

Minnesota and Los Angeles nurses fight cost-cutting measures

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About 1,300 nurses at Kaiser Permanente's Los Angeles Medical Center (LAMC) went on strike Thursday joining nearly 5,000 striking nurses in the Twin Cities area of Minnesota now in the sixth day of a weeklong walkout at the state's largest hospital chain, Allina Health. Nurses in both areas are facing similar attacks on their work conditions and living standards.

Nimfa, a nurse at LAMC, told the *World Socialist Web Site*, "A big part of this strike is our working conditions and our struggle to give safe patient care without permanently breaking our backs. Some of the main issues are chronic understaffing, heavy patient loads and issues with supplies and equipment."

In Minnesota, nurses are facing an attack on their own health care benefits, with Allina demanding that the Minnesota Nurses Association (MNA) accept a new health plan that would impose higher co-pays and deductibles on health care workers. Nurses overwhelmingly rejected management demands in February and June, and after months of fruitless negotiations and growing militancy of rank-and-file nurses the MNA had little choice but to call the strike.

Management, however, has only been encouraged by the limited character of the strike, which is scheduled to end Sunday at 7:00 a.m. CDT, and involves less than half of the MNA members in the Minneapolis-St. Paul area. Allina is pressing ahead with its plan to slash health care benefits and impose an automated staffing system, which will increase workloads on already over-burdened nurses.

Nurses on the picket lines in the Twin Cities expressed their determination to resist these demands, and were encouraged by the nurses' strike in Los Angeles. Monique, a nurse with six years of experience at Abbott Northwestern in Minneapolis, told the WSWS, "We should all be united--not just us MNA nurses--but nurses in Los Angeles, Verizon workers, and so on."

There is a deep desire of health care workers to unify

their struggle against the giant "non-profit" hospital chains that provide billions in profits for the giant pharmaceutical, insurance, medical technology companies and their top administrators.

Researchers from the Johns Hopkins Bloomberg School of Public Health and Washington and Lee University found that seven of the 10 most profitable US hospitals cleared more than \$160 million in 2013 from patient care services despite having a non-profit status. The study, published last month, led researchers to conclude that the most profitable hospitals in the country establish monopolies in their communities, allowing them to mark up prices charged to private insurers. "The system is broken when non-profit hospitals are raking in such high profits," lead researcher Gerard Anderson said.

The attack on nurses has been accelerated by Obama's misnamed Affordable Care Act, popularly known as Obamacare, which has been a catalyst for hospital chains to streamline their costs at the expense of workers. The measure has also spurred major corporations to shift health care costs to their employees, under the threat of Obama's so-called Cadillac Tax on supposedly overgenerous health care plans.

Nurses at Brigham and Women's Hospital in Boston are preparing a one-day strike on June 27 over inadequate staffing for the hospital's Tertiary Care center, short staffing for critically ill children and lack of proper staffing to allow nurses to take rest and meal breaks.

While nurses are striving to unite their struggles, the biggest obstacle is the unions, which claim to represent them. The National Nurses United (NNU) and its affiliates in Minnesota, California and Massachusetts, have limited the strikes to a week or less, giving all the leverage to management, which have hired or are preparing to hire replacement nurses. In addition, the AFL-CIO and the Change to Win labor federations are opposed to a broader mobilization of millions of other workers,

including railway, postal, educational, supermarket, retail and other industries, who are working without contracts or under extended labor agreements.

Over the last 18 months, as the contracts for some 5 million workers expired, the AFL-CIO and Change to Win have systematically isolated each section of workers, extending contracts or calling limited, isolated strikes, only to starve workers back into submission. The most recent examples are the betrayal of the seven-week Verizon strike, and the concession contract forced through on Thursday against 14,000 steelworkers at ArcelorMittal.

Last July top union officials held a closed door White House meeting with President Obama to discuss how to contain the widespread determination of workers to recoup lost wages now that corporate profits and the stock markets had fully recovered from the 2008 crash. The NNU and other unions are allied with the Obama administration and the Democratic Party, and are only seeking to have a “seat at the table” in imposing sweeping wage and benefit concessions on workers.

In an effort to give themselves a “left” cover, while they collaborate with the Democrats’ austerity measures, the executives from the NNU and its state affiliates endorsed Vermont Senator Bernie Sanders. Like Sanders they will all fall behind the Democratic presumptive candidate, Hillary Clinton, the personification of the corrupt relationship between corporate America and the government.

If the nurses’ struggle is not to be betrayed, rank-and-file health care workers must take the conduct of the fight out of the hands of the unions, reject their bankrupt strategy of limited strikes, and fight for the broadest mobilization of the working class behind their struggle.



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