

“We’re fighting for nurses and other workers everywhere”

Twin Cities nurses fight cost-cutting plans

Anthony Bertolt, Matt Rigel
22 June 2016

As Allina Health nurses in the Minneapolis-St. Paul area enter their fourth day on strike, the opposition of 4,800 striking nurses to concessionary demands remains determined. The walkout, which began Sunday, followed three months of negotiations between the Minnesota Nurses Association (MNA) and Allina Health, the largest and most profitable hospital chain in Minnesota, which is refusing to discuss staffing levels and other critical issues unless the MNA accepts the destruction of the nurses’ current health coverage.

In addition to demanding plans with much higher out-of-pocket costs—aimed at saving the company \$10 million a year—Allina Health is planning to switch to a computer staffing system that would further increase the workload on already overburdened nurses. The hospital chain is also offering an insulting 2 percent pay increase in each of the next three years.

Before the strike the MNA, which is only demanding a 3 percent annual raise, offered to set up a joint labor-management body to cut health costs but Allina rejected the proposal.

The walkout is affecting five Twin Cities area hospitals: Abbott Northwestern in Minneapolis, Mercy in Coon Rapids, United in St. Paul, Unity in Fridley and the Phillips Eye Institute in Minneapolis.

The company is remaining intransigent in its demands and no new negotiations have been scheduled. Meanwhile, it has hired a strikebreaking firm to bring in 1,400 nurses to keep hospital operations going.

In the face of this provocation, the MNA and the AFL-CIO and Change to Win labor federations are keeping the embattled Allina nurses isolated. The MNA is keeping 7,000 members at other Twin Cities area hospitals, which have already agreed to new contracts, on job and is limiting the ongoing strike to just one week.

World Socialist Web Site spoke with striking nurses at Abbot Northwestern hospital in Minneapolis. Larrissa, a new nurse with one year of experience, said people her age were entering the workforce under conditions of rapidly deteriorating living standards. Commenting on the large sums Allina was spending to hire strikebreakers, she said, “Housing is paid for, traveling, and food--and I heard that on the first day, Allina spent about \$30 million and at the end of the week it will be \$140 million dollars.”

Nurses expressed their concern over the new computer system that was set to replace traditional staffing, which automatically assigns nurses to each patient. This new system would require nurses to enter their tasks into a computer as they complete them. Larrissa expressed skepticism towards the ability of this system to effectively assign nurses to their patients adding, “It’s hard to do that now, because nurses are sometimes so busy things don’t get charted until after the new nurses come. The computer system doesn’t know if you’re busy and can’t chart what you’re doing, so you can’t base staffing off this computer system.”

Nurses she knows work in another hospital system in Wisconsin that uses a computer staffing system, Larrissa said, adding, “The staffing program told corporate they needed more nurses but they didn’t staff them, so you’re still short no matter what.” She added, “and you still need a charge nurse on the floor, and you’re going to have to pay the charge nurse.”

The “Affordable Care Act” launched by the Obama administration has served as a catalyst to slash costs for health care businesses. It has also accelerated the drive by corporate America to greatly reduce and eventually eliminate employer-sponsored health care altogether. The nurses’ current health care benefits are seen as a major obstacle in this process, and as many nurses have

expressed, a defeat in this battle would likely follow with cuts to nurses' living standards across the state and nationwide. The importance of the gutting of nurses' health care is underscored by the willingness of Allina Health to incur the short-term expense of hiring strikebreakers while it waits for the MNA to capitulate to its demands.

Another nurse who wished to remain anonymous elaborated the fact that the nurses' struggle is part of a general class struggle. "I've been telling people that we're fighting not just for us, but we're fighting for nurses everywhere and other workers everywhere."

If Allina nurses are not to face this struggle alone, rank-and-file nurses must take the conduct of the struggle into their own hands and reject the MNA's political subordination of the fight to its relations with the Democratic Party and corporate management. Nurses should elect rank-and-file committees to fight for joint action by all nurses and health care workers in the Twin Cities. An appeal should also be made to the entire working class to beat back Allina's demands and fight for health care, livable wages and safe working conditions for all workers.



To contact the WSWWS and the
Socialist Equality Party visit:

wsws.org/contact