

# Hospital workers face off against Michigan Medicine and union bureaucracy

George Kirby  
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More than 7,100 Michigan Medicine workers are in a fight against hospital administration for a new contract. Workers in the Union of Michigan Medicine Allied Professionals (UMMAP), United Physician Assistants of Michigan Medicine (UPAMM), and Service Employees International Union (SEIU) in Ann Arbor cover a wide range of occupations essential for the hospital to function.

Workers in all three unions are demanding an increase in pay, benefits, an end to wage compressions and safe staffing. While these negotiations are taking place, no strike authorization vote has been called by the union, and members are working without a contract. Instead, the only action being organized by the unions is a joint informational picket by UMMAP and the SEIU scheduled for two hours on the morning of Monday, July 29 at the Taubman Center.

UMMAP and SEIU workers are in the first contract negotiations since joining the respective unions, and UPAMM's second contract has been in negotiations since 2020. Both UMAP and UPAMM are affiliates of the American Federation of Teachers (AFT).

A Michigan Medicine worker spoke to the *World Socialist Web Site Health Care Workers Newsletter* on the current contract negotiations. "We're demanding an increase in salary and end to pay compression. The U of M administration is playing hardball, usually staying for a few minutes. I know [Labor Director] Hakim Berry told SEIU workers they should be happy they have jobs."

An email was sent to all workers by Berry claiming that the hospital system supported employees, "right to organize and freedom of expression," that "actions taken by bargained-for employees must not interfere with patient care or hospital operations."

The worker continued:

Ono or Runge [University of Michigan President and Executive Vice President for Medical Affairs respectively] are making money and employees are not. Some people at the bottom had an \$8 increase but we get pennies annually for seniority. It might be a good raise for them initially, but we tell them they will be like us in a few years. We're overworked and working overtime.

While I like my position, by the next day I feel exhausted. Next week we are holding an informational picket with both unions. We know that the university will try to hold us off, but we have a lot of employees. UM will lose this time!

When asked for his thoughts on a call for joint strike action across all Michigan Medicine employees, the worker said:

Some workers raised in a meeting that we could go out for one day and bring this hospital to its knees. We were told it was illegal and if we did, we had to give a month's notice and the hospital would scab on us. But we're already short-staffed and people are leaving, who would they find? Who says one month's notice? Why not wildcat then?

At the same time the nurses haven't struck since I think the 80's. Not everyone is able to go to these bargaining meetings since we have to switch our shifts. We're already slaves as workers to management, we don't need bureaucrats putting us down too.

The current struggle at Michigan Medicine takes place two years after the last nurses' struggle was betrayed by the MNA-UMPNC bureaucracy. The MNA bureaucracy blocked nurses from striking in spite of wide support from the rank and file to mobilize other sections of the hospital in a joint fight.

Instead, the MNA conducted political stunts, such as inviting congresswoman Debbie Dingell and other officials to falsely claim they supported workers. Instead of resolving the staffing ratios that were exacerbated by the COVID-19 pandemic, they rammed through a sellout contract that provided no solution to the central demand of staffing issues.

The role of UMAPP and UPAMM and the SEIU local are no different. As has been commonplace in contracts across the US for decades, the previous deal for UPAMM contract document and the current tentative agreement at UMAPP contain no-strike pledges. The power that workers have is withholding their labor from management, which the union chose to contractually remove.

Another section of the UMAPP contract, entitled "Reduction in Force," details the "procedure to implement layoff and mandatory reduction of hours," which openly paves the way for management to dictate mass layoffs at a whim. Like the tactics of the MNA-UMPNC, UMMAP did nothing to address working conditions, but rather called on workers to give statements and testimonies on the terrible conditions they face in the hospital, presenting them to the administration.

Bob King, former UAW President and stooge for the employers, is now the executive director for UPAMM. King was a notable figure amid the Big Three bailouts and job losses for thousands of autoworkers. King held the office of UAW president from 2010 to 2014, in the immediate aftermath of the Obama administration's bailout of the auto industry, which eliminated cost-of-living adjustments and slashed the wages of new hires by 50 percent.

King is now being brought in at Michigan Medicine to help contain the growing struggle of hospital employees and divert workers into harmless channels that serve the interests of hospital management and the university administration.

Workers at Michigan Medicine are among a growing movement of healthcare workers internationally, in an

ongoing struggle against unsafe staffing and miserable workloads. Last month 800 New Jersey nurses fought against the HPAAE 'historic' contract that did not address the exhausting staffing ratios nurses face.

At nearby Ascension Genesys hospital outside Detroit, the Teamsters rammed through a sellout deal for Ascension Genesys nurses despite 100 nurses abstaining from the vote. The Teamsters officials gave nurses empty promises that the contract would be honored by Henry Ford Health, which is set to take over the hospital this month.

The contract did not address any of the nurses' main demands including the elimination of mandatory overtime or enforceable staffing ratios. The ratification took place weeks after a Massachusetts nurse, who had been forced to work overtime, accidentally drove off a parking lot roof due to exhaustion.

The opposition among healthcare workers is aimed at the corporate and financial interests that subordinate the health of patients to the drive for profits. Dr. Marschall Runge, the CEO of Michigan Medicine who announced his plan to retire in June 2025, was the highest paid individual at the university, earning \$1.64 million in 2023.

Meanwhile, the response of the entire capitalist ruling establishment during the COVID-19 pandemic has proven that nothing will be allowed to impede the flow of profits.

To fight the attacks of hospital administrations, the struggle must also be taken up against the pro-corporate union bureaucracies. Workers must raise the demand for strike action against the conspiracy of the union bureaucracy and management.

Michigan Medicine workers must take the lessons of the nurses' struggle and form independent rank-and-file strike committees, to democratically discuss their demands and prepare for strike action.



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