

Nurses strike Tufts Medical Center in Boston

Hospital plans punitive five-day lockout

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13 July 2017

Nurses at Boston's Tufts Medical Center (TMC) went on strike Wednesday morning in the first nurses' strike at a major hospital in the city in 30 years. The strike came after 18 months of negotiations and federal mediation yielded no agreement.

The nurses, organized by the Massachusetts Nurses Association (MNA), are demanding the hospital increase staffing and resources, make salaries more competitive and keep a decent pension plan intact.

The vast majority of Tufts' 1,200 nurses walked out at 7 a.m. Wednesday for a planned one-day strike. However, TMC said it would lock out the nurses for five days as retribution for the action. The hospital has hired more than 300 nurses from across the country to take the strikers' places, and says that any Tufts nurse who attempts to enter the hospital at 7 a.m. Thursday morning will be blocked by security.

More than a thousand nurses and their supporters rallied outside Tufts Medical Center throughout the day on Wednesday. The strikers were joined by nurses from other Boston hospitals, firefighters, carpenters and other Boston-area unions, as well as by patients showing their support.

A group of nurses from Brigham and Women's Hospital came to support the Tufts nurses. One of them, Robin, said, "Patients need to be taken care of, but I don't think it will be the same nurse/patient ratio as with their own Tufts nurses."

The *Boston Globe* reports that Tufts is spending a minimum of \$6 million to hire the mercenary replacement nurses, and plans to pay them \$60-65 an hour, working 12-hour shifts. Robin said of the \$6 million, "Give it to the nurses, the people who are invested and who have been here for many years caring for these people."

Kathy, another Brigham and Women's nurse, said, "I

agree. I'm here to support the nurses; the main issue is staffing." There is general concern that nurses cannot be adequately trained in such a short time to take over nursing duties at a new hospital.

"If you are that patient, or if it's your loved one, that patient needs to be treated carefully and with all the protocols in place," Robin said.

"You always have the risk of nurses working in the emergency room, or working in the NICU [neonatal intensive care unit] that aren't necessarily qualified, and familiar with the equipment."

According to news reports by the *Worcester Telegram & Gazette*, during the 2000 strike by MNA nurses at St. Vincent Hospital in Worcester, three nurses from the same strike replacement agency being used by Tufts were fired after separate incidents in which a patient was left alone after surgery, the wrong baby was given to a nursing mother, and a nearly fatal dose of morphine was given to a patient by a nurse who misunderstood a doctor's order.

Tufts nurse Shauna told the WSWWS, "The main issues are staffing and patient care. At the end of the day, I just hope the patients are being taken care of. But I worry about them. What kind of care will they get with these nurses being brought in?"

The striking Tufts nurses are demanding improved staffing across all units and floors of the hospital. Nurses say departments are chronically understaffed, with management regularly sending out blast-text messages asking them to pick up shifts. This means nurses are often assigned to unfamiliar departments, undermining patient safety.

They are also calling for more charge nurses to oversee nursing assignments, as well as more IV-trained nurses. The MNA says that in addition to having some of the worst staffing conditions among

Boston hospitals, TMC offers its nurses the lowest wages and retirement benefits in the city.

David Schildmeier, the union's director of public communications, told MassLive.com that at bigger area hospitals like Massachusetts General Hospital and Boston Medical Center top-scale nurses make \$8-12 more per hour than top nurses at TMC, and that these nurses have not received a new "step" or pay raise in six years.

Earlier in negotiations, Tufts had offered raises of between 5.5 percent and 10.5 percent over four years. But now that the hospital is spending at least \$6 million to counter the strike with a lockout and replacement workers, it has reduced its offer to raises of between 3 percent and 5 percent.

The other major issue in the dispute is nurses' retirement plans. The hospital has proposed to freeze the defined pension plan for about 350 nurses and institute a higher-risk 403(b) matching program (a defined contribution plan, to which nurses must contribute). Nurses already in the defined contribution plan would continue to receive the lowest employer contribution of any nurses in the city.

The MNA has countered with a proposal for a multiemployer defined benefit plan, which management has refused to consider.

Patients joining Wednesday's picket line praised the dedication and skill of the Tufts nurses. Claire, whose mother-in-law Helen is a long-time Tufts nurse, credits the nursing staff with saving her son's life.

"My son was born here," Claire said. "I was in the labor unit overnight and something just didn't feel right. In the morning, they changed shifts, and within 15 minutes the senior nurse had us in the OR and my son was delivered. She acted quickly, and she knew she had to respond. My son is six months; he's beautiful and healthy now.

"His heart rate was not right, and if she hadn't reacted as she did, I don't know what would have happened. I got emotional coming in here today, because if not for that nurse's quick work my son wouldn't be here."

The Tufts strike follows a one-day strike by 240 nurses in late June and a punitive two-day lockout by administrators at Baystate Franklin Medical Center in Greenfield, Massachusetts. Last year, 4,000 nurses at Allina Health in the Twin Cities area in Minnesota

fought a five-week battle against management's demand that they accept a company-run insurance plan.

Unions representing nurses at Tufts, Baystate and Allina Health are all affiliates of the National Nurses United, which in the face of growing attacks on nurses and other health care workers have promoted ineffective one-day strikes, while calling on Democratic Party politicians to defend jobs and conditions. In the end, the NNU and its Minnesota affiliate capitulated to Allina's demands.

Far from defending workers, the Democratic Party has spearheaded the attack on health care and the workers who provide it, with the Obama administration's Affordable Care Act encouraging cost cutting and speedup in the hospitals and maintaining the domination of the insurance companies and giant hospital chains. This assault is being escalated by the Trump administration and bipartisan health care plan now being worked out in Washington.

An effective strategy requires that rank-and-file nurses take the conduct of their fight into their own hands and mobilize support among other health care workers and throughout the working class to fight both big-business parties and the for-profit health system they defend.



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