

Coalition of Kaiser Permanente Unions claim approval of contract by 98.5 percent without releasing vote totals

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The Coalition of Kaiser Permanente Unions (CKPU) has announced the passage of the contract with healthcare conglomerate Kaiser Permanente. After three weeks of voting, the CKPU declared that the contract was voted through by 98.5 percent, but without releasing the vote totals. The official national announcement by the CKPU came after a week of union locals in the coalition announcing their own ratifications.

Voting ended on November 3, and while several locals announced their own ratifications sooner, the CKPU did not announce the official national ratification until November 9. The four-year national agreement covers 85,000 healthcare workers at Kaiser across many job categories, from pharmacy to housekeeping, nursing assistants, phlebotomy, lab techs and kitchen staff.

As of this writing, CKPU, nor any of the locals within the coalition, have posted any information about vote totals on their websites or social media accounts. Healthcare workers are concerned that they have not received any further information about the vote.

With no official vote count, it is impossible to verify the claim that the contract passed with such high margins. Given the level of opposition voiced by Kaiser workers to their working conditions and wages, workers should demand a detailed breakdown of the totals for each local. It is a basic democratic right for workers to know just how many workers cast ballots for and against. If the CKPU is unwilling to provide such information, which all members are entitled to know, then there is no reason to accept the claim that the contract was passed at all.

When voting began, Kaiser workers were still not supplied with the full tentative agreement. Instead, the CKPU and its locals released brief highlights. Facing demands from workers for the full tentative agreement, the CKPU added an announcement to its website stating

that the full TA would be available for workers to read at voting locations. The TA, a 75-page document, is not something that can be skimmed right before a vote and the attempt to hide the document from the membership is a clear indication that the TA was not as strong as the CKPU claimed.

No doubt, after opposition from the membership and in response to the statement by the Healthcare Worker Newsletter demanding the release of the contract with adequate time for review, the full TA was released quietly on three union local websites. There were no social media posts made to highlight its release.

Regardless of the vote totals, it is clear that there was a concerted effort by the union bureaucracies to push through this contract by whatever means necessary. While the coalition has repeatedly made claims about the contract being a “major victory,” the agreement is a sellout contract.

The contract itself contains wage increases far below the rate of inflation and makes no concrete commitments on staffing ratios, the main concern of workers on the picket lines. The contract sets a starting wage for Kaiser workers at \$25 an hour in California and \$23 an hour elsewhere, and provides for a total increase of wages by 21 percent over four years. The starting wage rates will be implemented slowly, with the \$25 and \$23 rates reached by 2026.

The wage “increases” of 21 percent over the course of the four-year contract don’t keep pace with inflation and come nowhere near what workers need to make up for years of declining wages. Just over the course of the 2019 contract, Kaiser workers wages fell by about 4 percent in real terms.

Most importantly, the contract also does not include any meaningful provisions about staffing ratios at Kaiser

facilities. The staffing section of the contract notes that Kaiser will hold “mass hiring events,” which commits Kaiser to nothing. The contract also claims that a new joint staffing committee will be formed, made up of bureaucrats and management.

The contract also makes clear that Kaiser will continue funding the union bureaucracy through the Labor Management Partnership and other “joint” programs. According to the contract, Kaiser will invest an additional \$100 million into a company called “Futuro Health,” a healthcare training company. Kaiser is already one of Futuro’s main investors and David Reagan, the SEIU-UHW president, sits on its board. In effect, Kaiser and the union bureaucracies are trying to pass off their own self-serving investment as a boon to Kaiser workers who will never receive a cent of the investment payoff.

Kaiser has also pledged to pay \$8 million total to the Ben Hudnall Memorial Trust and the SEIU Healthcare Multi-employer Training Fund. These types of funds are historically used as slush funds for the bureaucracy. Kaiser will fund them in exchange for the unions working to tamp down strikes and rush through sellout contracts. Similar funds were at the center of the recent scandal in the United Auto Workers, which brought down more than a dozen top officials.

Kaiser and its trade unions were under significant pressure to rush through this deal in the face of mass opposition of Kaiser workers and the growing political radicalization of healthcare workers across the country.

In the Pacific Northwest, 380 Kaiser pharmacy workers continue their strike that began October 23. Over 500 imaging workers at five locations in Oregon and Washington joined the pharmacy workers’ strike on November 1. Both groups of workers are under the United Food and Commercial Workers Local 555, a union which broke away from the CKPU at the end of September. Their strike is currently set to continue until November 18.

Thousands of pharmacy workers at Walgreens, CVS, Rite Aid and other drugstores across the US took part in a wildcat strike against the pharmaceutical conglomerates. Workers dubbed the three-day action “pharmageddon,” and sought to call attention to the unsafe working conditions that pharmacists and techs face on a daily basis.

The strike of 1,700 nurses at Robert Wood Johnson University Hospital (RWJUH) in New Jersey continues into its third month. In mid-October, Bernie Sanders held a sham hearing at nearby Rutgers University under the

guise of addressing the healthcare staffing crisis. The real agenda of the event was to feign support of the RWJUH nurses, bolstering the credibility of the United Steelworkers (USW), which has not provided strike pay for the nurses, and allowed their health insurance to be cut off on Labor Day weekend.

Sanders, while pretending to defend healthcare workers, endorsed the entire political framework of US support for the Israeli genocide of the Palestinian people. Over 11,000 Palestinians, including dozens of healthcare workers, have been killed thus far and medical facilities are being targeted. Al-Shifa hospital, the largest in Gaza, is currently under attack by IDF forces.

There is mass opposition by workers and youth to the genocide of Gaza backed by Sanders, Biden and imperialist governments across the world. Healthcare workers are also joining the mass movement, connecting their own struggle for improved conditions at home to the fight against the eruption of war, genocide and political repression. Healthcare workers are speaking out in the form of open letters, rallies and press conferences in the name of fellow healthcare workers and citizens in Palestine.

In a recent article featured in *Al Jazeera*, internal medicine doctor and Harvard Public Health student Meena Hasan called for health institutions across the world to demand a ceasefire. In the concluding section of the article, Hasan stated, “Medical professionals and public health leaders have a responsibility to advocate for the health of all and address the systems and structures that cause unjust health inequities between people. ... We need to collectively take a stand for the people of Palestine and demand their right to health.”



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