Build the New York Healthcare workers Rank-and-File Committee to prevent a sellout and expand the nurses' strike!

New York Healthcare Workers Rank-and-File Committee
30 January 2026

The following statement was issued by the New York Healthcare Workers Rank-and-File Committee. To join the committee, fill out the form below.

Fellow healthcare workers,

Three weeks on, the strike by 15,000 New York City nurses stands at a crossroads.

On the one hand, the strike has won immense public support and exposed the intolerable conditions produced by the subordination of healthcare to profit. At the same time, the open-ended strike by tens of thousands of Kaiser healthcare workers underscores that nurses' demands are national in scope and that the objective basis exists for a unified, nationwide movement of healthcare workers. Broader opposition to repression and austerity is also emerging, including mass protests following the murder of Minneapolis ICU nurse Alex Pretti by federal agents.

On the other hand, the bureaucracy of the New York State Nurses Association (NYSNA) is preparing to shut down the strike on management's terms. The union leadership has already retreated from its own stated demands, reducing the call for a 30 percent wage increase over 3 years to 18 percent, without any vote or explanation to the membership. NYSNA also claims it has reached a deal that would maintain healthcare "at current levels."

Even if this were true, it would be totally inadequate. But it is not true. New York-Presbyterian has said the agreement creates a new committee which will examine "potential savings and programs" in the future. In other words, the cuts will be worked out *after* nurses have ratified the contract and no longer have any contractual say in it.

Even before it began, NYSNA bureaucrats limited the impact of the strike by calling off pickets at 11 out of 15 facilities without any tentative agreements having been ratified, or without any agreements at all in some cases. At the same time, 1199/SEIU has instructed many hospital workers to cross picket lines, while management brings in high-paid travel nurses to function as strikebreakers.

For three weeks, NYSNA has tried to soften up nurses by leaving them on the picket line without strike pay; many do not even know that this is normal procedure during a strike. Meanwhile, the union is sitting on over $100 million in assets, paid for by nurses' dues.

The strike can be won, but only if healthcare workers take matters into their own hands. That is why we are taking the step of founding the New York Healthcare Workers Rank-and-File Committee. This is an organization controlled by workers ourselves, independent of the union apparatus, to assert democratic control over bargaining and strike strategy.

Healthcare workers must control the strategy and decisions of this struggle. NYSNA officials have attempted to portray the bargaining process as "transparent" by livestreaming portions of the talks. This is a fraud. Nurses are reduced to spectators, with no power to intervene, correct, or veto proposals that violate their demands.

Meanwhile, the real negotiations no doubt take place outside these staged sessions, beyond the view of the rank and file. Transparency without control is meaningless. Observation without decision-making power is exclusion.

Genuine rank-and-file control means that workers themselves set binding demands, retain the right to

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override any proposal that violates those demands, and have the authority to halt negotiations and expand the strike when concessions are being prepared.

Our demands echo those of healthcare workers the world over. We are fighting for safe nurse-to-patient ratios, healthcare benefits, wage increases that allow us to afford the city we serve and protection against workplace violence.

From the beginning, management has responded aggressively. They have called us “reckless” and our demands “extreme.” Mount Sinai went as far as to fire three labor and delivery nurses on the eve of the strike. Hospitals have refused to concede anything on staffing and safety, while continuing to pour resources into executive compensation, real-estate speculation and financial operations.

In contrast, among workers there is immense support for the strike. At hospital after hospital, the consequences of running healthcare for profit are visible: dangerous staffing ratios, patients boarded in hallways, exhausted nurses working double shifts, canceled breaks and chronically deferred maintenance and supplies. These conditions endanger patients and impose unbearable workloads for caregivers.

The expansion of the strike is not a slogan; it is a practical necessity. If nurses at the hospitals where walkouts were canceled join the picket lines, if resident physicians, med-techs and other hospital workers refuse to cross, and if workers in other industries mobilize in solidarity, the balance of forces can be decisively shifted.

The Kaiser strike on the west coast confirms that the issues confronting New York nurses are shared by healthcare workers nationally, and that a unified struggle is both necessary and possible.

The murder of Minneapolis ICU nurse Alex Pretti by federal agents is a stark warning of the lengths to which the state will go to suppress working-class resistance. But it has also touched off massive resistance, with tens of thousands in the streets and calls for a general strike gaining in popularity across the country.

Healthcare workers defend life. When wealthy executives starve hospitals of staff and resources, they endanger patients; when the state kills a nurse in the streets, it signals that no one in the working class is safe from repression. Our struggle for staffing ratios, living wages and full benefits is inseparable from the defense of democratic rights.

Our call to action:

• Expand the strike in New York now. Organize to bring out nurses at the nonprofit hospitals where strike notices were rescinded; coordinate stoppages and joint pickets to disrupt hospital operations until demands are met.

• Hold an emergency meeting to agree upon contractual red lines, including specific, enforceable staffing ratios, wage requirements and other terms without which no agreement can be made.

• Bring the full texts of all agreed upon terms for immediate study and debate among the membership. No end to the strike without a full tentative agreement and a democratic vote.

• Provide immediate strike pay and other funding to ensure that workers can hold out until our demands are met.

• Organize roving pickets to reach out to transit, logistics, education, public-sector and other healthcare workers to prepare coordinated, cross-industry actions.

• Popularize and build for a sustained, nationwide mobilization, including an open-ended general strike, to defeat the Trump administration’s occupations and systematic violations of the Constitution.

This is a moment for decisive collective action. We urge you to join us in building rank-and-file committees now, and to organize, prepare and strike together in a movement that can win safe staffing, defend democratic rights, and challenge the profit system that ruins healthcare.

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