

University of California nurses hold protest rallies

A WSWS reporting team
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Nurses at the University of California (UC) hospital system held rallies throughout the state on Thursday to protest UC administration policies over staffing and other issues. Nurses at two non-UC hospitals joined in the actions as well.

The California Nurses Association (CNA) had originally called for a one-day strike, but the union backed down in the face of a restraining order obtained Tuesday by UC administrators in conjunction with the state Public Employees Relations Board.

Prior to the restraining order, the CNA issued a press release stating, “UC RNs called the strike as a last resort following the refusal of UC hospital officials to improve staffing conditions at its high-profile hospitals, despite months of contract talks, a fact-finding process and multiple efforts by nurses in the facilities.”

The press release denounced UC San Francisco’s refusal to implement “an agreement UCSF signed October 2, 2009 to improve staffing and assure a dedicated break relief program so that nurses can take needed breaks without jeopardizing patients in their medical, post-surgical, and step-down (intermediate care) units.”

The CNA will return to court on June 18 for a full hearing on the nurses’ right to strike.

The California events took place on the same day as a one-day strike by more than 12,000 nurses in the Minnesota Nurses Association (MNA). (See article: One-day strike by Minnesota nurses to defend patient care.)

At the heart of both job actions is the issue of patient-to-staff ratios. As Minnesota nurses seek the type of staff-to-patient levels which are legally mandated for California, the UC nurses confront the chipping away of those very same levels.

The nurses, who work extremely long hours in high-stress conditions, are also demanding that adequate breaks be given to minimize risk to patient care.

The actions of the CNA, part of the national umbrella organization, National Nurses United, reveal its organic inability to fight for the just demands of nurses. A real defense of jobs and patient care requires direct opposition to the Obama administration’s health care cost-cutting and the very notion of profit-based health care. But the nurses’ union seeks to avoid at all costs any actions which bring nurses into conflict with the Democratic Party and the profit system.

The political efforts of the CNA have instead been entirely aimed at defeating Republican gubernatorial candidate Meg Whitman, who recently won the Republican primary after spending \$71 million of her own funds to secure the nomination.

The union does not mention the collusion of the state’s Democrat-majority legislature with the Schwarzenegger administration in imposing cuts on the state’s universities and health care facilities, nor do they reveal the political pedigree of state attorney general and former governor Jerry Brown, who is running against Whitman as the Democratic nominee.

Always an advocate of fiscal austerity, Brown as governor famously reversed his position on Proposition 13, the infamous 1978 state law which has provided billions of dollars in property tax savings to California’s wealthiest residents. When the law itself passed in 1978—Brown began calling himself a “born-again tax cutter”—and imposed an austerity budget on the state which devastated social services. As mayor of Oakland, Brown was a fervent law-and-order advocate—praising violent police attacks on antiwar demonstrators—and a supporter of real estate interests and charter schools.

Moreover, the CNA does not mention that current governor Arnold Schwarzenegger’s predecessor,

Democrat Gray Davis, imposed billions of dollars in budget cuts on the state's social services, in particular health care.

World Socialist Web Site reporters talked to nurses at two sites on Thursday to discuss their demands.

In San Diego, about 50 nurses outside the main entrance at UC San Diego medical hospital picketed with signs that read "Patient Safety before Profit." The nurses' chants emphasized fighting for their patients and for adequate break times.

Lisa Ross has been a working nurse for over 25 years. "Every year we have to do more with less," she said. "This is one of the most profitable hospitals and our CEO is getting paid three-quarters of a million dollars, how can they argue there's no money?"

Susan Clarke told the *WSWS*, "It's not about making more money. It's about the patients and the service they're getting. I've seen the meetings they have, they pinch left and right. They are trying to make cuts wherever they can."

Lisa Rainford called the conflict "a David and Goliath situation. UCSD is one of the best places to be as a patient. But with the ratio of four patients per nurse, it's hard to give them good service. They expect a head nurse to be in charge of breaking [giving breaks to] all of her staff; it's ridiculous! I deal with cardiac patients; these people are very fragile. We can be having a regular conversation and a second later they can be having a heart attack. I can't be running for a break when my patients need me. We need good staffing to keep an eye on them. One day we will be in those rooms and hope we have nurses fighting for our rights."

Little Company of Mary Hospital is part of Providence Health Systems, and is located in San Pedro, south of Los Angeles. About 100 people at the entrance to the hospital, mostly nurses, but joined by supporters, friends and family, held their rally on the sidewalk outside the hospital entrance. The hospital has locked out the registered nurses (RNs) and brought in scab workers.

JoAnn Correa is a registered nurse who works in labor and delivery. She has been at the hospital for twelve years. "I came in today to go to work, and they asked my name, and they told me, 'We're sorry, you're not needed today, you're being replaced for five days.' Today is my regular scheduled day! I showed up on time in my uniform ready to go to work. I don't know exactly their reasoning, why they asked me to turn around and leave. I've been told that they hired replacement workers for

me, so evidently under their core values they'll honor their replacement workers more than their own workers.

"Right now, what's really important to us is safe staffing. Our meal and break staffing is not adequate at this time. We need to be covered for our breaks. Nurses are doubling up on their patient loads right now to cover each other. That's extremely important to us, plus a safe lift policy, something in writing in our contract is deeply needed."

Regarding the upcoming restraining order hearing, "I just hope it comes out the best for our patients, because that to me is our number one concern ... we need to have quality nurses taking care of our patients. At this point, I don't know who is taking care of our patients, because they've locked out all of the RNs and no one has come to our floor for orientation, no one has come to our floor for training.

Tisa Banks, a nurse with two years experience said, "Most of all, we want our patients to be safe. You know, we want lift teams, teams to help us lift, we have so many nurses going out on leave ... I could be out on leave now, but because I love my job, I feel like if I'm not there for my patients that I'm letting them down. So I'd rather work with a hurt arm than take off on disability."

Deline, another nurse at Little Company, spoke about nurse break times. "It was going fine when the (patient-to-staff ratio) law first came into effect, but then just like everything else, the newness wears off and they start doing whatever they want to do. And that's what happened here.... The nurses need to go to break, nobody's there to cover them, Half the time you go to break, you have to get back out there because who's going to replace you? The nurses care so much that they leave their break and come back."



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