SEIU calls off health care strike in Minnesota after Allina hospital system threatens legal action

Jonas Boquist 21 September 2020

The Service Employees International Union (SEIU) Healthcare Minnesota canceled a planned two-day strike that was to begin September 14 at two Allina Health hospitals in the Twin Cities metro region after the health care giant threatened legal action if workers picketed during the strike. About 220 medical tech workers and therapists voted by more than 90 percent to strike Allina at its Abbott Northwestern Hospital in Minneapolis, Minnesota and the St. Francis Medical Center in the southern suburb of Shakopee.

The cancellation of the strike comes as 4,000 workers at the University of Illinois at Chicago (UIC), including cashiers, custodians, parking attendants, laboratory animal caretakers, emergency medical technicians and physical therapists in SEIU Local 73 remain on picket lines in Chicago, Peoria, Rockford and Urbana, fighting unsafe working conditions and abysmal pay.

Last Monday, the UIC workers joined striking members of the Illinois Nurses Association (INA) at University of Illinois Hospital (UIH), after overwhelming sentiment for a combined struggle forced the SEIU's hand. Despite the support of UIH staffers for the nurses at UIC, the INA called off their strike on Friday with none of their demands met.

In the Twin Cities, the SEIU gave a 10-day strike notice on September 3 and had categorized the strike as an unfair labor practices strike, which from a purely legal standpoint seeks to avoid the company's ability to permanently replace striking workers. Apparently, Allina did not go before a judge to seek an injunction of any sort. It merely informed SEIU of the threat and that was enough for union officials to retreat, declaring it was "postponing the strike out of an abundance of caution. A new strike date will be announced in the

near future." Union president Jamie Gulley said the SEIU had "never seen an employer use this tactic before."

The workers are seeking wage increases, increased paid time-off and enhancements to health insurance and retirement plans. But workers were especially aggrieved over the fact other Allina workers are granted full wages and benefits should they contract COVID-19 or must quarantine, regardless the frequency of occurrences.

The SEIU, on the other hand, has only been able to negotiate a temporary agreement during the pandemic for a one-time compensation in the event they get the virus or must quarantine. After this initial compensation, they have to dip into their sick days and workers are already being forced to do so.

Allina is only offering workers a meager 2.25 percent over the life of the contract and called the modest 13 percent wage increase demanded by workers "simply unrealistic." "Despite receiving over \$170 million in government support for COVID-19," complained the company, "Allina Health still experienced financial losses of \$152 million through the end of June."

A good portion of these losses has been due to a sharp reduction in profitable elective surgeries. Like President Trump, hospitals have been at pains to revive this business by trying to create the illusion that the coronavirus is not a threat inside its walls. Hospitals across the country cracked down on workers in the early months who donned face masks because they claimed they frightened potential patients.

When the SEIU gave its 10-day strike notice, Allina responded, "It is also disappointing that the union would state publicly that this is a strike about safety

issues." This combined with picketing, in the opinion of management, would discourage potential elective surgeries.

Earlier this year at Allina's United Hospital in St. Paul, the company threatened nurses who took action to protect themselves from the deadly virus by protesting and reporting unsafe conditions. Two Minnesota Nurses Association (MNA) stewards in the forefront of this struggle, Cliff Willmeng and Monica Norberg, were fired by the company in May.

In the aftermath of the firings, the company ran a banner headline on its internal website, "Thank you for reassuring consumers it is safe to get care at Allina Health." The subtle message was that workers who sought to protect themselves against COVID-19 in a manner that conveyed any hint of danger to the public were tampering with Allina's profitability and would face similar victimization as that of Willmeng and Norberg.

The MNA, facing a growing protest from nurses, called a demonstration to let off steam but since then has carried out no campaign among the ranks of health care workers on behalf of Willmeng and Norberg.

While a two-day strike by workers at two of Allina's 10 hospitals would have been thoroughly inadequate in fighting the health care corporation's attack on workers, the fact that the SEIU refused to carry out even such a token measure demonstrates that the union operates in direct opposition to the health and safety of its membership.

The SEIU specializes in calling impotent one- and two-day strikes by isolated and small sections of workers. Far from threatening management, their intent is to create the illusion among workers that this will put pressure on hospital management. On top of this, the SEIU has segregated health care workers at Allina from workers at other health care systems such as Fairview, Minnesota's second largest hospital chain.

The UIH nurses and UIC staffers have many allies. Last week, University of Michigan graduate student workers struck for over a week against their university's reckless and dangerous drive to have inperson classes in the midst of the pandemic, only to end with a sellout agreement after the American Federation of Teachers union intervened to end the strike. Teachers, parents and students have organized rank-and-file safety committees in New York, Texas, Florida and

other states to fight against the homicidal drive to reopen schools and campuses across the country.

It is time for health care workers to take a sober look at the struggle they confront. The only way for workers in the Twin Cities, Chicago and elsewhere to combat poverty wages and unsafe working conditions is to take the struggle out of the hands of the unions by forming rank-and-file strike committees. Nurses and other health care workers must break the isolation imposed upon them by the SEIU and nurses unions and link up their struggles with workers through the US and internationally.

The only solution is to wage a struggle to forge the unity of all health care workers through the formation of rank-and-file safety committees and to reach out to the broadest sections of the working class. We encourage Allina doctors, nurses and technical workers to study the example now being set by autoworkers and teachers to construct rank-and-file committees to wage a struggle against the pandemic and to put an end to the profit system that is the source of the crisis.



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