

“Any self-respecting nurse would run screaming from HCA”—Pennsylvania nurse describes her experience working for Healthcare Corporation of America

Nurse K
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The World Socialist Web Site received a letter from a nurse named K. who wished to remain anonymous for fear of retaliation by her employer. Her story is highly disturbing and indicative of the physically, mentally and emotionally draining environment which nurses and health care workers have been forced to confront in profitable hospital chains.

Her letter primarily refers to her work as a travel nurse for HCA Healthcare. HCA is the world’s largest private health care corporation and has approximately 185 hospitals and over 2,000 health care facilities in more than 21 states in the United States and the United Kingdom. As of April this year, the private corporation’s revenue was upwards of \$14.9 billion. In addition to hospitals, HCA has surgery centers, freestanding ERs, urgent care centers, diagnostic and imaging centers, and walk-in clinics and physician clinics throughout the United States.

As a profitable Fortune 500 company, HCA is highly politically connected. In particular, HCA’s association with the Republican Party is noteworthy. HCA founder Thomas Frist’s brother, William Harrison Frist, is a physician, businessman and politician. He served as a Republican Senator from Tennessee from 1995 to 2007. HCA’s former CEO Rick Scott is a junior Republican US Senator from Florida since 2019 and the 45th governor of Florida from 2011-2019. In the UK, Labour Party leader Keir Starmer has received donations from HCA shareholders.

The following letter has been edited slightly for clarity.

I was a traveling nurse as well as a staff registered nurse, including as a trauma ER nurse for mostly Level-1 facilities. Staffing issues, which were a direct result of management decisions to do more and more with less and less, is what enticed me to work as a traveling nurse.

As a traveler, we were forced to manage 8-to-1 staffing ratios at WellSpan in York, Pennsylvania, while staff nurses hid out in the trauma bays. Acuity was thrown out the window if a bed was open. I would receive three or four ESI (Emergency Severity Index, a five-level triage algorithm which rates a patient’s case from 1, or most severe, to 5, least severe, based on the nature of their emergency) Level 1 acuity. In “principle,” this would require a 1-to-1 ratio and possibly a second nurse to assist. I would routinely have no certified nursing assistant coverage, as they all were pulled to do 2-to-1 ratio “sitter duty.”

HCA, which owns HealthTrust, which runs WellSpan—relied on *unqualified volunteers* to “sit” with psychotic/homicidal/suicidal patients from as young as six years old to geriatric patients. Most had serious medical issues but were “medically cleared” almost immediately upon admission so that the ER residents/attendants were not responsible for their care.

There was a chronic patient, profoundly autistic, a victim of sexual abuse in his mid-teens. He was so acutely violent that no amount of drugs (extremely powerful: ketamine, thorazine, ativan, geodon) could control him. He was routinely dumped at the WellSpan, York ER by his parents, who could not control his violence. The patient was locked in a room with no

windows for months at a time. His food consisted of “what he would eat,” such as Oreos, Doritos and candy, and no psychiatric help was given.

When the patient was dumped at WellSpan, the staff nurses would rally around each other to prevent any of them from having to care for this ultra-violent individual, who would ram his head into plexiglass windows.

WellSpan would simply shut him into “seclusion” with no windows, padding, bedding or any psychiatric care. We would simply “dose him” with higher and higher amounts of thorazine and other antipsychotics until he would finally sleep for 30 minutes.

Each of the travelers in turn refused to care for the patient for more than a 4-hour block of time, as he routinely punched/kicked/bit/used items in the room as weapons against pretty much *all* of the staff and support staff. Security personnel were assaulted to the point many received injuries that required emergency care. The management would allow the hold on this patient, as his insurance was provided by the state.

When WellSpan was “nominated” by an unknown entity for an award regarding their “excellence” in psychiatric care, this patient had been tortured, secluded, deprived of any type of psychiatric care or stimulation and was declining rapidly over the 44 days of his confinement.

The Governor of Pennsylvania (note: the current Governor of Pennsylvania is Democrat Tom Wolf) was to be in attendance for this awards ceremony. This ceremony was to be held *in the parking lot* instead of at the end of a tour of the facility, so that the Governor could have “plausible deniability” of the actual conditions within the hospital. This would also prevent him from having any type of interaction with the staff/travelers/support staff.

This young patient was handcuffed to a gurney and escorted to one of the local psychiatric hospitals where an “entire unit” was cleared of all items in order for this individual to simply be housed for the time being—until the Governor’s visit was completed.

WellSpan is owned by HCA, which is the same for-profit company that owns places like Lewis Gale in Blacksburg, Virginia, and others in the Richmond area. Travelers know never to take an assignment with any HCA facility due to the dangerous staffing ratios, lack of supplies, violent patients and the hospital’s

notorious practice of not paying travelers for their work.

This isn’t referring simply to just “no PTO” [paid time off]. HCA has failed to compensate on traveler pay for years. This usually happens when a traveler leaves a contract due to a high risk of losing their license and dangerous staffing issues or when a traveler refuses assignments that are dangerous.

HCA is *well known* for their dangerous staffing decisions. Lewis Gale in Blacksburg employed *two* RNs in their 25-bed ER, “filling the holes” with emergency medical technicians and CNAs. The “senior” charge nurse had 6 months of experience.

The ratio in the emergency room was 12-to-1. I should know; I spent an entire shift shadowing after Lewis Gale offered me an obscene amount of money to work at this ER. Of course, I was required to sign a non-disclosure agreement before employment. I saw patients in hypertensive crisis, almost stroking, lying in beds with alarms blaring and no one to help them.

I saw psychiatric patients wandering the hallways, urinating on themselves, with feces running down their legs tracking this filth all through the ER. Not one person stood up to direct the patient back to their room because there was *no one to do it*. This is par for the course at any HCA facility.

I have no idea why anybody would work for HCA unless it has to do with the nurse’s family living next door, and the nurse can live for free. *Any* self-respecting nurse would run screaming from HCA.



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