Healthcare workers at dialysis clinics across California wage six-day strike

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Nearly 1,000 low-paid healthcare workers at 37 dialysis clinics have been on strike since October 14 across the state of California. The majority of strikers are dialysis technicians, while nurses and administrative staff have also joined. The strike is taking place at a fraction of the centers owned by the biggest dialysis corporations that include Davita, Fresenius Medical Care, Satellite Healthcare and U.S. Renal Care.

Striking workers are members of the Service Employees International Union-United Healthcare Workers West (SEIU-UHW). The union has called an Unfair Labor Practice (ULP) strike and states that management is "violating labor laws, union-busting, intimidating and threatening workers." According to a post by the union on X, "DaVita's Concord clinic management fired Registered Nurse Gerald Lorilla in retaliation for his union activity." Despite many of the workers having unionized at their site with SEIU-UHW as far back as December 2022, they are still working without a contract.

The *World Socialist Web Site* spoke to workers on the picket line in San Diego and Los Angeles, who described the difficulties living on what amounts to poverty wages in some of the most expensive cities in the country. Every worker we spoke to indicated they, and all their coworkers, have had to take on second jobs, with some stating they are working over 100 hours a week.

Johnny has been a patient care technician for 27 years. "When I first started 27 years ago, it was like $9 an hour in San Jose, in the Bay Area. You get small increases as it goes over the years. It's not a whole lot for what we do. It's not really a bad thing. It's nothing to make a living off of, but it should be better.

"We never really have enough staff. If somebody calls in sick or can't make it or running late, we just got to do what we got to do. We're short staffed. So the regular ratio of patients to tech is 4 to 1. Sometimes it's 5 to 1. ... Our first patient is at 2:30 in the morning until 9 o'clock at night or so. As the openers, we do 12-hour shifts. We'll open up the unit for the first patient at 2:30, but including our lunch, we're actually here for 13 hours.

"With the harassment from management, some people are scared to speak out because they're afraid they're going to get harassed. People are scared because you can't afford to lose your job because you've got a family to take care of. But the people say they want to go union because the company is trying to quiet you down. They are more likely to back down if you come in as a group because there's strength in numbers. More and more people are catching on and want to stand together."

In a discussion on the contradiction between high quality medical care and the placement of profits over lives, Johnny replied, "I don't know. That's just kind of how it is. All we're doing is working. We don't have no kind of control on what goes on in the higher-up corporations. It's all about numbers for them. We just do all the leg work, take care of the patients, make sure everything is well taken care of. We do the patient care. That's what we do. They do the numbers. So we have no say-so, no control over what goes on with the higher-ups."

Gustavo has 20 years experience as a patient care technician (PCT). "I would say it's about respect from the big corporations because we think they don't see us like important people for them. We feel like kind of discriminated because every time we ask for better conditions to work, they don't listen to us. It's like they don't consider us part of their corporation.

"That's the reason I'm doing the strike for respect and protection too, because we feel unprotected. You know, they can fire us anytime they want. You know, we don't feel no protection. And, you know, in any labor class, you know, we need protection for our jobs, because we live for our jobs. That's the reason I can see that we need to form a union. That way.

"If some people get sick, or sometimes even two people get sick and they don't come to work, we don't get somebody to cover them. Then we have to take the load. We have to work more, and we don't get compensated for that. If we complain, we don't get an answer from them.

"We regularly work 12 hours a day. That's how we work. And sometimes when we're short, they ask us to extend those hours to 13, 14 hours, you know, if it's necessary. If we say no, you know, they think we are scared that we can get fired if we don't do what they ask. That's the main thing for me being, you know, on the strike, is that that we need protection and respect, you know, because we feel that we're not protected.

"For all these 20 years, I've been doing that. My only day off is Sunday. Six days a week, 12 hours a day. And that's the reason we're here. That's 72 hours a week. So I work here three days, 12 hours a day. And then I work another job three days, 12 hours a day. It's because in order to make a living, we have to do that."

In fact, most of the workers have second jobs to make ends meet.

Alicia is a dialysis technician who has been working at the Fresenius Kidney Care Gateway Dialysis Center for nine years and is also on the bargaining team.

She stated the union is not negotiating for more than the current healthcare minimum wage bill which sets healthcare worker wages this year at $23/hour and will increase to $24 in 2025, and will not reach $25 an hour until 2026. The bill has been touted by the trade union bureaucracies and worked out with the Democratic Party and the major healthcare corporations as a means of suppressing individual strikes. Most significantly it was promoted as the answer to the powerful strike by Kaiser healthcare workers who were demanding not only significant raises, but a end to the short staffing which is exacerbating burnout.

Despite the SEIU-UHW attempting to limit the strike to non-wage demands, the central issue facing all workers is the abysmal pay, in addition to staffing, abuses and intimidation by management.

Alicia agreed that the $23 Healthcare Minimum Wage Bill is still highly insufficient, "At least they can give us like $30 an hour." She indicated that she tried to work only one job, "But it's not enough. It's

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not enough. So I started to work here. My other job is every Tuesday, Thursday, Saturday, after I open here [Fresenius] from 3 a.m. in the morning until 2 p.m., then I'll go straight to DaVita.

"I'm a preceptor, so I've been here for nine years. You know, they only increase like $1 for the $23. And then I have a co-worker for 18 years. Her rate is $23, not even $24 compared to the new hiring."

Alicia also indicated that companies are increasingly bringing in young workers with no medical training and some are right out of high school. creating a dangerous situation for patients at already short-staffed facilities.

"These new hires don't have the medical background. We're dealing and taking care of our patients and new employees are just trining here, so we're just supporting the new employees who don't have medical backgrounds. It's really dangerous because I don't know why they don't require them to go to school just to study the basics like getting blood pressure. What if the patients are passing out? What are you going to do? That's a very important thing."

Elizabeth, a Los Angeles nurse who expressed her support for the striking workers, spoke to the WSWS about the dangers being described by dialysis technicians and nurses.

"The ratios for registered nurses are one to 12 patients and techs are one to four patients, but sometimes they have more than that because of short-staffing. Dialysis is an extremely invasive procedure that can be hard on the body. Patients should be monitored very closely during this time, so the fact that nurses are caring for 12 patients is a dangerous policy used by the corporation. This is a three-and-a-half hour to four-hour procedure, three times a week. Hemodialysis (HD) replaces the function of the kidneys when they no longer work. The kidneys' function is to filter out waste products and extra fluid. An HD machine replaces this function. A patient on HD must be monitored very closely because fluid exchange can quickly cause a patient's blood pressure to plummet leading to cardiac arrhythmia or, worse, cardiac arrest. I've seen it happen. I think it's impossible for a nurse and tech to safely monitor 12 patients. I imagine the stress level of these healthcare workers is through the roof."

On the patient population she added, "Many of the patients are from the working class and are diabetics, and we know that diabetes ruins the organs, especially the kidneys. It's generally the poor working class that end up on dialysis, and these are in higher numbers Latinos, African Americans, Filipinos, Asians and many who have amputations as well."

DaVita and Fresenius Medical Care own or operate nearly 75 percent of licensed dialysis clinics in California. The strike has taken place at a fraction of locations across the state. In the wider Los Angeles Metro area alone, DaVita runs more than 55 locations and as of the end of 2023 runs 3,042 outpatient dialysis centers across the globe, including 2,675 in the United States and 367 in 11 other countries. In the US, Fresenius Kidney Care runs over 2,600 dialysis clinics and has over 70,000 employees with some 205,000 patients.

The SEIU-UHW has led unionization among dialysis clinics, with centers in Brentwood, Antioch and Camarillo unionizing in December 2022. Since then, workers at 18 other Fresenius clinics have joined. However, despite the numerous locations having unionized, there remains no contract to this day and the union is making clear that outside of unionization efforts, it will not wage a struggle to significantly raise wages, but inform workers they are not advocating for wages beyond the healthcare minimum wage bill.

However, the $23-an-hour minimum wage healthcare bill in California, and future $25, is vastly below what is required to get by in the state, and amounts to an acceptance of both poor wages and the requirement of second full-time jobs.

As one SEIU-UHW bureaucrat on the picket line made clear to reporters, "The strike really isn't about the wages," and indicated that the fight for higher wages will be pushed to sometime in the distant future, adding, "Because once they are able to strike, form their union, everything else will fall in place, right?"

The reality is that nothing will "fall into place" outside of a unified struggle among healthcare workers. Central to this struggle is an understanding that workers must begin organizing independently, they must do so outside of the SEIU-UHW, which despite its radical phrases, has agreed to numerous contracts which lock workers into poverty wages.

As the WSWS explained during the Kaiser strike in 2023, the wage increases of 21 percent over the course of the four-year contract did nothing to keep pace with inflation. Over the course of the 2019 contract alone, wages by Kaiser workers 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 promised "staffing committee" has done nothing to alleviate short staffing and the exodus of healthcare workers from the field.

According to the Centers for Disease Control and Prevention, in 2023 some 130,522 people in the US began treatment for ESKD. The National Kidney Foundation notes that in total some 35.5 million adults in the US are estimated to have kidney disease, or more than one in seven people. Approximately $156.7 billion, or one in every four Medicare dollars, goes to kidney disease patients.

Kidney disease is a lucrative business, due to the high numbers of those suffering from the disease and the guaranteed funding provided in an earlier period of albeit limited social welfare near the end of the postwar boom. In 1972 Congress updated the Social Security Act to grant comprehensive Medicare coverage to anyone diagnosed with kidney failure. The passage of the change was celebrated at providing care to the most vulnerable.

However, as a result of the capitalist profit motive under healthcare, Davita, Fresenius Medical Care, Satellite Healthcare and U.S. Renal Care represent a small handful of powerful corporations that own the market. They are for-profit dialysis centers which increase their profits by underpaying staff and keeping staffing levels dangerously low.

A 2010 study found that dialysis patients at the two largest for-profit chains were found to have a 19 percent higher risk of death than patients receiving care at a nonprofit. While the study did not name the companies, Fresenius and DaVita ranked the top two in that year and remain so.

The powerful strike by dialysis workers must be taken into the hands of the workers themselves, who cannot rely on the SEIU or any of the corporatist trade unions tied to the Democratic Party. A nationwide and international struggle is unfolding against low and stagnating wages in the face of skyrocketing inflation. Thirty-three thousand workers at Boeing are currently in their fifth week of a powerful strike where they face similar issues with low wages in addition to the "moral injury" many healthcare workers describe. In each industry, corners are being cut that lead to a loss of life. From the plane crashes to the high mortality rates of patients due to poor staffing and conditions, these are avoidable tragedies and are permitted to occur in the name of increased profits.

The only way forward is the building of independent rank-and-file committees which link up the struggles of healthcare workers to Boeing workers, and workers across all industries. Contact the WSWS today for help building a rank-and-file committee in your workplace.

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