

New York nurse

the official publication of the new york state nurses association

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Advocating for patients. Advancing the profession.SM

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We've moved!



**The NYSNA
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From the **President**

By Patricia DiLillo, RN

Welcome new nurses!



Now is the season when many new nurses are graduating nursing school and getting their first nursing job.

You may be one of them. Congratulations – and welcome to NYSNA!

I know there are a lot of people trying to give you advice right now. So I'm not going to do that.

Instead, I'm going to ask you to do something for yourself – and the future of our profession.

Chances are, you're going to find yourself facing huge challenges every day on your new job.

We have to do more and more with less and less. And it's no accident. Administrators at many hospitals are

short staffing units – even though our patient acuity is going up.

It's hard on us as nurses. And it's worse for our patients.

If you don't stick together with other nurses, you're going to burn out.

That's why we have NYSNA. NYSNA is all of us – working together to protect one another, and to advocate for our patients.

You probably heard a lot about patient advocacy in your classes. You know being an advocate goes beyond the bedside. In NYSNA, we take that duty to advocate extremely seriously – and we

put into action at the bedside, at rallies, talking to the press, and in Albany.

Take the first step today. Go to [facebook.com/nynurses](https://www.facebook.com/nynurses) and LIKE NYSNA. You'll get updates about our union and find out what you can do to win safe staffing and defend our patients and our profession.

Together, we are strong. And together, we are winning incredible victories. Join us!

In solidarity,
Patricia DiLillo, RN

From the **Executive Director**

By Jill Furillo, RN

Myths and facts about safe staffing



New York patients are at risk from unsafe staffing.

We see this as nurses every day. But hospital administrators are trying to stop us from solving the crisis – and they're spreading misinformation about staffing.

We need to counter those myths with the truth – our patients are counting on us.

I've heard many of these myths before. They came up in California, where we won staffing ratios. Here's what the research – and nurses' own experience – has to say.

Myth #1: There is no direct link between mandated nurse staffing ratios and improved patient outcomes.

Fact: The number of patients assigned to a nurse has a direct impact on our ability to appropriately assess, monitor, care for, and safely discharge our patients.

Hospitals which routinely staff with 1:8 nurse-to-patient ratios experience five additional deaths per 1,000 patients than those staffing with 1:4 nurse-to-patient ratios (*Journal of the American Medical Association*, 2002).

Myth #2: Mandated staffing ratios could force hospitals to close or cut services, which could compromise access to care.

Fact: Not one California hospital closed because of ratio implementation. In California, hospital income rose dramatically after ratios were implemented, from \$12.5 billion from 1994 to 2003, to more than \$20.6 billion from 2004 to 2010 (*Institute for Health & Socio-Economic Policy*).

Myth #3: Safe staffing ratios would cost New York's hospitals and nursing homes too much.

Fact: Unsafe staffing hurts the bottom line by increasing rates of costly hospital-acquired infections, patient falls, 30-day readmissions, medical malpractice, nurse burnout and staff turnover, when compared to healthcare facilities that meet safe staffing levels.

Evidence and experience demonstrate that safe staffing is a cost-effective way to improve patient care and can lead to savings for our hospitals, nursing homes and our healthcare system.

In California, hospital income rose dramatically after ratios were implemented, from \$12.5 billion from 1994 to 2003, to more than \$20.6 billion from 2004 to 2010. Not one California hospital closed because of ratio implementation (*Institute for Health and Socio-Economic Policy*, 2011).

Myth #4: Hospitals need flexibility in staffing – fixed ratios won't meet the needs of patients.

Fact: The ratios set a minimum standard based on research evidence, best practices and the experience in California.

Ratios will provide a safe minimum level of staffing. Hospitals and nursing homes will still have flexibility in staffing – but they cannot go below the levels that the research demonstrates are safe.

Myth #5: Hospitals will have to lay off other caregivers if safe staffing ratios are implemented.

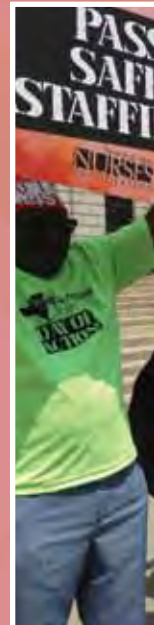
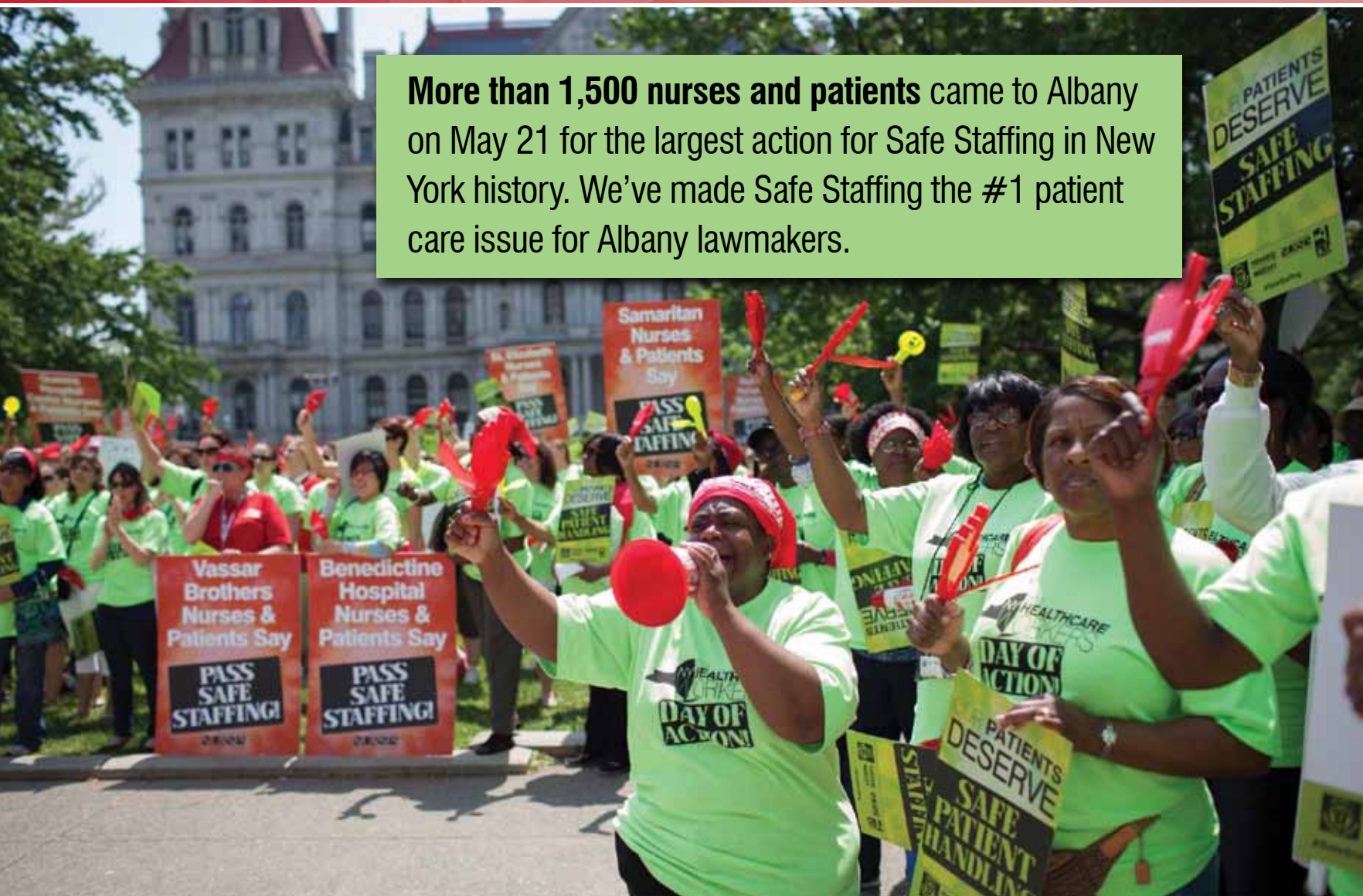
Fact: Non-nurse staffing levels at hospitals increased after safe staffing ratios were implemented in California.

The number of total nursing assistive personnel increased by 64% in California hospitals since 2005, after the ratios were implemented. That is a rate 59% higher than the rate of increase of hospital nursing assistive personnel nationally (*Institute for Health & Socio-Economic Policy*).

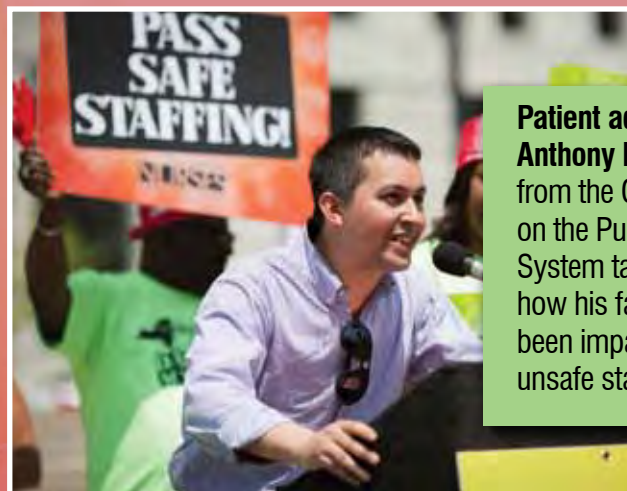
These facts are just the tip of the iceberg. You can get even more at www.nysna.org/myths

Nurses flood Albany

More than 1,500 nurses and patients came to Albany on May 21 for the largest action for Safe Staffing in New York history. We've made Safe Staffing the #1 patient care issue for Albany lawmakers.



Telling our stories on the way up to Albany. More than 40 buses came from across New York.



Patient advocate Anthony Feliciano from the Commission on the Public's Health System talked about how his family has been impacted by unsafe staffing.

Join the Safe Staffing Rapid Response Team. Text "Staffing" to 877-877.

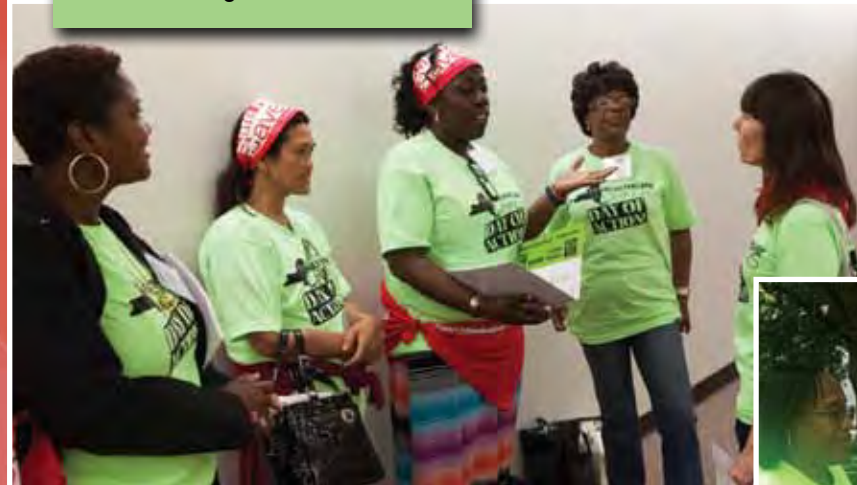
Normal text and data rates apply. Text STOP to opt-out at any time.

y for Safe Staffing!



NYSNA Vice-President Judy Sheridan-Gonzalez, RN:
"It's incredible to see nurses from NYSNA, 1199, PEF, and CWA all standing together united for Safe Staffing!"

We packed the halls of Albany — and sent a strong message that our patients need this legislation.



NYSNA board members Gwen Lancaster and Sean Petty helped tell the press about the patient care crisis.



More than 86 Assembly members have joined Dick Gottfried in sponsoring our bill.



Republicans and Democrats support Safe Staffing — like Western New York Republican George Maziarz, one of the bill's 23 sponsors in the Senate.



There's a patient crisis in hospitals across New York — and nurses came from across New York for Safe Staffing.

CITY NURSES:



Nurses from North Central Bronx, Woodhull, Jacobi, Sea View, and other HHC hospitals join over 1,500 RNs from across the state at the May 21 Safe Staffing Day of Action in Albany. HHC was the largest bargaining unit there.

No one is ever turned away from the the New York Health and Hospital Corporation, or HHC — the city’s renowned flagship public hospital system. But Mayor Bloomberg is putting our public hospital safety net in danger — and putting the city’s future at risk.

We’re making the Mayor and public officials listen to us about the need for safe minimum staffing levels in all New York City hospitals.

We’re coming together to hold Bloomberg, and the next mayor, accountable for the city’s healthcare crisis and making sure every patient seeking care in one of the city’s 11 public hospitals receives care from a nurse when they need one.

ER patients at Kings County Hospital Center are often waiting too long to be admitted due to short staffing. That’s why we are coming together for safe RN staffing in EVERY NYC hospital. We are going to make Bloomberg listen to us.



City Council Members Dan Garodnick (holding proclamation) and Rosie Mendez co-sponsored a resolution honoring Bellevue nurses for our heroic evacuation of 700 patients, without lights or elevators, during Hurricane Sandy.

Saving Patients, Fighting to Save New York Public Hospitals



“Get up! Get down! There’s a healthcare crisis in this town!”
Close to 100 Jacobi RNs called on Mayor Bloomberg and city officials to meet safe RN staffing minimums in HHC hospitals.



HHC Nurse Profile:



Name: Emmanuel Bando, RN
Unit: Ambulatory Care
HHC Facility: Lincoln Hospital
Originally from: Bacolod City, Philippines
Years working as an HHC Nurse: 21 years

What’s the best thing about our HHC system?

The best thing about our HHC system is the magnitude of its healthcare operation, providing vast and comprehensive healthcare to the 5 boroughs of NYC. We cater to the underprivileged and others who lack access to health services. We provide nursing care that is safe and efficient, even though we are struggling with staffing.

Why are you and other HHC nurses fighting for safe RN staffing?

Safe RN staffing is important to me because no matter how competent or hardworking you are as a nurse, when you’re assigned 10 patients with grave acuity and there’s no other nurse, patients’ lives are at risk. We need safe staffing legislation **now** to protect the lives of our patients and advocate for their right to safe, quality care. Don’t we all want this?

Upstate Public Hospitals FIGHT BACK

WMC fights the “death of patient care”

WMC administrators are outsourcing and subcontracting skilled caregiver positions. They're killing patient care – and we're fighting back with newspaper ads and a vigil! Westchester Medical Center RNs wrote an open letter to their community explaining why providing care at the hospital has become so difficult under the hospital's new model for patient care and lack of trained support staff after layoffs. The RNs came up with the black ribbon to symbolize the “death of patient care” at the hospital.

A Letter to Our Community from the Registered Nurses of Westchester Medical Center:

The registered nurses of Westchester Medical Center want the families and patients of the Hudson Valley to know that we are working harder than ever before – and under extreme conditions – to give your families and loved ones the highest quality, and safest care.

Recent changes to the model of care being promoted at the hospital have caused the RNs great concern regarding our ongoing ability to maintain the levels of care that you depend on – and that you deserve.

This, combined with the loss of trained support personnel over the last six months, has made the mission of the registered nurses at Westchester Medical Center even more arduous than ever before.

We have voiced our concerns to the medical center's board of directors and reminded them of our commitment to you, the patients of the Hudson Valley and throughout New York State, to provide the safest quality care, each and every time you visit the hospital.

This means having the appropriate number of registered nurses and support staff with the proper skills to serve our patients and your families.

Because although doing more with less may serve the hospital's bottom line, it does not serve the patient waiting to be seen and treated.

You, the families of the patients of Hudson Valley, are the best patient advocates a family member can have.

Get involved in your region's only tertiary care medical center.

**Ask the question – “What is really going on
at Westchester Medical Center?”**

Signed,

The Registered Nurses of Westchester Medical Center



New York State
NURSES
ASSOCIATION

Stopping privatization in the North Country

Management at Massena Memorial Hospital thinks privatization is the answer to the hospital's money woes. But we won't give up our public hospital without a fight. Here we are at a strategy session to save our hospital. We're planning hand-written appeals to our town council members and increased visibility at local events this summer.



Lake Placid ER is open for care!

We've won a victory in our fight to preserve healthcare access in the Adirondacks.

Thanks to a coalition of nurses, lawmakers, neighbors, and small business owners, Adirondack Health is putting on hold plans to turn Lake Placid's round-the-clock ER into an urgent care center with restricted hours.

Their plans are on hold for at least sixty days. But we're going to keep building community pressure to keep our ER open.



Member spotlight

Congress honors HHC nurses. Congresswoman Carolyn Maloney read a moving tribute for HHC nurses into the Congressional record.

WASHINGTON, JUNE 2013

Congressional Record

PROCEEDINGS AND DEBATES OF THE 113TH CONGRESS

IN HONOR OF THE NEW YORK CITY HEALTH AND HOSPITALS CORPORATION STAFF

HON. CAROLYN B. MALONEY OF NEW YORK IN THE HOUSE OF REPRESENTATIVES

Mr. Speaker, I rise to pay tribute to the New York City Health and Hospitals Corporation (HHC) staff for their heroic efforts during Superstorm Sandy to ensure the safety of hundreds of patients. Three HHC hospitals – Bellevue Hospital Center, the Coler Campus of Coler-Goldwater Specialty Hospital and Nursing Facility, and Coney Island Hospital – each had to be evacuated during the storm and suffered major damage. It took several months for the hospitals to reopen and Coney Island Hospital is still gradually restoring its services. During the night of the storm, when they had no way to know its severity, the nurses, doctors and staff members of these facilities joined the National Guard to safely evacuate a total of over 1,000 patients. Bellevue and Coler Hospitals are both located in the district I represent, and I am truly humbled by the dedicated work of the staff of these institutions.

Over the last seven months, we have heard countless stories of heroism, compassion and kindness exhibited by ordinary citizens, often risking their own safety to help others. When touring Bellevue after the storm, I was struck by the devastating damage to its physical structure and valuable technological equipment, but I also had the privilege to meet HHC staff members who performed extraordinary acts of bravery in the service of the patients who were most vulnerable at the time the storm hit.

Staff members rushed to the hospitals when they realized the difficulties their colleagues would face protecting patients. They came in from home or even returned from vacation time to lend their help and support, not knowing how their own homes and families would weather the storm. They worked continuous shifts and went far beyond their normal duties.

As Bellevue holds its annual legislative breakfast, I want to recognize all of those who performed above and beyond the call of duty.

Dozens of staff and volunteers formed a human chain to carry buckets of fuel to an emergency generator on an upper floor of Bellevue. People also carried food, water and other resources up and down several flights of unlit stairs. A surgical team successfully performed a cardiac procedure relying on the power of a back-up generator.

Patients at Coler Hospital on Roosevelt Island, which serves the severely and chronically disabled, were evacuated one by one down many flights of stairs. These acts of selflessness and cooperation ensured that not a single patient was harmed or killed at any of these facilities.

While repairs took place at each hospital, staff shuttled among other hospitals that had been able to retain power and stay open. This meant that nurses and doctors could continue caring for patients who had to be relocated, enabling consistent care. Today, I am pleased to say that Bellevue and Coler have reopened and Coney Island Hospital is well on its way to recovery.

HHC, the city's network of public hospital centers, has 11 acute care facilities, over 70 community health center clinics, 4 long-term care facilities and a Home Health Agency. Each year, HHC serves 1.4 million patients. Its facilities provide critical healthcare services to New Yorkers from all walks of life, and temporary closures of Bellevue, Coler and Coney Island had a significant impact felt across New York City.

Mr. Speaker, I ask my colleagues to join me in honoring the staff of Bellevue Hospital Center, Coney Island Hospital, Coler-Goldwater Hospital and all the New York City Health and Hospitals Corporation facilities for their unfailing devotion to the safety and well-being of their patients during and after Superstorm Sandy.

Carolyn B. Maloney

CAROLYN B. MALONEY
Member of Congress

NYSNA wants to spotlight... you!

Have you or one of your colleagues been recognized for an accomplishment, elected to office, won an award, received a grant or scholarship, launched a new venture? Tell us about it! Send name, address, phone number, and accomplishment — **E-mail to:** communications@nysna.org **or mail to:** NYSNA Communications Dept., 11 Cornell Road, Latham, NY 12110-1499.

The medical staff of **Samaritan Medical Center (SMC)** in Watertown recently honored its nurses, in what has become an annual event to strengthen the important relationship they share. Timed to coincide with Nurses' Week, the Medical Center and its medical staff hosted a reception and award presentation to recognize outstanding achievements by nursing professionals. Physicians, employees and trustees were invited to make nominations based on the nurses' contributions to the professional practice of nursing in the areas of quality and safety; education and mentorship; leadership; excellence in nursing practice; innovation and leading change, and a 'Rookie of the Year' category.

Dr. James Kellogg Jr. of SMC's Department of Medicine said, "We have an incredibly gifted, committed, wonderful nursing staff at Samaritan... as physicians, we work side by side with our nurses and witness their dedication each day. Any opportunity to strengthen fellowship and teamwork among doctors and nurses will ultimately be to the benefit of our patients." A total of 63 nurses were nominated, and eight were chosen by the selection committee as the 2013 recipients.

Five of those honorees are NYSNA members, with a shared nursing experience totaling more than 108 years at SMC: **Gerald Chamberlain** of the Progressive Care Unit received the Education and Mentorship Award; **Bobbie Bragger**, 5-Pratt Medical/Surgical Unit, **Karen Jobson**, Emergency Department, and **Ann Millard**, SKH 5th Floor all received the Excellence in Nursing Practice award; and **Wendy Casler**, Inpatient Mental Health, received the Rookie of the Year award.

The other awardees were Bonnie Trudeau – Leadership Award, Jeff Jones – Innovation and Leading Change Award, and Theresa Quintin – Quality & Safety.

Hi, my name is **Joe Gonzalez**. I'm an RN at **St. Luke's-Roosevelt Hospital in Manhattan**. I currently work on 9G – the Detox/Rehab unit at the Roosevelt site.

I was very motivated to become involved in NYSNA's union after my floor, Clark 6 — a



Detoxification Unit at the St. Luke's Hospital site — was abruptly closed during Storm Sandy, under the guise that beds were needed for patients that were coming from other hospitals being closed due to the storm. I was also motivated to run for office because of the current negotiations surrounding Continuum Health Partners and Mount Sinai's possible merger/acquisition, and the potential for adverse ramifications to the communities involved, and the nurses

employed by those facilities.

The unit — Clark 6 — never received the expected influx of patients and never reopened. It remains closed to this day, nine months later.

I ran for Co-President on Roosevelt Hospital's NYSNA Executive Committee and won! This is my first union position after being a nurse for twenty years, and I'm so motivated to be a part of the movement to help strengthen our union!

Thank you,
Joe Gonzalez

Member dues rates for 2013-2014

NYSNA membership dues will take effect July 1.

Dues rates are based on the average base salary for NYSNA local bargaining unit (LBU) members in various regions of the state. Dues are lower for members who are not represented by NYSNA for collective bargaining, and discounts are applied for members in other special circumstances (see chart below).

Nursing students, LPNs, and nonmember RNs now can have limited access to NYSNA services by becoming Student Affiliates or Individual Affiliates. Student Affiliates pay \$15 per year to receive a subscription to *New York Nurse*, a reduced rate to attend Convention, and library assistance.

For just \$52 per year, or \$1 a week, Individual Affiliates will receive benefits including subscriptions to printed and online publications, one hour of consultation with nursing practice experts (members have unlimited access to consultation), and lower rates to attend Convention and selected workshops.

Affiliates are not members of NYSNA, and will not be eligible for member benefits, access to the Members Only area of the website, or candidacy for leadership positions in NYSNA or ANA. Members of NYSNA bargaining units cannot become Individual Affiliates. For more information visit nysna.org.

NYSNA's dues formula

NYSNA dues are computed according to a formula approved by the members at the 2001 Voting Body. The formula uses a Regional Base Salary (RBS) to determine the dues for members in six different regions in New York state and one in New Jersey.

The RBS is the *average of the starting salary paid to staff nurses* at all NYSNA-represented facilities in each region as of Jan. 1, 2013. A calculation of 1.6 percent of this average determines the dues rate for members in that region who are represented for collective bargaining and work full time; and 1.2 percent for members who are represented for collective bargaining and work less than full time. Dues are *not* a percentage of each member's individual salary.

Nurses Represented by NYSNA for Collective Bargaining

Full-Time CBU Member

Southern	\$1,163	Eastern	\$891
Southeastern	\$1,128	Central	\$810
Lower Hudson	\$1,069	Western	\$846
New Jersey/South	\$1,025		

Rate is 1.6% of the lowest average starting salary in the region where you work.

Part Time/Per Diem CBU Member

Southern	\$877	Eastern	\$673
Southeastern	\$850	Central	\$612
Lower Hudson	\$806	Western	\$639
New Jersey/South	\$773		

Rate is 1.2% of the lowest average starting salary in the region where you work.

Nurses Not Represented by NYSNA for Collective Bargaining

Employed nurses not represented by NYSNA for collective bargaining

Southern	\$619	Eastern	\$476
Southeastern	\$600	Central	\$434
Lower Hudson	\$570	Western	\$453
New Jersey/South	\$547		

Rate is 70% of 1.2% of the lowest average starting salary in the region where you work.

Unemployed nurses or employed nurses age 62 and over and not earning more than allowed under Social Security

Southern	\$447	Eastern	\$345
Southeastern	\$434	Central	\$315
Lower Hudson	\$412	Western	\$329
New Jersey/South	\$396		

Rate is 50% of 1.2% of the lowest average starting salary in the region where you work or, if you are unemployed, where you live.

Nurses age 62 and over and unemployed, and RNs who are totally or permanently disabled (Social Security award letter required) or Lifetime Members** (age 65 or over and paid NYSNA members for 25 years or more)

Southern	\$233	Eastern	\$182
Southeastern	\$226	Central	\$166
Lower Hudson	\$215	Western	\$173
New Jersey/South	\$207		

Rate is 25% of 1.2% of the lowest average starting salary in the region where you live.

Retired category: Nurses not represented for collective bargaining, who are 62 years or older and retired and earning not more than what social security allows.

Annual dues are \$100 for all regions.

**Lifetime Members may apply for dues-free honorary status, which entitles them to receive NYSNA publications and a member rate for Convention and other continuing education events. To apply, contact NYSNA Membership at 800-724-NYRN(6976), ext. 285.

Dues Regions

Western: Allegany, Cattaraugus, Chautauqua, Chemung, Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, Schuyler, Seneca, Steuben, Tompkins, Wayne, Wyoming, Yates

Central: Broome, Cayuga, Chenango, Cortland, Delaware, Fulton, Herkimer, Jefferson, Lewis, Madison, Montgomery, Oneida, Onondaga, Oswego, Otsego, Schenectady, St. Lawrence, Tioga

Eastern: Albany, Clinton, Columbia, Essex, Franklin, Greene, Hamilton, Orange, Rensselaer, Saratoga, Schoharie, Sullivan, Ulster, Warren, Washington

Southern: Bronx, Kings, New York, Queens, Richmond

Lower Hudson: Dutchess, Putnam, Rockland, Westchester

Southeastern: Nassau, Suffolk

New Jersey/South: Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Ocean, Salem

Rally for respect and safe staffing!



Mayor Bloomberg has disrespected city nurses and our patients for three terms. He's putting our city's great public hospital system in danger. We joined thousands of working New Yorkers to send a powerful message to him: stop cutting our city's safety net. We rallied with teachers, firefighters, sanitation workers, and thousands of other working New Yorkers. **We can make this Mayor – and the next one – listen to us by standing strong and united.**



"We're hear to tell the Mayor to listen to nurses and our patients: guarantee safe staffing in all city hospitals," say Queens Hospital leaders Lindella Artman, RN, and Gloria Qualles, RN.



"I'm here because we need safe staffing in every NYC hospital!" – Rose Green, RN, Elmhurst Hospital



HHC Executive Council President Anne Bové addresses thousands of working New Yorkers: "We have the greatest public hospital system in the world — powered by us!"



"I'm here for my fellow nurses and all city workers," says this Kings County RN.

Tell this Mayor and the next one to ensure safe staffing in all NYC hospitals. Sign the petition at www.nysna.org/signthepetition

NY Nurses unite on Facebook – 4,100 fans and growing



More than 4,100 fans like NYSNA on Facebook. That's a lot of nurse power – and growing! We're using social media tools like Facebook more than ever before to advocate for our patients – and to let each other know about actions we can take to resolve issues in our workplace and to win Safe Staffing.

Want to join in? Like us at [Facebook.com/nynurses!](https://www.facebook.com/nynurses)