

# Health care workers strike Bend, Oregon, hospital

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More than 150 medical technicians, technologists and therapists are on strike indefinitely at the St. Charles hospital in Bend, Oregon, in a strike that began March 4. Issues concern their first contract with the hospital, pay and manageable workloads. The strike was authorized by 94 percent of the workers at the region's primary trauma center and the largest referral hospital. The health workers on strike are represented by the Oregon Federation of Nurses and Health Professionals (OFNHP) Local 5017, which is an offshoot of the American Federation of Teachers.

The health care workers have not secured a first contract since voting to form a union in 2019. Some of them, such as respiratory therapists, and x-ray or computerized tomography (CT) technicians, have been specially trained and function as essential caregivers for COVID-19 patients.

While the OFNHP has not made the details of the negotiations public, St. Charles Health Systems has said that talks have stalled on issues over compensation and union security.

The parties have come to an agreement on the first-year salaries for the tech workers of \$41.94, which may not be representative of all striking workers. The staff currently earns wages in the range \$24–\$50 per hour, which have not kept up with inflation in Bend, in particular with housing prices.

The company is pushing for an “open shop” where workers can opt out of the union if they choose, while the union is arguing for a “closed shop” contract where workers must belong to the union as a prerequisite of employment.

Numerous workers interviewed by Oregon Public Broadcasting (OPB) said they want guaranteed wage formulas and protections against forced overtime, similar to what's included in existing union contracts for nurses. The first offer from St. Charles provided an insulting 0.5 percent yearly increase.

The work is highly demanding and takes both a physical and emotional toll on the workers. In early February, St. Charles x-ray technician Chriss Curry told OPB of the toll of working continuously in the intensive care unit, where one

day a COVID-19 patient he's x-raying might be able to speak and interact, and the next day is on a ventilator.

“People don't see how the patient looks in the bed with a tube down their throat,” he said. “And you've seen them day in and day out fight for their lives, with their lungs looking cloudier and cloudier.”

The union provided a 10-day notice to the hospital on the strike, and the hospital responded by filing a suit to block the walkout on March 1, claiming a 30-day strike notice is required. It filed two unfair labor practice complaints against the striking workers. In a temporary setback to the hospital, US District Court Judge Michael J. McShane on Tuesday refused St. Charles Health System's request for an injunction but deferred the decision to the National Labor Relations Board (NLRB). Hospital President Aaron Adams stated that the NLRB is expected to decide on the legality of the strike by the end of March.

The 10-day strike notice provided the hospital enough time to find scab replacements.

“We are pleased with how well the transition to the replacement workforce went Thursday,” Adams said, on NewsChannel 21 (KTVZ). “Technicians came from all corners of the country, and from some of the top medical centers. We're pleased we have been able to mitigate disruptions to our health care services.” According to a report from KTVZ, it appears that the hospital is also using certified workers in other bargaining units working at St. Charles to cover operations. For its part, the OFNHP has done nothing to interfere with management's recruitment of strikebreakers.

Even so, St. Charles was able to schedule only limited surgical procedures for Thursday and Friday, and some cases were moved to St. Charles Redmond. A registered nurse at the hospital, Corey Sattler, spoke with NewsChannel 21, disputing the rosy picture painted by the Hospital:

“Patient care today in the Main OR at St Charles Medical Center in Bend is practically non-existent due to the significant decrease in surgeries. The claim that the ‘hospital is open and providing care as usual’ made by hospital

administration is not accurate, and it is simply impossible given the current circumstances.

“There are replacement surgical and radiology technicians on site, but they are not trained to the level that our native techs are as to the equipment, policies, best practices, and staff. Because of this, the nurses at St. Charles are highly skeptical that the high level of care and competence we had previously is obtainable by these temporary workers, whose training, skill levels, and practice are unknowns.

“Additionally, these replacements have received almost no typical orientation to their units—an unheard of action and well outside of best practice. As the primary advocates for our patients, we are concerned that this is negatively impacting our ability to provide the level of care they, and our community as a whole, deserve.” The union had no immediate response to St. Charles’s portrayal of the situation, and the response from Corey Sattler.

St. Charles is—with the active help of the OFNHP—hiding its precarious position from the workers. In the suit brought against the union, the hospital specifically mentioned that a strike would cause St. Charles “substantial harm” because of a “national shortage of replacement caregivers due to COVID.” Undoubtedly, most health care workers are refusing to scab while their fellow workers continue to suffer in the front-line under a for-profit health care system that prioritizes profits over lives.

“Lost on the Frontline,” a project by *Kaiser Health News* and the *Guardian* reported that more than 2,900 health care workers lost their lives to COVID-19 in 2020. Citing the policy of malign neglect, the report noted that a full third of these fatalities were due to a lack of personal protective equipment (PPE). Health care workers across the US are fed up with the demand to work with little or no protection under conditions where the government policy has been to let the virus rip, virtually unchecked, creating the dangerous conditions that contributed to these deaths.

In the face of the determination of health care workers to fight for their demands there is great fear on the part of St. Charles executives that they will be unable to continue “business as usual.”

The hospital complains of its “missing revenue targets” in 2020. However, St. Charles is still expected to make a 3–7 percent return for 2020. The hospital system had an investment portfolio of about half a billion dollars as of its latest federal tax filing. According to 2018 IRS 990 filing, President Adams of St. Charles took home a total of \$935,411. Lisa Goodman, a spokesperson for St. Charles, told *Oregon Live* that the hospital received \$32 million in federal stimulus money from the CARES Act in 2020, and an additional \$19 million in 2021.

According to Ziprecruiter, an EMT worker in Bend makes

an average salary of \$28,024 per year, which comes to just \$13.47 per hour.

A mediation meeting has been arranged for March 10, with the hospital flatly rejecting the union’s proposal to mediate sooner unless employees go back to work.

The *World Socialist Web Site* warns St. Charles Hospital workers to place no confidence in the OFNHP, which is sabotaging the fight by refusing to mobilize its own members in other bargaining units to join their striking brothers and sisters as part of a strategy to isolate the striking workers and end the strike as quickly as possible.

The OFNHP states on its website that it is “part of the healthcare division of American Federation of Teachers (AFT).” However, the role of the AFT during the pandemic has been one of capitulation to the policies of the ruling class, which has sought to restart unsafe in-person classroom instruction despite the spread of the pandemic. To this end, the AFT has repeatedly shut down strikes in schools across the country on the basis of sellout deals with Democratic Party leaders, universities, and school administrators.

The spring 2018 strike wave by teachers across multiple states was initiated by rank-and-file teachers, in opposition to the AFT, which sought to isolate and demoralize teachers in order to force them back to work.

To win their demands, it is crucial that St. Charles workers establish an independent rank-and-file committee outside the OFNHP, following the lead of workers and educators in Pennsylvania, New York City, Los Angeles, the United Kingdom, Germany, Turkey, Tennessee, Alabama, Michigan, Sri Lanka and many other locations. The establishment of such committees directed by the workers themselves is critical to the ability of workers to struggle effectively for decent pay and working conditions and oppose the homicidal reopening policy of the ruling class. We urge workers to contact the WSWS for further information on how to become involved.



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