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Contact:

Press@legal-aid.org

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Statements from The Legal Aid Society and Disability Advocates on Council Members Farah Louis, Shahana Hanif, and Sandy Nurse Withdrawing Their Co-Sponsorship of Intro. 303

Intro. 303 Is Fundamentally Flawed and Threatens Home Care Access for Vulnerable New Yorkers While Failing to Provide a Workable Solution for Workers

(NEW YORK, NY) — **The Legal Aid Society and disability advocates** issued the following statements in response to Council Members Farah Louis, [Shahana Hanif](#), and Sandy Nurse now all having [withdrawn](#) their co-sponsorship of Intro. 303 — a significant acknowledgment of the serious concerns raised by a [broad coalition](#), including disability advocates, unions, workers, home care providers, and legal services organizations, about the bill’s deeply problematic and unworkable structure:

“We commend Council Members Farah Louis, Shahana Hanif, and Sandy Nurse for listening to the broad coalition of disability advocates, workers, providers, unions, and legal services organizations who raised serious concerns about Intro. 303 and for recognizing that this bill, as written, is unworkable. Their decision reflects an important understanding that reform must protect home care workers from exploitation without jeopardizing the essential care that older adults and New Yorkers with disabilities rely on to remain safely in their homes and communities. We remain committed to working with City and State leaders on real solutions that advance dignity, fairness, and care for all New Yorkers.”

“I would like to thank Council Members Louis, Hanif, and Nurse for understanding the concerns of people with disabilities like myself. Having utilized live-in services for over a decade, I intimately understand the need for reform regarding the 24-hour rule,” said **José Hernandez, Advocacy and Policy Associate with New York Association on Independent Living**. “However, Intro. 303 as currently written would only jeopardize the home care, safety, and freedom of people with disabilities and older New Yorkers who have been authorized for 24-hour live-in services through no fault of their own. I want to continue building upon the intent of Intro. 303 to find a solution that protects both the home care worker and the patient.”

“Council Members Louis, Hanif, and Nurse are showing real leadership by removing themselves from this fatally flawed bill. We call on all Council sponsors to follow their lead. We oppose Intro. 303 because it wouldn’t help workers and would force disabled New Yorkers who need 24-hour coverage into nursing institutions and hospitals. At the same time, our community is eager to work with anyone who wants to move forward with real ways to protect workers and disabled New Yorkers,” said **Joe Rappaport, Executive Director of the Brooklyn Center for Independence of the Disabled**.

“Intro. 303 is the wrong path forward, and we thank the Council Members who have withdrawn their support. While the bill aims to fix an injustice to homecare workers, it ignores the reality of how care is funded and staffed. We urge the remaining sponsors to work with us on solutions that stop exploitation without putting our community’s independence at risk,” said **Yaw Appiadu, Executive Director of the Harlem Independent Living Center.**

Background

Intro. 303 seeks to address longstanding problems with New York’s 24-hour home care shift model, a system that has too often left workers underpaid and overworked. But as currently drafted, the bill fails to account for the structure of New York’s home care system, which is authorized, regulated, and largely funded through New York State Medicaid.

Without state approval, reimbursement reform, and significant new funding to support replacement care hours, Intro. 303 could destabilize care delivery, forcing agencies to reduce services or stop accepting high-need patients altogether. For older adults and New Yorkers with disabilities who rely on continuous home care, that could mean missed hours, disrupted care relationships, and increased risks of hospitalization, institutionalization, or being forced from their homes. City and State leaders must pursue coordinated, meaningful reforms that directly address worker exploitation while preserving uninterrupted access to essential care, including:

- prohibiting retaliation against home care aides who refuse 24-hour shifts;
- ensuring workers can report all hours worked without fear of punishment;
- requiring agencies to rapidly report evidence of eligibility for split shifts to authorizing insurance plans; and
- enforcing penalties against agencies that violate labor protections while securing the state funding necessary to fairly compensate workers without reducing access to care.

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