



HealthWire

THE NATIONAL PUBLICATION OF AFT HEALTHCARE PROFESSIONALS

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A Union of Professionals

AFT Nurses and Health Professionals ♥

OUR MISSION

The American Federation of Teachers is 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. We are committed to advancing these principles through community engagement, organizing, collective bargaining and political activism, and especially through the work our members do.

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Cover Photo: JOHN SALLER

A new partnership in Alaska

Alaska nurses endorse national union affiliation with AFT

THE ALASKA NURSES Association (AaNA) Labor Program has agreed to affiliate with the American Federation of Teachers Nurses and Health Professionals. The announcement was made jointly by AaNA Labor Council Chair Donna Phillips in Anchorage and AFT President Randi Weingarten in Washington, D.C. The two organizations had been in discussions for several months, culminating in a meeting of the two leaders in Anchorage in late March.

Registered nurses in bargaining units represented by the Labor Program overwhelmingly affirmed the earlier decision of the AaNA Labor Council board to seek affiliation with the AFT. The affiliation was also approved by the AFT executive council in a special meeting on April 7.

“We are excited and honored that Alaska’s nurses have put their confidence in the AFT, as a voice and fighter for nurses and for quality healthcare,” Weingarten said. “Alaska’s nurses will be joining our union of professionals, 1.6 million members strong, including 113,000 members working in the healthcare industry across the nation, as we continue to fight for quality care, safe staffing levels and high professional standards—and demand that hospitals and healthcare facilities put patients before profits.”

Phillips said the announcement concludes the process that began in 2013 when the Alaska nurses launched an initiative to investigate possible affiliation with a national union and to identify and review possible partners. “We sought a national union with a record of representing registered nurses, one that is active in the AFL-CIO and a partner that will give AaNA members a voice in the national policies that affect their work every day,” Phillips said. “We are professionals—and the AFT is the pre-eminent union of professionals in American labor today.”

“An affiliation with the national union will provide AaNA with training and mentoring opportunities for new and existing leaders, professional development for our members, assistance with new organizing efforts and support for AaNA’s existing bargaining units,” Phillips said. The partnership with the AFT ultimately will give Alaska nurses a role in the national union’s policies and programs for registered nurses and other healthcare professionals.

As they join the AFT family, Weingarten said, “Alaska’s nurses will find a welcoming home, joining their colleagues who devote their lives to making a difference every day for the patients, students and many others they serve.”

Two large provider systems operating in Alaska employ many AaNA members. The systems are Providence Health & Services Alaska, which is part of the third-largest not-for-profit health system in the United States, and PeaceHealth Medical System, which operates the Ketchikan Medical Center, as well as other facilities in Alaska, Oregon and Washington. The AaNA’s third bargaining unit represents nurses at Central Peninsula General Hospital in Soldotna. Phillips said the new partnership with the AFT will help strengthen the voices of nurses currently in contract talks with Providence Alaska Medical Center in Anchorage.

Weingarten noted that as a result of the previous affiliation of the National Federation of Nurses, AFT affiliates in Oregon and Washington state already represent nurses at other hospitals in both the Providence and the PeaceHealth systems. In Alaska, the AFT already represents thousands of state and local public workers; faculty and classified staff in the university, community and technical college system; and teachers and paraprofessionals in public schools, all of whom are affiliated with the AFT’s state federation, the Alaska Public Employees Association/AFT—one of the oldest and largest public employee unions in the state.

“We are pleased that Alaska’s nurses have made the decision to affiliate with the AFT,” says APEA/AFT President Cecily Hodges. “Nurses share the commitment to quality services and professional standards that are central to the mission of public employees, educators and the many others who make APEA/AFT an important voice in Alaska.”

AFT President Randi Weingarten (seated, second from left) with members of the Alaska Nurses Association.



JOSHUA CORBETT



Building our power by standing together

RANDI WEINGARTEN, AFT President

SCHOOL NURSES IN MARYLAND. Third-generation nurses in Ohio. X-ray technicians in Wisconsin. Our members are proud of what they do. Across the country, AFT Nurses and Health Professionals members are building on that pride to strengthen our union from the inside out, while fighting for the services that patients and communities need—and beating back the latest round of attacks from those who want nothing more than to eviscerate us.

Why is there this drumbeat of attacks? Because those who choose to destroy us know that their claims about things like trickle-down economics and the evils of big government don't hold much water with the rest of us. They realize that the 99 percent realizes that their sole aim is to further build the 1 percent's astronomical wealth. So instead, their strategy is to dismantle our infrastructure, piece by piece.

The attacks have been sweeping through state legislatures—Wisconsin recently became the 25th state with a so-called right-to-work law. Gov. Scott Walker reversed a campaign promise by signing this legislation that aims to silence workers by destroying their link with their unions. Unfortunately, the impacts of these efforts extend well beyond our members; workers in right-to-work states make about \$1,500 less per year than workers in states with collective bargaining.

On the national stage, the U.S. Supreme Court could change the way that public sector unions function in this country. *Friedrichs v. California Teachers Association* is the latest in a series of court cases that upset the balance of power—with decisions like *Shelby County v. Holder*, which struck down the Voting Rights Act, or *Citizens United v. FEC*, which did away with campaign finance laws.

As in *Harris v. Quinn*, the plaintiffs in the *Friedrichs* case are pushing to put an end to agency fee, which represents the cost to the union of representing all workers in a bar-

gaining unit. Agency fee is also known as fair share, because it's only fair if everyone who benefits from the services a union provides—such as collective bargaining for things like better wages, healthcare, a secure retirement and protections against wrongful firing—also chips in to cover the cost of those benefits.

Under the current system, everyone votes on whether to join a union, and if a majority votes yes, everyone gets the benefits. If the Supreme Court were to follow the plaintiff's reasoning, it would be setting aside thousands of public employee contracts as well as precedent reaffirmed by the court at least four times over the past 30 years. Workers in a bargaining unit wouldn't have to pay their fair share even though the union would continue

enfranchised—women, African-Americans and Latinos—had a clearer path to the middle class. Private-sector unions helped drive up all workers' wages. And public sector unions ensured better government services for the poor and middle class. And the income gap between the wealthy few and the rest of us was about half of what we see today.

Take it from the International Monetary Fund: Rising inequality on the global level is in part due to a decline in unionization. Or as Hillary Clinton said: "The American middle class was built, in part, by the right for people to organize and bargain."

I would add: The American middle class can be rebuilt by our collective right to organize and bargain—which is why what our

The American middle class can be rebuilt by our collective right to organize and bargain, by reminding each other that the way we fight back is to stand together.

to work on their behalf, and even though all workers would continue to benefit from the union's work. The intention of the *Friedrichs* case is strictly to starve unions.

Right now, we're dealing with the equivalent of tectonic plates across America. On one side, we have the deck stacked against working families, attacks on the rights of workers, breaks for corporations and the wealthy few. On the other side, we have working families whose wages have been stagnant for decades; they don't just want to get by, they want to get ahead. These families are clamoring for change, and even unlikely allies are looking to the American labor movement to help spur that change.

The labor movement was instrumental in building a middle class. When unions were at their peak, more workers—upward of 50 percent—were in the middle class. Even those who were historically marginalized and dis-

members in Maryland, Ohio and Wisconsin and in other locals across the country are doing is so important. They are fortifying and building our power by reminding each other that the way we fight back is to stand together—willfully defiant.

They are doing it by sitting down, member to member, co-worker to co-worker, friend to friend and reminding each other that our power comes from one another. As we stand up against relentless attacks from those who want to wipe unions off the map and take away workers' voice, that strength gives us the power to fight back and move forward.

Remember, when we are stronger together, we can leverage that power to improve the lives of the kids, families and communities we serve. And that's why we're here. We take pride in our work. We take pride in improving the lives of others. We can build on that power, if we do it together.

STRENGTH *in* NUMBERS

TO BOLSTER UNION STRENGTH, WE MUST HARNESS THE POWER OF OUR MEMBERS

The unionized workforce has been under constant attack for years by anti-union forces determined to tear down our infrastructure. To reinforce our infrastructure and increase our muscle, we must tap into the power of our members.

One way to do this is through member mobilization.

Many locals and affiliates are facing these challenges by turning to their members for help. AFT President Randi Weingarten says the power of unified members and the solidarity of working members will drive us to the right answers: “As circumstances change, our nation changes, the world changes. We too must change.”

Many of our locals are utilizing the new unionism model of community engagement, improving the quality of services that

members provide, organizing internally and mobilizing members, and organizing the unorganized. An active membership is the counterweight to an adversary who wants to divide us, says Weingarten.

In many of our affiliates, leaders are working with their members to craft campaigns that focus on a broad agenda that addresses professional issues such as improving staffing but also connects with the community. Leaders want to achieve full union membership because they understand that there is strength in numbers.

Strength will be necessary as the labor movement faces the most recent attack on unions, which will be fought in the U.S. Supreme Court in the very near future. The case, *Friedrichs v. California Teachers Association*, asks the court to decide whether public sector unions can continue to charge nonmembers a fee equal to the cost of representing them to their employer. This fee is called “agency fee” or “fair share.” In states where there is no fair share, the union must sign up everyone as full members to keep the union strong. Many of our local affiliates have been taking actions to ramp up full membership for years, so if the court should rule against us, the work of our affiliates will be a road map for others.

“A lot of people didn’t recognize what the union did for them, but this process has brought the idea of the union to the forefront.”

—JIM CICHY

Wisconsin Federation of Nurses and Health Professionals



WFNHP members Jim Cichy, left, and Jeff Weber say one-on-one conversation connects co-workers to the union.

JOHN SALLER

It’s about solidarity

Building membership starts with having meaningful conversations with members. That’s what has worked for Jeff Weber, president of Wisconsin Federation of Nurses and Health Professionals Local 5001. Weber’s local represents nearly 225 registered nurses, occupational therapists and music therapists for the Milwaukee County Behavioral Health Division, which provides care and treatment to adults, children and adolescents with mental illness, substance use disorders and intellectual disabilities. Two years ago, state legislators passed Act 10, a law that requires public sector unions to recertify every year with the support of 51 percent of employees. Recertification gives the union legal recognition to bargain for wages only; and pay increases are capped at inflation, which is now at 2 percent.

Some unions have opted not to recertify, seeing it as pointless because of the limits placed on bargaining. But the union is not about the ability to bargain, says Weber, it’s about solidarity. So he and his board identified members who could be counted on to champion the union. Each month, these “champions” meet to talk about the state of the union and are tasked with connecting with

their union colleagues to talk about what's happening in their units and find out what the union can do to help.

When it was time for Weber's union to recertify, the champions also reached out to members to encourage them to vote. "The face-to-face engagement really has an impact," says Weber. "It makes a difference."

In a way, the need to recertify every year has been beneficial, says Jim Cichy, a registered nurse and a champion for the union. "A lot of people didn't recognize what the union did for them, but this process has brought the idea of the union to the forefront. The conversation is constant, and because our union is visible in the fight for our rights as professionals, the energy for the union is also there," says Cichy. "I'm sure that [Gov.] Walker and his people are surprised that many of our unions are still going strong in spite of it all. People recognize our importance, and that's why we are still here and we are still strong."

"It's important to remain strong together and show solidarity," says Leslie Roberts, an acute care nurse and a WFNHP member, who is also a champion. "Of course, the state and the county would prefer if we just fold. And for some people that would be easier, because there is so much pressure not to bother. But I am not giving in."

Roberts points out that WFNHP continues to speak out on working conditions and standing with the community on issues that affect residents. "Those things are important, and we have been successful in our efforts."

A concerted effort to fight

Over the last two years, AFT Healthcare-Maryland has seen a significant increase in the number of health professionals switching from being agency fee payers to becoming full-time members of the union. The increase in full membership is because of the union's work to rebuild its steward structure, says AFT Healthcare-Maryland president Debra Perry.

The union recruited members who have been activists to be stewards and began working with other members to champion issues like staffing and workplace violence, which has been a big problem in many state-run healthcare facilities.

"Our members were also concerned about the direction of the state—with policies that targeted state employees and cuts to the state budget," says Perry.

In fact, AFT Healthcare-Maryland members were able to fight back the recommendations of the state department of legislative services that would have decreased a previously agreed-upon 2 percent COLA increase and pushed back attempts to delay step increases. Also, in coalition with other unions and interest groups, AFT Healthcare-Maryland was able to get a bill passed in the Maryland Legislature that will help prevent workplace violence in healthcare facilities. "People are upset and they are looking for answers, and we are trying to provide them. We are making a concerted effort to fight

"When I approach people about the union, I focus on issues that are important to us all—like workplace safety and staffing."

—DEBBIE CHESSEY
AFT Healthcare-Maryland



COURTESY OF AFT HEALTHCARE-MARYLAND

back, and our stewards are leading the charge," says Perry.

Debbie Chesser, an AFT Healthcare-Maryland member who accepted the challenge to lead and stepped up to be a steward for members at Eastern Shore Hospital in Cambridge, Md., says she became a steward to educate her colleagues about the union. Chesser, a registered nurse who works in infection prevention, says the steward structure at the hospital is still a work in progress. But she has managed to persuade a significant number of fair share members to become full-time members. "When I approach people about the union, I focus on issues that are important to us all—like workplace safety and staffing," she says. The union has done a lot in those areas, Chesser adds, and members are excited about that, and so they are open to what the stewards have to say and they want to take part in what we are doing. "The fact that our union has been proactive in addressing our priorities has had an effect on the membership. It has awakened a voice that we may not have had a few years ago."

We have a voice

Jessie Frymyer, a registered nurse at the Ohio State University Wexner Medical Center in Columbus, and president of the local at the university, wants to unify her members. Frymyer says the push for nurses to earn a bachelor's degree has caused some friction between members, but she sees this as an opportunity to bring her members together. The local has launched a campaign it calls "I am a nurse," which encourages all members to recognize each other as the professionals they are. "We are all in the profession for the same reason," says Frymyer.

In addition to addressing the academic rift between members, the OSU local's campaign is expected to be used to help with the nurses' professional issues, like staffing, as well as to make the union more visible. There are 3,000 nurses in the union and about 200 are agency fee payers. "Most don't realize that they are fair share payers and that they just need to sign a form to become full members," says Frymyer. "When nurses get their 'I am a nurse' gear, we'll encourage them to check their membership status as well. We are spreading the word and getting people engaged in the work of the union," adds Frymyer. "We have a powerful voice, we just need to use it."

AFT-Healthcare Maryland has offered increased training for new stewards to help build membership.

—ADRIENNE COLES



A Union of Professionals

ELECTION 2016: YOU DECIDE.

As we approach the 2016 presidential election, working families want to know about the issues at stake and where the candidates stand.

We've put together information* on leading declared and potential candidates and their positions on issues critical to AFT members and the communities they serve.† Read and consider carefully. Then let us know who you think deserves the AFT's endorsement and support. Visit aft.org/election2016.

It's your union. It's your voice. You decide.



K-12 Education

Higher Education

Affordable Care Act

Labor/Jobs/Economy

Retirement Security

Immigration



BIDEN

Longtime supporter of increased federal funding for critical preK-12 education programs.

A firm opponent of private school vouchers.

Led the Obama administration's \$500 million initiative to create and expand innovative partnerships between community colleges and businesses to train workers with the skills employers need.

Strongly supported and advocated for the ACA: The ACA gives "the American people more freedom and control over their healthcare choices, improving the quality of the care that they receive and reducing cost, all by building on the best of our private insurance system."

Supports raising the minimum wage and is sharply critical of rising income inequality.

Opposes privatizing Social Security, cutting benefits and raising the retirement age.

Supports comprehensive immigration reform with a pathway to citizenship.

Supports the DREAM Act.



CLINTON

Leader of "Too Small to Fail," an effort to improve the health and well-being of children from birth to age 5. Supports increased Title I funding for schools in need. Opposes private school vouchers.

Has fought to expand financial aid for low-income college students.

Is committed to preserving and improving the ACA.

Favors raising the minimum wage and is an avowed union supporter. "When I'm president, we're going to stand up for unions. We're going to make sure they can organize for fair wages and good working conditions."

Opposes cutting Social Security benefits, privatizing the program and raising the retirement age.

Supports comprehensive immigration reform with a pathway to citizenship.

Supports the DREAM Act.



O'MALLEY

As governor, invested record amounts in Maryland's public schools. Under O'Malley, funding increased by 37 percent.

Opposes private school vouchers.

Increased state funding to allow Maryland colleges and universities to freeze tuition from 2007-2011.

Supports the ACA. Maryland was one of the first states to set up a health insurance exchange.

Supports increasing the minimum wage.

Supports strengthening collective bargaining rights. In 2007, signed an executive order to grant collective bargaining rights to healthcare aides and child care workers.

Opposes privatizing Social Security and instead supports expanding the benefit.

Supports comprehensive immigration reform with a pathway to citizenship.

Championed a version of the DREAM Act for Maryland's public colleges and universities.



SANDERS

Signed the Fix America's Schools Today (FAST) Act of 2011.

Co-sponsored an amendment to the Elementary and Secondary Education Act for increased funding.

Co-sponsored the Student Loan Affordability Act, which extended the reduced interest rate for Stafford student loans.

Introduced the American Health Security Act, which would guarantee healthcare as a human right and provide every U.S. citizen and permanent resident with healthcare coverage and services through a state-administered, single-payer program.

Supports raising the minimum wage. Is also a strong supporter of expanded collective bargaining rights for public employees.

Promotes strengthening the social safety net by expanding Social Security, Medicare, Medicaid and nutrition programs.

Supports comprehensive immigration reform with a pathway to citizenship.

Supports the DREAM Act.

* Sources and citations are available in the online version at aft.org/election2016.

† This chart reflects a brief snapshot of the candidates' positions.

	K-12 Education	Higher Education	Affordable Care Act	Labor/ Jobs/ Economy	Retirement Security	Immigration
 BUSH	As governor of Florida, signed legislation to evaluate students and teachers based on high-stakes tests, create for-profit charter and virtual schools, and provide vouchers for private and religious schools. Launched the nation's first statewide voucher program.	Ended affirmative action in Florida's colleges and universities, leading to a sharp drop in minority higher education enrollment.	Does not support the ACA and calls it "flawed to the core."	Has voiced opposition to minimum wage increases. Wants to weaken collective bargaining rights for teachers and other public employees, and supports laws that undermine the strength of public and private sector unions.	Advocates for privatization of Social Security and raising the retirement age for Social Security.	Opposes the Obama administration's executive order protecting undocumented children (DACA and DAPA). Supports the DREAM Act.
 CHRISTIE	As governor of New Jersey, cut funding in 2011 budget, which the state Supreme Court ruled violated the state constitution.	Cut state funding to New Jersey colleges and universities.	Opposed the ACA, calling it a "failed federal program."	Opposed raising the minimum wage. Was a vocal supporter of Scott Walker's attacks in Wisconsin on public employee rights.	Signed legislation that slashed pensions by \$1.5 billion, which the courts ruled was in violation of state law.	Opposes the Obama administration's executive order protecting undocumented children (DACA and DAPA).
 CRUZ	Supports turning federal education dollars into vouchers that can be used to fund private schools.	Voted to cut Pell Grants that help low-income students attend college.	Opposed the ACA.	Opposed attempts to raise the minimum wage.	Supports raising the retirement age for Social Security, reducing the growth rate of Social Security benefits and privatizing Social Security.	Opposes the Obama administration's executive order protecting undocumented children (DACA and DAPA).
 JINDAL	As governor of Louisiana, proposed budget for 2015 that keeps state funding with no increase in six years. Implemented a private school tuition voucher program, which was ruled unconstitutional by a Louisiana judge.	Proposed hundreds of millions of dollars in cuts to higher education, even though public colleges and universities in Louisiana already receive less money on a per-pupil basis than in any other state.	Opposed the ACA.	Opposes recent attempts to raise the minimum wage. Supports legislation that would wipe out payroll deductions for union members and silence the voice of teachers and other public employees.	Tried to eliminate defined benefit pensions for public employees.	Opposes the Obama administration's executive order protecting undocumented children (DACA and DAPA).
 KASICH	As governor of Ohio, proposed a massive expansion of the state's voucher program that would have drained funds from public schools and used tax dollars to fund private schools.	Cut state support to higher education by 6 percent.	Opposed the ACA.	Through state Senate Bill 5, attempted to wipe out workplace rights for teachers, firefighters and other public employees. His efforts were defeated by popular referendum.	Supported legislation that cut state funding for employee pensions.	Opposes the Obama administration's executive order protecting undocumented children (DACA and DAPA).
 PAUL	Supports private school vouchers. Would abolish the U.S. Department of Education. Sponsored federal voucher legislation.	Voted to cut Pell Grants that help low-income students attend college.	Opposes the ACA and has voted to repeal it.	Says we should abolish the minimum wage. Opposes collective bargaining rights, and supports legislation intended to hinder the effectiveness of unions.	Would raise the retirement age for Social Security, and supports what would be the largest cuts to Social Security in U.S. history.	Opposes the Obama administration's executive order protecting undocumented children (DACA and DAPA).
 RUBIO	Presided over a \$2.3 billion cut to Florida education as speaker of the Florida House. Supports federal voucher legislation.	Voted to cut Pell Grants that help low-income students attend college.	Opposed the ACA.	Opposes increasing the minimum wage and doesn't think that the minimum wage law works. As speaker of the Florida House, sponsored a bill attacking union rights.	Supports raising the retirement age for Social Security.	Opposes the Obama administration's executive order protecting undocumented children (DACA and DAPA).
 WALKER	Supports the expansion of voucher programs that drain funds from public schools and use taxpayer dollars to fund private schools.	In 2015, slashed \$300 million from Wisconsin's higher education budgets.	Opposed the ACA.	In 2011, pushed legislation that stripped public employees of collective bargaining rights; in 2015, supported and signed a so-called right-to-work bill in Wisconsin designed to hinder and harass private sector unions.	As governor, slashed state contributions to employee pensions.	Opposes the Obama administration's executive order protecting undocumented children (DACA and DAPA).

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Safe staffing measures introduced

Proposed legislation gives nurses support to improve patient care and safety

DURING NATIONAL NURSES WEEK this May (6-12), members from AFT Nurses and Health Professionals traveled to Washington, D.C., to lobby for federal staffing legislation that would improve the quality of care and patient safety.

The National Nursing Shortage Reform and Patient Advocacy Act was introduced by U.S. Sens. Barbara Boxer (D-Calif.) and Sherrod Brown (D-Ohio) in the Senate along with U.S. Rep. Jan Schakowsky (D-Ill.), who introduced the Nurse Staffing Standards for Patient Safety and Quality Care Act in the House of Representatives.

Both measures establish a baseline for staffing in the form of nurse-to-patient ratios, protect the rights of nurses to speak up on behalf of their patients and invest in ways to address the nationwide shortage of nurses.

AFT President Randi Weingarten noted that although studies have shown “when nurses can spend enough time with each patient, patient outcomes improve,” but without a law that calls for minimum staffing levels, “nurses’ patient load is often excessive, and quality care is compromised.”

Weingarten applauded the lawmakers for “standing up for quality patient care,” noting that the AFT “will work to help ensure that these bills pass” so that all patients receive the attention and care they need.

What’s in the bills?

Specifically, the legislation would:

- Improve staffing standards by establishing minimum nurse-to-patient ratios and staffing plans developed with the input of direct care staff;
- Establish patient safety protections that include requiring hospitals to measure acuity and skill mix of nurses in making staffing decisions, as well as prohibiting the use of mandatory overtime to meet required staffing minimums;
- Offer transparency by requiring staffing plans to be made available to the public, and whistleblower protections that prohibit retaliation against nurses who report a hospital for failure to comply with minimum ratios; and
- Invest in programs to better prepare nurses for work in a hospital setting.

The campaign for a national nurse

Role would increase the visibility of nurses

THE CREATION OF a national nurse for public health would give recognition to the important role nurses play in the healthcare system and provide a platform for greater education on the importance of preventive care, proper treatment of chronic illnesses and the need for emergency preparedness.

That was the message of a nurse educator and AFT member during a congressional briefing Feb.25. Teri Mills and her group, the National Nursing Network Organization, is working to pass



AFT STAFF

AFT member Teri Mills says there is a need for a national nurse for public health.

H.R. 379, The National Nurse Act of 2015, which has been introduced by Reps. Eddie Bernice Johnson (D-Texas) and Peter King (R-N.Y.) in the U.S. House of Representatives. The legislation would bring visibility to the role nurses play in promoting, protecting and advancing the nation’s health. To do that, the legislation calls for the individual serving as the chief nurse officer of the U.S. Public Health Service to be known as the national nurse for public health.

With outbreaks of diseases like Ebola and measles, people are awakening to the fact that health promotion is key, says Mills. “People are craving accurate information about our healthcare challenges. Who better to deliver that information than a nurse?” In the last 10 years, more than 145 organizations—including the AFT and now the American Nurses Association, which signed on this year—as well as prominent individuals have endorsed legislation calling for creation of a national nurse position.

In Wisconsin, pension repayment demand is overturned

Victory ‘speaks to the power a strong union’

LAST YEAR, HELEN SCHMIDT received a shocking letter from Milwaukee (Wis.) County, her former employer. The letter stated that the pension board of the Milwaukee County Employees’ Retirement System made a mistake regarding employee pensions, and it wanted its money back.

“I was totally surprised and shocked by the letter,” says Schmidt, a retired registered nurse. “I’ve been receiving my pension for 19 years with no problem—and then I get this letter.”

Schmidt worked at Milwaukee County’s Doyne Hospital for 24 years; she was a member of the Wisconsin Federation of Nurses and Health Professionals, Local 5001, until the hospital closed in 1995. Schmidt earned a pension that she received every month after her retirement, until the letter arrived in April 2014.

Schmidt wasn’t the only one to get a letter. More than 200 Milwaukee County employees and retirees—including 25 other WFNHP members—some of them now in their 80s, also were notified.

The group faced delayed retirement or pension repayment demands totaling nearly \$11 million—a result of errors the county said were made in the way the workers were allowed to purchase credit for previous county service.

Buyback problems

According to the county, the pension payments violated county ordinances governing pension buybacks. County officials had been aware of this problem since 2007. Then-County Executive Scott Walker reported the problem to the Internal Revenue Service yet never sought to recover pension payments. Chris Abele, the current county executive, has aggressively pursued payment recovery, ordering a review last year of the pension payments made to these workers.

In Schmidt’s case, the county sought a repayment of \$222,941 because before her retirement, she paid nearly \$2,000 to purchase service credit for a short period of time when she worked under an emergency appointment prior to becoming a permanent employee. In August 2014, the county reduced Schmidt’s monthly pension from \$2,416 to

\$1,590. It also threatened to take half of that to apply to what the county thought of as its “overpayment” to her, which would leave her with only \$795 per month. The move forced Schmidt, who is now 72, to dip into her savings to make ends meet.



Attorney Jeff Sweetland with retired WFNHP member Helen Schmidt.

“Everyone agrees that the retirees did nothing wrong. This a truly great victory. ...”

—CANDICE OWLEY, WFNHP president

The WFNHP contacted its labor attorney, Jeff Sweetland, to help the retirees file an appeal to the county executive’s decision as well as a lawsuit against the pension board. He also crafted an amendment to the county ordinance that would retroactively validate the purchases the retired health professionals had made.

“The problems with the pension buyback program were driven by a number of county big shots who gamed the system,” says Sweetland. “The retirees reasonably understood that their purchases were valid. They relied in good faith on what the pension board told them was legitimate when they considered retirement back in the 1990s.”

In response to a grass-roots effort by union members—retired and active—the pension board asked the county board of supervisors to amend the pension ordinance to retroactively validate about 200 county employees’ and retirees’ service-credit purchases.

Unfortunately, the pension board’s proposed fix did not extend to a group of 13 other

retirees whom the pension board deemed “ineligible.” The group included Schmidt and four other retired WFNHP members—nurses Carol Schmeling and Beatrice Trapp, and medical technologists Cheryl Miller and Penny Schaefer. Sweetland crafted an amendment to the pension board’s proposal that would retroactively validate their purchases as well. That amendment was approved by the county board on Feb. 5, along with the pension board’s proposal, but the county executive vetoed the entire measure. On Feb. 17, the board met again and voted to override the county executive’s veto.

“It’s such a relief,” says Schmidt. “I’m thankful that we had a lawyer. I don’t think we would have gotten the ear of the county without him.”

One last hurdle

“Everyone involved agrees that the retirees did nothing wrong,” says WFNHP president Candice Owley who also is an AFT vice president. “They followed the direction of the county staff who told them that they were eligible to purchase credits, told them what it would cost and accepted their payment. How could they have known that the advice they were given

violated county rules?”

“This is a truly great victory because conservative radio, bloggers and print media have been working hard to say that these retirees participated in an illegal pension program,” says Owley, adding that the conservatives had been urging citizens to pressure the county supervisors to vote down this pension fix.

There is one last hurdle, however, says Sweetland.

“We have to get the IRS to bless the board’s decision. If we do that, then we will have saved these women’s pensions going forward and relieved them of the threat of having to pay back thousands of dollars.”

“The victory also speaks to the power of a strong union,” says Jeff Weber, president of WFNHP Local 5001. “Many of the first calls that people made when they got these letters were to the union. It is just one more reminder that there is value in being a union member.”

JOHN SALLER

After Ebola

One major lesson learned: Ongoing training is important

NINA PHAM was the first nurse at the Texas Health Presbyterian Hospital Dallas intensive care unit assigned to treat Thomas Eric Duncan, a traveler from Liberia, who became the first person diagnosed with Ebola in the U.S.

According to a lawsuit filed in March by Pham against the hospital and its parent company, Texas Health Resources, Pham had no in-service training or guidance about Ebola when she was assigned to care for Duncan. When asked how to prevent becoming infected, Pham says she was given printouts from a Google search on the Internet.

As Duncan's condition worsened, Pham and other nurses assembled makeshift personal protective equipment, according to the lawsuit. They found Tyvek or hazardous material suits, and added a personal respirator, which they covered with a blue gown. The nurses themselves tried to dispose of these gowns, gloves, sheets and other waste contaminated by Duncan's constant diarrhea and vomiting, according to the lawsuit.

'No risk' of Ebola

In a meeting with the hospital administration and a representative from the Centers for Disease Control and Prevention after Duncan's death, Pham says she was assured she was at "no risk" of contracting Ebola. Three days later, she woke up with a fever of 100.6 degrees. By midnight that day, she had tested positive for Ebola.

It was not until Duncan died and both Pham and Duncan's night nurse, Amber Vinson, were infected and fighting for their lives, that the American healthcare infrastructure began to take seriously the threat that this virus—and other serious infectious diseases—pose to all health professionals, including those working in U.S. healthcare facilities.

The public health infrastructure is crucial to ensuring "there is a linchpin for coordinating actions that address threats of infectious disease or of disaster, and that includes tracking activity and coordinating response," says

Kelly Trautner, director of AFT Nurses and Health Professionals. As Nina Pham's experiences highlight, Trautner adds, "Relying on private corporations to address the health and safety of the community is not the way to do it"

Improving the way the healthcare system handles serious infectious diseases requires frontline workers—nurses, aides, waste handlers, ambulance drivers, EMTs—to be involved in setting policies and planning response and training. "Our experience with Ebola demonstrates that when the employers sat down with our nurses and other healthcare leaders," they found there were processes that needed to be addressed, "whether it was in care delivery, or other areas necessary for keeping the public safe," Trautner notes.

'We don't know what's coming'

John Brady, a registered nurse and AFT leader at Backus Hospital in Norwich, Conn., says it makes sense that the people dealing with a disease in a hospital are those who understand best how to address it. "Why do you want a bunch of people in suits sitting around an office to decide on the protocol for handling Ebola or any serious infectious disease? You don't."

There are flaws in the way the healthcare system functions that make the lessons of Ebola difficult to implement, Brady adds. "Healthcare tends to crisis manage. ... We did training about eight years ago for smallpox, anthrax, and other then-current biological threats, because there was funding for training to deal with weapons of mass destruction. So, when the governor of Connecticut mandated training healthcare workers to handle Ebola, we went to get our hazmat suits out of storage, but they'd just been thrown in a box. They were useless."

Connecticut hospitals did some training on Ebola after the governor's mandate. Brady believes it made those who participated in the training more aware of how all infectious diseases should be handled. "We don't know what's coming along. There is a possibility of a serious influenza epidemic, for example. So, one of the major lessons learned from Ebola is this: Ongoing training is important, and we should have it for all infectious diseases."

Ongoing training often suffers from competing priorities for funding. "Ideally, facilities

would continue to keep ongoing training and proficiency of their workforces at the top of the priority list for addressing threats like Ebola," says the AFT's Kelly Trautner. "The reality is that the pressures of the health industry tend to result in shifting focus to the next crisis, and often that's budget and funding, and not optimal patient-care processes or the safety of our workers."

Infrastructure investment needed

Without greater investment in the healthcare infrastructure at the national, state and local levels, not only will ongoing training be abandoned, but so will educating the public about infectious diseases. "Unless we invest in public health infrastructure, education of the public is not going to happen," Trautner emphasizes.

The need for public education on infectious diseases is a major lesson of Ebola that has yet to be learned. Once Ebola reached U.S. shores, the public—and many politicians—reacted with blind panic, leading to discrimination and stigmatization of anyone who had traveled anywhere in Africa, even those risking their lives to stop Ebola's spread.

Dr. Craig Spencer, the American physician who volunteered in West Africa, and on his return to the U.S. found he had contracted Ebola, experienced this stigmatization firsthand. "After my diagnosis, the media and politicians could have educated the public about Ebola," he wrote in the *New England Journal of Medicine*. "Instead, they spent hours retracing my steps ... and debating whether Ebola can be transmitted through a bowling ball."

Spencer recovered, as did nearly all Ebola patients treated in the U.S. Yet, he is still sickened by the ongoing Ebola stigmatization and the nation's lack of focus on public health preparedness. "Instead of being welcomed as respected humanitarians, my U.S. colleagues who have returned home from battling Ebola have been treated as pariahs," he wrote in the *NEJM*. "We all lose when we allow irrational fear ... to supersede pragmatic public health preparedness."

Kelly Trautner could not agree more. "We must have an environment where stakeholders feel encouraged to help one another address threats to public health."

—AMANDA SPAKE

EBOLA RESOURCES ONLINE

- CDC guide for healthcare workers http://bit.ly/EHF_CDC
- Ebola resource from WHO http://bit.ly/EVD_WHO



WE RISE! In April, the AFL-CIO launched “We Rise!” a national immigration initiative to reach, mobilize and organize immigrant workers to build power on the job and in the community. We Rise will train union members and equip union halls around the country to empower immigrant workers and their families by helping them apply for the Deferred Action for Childhood Arrivals and the Deferred Action for Parents of Americans programs. The initiative also will encourage qualified legal permanent residents to become U.S. citizens. Meanwhile, on April 7, the AFT joined with dozens of states and organizations to file an amicus brief for *Texas v. United States of America* that urges the 5th U.S. Circuit Court of Appeals to lift the unjustifiable stay the Texas U.S. District Court imposed on President Obama’s executive action on immigration.

NURSING PAY GAPS Even in a female-dominated profession like nursing, men still earn more than women, according to a new study published in the *Journal of the American Medical Association*. After controlling for age, race, marital status and children in the home, males in nursing out-earned females by nearly \$7,700 per year in outpatient settings and nearly \$3,900 in hospitals.

TEACHER SHARES STORY ON ‘ELLEN’

Sonya Romero, a kindergarten teacher at Lew Wallace Elementary in Albuquerque, N.M., appeared on a recent episode of “The Ellen DeGeneres Show” and talked about how the courage and generosity that early childhood educators bring to class every day leads to a lasting legacy of love and learning. Romero, who is also an executive vice president for the Albuquerque Teachers Federation, minced no words when she told host DeGeneres about the needs that show up every morning at the door of Lew Wallace, where 75 percent of students live below the poverty line, and how she and the staff are determined to meet those challenges. “I ask my kids if they’ve eaten that morning, if they need anything to wear.” Her story, which has generated more than 2 million YouTube views and numerous other media stories, puts a compelling and human face on the profession.



THE ELLEN SHOW/YOUTUBE.COM

HEALTHIER TEETH, BRIGHTER SMILES

Pre-K and kindergarten students in McDowell County, W.Va., who have not had a dental examination prior to the start of the 2015-16 school year will have a virtual dental hygiene examination at school and follow-up care, provided by a mobile dental van or a regional dental provider, under a new initiative coordinated by Reconnecting McDowell and several of its partners. The pilot program will enroll pre-K and kindergarten students first, then add students in grades 2, 7 and 12, respectively, in the following three school years. Reconnecting McDowell is a public-private partnership, spearheaded by the AFT, to ensure that McDowell County children and their families have access to high-quality education, healthcare, social services and im-



MICHAEL CAMPBELL

proved economic development opportunities.

WORKING WITH COKE The AFT and the Coca-Cola Company have signed an agreement pledging to work together to address issues related to child labor in the sugar cane harvest.

The agreement follows a series of productive discussions between the AFT and Coca-Cola following the AFT’s adoption of a resolution last fall calling for a boycott—which has ended—of Coca-Cola products based on the company’s violation of workers’ rights and child labor laws.

Top: AFT member Sonya Romero with TV host Ellen DeGeneres. **Above:** AFT and Coke agree to address child labor.

OPPOSING FAST TRACK

PROGRESSIVE LEADERS in the U.S. Senate and House addressed more than 1,200 unionists who gathered at the Capitol on April 15 to urge lawmakers to put the brakes on fast-track trade legislation that puts jobs and the environment at risk. “There is a war being waged against working families, and we have to fight back,” Sen. Bernie Sanders (I-Vt.) told the large, rowdy crowd, which included a large AFT contingent. The event kicked off labor visits to congressional offices to voice opposition to the trade proposal. Other speakers included AFT Secretary-Treasurer Loretta Johnson (pictured) and other union leaders, along with some of the strongest voices in the environmental movement and in Congress.



MICHAEL CAMPBELL



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union families can share.

Plan ahead with a mortgage from Union Plus. The Union Plus Mortgage program, with financing provided by Wells Fargo Home Mortgage, is one of some 40 benefits available to help union members. The program is exclusively for union members and their parents and children. Benefits include mortgage hardship assistance to help protect members' homes in the face of financial hardship. With Union Plus, a mortgage is more than a monthly payment. It's long-term protection for everything your home means to you.



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