

New York City nurses protest over PPE, staff shortages as number of cases, deaths continue to climb

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On Saturday morning, about 30 nurses and their relatives could be seen at the Jacobi Medical Center in the Bronx protesting over the lack of personal protective equipment (PPE) and staff shortages as the coronavirus pandemic continues to wreak havoc in the largest health care system in the US. Nurses were carrying signs saying, “Patients before profits” and “We Risk our Lives to Save Yours #ppenow.”

The Jacobi Medical Center is part of NYC Health + Hospitals, the city’s public hospital system. One nurse told CBS New York, “Prior to coronavirus, we were told they were one-time use, you use them for a patient and they went in the garbage. Now all of a sudden, the CDC is saying that it’s fine for us to reuse them and these choices are being made not based on science, they’re being made based on need.” Another nurse told the *New York Daily News*, “We’re all at risk if we lack the supplies we desperately need. It’s a pandemic. If we get sick, our community gets sick. We are all people and our patients deserve better.”

At a news conference, another nurse said: “We have a number of workers—two in this hospital, two nurses—fighting for their lives in the ICUs right now.” She slammed the statement of New York City Mayor Bill de Blasio who claimed that the city had enough PPE for hospital staff for another week. Following the publication of a picture showing nurses at Mount Sinai West in trash bags last Thursday, New York Governor Andrew Cuomo claimed that nurses at the hospital had “all the PPE they need.”

The nurse from the Jacobi Medical Center responded, telling the *Daily News*: “We will not let any health official or government official say that we have enough until every health care worker has an N95 for every time they interact with a COVID-19 patient.”

The WSWs spoke to a paramedic who worked in the Bronx during the protest on Saturday. He said, “They were protesting about the lack of staff. Now that many of their staff have called out sick, nurses have to do twice as much work. It used to be a ratio of 3:1 [three patients per nurse]

for an intubated patient, now it is 6:1. That’s unheard of. It’s not a safe ratio. It used to [even earlier] be a ratio of 1:1. A lot of the nurses are crashing.”

New York is now the epicenter of the global coronavirus pandemic. As US cases surged above 142,000 on Sunday, New York state accounted for 59,648 cases, an increase of almost 7,200 in 24 hours. Of these, 33,768 are in New York City. The city also saw the single deadliest day in the pandemic so far this weekend, with 237 people dying from Saturday to Sunday, bringing the total number of dead to 965. On the night of Friday to Saturday, 50 patients died at Elmhurst Hospital in Queens alone, the center of the outbreak in New York City.

Speaking to the LIC Post, a doctor at Elmhurst Hospital warned, “An impending humanitarian crisis is about to happen in Elmhurst. The virus is absolutely rampant within the community and we have lines out the door of people who don’t feel well.” Elmhurst is home to a large, multi-ethnic working class community and is very densely populated. The doctor explained that this was a central factor contributing to the rapid spread of the virus, “People are living in multigenerational units with lots of families of all ages crammed into small spaces. If one family member is told to isolate ... they really have nowhere to go.”

In interviews and social media posts, paramedics and nurses have described the horrific deterioration in public health. Within the span of two to three weeks, the COVID-19 patients they encounter have gone from having fevers and coughs and being discharged from the hospital to now having organ failure and respiratory and cardiac arrest. Some news reports also suggest a much faster deterioration in the health of some COVID-19 patients, who go from being seemingly healthy to dying within a matter of 24 or 48 hours.

With overfilled morgues, hospitals are storing and carrying away the bodies of victims in improvised refrigerated trucks. The overcrowding of emergency rooms and the shortage of

rooms and hospital beds has led to situations where those who are infected with coronavirus are frequently placed in close proximity to those who are not.

So far, 2,900 hospital beds have been constructed at the Javits Convention Center by the US military with the support of the federal government. Another 1,000 beds are expected to come in with a Navy ship later this week. An emergency field hospital is now also being built in Central Park with 68 beds especially equipped for respiratory care. However, all of this falls dramatically short of the immediate need: State officials estimate that that New York will need up to 150,000 hospital beds and an additional 37,000 ICU beds to cope with the crisis, which is not expected to peak before the second half of April or early May.

New York University, Cornell University, Columbia University and Rutgers University in New Jersey have all encouraged their medical seniors to graduate early and join the workforce immediately to combat the coronavirus pandemic.

The city is also in need of at least 30,000 to 40,000 ventilators. However, President Donald Trump has dismissed the call for help from the state government, questioning that the city actually needed that many ventilators. At a press conference on Sunday, Trump also suggested that the need for PPE was likewise exaggerated, implying that hospital workers were in fact misappropriating PPE.

The criminal indifference expressed in the official response to the unfolding disaster, from both the Trump administration and Democratic state and city officials, is taking a severe toll on the city population as a whole, with health care workers bearing the brunt of a failing health care system.

With an untold number of nurses and doctors having already been infected, city guidelines now force hospital staff and first responders to continue to work if they are asymptomatic, even if they tested positive for COVID-19. If they have a fever, they can stay at home for only 7 days, without hazard pay. If they don't have a fever, they have to return after 3 days. People who have been infected with COVID-19 are known to be infectious for two to four weeks, and the quarantine period recommended by the World Health Organization is 14 days.

A nurse told BuzzFeed News, "If we are COVID positive, we are expected to work for as long as we are asymptomatic. However, we cannot get tested unless we are symptomatic. They don't want to test us because, at the rates we are exposed, we are likely all sick and we don't know it." He added, that they were rationed in PPE "to absurdity." They were given "one disposable mask and one disposable gown that we must sign out for, that is expected to be used for five

12-hour shifts before they will be replaced ... A week ago we were instructed to take off our masks at work. Now we are being instructed to wear them at all times because so many of us are testing positive."

At the Mount Sinai West hospital in Manhattan, where the nurse manager Kious Kelly died of COVID-19 last week, an ER doctor complained of only receiving one N95 mask per week with no instruction on how to properly clean it: "We were trying to clean it and put it back on our face. It smelled terrible and who knows if it was even working."

Along with nurses and doctors, first responders are among those most open to being exposed to the virus. About 20 percent of all of New York City's 4,500 ambulance workers, including EMTs, paramedics and supervisors, are now out sick, mostly because they either have the virus or were exposed to it. Two of them are in critical condition.

Meanwhile, the number of emergency medical calls to the city's 911 dispatch center continue to rise and break new records on a daily basis. On Thursday, over 7,000 calls were placed in a system that typically responds to 4,000 a day.

The flood of 911 calls is causing extended delays of up to three hours for ambulances and forcing Emergency Medical Service personnel to make difficult triage decisions. In what is almost a complete reversal of protocol within a 911 system that is accustomed to transporting patients with even the mildest conditions, many of the callers' conditions are now deemed too benign for transport to the emergency room and they are instructed to stay home in overcrowded apartments where they will possibly infect their cohabitants as their condition further deteriorates.



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