

# “The unions say we need to compromise. No, we don’t!” Nurses support St. Vincent strikers in Worcester, Mass.

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Some 700 nurses in the Massachusetts Nurses Association (MNA) at St. Vincent Hospital are in the sixth week of their strike against unsafe staffing ratios in Worcester, Massachusetts, the most important struggle of health care workers in the US.

St. Vincent is owned by Dallas-based Tenet Healthcare, a multibillion-dollar corporation that operates 65 hospitals across the country and is using the strike in Worcester to hold the line on staffing ratios to boost their bottom line.

There is broad support among nurses across the US for the St. Vincent nurses, especially their demands for adequate staffing ratios. However, the MNA is isolating the strike and refused to mobilize the support of the 23,000 members of the union across Massachusetts. The MNA also does not provide strike pay for the nurses, although the union controls millions of dollars in assets and many of its top officers and employees make more than \$100,000 a year.

Meanwhile, spending by Tenet to break the St. Vincent nurses’ strike will surpass \$33.5 million this week. These funds are going for beefed-up security inside the hospital and a daily rate of \$30,000 for Worcester police to keep the entrances open. They are also paying for lodging for strikebreaking nurses, who are paid double the normal rate, and a fleet of vans and buses to transport them into the hospital.

In opposition to this, the *World Socialist Web Site* and the Socialist Equality Party call for the expansion of the strike, including mobilizing support from the whole 23,000 nurses in the MNA, as well as the provision of \$750 in weekly strike pay, paid for out of the union’s \$9 million cash hoard and the furloughing all nonessential union personnel. To fight for this, the WSWS calls on St. Vincent nurses to contact us to begin building an independent rank-and-file committee.

The WSWS spoke to Katy, a nurse in Ohio. “I fully support the struggle of St. Vincent nurses,” she said. “The main demand of the St. Vincent nurses is safe staffing, but

for those who don’t work in health care it is important to understand exactly what unsafe staffing is. I work on a neurology med-surg unit. Although it’s med-surg, we take care of some very sick patients.”

For nurses at St. Vincent, the med-surg [medical-surgical] nurse-to-patient ratio is of critical concern. They are seeking a fixed maximum ratio of four-to-one, and the creation of two “floating” units of nurses to be able to respond to crises. The reduction from a ratio of five-to-one to four-to-one has been demonstrated to result in lower patient mortality.

Katy added, “We have patients who have just had cancerous brain tumors removed, patients who have had debilitating strokes where they can no longer speak or move half their body, elderly patients who have grown delirious from being in the hospital and need lots of one-on-one attention.

“When I’m given six patients, there is not enough time to provide the care these patients need. The stroke patient will wet the bed because I couldn’t get to the room in time. The brain tumor patient could have a neurological change that I would not notice right away. The confused, delirious patient will try to get out of bed and fall.

“When a unit is short staffed, there can be devastating consequences. On shifts like this, I don’t have time for a meal, and just when I feel like I’m catching up, I get another admission. My co-workers and I joke about taking crying breaks in the bathroom. We always try to help each other out, but the impact of short staffing on our mental health is terrible. Sometimes when I get in bed at night after work, my heart still feels like it’s racing.

“Additionally, most hospitals will deal with nurse staffing on the hospital level, not just the unit. That means that nurses will be moved around from unit to unit when staffing is required. This is called ‘floating’ and it means you are told at any point in your shift that you need to go to an entirely new unit, pick up an entirely new assignment of patients with problems that you are not trained to care for.

The other day I was on a liver transplant unit. I had no idea what I was doing or even where to find simple supplies. It's scary, but it is so normal. These days I can expect to 'float' about once every other week."

A former nurse from Southern California sent the following statement to the *World Socialist Web Site*:

"This is one of the longest nurses strike that I have ever encountered since becoming a nurse 13 years ago. I encourage the St. Vincent Hospital nurses to continue their fight for increased staffing, safe staffing ratios and acuity of assignments be distributed in an equal and safe manner.

"I worked in a hospital for 12 years and encountered the very same issues of understaffing, ratio violations and unequal workload given out by managers that placed patients at risk for demise. This is all done for the rotten for-profit health care system in America so that these behemoth hospital chains can maximize profits.

"I was in the California Nurses Association (CNA) union, and during the 12 years that I worked at my former hospital I saw a pattern of the union leadership giving away many of our hard-earned benefits, rights, and patient safety policies. And when bargaining, pickets and strikes happened, the union leadership kept us isolated from other fights happening at other CNA hospitals. CNA also did not pay strike pay but collected dues from thousands of nurses from across California.

"It is not that they could not pay strike pay; it is that they do not want to pay it. CNA/National Nurses United had plenty of funds to hold enormous conventions in other states and pay for nurses' food, lodging and travel to and from these locations and invite politicians and Hollywood entertainers. And not to mention donating membership dues to Democratic Party candidates, who have done nothing to help the working class and poor.

"I urge St. Vincent nurses to continue their fight for increased staffing, safe staffing ratios and acuity of assignments distributed in an equal and safe manner, but also to demand strike pay from their union leadership who are enriching themselves from nurses' hard-earned dues monies. Nurses should demand that MNA mobilize other union workers at St. Vincent and call for workers from Amazon, teachers, autoworkers and miners, and bring the hospital financially to its knees."

Monica, a nurse from New York and a supporter of the New York Educators Rank-and-File Safety Committee said: "Tenet Healthcare is a multibillion-dollar corporation that is leaching from the needs of workers for the private enrichment of the few. Nurses are the bedrock of hospital bedside care, and their demands are legitimate.

"[But] the Massachusetts Nurses Association (MNA) is obviously not looking out for the nurses. The fact that nurses

pay dues and the MNA is unable to extend any strike pay is just one example of the fact that these bureaucrats are in it for themselves and not the struggle of the working class.

Monica pointed to the recent appearance by a top MNA official on an online broadcast sponsored by the *Morning Star*, a Stalinist newspaper in Britain. "The history of Stalinism is one of total and utter betrayal of the working class. The entire political line is one of collaboration with the ruling class. That type of collaboration never comes out well for the working class.

"In looking at these courageous strikers around the country—the nurses in Worcester, miners in Alabama, the Columbia graduate students in NYC, soon the NYU graduate students, just to name a few—I have to ask myself: What does this system really do when it comes to the working class standing up for their right to strike? What do the unions do? They allow scabs to cross the line, they send for the police to back up the ruling elite.

"That right there is evidence for the working class that class collaboration is never in our benefit, that we live in a dictatorship of the ruling class and their lackeys like the trade union bureaucrats. We in the working class instead have to unite with nurses, Amazon workers and the working class all over the world.

"The fact is, the whole idea that workers have the right to strike [from the union's point of view] is only if it's allowed by the ruling class. They aren't going to allow a real strike if it cuts into their profits. This is what working class people need to recognize. The betrayals are there. People need to study and learn that the ruling class will never allow a genuine fight. They will make sure they win. That's why all the union bureaucrats are out there talking about how we nurses need to compromise. No, we don't! We don't have to when we are the entire base of society."



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