

California nurses press for statewide action: “Everyone is stressed out. Everything is more expensive. It can’t continue like this.”

Our reporters
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Nurses across the state of California have gone on strike or voted to walk out over inadequate pay, exhausting work schedules and unsafe conditions.

On Monday, 5,000 nurses at Stanford Health Care and Lucille Packard Children’s Hospital struck against poor pay and understaffing after more than 90 percent of them voted to strike on April 8. More than 8,000 nurses at Sutter Health Care in Northern California launched a one-day strike against unsafe staffing levels, improper COVID-19 protocols and wages that do not keep up with inflation.

In the Los Angeles area, hundreds of nurses at Cedars-Sinai Hospital held a protest last week after the latter was found guilty of multiple safety violations during the course of the COVID-19 pandemic. The protest followed an April 11 strike authorization vote in which the majority of nurses voted in favor.

Nurses at the nearby University of California Los Angeles Medical Center are also holding a rally and protest this coming Wednesday for stronger workplace protections against COVID-19, an action that will be mirrored by their colleagues at the University of California San Francisco Medical Center.

In Central and Northern California 19,000 Kaiser Permanente nurses have a contract expiration on August 31, and the agreement for 14,600 University of California nurses ends on October. The movement of nurses in the state comes on top of health care walkouts and strike votes in Oregon, Massachusetts, New York, Washington D.C., Alabama and across the country. This is part of a global movement, including recent strikes in Australia, Sri Lanka, Germany, Italy and other countries.

The *World Socialist Web Site* spoke to several nurses throughout the Northern and Southern California regions who described their conditions and expressed a growing sentiment for statewide action by nurses.

One Cedars-Sinai worker told the WWS: “Two dollars an hour [the proposed increase] is not nearly enough. They

want to sell us the same thing they did in 2019. But this isn’t 2019! Inflation today is crazy! I used to spend about \$100 whenever I went shopping, now it’s closer to \$120. I’m buying cheaper food to make things work. I’m glad nurses are striking in Northern California too, I know it’s no better there. We need to all go out together!

“I’ve also found out that Cedars-Sinai, just like Stanford Health Care, plans to cut health care benefits for workers while they are on strike.”

Frank, a nurse at California Pacific Medical Center (CPMC) in San Francisco, explained, “Nurses are working full shifts, 8 to 12 hours, without relief. There are also issues with PPE. Nurses are being asked to use N95s they are not fitted for pretty much daily.”

Asked what it is like to live in San Francisco, the second most expensive city in the US, on a nurse’s income, Frank said, “You can either do it with roommates or multiple incomes. If you have a family, that’s really tough. The idea of homeownership has long since sailed.”

Frank expressed sympathy for Vanderbilt nurse RaDonda Vaught, who was criminally convicted for accidentally administering the wrong medication to a patient in Tennessee. “RaDonda Vaught definitely made errors. There are routine checks to catch medication errors, but that doesn’t change the fact that there are systematic flaws that pressured her to skip those checks. Accidents like this can happen when you’re in transition.”

Another transplant nurse highlighted the precarious conditions she has faced at Sutter. “I worked at Mission Bernal during the first lockdowns. They closed the whole floor because we did elective surgeries. I had six months of layoff where we didn’t know whether we would have regular work.

“I picked up shifts when I could. I was put on the COVID floor. It was just filthy. I felt it was unsafe for the patients and for us. I eventually was able to transfer to this unit. Thankfully I didn’t get COVID. I was very lucky.

“When COVID-19 began, Sutter didn’t provide PPE. They said surgical masks were okay. Nurses had to buy their own PPE. Sutter also didn’t provide testing.”

Nurses at Mills-Peninsula Medical Center (MPMC) in Burlingame, California, also spoke to the *World Socialist Web Site*.

Ann echoed many of the concerns expressed by other fellow nurses surrounding COVID-19 safety and PPE. “There have been plenty of times when we don’t have enough PPE. Just in January we ran out of PPE. The hospital was holding onto it but limiting it to us. We were wearing the same N95 all shift. We don’t always have a shortage but even [that] sometimes is just unacceptable.”

Melissa, a nurse at MPMC, spoke on the impact of inflation. “Everyone is more stressed out. Everything is just more expensive, everything costs more. It can’t continue like this.”

Nurses are at a crossroads. If their struggles remain isolated at individual hospitals, the health care chains will continue to impose poor safety protocols and wage and benefit decreases. The unions, including the Service Employees International Union-United Healthcare Workers West (SEIU-UWH), the California Nurses Association, and Committee for Recognition of Nursing Achievement (CRONA) at Stanford and Packard, are deeply tied to management and the state’s Democratic Party and are opposed to a unified struggle to beat back the giant health care monopolies.

But this is what is necessary. Nurses must form their own fighting organizations, independent of the corporatist unions and the two parties of big business. These rank-and-file committees must form lines of communication between hospital workers and other sections of the working class throughout California and internationally, and prepare statewide strike action to demand adequate staffing, a sharp increase in pay and protections against the continued spread of the deadly pandemic.

In the United States, the coronavirus has taken an enormous toll on health care workers with no end in sight. More than 3,600 health care workers have perished from COVID-19 during the first year of the pandemic alone, while the World Health Organization estimated that 115,000 health care workers have died worldwide during the first 17 months.

In spite of these figures and the initial cheerleading of nurses as health care “heroes” in the first months of the pandemic, the hospital chains have made clear that nothing will stop them from sacrificing nurses’ lives and livelihoods at the altar of profit.

These conditions have led to an exodus of hundreds of thousands of nurses from the profession. According to a

recently released McKinsey report, the share of nurses nationwide who expressed a desire to leave their jobs in the coming year rose from 22 percent in February 2021 to 32 percent in February 2022, numbers which will only increase as coronavirus infections and hospitalizations rise once again.

Los Angeles County on Friday reported a 52 percent increase in coronavirus cases over the previous week. This increase, though drastic, is still a massive undercount considering the absence of mass testing and reporting. The latest upsurge arrives three weeks after the county lifted all mask mandates for indoor businesses and outdoor events.

San Francisco County now has the highest coronavirus infection rate in California at 18 cases per 100,000, also a massive undercount. At a recent prom dance at San Mateo High School in San Mateo, California, 100 students out of 600 attending tested positive for the virus.

In spite of these developments which will inevitably result in a surge of preventable deaths, the state of California continues to remove all measures to contain the virus or even to report on cases. Five weeks ago, California ended its mask mandate for indoor businesses and schools. This week, the state closed its central COVID-19 testing laboratory.

Furthermore, despite findings released by researchers at University of San Francisco and the California Department of Public Health this week that COVID-19 vaccinations prevented 1.5 million infections statewide and avoided 20,000 deaths, the state is delaying implementation of vaccine mandates for K-12 school children until July 2023.

These deadly conditions, combined with record high living expenses and exhausting working conditions, are driving nurses and other sections of the working class into the greatest movement of opposition in decades.



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