

# Nurses speak on conditions in Arizona hospitals where COVID-cases reach national highs

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Arizona's largest COVID-19 testing company may be shutting down due to lack of funding. Embry Women's Health, a health care group offering many women's health services, opened over 60 testing sites throughout the pandemic with the capacity to perform 18,000 tests per day. By some estimates, 25 percent of all COVID-19 tests in Arizona have been performed through Embry.

According to Arizona's local Fox station, Embry has not received any funding from the CARES Act, and its CEO is now appealing to private stakeholders to fund the testing sites.

The threatened closure of a primary testing company comes as Arizona faces the highest per capita rates of new virus cases in the US. According to data from the COVID Tracking Project—a group that compiles and organizes data from state public health authorities—Arizona saw a weekly average of 9,742 daily cases. For reference, a previous COVID-19 surge in July brought the state to a daily case level of 3,600.

COVID-19 hospitalization rates in Arizona are also reaching all-time highs. Unlike testing and case numbers, which can be quite variable, hospitalization numbers are a reliable metric for the state of the community transmission as it represents people sick enough to seek care. As of January 10, 4,988 COVID-19 patients are currently hospitalized in Arizona.

Arizona has the highest number of currently hospitalized patients per capita in the country. As of January 10, the state had 685 hospitalizations per million people. Alabama trails closely behind with 584 per million and Nevada and California both have 571 hospitalizations per million people.

High hospitalization rates have a direct impact on staffing in the hospital, increasing the number of patients a single nurse must care for and/or forcing staff to work overtime hours. On a Facebook page for travel nurses in Phoenix, Arizona nurses discussed the current COVID-19 surge and its impact on their working conditions. All names have been

changed to protect the nurses' identities.

Randy wrote: "The hospital I am at is currently running at 132 percent capacity. It is busy but we are muddling through."

Pauline, a respiratory therapist, stated, "It's so frustrating having the workload we are given and running out of equipment. They say more equipment is on the way but we are still short staffed and don't have more bodies to run the additional equipment if it were to arrive. We are out of high flow oxygen devices. Vents and bipaps are running low too. [We have to] clean and reset up on a new patient as soon as possible."

More nurses echoed the concern over staffing levels. Sandra added, "We have been drowning since October. Every single staff nurse has been working one or more extra shifts every week since November. We had 55 patients waiting for one room last night. We are making units in the lobbies but we have no one to staff them. We have tents outside the ER because the ER is full of inpatients."

Arizona also has the highest average daily deaths per capita at 21.2 deaths per million averaged over the past week. This is almost double California's average per capita daily death rate of 11.2 people per million per day. Arizona has an average of 154 daily deaths.

Hospitals across Arizona are struggling to meet the high demand for medical care. Data from the Arizona Department of Health Services shows that as of January 10, there are only 150 intensive care beds available across the entire state. Out of all the ICU beds, 65 percent are currently occupied by COVID-19 patients, while the other 27 percent are occupied by non-COVID patients.

The lack of ICU beds means that the quality of patient care will decline for critically ill patients, including those suffering from other health emergencies, including strokes, heart attacks and injuries. The limited number of nurses per patient will also lead to increases in mortality. Patients that under normal staffing ratios would have been saved will now

lose their lives.

In a Facebook group, “Arizona Nurses Covid-19,” nurses discussed the data showing there are only 150 available ICU beds across the state. Several nurses expressed disbelief, stating that the figures sounded like an overestimate based on their experience.

Julie asked, “Where are these beds hiding? I work home health and every time we send an acutely ill patient to the ER they are ‘admitted’ but stay in the ER for 3–5 days before getting a bed or getting sent to a SNP [skilled nursing facility]. Ambulances are refusing to take many patients to the hospital when they call 911 and then we have to try to set up non-emergent transport ambulances that are so busy right now. Never seen anything like it.”

Heather stated: “Pretty wild to take a walk through one of our ICUs. Doubled up beds to rooms so narrow that the beds are side-rail to side-rail facing the door. Virtually everyone is intubated.” Heather added that she cannot confirm that the patients she described had COVID-19.

Of course, the nightmare in Arizona is not unique. The herd immunity policy pursued by the United States government and its counterparts around the world is producing ever-spiraling heights of mass death. There have been more than 28,895 deaths in the US since the new year began.

Deaths are rapidly increasing. Before the reported holiday lull in deaths, the highest average daily deaths worldwide were reported at 11,731. Today, the daily deaths have increased to 12,680, and it continues to rise.

Arizona government officials stand exposed for their criminal indifference and negligence that led to the rapid spread of COVID-19 and the deaths of more than 10,000 people in the state. Despite repeated warnings of the danger of the coronavirus, Arizona Governor Doug Ducey and his cabinet failed to implement the necessary countermeasures at any point during the pandemic.

At the beginning of the summer, even with the knowledge that the July surge was yet to reach its peak, Ducey failed to respond adequately. Insultingly, he announced only band-aid measures like the closure of bars and outdoor water parks for 30 days. He also pushed school openings back two weeks. At the same time, nurses and physicians demanded that Arizona be placed in lockdown, drafting a petition and collecting thousands of signatures.

Throughout the pandemic, Governor Ducey has been a major proponent of the homicidal policy of reopening schools throughout the state. Ducey even incentivized the in-person reopening of school districts over the summer. Districts that reopened fully would receive 100 percent funding, whereas those that opted for hybrid or fully virtual learning would receive 10–20 percent less funding, prying

open the doors particularly for poor and cash-starved schools.

Ducey recently dismissed a proposal to have all public schools go to virtual learning for two weeks after the winter holidays. Even if passed, two weeks is inadequate and will do nothing to meaningfully lower infection rates. The governor also continues to reject a statewide mask mandate and calls for new stay-at-home orders.

Arizona teachers have responded to the current surge in COVID-19 cases. In early January, hundreds of Arizona teachers staged sickouts to prevent in-person learning and attempt to curb infection rates and protect their own lives.

The situation across Arizona and the entire country is not hopeless. Emergency measures that can contain and control the virus and end the wave of deaths exist, but they are not taken by the country’s ruling class because they cut across the economic interests of the financial oligarchies. Under capitalism, the lives of the working class will always be sacrificed in favor of corporate profits, stock prices and the wealth of the super-rich.

Against all expert scientific advice, workers are forced into virus-infested plants, health care workers into hospitals without appropriate PPE or organized testing, and students and educators into unsafe schools—all to keep corporate profits flowing straight to the ruling class. This same ruling class refuses to provide economic protection for the nation’s growing ranks of the unemployed.

At the same time, the vaccine is touted as a glorious solution. But the glass vial is useless if it’s not administered. Vaccine administration is currently so slow that it would take six years to vaccinate the US population at the current rate.

Arizona has vaccinated approximately 150,000 people, or a mere 2 percent of the state’s population. The slow rollout of vaccinations is not the fault of medical personnel dedicating their time, sometimes unpaid, to assist with vaccination efforts. State and local health officials were given a task to carry out a massive vaccination campaign—on top of other public health measures such as mass testing and contact tracing—with little to no national coordination or financial support.



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