PATIENTS before PROFITS

Fighting to reshape a healthcare business model built for profits, not patients

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**AFT endorses Hillary Clinton**

‘Clinton is the champion working families need in the White House’

The AFT Executive Council voted overwhelmingly on July 11 to endorse Hillary Clinton in the 2016 Democratic primary for president of the United States. The AFT is the first national union to endorese a candidate in the presidential primary.

“In vision, in experience and in leadership, Hillary Clinton is the champion working families need in the White House,” says AFT President Randi Weingarten. “Hillary Clinton is a tested leader who shares our values, is supported by our members, and is prepared for a tough fight on behalf of students, families and communities. That fight defines her campaign and her career.

“In Arkansas, Hillary fought to expand access to early childhood education and care. As first lady, she fought for the right to affordable, high-quality healthcare and helped win that right for our youngest citizens. As senator, she fought for education funding and workers’ rights, and she defended public service workers who came to our nation’s defense on Sept. 11. And as secretary of state, she promoted democracy throughout the world, lifting up the worth and dignity of all people—men and women, gay and straight.”

As in past elections, the AFT’s 1.6 million members will be a powerful organizing force behind our endorsed candidate. Leading up to November 2016, AFT members are expected to make more than 1 million phone calls and knock on more than 500,000 doors.

“I’m proud that my national union endorsed Hillary because she’s a champion for working families,” says Kate Morris, a registered nurse at McKenzie–Willamette Medical Center in Springfield, Ore.

“Working on the frontlines of care delivery, my colleagues and I understand firsthand the need to shift America’s corporate culture,” says Nicole Mankowski, a registered nurse at Christ Hospital, a CarePoint facility in Jersey City, N.J. “Putting short-term profits first—before patient care and worker investment—is not just wrong, it’s bad business. But when we invest in workers, communities and the health of our patients, it pays off for everyone in the long run. Hillary Clinton really gets it.”

The AFT conducted a long, deliberative process to assess which candidate would best champion the issues of importance to our members, their families and communities. Members were engaged online, through the You Decide website, through several telephone town halls, and through multiple surveys—reaching more than 1 million members.

Additionally, the AFT conducted a scientific poll of our membership on candidates and key issues. The top issues members raised were jobs and the economy and public education. By more than a 3-to-1 ratio, members said the union should endorse Clinton.
As we reflect on 100 years as the American Federation of Teachers, there is one expression I keep coming back to: We are our union.

Our union was founded a century ago to establish a voice for teachers so they could combat factory-like conditions in public schools, advocate for fair pay and better working conditions, promote the needs of their students, and stand up for greater autonomy as professionals. Our union’s heart, our soul, our courage and our power lie with our members and our communities. They always have.

Today, 1.6 million members strong, our identity grows out of the proud history built by AFT members, who, through the tumult and change of the past century, stood up for the principles that ground us. Those who came before us built the AFT into a union of professionals that champions fairness; democracy; economic opportunity; and high-quality public education, healthcare and public services for our students, their families and our communities. This has been our century-long journey. As we continue this journey, we have many reminders that we are our union.

We are Norma Becker, a public school teacher from New York City and the mother of two young children, who, along with 35 other teachers, boarded a bus in 1963 and headed to Farmville, Va., to open Freedom Schools, where she and others taught black children who had been shut out of their public schools.

We are Margaret Cotter and other female teachers in Boston, who first joined the AFT in 1920 in order to achieve equal pay, and were supported by then-AFT President Charles Stillman, who said: “Sex discrimination in salary and working conditions belongs to the old order.”

We are Jennifer Henry, Mari Cordes and others from the Vermont Federation of Nurses and Health Professionals who, after the devastating 2010 earthquake in Haiti, traveled there as volunteers to provide medical assistance—and then returned to help establish a union-run clinic for women and children.

We have a proud history. As we celebrate 100 years, we need to look at who we are today and who we will be in the future.

I don’t have to tell you that the principles we stand on are under attack. Unions are squarely in the crosshairs of those who want to preserve a status quo that benefits an ever-smaller advantaged class. During a time when income inequality is at its worst since before the Great Depression, corporate-backed politicians have launched an all-out assault on unions—from statehouses to court houses—and thereby on the communities our members serve.

Despite these attacks, the tide is turning—support for unions is at the highest counterpart in nonunion workplaces. A report from the Institute for Women’s Policy Research found that female union members earn 89 cents for every dollar a male worker earns, compared with 77 cents on the dollar for their nonunion peers.

Let me put it simply: Unions built the middle class, and we can rebuild it. Although our numbers have diminished, our determination to create a better life for everyday Americans has not.

This reality is the driving force behind our efforts to reach out and speak to 100 percent of our members during our 100th year. Because if we can connect with our members, engage with our members—exchange values, aspirations and challenges—then we will actually have the power to change things.

What it means to be a union is to have each other’s backs, to walk in each other’s shoes and to make progress together. Our power comes from all of us raising our collective voice—and that is only possible when we connect to all of our members in personal and compelling ways.

I hope you will join me as we work toward a future that builds on our past—by creating a present defined by all of our voices, speaking out, together.

Our union’s heart, our soul, our courage and our power lie with our members and our communities. They always have.
AS NEGOTIATIONS BETWEEN MORE than 1,000 members of the Health Professionals and Allied Employees (HPAE) and CarePoint Health began this past spring, the workers made their goals clear: They wanted patient safety and workers’ rights to be the top priority.

HPAE, the AFT Nurses and Health Professionals affiliate in New Jersey, represents 850 nurses and health professionals at Bayonne Medical Center and 400 nurses at Christ Hospital in Jersey City. Members at both facilities know the hospital system CarePoint well. The for-profit company took over both community hospitals as well as Hoboken University Medical Center (which is not represented by HPAE) nearly two years ago. Since then, CarePoint hospitals in New Jersey are among the most expensive places to be a patient.

In May, HPAE members were deep in negotiations with CarePoint when state lawmakers introduced legislation to increase transparency in out-of-network care costs. Many of them saw CarePoint Health as a prime example of why such legislation was needed. For example, Medicare data released this year noted that the national average cost to treat severe sepsis was $48,465. CarePoint’s Christ Hospital charged nearly $223,000 for patients with severe sepsis. The goal of the legislation was to provide consumers with protections from excessive charges for out-of-network care.

CarePoint CEO Dennis Kelly has said high network charges for patients is a “survival strategy” and that insurance companies leave no choice for hospitals like his because the insurers’ reimbursement rates are inadequate. “If you’re not going to offer me a fair reimbursement that would allow me to sustain my business practice, then I’m going to use whatever I have at my disposal to try to secure adequate revenues to continue to operate the enterprise,” Kelly told NJBIZ.com.

But Jeanne Otersen, HPAE chief of staff, in her testimony supporting the legislation, said that consumers have a right to know about the network status and costs of healthcare providers. Transparency is a tenet of AFT NHP’s Patients Before Profits campaign.

“This model has serious repercussions for our communities, our patients, and for the healthcare workforce.”

—JEANNE OTERSEN, HPAE chief of staff

"CarePoint would like credit for saving these hospitals—ignoring the efforts of the community and workers. Yet the profits CarePoint has amassed go unmentioned," she pointed out. "Yes, we have a hospital, but we also have two of the most expensive hospitals in the country, in a community that cannot afford to go elsewhere and cannot afford to pay these charges. This model has serious repercussions for our communities, our patients, and for the healthcare workforce," Otersen said. "Our members live and work in these communities and utilize..."
these hospitals. We do support a solution that would establish fair reimbursement rates for our hospitals and providers.”

**Stuck in the middle**

The union’s support of the legislation put the nurses and health professionals who work at the CarePoint facilities right in the middle of the debate when CarePoint threatened that it would be forced to close its hospitals should the legislation pass.

In response to threats made against nurses and health professionals, HPAE members decided to file unfair labor practice charges against CarePoint. The first charge was that the hospital system had threatened nursing leaders with a lawsuit for supporting the legislation.

“We fought hard to save our hospitals and protect services and quality of care when CarePoint took over our community hospitals,” says Nicole Mankowski, registered nurse and president of the local at Christ Hospital. “We will not readily give up our right to speak up for safe staffing, for our workplace rights, and for our patients.”

**A contract that values nursing**

During negotiations, union members met with state and community leaders, including the mayors of Bayonne and Jersey City, state senators, assembly members and city council members to garner support for the efforts to improve patient safety in their hospitals.

In a show of support for its health professionals, the Bayonne City Council passed a resolution in support of the union’s call for safe staffing legislation at CarePoint hospitals. John Bauer, president of the union local at Bayonne said the support of elected officials was “crucial” in getting CarePoint to address the issue of safe staffing as well as getting safe staffing legislation at the state level.

In spite of the politicians’ support, negotiations were at a standstill. To bring attention to the situation and inform the community, HPAE held an informational picket at both hospitals, one day before the contract between CarePoint and the hospitals expired. Hundreds of members descended on the facilities chanting for safe staffing and a fair contract. Former patient Pamela O’Donell joined the picket. “I think they deserve everything they’re asking for. Bayonne is a small community hospital, and we depend on this hospital being here and the staff being as educated and talented as they are.”

On June 30, after two months of difficult negotiations, a tentative agreement was reached for both hospitals. The new deal includes improved staffing levels as well as wage increases and limits on health insurance increases. “Our main priorities have been keeping qualified nurses at the bedside,” said Christ Hospital’s Mankowski. “This contract values nursing and represents stability and continuity of care for caregivers and patients. It’s the result of our union working together to insist on raising and protecting standards.”

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**RightCare Action Week**

**AFT Nurses and Health Professionals seeks to raise awareness of changes in healthcare**

**RightCare Action Week gives members a chance to get involved**

AS AFT’S HEALTHCARE professionals move toward the goals of their recently launched Patients Before Profits campaign, the focus has been on finding ways to raise awareness of the changing healthcare landscape. One way to do that is to take part in **RightCare Action Week, Oct. 18-24**, a grass-roots event organized by the Lown Institute. The week of action is an initiative of the institute’s RightCare Alliance, and the AFT NHP is a partner.

“RightCare Action Week offers an opportunity to talk about changing the system into one that provides the kind of care that we want and gives frontline workers a voice in decision-making,” says Aaron Stupple, a medical resident at Beth Israel Deaconess Medical Center in Boston and member of the institute’s RightCare Action Week working group.

“It’s important for us to share what we see that is wrong with the system,” says Candice Owley, an AFT vice president and president of the Wisconsin Federation of Nurses and Health Professionals.

There are two worldviews of healthcare, says Shannon Brownlee, senior vice president at Lown. “We face a choice of seeing healthcare as just another business or as a public good. For most, the reason they go into healthcare is to take care of people; it is a social mission. We are seeing consolidation of the healthcare system, which should improve the quality of care and bring down costs, but that is not the reality,” says Brownlee, who notes that overtreatment and waste in hospitals are driving up the cost of care. “That’s money that could be spent in other areas such as education, transportation or other services in a state budget.”

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**WE ARE MOVING!**

*HealthWire has outgrown its print publication and is moving to an all-digital platform.*

**SIGN UP** for the new HealthWire at AFT.to/HealthWire.
Above, rally participants celebrate the decision to uphold the Affordable Care Act.

Below left, AFT Connecticut members at a rally for the 50th anniversary of Medicare. Below right, Ohio nurses’ fun run raises money for their local children’s hospital.

DEcision on Affordable Care Act

A VICTORY The U.S. Supreme Court got it right on healthcare with its June 25 decision in King v. Burwell, AFT President Randi Weingarten says. “This is a victory for working families,” she noted following the decision. “Ask the nurse who sees patients every day who are getting healthy thanks to the Affordable Care Act. Ask the adjunct professor or the school support-staff worker who now has coverage thanks to the law. The Affordable Care Act is working. Thanks to the Affordable Care Act, 16 million Americans who previously had no coverage now have access to affordable, quality healthcare.”

Celebrating 50 Years of Medicare

It’s been 50 years since Medicare was signed into law, and on July 30, activists and supporters gathered in dozens of cities nationwide to celebrate and call on lawmakers to protect, improve and expand the vital program. The celebration in Washington, D.C., drew hundreds of activists from unions and other organizations, including the AFT, the Alliance for Retired Americans, the United Auto Workers, National Nurses United and Healthcare-NOW! A number of AFT affiliates also participated in the celebrations, including the Washington State Nurses Association, the United Federation of Teachers and AFT Connecticut. Many of the speakers at these celebrations said the best way to preserve and honor Medicare is to expand it to all Americans.

Lobbying for Staffing Improvements, a Success

Connecticut hospitals are required to have a nurse staffing plan in place that provides adequate and appropriate healthcare services with input from direct care staff, along with other requirements. In the last legislative session, healthcare members of AFT Connecticut lobbied state lawmakers to revise the current law to require each hospital licensed by the state Department of Public Health to report its staffing levels or nurse-to-patient ratios annually. The revision also would allow the department to make that information public.

Patient Safety, Nurses’ Rights in First Contract

Registered nurses at Inspira Medical Center in Woodbury, N.J., have ratified their first contract. The RNs are newly unionized nurses, and their decision to join Health Professionals and Allied Employees unites them with nurses at three other Inspira hospitals already represented by HPAE, New Jersey’s largest healthcare union. “This contract improves our working conditions, creates new standards to enforce safe staffing levels and gives nurses greater ability to provide safe patient care,” says Arthur Matthews, a behavioral health RN who has more than 10 years of experience at the hospital and was elected to the negotiating committee. “Inspira-Woodbury is a small community hospital; our patients are our family members and neighbors, and our priority is protecting our hospital, so we deliver the best care for our patients.”

Walk to Save Rural Hospitals Concludes at the U.S. Capitol

Belhaven, N.C., Mayor Adam O’Neal hit the road for the second summer in a row—walking from his hometown of Belhaven to Washington, D.C., to raise awareness of the plight of rural hospitals across the country. This year, O’Neal and a group of activists from across the country walked 283 miles, a number symbolic of the number of rural hospitals that face closure in the United States this year due to financial pressure. “This isn’t just a rural problem—it’s everyone’s problem,” said AFT President Randi Weingarten, who joined the walkers at the Capitol. “We must stop putting profits ahead of people and focus on how we can help people in urban and rural areas.”

Nurses Host a Fun Run

The Ohio State University Nurses Organization held its first “Christmas in July” 5K run and walk to raise money and collect new toys to donate to Nationwide Children’s Hospital in Columbus. The local, which is an Ohio Nurses Association/AFT affiliate, represents nearly 3,000 nurses working at Ohio State University’s Wexner Medical Center in Columbus. The nurse-sponsored event brought in more than $2,500 and dozens of toy donations. One of the racers, RN Shelly Wade, said the event was a great opportunity for nurses to show their support for other healthcare providers in the city, promote wellness and be a part of a larger community. Registered nurse Jessie Frymyer agreed. “The race gave community members an opportunity to get up and get moving while helping a patient population we don’t get to service.”
Leading together for quality care

Health professionals learn to use their voice, workplace power

THE LAST TIME AFT’s nurses and health professionals got together, they resolved to focus their efforts on reshaping the U.S. healthcare system to meet the needs of their communities and to put patients first. This past spring, they took the first step toward that goal at the AFT Nurses and Health Professionals annual professional issues conference and labor academy. The conference, held in Chicago May 20-22, was filled with opportunities for participants to learn how to use their voice and workplace power to build the strength necessary to protect patients.

“Hospitals and healthcare facilities are changing,” AFT President Randi Weingarten, told participants in her keynote address on the first day of the conference. “They are aggregating their power, and they no longer care about the communities in which they operate. The result has been that those in charge have tried to exploit the goodness of your collective hearts,” she said.

“We have got to fight back,” Weingarten told participants. To do that, the focus has to be on connecting with community, engaging members and providing solution-driven unionism, Weingarten said. “I’m not asking for everyone to be an activist but to be engaged in the work of the union because when you have thousands at a rally, or signing petitions or sitting at the bargaining table, it changes behavior. If we work collectively, we will regain and reclaim the promise of America.”

Finding solutions

Finding solutions to the challenge of keeping patient care and quality the priority when it comes to healthcare was at the heart of a number of questions from attendees who free-flowing exchange of ideas prompted at the conference. The thoughtful and informative discussions were important to the work of the union because when you have thousands at a rally, or signing petitions or sitting at the bargaining table, it changes behavior. If we work collectively, we will regain and reclaim the promise of America.

The conference was packed with workshops, including one that taught members to protect themselves from measles, Ebola and other infectious diseases.

Author and journalist Suzanne Gordon, left, with registered nurse Alice Leo.

TELLING OUR STORIES

DO UNIONS SAVE LIVES? Suzanne Gordon thinks so. Gordon believes that healthcare unions save lives. She became convinced of this during a recent hospital stay. Gordon recounted that experience to attendees at the AFT NHP Professional Issues Conference and National Federation of Nurses Annual Labor Academy, held in Chicago on May 20-22.

“As nurses and health professionals, your job is to keep patients safe. But the system makes it hard for you to do that unless you are in a union,” said Gordon, an award-winning journalist and author, who focuses much of her work on patient safety and on encouraging better communications and teamwork in healthcare settings. A little over a year ago, Gordon fell ill while on vacation. She went to the nearest hospital where she was diagnosed with appendicitis and had surgery.

“I ended up with other problems that have changed my relationship with healthcare services,” said Gordon. The nonunion nurses at the hospital where Gordon had been a patient didn’t feel safe to speak up about certain conditions at their facility. That’s when she began to connect her own experience to the importance of unionized hospitals. “It goes to show,” she said, that even when nurses and health professionals have the best intentions when it comes to safety, “if they can’t protect themselves or don’t have a voice to speak out, it’s hard to focus on patient safety.”

“I had to say this to you, because maybe this would not have happened to me if I were in a union hospital where staff can speak up,” said Gordon. The sentiment resonated with Alice Leo, a member of the Porter Federation of Nurses and Health Professionals in Vermont, which recently became unionized. “I started working at my hospital in 1993. I saw things go downhill slowly. Staffing was terrible,” she said, “but nurses were afraid to speak up before we organized. Now, there is a different relationship.”

Stories like Leo’s are stories people have to hear from you, Gordon told conference participants. “I encourage you to educate America,” she said, asking participants to commit to having conversations with 10 people outside of healthcare. “Help them understand what you do and how unionization helps you do your work,” said Gordon. “Use your voices and narrate your experience.”

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Author and journalist Suzanne Gordon, left, with registered nurse Alice Leo.
All about the data
Research supports the need for school nurses and school-based health centers

SCHOOL NURSES AND school-based health centers each serve different roles, but they share one goal: keeping students in school and ready to learn. School nurses know that having a qualified health professional in school makes a difference in improving both student health and achievement, but more research is needed to officially make this connection. A panel held June 12 in Washington, D.C., on the impact of school-based care on student well-being reinforced the need for more research. The session was sponsored by the Albert Shanker Institute, the AFT, the American Public Health Association and the National Association of School Nurses.

"It’s the everyday interactions you have with kids as a nurse that builds the continuity of care, and then they perform better," said Thomas Stinson, a school nurse and AFT member from St. Paul, Minn. Stinson was a member of a panel titled “Gauging the Impact of School-Based Healthcare on Students’ Health, Well-Being and Educational Outcomes.” Panelists discussed how two recent studies that looked at the cost and benefits of having school nurses and the collection of nurse-generated data may encourage additional research that ultimately could strengthen policies concerning school health services.

"The role we play is hard to explain, and sometimes administration doesn’t see the impact of school nurses," said Stinson. “That’s why research-based data is important. It shows we are valuable and a vital member of the school community. Because I am there to take care of a student, others are able to continue to do their jobs,” he said. “We’re there so that teachers can teach.”

“It’s essential for school nurses and other stakeholders to know the data about what school health can do and the outcomes you can expect from it,” said Martha Bergren, a clinical associate professor at the University of Illinois-Chicago College of Nursing. Bergren is also the lead author of a study on the feasibility of collecting school nurse data, which was sponsored by the Albert Shanker Institute. "We need to mobilize our stakeholders—especially parents—and let them know what services we’re providing so that when there is a risk to cuts in school nurse services, parents are involved in advocating for school health," she added.

Terri Wright, director of the Center for School, Health and Education and the Center for Public Health Policy at the American Public Health Association, agreed. "Parents and students are the best messengers for the work that you do. We must enlist them to share their experience and let them carry their own message." The bottom line, says Wright, is that schools need a school nurse and a school-based health center—particularly in communities with high degrees of poverty and underresourced schools and communities. "It takes school-based health centers and school nurses to make a difference," Wright noted. “Together, they are at the intersection of health and education.”