

Tenet Healthcare begins replacing striking nurses at Saint Vincent Hospital in Massachusetts

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27 May 2021

The strike by 700 nurses at Saint Vincent Hospital in Worcester, Massachusetts, is now in its 12th week. After facing years of reduced staffing and horrific conditions during the pandemic, the nurses are demanding a contract that guarantees safe nurse-to-patient ratios—an urgent necessity to protect the health and lives of patients and nurses alike.

In an effort to break the strike, Tenet Healthcare, the Dallas-based health care giant, recently posted 102 positions for permanent replacements of striking nurses, offering thousands of dollars in signing bonuses. Last week, after an initial screening, Saint Vincent made an undisclosed number of offers to applicants for the permanent replacement positions. Should the positions be filled, striking nurses would be jobless once the strike ended.

In response, the nurses' union, the Massachusetts Nurses Association (MNA), is offering nothing but toothless rhetoric. It has waged no fight to mobilize its 23,000 members against open strikebreaking and the mass firing of the Worcester nurses, who are waging a courageous struggle of life-and-death importance to health care workers everywhere.

Nurses in the US and internationally have been calling for mass labor action since the start of the pandemic 16 months ago. Like so many other hospital systems, Saint Vincent was woefully unprepared. Not only were PPE levels insufficient, forcing nurses to stow used masks in Tupperware bins and wear shower curtains for gowns, but the cancellation of elective procedures led to mass layoffs. Already understaffed, nurses were suddenly tasked with dealing with the mass influx of seriously ill COVID-19 patients, plus additional responsibilities previously covered by unit

secretaries and personal care assistants.

Nurses who spoke with WSWS reporters described understaffing so dire that it took three hours for the pleas of an elderly patient to be answered by a passing custodian. In a typically cynical response to nurses' demands for more support, management offered to place floor pads and blankets bedside hospital beds to cushion the falls of unattended patients. Speaking to WSWS reporters in March, nurses confirmed reports of patients waiting for hours in soiled bed linens and others failing to receive needed medications. They also told of falls and preventable deaths.

Nurses at Saint Vincent Hospital had been working without a contract since the previous one expired in November 2019. They spoke of nightmarish conditions since March 2020, comparing them to a “mass shooting.”

But the union and its bargaining committee refused to call a strike throughout the entirety of 2020, dragging nurses through months of failed negotiations while conditions remained unchanged. Nurses statewide were instructed by the MNA to file safety complaints with hospital management for circumstances like those described above.

Nurses at Saint Vincent filed more than 600 such complaints before going out on strike—more than two a day. There is no doubt that the number of filed reports does not accurately reflect the full extent of the hazardous conditions faced by nurses, patients and support staff, as filling out a report is a time-consuming task for nurses already overburdened.

Tenet Healthcare has spent tens of millions of dollars on salaries, lodging and transportation for strikebreakers, as well as for surveillance cameras and

beefed-up internal security. The Worcester police have done their strikebreaking bit with added deployments to intimidate picketers.

Now, 12 weeks into the strike, with negotiations stalled, Tenet has cast its move to begin firing nurses en masse as a humanitarian effort to increase patient safety and support strikebreakers and nurses who break ranks and cross the picket line. The MNA, for its part, has cynically and dishonestly downplayed the threat of mass firings, calling it “just a ploy.”

Such back-stabbing exposes the corporatist character of the MNA and the official unions more generally. Several other MNA bargaining units across Massachusetts are in the middle of stalled contract negotiations over similarly intolerable conditions, with nurses making similar demands as their sisters and brothers at Saint Vincent for improved staffing levels. But the union executives work to block strike action and, when that proves impossible, seek to isolate the strikers and prevent them from broadening their struggle.

The MNA executives, with the arrogance that typifies the union bureaucracy, defend this treachery in the name of “democracy” and the “autonomy” of local bargaining committees. Of course, the Saint Vincent nurses are not fooled by such stupid pretexts. They know the union executives, who continue to pocket their six-figure salaries while withholding regular strike pay from the rank-and-file, are deliberately leaving them to contend with Tenet, which took in \$414 million in profits last year, on their own.

Over the past week, 840 MNA nurses at Cape Cod hospitals in Falmouth and Hyannis have held two one-day pickets to demand safe staffing levels. They are demanding that the hospitals hire charge nurses for the express purpose of assisting regular nurses who are overloaded or have complex assignments.

In April, dozens of nurses who work for Cambridge Health Alliance (CHA) and belong to an MNA bargaining unit that negotiates contracts for CHA hospitals in Somerville, Cambridge and Everett, Massachusetts, picketed in support of their demands for a better contract. In addition to retroactive pay raises, a defense of paid time off, and the recognition of support staff as union-eligible, CHA nurses are seeking to exempt shift supervisors from having their own assignments while overseeing the assignments of floor

nurses.

The union is forcing the Saint Vincent strikers to rely on an ad hoc strike fund, per diem work, their spouses’ income, if they have one, and unemployment insurance to stay afloat. Meanwhile, the MNA sits on a war chest of millions.

An MNA union official on the picket line told WSWs reporters that nurses knowingly gave up strike pay when they joined the union. This lie is used to justify siphoning nurses’ dues payments into the pockets of a layer of upper-middle class union functionaries and the state Democratic Party.

The MNA, like the UFCW, which averted a strike by its 600 support workers at Saint Vincent by forcing through a sell-out deal, is opposed to a mass movement of workers to secure safe working conditions against the dictates of for-profit health care companies and the financial aristocracy. On the contrary, its interests are at odds with those of the working class.

Nurses throughout Massachusetts, and all health care workers nationally and internationally, including the thousands of recently mobilized nursing home workers in Connecticut, must take the struggle for safe working conditions and a health system that prioritizes the needs of patients out of the hands of the corporatist trade unions.

The Socialist Equality Party and the WSWs urge the nurses at Saint Vincent Hospital to form a rank-and-file committee to broaden their struggle, uniting with nurses at the Cape Cod hospitals in Hyannis and Falmouth, the CHA hospitals in Somerville, Cambridge, and Everett, the nurses at Tenet-owned MetroWest Hospital, and nurses in other MNA bargaining units with expired contracts.



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