

Tenet Healthcare refuses to shift on staffing ratios at St. Vincent Hospital in Worcester, Massachusetts

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6 May 2021

May 6 marked the 60th day on strike for the nurses of St. Vincent Hospital in Worcester, Massachusetts. They have been on strike since March 8, fighting for better patient outcomes and a safer workplace, particularly in the context of the coronavirus pandemic.

The central demands of nurses are that patient assignments on all medical-surgical units be capped at four patients to every one nurse and that two additional nurse units be maintained to respond to overflow and critical cases.

On Wednesday, the Massachusetts Nurses Association (MNA) bargaining committee and hospital management met for several hours but were unable to settle on an agreeable proposal to take to the rank-and-file. This speaks to the intransigence of hospital owner Tenet Healthcare. What is clear from the statements released by Tenet is that it has no intention of acceding to the nurses' demands on staffing and is content that the strike be prolonged.

Meanwhile, the MNA will not discuss the details of their discussions, reportedly to avoid "unnecessary rancor," as the bargaining committee looks for areas of "flexibility" where it can make concessions. According to statements made by hospital management, it has asked the federal mediator to encourage the union to present the hospital's latest offer to the membership.

Since the first surge of COVID-19 last year, nurses have decried chronic understaffing, inappropriate assignments, inadequate and insufficient PPE, high turnover, ancillary staff layoffs and punitive management. They voted overwhelmingly to authorize strike action by 89 percent.

The conditions at Saint Vincent persist at hospitals throughout Massachusetts and the country. A

randomized survey released this week of over 500 nurses, published during National Nurses Week by Beacon Research of Boston, found that a majority of nurses say that patient care is getting worse and they consider the primary cause to be a lack of time to spend with the patients, owing to understaffing, excessive assignment ratios, a lack of ancillary staff and vacant positions.

On nine of ten survey questions—including safe COVID-19 protocols controlling facility spread, adequate time off to cope with the impact of caring for COVID-19 patients, and emotional support services—a majority of respondents characterized hospitals' responses to the pandemic as "poor."

The survey spotlighted dangerous workplace conditions. Of those who contracted COVID-19, 76 percent were confident they had contracted it on the job. Nearly 60 percent of respondents reported at least one instance of workplace violence in the last two years, 20 percent faced increased violence in the last year, and only 33 percent felt "very safe" at work.

A separate Massachusetts General Hospital study found that health care workers were 12 times as likely as community members to contract COVID-19.

Of nurses surveyed, 76 percent said they support the St. Vincent strike, including 69 percent who aren't represented by the MNA.

During the pandemic, health care workers across the country, from Hawaii to Massachusetts, are seeking to fight against unsafe conditions in the nation's hospital system. However, under the control of unions, strikes have either been prevented or, where they have taken place, have resulted in sell-out contracts, providing workers with paltry wage increases, preserving

corporate profits and, most importantly, leaving unsafe conditions intact.

For their part, the Democrats are attempting to contain and end the St. Vincent strike. Throughout the strike, Congressman Jim McGovern has run the back channels between the MNA and St. Vincent Hospital management trying to coax Tenet back to the table. Now that talks between the MNA and Tenet have resumed, the delegation once again has appealed to the corporation to negotiate.

The nurses of St. Vincent remain in a powerful position. They have the support of their colleagues, the community and the working class. They have demonstrated great resolve throughout the pandemic and now nearly two months into the strike. They have walked the picket for 60 days without strike pay, even though their substantial dues payments support dozens of union executives with six-figure salaries and a union war chest in the millions.

However, their strength is stymied because the MNA continues to isolate their struggle even though there are currently several other MNA bargaining units that are working with expired contracts.

Under the leadership of the MNA and its Democratic Party supporters, the struggle for patient safety and worker well-being is being subjugated to the forces of corporate profit. The MNA remains the second largest lobbying group in Massachusetts, second only to the health care industry lobby, directing its attention and workers' dues money to the two big-business parties.

The growth of opposition in the working class is developing into a struggle against the corrupt trade unions. This is expressed in the strikes of miners in Alabama, graduate students in New York City, and Volvo workers in Virginia. Rank-and-file committees of teachers, autoworkers and Amazon workers are forming the initial centers of struggle in the working class, independent of unions and the Democratic Party.

The Socialist Equality Party calls on the working class, starting with the nurses of St. Vincent Hospital, to broaden the struggle against Tenet Healthcare and the for-profit health care system, which have demonstrated their contempt for human life throughout the pandemic. The SEP and WSWs call for the building of the International Workers Alliance of Rank-and-File Committees, beginning with the formation of rank-and-file committees in every workplace and

neighborhood.



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