

Vermont Medical Center nurses fight low pay and understaffing

By Mike Ingram
17 July 2018

Nurses at the University of Vermont Medical Center (UVMMC) in Burlington held a 48-hour strike last week after months of negotiations for a new contract stalled with no agreement between management and the union. Nurses are demanding increased wages and an end to understaffing, which has led to exhausting shifts for hospital workers and dangerous conditions for patients.

The Vermont Federation of Nurses and Health Professionals (VFNHP) called a vote to authorize a two-day strike if its demands for a 24 percent pay increase over three years was not met before the July 9 expiration of a three-year contract.

In a June 13 vote, nurses overwhelmingly supported the strike call with 1,311 of the 1,800 union members voting 96 percent in favor of a walkout. The two-day strike began July 12 after last-minute talks failed to bring about an agreement. The action received widespread support from workers across the state.

UVMMC proposed a 13 percent pay raise over a three-year contract. The union is demanding a 13 percent across the board increase for registered nurses in the first year and a 4.75 percent increase in each of the next two years. The union is also demanding a \$15 minimum wage for all hospital workers. According to UVMMC, there are currently 900 of the 8,000 hospital employees who are paid less than \$15 an hour.

Nurses are also demanding increased staffing levels. The hospital routinely uses hundreds of so-called “travel nurses” who work at UVMMC on 13-week stints to cover for staff shortages, which are in large part due to nurses leaving the hospital in search of better pay and conditions.

Hospital management claim the demand for a 24 percent increase over three years is unrealistic and that nurse practitioners. Hospital president and COO Eileen

Whalen has estimated nurses’ average pay at \$64,000, below the national average of \$73,550, according to 2017 US Department of Labor statistics. Vermont ranks 47th in the country in nurses’ wages when adjusted for cost of living, according to union research.

While hospital management claims there is not sufficient money to meet nurses’ demands, the top 15 administrators at the hospital receive close to \$11 million in compensation. According to a 2017 report, former CEO John Brumsted received \$2,180,275 in total compensation while COO and president Eileen Whalen received \$866,692.

The strike in Vermont is part of a growing movement of health workers in the US and internationally against decreasing pay and worsening conditions as governments seek to drastically reduce the cost of healthcare provision and nurse-to-patient ratios. Nearly 30,000 nurses, midwives and healthcare assistants participated in a 24-hour strike in New Zealand July 12 in the first nationwide strike by public hospital workers since 1989. In Britain, workers confront the destruction of the National Health Service and ongoing privatizations. In the US, the Trump administration is accelerating attacks upon health workers begun under Obamacare.

Two hundred registered nurses at the Alhambra Hospital Medical Center in California voted 97 percent in favor of strike authorization last month. As in Vermont, nurses cited concerns over unsafe nurse-to-patient ratios and inadequate meal and break relief, with nurses often forced to work 12-hour or longer shifts.

The fight against unsafe conditions for staff and patients alike takes place in the wake of mass mobilizations of teachers across the country and reflects a new mood of militancy in the working class

as it confronts an unprecedented attack on its living standards and social rights. The determination of workers to fight stands in stark contrast—and opposition—to the unions, which are politically aligned with the Democrats and oppose any movement of the working class that challenges the profit prerogatives of Wall Street and big business.

In Vermont, the union gave advanced notice of the strike and its limited 48-hour character and thus allowed UVMMC to bring in “outside nurses” to scab on the strike. UVMMC spent \$3 million to bring in 600 replacement staff to keep the hospital functioning throughout the strike. Three hundred technicians who are members of the same union were not included in the strike call and VFNHP officials stated that workers would continue to work without a contract following the strike.

Last year a contract struggle by nurses at Tufts Medical Center in Boston resulted in a punitive lockout of more than 1,200 nurses. The nurses, who were not being paid during the lockout and received no strike pay from the Massachusetts Nurses Association (MNA), were fighting for better staffing, better pay, and in defense of a defined benefit pension plan, which the hospital was trying to take away from nurses who have worked for decades.

After the union worked to isolate the nurses and restrict them to working with local Democrats to pressure management to return to the negotiating table, nurses were forced to return to work without a contract and none of their demands met. A new contract was eventually ratified in January 2018, giving nurses a mere 6 percent pay raise and some unspecified agreements on retirement benefits and staffing levels.

In 2016 close to 5,000 nurses struck five hospitals operated by Allina Health in Minnesota for six weeks. The strike ended with the Minnesota Nurses Association (MNA) ramming through a contract that was almost identical to proposals rejected on four previous occasions by nurses. The contract ratified by the MNA contained all of Allina’s main demands, including the shifting of nurses from their healthcare plan to more expensive company-run plans.

VFNHP is affiliated with the American Federation of Teachers through AFT Healthcare. During the first half of 2018, the AFT, along with the National Education Association (NEA), betrayed one strike after another

by rank-and-file teachers in West Virginia, Oklahoma, Arizona and other states who rebelled against poverty wages and inadequate supplies in schools across the country.

The AFT plays a major role in the Democratic Party. President Randi Weingarten is a member of the Democratic National Committee and the AFT endorsed Hillary Clinton in the 2016 presidential campaign. Clinton spoke at the AFT convention in Pittsburgh last week, along with Vermont Senator Bernie Sanders, and both feigned support for teachers and other public sector workers.

While sabotaging the struggles of teachers and healthcare workers, the AFT calls on workers to vote for Democrats in November mid-term elections. It is the Democrats, however, who have spearheaded the assault on healthcare workers through the cost-cutting and push for increased productivity under the Affordable Care Act.

The legislation known as Obamacare was drawn up by the hospital chains together with the pharmaceutical and insurance giants with the aim of shifting the cost of healthcare from the corporations and government onto the backs of the working class. Together with increased out-of-pocket expenses, there has been a push to increase the exploitation of healthcare workers.

In resisting this attack, nurses and other healthcare workers confront not only the hospital administrations but both parties of big business and the trade unions. To wage an effective struggle, rank-and-file committees, independent of the trade unions, must be formed to link the struggles of workers in different hospitals across the country as part of a broader political struggle for the defense of healthcare as a social right and decent wages and conditions for the workers who provide it.

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