

# West Coast hospitals severely stressed as winter surge begins

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With the highly transmissible Omicron variant spreading quickly around the world, states along the West Coast are already experiencing major surges from the Delta variant, and hospitals are struggling to keep up with the influx of patients due to the rapid spread of the virus.

California, with a population of some 40 million, has reported 66 COVID-19 deaths in the past 24 hours, and medical professionals are increasingly concerned that as the winter surge begins, major problems with short staffing and low hospital bed capacity have been unresolved. The state's hospitalizations have increased by 15 percent in the past two weeks.

California Democratic Governor Gavin Newsom reinstated a statewide mask mandate on Tuesday but announced Wednesday that the city of San Francisco would be exempt, supposedly due to its vaccination rate of 86 percent. The exception was framed as a reward, but in reality the population is being put at greater risk. With only two doses, which accounts for the overwhelming majority of the "fully vaccinated" individuals in the United States, Omicron has been shown to easily evade vaccine-induced immunity.

"Our hospitals are having to re-look at their surge plans with the staffing shortages that they have been experiencing to brace themselves again for a very, very busy winter," Dr. Regina Chinsio-Kwong told the *Lookout Santa Cruz* publication. Los Angeles County Public Health Director Barbara Ferrer told the publication, "we worry about a strain on the hospital care system. We have a really noted ongoing staffing shortage issue at many of our hospitals."

It is the same story across the West Coast. Oregon is also reporting growing numbers, with 49 deaths yesterday. ICU beds are also becoming increasingly scarce, and the current statewide average for ICU bed

availability is 9 percent with non-ICU bed availability at only 7 percent. These numbers do not take into account the availability, or the lack, of appropriate staff. The fact that the first three cases of Omicron were only detected in the state on Monday also suggests a grave deficiency in contact tracing and genome sequencing that typifies the pandemic response across the US as a whole.

Washington state is experiencing over 1,000 new cases each day and reported 27 deaths yesterday. Omicron is reportedly spreading in the state, with cases of the variant doubling each day. Already, several hospitals report running at 120 percent capacity or more. The Washington State Nurses Association reports that workers are demanding lower nurse-to-patient ratios. ICU nurse Julia Barcott told KIRO7 News that coworkers are walking off the job, "We are simply worn down. ...Too many of us have started to wonder why we are in this profession." Staffing issues are pushing hospitals to begin halting non-emergency services. Providence Regional Medical Center in Everett has delayed over 40 non-emergency surgeries for cancer and heart disease patients.

Hawaii is also showing a slow uptick in cases, which recently reached over 200 in one day for the first time since November. The total death count over the course of the pandemic in the island state is 1,055. The increased transmissibility of the Omicron variant is turning hospitals into major vectors of transmission. As of Tuesday at least seven health care workers have possibly been infected with the Omicron variant at Queen's Medical Center in Honolulu.

According to the World Health Organization, between the start of the pandemic up to May 2021, an estimated 115,000 health care workers had died from the COVID-19 virus. This is likely a serious

undercount and new figures are desperately needed.

The situation facing the health care systems on the West Coast exposes the criminality of the Alliance of Health Care Unions, which rammed through a contract at Kaiser Permanente earlier this month which contains no commitments from management for safe staffing, wage increases below inflation and a commitment by the unions working with management to find additional cost savings each year of the four-year deal. In exchange for this contract, which places countless lives at risk in both the short and long run as hospitals are on the verge of once again being overwhelmed, the unions will receive roughly \$50 million in corporate cash through the Labor Management Partnership.

The contract was announced only days before a planned strike by 32,000 nurses and health care workers in Southern California which had been authorized by a 96 percent strike vote. The strike was immediately called off.

The voting procedure for the contract used a divide-and-conquer tactic, which forced workers in each union in the Alliance to vote separately on the same agreement, potentially isolating workers at one union if others voted to ratify. In fact, this is exactly what happened. All the unions voted to accept the agreement except for a group of 1,600 pharmacists in Southern California.

In spite of this betrayal, opposition remains high among nurses, who are determined to continue their fight for safe staffing ratios. This is why, in the lead-up to the vote, workers formed the Kaiser Workers Rank-and-File Committee. Nurses and other health care workers are determined not to relive the horrors of last year's winter surge.

The fight at Kaiser is part of a global wave of opposition by health care workers. On Wednesday, health care workers in Turkey took part in a one-day nationwide strike. Similar job actions have been taking place by health care workers in Sri Lanka, Canada and other countries. Other strikes have also taken place within the United States, including an ongoing strike by 700 Kaiser stationary engineers in Northern California which the unions are attempting to isolate.

The continuing spread of the virus, in spite of the fact that the experience in countries such as China proves that the virus can be eliminated, is the terrible outcome of the placing of profits and the markets before human

life by the capitalist ruling class in almost every country. The fight for policies which can finally bring an end to the pandemic must therefore be a global fight by the working class, to put an end to a social system that subordinates all social decisions to the interests of the extremely wealthy.



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