Widespread opposition as union sells out Joliet, Illinois nurses strike

Alex Johnson 23 July 2020

Nurses at the AMITA St. Joseph's Health Medical center in Joliet, Illinois returned to work Wednesday after their two-week strike was shut down by the Illinois Nurses Association (INA), which signed an agreement that abandoned the nurses' main demands for a reduction in dangerously high patient-to-nurse ratios.

In the results of weekend voting, which were released Monday, the INA said the new agreement was ratified by a vote of 314-235, with 170 nurses abstaining. This means the new deal was passed with the votes of only 43 percent of the eligible 723 nurses. The results were a vote of no confidence in the INA, which brought back a contract that differed little from one the nurses voted 70 percent to reject just a week before.

Illinois Nurses Association officials admitted that the agreement did not to stop chronic understaffing that forces nurses to work exhausting hours, endangering themselves and their patients. "AMITA would not move forward on staffing any further," chief INA negotiator Pat Meade told the *Joliet Patch*. "We will continue the fight for safe staffing through enforcement of our contract and in Springfield," she said, referring to the bogus Safe Patient Limits Act floated by state Democrats that would do nothing to cut across the cost-cutting and profit interests of the giant hospital chain.

Crushing out-of-pocket health care costs for nurses will continue. The agreement includes a supposed cap on insurance premium contributions at 25 percent for full-timers and 35 percent for part-time nurses.

The deal includes an insulting two percent step wage increase for 2021 and another two percent increase for 2022, figures that don't even keep pace with inflation rates and rising living costs. Instead of a raise for 2020, there will be a \$500 bonus for full-time nurses and \$250 for part-time nurses. The contract does not include salary increases that complement cost of living, which was one of the central demands of workers and a stipulation that was included in previous contracts.

While the agreement keeps intact one of the most inadequate pay scales in the healthcare industry, AMITA's parent company Ascension—which is sitting on \$15.5 billion in cash reserves—is one of many hospital giants receiving massive handouts from the Department of Health and Human Services, as a part of the bipartisan CARES Act.

The defeat of the strike was not due to any lack of determination by nurses. The health care workers had been demanding strike action for weeks after the union and the hospital chain failed to reach a new agreement after the old contract expired on May 9. After the INA finally called the strike on July 4, they isolated the strike, forcing nurses to confront the strikebreaking operations of the state's largest hospital chain on their own and with no strike pay.

While AMITA contracted an agency to provide replacement nurses, the state AFL-CIO opposed any expansion of the struggle to hospitals and medical facilities throughout the state where nurses face chronic understaffing, the lack of PPE, and other dangers due to the pandemic. Meanwhile, the unions promoted various state Democrats, even though the Democrats no less than the Republicans defend for-profit medicine and have carried out a homicidal back-to-work policy that has led to a surge in COVID-19 cases.

AMITA nurses are being sent back to work as COVID-19 cases rise across the state. Yesterday, the Illinois Department of Public Health confirmed 1,598 infections had been added to the total, the highest oneday increase since early June. Health care officials are warning that Illinois will potentially experience a tremendous rise in cases over the next several weeks after cases had temporarily stabilized due to lockdown measures and shutdowns enforced in late-March.

Across the US, 59,628 people were being treated in hospitals on Wednesday, according to the Covid Tracking Project, the *New York Times* reported. That is near the peak of 59,940 on April 15, when the center of the outbreak was New York.

The refusal of the political establishment to take any measures to contain the surging pandemic, combined with the callous indifference of hospital executives and bureaucrats, is creating massive anger among nurses and healthcare staff.

In a Facebook post, one nurse from Hopkinton, Massachusetts described working conditions in hospitals as "awful" and noted that she, like many of her colleagues, has been battling being sick with COVID-19.

"I think I'm leaving my job. They are just feeding us to the wolves. No extra help or support from management. I have not seen anyone throw on scrubs and offer to help. I have seen more people die in 3 months then in 14 years combined. Having to put people in refrigerator trucks is awful. Having healthy 40-year-olds die. It's really hard."

Another Emergency Room nurse in Florida told the WSWS, "we now have 4 units of COVID positives and 3 ICU units. On Friday, we had 14 ER walk-in patients who were positive, they were in holding in the ER for almost 4 days before we had enough rooms for them."

She added, "I am now getting used to people dying. I stopped counting the death numbers at our hospital. I used to ask about how patients' nights went if they were better...now we all ask do you think they will die today?"

The untold costs to human life raise the necessity for nurses, health care staff and other sections of the working class to form rank-and-file workplace and safety committees, mobilized independently of the procorporate unions and both big business parties. An industrial counter-offensive by workers must be combined with a political struggle for socialism, including the abolition of for-profit medicine and the guarantee of free, universal and high-quality health care for all. This must be combined with sharp increase in the hiring of nurses and other health care workers—at good wages—to end dangerous understaffing once and for all.



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