Ascension Saint Joseph Medical Center suspends four Joliet nurses who opposed dangerous staffing shortages

Benjamin Mateus 27 October 2022

Pat Meade, treasurer for the St. Joseph Nurses Association and the community liaison, with 35 years of experience at the Joliet, Illinois hospital, told the *World Socialist Web Site* on Wednesday on Monday that a fourth nurse was suspended for defying orders at Ascension Saint Joseph Medical Center emergency room to assume their duties despite dangerous staffing shortages.

Last Friday, four nurses were escorted off the premises for refusing to work under unsafe conditions. They had explained to the managers that they were willing to "clock in" only if management would ensure they had adequate staffing. Meade said that means having at least 12 to 14 nurses per shift in the emergency department (ED). That night only four were assigned.

The next day, when three of the nurses returned to take their shift, they were barred from entering and told they had been suspended pending an investigation. A rally was held in front of the ED that night with approximately 100 nurses in attendance in support of their colleagues.

Hannah Puhr, who was the charge nurse for the day shift in the ED that Friday, provided more crucial details in an interview with WJOL, a local news channel, on Wednesday. She explained that the day was busy and staffing issues have been a chronic problem at Ascension. When they reviewed the night shift nursing assignment, they realized the night shift had only four nurses scheduled and that included a charge nurse and another nurse that had picked up a shift.

"Essentially, there were only three nurses technically to take care of the patients [that night]. This is ridiculous; absolutely unacceptable. There were 51 patients in the emergency room. There was also about 30 in the waiting room and the rest were in the main side of the ER."

She continued, "I felt like we had to do something. I contacted the INA [Illinois Nurses Association] because this was a very unsafe situation; very dangerous. If you could imagine had we had a critical patient or a code come in, there wouldn't even be enough nurses to run that code, the

cardiac arrest, that night. So, I talked to the night shift. They came in for their shift. They were willing and ready to work. They were waiting to clock in until management or upper management had secured safe staffing for their patients."

Puhr added that management simply didn't care about what the nurses had to say, or listen to the nurses' grievances. And because they didn't "clock in," security was called, and they were quickly removed like criminals or hooligans. The day crew remained beyond the end of their shift until management could scrounge about seven people—two St. Joe nurses, two supervisors, one Kankakee Ascension nurse, one floor nurse and a nurse-manager—before allowing them to leave.

This was purposeful intimidation used to warn nurses that the health system wouldn't tolerate any dissent on the part of staff. Meade, who attended the rally, admitted she too had received a warning from management for being there in support of the nurses.

In response to the question why there were only four scheduled she responded, "Is there a shortage, do people not want to work, or is the medical center just trying to save money?"—Puhr said that the staffing shortages have been an ongoing issue, with mass exodus of nurses from St. Joe's ever since Ascension took over in 2018.

In our discussion, Meade explained that prior to the July 2020 16-day strike, there were around 750 nurses. The figure has dropped to 650 and the hospital continues to steadily lose nurses. Retention is poor because nurses are treated poorly. "You have agency nurses making triple your salary standing next to you. Why aren't they using that money to take care of their nurses?" She noted that younger nurses aren't staying because they can get eight or ten more dollars per hour at another hospital.

She also reported that the hospital was late in providing the raises that were agreed to in the 2020 contract. There have been constant problems with paying out wages and bonuses. When the payroll system was hacked last year and the health

system shifted to using paper, this led to major discrepancies that on occasions saw nurses' wages garnished for supposed overpay.

But the issue of staffing has been at the crux of the nurses' grievances against the hospital. There have been more than 160 Assignment Despite Objection (ADO) forms filled just on the issue of patient acuity and staffing shortages. An ADO form is a documentation tool used by nurses to object to an unsafe, or potentially unsafe, patient care assignment.

Puhr said that since the pandemic "there has been cutting of resources, constant downgrading the quality of the products we use to take care of our patients. And the market value that they are now waging the nurses is ten dollars less than the average in Illinois. I understand that this is an ongoing issue everywhere in America ... there is short staffing, they are busy ... I mean, nurses aren't asking for more money. They are asking for appropriate pay. We have been demanding this and asking this of the hospital. They have continued to refuse to raise wages."

It has been a longtime tenet of the nursing profession that if they believe a patient care assignment is unsafe, they have a legal and professional obligation to inform the health system. The purpose of this is to protect nurses if the health system does not address the situation and an untoward event occurs that causes harm or injury to a patient.

Pat Meade said that the Friday event was not simply a spontaneous action on the part of nurses. She thought it stemmed from a similar situation that occurred a couple nights before in the intensive care unit (ICU) that served as the trigger event. On the Tuesday before, when the ICU nurses took their shift, they were assigned three patients instead of two. They protested that these were unsafe conditions and the chief nursing officer stepped in to address the situation.

But the next day, the staffing was one nurse for four patients. The situation grew volatile, and the nurses came to an agreement to accept a one to three assignment. No one was suspended but the event must have received high level attention and informed the decisions to suspend the emergency room nurses.

Meade explained that the 2020 contract did not incorporate an acuity piece in the terms of agreement, that is a clause specifically mandating safe staffing ratios. And the contract stipulates that the nurses cannot go on strike; there is a nowork stoppage clause. And these rules are in effect until July 2023.

Now management is using the no-strike clause and the lack of minimum staffing rules in the 2020 contract as a virtual slaves charter, threatening to discipline nurses who refuse to work under grossly unsafe conditions. Many of the victimized nurses have multiple certificates in critical care

and trauma. If they accepted their assignments short-staffed it would mean taking responsibility for any onerous outcomes to patients under their care.

Meade said the suspended nurses are currently undergoing the "investigative process" where they are sitting with human resources and nursing administrations to discuss the terms of the contract and the events of the night in question. Meade said one of the nurses with 17 years at Ascension, who had been working seven days a week, ten to 12 hours a shift, to fill in for the short staff began weeping, asking "how they could do this to him."

Ascension only offered the following statement to the media obscured in the usual legalistic jargon, saying "Joliet [Ascension Saint Joseph] is committed to working in partnership with nurses while also respecting the terms of our labor contracts. In doing so, we are conducting a thorough investigation of recent events." However, Timothy Nelson, a spokesman for the health system, has said the nurses' union is engaging in "illegal work stoppages." He added, "While the hospital is dealing with nursing shortage issues that all hospitals are currently facing, the Illinois Nurses Association (INA) has decided to promote and encourage nurses at the hospital to not work their scheduled shifts."

In truth the decision by the nurses not to work under unsafe and dangerous conditions was a byproduct of the rank-and-file nurses responding spontaneously to an untenable situation. It has been the previous sell-out contracts negotiated with the support of the INA that have tied the hands of nurses and sanctioned disastrous and dangerous understaffing. The health system is now responding by threatening retaliation against nurses in order to send a message to the rank-and-file that such action will not be tolerated.

In order not to be isolated and victimized, health care workers at St. Joe's must not leave their struggle in the hands of INA bureaucrats. They must turn out and seek the widest possible support from health care workers in Illinois, nationally and internationally, who are increasingly working under the same intolerable conditions. We encourage nurses and other health care workers to share your stories with the WSWS *Health Care Workers Newsletter*. Your names will be kept confidential.



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