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New

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Marisol Alcantara (D31) S



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Andrea Stewart-Cousins (D35) S



Michaelle Solages (D22) A



Addie Russell (D116) A



Todd Kaminsky (D9) S



Carrie Woerner (D113) A





George Latimer (D37) S



Stokes (D141) A



Wins for NYSNA on Nov. 8

New York State Nurses Association

New Yorkers elected candidates to the State Senate and Assembly that will stand up for quality patient care.

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MIDDLETOWN ...

In the front line



By Judy Sheridan-Gonzalez, RN NYSNA President

recent nurse graduate in my facility approached me the other day, confiding her worries regarding nightmares she was having about work. The dreams mostly centered on bad outcomes for her patients or emergencies she couldn't handle. She would always wake up with the sense that she forgot to do something in her previous shift or inadvertently made some fatal error.

I told her not to worry, that such dreams were fairly common for new nurses and would pop up time and again throughout her career. Then I had to think about that.

Why do nurses shoulder so much of the blame for the failures of our healthcare system? When anything goes wrong, where do fingers get pointed at first? We are in the front line—the easy targets—for patient and family frustrations. While terribly unfair, that is almost understandable because who else is accessible?

Who else is accessible?

Not the CEOs, CFOs, COOs and CNOs who make the money decisions that lead to staffing shortages without reasonable accommodations and appropriate supports; not the insurance companies who deny care and charge co-pays, co-insurance, deductibles, premiums and outof-pocket fees; not Big Pharma that raises drug prices beyond the stratosphere. So who's left to bear the brunt of questions, worries, complaints and confusion? Us.

What is NOT excusable is the blame visited upon nurses in a system prone to negative outcomes.

In reality, we nurses are our own worst critics when we make mistakes! But, instead of getting support, sympathy and analytic feedback, we face ever more punitive action. No wonder we have nightmares.

Nurses blame one another as

well. Inter-shift, inter-unit, intertitle and inter-facility conflicts are common, and are often filled with resentment and innuendo. We never really know what that other shift or unit did or didn't do; we just feel like we are the ones who got the short end of the stick. Many of us

We need to take ownership of our successes these give us the strength to continue.



feel that it is our unit that serves as the hospital's "dumping ground."

When people work hard, yet find little satisfaction; when the vision we had for our profession or for our lives seems unreachable; when we sense that we are exploited and that the system is stacked against -we feel helpless, depressed and angry.

Wouldn't it make better sense for nurses, instead of being angry, to try and address the root causes of these conditions and develop solutions that can change them?

Identify the root cause

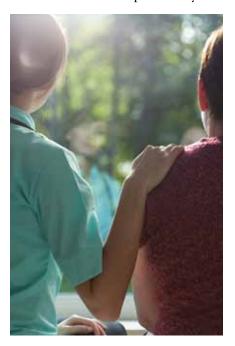
In our hospitals, the top executives are those ultimately and directly responsible for staffing, financial decisions and work practices, yet we never really deal with them directly. Instead, they hand over the work to Human Resources, Nursing Administration and a variety of other administrative personnel. Our testimony, grievances, complaints and issues often fall on deaf ears. Why? Because those who are assigned to sit with us have little or no power to substantively respond or fix the problems.

More and more often, the only time we make headway is when we engage in protracted campaigns, often culminating in strike votes and public exposure projects.

Advocating for quality care

Nurses aren't apathetic—we are frustrated and demoralized when we see our practice being eviscerated by decision-makers who have no connection to our patients. All the more reason to take pride in every victory we win through concerted union activity. Whether it's more blood pressure cuffs, working thermometers, mold removal, an extra nurse, removal of a bullying manager, a fair contract with concrete gains—these things really matter on a day to day basis. And imagine what life would be without them...

We need to take ownership of our successes—these give us the strength to continue. We also need to recognize that the real battles, the bigger things, require an even higher level of internal education and organization in each facility and on each unit. This will be crucial as we enter a potentially



unprecedented era of anti-union activity.

No one nurse can move the mountain of healthcare chaos that exists around us. But together, armed with knowledge, capacity and a unified vision, nurses can change the world, and transform our nightmares into the realization of our dreams.



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Editorial offices located at:

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Two major wins on Long Island

NYSNA nurses celebrated this November when the last of key contracts at Catholic Health Services of Long Island (CHS) were overwhelmingly ratified and safer staffing won the day. Safe staffing has been a top priority for NYSNA nurses at St. Catherine of Siena Medical Center and St. Charles Hospital, where nurses overloaded with patients have struggled daily to provide the highest quality care. A third CHS hospital—St. Joseph Hospital—had already signed on for safe staffing and other NYSNA demands in June. The November agreements sealed the deal with CHS.

Twelve hundred NYSNA nurses at CHS fought hard to make their voices heard. In May, they held an informational picket at Rockville Centre Diocesan offices to drive home the need for safe staffing to CHS management and show their commitment to the community. (The Diocese oversees CHS). "I believe the solidarity of all the nurses paved the way for a contract that enforces adequate RN staffing essential to quality patient care," said Cheryl Paolone, RN, Maternity/NICU, St. Charles Hospital.

Wakeup call for management

In the end, however, agreements were reached with St. Catherine and St. Charles only after nurses at these two hospitals voted to authorize strikes. According to Tracy Kosciuk, RN and St. Charles LBU President, "Management woke up and realized that nurses were willing to wage a two-day strike over patient safety. We never had to go this far before. We were unified and 100% serious in wanting a resolution that enables us to care for our patients in the safest, most effective manner possible."

As a result, NYSNA RN negotiating teams were well-positioned. Management agreed to the high levels of staffing standards, fair wages and benefits. Staffing improvements included additional nurse hires, tighter contract language and stronger staffing enforcement mechanisms.

Wages at the two hospitals remained regionally competitive with annual across-the-board



St. Catherine of Siena Medical Center members celebrate their ratification vote.



Members at St. Charles Hospital following the contract vote

increases. Contracts included improved tuition reimbursement and differentials for education, certification, charge, on-call and preceptor pay. Both hospitals added all important experience steps to help retain senior nurses. At St. Catherine, attempts by management to change nurse pensions were stymied.

Priorities achieved

The fight to maintain health benefits, another key priority, also won out. CHS wanted new health insurance carriers as well as substantial increases in premium sharing and other out-of-pocket costs. At both hospitals, NYSNA negotiating committees preserved existing health plan design, coinsurance, maximum out-of-pocket caps and deductibles. "I credit our negotiating committee for their relentless commitment and diligent

hard work that allowed us to reach a fair bargaining agreement," said Ms. Paolone.

The contracts were ratified separately. At St. Catherine, nurses voted overwhelmingly on November 4 for a new four-year contract, and at St. Charles Hospital, 98 percent of NYSNA nurses said yes on November 9 to a new agreement.

The victory is a testament to the unity of NYSNA nurses within their own hospitals and within the CHS network. "Nurses at St. Catherine are always willing to stand up for safe patient care," said Tammy Miller, RN and executive committee member at St. Catherine. For Ms. Kosciuk, "The experience of working with NYSNA members from other CHS hospitals opened doors and established lines of communication that will stay open and active going forward."

Southside Hospital pays nurses \$1.55 million in back wages

On November 2, Northwell Health, parent company of Southside Hospital, agreed to pay nurses at its Southside facility \$1.55 million in back wages. It was a huge victory for more than 300 nurses—about half the nurses at Southside—who will receive on average \$5,000 in back wages owed for overtime by the end of this year. "The nurses are ecstatic!" said Marianne Walsh, RN and Southside's LBU President.

The settlement resolves a long and bitter fight over Southside's pay practices from April 2007 to January 2011. During the four-year period, the hospital implemented non-overlapping shifts for nurses in certain units. Nurses were forced to work beyond their shift to give patient briefings to incoming staff, but they were not paid for their time as required by law.

NYSNA filed a grievance, and the arbitrator ruled against Southside. Then the nurses took action. Ms. Walsh and her colleague Dorothy Lane, RN, along with NYSNA staff presented over a year of testimony, with detailed documentation on overtime hours worked, to Southside Hospital management before reaching the \$1.55 million agreement.

"We work so hard. Any extra time we spent at work was time we were away from our families. We didn't ask for anything more than we deserved and what we were legally entitled to," said Ms. Walsh.



By Jill Furillo, RN, NYSNA Executive Director

health of individuals at risk, the health of the planet is also suffering

Good health starts with healthy food

urses know better than anyone that the American food industry has contributed to an epidemic of obesity and hypertension unprecedented in recent history through unfettered advertising, food additives and mono-crops. If we fail to address the devastating impacts of 'Big Food' then this could also become a nation whose population is also facing a wellness crisis.

According to *The New York Times*, a huge portion of the money spent on healthcare in this country treats chronic diseases linked to diet. But it's not just the health of individuals at risk, the health of the planet is also suffering. President Obama acknowledged that "our agriculture sector actually is contributing more greenhouse gases than our transportation sector."

Small family farms across America have largely been replaced by mega-agricultural corporations operating huge livestock feeding lots and a concentrating of our food production in large-scale facilities and on giant farms.

Much at stake

The agricultural industrial complex is a \$1.5 trillion-dollar industry in America—that's trillion with a T—with big corporations from farms, to feeding lots, to grocery stores controlling almost the entire process from seed to table.

In a groundbreaking decision that supported genetically-modified foods, the U.S. Supreme Court ruled in favor of seed patents—fertile soil for mega-agribusiness Monsanto, which was already developing many genetically-modified (GM) seeds. There is growing concern that introducing foreign genes into food plants may have an unexpected and negative impact on human health. The British Journal Lancet examined the effects of GM potatoes on the digestive tract in rats and found "appreciable differences." Considerable study continues on the essential question of the harm of GM foods.

This whole system has remarkably little oversight. And we've seen the consequences—underregulated fertilizer, pesticide and herbicide saturated mono-crops of soy and corn replacing small scale multi-crop farms, increases in greenhouse gases produced by large livestock operations, and even recent outbreaks of food-born diseases stemming from large washing and packaging plants.

cides, or food products to feed its citizens. It also meant that what food Cubans could grow, they mostly ate themselves instead of cycling through livestock.

At the same time, the Caribbean island had to solve the problem of farming in the age of extreme weather events.

Out of necessity

These factors contributed to Cuba being far more prepared for situations now facing many nations across the planet. Cubans mastered what is now called "agro-ecology" in contrast to our country's mostly industrial agriculture. Small scale farmers in Cuba are leading the



Beef production in the U.S. is dominated by mega-corporations.

President Obama did try to fight back and exert some much-needed control over the food industry—enough so that a group backed by pesticide and fertilizer producers called the Obamas, "organic limousine liberals" and called on Michelle Obama to use pesticides in the White House garden.

It is certain that corporate agriculture will try to exert influence over the new administration at the expense of the family farmer and at the expense of the health of our nation.

There is an alternative model for feeding our nation using fewer chemicals, causing less harm to the environment and promoting healthier eating habits. That alternative comes from a country that couldn't be more different from ours—Cuba.

What Cuba can teach us

Because of the USA-led embargo and the collapse of the Soviet Union, the tiny island nation was left in a precarious food situation, unable to import fertilizers, pesticountry's agricultural movement and promoting sustainable practices like planting flowers to attract helpful insects and nitrogen producing beans to fertilize the soil. Cubans had to find creative ways to till the soil and plant crops without fossil fuel-fed machinery.

Cuba now produces almost all of its own produce and much of its own meat. These agricultural advancements were not made out of ideology. Rather, Cubans acted out of necessity, to meet the needs of a hungry people.

Already, scientists fear that our planet is on the brink of no return from global warming. If we don't scale back our agricultural use of fossil fuels we could tip the thermometer permanently for our warming planet, leading to the same kind of food insecurity across the globe that Cubans faced.

It's time for nurses to invoke our commitment to public health and take a firm stand for sustainable farming that will help grow healthy people and a healthy planet now and into the future.

Election sets stage for NYSNA's 2017 legislative agenda

he vote is in... the ballots are counted... and there are some big wins for NYSNA in the New York State Legislature. Some, like State Senator Todd Kaminsky, D-District 9, fought hard with the help of NYSNA to keep their seats. Others, like Senator-elect Marisol Alcantara, D-District 31, the first NYSNA staffer ever elected to State office, will hit the halls of Albany for the first time, bringing fresh energy to pressing legislative battles, such as safe staffing, fair funding for safety net hospitals, and the preservation of a strong public health system.

All total: 137 NYSNA-endorsed candidates declared victory. Among them, Assemblywomen Addie Russell, D-District 116, and Michaelle Solages, D-District 22, who have walked shoulder-toshoulder with our nurses on hospital picket lines; Senator George Latimer, D-District 37, a staunch supporter of the New York Health Act; and Senators Andrea Stewart-Cousins, D-District 35, Terrence Murphy, R-District 40, and many, many others who have offered key support for the Safe Staffing for Quality Care Act. These candidates share our vision of equal access to quality care and are committed to building healthy, safe and vital communities.

Strong advocates

The 12 candidates profiled on the following pages have been consistent and strong advocates for New York nurses and their patients. Along with the rest of our 137 endorsed candidates, they will go to Albany ready to stand with NYSNA as we continue to advocate for the highest quality healthcare for all New Yorkers, clean water and air, the preservation of a strong public health system, and other issues of importance to New Yorkers.

We'll be visiting their offices, calling them, sending postcards and counting on their leadership in the upcoming legislative session. We look forward to working with the entire Assembly and Senate in the coming months to enact pro-



Senator-elect Marisol Alcantara

gressive change for New York's patients, workers, and families.

NEW YORK CITY Senate, D-District 31

NYSNA's own Marisol Alcantara made history as the first Dominican woman elected to the New York State Legislature. She succeeds Adriano Espaillat, who is replacing the Honorable Charles Rangel in the U.S. House, as the representative for Washington Heights, Inwood and parts of Harlem. Alcantara shares many of NYSNA's priorities and on her legislative to-do list is ushering the safe staffing bill to a senate floor vote.

Alcantara, who currently works as a NYSNA organizer at NY Presbyterian and Montefiore hospitals, is a champion of equal access to quality healthcare. She is known for her high energy, commitment to social and economic justice, and dogged commitment to educating and empowering minorities, women and immigrant workers.

Alcantara will fight to bring affordable housing to all New Yorkers and equitable access to high quality education to children. She is passionate about protecting the environment; modernizing New York's antiquated voting system; and passing the Development, Relief, and Education for Alien Minors Act (DREAM Act), which grants state tuition assistance to undocumented students.

LONG ISLAND Senate, D-District 9

Todd Kaminsky, whose district skews heavily Republican, fought a hard won campaign for the seat once occupied by convicted former Senator Dean Skelos.

When the ballots were finally tallied, Kaminsky, a former federal prosecutor and Long Island Assemblyman, had edged up 5,000 votes with the help of significant get-out-the-vote efforts from NYSNA to take the southwestern Nassau County seat.

Kaminsky, the incumbent, first elected to the Senate after Skelos stepped down, earned NYSNA's loyalty with his staunch support for the safe staffing act in the Assembly and again when he moved to the Senate. Kaminsky, also a champion of women's rights, has pushed for equal pay for women and is a stalwart supporter of pro-choice policies.

A life-long resident of the South Shore, Kaminsky lived through Hurricane Sandy and its aftermath, a firsthand education in the effects of climate change and our state's need for newer, more resilient infrastructure. Kaminsky has called for ethics reform, public campaign financing, term limits, a ban on outside income, and closing campaign contribution loopholes for limited liability companies.





Senator Todd Kaminsky

Election sets stage

CONTINUED FROM PAGE 5

Assembly, D-District 22

Michaelle Solages, the first Haitian elected to the Assembly, won re-election after beating back a challenge from a Valley Stream Republican with deep family and political ties to the community. Solages had incurred the wrath of business interests, who fought hard against her this election, because she insisted that the redevelopment of Belmont Park include community input and a community benefits agreement that would bring goodpaying jobs to local residents.

In her first term, Solages successfully lobbied for property tax relief for District-22 residents and along with Gov. Cuomo and others for the paid family leave bill. She supported raising New York's minimum wage and views safe working conditions as a fundamental right. Solages is known for her dedication to women's rights and promoting women and minority-owned businesses.

Solages, who represents Elmont, Floral Park, and Valley Stream, among others, has shown strong commitment to Franklin and Syosset Hospitals and earned the support of nurses and community members. Solages has walked picket lines with NYSNA and is a leader in the Assembly on safe staffing.



Assemblywoman Addie Russell walked every picket line with NYSNA at Watertown's Samaritan Medical Center and is well known to our nurses and hospital management. During our campaign for a fair contract, Russell urged the hospital CEO to honor fair terms for nurses and safe staffing for nurses and patients. Russell has fought the privatization of Messina Memorial Hospital and supported the Enhanced Safety Net Hospital bill, which provides increased funding for five hospitals in the district.

The race to unseat Addie Russell is estimated to have been the most expensive Assembly contest in the state. Supporters, including hospitals, of Port Vincent Councilman John Byrne, III, poured nearly \$1 million into defeating



Senator George Latimer

Russell—a war chest that Russell did not come close to matching. Russell, known to be a fighter on behalf of working New Yorkers, outflanked Byrne anyway due to strong voter loyalty in the district.

Throughout her tenure, Russell has championed worker rights. She co-sponsored the Safe Staffing for Quality Care Act and voted to increase New York's minimum wage, for paid family leave, and in favor of the Women's Equality Act.

HUDSON VALLEY Senate, D-District 37

Hudson Valley Senator George Latimer has built a solid record of accomplishment during his four years in the New York Legislature. Latimer sponsored legislation and advanced funding for education, environmental issues (including protection of Long Island Sound), housing, transportation, healthcare, and lower property taxes. Latimer, who spent years in the Assembly, was first elected to the Senate in 2012. He has a proven track record with our nurses and supports the safe staffing and the New York Health acts.

Latimer's district includes
Bedford, Bronxville, Eastchester,
Harrison, Larchmont,
Mamaroneck, New Rochelle,
Port Chester, Rye, Rye Brook,
Tuckahoe, White Plains and parts
of Yonkers. Latimer retained his
seat in a hard-fought campaign
with strong grassroots support and
his message on ethics reform, education, and property-tax reduction.

Latimer is known for his scandalfree political career, his transparency, his strong work ethic, and his ability to deliver for constituents.

Senate, R-District 40

Republican Senator Terrence
Murphy is known to be a friend of labor and for his responsiveness to community needs. He handily won his first bid for re-election.

During his first term, Senator Murphy co-chaired the NYS Joint Senate Task Force on Heroin and Opioid Addiction and helped bring important changes to New York, including more training for doctors, the end to many 30-day prescriptions for opioids, more treatment beds, and an expan-



Senator Terrence Murphy

sion of the DARE school-based education program. The package of laws, signed by Gov. Cuomo in June, increased from 48 to 72 hours the time someone grappling with addiction is placed under emergency evaluation and removes insurance barriers for people who need treatment.

Murphy established a nurse advisory committee early in his tenure and co-sponsored the Safe Staffing for Quality Care Act. He is an advocate for those with developmental disabilities, seniors and veterans. He believes that protecting the environment is a non-partisan issue; he sponsored legislation to protect water quality; and is a supporter of clean energy production.



Assemblywoman Michaelle Solages

Assemblywoman Addie Russell



Senator Andrea Stewart-Cousins

Murphy, whose district includes most of northern Westchester and parts of Putnam and Dutchess Counties, supports state ethics reform and has endorsed limiting lawmakers to three terms. In addition, Murphy co-sponsored a bill that would take pensions from legislators who are convicted of a felony.

Senate, D-District 35

Senator Andrea Stewart-Cousins is the first woman to serve as leader of New York's Senate Democratic Conference. She has been unwavering in her support for NYSNA's legislative priorities and fought for state budgets that include measures to protect the quality of care for patients and the profession and practice of nursing.

Stewart-Cousins, a speaker at the NYSNA Biennial, confirmed her commitment to passage of a safe staffing bill. "Nurses work long hours in demanding environments and patients, in large part, depend on them for both physical and emotional support," said Stewart-Cousins. "The work they do is important—to doctors, to patients, and to the families of the people they treat. They serve as the faces of the hospitals that employ them, and patients' feelings about hospitals are colored by the experiences they have with the nurses who treat them. Nurses work in the trenches and on the front lines of healthcare—and it's important that we express our gratitude to them for providing us with the best care possible."

Stewart-Cousins is a champion of the underserved and working families. She is a key sponsor of the DREAM Act and a vocal supporter of human rights, quality education, and accessible, affordable healthcare. Stewart-Cousins also wants to make government more efficient, demand-

ing transparency and accountability to New York's citizens.

Stewart-Cousins represents Greenburgh, Scarsdale, and parts of Yonkers, White Plains, and New Rochelle.

CAPITAL REGION Assembly, D-District 110

We have seen him on our picket lines and at our meetings and Conventions. And now we will see him return to the Assembly. Phil Steck's re-election is a win for all working people in his district and for the issues that NYSNA champions: quality healthcare that will protect the safety and well-being of our communities.

Democrat Steck faced a well-financed challenge by Republican Tom Murphy in a run for re-election to a third term to represent the district that encompasses Colonie, Niskayuna and part of Schenectady.

As a member of both the Assembly's Health and Insurance committees, Steck has a role in two key measures on the NYSNA agenda. Advancing a single payer health insurance system is one, as he strongly supports the New York Health Act. Second, Steck co-sponsored the Safe Staffing for Quality Care Act and is committed to seeing it once again advance to the Assembly for a floor vote this session.

In addition, Steck is a strong voice for good government, transparency,



Assemblyman Phil Steck

building the middle class, improving New York schools, responsible economic development, and protecting women's reproductive rights.

Assembly, D-District 111

Incumbent Rotterdam Democrat Angelo Santabarbara won re-election to a third term in a rematch of 2014's contest with Canajoharie Republican Pete Vroman. The district contains all of Montgomery

County and parts of Albany and Schenectady counties.

A civil engineer by trade, Santabarbara sits on the Assembly's Mental Health, Veterans' Affairs, Energy, Agriculture, Small Business, Government Employees, and Racing and Wagering Committees. Santabarbara was a major force in the Assembly in securing passage of the Safe Staffing for Quality Care Act, raising the minimum wage, and in his support for the New York Health Act.

During the last session, NYSNA worked closely with Santabarbara to safeguard the health and safety of communities at risk for oil train accidents and the resulting health and environmental impacts. In recent years, the 111th District has seen an exponential increase in the volume of highly explosive crude oil transported by rail freight within its borders. Meanwhile, the district's rural fire departments remain illequipped to respond to the type of emergency posed by these "bomb trains." Santabarbara has taken a lead in calling for resources, training and legislation that would help protect rural communities against this growing, lethal threat. NYSNA and community allies join him in urging passage of legislation that would regulate how crude oil is treated and allow fire departments to respond to oil train accidents more efficiently.

Santabarbara chairs the Assembly Subcommittee on Autism Retention and was the prime sponsor of a five-piece legislative plan, called Autism Action NY, aimed at increasing job opportunities, providing independent housing options, improving access to information, assisting in communication, and creating a centralized location for autism services in New York. He has an autistic son. The bill calls for the creation of an Autism Spectrum Disorder Advisory Board to develop, implement and update a statewide Autism Action Plan, creating a central clearinghouse for autism services and information. It passed both houses in June and is awaiting Governor Cuomo's signature.

Time and again, Santabarbara has been there for NYSNA members, and we were there for him on November 8.

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Assemblyman Angelo Santabarbara, right

NOVEMBER 2016







Members got fired up during Tuesday's #NYNursesVote action.

On Eurse:

NYSNA First Vice President Marva Wade, RN, presented NYS Assembly Speaker Carl Heastie with the "Distinguished Healthcare Champion" award.

Biennial Videos

For RNs unable to attend the Biennial, or for those who would like to revisit some of the presentations, please see links below for video clips of speakers.

Stewart-Cousins: http://bit.ly/2fxprbH GOTV rally: http://bit.ly/2ghVIFK Mario Cilento: http://bit.ly/2fWB5dd Mary Basset: http://bit.ly/2fG49Ge Mayor de Blasio: http://bit.ly/2fhjfBH

2016 Bien

n October 17, New York City
Mayor Bill de Blasio opened the
2016 NYSNA Biennial with a
rousing tribute to the tremendous
political power of our members.
"When nurses speak, people listen,"
the Mayor said to the house. "When
nurses act, change happens."

One thousand NYSNA nurses from around the state gathered in midtown Manhattan for the two-day event to help shape the future of our union and our State. "You're not the biggest union, but you make one of the biggest impacts because you're not afraid of a righteous fight," the Mayor said.

Nurses have power

The presence of elected officials, including Attorney General Eric Schneiderman, NYS Comptroller Tom DiNapoli and Assembly Speaker Carl Heastie, as well as NYS AFL-CIO President Mario Cilento, all speakers at the Biennial, added heft to the Mayor's statement about the nurses' political clout.



Janice Wilson-Saunders, RN (speaking) and other members from Queens Hospital Center at one of the Biennial's many workshops





Mayor Bill de Blasio spoke with NYSNA Second Vice President Anthony Ciampa, RN, NY Presbyterian Hospital, following the opening session.

nial: One thousand strong

"When I think about NYSNA, I think... purposefulness, social conscious, uncompromising," said de Blasio. And over the next two days NYSNA nurses participated in packed sessions on important topics such as LEAN management, one-on-one organizing, campaign escalation, Single Payer, safe staffing, community organizing and the history of RN advocacy.

Standing up for quality care

By the second day, energized members were on their feet for a standing ovation when NYSNA First Vice President Marva Wade, RN, conferred the "Distinguished Healthcare Champion" award to Assembly Speaker Heastie for his leadership in bringing the Safe Staffing for Quality Care Act to a successful floor vote at the Assembly. In accepting the



NYC Health Commissioner Dr. Mary Bassett posed with NYSNA members following her keynote address. Left to right: Julia Symborski, RN; Yasmine Beausejour, RN and NYSNA Southeast Regional Director; Dr. Bassett; Karine Raymond, RN and NYSNA Director at Large; and Cecilia Jordan, RN, Director of NYC H+H/Mayorals.

award, the Speaker affirmed that NYSNA's collective voice travelled beyond patient bedsides—to the halls of power. "We heard your concerns," said the Speaker. "We want to ensure that you are able to

give the best care you possibly can to your patients."

Members stood again for a rousing #NYNursesVote Get Out the Vote lunchtime action for NYSNA's priority candidates.



NYSNA Treasurer Pat Kane, RN, led the workshop on effective use of Protest of Assignment to protect patients.



NYSNA President Judy Sheridan-Gonzalez, RN, spoke with members at a Tuesday workshop.

Addressing healthcare disparities

to zip codes and particular communi-

the Biennial, revealed that in the year rates for these diseases are higher.

and other healthcare professionals

Assemblywoman-elect Monica Wallace

Elections

CONTINUED FROM PAGE 7

Assembly, D-District 113

Democrat Carrie Woerner won her first bid for re-election, defeating Republican Chris Boyark to represent the Saratoga and Washington County district. Politico had flagged the race as a key one to watch and likely to be among the most expensive because Republicans were eager to retake the seat that had been only narrowly won by Woerner in 2014. Despite the region's long history of electing Republicans, Woerner prevailed on November 8 by a strong and decisive 12 percent margin!

Woerner's record of accomplishment in her first term impressed voters. She was a constant and visible supporter of NYSNA's Capital Region members, walking picket lines at Ellis, Bellevue and Nathan Littauer, and championing the Safe Staffing for Quality Care Act and New York Health Act inside the Assembly.

She advocated for clean energy, secured funding for fighting heroin and opioid addiction, supported measures to protect the environment, and advanced legislation to clean up corruption by requiring convicted legislators to forfeit public pensions. She, along with Phil Steck, sponsored a bill to improve access to healthy food in all communities (FRESH Communities).



In her first-ever run for elected

captured the seat representing the district to Buffalo's east. It includes Cheektowaga, Lancaster and Depew. The incumbent Republican Angela Wozniak had declined to run following sanctions by a bipartisan Assembly ethics panel. Wallace came out ahead of her Republican challenger Russell Sugg.

Wallace focused her campaign on restoring public trust in elected officials and won endorsement from The Buffalo News and numerous labor unions.

As a former clerk to a federal judge, public interest lawyer and law professor at SUNY Buffalo, Wallace has strong grounding for the work ahead. She has frequently spoken out on issues affecting women, children and the community overall.

She is committed to a progressive platform that includes ethics reform, making higher education affordable for working families, investing in infrastructure, and ensuring that seniors have access to affordable housing and healthcare. She has pledged to support safe staffing, healthcare for all, and other NYSNA legislative priorities.

Assembly, D-District 141

Crystal Peoples-Stokes has a long history of advocating for working people—a record that has led voters in the 141st District to return her to office in every election since 2002, when she became the first African American woman to represent Buffalo in the Assembly.



Assemblywoman Carrie Woerner



Assemblywoman Crystal Peoples-Stokes

from 84 percent of the district's voters. She will return to the Assembly where she is a member of the Health, Insurance, Education, and Environmental Conservation committees and is the chair of the Governmental Operations Committee.

Members at Erie County Medical Center know they can count on Peoples-Stokes. She was a strong voice in the most recent session for passage of the Enhanced Safety Net Hospital bill, a sponsor of the Safe Staffing for Quality Care Act and the New York Health Act. She has long advocated on issues related to child welfare, domestic violence, and lupus research and treatment.

Peoples-Stokes joined efforts to increase New York's minimum wage when she first went to the Assembly back in 2002. She persevered with others and the Governor signed the wage bill earlier this year. She also championed the Paid Family Leave Act and has been a persistent supporter of increasing access to affordable childcare. Peoples-Stokes helped secure \$29 million to establish the Western New York Workforce Development Center to teach job skills focused on advanced manufacturing in electronics, solar energy and other fields. She sponsored the fair tax bill, which makes middle-class taxpayers eligible for an Earned Income Tax Credit and increases revenues to fund schools, infrastructure, child care and job creation.

Aside from her advocacy on economic and health issues, Peoples-Stokes has equally strong records on environmental protection, criminal justice reform, and improving government transparency.

without regard

immigration

to race, religion,

status or ability

to pay, all those

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city facilities"

protection at the

'Safe havens of care for all'

his is a critical moment, when religious and racial discrimination are on the rise, threatening violence," said Anne Bové, RN and President of NYSNA's NYC H+H/Mayorals Executive Council. "Our public hospitals have a long tradition of serving all New Yorkers, no matter who they are or what their care needs. Our mission is to provide a 'safe haven of care' and we will not be deterred."

With these words, NYSNA Board Secretary Anne Bové, RN, invoking her decades of service to patients in the public hospital system, took her place with a coalition of patients, caregivers and supporters to resolutely declare New York City's public hospitals "Safe Havens of Care for All."

The declaration issued by labor and health advocates and immigrant rights groups in New York provides that public hospitals are to be considered "protected zones." It is in response to growing fears of discrimination against women and immigrants, and within communities of color, and with evidence of mounting violence against Muslims and other vulnerable populations.

The declaration was announced on November 19 by a coalition including Save Our Safety Net Campaign, the New York State Nurses Association, Committee of Interns and Residents SEIU, Doctors Council SEIU, District Council 37 (DC37), the Commission on the Public's Health System and the New York Immigration Coalition, in all representing hundreds of thousands of people living and working in Metro NYC.

Strong statements issued

Together, these New Yorkers underscored the public hospital system's popular credo: without regard to race, religion, immigration status or ability to pay, all those in need will be given care and protection at the city facilities.

Both NYC Mayor Bill de Blasio and NYS Governor Andrew Cuomo have made statements in recent days reaffirming these values to reassure the safety and welfare of all New Yorkers.

Coalition members issued statements in support, excerpted here:

"Let's be clear: Election results do not change the fundamental values that define New York's commitment to providing care for all who need it. Our public health care system will always be immune to the toxicity of ugly political rhetoric," said Henry Garrido, Executive Director of DC37.

"We are committed more than ever to ensuring our hospitals wel-

come all New Yorkers who need our help," said Frank Proscia, MD, President, Doctors Council SEIU.

"We cannot allow anyone to use dangerous fear and intimidation language to scare any patient from accessing their human right to receive care," said Judy Wessler, of the Save Our Safety Net Campaign.

"We have seen an uptick in hate attacks recently against Muslims, immigrants, Asians, and Latinos since the election, said Steven Choi, executive director of the New York Immigration Coalition. "Safe havens are absolutely important...."

"It is our responsibility as physicians to care for all who come to us, regardless of race, sexual orientation, religion, gender identity, or ability to pay," said Dr. Priscilla Chukwueke, Psychiatry resident at Harlem Hospital and Regional Vice President for the Committee of Interns and Residents.

"Our public hospitals have long been the cultural competent providers of first resort for arriving immigrant groups of virtually every ethnic and language background. And despite operating in an environment characterized by overburdened, constrained and unequal financial reimbursement mechanisms, our public hospitals have been there to serve, promote and protect the welfare and well-being of everyone," said Anthony Feliciano, Director of the Commission on the Public's Health System.

Feliciano, ion on the Iready, he consequenct funds, he ER and

Anne Bové, RN and President, NYSNA's H+H/Mayorals Executive Council, addressed the press at the 'Save Our Safety Net' forum.

A TALE OF TWO HOSPITAL NYU Langjorne Medical Conter & Delevior NET OPERATING REVENUES STATPLOOD YCH+H E WELCOME HERE MELINOS MELINOS MELINOS

NYSNA nurses and other supporters at the 'Save our Safety Net'

We need fair funding!

o cries of "Sign the bill!", the Save Our Safety Net Campaign held an educational forum in the lobby of Harlem Hospital on November 15 to urge Governor Cuomo to ink his name to the all-important Enhanced Safety Net Hospital bill (A.9476-A/S.6948-A) passed unanimously in the legislature in June.

Unions, public health advocates, civil rights and immigrant rights groups and others came forward to make statements in support of a bill that would ensure New York State's safety net hospitals receive funding that fairly and equitably reflects the care they provide to Medicaid and uninsured patients.

NYSNA Secretary Anne Bové, RN, President of our union's H+H/ Mayorals Executive Council, spoke of "people being bypassed" when calling for a way to "establish and enforce the care needed.... The funds allocated by the bill are absolutely essential to the viability of our safety net system. The bill is critical to creating greater equality in healthcare. It is a must," she said.

Public Advocate Letitia James also had words to share, calling on the governor to "do the right thing." James said "this is a common ground. This bill goes a long way to address the needs of the most vulnerable."

Adverse impacts

Dr. Matthew Chatoor, a surgical resident at Harlem Hospital and a member of the Committee of Interns and Residents/SEIU, pointed out that 70 percent of inpatient admissions at Harlem were of the Medicaid and

uninsured population. Already, he said, there were "severe consequences" from lack of sufficient funds, including long delays in the ER and patients returning with the same illnesses because of their inability to afford medicines.

"When healthcare resources and funds are unfairly distributed and policies do not reflect or follow the needs of patients, we should not be surprised that our safetynet is adversely impacted," said Anthony Feliciano, Director of the Commission on the Public's Health System. "It is in the best interest of the people for the governor to sign the Enhanced Safety Net bill."

More than 15,000 signatures have been collected from hospital employees, community members and health advocates in support of this bill. More than 70 community groups across the state have written to the Governor.



Carmen Cassavaugh, RN and Elizabethtown Community Hospital LBU Chair, cast her ratification vote on October 31.

NYSNA nurses win again in North Country

et another major victory in North Country this October for NYSNA at Elizabethtown Community Hospital and Interlakes (Moses-Ludington), where our unstoppable NYSNA nurses unanimously ratified a new collective bargaining agreement. The winwin agreement sets the terms of the merger between the two hospitals favorably for our nurses and raises the bar for bargaining at other North Country hospitals.

The agreement includes ground-breaking staffing language with enforceable staffing grid guidelines and a new committee structure. It contains no takeaways. Annual across-the-board increases of three (3) percent plus a two (2) percent

parity adjustment add up to an 11 percent total increase over the contract's three-year term. Of upmost importance, after the merger, Interlakes nurses will receive the superior wages and benefits of the Elizabethtown contract. Kelly Stevens, an RN at Elizabethtown, is very pleased with the results; "I never believed that we would win the wages and staffing language that we did."

Big gains

When combined with step increases and other wage gains, many Elizabethtown nurses will see a 20 percent pay increase by the end of the agreement. The change will be even more dramatic

for Interlakes nurses, who will see a 36 percent increase during the next three years. "I'm so glad to be a part of the Elizabethtown contract and that those nurses fought so hard to make our acquisition a good thing for the Moses-Luddington nurses," said Julie Cruickshank, RN.

This critical victory sets the stage for North Country NYSNA in upcoming negotiations with Adirondack, Canton-Potsdam, and Champlain Valley Physicians Hospital, where safe staffing, wage parity, affordable healthcare for caregivers, retirement with dignity, and employment and income security are all at stake.

Mark your calendar!

Mark your calendar for your upcoming Interregional. For more information, contact your NYSNA Rep.

Dec. 7, Brooklyn, 6:00–9:00 pm DaNonna Rosa 140 7th Ave., Brooklyn

Dec. 7, Long Island, 6:00–8:00 pm NYSNA Long Island Office 900 Walt Witman Rd., Suite 207 Mellville

Dec. 7, North Country, 5:30–8:30 pmWest Side Ballroom
253 New York Rd., Plattsburgh

Dec. 8, Queens, 6:00–9:00 pmMy Kitchen Restaurant
106-17 Metropolitan Ave., Forest Hills

Dec. 12, Western, 5:30–8:30 pm NYSNA Buffalo Office 617 Main St., #351, Buffalo

Dec. 13, Capital Region, 5:30–9:30 pm Mallozzi's 1930 Curry Rd., Schenectady

Dec. 14, Staten Island, 6:00–9:00 pm Pepper Jack Grill 316 Manor Rd., Staten Island

Jan. 31, Bronx, 5:00–9:00 pm Eastwood Manor 3371 Eastchester Rd., Bronx

Feb. 1, Westchester/ Lower Hudson Valley, 5:30–8:30 pm NYSNA Tarrytown Office 660 White Plains Rd., Tarrytown

Fall Interregionals spotlight election

NYSNA members turned out in force for September and October Interregional meetings. Nurses gave updates on what's happening at their facilities, discussed upcoming contracts and actions, identified challenges, and

made plans for the future. The fall meetings included a countdown to the election with meet-the-candidate forums, where Nurses asked questions about issues critical to their communities—from local taxes to single payer healthcare and the safe staffing bill.



Nurses from Wyckoff, Brooklyn, Interfaith, Kingsbrook Jewish, Kings County, Maimonides, NY Methodist and Fresenius met on September 7 in Brooklyn.



Hudson Valley nurses gathered on October 6 in Tarrytown for a candidate forum. (Second from right): Jayne Cammisa, RN Westchester Medical Center and NYSNA Lower Hudson/NJ Regional Director, questioned the candidates.



Erie County Medical Center, Erie County Health Department, Terrace View Rehab, and Brooks Memorial members met on October 13 for the Western NY Interregional.

13

ZERO LIFT

Safer for patients; safer for us

READY. Set. Safe Patient Handling training. It's safer for patients and safer for us.

The New York State Safe Patient Handling Law (SPH), which was passed in 2014, required healthcare facilities to have labor-management SPH committees in place by January 1, 2016, and to have their SPH policies in place by January 1, 2017. Record numbers of healthcare professionals came to Buffalo this September for the Safe Patient Handling Conference, sponsored by the Zero Lift Task Force, of which NYSNA is a member, and the New York State Department of Labor. NYSNA nurses joined healthcare professionals from across New York State in reviewing state-of-the-art technologies and best practices for worker safety in their facilities. All hospitals and nursing homes must be in compliance with the law by the January deadline.

The SPH law was passed to address extraordinarily high rates of musculoskeletal injuries suffered by nurses and other healthcare workers. Sharon Greenaway, an RN in the NYC public hospital system's (NYC H+H) North Central Bronx Hospital for 30-plus years, has seen many healthcare professionals injured because of heavy lifting on the job: "Sometimes, particularly in emergencies, nurses pay a terrible price,' said Ms. Greenaway. "In fact, I met someone at the conference who got involved in SPH only after suffering an injury. That's not the right approach. Get trained in SPH and avoid learning the hard way."

Reducing injuries

SPH policies and technologies are designed to reduce dramatically the strain of manual lifting and decrease the number of injuries to healthcare workers, improve outcomes for patients and save healthcare facilities money. The Zero-Lift Task Force, comprised of NYSNA and other healthcare unions, patient advocacy groups, and the New York Department of Labor, sponsors the annual conference to help practitioners stay current on best

SPH practices and technologies and implement effective worker safety.

At the conference, healthcare professionals were trained to conduct environmental and patient mobility assessments; use mechanical aids for moving, repositioning, and lifting patients; and prevent accidents. Zero Lift also provided hands on demonstrations in cutting edge SPH technologies. Ms. Greenaway was most impressed with the sit to stand equipment. "Getting patients up and mobile is a central task in so many departments, and it is something that most of us do several times a day," she said.

Leadership is key

North Central Bronx is currently conducting its unit-by-unit SPH needs assessment. Zero Lift provided a wealth of new information and ideas for her SPH committee, Ms. Greenaway said. "SPH is about technique as well as equipment." She added, "We used to rely on body mechanics to try to avoid injury, but we know that's not enough. We have to ensure that everyone is trained in new techniques and uses the equipment once it's in place."

While conducting an assessment of SPH equipment at NYC H+H's Bellevue Hospital Center it was found that there was some equipment in place that staff had not been adequately trained to use. To remedy the situation, Bellevue's nurse educators implemented staff training to ensure their healthcare professionals learned how to properly use the existing SPH equipment.

For Sarah Chmura, RN, Erie County Medical Center (ECMC) and NYSNA Board Member for the Western Region, leadership is the key take-away from the conference. "Any time you ask people to change the way they do things, you meet some resistance. SPH must be addressed in a way that generates buy-in from the nurses and other direct caregivers," she said.

In September, ECMC was about halfway through the process of developing its SPH policy. It will be an ongoing effort, Ms. Chmura said. "Putting an SPH policy in



Patricia Wilson, RN, Jacobi Medical Center, tested a sit-to-stand device.



Members from Buffalo working at Erie County Medical Center, Brooks Memorial, and Terrace View welcomed NYSNA nurses from hospitals in the Albany area, New York City, and the Hudson Valley to their home town for the two-day conference.

place that works will take a lot of trial and error in each department and will vary with patient needs." NYSNA members and staff are working closely with covered facilities to ensure they are able to implement successful safe patient handling programs.

This year's Safe Patient Handling Conference was the best attended of any of the seven prior conferences. The five hundred healthcare professionals from 184 healthcare facilities who were on hand—including more nurses, occupational therapists, technicians, educators, and others—left better education in SPH technology. They are now well-positioned to help their hospitals, clinics, and nursing homes make the January transition to better work-place safety practices.

New book highlights NYSNA's work on Sandy recovery

hen Super Storm Sandy
hit New York, NYSNA's
nurses stood ready to save
lives. Their heroic efforts made
a lasting impression on journalist Sarah Jaffe. Among the movers and shakers featured in Jaffe's
new book, "Necessary Trouble:
Americans in Revolt," are NYSNA's
nurses, who the author chronicles
for their leadership roles among
public health professionals both
during the storm and in it's wake.

Jaffe told *New York Nurse* that NYSNA's newly-elected leadership saw a catalyst for positive social change in Sandy's wreckage. "Sandy was an opportunity for NYSNA to connect its work to democratize the union to its work in the community—and then to connect all that work to the fight for climate justice," Jaffe related.

Jaffe underscores the tremendous value of NYSNA's public health approach to the issue. "The climate movement has trouble seeing these fights as fights for people, not just polar bears," she said. "The fact is, when the actual storm comes, people are going to die—and it's not going to be a level playing field in terms of who is going to die and who is going to suffer.

Over 1,000 patients rescued

The storm hit the Rockaway Peninsula and wiped out the homes of the rich and poor alike, but poor people are the ones who were stuck on the 18th floor of a public housing highrise with no power. And they were the ones that nurses and volunteers were climbing those stairs to help."

Jaffe stresses the critical role of public hospitals in a crisis and the

need to keep our public healthcare system strong: "This is why we need public hospitals. In the Rockaways, where you don't have one, you have to build your own medical clinic and staff it with volunteers who also have jobs, so you have nurses who are working long shifts at a hospital and then schlepping down to volunteer, where there should be an adequately staffed public hospital in the neighborhood." The success of Bellevue and Coney Island's rescue efforts during the storm proved Jaffe's point. Over 1,000 patients were rescued between these two public hospitals which were fully prepared. Patients lives were saved. "The failures of the Red Cross after Sandy show us that there is no substitute for a public sector, no matter how amazing the volunteer effort may be," writes Jaffe.

Labor activists for Standing Rock



Nowhere is the battle to protect

tribal lands and our country's environment from the ravages of the oil and gas industry playing out more dramatically than in Standing Rock North Dakota, where the Dakota Access Pipeline threatens the only water supply available to the Lakota and Dakota peoples of the Standing Rock Reservation. Recognizing early on the inherent justice in resistance, NYSNA President Judy Sheridan-Gonzalez, RN, with a contingent of our nurses and staff

traveled to the Sacred Stone Camp to stand in solidarity with "the largest gathering of Native Tribes in the past 100 years of American History" against the pipeline.

Now labor activists and working people from across the country have followed suit. Labor for Standing Rock is a rank-and-file organization that has joined the First Nations in the fight to protect their water supply, their ancestral lands (and our planet) from the consequences

of gas pipeline development. Cliff Willmeng, an RN from Lafayette, Colorado, and UFCW Local 7 member, is one of the organizers. He spoke with *New York Nurse* about why it is critical to support the Native American right to self-determination and their territories.

It's a fundamental health issue

NYN: Why is a nurse from Colorado involved with a struggle in North Dakota?

Willmeng: Quite simply, advocating for our patients is a primary role and responsibility of nurses and all health care professionals. When we take a wider view of this, we have to conclude that the fight for the environment is really advocating for patients everywhere.

Where I live and work in Lafayette, Colorado, we are among communities nationally that are fighting the oil and gas industry, or as many people know it "fracking". We experience the spills, explosions, fires and leaks that the fossil fuel industry is synonymous with everywhere. When Standing Rock began to find its way into the national news, it was an easy connection for many people living in the shadow of the oil and gas industry to make.

NYN: Can you talk more about the healthcare impacts of these pipelines in particular?

When the pipelines leak and fail there are no scientific remedies to restore the comprehensive damage to the environment they affect. Every living thing that depends on that environment is then exposed in multiple ways to the oil—which is both carcinogenic and disrupts the endocrine system.

NYN: What can unions and individual members do to participate in Labor for Standing Rock?

Willmeng: The most important actions have to do with educating and mobilizing support for Standing Rock and the larger fight against the fossil fuel industry. We can pass resolutions, sponsor busses to bring members to North Dakota and start to bring new people into local fights for the environment. With these first steps, we can make the connections between all union members and begin to organize a new labor movement that fights for full employment and builds a sustainable world where working people, not CEOs, are the new leaders.

For more information, visit www.facebook.com/Labor-For-Standing-Rock



NYSNA nurses attended the 2016 Somos El Futuro conference in Puerto Rico, November 9-13. They met with state legislators and other advocates to ensure that nurses have a voice in important policy debates on safe staffing and enhanced funding for safety net hospitals, as well as on issues such as Zika, Puerto Rico's healthcare and debt crises, immigrant healthcare access and other concerns of New York's Latino community.



Lorraine Pierre-Destine, RN, Lincoln Hospital, addressed the press on September 27.

Speaking out for clean air

Residents of the South Bronx and North Brooklyn are breathing high levels of diesel emissions emitted from garbage trucks, putting them at elevated risk of respiratory disease, according to a new study by Transform Don't Trash NYC, a coalition of unions, environmental and community groups. The study, "Clearing the Air: How Reforming the Commercial Waste Sector Can Address Air Quality Issues," calls attention to how private trash trucks disproportionately harm air quality in a few specific low-income communities of color.

At a September 27 press conference on the study's release, Lorraine Pierre-Destine, a NYSNA RN in the Pediatric Emergency Department at NYC Health + Hospital's Lincoln Hospital in the Bronx, spoke about how exposure to diesel pollution is associated with asthma and other respiratory diseases, with children and young adults particularly susceptible. "The quality of air in the South Bronx is among the worst in all urban America, and the concentration of garbage dumps in the neighborhood constitutes a public health disaster. Nurses are working with labor, community and environmental advocates to change this because everyone deserves clean air, safe jobs and good health!"



NYSNA nurses worked the Staten Island Health Expo on October 5, helping connect community members with health resources and information.

Dutchess County Dems honor Vassar member

At a ceremony on October 23, the Dutchess County Democratic Committee honored Vassar Brothers Medical Center RN and NYSNA member leader Hilary Schneck by presenting her with the Eileen Hickey Labor award. The award recognizes Ms. Schneck's tireless work inside the hospital, within the community, and in the political arena to improve staffing at VBMC and achieve safe staffing legislation for all New Yorkers.



RN Hilary Schneck (second from left) at the October 23 awards ceremony

NYSNA Welcomes NYC H+H CRNAs



Members of the PAGNY CRNA Organizing Committee are thumbs up for NYSNA.

Certified Registered Nurse
Anesthetists working at NYC's
Health + Hospital's Physician
Affiliate Group (PAGNY) cast a
resounding vote for NYSNA representation on November 1. The
51 CRNAs work as part of the
3,000-member physician practice—the largest in New York
State—and will soon begin to bargain for a fair contract to protect
their practice and patients and secure
fair treatment and compensation.



Solidarity at Canton- Potsdam NYSNA members rallied on short notice to support 1199SEIU coworkers holding an informational picket at Canton Potsdam Hospital on November 1.

NYC's public hospitals shine in Leapfrog ratings

New York City's public hospitals came out ahead of the class when the Leapfrog Group released its annual Hospital Safety Grades on November 1.

Leapfrog used publicly available 2015 data of 30 evidencebased measures of hospital safety to score hospitals nationally on performance in keeping patients safe from preventable harm and medical errors. Only five NYC hospitals achieved grades of A or B, and all are facilities in NYC Health + Hospitals. The ratings speak to the high quality care delivered in the public hospital system and reinforce the need for fair funding of safety net hospitals to ensure they will be able to care for all New Yorkers well into the future.

NOVEMBER 2016



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INSIDE



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