Nurses across the country voice their support for striking Saint Vincent nurses in Worcester, MA

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For the nurses of Saint Vincent Hospital in Worcester, Massachusetts, Monday, June 28 marks the beginning of their 17th week on strike, 112 days since they walked out in demand of safer staffing ratios.

Roughly 700 nurses, the vast majority of the Massachusetts Nurses Association (MNA) bargaining unit, remain on the picket line in the most significant healthcare workers struggle in the United States.

On Sunday, hospital management Tenet Healthcare released its latest proposal, following two others since the strike began and summoning the nurses' bargaining committee to present a counterproposal early this week. The proposal on the table includes the same staffing rubrics as the previous contract which expired in November 2019, as well as provisions that would free up resource nurses to assist other nurses when called upon. However, it reneges on a previous agreement on the elimination of flexing, a profit-maximizing staffing practice abused by the hospital industry across the country, and scuttles token improvements to pay and benefits.

In a press release from the MNA, bargaining committee co-chair Marlena Pellegrino is quoted as saying "Simply put, this is one step forward and two steps back. It is not a serious proposal that will allow nurses to provide patients with the care and dignity they deserve from our community hospital."

However, the bargaining committee will still present the proposed contract to a rank-and-file meeting on Monday before responding to Tenet on Tuesday with its counterproposal.

For rank-and file-nurses, sixteen weeks on strike represents nearly four months of forfeited pay. While this demonstrates the nurses' resolve and professional integrity, it is also an indictment of their union and the Democrats who provide it with political cover.

Later in its press release, the MNA states that the strike is receiving national attention after Tenet's announcement that they were hiring permanent replacement nurses. They cite as proof of this the so-called "solidarity rally" held Saturday, June 12, which attracted an audience of "hundreds." At least a quarter of the crowd, which in actuality numbered less than 200, was a who's who of the Democratic party, its hangers-on and the labor bureaucracy.

While feigning support for the nurses, including a call-and-response led by Massachusetts Senator Elizabeth Warren, which rung of nationalistic fervor, the main purpose of the rally was to promote the PRO Act put forward by Democrats on the House Education and Labor Committee to bolster union bureaucracies that facilitate the suppression of working-class struggles. Neither the MNA nor the AFL-CIO have called for solidarity strike action behind the Saint Vincent nurses.

Tenet is only able to put forward empty proposals because the MNA has refused to call out any of its several other bargaining units currently working on expired contracts. And despite collecting roughly a thousand dollars in yearly dues, it sees nothing wrong with nurses having to find second jobs to meet their essential needs, even as they are expected to maintain a picket.

While the MNA, which has 23,000 members, and the Massachusetts AFL-CIO which has 400,000 members, have refused to mobilize the working class, the Socialist Equality Party and the *World Socialist Web Site* are campaigning to break the isolation of the Saint Vincent nurses and build a broad and politically independent movement for safer patient ratios and a healthcare system that places social welfare above profits.

WSWS reporters collected statements from nurses in California, New York and Texas. They spoke of the rapacity of for-profit healthcare, the risk they take as healthcare professionals, the universality of healthcare workers' demands against that system, the potential power of workers in united action, and the inadequacy of labor bureaucracies to defend their interests.

In San Diego, reporters spoke with nurses Chris, Mary, Rachel, Carla and Matt.

Chris, who is originally from Massachusetts said, 'I can't believe I didn't know they have been on strike—I am from there! I know how bad it is, I actually left Massachusetts because of the conditions and ratios. It's so wrong what they are doing—trying to replace, [referring to Tenet's move to find permanent replacements for striking nurses] but they are basically firing them. I know what this is like. I used to be a travel nurse and hospitals will look to fill these positions. I support the nurses and will be telling everyone I know back home about their strike.'

Mary, a float pool nurse said she supports the nurses. "It means something if all of them are out on strike. Patients are in (an) unsafe situation. I worked in a bad facility before. We do everything we can but at the end it's your license on the line. The

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strike is not about them. It’s about their patients' safety.'

Rachel is a new nurse who welcomed the stand taken by the Saint Vincent nurses. 'Nurses should continue to stand strong together. If they stand strong together there’s nothing that they can't do. I support them because they are fighting for safe patient ratios and patients' lives are at risk.'

Carla said she had previously worked in New York where they do not have staff-to-patient ratios. “I support the nurses, of course. I came from New York to San Diego since there are no ratios in New York. Conditions were unsafe over there and everyone was miserable. (It’s) so important to fight for safe ratios.'

Matt told WSWS reports, 'I support them, they’re fighting for safer conditions.'

In New York, Shirley, who is a nurse at Bellevue Hospital in New York and a member of the New York State Nurses Association (NYSNA), said of Saint Vincent strike “I think it’s extremely important, and that they need everyone's support. And if we could, we should make it a national strike, not just at one hospital.”

Of the Saint Vincent Hospital nurses’ demands, Shirley said, “They're the same as ours, but we see things getting worse. We've complained about ratios, but we keep getting more patients. We're burnt out. During the pandemic we risked our lives, we were getting sick.”

Asked about the NYSNA’s handling of workplace issues she said, “They don't get us anything. They do update us but that doesn't mean they're actually doing anything.”

The WSWS also spoke with a nurse in central Texas. Maggie Ortiz, who chose to allow her full name in publication, has been a nurse for 21 years and currently works as a critical care float pool nurse in central Texas. She is also an activist, helping nurses walk through litigation and defend themselves when under investigation and founded an organization called Advocates for Nurses, in order to better help nurses defend their licenses.

In discussing the struggle for healthcare workers, she described conditions all too familiar to nurses everywhere: sicker patients on regular nursing floors in need of procedures beyond the training level of floor nurses already overburdened by heavy patient loads.

Barely more than a year into the pandemic, she describes the conditions in which healthcare workers had to survive, battle an unknown virus, and provide what care they could, and the Orwellian language broadcast throughout the world in the midst of a public health crisis of criminal making.

“I ended up taking time off during the pandemic. I have preexisting conditions and I wasn't able to get a mask at work. I was getting N95's from my ex, who was getting five a week at his job while we nurses got nothing. I remember sobbing. I have dedicated my life to this. I have a masters degree. This is a global pandemic. And you're telling me I can't get a mask? It's airborne. You want to use this ‘enhanced droplet’ buzzword which I've never heard of to get away with not giving us the right PPE.”

To the nurses of Saint Vincent, Ortiz made a powerful statement:

“I applaud and support the Saint Vincent nurses. If they aren't safe, it is their duty to speak out against it. It's a violation of the Board of Nursing. Safe patient care is what we want for everyone. I applaud them. It's hard. The retaliation is real. I fear for them afterward. I wish I could stand there with them. Thank you for protecting your community, for protecting all of us. Thank you for standing up. I hope it is an example for other nurses out there.”

When asked about the role of the MNA and the fact that Tenet health care is replacing the striking nurses, Maggie stated, “All of these [health care] organizations made billions during the pandemic. It's disgusting that they are replacing nurses. Who do you think they will replace them with? There's a global nurse shortage.”

“The MNA should be calling all their members out. What about reaching out to the [American] Hospital Association? Why haven't they been involved? No [strike] pay? We are talking about months of no pay. I am so tired of the abuses against nurses.”

“The average age of a nurse is 50 [years of age] and there aren't enough nurses going into the profession. Now they are fleeing the profession because they weren’t taken care of during the pandemic. We were left out to dry. You don’t ask firefighters to go into fires without fire-retardant gear. 2020 was supposed to be the year of the nurse, and they didn't give us PPE. Call yourself Republican or Democrat, I don't give a sh*t.”

The clear support among nurses and other workers for the Saint Vincent strike must be mobilized if their critical demands are to be met. According to the MNA press release, there will be a meeting of nurses with members of the bargaining committee Monday to prepare a counterproposal to present to Tenet management in person on Tuesday. At a previous meeting, the MNA gave nurses a preview of an offer made in May via a Zoom call where nurses lashed out at the insulting offer, shouting expletives and “No, no!” From what has been reported, it appears the current offer is, if anything, worse than the previous one. To break the isolation of the strike, nurses should initiate a rank-and-file committee to reach out directly to health care workers across the US and internationally.

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