

HHC/MAYORALS SPECIAL ISSUE 2014

New York nurse

the official publication of the new york state nurses association



Landmark HHC/Mayorals contract adds two new funds

See inside.

New York State
NURSES
ASSOCIATION

BALLOT BOX
HHC CBA RATIFICATION
BELLEVUE HOSPITAL CENTER



**Information about our
Education/Training, Child
and Elder Care Funds**

Anne Bové, RN
Bellevue Hospital Center and President,
HHC/Mayorals Executive Council

New funds for RNs and our families



Anne Bové, RN
Bellevue Hospital Center and
President, HHC/Mayorals
Executive Committee

No givebacks. More than 19 percent wage increases. Retro pay. These are building blocks of the contract we bargained for and won.

There is more to this outstanding contract: two new funds: one for education and training; the second for child and elder care.

As professional caregivers, we are very aware of the need to enhance our knowledge of nursing through education and training. As caregivers at home, we appreciate the needs of our children, spouses and parents.

What's exciting about these new funds is that we can shape them to meet our needs, evaluate those needs and change them as our experience dictates.

This special issue of *New York Nurse* helps explain these funds and reports on the New York State Patient Handling Act.

The importance of elections

Our elected officials have an important – sometimes direct – role in our contract negotiations. Public officials who are fair and open are critical to NYSNA's movement forward.

For the first time – *ever* – we weighed in last year to the local election process and endorsed local candidates in the New York City and other races, including the county legislatures of Westchester, Nassau and Suffolk. Our endorsements had a major impact and have been cited throughout these locales.

In New York City, Bill de Blasio was arrested along with NYSNA leadership and members during his mayoral campaign to bring attention to hospital closings in Brooklyn. As mayor, he engaged in HHC contract negotiations that were fair and fruitful. His dealings with us in the proposed sale of four HHC chronic dialysis clinics to a

Public officials who are fair and open are critical to NYSNA's movement forward.

for-profit entity have shown a keen knowledge and sensitivity on the issues. He continues to speak out about healthcare disparities and the absolute and essential need to bring them to an end.

A new election season

Public Advocate Tish James also earned our backing and for good reason: her door has been open to us on all issues important to NYSNA. On the dialysis sale, she weighed in with force and clarity. It was Tish James who stood – time after time – in Brooklyn to call for the protection of hospitals and the communities they serve.

We are very fortunate to have these two public servants, and many others we endorsed and who won their races, in office.

The election season is upon us again and NYSNA has given much



Candidate Tish James campaigns for Public Advocate.

attention and review to New York State candidates.

We are making new endorsements at this time and ask that you give close attention to these candidates. And vote!!



Candidate Bill de Blasio addresses members after his win in the mayoral primary.

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Union training and upgrading fund

Under the new contract NYSNA nurses can shape education and training to meet nurse needs, bringing the collective knowledge and dollars of nurses together. That's what the new fund for union training and upgrading affords NYSNA nurses. This fall NYSNA nurses will begin to form the governance of this new benefit fund, set priorities and begin implementation of this important new educational and training opportunity.

By the terms of our new contract with the Health and Hospitals Corporation, 75 cents of every \$100 of payroll will be allocated by HHC to the new fund. At current levels, that means that more than \$5 million a year will be made available to nurses for these purposes. The fund will increase with future raises in wages.

Fund oversight and benefits

The new contract creates a jointly-administered independent fund for these benefits. This functions as an independent committee, not a management entity, and will determine the types of benefits and amounts paid, priorities to be set and other rules of eligibility and access.

Other unions have had strong success in the administration and direction of education and training funds in this fashion. Fellow caregivers at 1199SEIU have enjoyed these benefits for many years, with members setting direction and reviewing plan priorities on a regular basis. In Seattle, 1199SEIU NW likewise shares in the administration of a fund for the benefit of 24,000 healthcare workers, including registered nurses. The fund began in July, 2009.

At the outset, during a start-up period, bylaws are drafted, fund trustees selected, staff hired and fund budgets set. Once programs are selected, a high priority becomes the establishment of outreach so that all members are made aware of fund offerings and can choose to participate themselves.

In the realm of training and upgrading, BSN completion is in strong demand; course work towards a Masters Degree is also supported. Certificate exam preparation is also funded. Specialty

review courses in Critical Care, Emergency Room, Pediatrics, Medical Surgical and Labor and Delivery are most common.

Under such funds, other unions have set up programs for admissions and career counseling, other forms of tuition assistance, such as in technical programs, and for full time scholarships. Free continuing education courses have also been offered.

It will be up to the NYSNA membership to make specific decisions about the allocation of fund resources: what technical and

hybrid courses which mix on-line with class work are permitted.

Where demand is high, unions have collaborated with colleges to hold classes inside hospitals to coincide with shift schedules.

Recently, new models have been pursued. In order to expedite last remaining credits towards the BSN, members in some unions receive one-day-per-week release time with stipend. In both the City University of New York and State University of New York systems, voucher programs have been set up, relieving



"I'M GOING FOR MY MASTERS. I go to Lehman to become a family nurse practitioner. I would be able to take on more courses and complete the program faster."

Inez Stewart, RN (at left)

"FOR ME, EDUCATION IS VERY IMPORTANT. You have to take the course and stay up to date even if you're not pursuing a degree."

Olga Smuglina, RN

WOODHULL MEDICAL CENTER

degree programs will be given priority; and what role will seniority play in funding distribution.

Other funds at work

It is important to stress that the needs and priorities of NYSNA members are central to the new fund for union training and upgrading. A democratic process of selecting members to serve on the fund governing body will be in place.

Other healthcare unions give high priority to BSN degree completion, paying 100% for up to 24 credits a year towards a certified, credentialed program. Often,

members of up-front tuition payments. Other programs also remove the burden of up-front payment.

"Life experience" credits are being issued in some programs a popular way to accumulate credits.

Keeping skills current so that nurses can continue to provide quality, professional care to patients remains NYSNA's highest priority.

Your participation is critical to the process of setting up these important benefits. Your questions and comments are welcome throughout the process in establishing and administering NYSNA's Union Training and Upgrading Fund.



THE CONTRACT WIN for HHC/Mayoral members is one of the most significant I have known in my 30-year career with healthcare unions. The contract terms entail a substantial wage increase, retro payments and a solid benefit package; there are no givebacks. And there are two new funds in which you, the members, have the say in its formation and direction. It is truly a landmark contract.

Your support and the input from each and every facility and unit in the HHC/Mayorals made this contract a reality.

For those of us carrying out the negotiations, the bargaining team coordination, perseverance and focus were at the highest professional level. Our team's total commitment to this contract was demonstrated throughout the process. This coordinated bargaining effort, in which I participated, was outstanding and I am very proud of the team's work.

For this effort, and others – in NYC's private sector bargaining preparation, new efforts with all RNs in the Capital Region, a new push for single payer in Albany and our continued attention to safe staffing, I can only say that NYSNA has taken on a leading role in the protection of healthcare quality standards and the extension of care to all New Yorkers.

NYSNA: Caring for ALL New Yorkers.

Jill Furillo, RN
Executive Director
NYSNA

ON THE COVER Maria Ragon, RN, Bellevue Hospital Center, casting her HHC contract ballot.

Child and Elder Care

The new fund for child and elder care addresses some of the most essential needs of NYSNA members: A toddler whose parent's work consumes long hours and must be watched and cared for on a daily basis; an aging, sick parent who requires regular care at home, sometimes during nights. Nearly one in four U.S. households provided informal care to a relative or friend 50 years or older in the past year, according to estimates. The hardship in terms of time, worry and expense can be overwhelming.

For NYSNA nurses, whose responsibilities extend 24/7 at their facilities, these burdens of caring for children and elderly family members are even greater.

With these critical issues in mind, NYSNA negotiated – and won – benefits that now establish a Child and Elder Care Fund. This is a very significant step forward for the union.

At the rate of 50 cents per \$100 of payroll, or more than \$3.5 million annually, the fund will provide new resources to eligible members. Funds increase in step with wage increases.

As with the Fund for Union Training and Upgrading (see page 3), the governance of the Child and Elder Care Fund calls for the creation of an independent, jointly administered fund for the benefit of members, wholly financed by the City but directed by nurses.

For now, members must assess needs in these two areas and make allocations of fund resources on the basis of agreed-upon priorities. Drawing upon the experience of other unions in their administration of like funds will be useful. In the end, NYSNA members, through their own governing body, will be the decision makers regarding child and elder care funding.

Funds for child care

Day care vouchers for children up to five years old are the most prevalent union-funded child care benefits in the U.S. Vouchers exist for both “documented,” that is, licensed centers, as opposed to the “undocumented,” or care at home or in another's home with pay to care giver. Sliding scales of fund reimbursement are commonly employed by union funds for these services, which largely depend upon two factors: number of household dependents and income.

Some established union child care funds maintain their own child care centers. The Future of America Learning Center in the Bronx belongs to 1199SEIU and has been in operation for 20 years, caring for children ages 16 months to five years. On the other end of the spectrum, family members



"I'M EXCITED ABOUT THE CHILD CARE SERVICES. My son always wanted to go to camp, which is very expensive."

G. Betty Alcindor, RN (at left)

"YOU HAVE A RESPITE FROM YOUR RESPONSIBILITY. Financially and time wise, a few hours a month- flexibility with my time- would be good."

**Genevieve Leonardo, RN
ELMHURST HOSPITAL CENTER**

e Fund

care for small children on an informal basis, such as a relative providing care, and may by the terms of the child care fund plan receive some funding.

Other factors regarding fund priorities are relevant. It is essential that the views of members are conveyed during the process of the establishing NYSNA's Child and Elder Care Fund.

The array of benefits available under child care plans is very extensive. Among them are: referral fees for day care centers; family day care, summer camp costs; counseling for college admission and financial aid application; college preparation course fees; tuition costs; arts programs; holiday programs. "Youth enrichment programs" for teens are qualified in some locales.

A benefit can be created around any real child care need that members identify and for which the fund gives a priority.

The challenge is to elicit the ideas of all members with child and/or elder care needs and to keep in place a mechanism for continuous assessment and reevaluation of needs. A competent data system must be developed and maintained that reflects needs as they change with our member demographic. Outreach to members is critical to staying current and making known any changes to fund programs.

Funds for elder care

For hotel workers in the San Francisco Bay Area, an elder care fund has provided up to \$150 per month in reimbursement, paid on a quarterly basis. Elder care in this instance is home care provided by a relative. Elsewhere more formal care arrangements have elder relatives with healthcare needs in group settings.

For this program, and others, "elder" care has an expansive definition: the elder may be a parent or grandparent, or a disabled spouse or adult child.

With an aging population, and limited government resources dedicated to care for the elderly and disabled, need for elder care funds is great and growing.

That is why NYSNA, and many other unions, include elder care in benefit funds.

Elder care under the NYSNA Child and Elder Care Fund requires member assessment and careful consideration and assignment of priorities by the governing body within the fund. Elder funds should reflect real need of members.

Democratic process in fund oversight

Interested members will join the fund governing board by nomination and election in a democratic process. NYSNA encourages members to participate in this process, step forward if you wish to serve, and vote in fund elections.

Members have a voice now in the establishment of the fund and its rule of governance, proposals regarding an outline in the setting of priorities and other matters central to fund rules.

Your participation is critical to the process of setting up these important benefits. Your questions are welcome.

Please see the survey on page 7 and complete it. You can also access it at www.NYSNA.org/HHCsurvey.



"THE NEW FUND TAKES OFF THE FINANCIAL BURDEN. I have two kids, 18 and 23. When they were younger it was very hard to find a camp that was not expensive. With a little income it could offset the expense."

Sharon Martin, RN

WOODHULL MEDICAL CENTER



Leatrice Durant, RN, and Saramma George, RN, of Jacobi Medical Center, Bronx, high-five the new contract.

Safe patient handling

With the passage of the New York State Safe Patient Handling Act, members have a uniform policy for the protection of patients and nurses in patient handling. The Act covers all hospitals, nursing homes, diagnostic treatment centers and clinics licenses under NYS Public Health Law Article 28.

The Act reflects conditions in the workplace where nurses suffered increasing rates of injury as a result of patient manual handling. Increases in patient obesity, an aging workforce, and nurse staffing shortages have contributed to physical demands of nurses.

Studies have shown that the substitution of manual patient handling with mechanical equipment has positive results for patients and leads to dramatic declines in healthcare worker injury rates. In the end, employers save money by implementing these policies.

Rates of hospital worker injuries are high

The Act comes at a time of extreme need. According to the government's Bureau of Labor Statistics (BLS), the injury rate for over-exertion in the hospital set-

ting is twice the national average. For nursing home workers the rate is three times the national average. The worst instances of over-exertion are manual lifting, moving and repositioning of patients.

Almost half of reported injuries for nurses and support staff in the most recent BLS filings were musculoskeletal disorders – injury to limbs, neck and back. BLS studies say that 87% of nurses report lower back pain and a large percentage of these require time off or leave work altogether.

Safe patient handling programs radically reduce injury rates, have reduced workers' compensation costs by 95% and have almost entirely eliminated lost work days tied to these conditions, according to numerous case studies.

Overview of the Act's requirements

The Act calls for the establishment of a Task Force this fall which will implement the new law in detail.

The Act requires each covered facility to establish a safe patient handling labor-management committee by January 1, 2016. Half of committee membership must be comprised of front-line, non-managerial employees. At a mini-

mum, one committee member must be an RN who provide direct care; another must be one non-nurse direct care provider.

Committees' focus

The duties of these committees include the following; establish policy for pursuant to the Safe Patient Handling Act; conduct a patient handling hazard assessment; provide on-going training and education of safe patient handling; conduct incident reviews and recommend plans for corrective actions; conduct annual program performance evaluations; and consider feasibility of incorporating safe patient handling equipment when construction or remodeling is underway.

This measure is also key to the effective safe patient handling policy and procedure and is on each committee's agenda: to develop a process by which employees may refuse to perform patient handling or movement that is reasonably believed to expose a patient or employee to the risk of injury.

For more details on the Act see <http://assembly.state.ny.us/Press/20140312i/>

Look out for THE NEW NYSNA workshop:

Avoiding Workers Compensation Claims through Ergonomics and Safe Patient Handling.

The schedule for this workshop will begin this fall!



Nurses celebrate their contract at Elmhurst Hospital Center, Queens.

Get to know your new Funds and let us get to know your needs!

MEMBER SURVEY

If you wish, you can complete this form on-line at www.NYSNA.org/HHCsurvey

Or fill out this form, detach and return to your Rep or mail to: Yvonne Miller, NYSNA, 131 West 33rd St., 4th floor, NY, NY 10001

The following questions relate to NYSNA's new benefits in the Training and Upgrading Fund and Child and Elder Care Fund.

These answers allow us to begin the process of gathering information relevant to the set up of the funds and in the implementation of fund disbursements.



1. Are you an active NYSNA registered nurse at HHC or Mayorals? Yes___ No___
2. Are you pursuing additional professional education? Yes___ No___
 - a. In Continuing Education? Yes___ No___
 - b. Towards other course work? Yes___ No___
 - i. BSN completion Yes___ No___
 - ii. Masters Degree Yes___ No___
 - iii. Specialty Review courses Yes___ No___
 - iv. Other _____
3. Do you have children? Yes___ No___
 - a. Are you expecting a child? Yes___ No___
 - b. How many children do you have under five years old? _____
 - c. How many children do you have under 12 years old? _____
 - d. How many teen age children do you have? _____
 - e. How many children live at home with you? _____
4. What are the regular care needs of your children?
 - a. Licensed day care for children under five? Yes___ No___
 - b. After school care for children? Yes___ No___
 - c. Care for children as a result of late shifts? Yes___ No___
 - d. Summer/holiday/weekend care? Yes___ No___
5. What are the special care needs of your children?
 - a. Tutoring Yes___ No___
 - b. College preparation for tests, admissions and financial aid Yes___ No___
 - c. Cultural Arts programs Yes___ No___
6. Are you responsible for the care of an elder relative? Yes___ No___
 - a. Grandparent or parent Yes___
 - b. Disabled spouse Yes___
 - c. Disabled adult child Yes___
 - d. Other _____
7. Does your elder relative live with you? Yes___ No___
8. Does your elder relative live elsewhere? Yes___ No___
 - a. On his/her own? Yes___
 - b. With other relatives? Yes___
 - c. In an institutional setting? Yes___
9. What are the care needs of your elder relative?
 - a. Full-time care Yes___ No___
 - b. Part-time care Yes___ No___
 - c. Special care Yes___ No___
10. What percentage of your household income is dedicated to child care? _____%
11. What percentage of your household income is dedicated to elder care? _____%
12. Are you interested in becoming involved with the formation and direction of the new funds? If yes, indicate interest below
 - a. Union Training and Upgrading Fund? ___
 - b. Child and Elder Care Fund? ___

Name: _____

Address: _____

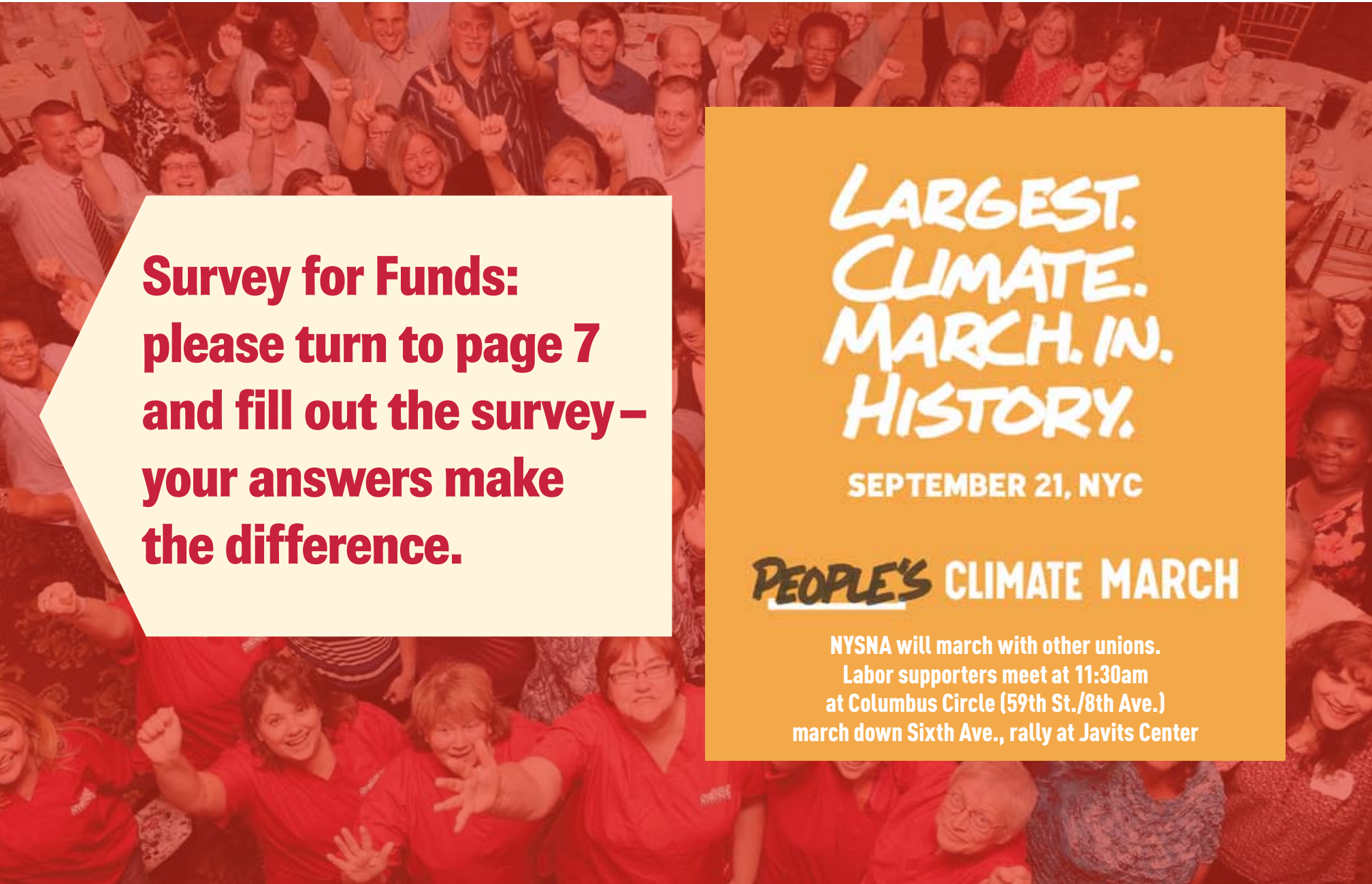
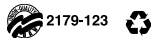
Email: _____

Workplace: _____



New York State NURSES ASSOCIATION®

131 West 33rd Street, 4th Floor
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**Survey for Funds:
please turn to page 7
and fill out the survey –
your answers make
the difference.**

**LARGEST.
CLIMATE.
MARCH. IN.
HISTORY.**

SEPTEMBER 21, NYC

PEOPLE'S CLIMATE MARCH

NYSNA will march with other unions.
Labor supporters meet at 11:30am
at Columbus Circle (59th St./8th Ave.)
march down Sixth Ave., rally at Javits Center