



**Dale Cunningham  
L & M RNs President**

**Labor and Public Employees Committee  
March 11, 2021**

**SB 1002 AAC Labor Issues Related to COVID-19, Personal Protective  
Equipment, and other Staffing Matters.  
HB 6595 AAC Labor Matters Related to COVID-19, Personal Protective  
Equipment, and other Staffing Matters.**

Good afternoon Senator Kushner, Representative Porter and members of the Labor and Public Employees Committee. My name is Dale Cunningham I reside in Ledyard, CT. I am employed at Lawrence & Memorial Hospital, New London, CT as a staff nurse in the Neonatal Intensive Care Unit. I am the President of Lawrence & Memorial Registered Professional Nurses, AFT Local 5049 and represent more than 600 members. I am here today to testify on SB 1002 and HB 6595. Thank you for raising this important legislature that affects the many front-line workers in CT who went to work hoping they would return home each day unchanged. Unfortunately, Covid 19 changed the lives of many nurses and co-workers I know.

The role of a Union officer is to assist our members with issues of working conditions, hours of work and benefits. When Covid came our working conditions changed to lack of PPE, which lead to unsafe practices, which lead to increased exposures and increased employees out ill with Covid.

Covid numbers surged in CT and across the country and the world. Our nation let our frontline staff down with the inability to supply them with the protective gear near to fight the pandemic. Healthcare workers after years of evidence-based Infection Protection education were told to change their practice. PPE practices were changed dramatically because of the fear of shortage. Healthcare workers became ill because of the lack of PPE. As a member of the Connecticut Dept. of Public Health, Healthcare-Associated Infections & Antimicrobial Resistance (HAI-AR) Advisory Committee representing AFTCT, all practices that prevent Hospital acquired infections were put in jeopardy with the many changes in CDC guidelines. The frontline health care worker had to get by, working a long shift wearing the same respirator or mask in the beginning for days in a row as an

example. There are many ways you can view how a nurse functioned and still functions when there is a large patient load of Covid patients.

Many of our members and other frontline healthcare workers claimed workers compensation, encountered many obstacles and denial. Proper instruction and education not given by our employers workers compensation representative. Many were made to feel they could not have gotten Covid 19 at work. The Union was not provided by our employer with a list of our members out sick over 3 days as stated in our Collective Bargaining Agreement. We are still trying to attain all the information so we can assist our members with proper documentation.

This bill speaks to Hospital staffing in Section 32. Staffing levels is a frequent question asked by my families in the Neonatal ICU. Staffing levels are submitted to the state by each hospital each year. Staffing evaluation is done in hospitals every 4hr to 8hr. The public should have the same advantage as in a Nursing Home to know the staffing levels at present time. Staffing levels should be transparent. Staffing levels need to be maintained so our frontline can provide quality and safe care for the patients in our state.

Thank for your time and I would encourage all of you to pass SB 1002/HB6595.

Dale Cunningham RNC  
President AFT Local 5049

