

# Nurses and case workers strike Henry Ford Genesys Hospital in Grand Blanc, Michigan

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More than 700 nurses and case workers at Grand Blanc's Henry Ford Genesys Hospital launched a strike Monday. The strikers have shown that they are determined to win their demands for safer staffing, decent working conditions and improved wages.

Negotiations between the Teamsters Local 332 and hospital management are set to resume on Friday. The strike began on Labor Day after the nurses voted by 93 percent against the hospital's contract offer on August 21.

Henry Ford Health claims that the hospital is fully operational, using contract nurses and some staff who crossed the picket line as the forty-sixth contract negotiations resume.

The nurses and case workers are fighting for enforceable nurse-to-patient ratios to reduce dangerously high workloads, which they say place both patients and staff in jeopardy. The employees are also demanding better pay and retention incentives to recruit and keep professional nurses. The strikers are also opposing attempts to gut pay scales and new staff incentives.

Another key issue is protection of existing contractual rights in the aftermath of the acquisition of the hospital by Henry Ford Health System in the fall of 2024. Henry Ford Health acquired the operations of what was Grand Blanc Genesys Hospital through a joint venture with Ascension Michigan, which officially launched in October 2024 and brought Ascension's Southeast Michigan and Greater Flint facilities, including Genesys, under the Henry Ford Health brand.

Under the terms of this integration, which is described officially as a joint venture rather than a traditional acquisition, Henry Ford Health is seeking to implement a single policy across all of its facilities. That means scrapping things like premium pay that had been negotiated in previous contracts at Grand Blanc Genesys.

The present strike is a continuation of the same struggle that erupted in June of 2024, but which was betrayed by the officials of the Teamsters union.

Henry Ford Health management claims its contract proposal is "robust and competitive," pointing to their system-wide staffing model and financial woes, with Genesys having run \$50 million in annual losses in previous years. While management claims that patient safety remains paramount it

argues that mandated ratios, a core demand of the workers, are "inconsistent with system-best practices" and hinder adaptability.

In other words, Henry Ford is attempting to make the Grand Blanc facility profitable through intensifying the exploitation of the staff by taking away previous benefits and insisting that establishing mandated ratios would make the hospital "uncompetitive," i.e., unprofitable, in a market where every other hospital management is maintaining the exact same policy: no mandatory staffing requirements.

The patient ratios, while varied based on specialty, are consistently described by strikers as being significantly higher than what is considered safe for patient care. In particular, nurses are being forced to care for 11 to 13 patients, when the ratio should be between one and four, with a maximum of five.

The result is that patients get sicker as their needs cannot be met in a timely and adequate manner by nurses. One nurse described that there would be only one nurse staffing an entire hallway for hours on end without assistance. More than one nurse stated that Henry Ford has challenged the notion that patient ratios impact patient care, which is a position they find ridiculous and do not accept.

The current contract mandates patient ratios, but these mandates are regularly violated by Henry Ford. One nurse described that they are practically unable to decline patient assignments that they believe are unsafe. All they are permitted to do is file something with the union stating that the assignment is unsafe. However, they are often too busy to do even this. More than one nurse expressed concern that the lack of adequate care could cost them their nursing licenses.

Reporters from the *World Socialist Web Site* spoke with several nurses manning the picket lines on Wednesday. The conditions have significantly worsened since Henry Ford acquired the hospital. One nurse joked that the sign she was holding was the one she had used in 2024.

Two nurses working in the OR, transporting patients to and from the main emergency room floor, described to WSWS reporters the conditions driving the strike: "Our patient-to-staff ratio is the main issue for us. Given that we're mostly transporting patients in and out of care, we don't directly have to deal with the brunt of the pressure the nurses on the floor do.

"But the patients we're working with are forced to stay overnight at the hospital, sometimes for several days waiting for care or for release, and they're being charged the whole time."

"The acuity of our patients' health conditions has also increased over the last year, meaning we have to put more into each patient," the first OR nurse added. "Our local population is older and getting sicker."

The other OR worker added: "Many people going into healthcare do it because they want to help people, and the way the hospital administration is running things isn't allowing nurses to help their patients effectively."

"When I saw them in the tentative agreement [in 2024]," the first nurse said, "I knew they were never getting enforced. I've never received anything for these bonuses, and I don't know of anyone who has."

The OR nurses expressed concern over the Trump administration's cuts to Medicaid and funding for science research, which they recognized as a major threat to the lives and health of Grand Blanc's largely poor and working-class patient population. "It's going to be a disaster when the cuts to Medicaid go into full effect," said one nurse.

On the issue of COVID-19 and vaccines, strikers raised the danger of the anti-vaccine rhetoric spouted by Trump's Secretary of Health and Human Services and director of US public health policy, Robert F. Kennedy Jr., who, last week, ousted Centers for Disease Control and Prevention (CDC) Director Susan Monarez, and is carrying out plans to severely limit, if not outright ban, access to COVID-19 vaccination.

The striking workers were glad to learn that their walkout is part of the wider eruption of class struggle across the US and around the world against the assault on the working conditions and democratic rights of the working class.

Many nurses supported the call of the International Workers Alliance of Rank-and-File Committees to organize a struggle against any attempt by the Teamsters bureaucracy to sell out the strike, as took place in the 2024 contract struggle.

Strikers said Henry Ford is busing scab workers into the facility to keep the hospital system functioning. Some strikers mentioned unconfirmed rumors of patient deaths resulting from negligent conditions in the scab-operated hospital system. In any case, the strike-breaking operation is of greater importance to management than the safety and well-being of patients who are being placed at severe risk.

Commenting on the intentional restriction of staffing numbers, one nurse with over 30 years at the Grand Blanc hospital system explained that "up until a couple of years ago, we had over 200 job opportunities posted. The news caught wind of that, and Ascension took down all the job postings. It was only maybe a year ago that they started recruiting healthcare workers, but they're not paying our new nurses like the other local hospitals, so we're having difficulty keeping our new staff."

She explained that much of the Grand Blanc system's older and most experienced healthcare staff left or retired during the outbreak of the COVID-19 pandemic in 2020, a staffing loss from which the system has never recovered.

The strike by nurses and case workers at Henry Ford must be seen in the context of the broader wave of hospital worker struggles in Michigan and nationwide. These struggles have been stifled, isolated and outright betrayed by the union bureaucracy, which forces concessions, block rank-and-file action and collaborate with hospital system management.

Nurses' strikes in Michigan, California and New York have repeatedly been shut down via deals behind closed doors, enforcement of court injunctions, or no-strike clauses. The Teamsters' record is no exception. Despite heated rhetoric, the union bureaucracy recently pushed through a contract at UPS that dropped key demands after promoting a "strike threat" only to call off any action and deliver a sellout deal.

The Teamsters leadership's support for Donald Trump exposes the willingness of the union apparatus to subordinate workers' interests to a reactionary political alliance. Trump, whose administration slashed federal funding for public health, targeted the NIH and CDC for devastating cuts, and denies the existence of the ongoing COVID-19 pandemic, has declared war on public health services and democratic rights more broadly.

The Teamsters' embrace of Trump shows that the organization is run by a corrupt bureaucracy that does not represent the interests of nurses or any section of the working class.

The struggle for safe staffing, fair pay and the defense of public health care stands in irreconcilable conflict with the financial interests of hospital profit-seekers and their partners in the union apparatus. Only a movement built from below can secure the resources, staffing and dignified work conditions essential not just for caregivers, but for the health and lives of the working class.



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