Nurses are stronger when we stand united

MNA is the largest union and professional association for registered nurses in Michigan. To our RN and health professional members, for more information about your contract or your bargaining unit, please contact your local MNA representative. If you are an RN interested in forming a union at your health care facility, please contact the MNA organizing department at 517-853-5512. (See story on page 9)

Get your RED on

The MNA website store is open for business. Join together in solidarity with fellow NURSES by wearing MNA RED. MNA is making t-shirts and scrubs available at our lowest negotiated cost. Order more items to share shipping expenses. To get MNA gear, go to: Bit.ly/MNAshop

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MNA PHONE: 888-MI-NURSE.
The Michigan Nurses Association opposes discrimination per its Constitutional Bylaws.
This year is the 200th anniversary of Florence Nightingale’s birth. We all know what a debt we owe to her and how relevant her work and words remain today.

As I think about nurses’ biggest challenges right now, I think of one of my favorite quotes of hers: “I attribute my success to this: I never gave or took an excuse.”

Nurses aren’t giving excuses during the coronavirus pandemic, and we’re not taking any, either.

We have unfailingly stepped up and taken care of COVID-19 patients, overcoming many obstacles such as lack of PPE.

Some of us (including me) sent our kids away or stayed in hotels or campers to keep our families safe.

Some nurses and other health professionals have even died.

Thanks to the collective power of our union, we have fought back against employers’ failure to protect us and provide what we need.

As MNA members, we have worked together to aggressively use every tool to stand up for ourselves and our patients. That includes collective actions, media coverage, lawsuits, MIOSHA complaints, grievances, and negotiations with employers.

Our union provides us with the resource and support to take all these actions. (See page 9 for examples of our wins.)

Our union is also committed to reforming the healthcare system. During this time, the coronavirus has shined a spotlight on our broken healthcare system.

People have also, thankfully, become more aware of the systemic racism that ails our society. Unfortunately, it took the tragic deaths of George Floyd and others to bring our country to this point.

All these challenges intertwine for us as nurses, knowing the cost that racism has when combined with our broken healthcare system.

Studies have found that people of color do not receive the same quality of healthcare and access to it. This adds to chronic illness and shortens life spans, including from COVID-19. These are disparities we see frequently in our work.

We also know that health professionals can be prone to implicit bias; even the most well-meaning nurse can discriminate or treat people differently without realizing it.

It’s important that we take advantage of this moment in our country’s history and the Black Lives Matter movement to recommit ourselves to solving these problems.

As the most trusted profession, nurses must lead the way. We are committed to making sure that everyone has equal access to quality, affordable health care.

We are committed to making sure that everyone can live safe, healthy lives and fulfill their full potential. These are rights that belong to all of us, not just some.

See PRESIDENT on page 4
PRESIDENT continued from page 3

We need to listen to people of color when they tell us their experiences, what they need and how to fix the system. This includes our patients, our colleagues, and our community. We can and we must do better, individually and collectively. No excuses.

We can accept no excuses, either, when it comes to holding our employers accountable. Through our union, we have a strong voice and the power of solidarity.

As we see more and more health care corporations banding together, we see how urgent it is for nurses to pool our power. Nurses are committed to putting patients over profits. Protecting nurses and our patients - not the corporate bottom line - is our union’s top priority.

Many times, nurses are the only ones standing up and fighting back against the corporate greed that permeates health care. Our patients count on us to advocate for them.

MNA is seeing an uptick in nurses from around the state who want to organize their workplace, realizing more than ever that unions are the way to get an even playing field and have a true, strong voice in our practice and our lives. (See ORGANIZING, page 9)

This is what MNA is all about: giving nurses collective power that makes an impact. I’m proud of our members and our union. We have met many challenges and we will continue to do so, together.

COVID Hardship Fund Helps Members with Financial Needs

Nurses and other healthcare professionals have faced incredible challenges during this pandemic. Yet as always, we have been steadfastly committed to the principle and practice of putting our patients first.

So many of us have made so many sacrifices: financial, physical, emotional, and more. Some moved away from their homes to protect their families. Others sent their children away to keep them safe.

To help with the financial burden, the Michigan Nurses Foundation established a COVID Hardship Fund for Michigan Nurses Association members.

The fund has served nurses and other health care professionals who are MNA members in good standing through two COVID hardship grants available (members can apply for one grant):

- $500 to make up for decreased income from reduced hours, or
- Up to $500 to pay for unreimbursed relocation expenses

The fund is possible due to the generous support of the Michigan Nurses Association plus community donations. We are looking forward to replenishing the fund so we can again help MNA members who need it.

The fund is committed to helping as many MNA members as possible. If you can help, please consider donating.

www.michigannursesfoundation.org/donate

Racism is an Urgent Public Health Crisis

Racism is an urgent, pervasive public health crisis in our country. It is a longstanding illness that comes from a deep-rooted hate exhibited by our country’s failing systems. As nurses, we especially see the results of racism in our country’s unequal health care system – often to the point of people of color suffering preventable illness and even early death. Nurses support the outpouring of peaceful activism currently shining a light on systemic racism, which is the path toward healing. We are committed to helping create a country in which all of us – not just some of us – can live safe, healthy lives.

Statement from Jamie Brown, RN, a critical care nurse at Borgess Hospital and president of the Michigan Nurses Association

BLACK LIVES MATTER
What has it been like treating COVID patients?

Exhausting. Emotionally and mentally. These critical patients are so sick and so fragile. Their condition changes quickly and drastically.

What effect(s) has it had on you?

I'm careful to follow precautions but every time I would work and take care of a COVID patient, for me it would start another clock. “Ok, two weeks from now I'll know that I'm ok.” … There’s that uncertainty and fear and then the emotional issue of caring for these patients and trying to communicate with family through Facetime. The uncertainties of work.

What’s been the hardest part?

Walking past all the “health care heroes” signs at work while we have been working under a contract extension since September 2019. Ascension has not bargained with the nurses over any changes and/or safety measures that were taken due to COVID. Our negotiation team had been faced with proposals to take, take and take some more from the heroes who work on the front lines. Negotiations have restarted and I hope we nurses are given the contract we heroes deserve.

What effect(s) has it had on you?

It’s depressing to see people so sick who don’t make it. To have them unable to be with their families and friends. For people unable to hold their loved one’s hand and talk to them, tell them they love them in person ... it’s really sad. It makes you dread going to work and that is sad because I really do love my job.

What has it been like treating COVID patients?

It’s been at times challenging, rewarding. In many ways you don’t treat them any differently than you treat any other patient. …It’s trying to make them comfortable with the fact that they know they have this virus and that they’re sick enough that they’re in the hospital.

With limitations and visitation polices, that made it very difficult. Normally family would be able to come and see them but with COVID that wasn’t possible. Technology made a huge difference but not without an emotional cost to myself. I shouldn’t be holding the hand of a patient as a surrogate but here we are.
MNA Wins COVID-19 Protections for Members

Throughout the pandemic, MNA has fought for provisions to protect and support nurses. Here are some examples of wins around the state:

- Special use additional (COVID) PTO
- Increases in PTO caps
- Protection from discipline (or "attendance occurrences") for use of PTO
- Protections for older, pregnant/breastfeeding, or immunocompromised nurses
- Allowances for time off flexibility due to school closures/childcare needs
- Continued employer benefit contributions for staff temporarily laid off or furloughed due to COVID-related low census, as well as the right to return to their positions
- Back pay for nurses reassigned to COVID duties
- Cancellation of mandatory reassignment and increased incentives for nurses who volunteer

Health Department Members Overcome Challenges

MNA members in county health departments around the state have faced their own challenges during the pandemic.

In some cases, many were transferred into communicable disease work to do contact tracing and other tasks. Others had to fight employers on privacy related to testing or take on a lot of overtime. Despite it all, they focused on serving their community as always.

The common denominator is that they all relied on using their power as union members to navigate these changes. Employers are obligated to bargain over changes like these, and as MNA members, health department nurses always had a voice in these decisions that affected them. That is the power of a union.

What would have happened without social distancing?

**Daily new cases per million, Michigan**

- With Stay Home, Stay Safe
- Without Stay Home, Stay Safe

Daily new cases at peak would have been ~2.7 times higher than Michigan actually saw.

Without intervention, Michigan might have experienced **28K more positive cases** before June 1.

Uncertainty: top 10% of simulations. Statistics on righthand side represent median metrics.
MNA Elected Board of Directors

MNA is run by nurses, for nurses and other health professionals

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Becky Mammel, RN ............................... University of Michigan Professional Nurse Council
Katie Pontifex, RN ................................ Professional Employee Council of Sparrow Hospital
April VanHaecke, RN ........................ Marquette General Hospital RN Staff Council
James Walker, RN ........................................ TC Munson Nurses Association

MNA STAFF

MNA staff works with members around the state to promote your safety and protect your rights.

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Data Entry ........................................ Sean Thompson
Lori Batzloff  from page 5

What’s been the most rewarding?
The teamwork among my fellow nurses, and the attending physicians, also NPs and PAs, the respiratory therapists, everyone. We have gained and shared so much knowledge in such a short amount of time and are still learning.
Also, providers are pretty good about letting us know when a patient makes it home. We don’t always get to know what happens after their ICU stay.

What one experience sticks in your head about taking care of COVID patients during this time?
More than once, a patient has opened their eyes and is only lightly or moderately sedated, and I can tell they are surprised by this person in a helmet or huge face mask. I must look very bizarre. I try to tell my patient frequently who I am and what I am doing and why I am wearing all this crazy garb, but again, they are so sick and, on some sedation, so it is difficult to know if they understand or remember what I tell them.

James Walker  from page 5

What’s been the hardest part?
For me the hardest part was the first time one of the patients that I cared for passed … She was in my care when we found out she was positive. She became very sick and like many patients required ventilation. I'll never forget talking to her before we had to intubate her and it was remarkable to me how at ease she was. Maybe she had accepted her fate, I’m not really sure. It was hard seeing her go.

This was early on in the pandemic, at least in Michigan. The fact that so many people were sick and so many people were hurt and dying. From my perspective it didn’t need to be this way. It wasn’t that we didn’t know. I was mad because we hadn’t responded to it enough or put protections in place to protect more people. That’s what made it harder – I felt like she didn’t need to die.

What’s been the most rewarding?
The first time we were successfully able to wean a patient off the vent and then do well and discharge them. That was a significant milestone for us. It was exciting, it was fulfilling. The other thing is the resiliency of staff; early on the willingness of myself and others to volunteer to take care of this population when there’s still so much I didn’t know. The willingness to adapt to so much change at once so we could provide care to this new population but also the population we always took care of before. We continued to do the care we pride ourselves on but also adapted to this new model.

What one experience sticks in your head about taking care of COVID patients during this time?
More than once, a patient has opened their eyes and is only lightly or moderately sedated, and I can tell they are surprised by this person in a helmet or huge face mask. I must look very bizarre. I try to tell my patient frequently who I am and what I am doing and why I am wearing all this crazy garb, but again, they are so sick and, on some sedation, so it is difficult to know if they understand or remember what I tell them.

It’s time to recognize the critical contribution nurses and midwives make to global health!

2020 INTERNATIONAL YEAR OF THE NURSE AND THE MIDWIFE.

#SupportNursesAndMidwives

World Health Organization
MNA has a Strong Voice with the Governor

MNA has been active in making our issues heard on the state level, including through interactions with Governor Gretchen Whitmer. We take every opportunity to advance our members’ priorities and needs. In the past few months:

• President Jamie Brown spoke at a live-streamed press conference with the governor about the need for federal funding for Michigan, especially for frontline workers;
• Interim Executive Director Diane Goddeeris had a call with the governor during which she reiterated MNA’s priorities;
• MNA frontline nurses held a Zoom call with the governor to share their experiences;
• PECSH-MNA member Terry Ballinger was selected to serve on a state task force about behavioral health; and
• MNA filed an amicus brief supporting the governor’s stay home, stay safe order to slow the spread of the coronavirus.

We will continue to advocate for MNA’s priorities in a bipartisan manner whenever and wherever possible.

(At left) MNA President Jamie Brown, RN, represented MNA at a live-streamed press conference with Gov. Whitmer, calling for federal funding for Michigan, especially for frontline workers.

ORGANIZING
More Nurses See the Value of a Union

During COVID-19, nurses who work in hospitals and health care settings where they do not have a union have seen the need to have a voice in the workplace. Not only have nurses faced a shortage of PPE, they have also experienced hospital administration changing policies daily and sometimes hourly.

These changes have often happened without the input of nurses and other health care professionals and have made it harder for them to do their work, be safe, and give a high level of care. Some nurses have wanted to speak out publicly about these issues but fear retaliation from their employers.

Many hear from colleagues who are MNA members in unionized hospitals about the voice they have in policy decisions and how they stand in solidarity to implement positive changes that protect themselves and their patients. They hear about how unionized nurses do this without fear of repercussion from their employer. They want to have that same voice.

This has moved them to explore unionizing their workplace. MNA has received an influx of nurses reaching out to talk through the process and move to action.

Unionizing a workplace takes commitment, bravery and solidarity. It is an uphill task, but one that is worth the time and effort. Here at MNA we understand that when we stand together we are stronger.

If you work at a hospital that is not unionized and you want to have a voice in your workplace, reach out to our organizing department at 517-833-5512 or on our website, www.minurses.org. A MNA staff person will reach out to you and talk with you about the process. Being part of a strong union is the best way to protect yourself, your patients and your profession.
MNA Members Adapt Actions, Communications to Pandemic

Despite the limitations that the pandemic brings, MNA members haven’t let it silence them. For example, nurses at McLaren Central Michigan Hospital in Mt. Pleasant held a socially distant informational picket. Nurses there are advocating for improved COVID-19 protections and more, as well as demanding a fair contract.

MNA has identified over $8.4 million that could be reinvested in the frontlines if every McLaren executive were to cap their salary at $1 million annually.

The picket was held outside the hospital, with members and supporters wearing masks and staying six feet apart.

Of course, communications have moved online, with many of us finding Zoom calls to be a part of everyday life and a vital way to connect.

At Michigan Medicine, UMPNC-MNA leaders held daily Zoom meetings along with MNA staff to keep members up to date.

No matter what, nurses find a way.
MNA Leads Union Coalitions to Push Back Against Employers

The only thing more powerful than a union is unions banding together. MNA is helping to grow this movement by leading coalitions that consolidate the power of nurses and other health care workers to counter the for-profit health care industry.

One example is bringing together multiple McLaren Health Care workplaces. A coalition of Michigan health care unions has jointly condemned McLaren’s lack of transparency about finances and PPE, many filing a charge that the health system has violated federal labor law by withholding information from frontline workers.

McLaren workers in MNA and the other unions across hospital campuses all wore stickers the same day in protest.

The outrage comes amid McLaren executives’ refusal to cap their salaries at $1 million each year. The coalition has called for the over $8 million that would be saved from executive compensation caps to be reinvested in the frontlines.

The other unions in the McLaren coalition are AFSCME Local 875, AFSCME Local 2650, IAEP Local 804, OPEIU Local 459, Teamsters Local 332, SEIU Healthcare Michigan, OPEIU Local 40, and UNITE HERE! Local 688.

A second coalition is bringing together health care workers in the Ascension system in Michigan and Wisconsin. The other unions in the coalition are WFNHP, OPEIU Local 40, and the Teamsters.

Together, these workers are demanding that Ascension provide contractually guaranteed safe staffing at all hospitals to prepare in the event of a second wave of COVID; cut executive compensation to reinvest in the front line; and treat all front-line workers with respect and dignity.

The more that workers pool our power, the louder our voices become.
NEW Online Continuing Education Course

Coronavirus: Where we’ve been, what we know, where we’re going

Nursing Knowledge and Protection During a Pandemic

Information about COVID-19 is changing daily. This continuing education module is designed to give healthcare professionals basic information regarding the coronavirus based on current information.

LEARNING OUTCOMES

- Understand the history, clinical manifestations and spread of COVID-19
- Define issues facing healthcare workers in regard to COVID-19
- Determine the nurse/healthcare worker’s role in addressing patients infected with COVID-19

CE contact hours are FREE for Michigan Nurses Association members.

1.5 contact hours will be awarded to RNs who complete the evaluation form and post-test at minurses.org.

Michigan Nurses Association is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center’s Commission on Accreditation.