

St. Vincent nurses in Portland, Oregon prepare to strike after rejecting union-backed proposal

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Sixteen hundred nurses at Providence St. Vincent Medical Center in Portland, Oregon voted by a margin of more than 4 to 1 last week to reject a contract proposal recommended by the Oregon Nurses Association (ONA). Nurses are ready to wage a serious fight for substantial wage increases, improved benefits and safe staffing. In May, the nurses at three Providence hospitals cast near-unanimous votes to authorize strike action.

After initially saying its bargaining committee would return to the table without the union making any preparations to strike, on Sunday the ONA announced a strike date of July 11. The strike would include 2,000 nurses at Providence's St. Vincent, Willamette Falls and Milwaukie hospitals.

Nurses at St. Vincent have been working without a contract since December 31. Providence has been demanding they accept across-the-board concessions, including no improvements in staffing, meager increases in paid time off, raises that are well below the rate of inflation and no retroactive pay increases for months of dragged out negotiations. The tentative agreement presented to the nurses by the ONA conceded to all of management's demands.

That the contract was voted down so decisively is due to the independent mobilization of nurses themselves and their campaign for a "no" vote. As early as February, nurses were expressing their outrage over Providence's profiteering. As one nurse pointed out on social media: "Providence Oregon, the largest health company in the state and a non-profit, might I add, raked in a BILLION dollars in profits over the last five years."

The anger of nurses forced the ONA to call a strike authorization vote in early May. The union, however, ignored the strike mandate from its members and instead of

calling a strike, resumed bargaining with Providence under the auspices of a federal mediator. The product of these backroom maneuvers was the rotten deal, which nurses shot down.

Frightened by the growing rank-and-file revolt, the ONA announced a strike date to mollify anger and opposition. Nurses must be on guard, however, against any effort by the ONA to call off the strike or extend the deadline. Even if the ONA feels compelled to call a strike, it will still be up to rank-and-file workers to prevent their struggle from being isolated and defeated.

Winning this struggle is absolutely necessary and possible. But there can be no victory aside from the independent mobilization of Providence nurses and a turn outward to masses of health care workers in Oregon, throughout the US and beyond who face the same conditions and would readily support a real fight. The *World Socialist Web Site* has been campaigning for the development of a Providence Nurses Rank-and-File Committee, which would allow nurses to take the direction of their struggle into their own hands, assert their demands and appeal for broader working-class support.

The St. Vincent nurses are joining an international working class movement. The pandemic policies of capitalist governments, which have led to the deaths of over 20 million people globally and over 1 million deaths in the US, have created a catastrophic situation for nurses. Short staffing, excruciatingly long hours and witnessing mass death have traumatized health care workers around the world. The crisis has reached a point where 90 percent of US nurses are considering leaving the profession, according to a March 24 report in *Healthcare IT News*. The ruling elite and their trade union accomplices have done nothing to significantly assist nurses and health care workers.

After voting no on the contract, a St. Vincent nurse reached out to the *World Socialist Web Site* to describe the intolerable conditions nurses confront. "St. Vincent is the sixth hospital I've worked at," he said, adding that "large

corporate hospitals treat health care workers badly.” At St. Vincent, the nurse said, “wages are one of the biggest issues. We are paid less than nurses at other hospitals.”

In addition, he said, “We pretty much don’t have health care,” since “nurses who have health insurance in the network are paying out of pocket until costs are over three thousand dollars.” Having recently become a parent, the nurse said he decided to pay for private insurance “because private insurance is cheaper than what Providence is offering.” ONA officials, he said, explicitly told the nurses that “Providence told us they would not talk about health care until 2023.”

“Staffing levels are [also] an ongoing issue,” he added. “We have a buddy system. If your coworker is on a lunch break, then you take on their patients and have 10 patients instead of five.” Lack of staff has exhausted nurses and forced them to work exceedingly long and stressful hours, all in the midst of an ongoing pandemic. The mass increase of COVID-19 patients, and short staffing, has reached an unsustainable level, he said. “The charge nurse is not supposed to take on patients, but when our unit is maxed out, then the charge nurse has had to take on patients.”

The nurse also described some of the antidemocratic maneuvers used by the ONA to push through a pro-management contract. “Nurses get the latest news about how bargaining is going from flyers that a union representative occasionally hands out. Anxious nurses swarm the representative and try to ask him questions.”

When an ONA union representative was asked by a nurse why they should vote “yes” on the tentative agreement announced June 4, the representative bluntly admitted, “this is just how it goes with the union.” The only input the rank and file have been allowed to give on the contract talks has been through surveys “we’ve gotten throughout the [negotiating] process.”

“My co-workers know the union is dragging out this process to go on strike,” he said, adding that his fellow nurses in California have faced the same sabotage. “The Stanford nurses strike only lasted a week because the union ended it.”

Nevertheless, Portland nurses are determined to fight and join up with their fellow health care workers across the US and internationally. This week the contracts expire for 5,500 nurses at Michigan Medicine and another 7,200 at Kaleida hospitals in western New York. Tens of thousands of other health care workers in California, Minnesota, New York and other states face contract battles in the coming months.

Providence is one of the many “pandemic profiteers” that have emerged during the past two-and-a-half years. Providence is part of the “non-profit” Catholic Health system, which manages eight hospitals across the state of

Oregon. Catholic Health sat on a nearly \$12 billion cash reserve in 2020 and still received \$509 million in pandemic bailout money, according to a report by Community Catalyst. Rod Hochman, Providence’s chief executive, was paid more than \$10 million in 2018 in spite of the hospital chain’s “non-profit” status. There is more than enough money to meet St. Vincent workers’ demands and more.

The most dangerous thing now is for nurses to have a wait-and-see approach. The rejection of this contract will not force the ONA to come up with a better deal. On the contrary, behind the scenes the union, management and federal mediator are no doubt discussing how to beat back the resistance of nurses and impose another sellout deal.

To challenge hospital management and the immense corporate-financial interests behind them, Providence nurses must develop their own rank-and-file controlled organization to conduct the next phase of their struggle.

This committee should outline the demands that nurses need not what the hospital executives claim they can afford. This includes an inflation-busting 20 percent wage increase, retroactive pay, fully paid health care benefits, and enforceable measures to increase staffing and end unbearable workloads. At the same time, nurses must demand the end of backroom talks, the live-streaming of all contract talks and democratic oversight of all future votes.

Nurses should unite with all health care workers across the Providence system, along with Kaiser, Oregon Health and Sciences University (OHSU) and other hospitals throughout the region and United States. A Providence Nurses Rank-and-File Committee would become part of the growing national and international network of committees, led by the International Workers Alliance of Rank-and-File Committees, to coordinate workers’ struggles across national borders. As an immediate step, Providence nurses can join forces with health care workers at Long Beach Memorial Hospital in California, who are set to reject a similar union sellout agreement, and build toward a common strike.

The WSWS will help nurses in every way possible to establish and organize these committees. Use the form below to tell us what you think of the contract, and what workers should be fighting for. We will protect your anonymity.



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