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UNIFORMED EMT'S AND PARAMEDICS OF THE FDNY
LOCAL 2507, DC37, AFSCME AFL-CIO
718-371-0310

UEP Bulletin

WHAT'S NEXT?

By Patrick J. Bahnken

On January 5th the rank and file came together to speak with one voice and express our disgust with the offer the City made to us at the bargaining table. After eight long and arduous months of negotiations the City offered a mere 7.66 percent and service longevity of little more than sixteen hundred dollars for a four-year contract.

In exchange for this miniscule raise, we would have to agree to the loss of one annual leave day, a reduced starting salary, reduced refresher programs and they expected us to pay to fix their Fair Labor Standard Act (FLSA) violations among other things.

While we would consider making concessions similar to those of the Police, Fire, Sanitation and Corrections unions, we will not make those concessions for seven percent when everyone else is getting seventeen percent!

The rally was a good starting point. It gave us an opportunity to draw attention to our cause but we must keep the momentum going. In the coming weeks, we will resume our radio commercials. We will be running ads in community newspapers and we are receiving calls every day from various news organizations wanting to tell our story.

As for the contract, the Union filed an impasse declaration on January 6th and an independent mediator was named on January 9th. The Mediator will conduct an investigation to see if an impasse truly exists, or if in their opinion both parties can reach an agreement with a little help from the mediator.

Our position remains the same. The last offer by the City is unacceptable! We see absolutely no reason to call off the arbitration process and return to the bargaining table at this time. If the city wishes to make a better offer, they are free to send it in writing to our attorneys at any time but we will NOT stop the process in hope of a better offer! Simply put, talk is cheap.

We have come far in the last few years. We have turned the tide of privatization, we have made significant gains regarding pensions and benefits and still more needs to be done. We are moving forward with legisla-

tion for a 20 and out pension. We are expecting several hospitals to close in the coming year which will increase the burden on an already over taxed work force and we are preparing for the department to unleash its' plan to change the face of EMS as we know it.



We have come far together and we will continue to stand united in the face of all that is before us. Former President Theodore Roosevelt once said, "The credit belongs to the man who is actually in the arena, whose face is covered in blood and dust and sweat. Who if he wins, knows great victory and if defeated, does so while daring greatly so that his place will never be with those timid souls who know neither victory nor defeat..."

Two things stand out in my mind:

First, this rank and file is hardly timid!

Second, when you have little to lose, it's hard to be defeated!

In Solidarity

Patrick J. Bahnken
President

Newsworthy events can be called in or emailed to the following news media:

News Desk

Channel 2: 1-800-242-6397

Channel 4: 1-212-664-2731

Channel 5: 1-212-452-3808

Channel 7: 1-212-456-3173

Channel 9: newsdesk@wwortv.com

Channel 11: 1-212-210-2411

The New York Post
1-212-930-8500

The New York Daily News
1-212-210-NEWS

The New York Times
news-tips@nytimes.com

I LOVE MY JOB...I JUST HATE THE SYSTEM THAT I WORK FOR!



By Donald Faeth

If you attended the rally on January 5th, you probably heard me mention this statement. I was explaining to everyone, that no matter what Borough I have been in, or tour, this sentiment seems to be the unifying statement of almost every EMT and Paramedic I have spoken to. The question then needs to be asked, "WHY?" I have numerous theories along with reasons people have given me. Some are fact, some are perceptions based on fact. Morale has been so low recently, that I questioned myself as to whether or not I should write this. But then I decided that ignoring the issues obviously won't make them go away and the morale of the workforce would only get worse if the City wins its appeal against our Uniform Status. So I figured that me stating the obvious should have no tangible affect on decreasing the morale. Just to make sure, however, I decided to state the reasons people hate our system in a 'top ten' list, just to add a little fun to our misery.

Ready, the 'Top 10' Reasons FDNY EMS personnel hate the system they work for:

#10 — I've completed my tour and pulled two shifts of O.T. this week, can I go home now?"

#09 — "What do you mean you are not EVOC'ed?"

#08 — "I'm just waiting for the 'fire promotion'."

#07 — "He's not available for O.T. tonight, he has a prior obligation to work at Clair's or Vinnie's after this tour is over."

#06 — "Who is our Medical Director?"

#05 — "Let's see, if I recycle cans I find on the street, work my second job and do a little overtime at FDNY, I might actually be able to pay my rent this month!"

#04 — OVERTIME, OVERTIME, OVERTIME

#03 — Dr. at BHS. "If you were a F.F., I would be able to put you out for this type of injury, but since you're not, go to the light duty desk. They will find something for you to do."

#02 — Lt., "I don't need RCC calling me, so go 89, even if you are not 89, but I will deny that I told you to go 89 when you were really not 89 if you ever get caught. Got it?"

And the #01 reason our members hate the system we work for is... If you are in the EMS Bureau of the NYFD, the Fire Department Sucks!!!

Continue to do your job well, be proud of what you do, stay united, and never let the bastards get you down!

In Solidarity

**Donald Faeth
Vice President**

GRIEVANCE PROCEDURE

By Jack Schaefer

In the last issue your rights under the Grievance Procedure were outlined. This article will outline the process or steps of a grievance. All phases of the Grievance Procedure are time limited. You must file your initial grievance within 120 days of the egregious incident or the incident is considered time barred and therefore is contractually prohibited.

Step 1: The grievance is sent to the appropriate Division Chief. The Division Chief has 3 days to respond to the allegation. If the Division Chief fails to respond within 3 days, or the decision is unsatisfactory, an appeal to step 2 must be filed within 5 days.

Step 2: The grievance is now sent to the Director of Labor relations at Fire Headquarters. If the Director fails

to respond within 10 days, or the decision unsatisfactory, an appeal to step 3 must be filed within 10 days.

Step 3: The grievance is now sent to the Chief Review Officer at the Office of Labor Relations. If the Review Officer fails to respond within 15 days, or the decision is unsatisfactory, the grievance is sent the DC37 Legal Department for review and possible submission to arbitration.

Arbitration: The arbitrator is a mutually agreed upon individual whose decision is binding to both parties. There are no time constraints with regard to hearing dates and responses.

Exceptions to the Grievance Procedure are LODI denials, which are filed directly at Step 2 and LODI terminations, which are filed directly at Step 3.

HERE WE GO AGAIN (SAFETY)

By Israel Miranda

Body Armor — Reliance Armor Inc. which was contracted by DCAS to supply body armor to many city agencies has decided to close as of January 1, 2006. What this means is that there is no manufacturer available to make the vest. All the vendors were contacted by the manufacturer and have stopped taking orders for body armor. I am working with Fire Department Management to see if they can expedite the process of picking another vendor soon. Any member who was measured in late November and December for body armor may not be receiving it. I have reached out to the manufacturer for the names of members who were measured for body armor but their order was not completed. The Local will contact these members and inform them of the situation.

Legionnaires Disease — This disease is considered to be fairly common and serious, and the Legionella organism is one of the top three causes of sporadic, community-acquired pneumonia. Because it is difficult to distinguish this disease from other forms of pneumonia, many cases go unreported. Approximately 1,000 cases are reported annually to the C.D.C., but it is estimated that over 25,000 cases of the illness occur each year and cause more than 4,000 deaths. Station 16 in Harlem has been tested and has come up positive in the domestic water system with Legionnaire Disease. Although those most susceptible include persons who are elderly, smokers and immunosuppressed, C.O.P.D. or other underlying illnesses, it has us very concerned. The symptoms are flu-like but it attacks the lungs. It can be treated with antibiotics.

People are mostly exposed in warmer weather through the ventilation system by breathing in a mist. It was found in the hot water because this organism services and grows at 68° to 120° F. There are several ways of treating this organism. Members must stay away from showering or using the hot water until this is resolved. The Dept. of Health and Dept. of Labor are involved in an investigation and I have met with the Executive Director of Harlem Hospital who has fully cooperated with the union and F.D.N.Y. We hope to resolve this issue soon, we will keep you advised.

Meningitis in Brooklyn — Alert! Members be careful with children with fever. Ask the right questions, and always suspect the possibility. We had a couple of incidents in Brooklyn Woodhull Hospital where they dropped the ball and did not notify our members in a timely fashion and caused many members and their families to be at risk. Complaints were made by this union and the F.D.N.Y. to the D.O.H. and a full investigation is under way. It was unacceptable for their staff in the E.R. to treat themselves and not notify its EMS professionals until many hours later. I was told we had another incident with Woodhull this past week and notification was done right away. I hope they got their act together but until they do, be careful out there.

Right to Know — Management has completed training curriculum that is title-specific. It will be reviewed by the Attorney

Generals office to decide if it is adequate for our title. In the meantime they continue to be fined.

Station 32 (Carroll Garden-Bond St.) — This place is under construction and is anticipated to be ready in one year or less.

Ft. Totten — Major renovations will begin in February at Building 405 and 325. They were served with fifty-three violations in total for these two buildings. Asbestos removal will begin in early February at Building 405.

Safety Clothing — Management has informed me that they are close to picking a vendor for the safety coat and pants. They will inform the local of their decision in the near future. Members will then be measured and distribution should be as soon as possible.

Congratulations — After much debate 40 new chairs have been ordered for our brothers and sisters in communications. These chairs are seven days a week, 24 hours a day chairs. Hope they're what you want!

In closing I like to wish all my brothers and sisters a Happy and Healthy New Year!

In Solidarity

Israel Miranda
Recording Secretary
Health and Safety Coordinator



A NEW HOME FOR EMS: THE U.S. DEPARTMENT OF HOMELAND SECURITY

By Octavio Collado

Hello fellow brothers and sisters, recently the George Washington University homeland security policy Institute published a report that recommends, a federal agency be developed and established within the department of homeland security, solely for the purpose of dealing with the needs, we as first responders have when responding to all forms of natural and manmade disasters.

Now is the time to achieve that proper recognition that is rightfully deserved. Since the inception of EMS as an active entity within the roles of first responders, which dates back to the early 1960s, we haven't had a true voice in the federal arena. Unlike law enforcement and fire service, we have never had a national agency to properly address our issues of funding and national standards of training. Currently EMS is part of the NHTSA on a national level. We have a common function, but do not share a single operational structure. Though EMS providers are roughly equal in numbers approximately 84,000 nationally, to firefighters and law enforcement officers we receive only four percent of the first responders funding allocated by the department of Health services.

EMS has no grant program dedicated to its basic operating needs. EMS has many unfilled needs (personal protective equipment and specialized equipment for medical interventions and rescue), as well as demands for the recruitment and retention of personnel.

There is no national training academy dedicated to emergency medical services providers. The Federal Management Agency provides firefighters with the National Fire Academy and emergency managers with the Emergency Management Institute. Police officers have opportunities with such training sites as the federal law enforcement training center and the FBI academy.

Although EMS providers can participate in courses held at some of these sites, none are focused exclusively on EMS training and educational needs and none integrate well the medical aspects of emergency response.

The existing inventory of federally funded courses that addresses EMS-specific operational or medical response issues is minimal at best. Beyond the short topic-based training courses, the broader educational programs taught at the flagship centers for police and firefighters have brought us the leaders for the next decades in the fire service and spawned aggressive training and educational programs all over the country. Clearly, the public, as well as the profession as a whole would benefit, if the same attention were paid to the professional development of EMS providers.

EMS has no true federal advocate. It is housed in a small program office of the Department of Transportation; National Highway Traffic Safety Administration (NHTSA), which itself focuses little on EMS. In fact, there is no mention of EMS or any

related function on the "who we are and what we do" section of the NHTSA website. DOT/NHTSA might have been the appropriate home for EMS during the early years when its focus was on transporting automobile accident victims, EMS has long outgrown such vestigial ties. The most appropriate solution to the EMS quandary of being housed in a department in which we no longer fit, is to move us to a department that leads the federal government's first responder efforts.

The Department of Homeland Security is the ideal home for EMS at the federal level, one of the department's primary missions is to "minimize the damage from potential attacks and natural disasters." This fits well with the role of EMS as an essential member of the first responders' community.

In summary, we agree with the George Washington Institute that the U.S. Emergency Medical Service Administration (U.S. EMSA) should possess, at a minimum, the following results-oriented characteristics:

1. Lead national EMS policy
2. Be funded at an appropriate level for this critical national mission
3. Manage and update existing EMS education and vehicle standards
4. Be the EMS providers' voice in the federal government
5. Examine EMS responders' safety issues
6. Collect and disseminate EMS data, as USFA and the Bureau of Justice Statistics do for the other first responders' constituencies
7. Be the central clearinghouse for EMS information, funding and standards
8. Manage national training programs
9. Conduct research, including needs and capabilities assessments

Without proper representation and integration into the federal government's first responders' activities, EMS issues will continue to go unaddressed, and lack of policy coherence and funding will continue unabated.

In Solidarity

Octavio Collado
Executive Board Member

RESPECT

By Nancy Lincke

Respect, a word often used and quite often misused. We all heard the word frequently at our rally at City Hall. But do we as a service respect ourselves and our fraternal brothers and sisters? Do you live by the age old adage, "In order to get respect you must first give respect?" Respect is defined (dictionary.com) thusly:

1. A feeling of appreciative, often deferential regard; esteem. See Synonyms at regards.
2. The state of being regarded with honor or esteem.
3. Willingness to show consideration or appreciation.
4. Respects Polite expressions of consideration or deference: pay one's respects.

Respecting ourselves is tantamount in overcoming the obstacles that confront us on a day to day basis. Sounds pretty easy, but it is in reality not. We are all confronted with situations that could make Gandhi a homicidal maniac; whether it is from a supervisor, a co-worker or the public that we serve. We, as medical professionals, must learn how to cope with these situations regardless of our personal feelings.

So, how does one accomplish this task? Is there an easy answer? The answer lies within you, the EMS professional.

When reporting for your tour, are you well groomed, uniform neat and clean, devoid of yesterday's lunch stains? When you arrive at the home of someone that has accessed the 911 system for whatever reason that they have deemed a medical emergency, presenting yourself as a well groomed individual is the first thing that is noticed.

When you are assessing the patient, are you addressing the patient as you would want your loved ones addressed? "Yes, I understand what you are saying Mrs. Smith," is definitively more respectful than "Yea I know Hon," or the often used "Whatever."

Perhaps if we as EMS professionals begin to treat our profession and each other with respect, the public we serve and the powers that be will begin to see us for what we are:

The largest Pre-hospital care providers in the nation and they will understand and treat us with the respect that is so richly deserved.

In Solidarity

Nancy Lincke
Executive Board Member

FOOD BANK

The food bank is available to assist any member of the service that is struggling to feed themselves and their families. You do not have to be off payroll in order to receive help. Any Local 2507 member is eligible. If you are aware of a member that is in need of assistance, please do not hesitate to contact Nancy Lincke at 1-800-424-3676.

All inquiries and assistance given is kept confidential.

And, as always, donations are accepted. Dry beans, canned fruits, vegetable, pasta and any non perishable foods are needed.

REFRESHER

By Oren Barzilay

Hey everyone. It's refresher time again. Today I'm writing about the great people of BOT. I recently went to refresher and I want to give all the people of BOT my appreciation for their dedication.

Refresher can be nerve wracking for some of us, but I must tell you how grateful the staff is. The positive atmosphere that was created by our peers and supervisors is beyond explanation and that is a huge factor in your success. They truly take a huge load off your back. It is so impressive to see our peers well informed and knowledgeable of their tasks. They go above and beyond to make sure you not only pass but understand what it is

you are being taught. To all those that are going to refresher soon, don't sweat it, the staff is there to help you. They will get you thru it.

I have always been proud of our BOT. I truly believe that I speak for the entire membership when I say this, my hats off to you guys. It's people like you that make this place a better place. On behalf of Local 2507 I thank you very much for a job well done.



N.Y. RESCUE WORKERS' DETOX PROGRAM

By Anthony Santamarina

My name is Anthony Santamarina. At the time of the WTC collapse I was 47 years old and married with 5 children and 6 grandchildren. I was a member of the New York City Fire Department and had been so for 19 years. I was a very active person and enjoyed the outdoors. I went camping, fishing, backpacking, hiking and hunting. I played soft ball in the FD EMS league and I bowled two leagues. I played golf and was pretty much just looking forward to retiring.

On 9-11, I got off at 7 in the morning, I was hanging around the station because I didn't want to leave and fight the rush hour traffic home. I was at the station when the first plane struck the WTC building. At that time I took an ambulance to the location with a partner. I didn't expect it to be the worst day in history for New York City.

I was a block and a half from the location when the first building came down. At that time my partner and I inhaled a lot of smoke and dust. I thought nothing of it at the time.

I was at the site for the first two days and at least one day a week, during that time I developed a cough with green and brown phlegm. This went on until I got sick in January of 2002. At that time I was taken to the hospital for respiratory infection. I was diagnosed with pulmonary asthma disease and was given a cocktail of multi doses of steroids. After the first 7 months of taking this medication I gained approx. 110 pounds. The following 6 months I gained an additional hundred pounds.

My sleep was lousy. I was getting 2-3 hours a night. I was unable to even lie down. I had to sleep sitting up. I had no energy and no stamina. I could not walk more than 50 feet without having to use Albuteral, I could not finish sentences from lack of breath. I was grey and I looked dead. I felt like I was dying. I worried I would die in my sleep and I felt like I wouldn't wake up anymore. My family was totally concerned.

Financially I got destroyed. I had to go bankrupt; I couldn't work and couldn't pay my bills. I had to sell a car and I was selling my personal property to get by. I also became irritated—I

was mad and tired—I guess I was just pissed. I was disgusted with what was going on. After almost 2 years of trying to go back and forth to work I was finally put out on total medical leave in November '04. During this whole 2 years I was unable to do any of my normal routines at home.

Near the beginning of August 2005, I was speaking with some of my union reps, they told me about the New York Rescue Workers' Detoxification Project and recommended that I try it. At that time I was still on asthma medications, water pills, and other medications. On August 12th, I arrived to meet with Jim to find out about the program. After speaking to him I decided to start the program the following Monday.

I have been off all meds since starting my program. I now have much more stamina and a much better attitude. I have only minor sleep apnea and I use the machine at much lower setting. I am getting an average of 8-9 hours of sleep at night. Getting sleep is such a big difference! My last pulmonary exam put me at 70 percent; previously I had been down to 52 percent. I've increased 18 percent!

Now I can walk 2 sessions of ten minutes, 20 minutes of exercise in 25 minutes time. I walked around the block yesterday with no problems, and I wasn't huffing and puffing! It's a BIG difference from not being able to walk 50 feet without being able to breathe.

My weight has gone down from 446 to 412. I now don't feel like I am going to die. My family life has improved tremendously; I am now able to play with my grandkids. I plan to spend some quality time with my wife and as a matter of fact I am planning a trip to Oregon to visit a new granddaughter! She's already a year old and I will finally get to see her. I feel the program and staff have a tremendous job to help me in my situation. I want to thank them all and definitely will recommend this program to anybody.

God bless you for your generosity in helping me get back to a normal quality of life.

If interested in this program call the office and leave a message for Izzy Miranda.

HUD Officer Next Door Sales Program

The following is in regards to changes in the federal rules regarding the Officer Next Door Sales Program administered by the Department of Housing and Urban Development. The federal government proposed a rule change that would allow Emergency Responders to be included on the list of titles covered in the program. This would allow Emergency Responders to purchase HUD-acquired homes at 50% discount from list prices.

In New York City, properties listed under HUD can be found at the HUD website at www.hud.gov or by registering with their NYC broker at www.glensold.com. The last listing belongs to the Prudential Action Real Estate office, the main broker for HUD properties from Newburg to Montauk, LI.

Those members who do not have access to the internet may contact the Prudential Action Real Estate at 718-935-8800 at extension 0 or should you have any questions on this matter, please feel free to contact Henry A. Garrido, Assistant Associate Director at 212-815-1510 of District Council 37.

January 5th Rally Photo Album

Photos by Joe Conzo



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Patrick J. Bahnken, *President*
Donald Faeth, *Vice President*
Joe Conzo, *Secretary-Treasurer*
Israel Miranda, *Recording Secretary*

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Oren Barzilay

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Nancy Lincke

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Uniformed EMT's & Paramedics of Local 2507

47-09 30th Street
3rd Floor
Long Island City, NY 11101



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