

As COVID-19 Staff Cases Rise at Milford Regional Medical Center, Nurses Speak Out Against Mandatory Overtime and Inadequate Hospital Preparedness; MRMC is using....

**[As COVID-19 Staff Cases Rise at Milford Regional Medical Center, Nurses Speak Out Against Mandatory Overtime and Inadequate Hospital Preparedness; MRMC is using union-busting tactics as nurses speak out against unsafe COVID-19 conditions such as mandatory overtime and the re-use of N95 masks in brown paper bags](#)**

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## **Body**

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Registered nurses at Milford Regional Medical Center (MRMC), who are joining the Massachusetts Nurses Association, are calling on hospital executives to immediately improve COVID-19 preparedness and halt the use of forced overtime as nurses struggle to stay healthy and provide safe, high-quality patient care during the second surge.

The nurses' concerns follow a significant spike in admissions for patients with COVID-19, and as a significant number of nurses have been exposed to the virus, with 170 staff positive with COVID-19 as of January 5, which is not surprising given the administration's failure to provide the appropriate personal protective equipment and safe staffing practices. The staff positive cases increased 24% in just two weeks, up from 137 on December 23, and up 226% the month prior, from 42 on November 23 to 137 on December 23.

While nurses and patients are placed in jeopardy, hospital executives have continued their efforts to silence nurses, most recently financing an anti-union campaign, utilizing resources that could be allocated to safer patient care, to a high-priced union busting consulting firm. Last month nearly 70 percent of the nurses filed for an election to form a union to provide them with a legally protected voice to advocate for better working conditions. Last week, the hospital canceled a meeting with the nurses, where nurses were prepared to raise specific remedies to the current crisis.

Rather than developing and implementing an emergency staffing plan in collaboration with nurses and other frontline staff, MRMC executives have been mandating nurses work overtime – a practice banned by law in Massachusetts.

"Instead of listening to nurses and collaborating with us to make conditions safer for patients, staff, and the community, hospital executives are putting everyone at risk by not responding to employee outbreaks and forcing nurses to work mandatory overtime," said Sara Burton, a nurse on the Meehan Pavilion 1 (MP1) unit for twelve years. "The hospital should be investing in frontline caregivers and ensuring adequate staffing to get us through this

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pandemic, not requiring nurses to attend meetings with union-busting **consultants** who are paid enormous sums to try to silence our voices."

"The hospital's lack of planning and being reactive to every situation that comes forward is putting a huge strain on nurses and our ability to provide safe, quality care," said Nicole Fournier, ED nurse at MRMC. "Our emergency department has been chaos this week. We have admitted patients in our hallways eating meals with no masks on. I was asked and refused to pull out a negative COVID patient with severe complications into the hallway to make way for a COVID positive patient. That positive patient was then put in front of our nurse's station vomiting without a mask on. Hallways are just jam packed and COVID is no longer being efficiently contained. There has been no word to us from the hospital of any plan in place to decompress the ED when this happens. It's extremely frustrating."

"I've watched many of my coworkers get mandated multiple times," said Christina Buxton, a nurse on the fifth floor at MRMC. "They are being pushed to work past the point of exhaustion, even to the point where they have to take a nap on the way home in order to make it home safely to their children. One of our nurses had to call out on her other job because she was mandated at Milford Hospital. There is nothing okay about doing that to your staff."

MRMC executives have also been requiring that nurses re-use N95 masks multiple times by placing them in brown paper bags at the end of their shift. This non-scientific practice, seen more widely in Massachusetts hospitals during the spring COVID-19 surge, should be completely gone now that hospital and state officials have said PPE has been stockpiled for the second surge. Prior to the COVID-19 pandemic, reuse of personal protective equipment was NEVER recommended or considered as a safe practice. In fact, one-time utilization was the ONLY agreed upon, evidence-based standard. Read more about the MNA's position on this topic here.

State Representative Jeffrey Roy, D-Franklin, and State Representative Brian Murray, D-Milford, jointly issued the following statement:

"During the current surge in COVID-19 cases, as frontline caregivers once again put their health at risk to care for patients, we are hopeful that the administration of Milford Regional Medical Center will be focusing its efforts and resources to work together with our nurses, on a collective basis, for the sharing of ideas and thoughts on how to better serve and advocate for their patients and the community, with quality and safety as primary considerations."

#### MRMC Using Union-Busting Firm

MRMC executives are using anti-union consulting firm The **Crossroads Group**, which has been known to be paid rates of at least \$400 per hour. The hospital is bringing nurses into virtual meetings with the anti-union **consultants**, who share misleading or non-factual information about unions and union organizing.

Miko Penn, who is a **consultant** with The **Crossroads Group** for MRMC, was named in a National **Labor Relations** Board case in which an administrative law judge and the NLRB found the employer "committed multiple and serious violations of the National **Labor Relations** Act." The NLRB ordered the employer to promise its employees that it would not threaten them for engaging in union activity. Penn's anti-union activity has been well-documented by media.

#### Mandatory Overtime Law and Safety Risks

Gov. Deval Patrick signed into law a ban on mandatory overtime for Massachusetts nurses in August 2012. The law prohibits mandatory overtime, which is defined as "any hours worked by a nurse in a hospital setting to deliver patient care beyond the predetermined and regularly scheduled number of hours that the hospital and nurse have agreed that the employee shall work, provided that in no case shall such predetermined and regularly scheduled number of hours exceed 12 hours in any given 24 hour period." The law also explicitly states, "Mandatory overtime shall not be used as a practice for providing appropriate staffing for the level of patient care required."

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In 2004, the Institute of Medicine – part of the National Academies of Sciences, Engineering, and Medicine – published a report outlining improvements to nurse working conditions. "Keeping Patients Safe: Transforming the Work Environment of Nurses" called for a ban on nurses working more than 12 hours in a 24-hour period and said: "In the event that nurses are required to work excessive hours because of an emergency, this information should be immediately disclosed to the public so that elective admissions can be postponed and other admissions diverted to different units or facilities. Similarly, in any instance where a nursing shortage prevents [a health care organization] from securing sufficient nurses to prevent work hours in excess of 12 hours in any 24-hour period and more than 60 hours in any seven day period, this information also should be disclosed to the public, so that elective admissions can be referred to other facilities or delayed until staffing is remedied." "Nurse Working Conditions and Patient Safety Outcomes," a review of outcomes data for more than 15,000 patients in 51 U.S. hospital ICUs published in the journal Medicare Care, showed that overtime for nurses was associated with an increase risk in catheter-related urinary tract infections and skin ulcers. "The Working Hours of Hospital Staff Nurses and Patient Safety," published in Health Affairs, demonstrated that nurses working mandatory overtime are three times more likely to make a medical error.

### COVID-19 Issues Inform Milford Nurses' Decision to Join MNA

MRMC nurses filed notice with the National **Labor Relations** Board on Monday, December 21 seeking an election to join the Massachusetts Nurses Association as they exercise their strong, united voice to improve conditions for their patients, co-workers, and community during the COVID-19 pandemic and beyond. Read more about their election filing here. The NLRB is in the process of scheduling the election.

There are approximately 525 registered nurses at MRMC who would be represented by the MNA following an election overseen by the NLRB. The nurses filed their petition with the NLRB after months of organizing together in 2019 and 2020. Nurses' concerns about patient safety, support for nurses and a lack of responsiveness from MRMC management was exacerbated by the COVID-19 pandemic.

COVID-19 issues MRMC nurses have asked hospital management to address include:

Lack of access to PPE throughout the hospital, especially N95 masks that should be provided to all caregivers provided direct patient care due to asymptomatic spread. The hospital should implement more routine testing for staff to catch outbreaks of COVID-19 before they spread. There should be a COVID-19 triage area in the emergency department. There is a potential space for one, which would reduce the risk of spread among patients and staff mingling in the ED, but it has not been utilized. Whenever possible, COVID and non-COVID patients should not be mixed in the same area, and nurses should not have mixed assignments of COVID and non-COVID patients. As of early December, there were still surgical oncology patients on the same unit as COVID patients and guards from MCI Norfolk. MRMC management's failure to appropriately staff the hospital has led to inappropriate floating of nurses. Nurses have been floated from "clean" areas such as maternity and OR/PACU to COVID areas and then back again in the same shift. There is a lack of detailed, timely information from MRMC management to staff on the front line who need it to make better decisions. The hospital should better support nurses with hazard pay or another form of increased pay or benefit and should not require nurses to use their own time off if they need to quarantine.

MassNurses.org | Facebook.com/MassNurses | Twitter.com/MassNurses | Instagram.com/MassNurses

Founded in 1903, the Massachusetts Nurses Association is the largest union of registered nurses in the Commonwealth of Massachusetts. Its 23,000 members advance the nursing profession by fostering high standards of nursing practice, promoting the economic and general welfare of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying the Legislature and regulatory agencies on health care issues affecting nurses and the public.

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SOURCE Massachusetts Nurses Association

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