

Minnesota nurses contract talks continue with Allina Health

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23 July 2016

Negotiators for Allina Health are sticking fast to their demands for the gutting of health care plans for 4,800 nurses in the Minneapolis-St. Paul metro region as a new round of negotiations resumed last week. The rebuff comes some three weeks after the Minnesota Nurses Association (MNA) ended a weeklong strike at five of Allina Health's hospitals without a contract.

In the new round of negotiations, MNA offered to eliminate one of the four union plans, called the 250 plan, by 2017. Allina flatly rejected the proposal, stating, "Because very few nurses are on the 250 plan, eliminating that plan while keeping the other three nurse-only plans does not address the significant health plan cost issues that lead to these negotiations. As we have previously stated, Allina Health cannot reach a contract agreement without a transition to the core plans. We are open to the union's proposal on what that transition would look like."

Management is insistent that all four union plans be eliminated by the end of 2019. It has hinted that an impasse in negotiations could lead to the unilateral implementation of its demand. The MNA has meanwhile declared, "No one wants another strike."

In the 2010 contract struggle, the MNA called a one-day strike of 12,000 nurses at all Twin Cities hospitals. From this experience nurses drew the conclusion that the strike had to be open-ended.

In 2016, instead of a one-day strike, the MNA called a weeklong strike as a way of letting off steam in the hope of wearing down nurses and facilitating a final agreement acceptable to Allina.

The fact that the MNA is deeply opposed to broadening the struggle is demonstrated by a statement by MNA president Mary Turner on the union website, entitled, "Solidarity is Alive and Well." Solidarity has been traditionally understood as the class solidarity of

workers standing uncompromisingly against the corporations and their agents—capitalist politicians and the many arms of the government that are dominated by the ruling elite.

However, Turner's statement includes a list of some 200 names of individuals and organizations front-loaded with the names of 102 politicians, overwhelmingly associated with the Democratic Party. Among them are 40 state representatives, 13 state senators, 14 city council members from Minneapolis and St. Paul, the lieutenant governor, the mayor of St. Paul and assorted others. In addition, there are another 22 candidates for the state house and senate.

Leading the list is Hennepin County Attorney Mike Freeman, who whitewashed the killing by Minneapolis Police of Jamar Clark last fall. Also included are the union representing Minneapolis police and four other police unions.

And what qualifies these politicians to be given the badge of solidarity by the MNA? Turner lists the requirements: "signing a public letter, walking the picket line, offering discounts, donating staff time, food or drinks and contributions to the strike fund."

The claim that gathering signatures of Democratic Party officials and brief celebrity appearances on nurses' picket lines somehow advances the struggles of workers is absurd.

The official name of the Democratic Party in Minnesota is the Democratic-Farmer-Labor Party (DFL); an appellation the union bureaucracy uses to create the impression that the Minnesota party is somehow unique. However, the DFL has proved again and again that it stands on the side of bosses against the working class. Most notorious was DFL Governor Rudolph Perpich, who in 1986 used the National Guard to break the strike by meatpackers at Hormel in Austin

Minnesota. Four years later his administration prosecuted and jailed wildcatting construction workers involved in the strike at Boise Cascade in International Falls.

The conduct of the negotiations further exposes the MNA's fraudulent claim that it is promoting solidarity. When contracts expired for 11,000 nurses at Allina and five other hospital systems in the Twin Cities, the MNA accepted separate negotiations for the 6,000 nurses at the other hospital corporations and concluded what were called wage-only contracts that retained past benefits.

MNA officials claim that among the most important issues are nurse-to-patient ratios. But in their hurry to conclude contracts with the other five hospitals, this was not made a principal item in the negotiations. Had the MNA demanded safe staffing ratios, it would have brought nurses into conflict with the management at the five hospitals and posed a strike, raising the prospect of a common struggle with the Allina nurses.

The wage-only contracts were concocted to avoid this threat. The effect of this maneuver was to isolate the Allina nurses in their showdown over healthcare packages.

In order to defeat the conspiracy by the MNA and management to slash their healthcare coverage Allina nurses must take the struggle out of the hands of the union and establish independent rank-and-file committees. Citywide rallies and meetings must be called to mobilize all sections of the working class in struggle against the corporations, politicians and the labor bureaucracy.



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