

# Two months after strike, 8,000 Sutter nurses in Northern California nurses remain on the job without a contract

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June 18 marked two months since roughly 8,000 nurses in Northern California participated in a one-day strike at 15 Sutter Health facilities. Nurses were locked out for an additional five days after the strike by hospital administrators and have now been on the job without a contract for an entire year since the previous one expired in June 2021.

The California Nurses Association (CNA) was compelled to call the strike after a nearly unanimous strike authorization vote in March. The hospital's contract proposal at that time included a pitiful 2 percent annual wage increase, far below the current rate of inflation of nearly 9 percent and did not address nurses' concerns over inadequate staffing and personal protective equipment (PPE) supplies.

Despite mass opposition from nurses, the CNA opted to limit the action to a one-day strike. Nurses have told the WSWs that since the strike, the union has "only provided vague information" about negotiations, largely leaving nurses in the dark about specific proposals from either hospital administrators or the CNA negotiating team.

The CNA's actions are a well-known tactic used by unions to force through a sellout contract by keeping workers in the dark and isolated before suddenly announcing the sellout contract and rapidly pushing it through. As part of this strategy, the unions often attempt to dissipate anger by holding stunts, such as one-day strikes and protests.

Sara, a Sutter nurse at one of the Bay Area hospitals, said about the negotiations: "The union only ever provides vague information. They tell us that every time they sit down for negotiations the details about the proposed contract changes, and that is why they can't

tell us anything.

"If they aren't telling us the details, we don't know what they are giving up. You would imagine that they could tell us what they are thinking of giving up, and if there was a big uproar from the membership, they would know what is important to us. Right now, they are not even hearing what we want.

"I've been told that the union and hospital are not even sitting down together. They each meet with the [federal] mediator separately, and they are doing the contracts for each hospital first. So, the common table negotiations [for the contract impacting all the hospitals] have not even started yet.

"Sutter is trying to change the pay scales in a way that benefits the newer people and punishes those that have been at the hospital longer.

"My coworker said that we will have to have an indefinite strike because the hospital is being unreasonable, but you never know. During the last strike, I asked about strike pay and was told that we would not get any. If we have an indefinite strike, my guess is that we will have to look after each other."

The union's LM-2 report for 2021 shows that the union's net assets grew by \$44 million last year, while members received zero dollars in strike pay. During this time the union collected \$136 million in worker dues.

Asked about working under the extended contract, Sara added, "Nothing really changed. My unit is short staffed, and this is the state of nursing now. I hear rumors that Sutter pays less than a lot of other hospitals in the area, and that probably makes it hard to hire new people."

Nurses are demanding that the hospital address

shrinking wages and chronic understaffing. Understaffing has forced nurses to work extended hours at a faster pace. When this has led to errors, hospitals have hidden behind the scapegoated nurse, as evidenced by the RaDonda Vaught case. Work under these conditions is taking its toll, with many workers opting to leave the field, further fueling staffing issues.

Sara concluded: “Sutter made massive profits during the height of the pandemic but now they claim they have no money. It is a very unfair situation for nurses. If we go on strike, the media is skewed and claims we are not looking after our patients. But we need to look after ourselves and our families. We are demanding safety for nurses and our patients.”

Sutter Health has failed to follow state guidelines on PPE stockpiling. Nurses are demanding adherence to the law and the implementation of contact tracing. A January survey found that 58 percent of nurses were unable to access PPE when needed. Lack of contact tracing has contributed to increased risk of COVID. A 2020 Centers for Disease Control and Prevention analysis showed that one out of 46 patients were either nurses or nursing assistants. Of those, 27 percent were admitted to the ICU and 4 percent died.

The experience with the CNA at Sutter is in line with its record throughout the state. The union kept Sutter nurses on the job without a contract even as 5,000 Stanford nurses walked off the job in April. Throughout the strike, the CNA and Committee for Recognition of Nursing Achievement (CRONA)—the union at Stanford—made no attempt to unify the struggle of health care workers. After one week on strike, CRONA abruptly announced a contract had been reached and rapidly held a vote.

Workers at Palomar Health in San Diego North County have been kept on the job since their contract expiration in March. Last Wednesday, nurses in Newark, New Jersey were made to vote on a new contract without access to the full language, based solely on a poorly made PowerPoint presentation. That same day, about 350 nurses at Seton Medical Center in Daly City went on a two-day strike after being on the job without a contract since December. On May 9, 2,000 health care workers struck at Cedars-Sinai Medical Center in Los Angeles. More contracts are set to expire in the coming months. On June 30, a contract for 6,000 Michigan Medicine nurses will expire.

Sutter nurses have powerful allies at hospitals around the country and the US, but to unite requires that they organize themselves outside of the union bureaucracy. Earlier this year, nurses across the country founded the Steering Committee of Rank-and-File Committees to “connect the struggle of nurses with the struggles of other sections of the working class, in the US and throughout the world.” Sutter nurses should found their own committee and affiliate with this growing national network.

To find out more about how to found a committee, fill out the form below:



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