

Minnesota union calls three-day walkout as 15,000 nurses press for open-ended strike

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5 September 2022

Are you a nurse or health care worker? Tell us what conditions are like at your workplace, and what you think nurses should be fighting for. We will protect your anonymity.

The Minnesota Nurses Association (MNA) union announced last Thursday that it will call a three-day strike, starting September 12, of 15,000 nurses across Minnesota. More than three weeks ago nurses overwhelmingly voted for an unlimited strike. The decision to call the limited action came as anger grew against the MNA's decision to keep nurses in Twin Cities on the job for more than two months after the expiration of their contract, over a month after the contract expiration for the remaining nurses across the state.

Nurses are confronting unmanageable staffing ratios, undermining patient care and exacerbating issues such as violence against health care workers. Waiting rooms in some Hennepin Healthcare and other hospital systems are packed with an average 50 patients, sometimes overflowing into the hallways, a nurse told the WSWs. Like other workers, nurses are suffering a sharp fall in their living standards due to surging inflation.

The hospital systems have proposed meager wage increases ranging from 3 to 5 percent annually, well below the current inflation rate of 8.5 percent. Allina Health proposed an 11 percent cumulative wage increase over 3 years, which would result in a deep cut in real wages. The MNA claims to be fighting for a 30 percent wage increase but this is limited to a select few nurses. Hennepin Healthcare nurses would receive lower raises based on the bogus claim that the CEO in Hennepin is not as overpaid as the CEOs of the major private hospital systems. While the 30 percent wage demand is aimed at placating the demands of militant

nurses, it is widely expected that the union will lower its wage demands.

The nurses' demands are entirely justified. The hospital monopolies received hundreds of millions in federal COVID relief money and are highly profitable. Allina Health, for example, posted \$128.8 million in operating income for 2021, up 400 percent from the prior year. To fight for their just demands, however, rank-and-file nurses must take the initiative in their own hands and outline a strategy to wage a genuine struggle.

Nurses must form rank-and-file strike committees consisting of the most militant and class-conscious workers. These committees must insist the strike be open ended and outline demands based on what nurses and their families need, not what hospital executives and bought-and-paid-for politicians say is affordable. Among these should be an immediate 50 percent wage increase, Cost of Living Adjustments (COLA), the hiring of thousands of new nurses, a sharp and enforceable reduction in patient-to-nurse ratios, and the abolition of exhausting work schedules.

These rank-and-file committees will call for the expansion of the nurses strike into other hospital systems across the US and internationally. The unions, which are closely aligned with Biden and the Democratic Party, have proven to be the biggest obstacle to uniting health care workers in a common fight against intolerable conditions and the subordination of public health to corporate profit. But the unity of all health care workers is needed so sections of workers aren't left to fight the powerful and politically-connected hospital giants alone.

In 2016, the MNA isolated 5,000 Allina nurses by ratifying contracts in every other hospital system in the Twin Cities before allowing them to go on an open-

ended strike. This gave management the green light to eliminate employer-sponsored health care and further attack wages and staffing ratios.

The determination to fight in Minnesota is part of a broader struggle of health care workers and the working class. Over 6,200 nurses at Michigan Medicine at the University of Michigan, Ann Arbor have voted overwhelmingly to strike. But their struggle is being blocked by the Michigan Nurses Association and the University of Michigan Professional Nurse Council. In California, Kaiser Permanente mental health care workers have been on strike for three weeks to fight for better staffing and wages.

The miserable conditions of nurses in the Twin Cities, and across the US, are the result of the criminal bipartisan policies, which have allowed COVID-19 to spread without hindrance. Both parties are well aware of the death and long-term illness that will result from this as well as strain on the health care system. Upholding the profit interests of big business, the Democratic Party has used the unions to accomplish what the Trump administration could not: the full reopening of the economy.

The MNA announced the decision to strike after months of limiting nurses to impotent appeals to hospital CEOs as part of their “Patients Before Profits” campaign. After taking cosmetic pay cuts during the first year of the pandemic, hospital CEOs pocketed large pay increases last year. This includes Allina CEO Penny Wheeler, who got \$2.7 million; Essentia CEO David Herman, who made \$2.8 million; and North Memorial CEO J. Kevin Croston, who made \$1.5 million.

Along with its pathetic appeals to the conscience of corporate CEOs, the MNA promoted countless Democratic Party politicians as the supposed “friends of labor”, even though Biden and the Democrats are puppets of big business, no less than Trump and the fascist Republicans.

Illhan Omar, from the supposedly “progressive” wing of the Democrats, promoted an “informational picket” at Hennepin Healthcare in an article that appeared in the Democratic Socialists of America (DSA) aligned Jacobin magazine. In it, she repeats the rhetoric of the MNA bureaucracy, including their dead-end appeals to the hospital bosses. “It’s time for hospital executives and CEOs to do the right thing, listen to their

employees, and be better employers.”

This is utterly bankrupt and would guarantee defeat. The interests of nurses and the corporate executives are irreconcilably antagonistic. The hospital chains and the giant investors that stand behind them are determined to slash workforces, increase the exploitation of health care workers, and scapegoat them when the inevitable medical errors occur, just like the case of Tennessee nurse RaDonda Vaught and Vanderbilt University Medical Center.

In this the corporate owners are fully backed by the Democrats, which has overseen decades of attacks on health care workers and the right to health care. Obama’s Affordable Care Act only increased the dominance of the hospital systems and insurance companies over health care via cost-cutting measures and increased workloads, enforced by the Democratic Party-aligned unions.

Rank-and-file nurses must oppose the sabotage of their struggle and make the September 12 strike the beginning of a counter-offensive by state nurses to overturn years eroding living standards and working conditions.

The formation of a Minnesota Nurses Rank-and-File Committee will create the best conditions to unite with nurses and health care workers across the country, including at Michigan Medicine, Kaiser Permanente in California, Kaleida in Western New York and other nurses facing similar conditions. An industrial and political counter-offensive by health care workers in the US and internationally must have as its aim the transformation of medicine into a socialist system, where free, high-quality health is a basic social right for all.



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