

## **Addendum to Ballot Question Study Guide and Study Report December 6, 2018**

The Study Guide and Study Report were finalized on October 1, 2018, and distributed to local Leagues and members. This Addendum updates some of the information relative to the November 2018 election that was not available on October 1. In addition, members using the materials spotted a typographical error and a broken link.

This Addendum to the Study Guide and the Study Report corrects or supplements the original documents.

### **Updates to the Study Guide**

#### **Correction**

On page 5, one of the online references is no longer available, and we have not found a suitable replacement.

~~Oregon Citizens Initiative Review:~~ <https://www.oregon.gov/circ/Pages/index.aspx>

#### **Addition to Points of View for Consensus Question 15**

Question 15 asks whether the 3 types of citizen-initiated ballot questions should be retained, but only one general "Points of View" section was provided in the Study Guide. Below are "Points of View" sections for each of the three types (A-C).

15. Should the current initiative and referendum process by which citizens can do the following (A-C) be retained?

A. Initiate laws

Yes       No       No consensus

B. Initiate constitutional amendments

Yes       No       No consensus

C. Repeal laws through referendum

Yes       No       No consensus

#### **Points of View 15A**

**Yes:** Article XLVIII provides an alternative to a pure representative democracy. Citizens dissatisfied with the action or inaction of their elected representatives(s) have the option to have a direct say in their government through the initiative for law mechanism created under Article XLVIII. This mechanism can also be used to repeal or change existing laws.

**No:** The Massachusetts Constitution established a representative democracy, which allows for deliberation, debate and compromise on a law, which the initiative process does not. If a citizen is dissatisfied with their elected representative(s), the remedy is to elect a different representative through the election process. Also under the state Constitution any citizen may file a proposed piece of legislation with the General Court through his or her representative or senator. This "right of free petition," which is unique to Massachusetts, allows citizens to file a bill, but also allows for legislative deliberation. The passage of laws is the Legislature's responsibility, not the citizens'.

#### **Points of View 15B**

**Yes:** Article XLVIII provides an alternative to a pure representative democracy. Citizens dissatisfied with the action or inaction of their elected representatives(s) have the option to have a direct say in their government through the citizen initiative for constitutional amendment mechanism created under Article

XLVIII. Citizens should be able to initiate a change to constitutional law, as they can for statutory law as in 15A.

**No:** The Massachusetts Constitution established a representative democracy, enabling the legislature to initiate constitutional amendments and the citizens to approve them. Because the Constitution forms the bedrock of the state’s legal structure, initiating an amendment should be solely within the authority of the Legislature. Citizens interested in amending the Constitution should work with their elected legislators to initiate a change. The process in Massachusetts has resulted in only three citizen-initiated constitutional amendment proposals making it to the ballot in 100 years.

**Points of View 15C**

**Yes:** Article XLVIII provides an alternative to a pure representative democracy. Citizens dissatisfied with a law their elected representatives(s) have passed should be able to collect signatures within a short timeframe (90 days) to ask voters to repeal a law through a referendum on an existing law.

**No:** A total of ~32,000 signatures to place a referendum on an existing law on the ballot is a much lower threshold than the initiative for a law (~76,000 in two rounds). Further, being able to suspend a law with just ~43,000 signatures, prior to any vote, is far too easy to accomplish, especially in the era of hiring signature collection companies. Given that we have a mechanism to repeal a law in 15A, a separate ‘referendum’ process is not needed.

**Study Report**

**Corrections**

On page 5, the article number should be changed from LXVIII to XLVIII in section 2.1: “Article XLVIII ~~LXVIII~~, an amendment of the Massachusetts Constitution, ... “

**Updates**

Table 2.1, page 6

**Table 2.1. Massachusetts Statewide Ballot Measures 1919 – 2018 2016**

Type of Question	Requirements for Approval	# of Questions on the Ballot since 1919	# of Questions Approved	Approval %
Initiative Petition for a Law	30% or more of the voters casting ballots at the election must vote affirmatively.	80	36	45%
	A majority of the ballots cast on the question must be affirmative.	82	37	45.1%
Initiative Petition for a Constitutional Amendment	30% or more of the voters casting ballots at the election must vote affirmatively.	3	2	66.6%
	A majority of the ballots cast on the question must be affirmative.			
Legislative Constitutional Amendment	Majority of ballots cast on the question must be affirmative.	63	53	84.1%
Referendum Petition on an Existing Law	30% or more of the voters casting ballots at the election must vote against the law.	20	10	50%
	A majority of voters casting ballots on the question must vote against the law.	21	11	52.4%
Legislative Advisory Question	Nonbinding advice to the Legislature if approved by a majority.	13	8	61.5%
U.S. Constitutional Amendment (Advisory)	A majority of voters casting ballots at the election must approve.	3	1	33.3%

Source 2019-2016: <http://www.sec.state.ma.us/ele/elebalm/balmover.htm>

Source 2018: Source Boston Globe <https://www.bostonglobe.com/elections/2018/>

Insert page 21a, Citizens' Statement 2018. Consensus Question 3 discusses providing voters a citizens' group summary. The 2016 example is in the Study Report, but the 2018 statement (below) became available later.

### **Citizens' Review Statement of Question 1: An Initiative Petition for a Law Relative to Patient Safety and Hospital Transparency (2018)**

#### **Key Findings**

These findings were prioritized by citizen panelists, starting with the most important for voters to know.

- Currently, there is no statutory limit on the number of patients assigned to a nurse, except in Intensive Care Units. Each hospital determines staffing based on past usage, patient care, and budgeting considerations.
- Should this law go into effect on January 1, 2019, affected hospitals and health care facilities will be required to have a written plan in place. Actual implementation, including staffing increases, will occur after a deliberative, regulatory process.
- Fourteen states, including Massachusetts, regulate staffing levels in hospitals beyond federal standards, but Massachusetts would be one of two states to universally regulate nurse/patient ratios by law.
- The estimated costs of implementing this law vary between \$46 million and \$1.3 billion, which may impact the availability of hospital services. Consumers and businesses may face increased premiums, copays and deductibles.
- Unit specific ratios would legally apply to all Massachusetts hospitals, except during a state or nationally declared emergency. Time-of-day, hospital size or location, and the experience of nurses are not considered.
- After two decades of raising concerns, nurses collected 100,000 signatures to move Question 1 onto the ballot.
- Not all percentages reported by nursing associations reflect the actual number of nurses in support of or against Question 1.
- Unless other cost-discretionary measures are adopted, according to the Massachusetts Association of Behavioral Health Systems, Question 1 would reduce patient volume of inpatient behavioral health facilities by 38%.

#### **Statement in Support of the Measure**

We find these to be the strongest reasons to vote for the measure.

- **Finding:** Studies show that when California set ratios as patient limits in 2004, hospitals had shorter Emergency Department wait times, lower health spending and insurance costs. No hospitals closed as a result. This is important because: The success of California's legislation of nurse/patient ratios provides data strongly suggesting that this can improve patient care in Massachusetts.
- **Finding:** The independent analysts assembled by the Citizens' Initiative Review who expressed an opinion are clear on this issue: higher nurse staffing levels correspond to increased nurse satisfaction and positive patient outcomes. This is important because: Independent experts agree that there are improvements in patient outcomes and a greater sense of professional satisfaction for nurses when patients are given more quality time.
- **Finding:** Having fewer patients per nurse could lead to better work environments and safer conditions for nurses. This is important because: It would limit nurse burnout, reduce adverse patient outcomes, improve morale, and allow for better communication, as well as increase time for bedside care.

Nurses report that burdensome patient loads interfere with their ability to provide quality patient care. Question 1 will create safer work environments, enhance professional satisfaction and lead to better patient outcomes. Studies prove that balanced workloads will create improvements in the delivery of care.

#### **Statement in Opposition of the Measure**

We find these to be the strongest reasons to vote against the measure.

- **Finding:** Question 1 may dramatically increase emergency wait times, delay life-saving treatments and prevent hospital admissions. Boston Medical Center estimates Question 1 would prevent the treatment of over 100 Emergency Department patients daily. This is important because: The impact on emergency departments could put the most vulnerable patients at risk and could cause undue pressure on nurses and facilities.
- **Finding:** Rankings show Massachusetts has some of the best hospitals in the country. A rigid mandate may override the professional judgment of nurses and doctors who work in these hospitals. This is important because: Mandated ratios limit the ability of nurses and doctors to provide the best possible care to the greatest number of patients.
- **Finding:** There is no consensus that proposed ratios will result in better care. Additional factors that contribute to better care include work environment, nurse education, experience, resources, and technology. This is important because: Question 1 only addresses one of many factors that characterizes better healthcare. These ratios may not do enough to improve overall healthcare.

Question 1 imposes unnecessary constraints on some of the best hospitals in the country that rely on the clinical expertise of their nursing professionals. Question 1 threatens the health of community programs, increases costs for hospitals, other businesses, and consumers, while restricting hospitals' ability to respond to emergencies.

**Update to Table 6.1 and Figure 6.1 A and B, page 29**

The total money spent on the 2018 campaigns is still not fully reported, but there is enough information available to illustrate the continuing trend of large sums being spent on some questions. The information in these charts is as of November 27, 2018, but the actual total will likely be higher than the current total of \$42 million.

**Table 6.1: Massachusetts ballot question expenditures 1988-2018 2016**

Year	Number of Questions	Number of Committees	Total Spent
1988	4	18	\$13,317,952
1990	6	20	\$5,661,062
1992	4	8	\$16,139,661
1994	9	23	\$11,155,835
1996	1	3	\$1,210,777
1998	3	9	\$9,999,283
2000	8	16	\$15,340,199
2002	3	6	\$2,332,880
2004	0	0	-
2006	3	6	\$15,320,327
2008	3	7	\$11,516,215
2010	3	9	\$9,098,307
2012	3	13	\$9,554,909
2014	4	13	\$30,193,266
2016	4	15	\$57,477,775
2018	3	7	\$42,051,597

Source: <http://files.ocpf.us/pdf/releases/bq2016.pdf>

Source for 2018: <https://www.ocpf.us/Reports/BallotQuestionReports>

**Figure 6.1A and B: Expenditures over time and average spent per question over time**

