Reject the MNA-UMPNC sellout agreement with Michigan Medicine

Build the Michigan Medicine Rank-and-File Committee and unite with health care workers across the US

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Are you a nurse or health care worker at Michigan Medicine? Do you want to join the Michigan Medicine Rank-and-File Committee? Contact the WSWS Health Care Workers Newsletter using the form at the end of this article. What are the main issues you face at your workplace? What do you think needs to be done?

The WSWS Health Care Worker Newsletter calls on nurses at Michigan Medicine to vote no on the sellout tentative agreement negotiated by the Michigan Nurses Association (MNA) and its local affiliate, the University of Michigan Professional Nurse Council (UMPNC).

We call on nurses to join the Michigan Medicine Rank-and-File Committee (MMRFC) to organize opposition to another rotten four-year agreement that serves the interests of hospital management. That the union leadership has brought back such a retrograde agreement only underscores the need to replace the bargaining committee with real representatives of the rank and file.

While the MNA-UMPNC signed off on the tentative contract on September 21, the document was only released late Tuesday. Simultaneously, the union announced that 6,200 nurses would begin voting on it at meetings starting early Wednesday morning.

This is a travesty of genuine democracy. There is no way rank-and-file nurses will have enough time to study and discuss a 167-page contract, which will determine the livelihoods and conditions of work for the next four years.

If the union executives are rushing through a vote in such a despicable manner it is only because they know nurses would reject it out of hand given sufficient time to study it. As they say, the devil is in the details. The bureaucratic and anti-democratic character of this process is grounds alone for nurses to reject it.

As explained in a WSWS article on Monday, the highlights of the tentative agreement released by the MNA-

UMPNC show that it addresses none of the fundamental issues in the contract fight. It includes wage increases that are far below the rate of inflation and contains no obligation on the part of Michigan Medicine to hire more nurses or resolve the staffing shortage that has reached catastrophic proportions during the coronavirus pandemic. The claims by the union that the contract eliminates mandatory overtime and a reduction of extended on-call hours are a sham.

The disorganized form of the tentative agreement, with scanned pages spliced together with other pages that include visible edits and changes, makes the document incomprehensible. The agreement has been put together in this slapdash manner for two reasons: The first, is to make it as confusing as possible for nurses. The second, is because the MNA-UMPNC is desperately trying to rush through the agreement and prevent a strike on the eve of the 2022 November elections.

Throughout the contract fight at Michigan Medicine, the MNA-UMPNC has been preoccupied with endorsements and campaigning for Democratic Party politicians such Michigan Governor Gretchen Whitmer. But the Democratic Party is no "friend of labor." It is only the friend of the labor bureaucrats, who dutifully impose the dictates of big business on the working class. This is shown in the conspiracy of the Biden administration and the rail unions to block a powerful strike by 110,000 railroad workers who are fighting the exact same issues as nurses: Exhausting and unsafe work schedules, chronic understaffing and the erosion of living standards by surging inflation.

The Democrats, no less than the Republicans, fear that the growing movement of the working class will break free from the control of the pro-company unions and develop into a real challenge to the domination of society by the corporate and financial aristocracy.

The struggle of Michigan Medicine nurses is part of the

growing movement of health care workers across the country and around the world, who are fighting the profit and financial interests that have transformed hospitals into unbearable workplaces.

Since the beginning of 2022, there have been 15 strikes by hospital and health care workers against understaffing and unsafe patient care. In all of these strikes, health care workers have been fighting against the collaboration of the unions with the employers and the deliberate isolation of these struggles from one another. Just days after 15,000 Minnesota nurses conducted a three-day strike, Kaleida hospital workers in Western New York voted by 96 percent to walkout, and 100 Hartford Healthcare workers in Windham, Connecticut carried out a two-day strike for increased wages, better health care benefits and an end to mandatory overtime.

At Michigan Medicine, nurses have opposed the persistent attempts by the MNA-UMPNC to block a collective fight from breaking out. First, the union told nurses that strikes by public employees were illegal and instead called for protests to the Democratic Party officials on the University of Michigan Board of Regents. Then, two months after the contract expired on July 1, and still without a contract, the union was forced to hold a strike authorization vote with thousands of nurses turning out in support of a walkout to win their demands.

At that point, the union refused to even set a deadline for strike action even though Michigan Medicine publicly announced it was lining up replacement nurses in the event of a strike. Instead, the MNA-UMPNC returned to the bargaining table and in less than two weeks came up with this sellout agreement.

Nurses should recall the experience of the previous contract in 2018, when the union similarly held a strike vote and then turned around and presented a contract that betrayed the demands of nurses for improved working conditions. The implementation of that sellout agreement was followed by staff reductions and an increase in the cash reserves of Michigan Medicine due to the increased exploitation of the remaining hospital employees.

Michigan Medicine nurses are in a powerful position to unite their struggle with autoworkers, teachers, railroad workers and other sections of the working class who are fighting the drive by the employers to boost profits and stock market valuation through the super-exploitation of workers.

Hospital systems such as Michigan Medicine, which are public and non-profit institutions in name only, are part of the transformation of the health care industry in recent decades into instruments of the financial elite for generating enormous personal fortunes. These are the business interests that stand behind the deliberate understaffing and

exploitation of nurses and other hospital employees—and with which the unions are collaborating in order to share in the money making themselves through automatic dues collection—that must be consciously fought by the entire working class.

As the WSWS Health Care Worker Newsletter has insisted, nurses must take the critical step of organizing and building a rank-and-file committee that will take control of the struggle out of the hands of the union apparatus and place it into the hands of nurses and other hospital employees on the floor. The MMRFC exists to facilitate this fight by setting up a democratic organization of hospital employees to unite with workers in other industries and throughout the world in a common fight against the capitalist system.

The current bargaining committee has proven that it is on the side of management, not workers. It must be replaced with a bargaining committee consisting of rank-and-file workers who will fight for what workers need, not what the company claims is affordable.

The MMRFC urges nurses not to accept any contract unless it includes the following demands:

- Safe nurse-to-patient ratios that are mandatory and nonnegotiable. Michigan Medicine must hire enough nurses to guarantee a safe working environment for employees and patients.
- •End the mandatory overtime and extended on-call hours that have destroyed the work-life balance of nurses. All overtime must be voluntary and on-call hours eliminated.

An inflation-busting 30 percent wage increase to make up for years of declining real wages, plus a cost-of-living escalator to keep pace with inflation.

Upgrades to PPE against COVID-19 and monkeypox. We need sufficient protective equipment, including well-fitting masks that are N95 or better, to protect our patients and ourselves.

An overwhelming rejection of the current tentative agreement will send a message to all health care workers that MM nurses are ready for a fight. Preparations must be made now to organize an all-out strike to win these just demands. At the same time, nurses must demand full strike pay from the MNA-UMPNC and the Michigan AFL-CIO. Any threat of strikebreaking must be answered by mobilizing the full strength of the working class in Michigan in collective strike action.



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