

University of Chicago nurses locked out for conducting a one-day strike

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More than 2,200 nurses at the University of Chicago Medical Center (UCMC), represented by the National Nurses Organizing Committee/National Nurses United (NNOC/NNU), went on a one-day strike on Friday. The nurses have been working without a contract since April of this year. They are striking to bring awareness to the difficult work conditions they face every day.

Specifically, nurses are being forced to work overtime, extra weekends and often without lunch breaks. They also cite security concerns. A significant number of nurses have filed complaints that patients or family members have physically assaulted them. They are also concerned that the high patient-to-nurse ratio is leading to poor quality care and increasing the potential for medication and treatment errors.

Meanwhile, UCMC spent the better part of the week preparing to meet the nurses' walkout with hostility, which included locking them out after Friday. In a show of utter contempt, the hospital has told the striking nurses not to return to work until Wednesday, the length of time that UCMC hired strikebreakers to fill in. The explanation given by hospital administrators is that contracts had to guarantee five days of work for temporary replacements in order to recruit the sizable complement of nurses. This is simply bureaucratic talk that in real terms amounts to a lockout.

Given the continued negotiations and strike threats by the NNU, the University of Chicago Medical Center, a 618-bed world-renowned hospital, has had ample opportunity to prepare a plan. When nurses had voted in August to authorize a strike, UCMC spokesperson Ashley Heher said, "We have a full strike plan in place to ensure our patient care will continue should the union call for a walkout in the future. This includes engaging an outside firm that can provide a fully trained group of nurses to provide continuity of care."

UCMC was notified by the NNU on Monday that they would authorize the conduct for a one-day strike on that Friday.

The hospital has coordinated moving many of its newborns and pediatric patients to other local hospitals. On Wednesday, UCMC began diverting all ambulances to other community hospitals. This move has reignited worry and animus among local residents and community leaders. The medical center has only recently initiated trauma service to the surrounding neighborhoods of the South Side, after years of protests by the community. This care is again in jeopardy should a prolonged strike or lockout go into effect.

Though the hospital said negotiations on Wednesday broke down over issues of incentive pay for future nursing hires, Marti Smith, the Midwest director of National Nurses United, said the hospitals were not addressing the fact that management is forcing overtime on workers while also demanding high patient-to-nurse ratios.

In an email published in *Chicago Tribune*, Ms. Smith wrote, "When nurses work while exhausted from 16-hour shifts, they are more likely to make an error that could impact patients. The nurses are willing to take a substantial financial hit. They're going five days without pay to advocate for their patients in this way."

This defies all logic and stinks of the rotten deals that NNU has made behind the backs of the nurses that have created the conditions they're currently protesting.

On the National Nurses United web site, they released a press statement stating that nurses at Tenet Hospitals in Arizona, California and Florida would also hold a one-day strike on September 20, the same day as the Chicago strike, over many of the same issues the Chicago nurses face. With more than 150,000 members nationwide, the National Nurses United is the largest

professional association of registered nurses in the United States. These actions beg the question: Why accept such debasing and ill treatment by any hospital of your dues paying members? Why has not NNU coordinated a broader coalition of nurses to demand establishing working conditions safe for both nurses and their patients?

To ask the question is to answer it. These isolated one-day strikes are simply the well-worn tactics of a union leadership that attempts to garner support for itself from those it pretends to represent while bending over backwards to accommodate massive, for-profit hospitals.

Last July, University of Chicago nurses demonstrated to bring awareness to the problems they face. Since it was not a work stoppage, nurses had to take a day off or come down on their breaks to engage the community on the issues that have continued to remain unaddressed and pose risks to health. Illinois Democratic politicians, State Senator Robert Peters and State Representative Fred Crespo, appeared there for photo opportunities.

While law prevents nurses from abandoning their patients no matter the circumstances, nurses can file objections if they deem conditions expose them to extraordinary risks. According to NNU's Smith, UCMC nurses have filed over 1,500 objections since the beginning of 2017. Also, the NNU has filed two ongoing complaints, one with the Illinois Department of Health stating that the Medical Center is not abiding by state-mandated staffing levels and another with the federal Occupational Safety and Health Administration (OSHA), charging workplace injuries are not being documented.

UCMC is also maligning the nurses for the walkout. UCMC chief nursing officer Debra Albert stated in an email posted online, "UCMC did not want a strike and has done everything it could to avoid one. It has listened to concerns and made numerous proposals to address them. The union claims it wants a contract, but the events of the last few months raise questions."

Ms. Albert then enumerates multiple scheduled dates asking, "Why is NNOC/NU putting you on strike before eight scheduled bargaining dates on September 25, 26 and 30 and October 1, 10, 11, 15 and 16? ... It is important for you to understand that the Union chose to call this strike. UCMC from the start sought dialogue

that could have avoided it."

It is estimated that there will be more registered nurse jobs available over the next four years than in any other profession in the United States. The US Bureau of Labor Statistics projects 1.1 million additional nurses are needed to avoid further shortages. Some of the major causes for the shortage are attributable to aging populations, an aging workforce and nurse burnout.



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