early Learning Center in Minneapolis.

MNA President Linda Hamilton, along with representatives of the Minneapolis and St. Paul Regional Labor Federations, presented them on Oct. 28.

The Family Partnership provides help and hope to Minnesotans who are struggling with difficult challenges or crises through counseling, education and advocacy.

Many thanks to delegates for their generous support of these important groups!



L-R: Doug Flateau, Minneapolis Regional Labor Federation Community Services Liaison; Kay Tellinghuisen, The Family Partnership Vice President of Early Childhood Services; Linda Hamilton, MNA President; Vicki Beebe, Saint Paul Regional Labor Federation Community Services Liaison.

CONVENTION RECAP



2015 *MNA Honors & Award Winners*

MNA honored members, students, and elected officials for their work on behalf of the nursing profession, patients, and their communities at the Awards Banquet at the 2015 Convention and House of Delegates.



Senator Chuck Wiger
Public Official Award



Kathleen Moore
Distinguished Service Award



Paula Boeckmann
Ruth L. Hass Excellence in
Practice Award



Niki Gjere
Paul & Sheila Wellstone
Social Justice Award



Margaret (Peggy) McIntosh
Audrey Logsdon/Geraldine
Wedel Award



Jody Haggy
Mentorship in Nursing Award



Mary Turner
Sarah Tarleton Colvin
Political Activist Award



Jane Gilbert-Howard
Elizabeth Shogren Health
and Safety Award



Rochelle Boyce
Creative Nursing Award



Barbara Martin
President's Award

Nurses, retirees join Congressman Ellison to oppose rising drug costs



NNU Co-President Jean Ross speaks at news conference.

Nurses and retirees joined a representative of Congressman Keith Ellison at the MNA Convention in October to oppose an exemption for pharmaceutical companies that could result in skyrocketing drug costs.

Drug manufacturers are looking to be excluded from the Inter Partes Review (IPR) process that would delay generic drugs from coming to market.

This exemption drew a loud and unified protest from the 150 nurses and patients at the event.

"We're told by patients that they cut pills in half or only take them every other day instead of every day to try and make them last," said Jean Ross, a nurse and co-president of National Nurses United.

If drug companies are granted an exemption to IPR, they'll be able to delay competition from generic drugs, which would keep medication prices artificially high.

Americans are already struggling with the burden of high drug prices.

"Drug prices rose 12 percent last year - twice the rate of medical inflation," said Jamie Long, District Director for Congressman Keith Ellison (DFL-Minneapolis). "That's why it is so disconcerting that Big Pharma is attempting to boost their profits by preventing or delaying products from entering the market."

An exemption for this one industry would allow some companies to maintain monopoly pricing and force retirees to choose between medication costs and paying for other basic necessities.

"Carving out one industry like the big pharmaceutical companies is really just flat out wrong," said Will Phillips, the State Director of AARP Minnesota.

"The issue is clear. Big Pharma is at it again," said Dan Mikel, President of the Alliance for Retired Americans and President Emeritus of Minnesota State Retiree AFL-CIO.

MNA history corner

The Minnesota Nurses Association has a long and fascinating history of leading the way for patient care, the nursing profession, and social change.

MNA's history is replete with strong, visionary members who risked everything to do what was right.

That's why we're starting a new feature in Accent that will share some of the stories of our past, so we can honor and learn from them.



Did you know:

- In the late 1800s and early 1900s, Minnesota nurses took the lead to protect the public from people without training or qualifications claiming to be nurses. In those days, most nurses did not work in hospitals. They traveled many miles to rural and urban areas to care for patients in their homes, often in appalling circumstances;
- The first nurses' registry in the U.S. was established by the Ramsey County Graduate Nurses Association of St. Paul in 1898;
- MNA started as the Minnesota State Graduate Nurses' Association in 1905, for "the advancement of the nursing profession" and to further "efficient care for the sick." Licensing nurses was a top priority;
- Sarah T. Colvin was the new organization's first president.
- Two years later, MSGNA secured the first law for the state registration and licensing of nurses.

Let us know what you think about this new feature and ideas for the future. Email Barbara.brady@mnnurses.org.

SAVE the DATE

2016 Convention and House of Delegates

October 9-11

at the Radisson Blu in Bloomington

MNA Annual Notices Regarding Dues

(This notice is not applicable to employees of employers located in right-to-work states, except employees of employers in those states who are covered by the Railway Labor Act or are situated on U.S. Government property.)

EMPLOYEES SUBJECT TO UNION SECURITY CLAUSES

As an employee working under a Minnesota Nurses Association (MNA) agreement containing a union security clause, you are required, as a condition of employment, to pay dues or fees to MNA. This is the only obligation under the union security clause. You do not have to actually become a member of MNA. Individuals who are members pay dues while individuals who are non-members pay an equivalent fee. This fee, which is authorized by law, is your fair share of sustaining your union's broad range of programs in support of you and your co-workers, but non-members may file objections to funding expenditures that are non-germane to MNA's duties as collective bargaining agent and thereby be obligated to fees representing expenditures germane to MNA's duties as collective bargaining agent. This notice contains information relevant to deciding whether to object, and the internal MNA procedures for filing objections.

Non-member fee payers give up many benefits that only MNA members receive. As a member, you will have all the benefits and privileges of membership, including the right to fully participate in the internal activities of the union, the right to attend and participate in membership meetings, the right to participate in the development of contract proposals and to participate in contract ratification and strike votes, the right to vote to set or raise dues and fees, the right to nominate and elect MNA officers, and the right to run for MNA office and for convention delegate.

If you nonetheless elect to become a fee-payer objector, you will be required to pay, as a condition of employment, a "fair share fee" that represents a percentage of the monthly dues for reasonable and necessary costs incurred in acting as your bargaining representative. The fair share fee is calculated based on those "chargeable" expenditures germane to collective bargaining activities MNA incurred during the most recently completed fiscal year. Among those expenditures germane to collective bargaining for which objectors may be charged are those made for the negotiation, administration and enforcement of the collective bargaining agreement; all expenses related to representing employees in the bargaining unit, including the investigation and processing of grievances; MNA administration; and other germane expenses. Those expenditures that are not-chargeable are identified as expenditures for activities not germane to MNA's duty as your bargaining representative, such as expenditures for certain legislative activities and to support political candidates. Currently, 11% - 15% of MNA's expenditures are deemed to be not-chargeable expenditures. The financial information provided herewith summarizes the chargeable and not-chargeable expenses.

If you are a member and wish to resign from MNA, or if you do not want to become a member, and you object to paying dues equal to the amount customarily paid by MNA members and wish to pay a fair share fee of the monthly dues, you must notify MNA of your choice by sending a letter in the mail so stating to the Director of Finance, Minnesota Nurses Association, 345 Randolph Ave., Suite 200, St. Paul, MN, 55102. The letter of objection must be appropriately post-marked and must include your full name, mailing address, social security number, your employer's name, and your date of employment. In all cases, if you are thereafter employed as a new employee by another employer with a union security agreement, you must repeat the above process with respect to obtaining

fair share status with your new employer. Once a timely objection is received, MNA will advise you of your precise fair share fee and the categories of chargeable expenses used in the determination of that fee. If you have signed a dues authorization deduction card, MNA will instruct your employer to deduct that fair share from your paycheck. If you have not signed an authorization card, you must pay the amount of the fair share directly to MNA in a timely manner. This fair share status will be treated as continuing in nature. Should you wish to discontinue this status, you may do so at any time by contacting MNA.

MNA fully expects that few, if any, employees it represents will avail themselves of the option of fair share status since it firmly believes that all employees represented by MNA recognize the importance of all the expenses incurred by MNA on their behalf in the continuing struggle to improve the working conditions and job security of employees represented by MNA. While it is your legal right to be a non-member and to object to paying full dues, we believe that doing so is not in your best interests or in the interests of your co-workers.

Before choosing fair share fee payer status over full member benefits of MNA membership, read this notice carefully and be aware of the benefits that you will be giving up.

MINNESOTA PUBLIC SECTOR EMPLOYEES

The following additional information applies only to Minnesota public sector employees, who are required to pay a fair share fee assessment. The fair share assessment is that fee the Minnesota Nurses Association, as your exclusive representative, is allowed to charge non-members for collective bargaining and contract administration, pursuant to Minn. Stat. 179A.06(3). The Act provides that non-members of the Association be assessed a "fair share" fee in an amount not to exceed 85% of regular member dues. Commencing January 1, 2016, the amount of regular dues of MNA will be \$780 per year; fair share fee assessment will be \$662.40 per year.

The financial information provided herewith identifies expenditures for benefits available only to members (not-chargeable) and expenditures for collective bargaining and contract administration services that have been provided for bargaining unit employees without regard to membership status (chargeable).

An employee may challenge this assessment by filing a challenge with the Bureau of Mediation Services (BMS) within thirty (30) calendar days after receipt of this notice. The Bureau of Mediation Services is located at Suite 2, 1380 Energy Lane, St. Paul, MN 55108. The challenge must specify those portions of the assessment being contested and the reasons therefore, and copies of the challenge must be sent to your employer and this organization. Notice to MNA should be sent to the Director of Finance, Minnesota Nurses Association, 345 Randolph Ave., Suite 200, St. Paul, MN 55102. Telephone: 651-414-2800.

The Public Employment Labor Relations Act requires a fee for filing challenges. Forms for challenges and a copy of the rules governing them are available from BMS without charge.

Chargeable/Not Chargeable Expense Analysis

Fees charged to non-member fee payer objectors support expenditures made by the Minnesota Nurses Association and National Nurses United (NNU).

Not-chargeable items include lobbying costs for activity related to ideological and other political activities, as well as costs related to maintaining a political action fund. Newsletter costs are not-chargeable to the extent that the content is related to a not-chargeable activity. The chargeable portion of the National Nurses United (NNU) assessment is based on an analysis of the NNU audited expenses.

The actual and budgeted financial information below summarizes the chargeable and not-chargeable expenses with corresponding percentages for each level. Although the chargeable percentage is 85% - 89%, MNA has decided to charge 85% of regular dues to nonmember fee payer objectors.

Agency/Fair Share Fee Analysis Financial Summary

2014 Actual

Source: 2014 Audited Financial Statements

	2014 ACTUAL	OFFSETTING REVENUE	NET EXPENSE	CHARGEABLE	NOT CHARGEABLE	OVERHEAD ALLOCATION
ADMINISTRATION	2,706,674	152,082	2,554,592	86,445	845	2,467,302
GOVERNMENTAL AFFAIRS	344,050	-	344,050	340,826	3,224	-
LABOR	3,917,309	4,160	3,913,149	3,913,149	-	-
COMMUNICATIONS	624,645	-	624,645	618,792	5,853	-
MEMBER MOBILIZATION	1,775,367	4,353	1,771,014	948,437	822,577	-
EDUCATION	202,994	-	202,994	201,092	1,902	-
NURSING PRACTICE	74,439	-	74,439	73,742	698	-
CONVENTION	153,527	800	152,727	151,296	1,431	-
WORKSHOPS	3,829	-	3,829	3,793	36	-
MEMBERSHIP RECORDS	313,685	-	313,685	310,746	2,939	-
SUBTOTAL	10,116,519	161,396	9,955,124	6,648,317	839,505	2,467,302
ALLOCATION OF OVERHEAD				2,190,678	276,624	
ALLOCATED TOTALS	10,116,519	161,396	9,955,124	8,838,994	1,116,129	
NNU ASSESSMENT	2,940,411		2,868,367	2,405,413	462,954	
AFL-CIO ASSESSMENTS	329,200		329,301	315,470	13,831	
DUES ALLOCATION	383,861		383,861	-	383,861	
GRAND TOTAL	13,769,992	161,396	13,536,653	11,559,877	1,976,776	
PERCENT(%) OF TOTAL				85%	15%	

2015 Budget

Source: 2015 Budget

	2015 BUDGET	OFFSETTING REVENUE	NET EXPENSE	CHARGEABLE	NOT CHARGEABLE	OVERHEAD ALLOCATION
ADMINISTRATION	2,964,823	135,312	2,829,511	330,166	1,644	2,497,701
GOVERNMENTAL AFFAIRS	531,698	-	531,698	273,902	257,796	-
LABOR	4,268,377	-	4,268,377	4,268,377	-	-
COMMUNICATIONS	592,660	-	592,660	590,613	2,047	-
MEMBER MOBILIZATION	1,773,222	-	1,773,222	1,485,074	288,148	-
EDUCATION	247,873	-	247,873	247,017	856	-
NURSING PRACTICE	189,979	-	189,979	189,323	656	-
CONVENTION	228,312	-	228,312	227,523	789	-
WORKSHOPS	10,000	-	10,000	9,965	35	-
MEMBERSHIP RECORDS	316,501	-	316,501	315,408	1,093	-
SUBTOTAL	11,123,445	135,312	10,988,133	7,937,367	553,065	2,497,701
ALLOCATION OF OVERHEAD				2,335,001	162,700	
ALLOCATED TOTALS				10,272,369	715,764	
NNU ASSESSMENT	2,985,657		2,985,657	2,527,060	458,597	
AFL/CIO AFFILIATION	336,000		336,000	321,888	14,112	
DUES ALLOCATION	374,500		374,500	-	374,500	
GRAND TOTAL	14,819,602	135,312	14,684,290	13,121,317	1,562,973	
PERCENT(%) OF TOTAL				89%	11%	

MNA Member Dues for 2016

MNA dues will increase from \$64 per month to \$65 per month for 2016. Annual dues rates are calculated based on the change in the average starting pay of bargaining unit contracts. If the average starting pay increases, your MNA dues will increase on January 1 of each year. 2016 rates are based on the average change in starting pay rates at December 31, 2014. MNA dues for non-RNs will increase from \$21.50 - \$43.00 per month to \$22.00 - \$44.00 per month.

Bargaining unit members who work less than 832 hours per year may be eligible for reduced dues at 50% of the regular dues rate. Dues for registered nurse members who do not belong to an MNA bargaining unit are also 50% of the regular dues rates.

An Associate Membership option is available for those RNs who are not represented by MNA for collective bargaining, who wish to have access to MNA for volunteer activities, but with no additional membership rights. Student nurses enrolled in an RN Nursing program are also eligible for Associate Membership.

The annual and monthly dues rates for the various categories of dues payers are listed below. If you have any questions related to your MNA dues, please contact the MNA office and ask for a Membership Account Specialist.

MNA Dues/Service Fee Effective January 1, 2016

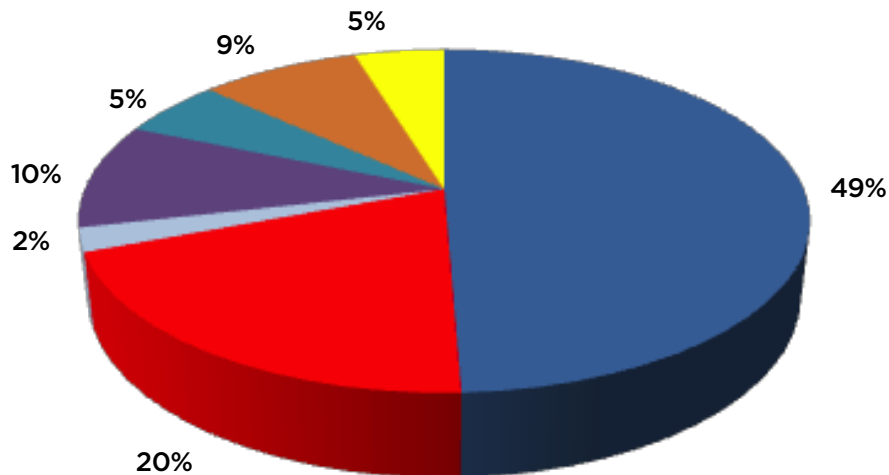
Category	Annual	Monthly
RN bargaining unit dues	\$ 780.00	\$ 65.00
Non RN-Professional dues	\$ 528.00	\$ 44.00
Non RN-LPN/Technical dues	\$ 396.00	\$ 33.00
Non RN-Other dues	\$ 264.00	\$ 22.00
RN bargaining unit-Service fee objector	\$ 662.40	\$ 55.20
Non RN-Professional-Service fee objector	\$ 448.80	\$ 37.40
Non RN-LPN/Technical-Service fee objector	\$ 336.60	\$ 28.05
Non RN-Other-Service fee objector	\$ 224.40	\$ 18.70
RN non bargaining unit dues	\$ 390.00	\$ 32.50
RN Association Membership	\$ 100.00	

Note: Bargaining Unit members who work less than 832 hours per year may be eligible for reduced dues at 50% of the regular dues rate.



Dues Revenue Allocation

- Salaries/Benefits - 49%
- Affiliation Fees (NNU/AFL-CIO) - 20%
- MNA Dues Allocation - 2%
- Negotiating Payments/Outside Fees - 10%
- Travel/Meetings - 5%
- Office Operations - 8%
- Office Rent/Insurance/Depreciation - 5%



Source: 2016 Projected

Annual Dues*	\$780	(\$65/month)
Less: NNU Assessment (Red Slice)	<158>	
AFL-CIO State & Regional Federations (Average)(Red Slice)	<14>	
Member Dues Allocation (Strike, MNAF, MNA PC) (Light Blue Slice)	<20>	
Amount Available for MNA Operations	\$588	(\$49/month)

*This figure will be 50 percent less for collective bargaining members working less than 832 hours per year and non-collective bargaining members.





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



Your voice at the Capitol can save lives.
Everyone in the health care industry –
from insurance companies, hospitals, and
pharmaceutical companies – is at the Capitol.
But **WE are the only ones who will advocate
for nurses and for our patients.**

Minnesota Nurses Day on the Hill **March 14 and 15 2016**

For more information or to sign up, contact Eileen Gavin, 651-414-2871 or Eileen.Gavin@mnnurses.org.