Hundreds of nurses strike in Albany and New Rochelle, New York

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Nurses in Albany Medical Center (AMC) and Montefiore New Rochelle in New York state walked off the job Tuesday morning after contract negotiations stalled. Nurses at both hospitals are members of the New York State Nurses Association (NYSNA), and pandemic-related issues of staffing and personal protective equipment (PPE) are among the main issues concerning nurses and motivating the strike.

The nurses at Montefiore will continue their strike through Wednesday, while the Albany strike ends at 7 a.m. Wednesday. Both are billed by NYSNA as unfair labor practice strikes. NYSNA has been negotiating for about two years with each hospital.

In both cases, NYSNA was forced to call a strike due to immense opposition among nurses to the deadly conditions in the hospitals, which have been exacerbated by the current upsurge in COVID-19 cases, hospitalizations and deaths. On Monday, Governor Andrew Cuomo said daily coronavirus hospitalizations had hit 3,500 on Sunday, up from 900 in June.

Albany nurses voted down a contract agreed by NYSNA and AMC in November, prompting the union's 10-day strike notice. NYSNA issued a 10-day notice for the Montefiore strike after the hospital refused to budge on staffing, possibly the most important issue for nurses. While publicly hailing its nurses as "heroes," the administration at the Albany Medical Center has cut their hours and illegally reduced their personal time.

One nurse commenting on social media said, "Nurses in every state should have gone on strike at the beginning when it was obvious the toll this would have taken on the entire health care spectrum… As nurses are seen as care givers, they are criticized for standing up and saying NO MORE."

Another nurse said, "Decades of dedication to AMC has gotten me my paycheck (which I earned at the bedside for 12 hr shifts) and the clarity to see that AMC does not have my back when it comes to providing for me… What I have earned… Medical coverage that is affordable for families and that is still available when you retire, as well as enough money to afford to live and eat when I retire, and a fair wage… We are not asking for anything more than the administration will be getting in their retirement package. Again, the solidarity I felt today made me feel like everyone in the "sea of red"… Has my back! #nocontract, no peace!"

On the picket line in New Rochelle, a suburb north of New York City in Westchester County, Shalon Matthews, an emergency room nurse for five years, told the *New York Post*, "It's terrible! We don't have enough staffing!" Commenting on nurse-to-patient ratios, she said, "Now it's 1 to 7 in the ER. In the ICU, it should be 1 to 1—now it's 1 to 3. It's making it hard to give the best care."

"Normally we start with seven patients, it should be five or six," Melissa Ricketts told the *Post*. "We started with 31 yesterday. The number of COVID patients is picking up."

While the striking nurses are speaking for millions of frontline health care workers who are determined to defend their health and the lives of their patients, NYSNA has no strategy to win this struggle. Instead, the nurse union and other unions have isolated each strike while promoting Democrats like Cuomo and State Senator Shelley Mayer and toothless Democratic Party-sponsored bills to supposedly guarantee safe staffing. But the Democrats, just as much as Trump and Republicans, defend the for-profit medical system and the right of giant health care monopolies, many of which received government bailouts, to cut costs in order to boost the returns to their shareholders.

That is why nurses have to take the conduct of the struggle into their own hands by forming rank-and-file strike committees and fighting to mobilize not only health

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care workers but the broadest sections of the working class in a common fight to ensure that nurses have adequate staffing and protective equipment. This must be combined with a political struggle against both corporate-controlled parties and their sacrifice of human life for profit.

The 24-hour Albany strike was coupled with a NYSNA complaint to the Occupational Safety and Health Administration (OSHA) regarding the hospital's infection control practices. Edward Olmsted, an industrial consulting firm, prepared a report for NYSNA concluding "that the nurses at Albany Medical Center have been placed at unreasonable risk of exposure to COVID-19 while performing their jobs."

AMC nurses are forced to reuse N95 face masks, disinfecting them up to 20 times before disposal. N95 masks should be disposed of after each patient interaction, but nurses globally have been forced to reuse masks due to shortages. Disinfecting masks with hydrogen peroxide multiple times, as AMC does, causes the mask and the straps to deteriorate even after several treatments.

Olmsted's report also includes nurses' allegations that AMC does not maintain basic infection prevention controls, instead mingling confirmed and suspected COVID-19 patients with other patients in waiting areas and elevators, and also does not provide negative pressure isolation rooms for COVID-19 patients.

The OSHA complaint also alleges that AMC does not test asymptomatic patients for COVID-19, resulting in needless exposures for both nurses and other patients to COVID-19.

Nurses at both AMC and New Rochelle report insufficient staff, in part due to many nurses leaving during the pandemic. At Montefiore New Rochelle, nurses' demands center on staffing. There has apparently been no movement on the hospital's part on the issue, and NYSNA, knowing no deal without staffing improvements would get nurses' approval, called the two-day strike.

NYSNA says it offered "significant compromises" to Montefiore, although the hospital has not released any discussion of their offers on staffing and a hospital spokesperson refused to answer a question on the subject from the media.

Montefiore and AMC have pointed to their wage offers to insinuate that nurses are being offered sweetheart deals and that their struggles will not benefit patients, but instead themselves. Montefiore says it is offering a 7 percent raise, although it is unclear how long it will take for the full raise to be in effect, i.e., how much will be eaten up by inflation. AMC has said it is offering a 3 percent raise annually for the next three years, although NYSNA told the Albany-based *Times Union* that only 1.25 percent is guaranteed with the rest being "merit-based."

Both hospitals have issued hypocritical statements denouncing nurses for striking during a pandemic, as if the hospitals had not been denying them sufficient PPE and staffing during the same pandemic. Montefiore Medicine Senior Vice President of Community Affairs Marcos Crespo cynically said that nurses were "selfishly putting the community at risk and using COVID-19 as a political football." AMC President and CEO Dennis McKenna said the union's complaints were "baseless" and that striking was "irresponsible" and "heartbreaking."

While these two strikes are scheduled to end this week, nurses must make preparations to expand the struggle. Of essential strategic importance is mobilizing the support of the working class, which is overwhelmingly sympathetic to nurses and other frontline health care workers. The pandemic makes it paramount that nurses have decent wages, benefits, staffing and PPE. Moreover, to ensure that hospitals are not overwhelmed again, nonessential production must be shut down with full compensation to all affected workers and small businesses.

Guaranteeing this cannot be left up to the unions, including NYSNA, which has covered for the moves to reopen the economy in New York. NYSNA has appealed largely to pro-corporate government agencies like the NLRB and OSHA and local Democratic politicians instead of the working class in the area. Nurses must form rank-and-file committees, independent of the unions, to develop their struggle. The *World Socialist Web Site* and its *Health Care Workers Newsletter* will give every assistance in this effort.

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