

Minnesota nurses union ends strike without new contract

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On Sunday morning the Minnesota Nurses Association (MNA) shut down the weeklong walkout of 4,800 Twin Cities area nurses against concession demands by Allina Health, the state's largest hospital chain. The MNA was forced to call the strike at five hospitals in the Minneapolis-St. Paul area after nurses overwhelmingly rejected cutbacks to their health care coupled with the drive to implement a computer staffing system onto already shorthanded and overburdened nurses.

The shutdown of the walkout leaves nurses in the exact same position as when they began the struggle. They still do not have a contract nearly a month after their last agreement expired on June 1. Allina, which staffed its hospitals with strikebreakers, is continuing its draconian demands.

The struggle facing nurses in Minnesota and around the country is far from over. Other sections of nurses in California and Massachusetts, who like the Minnesota nurses are members of local affiliates of the National Nurses United (NNU), are also engaging in limited strikes. However, the fight for improved work conditions, lower nurse-to-patient ratios and the right to universal health care requires an entirely new strategy and organizations of struggle. That conclusion flows directly from the experience of this and previous struggles.

There was ample public support, including from teachers and other health care workers, for the striking Twin Cities nurses. Rather than mobilize that support, however, the Minnesota AFL-CIO and the labor bureaucracy isolated the strike, limited it to seven days and subordinated nurses to their political alliance with Governor Mark Dayton and the Democrats (known in Minnesota as the Democratic Farmer Labor Party).

When teachers joined strikers on the picket line,

Allina immediately threatened to hit the teachers' unions with legal sanctions under federal labor law for joining a strike without giving a 10-day notice.

Education Minnesota President Denise Specht immediately capitulated to the threat, telling *City Pages* the union would "take extra cautions to make sure that the teachers union, as a labor organization, did not picket Allina hospitals."

Meanwhile, state regulators sent by the Dayton administration gave a clean bill of health to treatment of patients by the outside strikebreakers even though patient safety was being blatantly undermined.

To justify their demands for sweeping health care concessions, Allina and other hospital chains nationally have pointed to the so-called Cadillac Tax on supposedly overgenerous health care benefits, which is contained in Obama's misnamed Affordable Care Act. The hospitals have pointed to the tax, which goes into effect in 2020, to force nurses to accept substandard health plans with far-higher health care expenses. At the same time, Obamacare is also being used to carry out ruthless cost cutting and a restructuring of for-profit medicine, which will come directly at the expense of health care workers and their patients.

This only showed that nurses were engaged in struggle not just against Allina but the courts, the Dayton administration and both big business parties, which serve the interests not of workers but the giant health care monopolies. In the face of this the MNA and other unions did everything to prevent the nurses strike from becoming a catalyst for a far broader mobilization of the working class, which would quickly develop into a direct, political confrontation local, state and federal authorities.

While the NNU claims it is coordinating the struggles of nurses in California and Massachusetts in order to

create a shortage of replacement nurses, the limited strikes are really aimed at letting nurses blow off steam while disrupting the hospital chains as little as possible. Meanwhile, another 345 Allina workers, members of the Service Employees International Union (SEIU), are voting on strike action on June 29—four days after the completion of the MNA strike!

The intransigence of Allina was demonstrated by CEO Penny Wheeler, who told the *Star Tribune*, “We’re eager to get back to the bargaining table,” but “both sides need to be willing to talk about a health plan transition.”

For its part, the MNA has already offered to set up a joint labor-management committee to discuss replacing the current health care plans with a less costly one. Union officials, the *Star Tribune* wrote on June 25, “don’t believe it fair to surrender them without concessions on Allina’s side.” In other words, the MNA is only looking for some cosmetic gesture from management to help it sell more concessions.

Any future negotiations will also be affected by the decision of Obama’s National Labor Relations Board, which may include bringing in a federal mediator who could declare an impasse and unilaterally impose management’s demands. Earlier this month, the Communications Workers of America (CWA) shut down a seven-week strike by Verizon workers and imposed a deal brokered by the Obama’s labor secretary and a federal mediator that imposed sweeping health concessions.

In the 2010 contract struggle 12,000 nurses at Allina and other hospital chains in the Twin Cities voted for an open-ended strike to win contract language governing safe staffing ratios. MNA officials quickly called off the strike and in order to cover their betrayal, said they would join the Democrats is pursuing safe staffing ratios in the Minnesota legislature. Six years later, nothing has been accomplished.

The alliance between the unions and the Democratic Party is an alliance against the working class. In an effort to conceal the anti-working class character of the Democrats, the MNA and the NNU endorsed Vermont Senator Bernie Sanders, who denounced the “billionaire class” for controlling America’s economic and political system.

Sanders has now packed in his campaign, announced that he would vote for Hillary Clinton and is trying to

convince workers and youth he will work with Clinton, a warmonger and multi-millionaire shill for big business, to “transform the Democratic Party into a party of working people” at the upcoming Democratic Party convention in Philadelphia. Sanders’ words, RoseAnn DeMoro, executive director of National Nurses United said, “were music to everyone’s ears.”

In an interview with DemocracyNow! on June 17, DeMoro admitted that the Democratic Party’s opposition to “a single-payer healthcare system” and other issues important to nurses represents the “the role of finance in healthcare.” She asked rhetorically, “So when Senator Sanders says that we have to transform the Democratic Party, we all kind of turn and look at each other and wonder, ‘With Wall Street’s money so invested in that party, is that possible any longer?’”

Nevertheless DeMoro insisted, “We’re staying with Bernie. We’re going to fight for our issues through the convention, and we’re going to continue to fight for our issues.”

In other words, while acknowledging that the Democratic Party is beholden to Wall Street, hostile to workers and committed to the continuation of a profit-driven health system, the NNU executive is helping Sanders perpetuate the lie that the Democratic Party can be pushed to the left.

Nurses cannot defend their livelihoods, work conditions and the right to universal health care if their struggles are subordinated through the NNU and other unions to the Democratic Party. New organizations of struggle and self-representation, controlled by the rank-and-file itself, are needed and a new political strategy that unites the working class in opposition to the capitalist system.



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