Union attempts to betray striking Massachusetts nurses six months into their struggle

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Twenty-five weeks into their strike, with nearly half a year of lost paychecks, the 700 nurses of St. Vincent Hospital in Worcester, Massachusetts are in critical danger of being sold out by their union, the Massachusetts Nurses Association (MNA). After five days of secret negotiations with executives of the hospital, which is owned by multibillion-dollar health conglomerate Tenet Healthcare (THC) of Dallas, Texas, the MNA bargaining committee signed off on a tentative proposal that does not meet the nurses' central demand: guaranteed safe staffing.

What prevented the bargaining committee from carrying through with this betrayal and ending the strike is Tenet's refusal to remove the scab replacements it hired during the strike. Scrambling to salvage a shred of legitimacy, the MNA responded to the refusal saying it was "a callous effort to retaliate against the nurses for standing up for their patients and their community." There should not, however, be any question as to the bad faith of the MNA, which was prepared to accept the same deal on August 27 that union officials previously denounced.

A week after the secret negotiations, held under the auspices of a federal mediator, bargaining committee co-chair and MNA Vice President Marie Ritacco claimed, as reported by *Spectrum News*, "We got it. .. conditions will be exponentially safer in that building. .. we achieved the majority of what we needed to get."

However, on August 5, in response to the same "last, best and final offer," the *Worcester Telegram* reported bargaining committee co-chair Marlena Pellegrino as saying, "This [proposal] in no way represents a good-faith effort to find a resolution to this crisis and just demonstrates Tenet's callous disregard for their nurses, and more importantly, for our patients and our community, whose future health and safety are at the center of this dispute."

The MNA, with the backing of the AFL-CIO and Democratic Party, is working with a federal mediator to get a last-ditch deal to end the strike before supplemental unemployment runs out and striking nurses lose their COBRA health benefits.

For the MNA and AFL-CIO, it is preferable to allow the strike to collapse—after spending months trying to starve nurses into submission with no strike pay—than to see the strike expand to other health care facilities and broader sectors of the economy.

As the MNA was engaged in secret talks to end the St. Vincent strike, the National Union of Healthcare Workers in southern California negotiated contracts for 830 workers at three Tenet hospitals in the state to prevent a strike. Workers authorized a walkout last month over staffing, pay, benefits and pandemic-related safeguards.

Throughout the St. Vincent strike, the MNA and other unions have worked to ensure the nurses remain isolated and prevent a broader struggle among health care workers across the country and particularly at other Tenet facilities, who face the same issues.

That the strike has lasted this long, despite its isolation and starvation, is a testament to the dogged determination of nurses. After enduring conditions throughout the ongoing COVID-19 pandemic likened to those of a battlefield, and after years of being stretched beyond their limits, they fully committed to improving their working conditions, establishing secure safer care and better outcomes for their patients and protecting their own mental health and professional integrity. Even after nearly five months on strike, on August 2, at a meeting open to all union members, nurses voiced strong opposition to the same proposal to which union bureaucrats have now agreed.

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When the strike began, about 100 nurses crossed the picket line, approximating the number of nurses who had not voted to authorize the strike, which was approved by 89 percent. As the strike has stretched into its fifth month, St. Vincent and Tenet claim that around 200 nurses have crossed.

When the resolve of nurses became apparent to Tenet, after nurses roundly rejected the first "insulting" proposal that emerged from the executive wing, Tenet announced it would begin hiring permanent replacements.

MNA and Massachusetts AFL-CIO bureaucrats shrugged their shoulders at these strikebreaking threats. They referred to it as "a ploy" and remained "unmoved by the announcement, having fully expected Tenet to move in [such a] direction, and [saw] it as yet another desperate attempt to avoid negotiating in good faith…".

Since that time, this "desperate attempt" has resulted in a steadily growing number of permanent replacement scabs. By August 9, 100 permanent replacement nurses had been hired, after the initial postings in May. As of August 27, the day Ritacco declared, "We got it," 156 permanent replacement scabs had been hired by Tenet after hundreds of job postings offering sign-on bonuses of up to $10,000, regardless of the inexperience of applicants.

The growing existential threat to the striking nurses' jobs is a direct result of the willful negligence of the MNA and AFL-CIO. Even as the union cites the effective firings of hundreds of its members as the reason it cannot agree to end the strike, MNA officials announced there was willingness to have their members work side-by-side with scab nurses. Bargaining committee co-chair Marie Ritacco told WBUR Boston on August 25 that, due to the loss of experienced nurses preceding the strike—owing to the miserable conditions they were working under when the pandemic was unleashed—"there is certainly room for these nurses who were hired during our strike."

As for Tenet, it demands strikers "accept the reality that the hospital will not involuntarily displace its permanent replacement nurses," on the preposterous basis that it "will not perpetuate. .. injustice further by forcibly removing the nurses who stepped up to care for this community."

The intent of THC all along has been to break the strike and protect its corporate profits. On March 30, the day celebrated by the St. Vincent Hospital nurses as the 21st anniversary of their first strike, THC announced a 2020 profit of $414 million.

Indeed, the pandemic has been a boon to Tenet. While the hospital kept personal protective equipment under lock and key, forcing St. Vincent nurses to wear shower curtains and reuse face masks, it worked to "maintain a strong cash position" for its stockholders. It was helped in doing so with the aid of the bipartisan CARES Act, which provided the corporate giant at least $2.8 billion from the pockets of ordinary Americans. Before the pandemic struck, the stock price for THC was $21.76. By the close of stock exchanges on Friday, it had nearly quadrupled to $74.99 per share, an all-time high and year-to-date increase of 92.38 percent.

While one MNA bureaucrat moralizes over what is an irreconcilable conflict between class interests, stating "it is incumbent upon Tenet that they answer to the community," it should be clear to workers that, as a UMass-Boston labor expert told WBUR in an interview, THC is "operating on a different logic." That logic is the capitalist logic of the perpetual accumulation of wealth off the backs of the working class.

The nurses of St. Vincent Hospital should learn the lessons of this struggle. The ongoing isolation of their strike is no mistake on the part of the MNA and AFL-CIO. The unions long ago abandoned the defense of the workers and have spent decades securing pro-company agreements, while channeling workers' political opposition into the Democratic party.

Every week that goes by and the strike remains suppressed by the unions, dozens of nurses, some of whom have served in their positions for decades, are effectively fired from their previous jobs. It is incumbent for health care workers to break the isolation of the St. Vincent strike. If Tenet is successful, it will use the defeat of the strike as a precedent to accelerate its assault on thousands of nurses and health care workers. Such a struggle requires building new organizations of struggle: rank-and-file committees to unify St. Vincent workers with health care workers across the US and internationally.

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