

Two-week strike by Joliet, Illinois nurses in danger

By Benjamin Mateus and Jerry White
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The two-week strike by 720 nurses at the AMITA St. Joseph's Medical Center in Joliet, Illinois is at a critical juncture. The nurses, who walked out on July 4, are demanding improvements that are necessary for all health care workers, particularly in the midst of the pandemic: safer patient-to-nurse ratios, improved wages and protection against management retaliation.

However, the Illinois Nurses Association (INA), the state AFL-CIO and major unions like the Service Employees International Union (SEIU) have forced the nurses to fight one of the largest hospital chains in the state alone, even as AMITA brings in out-of-state strikebreakers and threatens striking workers with poverty if they don't capitulate.

The nurses have taken a defiant stand not just for themselves but for all health care workers. Last weekend, they overwhelmingly voted down a sellout contract brought back by the INA, which did nothing to address chronic understaffing, wages and other critical issues. If this battle is to be won, nurses must form a rank-and-file strike committee to take the conduct of the negotiations and strike out of the hands of the INA and fight to expand the strike throughout the health care industry.

In 2018, AMITA was taken over by St. Louis-based Ascension Health, the nation's largest so-called non-profit health system and the largest Catholic health system in the world with 160,000 employees. Ascension Health, which operates 150 hospitals nationwide, has received at least \$211 million from the Trump administration's Department of Health and Human Services (HHS) according to a *New York Times* article, entitled, "Wealthiest Hospitals Got Billions in Bailout for Struggling Health Providers."

Under the terms of the bipartisan CARES Act, HHS has handed out \$72 billion in grants to the largest

hospital chains, even though they have been sitting on huge cash piles, and eventually plans to distribute more than \$100 billion more. Ascension Health, the supposed "non-profit," has \$15.5 billion in cash reserves, according to the *Times*, and "operates a venture capital fund and an investment advisory firm that helps other companies manage their money."

AMITA Health CEO Mark Frey earned \$2.8 million in 2017, an increase of 22 percent from the year before. Former Ascension boss CEO Anthony Tersigni racked up at least \$90 million in compensation since 2014, before retiring with a golden parachute last year.

At the same time, AMITA refuses to budge on its insulting wage offer to nurses. According to an INA negotiator who spoke to WSWs reporters this week, AMITA is demanding a wage freeze in the first year of a three-year contract, and a below inflation two percent raise in each of the last two years. Nurses are supposed to get two raises per year based on increasing years of experience and Cost of Living Allowance (COLA). "But AMITA has proposed zero COLA and just giving us years of experience raise in years two and three," the negotiator said.

And while both corporate-controlled parties handed trillions to Wall Street and the giant corporations in the CARES Act, the \$600 per week addition to unemployment benefits is set to run out in less than two weeks, threatening millions of unemployed workers, including striking AMITA nurses, with poverty.

The giant hospital chains have long opposed any reduction in patient-to-nurse ratios entirely due to cost reasons, although this has endangered the lives of both patients and health care workers.

"They do not want to hear anything about safe staffing", said Robyn, a striking nurse who spoke to the WSWs on the picket line. "Safe staffing means safety

for our patients. If we are inundated with one nurse to six or seven patients and they have high acuity that's insane.

"They were even having high ratios for COVID patients. It was supposed to be one to one and you are going in and out of these rooms and they are giving you three COVID patients and you have to suit up for individually cause you can't cross contaminate and wear the same gear in and out of these rooms and take care of the patients. That's a lot. They didn't want to give incentive pay for that. They gave minimal for that and if you didn't fully function as a COVID nurse and were just a runner they decide to only give you only \$2.50 extra when all along you thought you were going to get a bigger incentive."

Jackie, another nurse, added, "A big factor now is that if they don't extend the \$600 federal unemployment people are going to give in at some point. If they extend that then that will give everybody an incentive to stay out because they are getting close to the wage that they would be getting walking their floors. There are lots of single mothers, lots of different variables to take into consideration."

"We have all applied for unemployment," Robyn said. "But unemployment runs out at the end of the month, by July 25. That is when I think we will see more people—if we are still out here—more people will cross. AMITA is playing the waiting game because they really want to disband us."

Although they pay \$700 a year in union dues to the INA, the nurses said the union was not paying any strike benefits but was instead offering loans to striking workers. The nurses were upset with the contract that the INA brought back, with one saying, "Yes, in our last contract they gave in at the last minute too."

The INA has no strategy to win the strike. As one negotiator told the WSWS, "Either, we are locked out for another week, unless nurses decide to cross the picket line, or we vote yes on this contract and then we all go back."

Rather than expanding the struggle for safe staffing levels by spreading the strike to other sections of hospital and health care workers in Chicago and beyond, the union official said the INA and other unions were appealing to the Illinois state legislature to pass House Bill 2605, the "Safe Patient Limits Act" pushed by state Democrats, which would supposedly

hold hospitals in general accountable for staffing ratios.

This is a complete dead end for nurses and other health care workers. The Democratic Party, no more than the Republicans, will not take any steps that interfere with the profit interests of the giant hospital chains, insurance companies, pharmaceutical and medical device companies. On the contrary, President Obama's so-called health care reform demanded even more cost-cutting in the industry, which could only be accomplished through increasing the exploitation of nurses and other health care workers.

The COVID-19 pandemic and the criminal response of Trump and both corporate controlled parties make it clear that the needs of working people, including health care workers, can no longer be subordinated to corporate profit. With the pandemic already claiming more than 140,000 lives and nurses across Florida, Texas, Arizona and other states confronting the lack of PPE, ventilators and adequate staff, the fight for the social right to quality health care and decent conditions for providers is a matter of life and death.

That is why building a rank-and-file strike committee by Joliet nurses to expand their struggle to other sections of health care workers, teachers, industrial workers and others must be combined with a political struggle for socialism and the replacement of for-profit medicine with universal, free and high quality health care for all.

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