

# “We feel very badly mistreated on many levels”: striking nurses at Alta Bates Summit Medical Center in California speak out

Jesus Ugarte, Katy Kinner  
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Over 1,800 nurses at Alta Bates Summit Medical Center (ABSMC) in the Bay Area launched a five-day strike Monday for improved staffing and competitive pay. Alta Bates is owned by Sutter Health, a large health care conglomerate with twenty hospitals and additional outpatient centers across California. The nurses, members of the California Nurses Association (CNA), have been working for more than 15 months without a contract.

*World Socialist Web Site* reporters spoke with nurses on the picket line during the first day of the strike. A labor and delivery nurse said, “Part of what we’re angry about is the short staffing. It’s particularly worse in this hospital. On a daily basis, we’re usually short four to five nurses, which is a huge number of staff to be short.

“They acknowledge that we’re short but keep setting it up that way. What they do is, they cancel nurses on the night shift since the end of this shift tends to be less busy. They say, ‘If those patients aren’t there yet, we’re not going to staff.’ Once you’ve started the shift, it’s really hard to get staff to come in.

“It’s as if you said you’re not going to staff the firehouse because nothing’s burning right now. Think about how hard it would be to get those firemen rounded up from their beds or their personal life to go put out a fire if they’re not on duty.”

Asked about her experience working throughout the pandemic, she responded that COVID proved to her that hospitals all over the country were unprepared to deal with any kind of crisis. “COVID has been the worst experience of our career for many of us. We feel very badly mistreated on many levels. Just as an example, at the start of [the pandemic], they told us we

were not allowed to wear masks, because they said it would scare the patients.”

Health care workers are now, once again, standing before a tidal wave of COVID-19 variants. In addition, flu infections and other respiratory infections such as RSV are overwhelming struggling hospital systems. Pediatric hospitals are seeing their emergency departments, hospital beds and ICUs filling up past capacity with children waiting days in the emergency room or being diverted from hospital to hospital in search of an open bed. This is a direct result of ending crucial public health measures under the Biden administration, which has falsely declared the pandemic to be over.

“We are short staffed constantly,” one nurse said. “We train all the new nurses and then they leave to better paying facilities, usually Kaiser. We understand why they do that, but we can’t maintain the numbers here. So, we have to ask for a better salary to be competitive with Kaiser so they’ll stay.”

She criticized the CNA for not pushing for higher wages. “CNA is too afraid to go out and say, ‘It’s about money’ because then we look like greedy nurses, right?” Jennifer was also surprised to find out CNA has a strike pay fund, adding, “How come we’re not being paid?”

“All of our techs and clerks are in SEIU [Service Employees International Union]. And we wanted them to go out with us. And CNA and SEIU are like enemies. So, they would not get together and make that happen because that would totally impact them. If our techs [people] left, it would be a totally different story. They really wanted to [join], but they’re not coming out because they fear losing their jobs.”

Over 8,000 Sutter nurses are represented by CNA, representing about half of all the nurses in the Sutter Health system. But the CNA is keeping nurses within the same Sutter system separated. According to CNA's website, there are 17 separate bargaining teams. Many of the Sutter nurses with the CNA have been working under an expired contract since June of last year.

Thorild, another nurse in labor and delivery with 40 years at the hospital, said: "Corporate health care is a big part of the problem. Whether they call themselves not-for-profit, like Sutter does, or not, they are all very profit-driven. And so even little things like the number of hospital beds available to a given population is not based on need. It's based on whether or not an organization thinks that there is a profit to be made."

She added: "In this area, they want to close this hospital, not because there isn't a need for this hospital, but because Sutter has decided they can make more money if they consolidate services. So, if this hospital closes, that will leave no full-service hospital all the way down the I-80 corridor from Vallejo to downtown Oakland. If they close this place, that's a disaster.

"We want to have a strong enough contract that can stop the ongoing hemorrhage of nurses to some of our competing facilities. The turnover rate of RNs within Sutter between 2020 and 2021 was right around 50 percent. The vast majority of nurses that have left are newly trained nurses."

Thorild continued, "[Sutter] is not willing to negotiate good enough language to keep nurses and patients safe around potential violence. It happens all the time, especially in the emergency room. We have very volatile situations in my department too."

She said that the company makes decisions impacting safety, such as visitation policies, without taking the input of nurses into consideration. Instead, they have people "sitting behind their computers at home, who don't do the work, making decisions that have a serious impact on us." She added, "Even in the department like women and infants, we can have an unlimited number of people come and go all the time."

On the subject of the Alta Bates strike being isolated by the trade unions, Thorild said, "We're making a new video now for this strike. And we're trying to distribute it to nurses at the other 16 Sutter facilities. Because they all supposedly have tentative agreements, but they haven't been voted on. And one of the things

we were told is, 'Oh, it's going to be so great. We're all going to be united.' Well, they all settled one after another, under pressure from CNA staff. And they have shit contracts and they don't even know it."

Alta Bates nurses are taking a courageous stand for access to high-quality, affordable health care. But they cannot fight alone, as the CNA is forcing them to do. Rather than calling out its entire membership at Sutter hospitals and nearby Kaiser facilities, they have left the Alta Bates nurses to strike alone. In addition, the strike has been limited to just five days when many nurses feel an indefinite strike would be required to have their demands met.

Taking hold of this potential and ending the isolation and betrayals of the union apparatus requires the building of new structures, rank-and-file committees, to break this bureaucratic isolation and unite health care workers across different professions and hospital networks and enable nurses to enforce control over their own fight.

For more information and for discussion on rank-and-file committees, contact us by filling out the form below.



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